

Condition	Sex	Age	Diagnosis	Treatment
Control	Male	10 months	Herpes Simplex Virus (HSV) hepatitis	
Control	Male	15 months	Waterhouse-Friderichsen syndrome	
Control	Male	3 years	Acute Respiratory Distress Syndrome (ARDS)	
Control*	Male	10 years	Diffuse Intrinsic Pontine Glioma (DIPG)	Focal radiation to brainstem (only 4 fractions of therapy completed, 7.2 Gy total) without chemotherapy
Control	Male	25 years	Familial dilated cardiomyopathy status-post heart transplantation; Ischemic event	
Chemotherapy	Female	6 months	Medulloblastoma	Chemotherapy (no radiotherapy)
Chemotherapy	Male	3 years	Metastatic Neuroblastoma	Chemotherapy (VP-16, carboplatin, cyclophosphamide)
Chemotherapy	Male	3 years	Metastatic rhabdomyosarcoma	Chemotherapy (no radiotherapy)
Chemotherapy*	Male	3 years	Medulloblastoma	surgical resection of cerebellar lesion, no radiotherapy, and a chemotherapy regime including high-dose i.v. methotrexate (peak serum MTX measure at 82 uM), vincristine, cyclophosphamide, cisplatin, then at recurrence with intrathecal cytarabine, oral CCNU and etoposide (treated as per SJYC07, Robinson et al. 2018). Last MTX dose 3 months prior to death; last chemotherapy of any kind 1 month prior to death.
Chemotherapy	Female	26 years	Acute myelocytic leukemia (AML)	Chemotherapy (no radiotherapy)

Table S1, Related to Figure 1: Depletion of white matter oligodendroglial lineage cells in humans following early life chemotherapy treatment

Sex, age, diagnosis, and treatment upon death of human subjects for chemotherapy-exposed and age-matched controls. All tissue samples represent frontal cortex and subcortical white matter. *denotes the cases illustrated in Figure 1D in which treatment with high-dose MTX was well-documented. The details of the chemotherapy regimens for many of the cases shown in Figure 1A-C are incomplete due to limitations in available medical records.