

SUPPLEMENTAL METHODS

Samples and patients

MSCs were isolated from total marrow aspirations of CMML patients and patients with normal marrows (healthy donors) (10 ml of bone marrow in heparin lithium tubes). All patients signed an informed consent (CRB cession: 2019-02-07-C, BRIF: BB-0033-00069, Agreement: AC 2014-2094). CMML patients had not received any antitumor treatment at the time of marrow aspiration. Mononuclear cells were isolated through a density gradient (Ficoll, Eurobio) and magnetically sorted according to their expression of CD34 (AutoMACS Pro, Miltenyi Biotec). CD34 negative fraction was cultured and MSCs were isolated thanks to their adherence to plastic. Cells obtained after this process responded to MSCs definition, as >95% of cells expressed the markers CD90, CD73, CD105 but not hematopoietic markers (CD45), they adhered to plastic and had a trilineage differentiation ability into chondrocytes, osteoblasts and adipocytes (Krampera, Cytotherapy 2013). These different characteristics had previously been demonstrated by our team with this protocol of isolation and culture, and have not been tested again for this study (Meunier et al, Oncotarget 2018).

Monocytes were isolated from blood of CMML patients, patients with a chronic non-clonal monocytosis (20 ml of blood in heparine lithium tubes), and from Buffy coats of healthy blood donors. The classification in CMML or non-clonal monocytosis (post-inflammatory) was based on dysplastic features on bone marrow (for CMML) and on the threshold of 94,4% MO1 in the peripheral blood (Selimoglu-Buet et al, Blood 2015). Accumulation of classical monocytes defines a subgroup of MDS that frequently evolves into CMML (Selimoglu-Buet et al, Blood. 2017). Anonymous blood donors

26 (Regional Blood Bank, EFS Auvergne-Rhone-Alpes) who also volunteered to provide
27 blood for research purposes signed a form indicating that they do not preclude the use
28 of their sample for medical research (this procedure is in accordance with the
29 regulation in force in France ("Arrêté du 6 novembre 2006"; L. 1223-3 article of the
30 Public Health). CMML patients had not received any antitumoral treatment at the time
31 of blood uptake. Mononuclear cells were isolated through a density gradient (Ficoll,
32 Eurobio) and magnetically sorted according to their expression of CD14 (AutoMACS
33 Pro, Miltenyi Biotec). A flow cytometry analysis (FACSCanto II, Beckton Dickinson)
34 was performed after each cell sorting with CD3, CD14, CD16 markers (CD3-APC,
35 CD14-PE, Beckman Coulter; CD16-BV421, BD Biosciences). We obtained a cell
36 population with > 98% of cells positive for CD14, < 1% positive for CD3. Expression of
37 CD16 was variable according to Selimoglu-Buet D et al. (Blood 2015).
38 Cytologic analysis was performed by cytospin and May Grünwald Giemsa staining.
39 CD14⁺ fraction was cultured (cf below).

40 Normal hematopoietic stem cells were isolated from total marrow aspirations of healthy
41 donors (10 ml of bone marrow in heparine lithium tubes). Bone marrow from healthy
42 donors were collected by bone marrow aspiration before cardiac surgery after signed
43 consent and approval by our local ethical committee. CMML hematopoietic stem cells
44 were isolated from bone marrow of CMML patients. Mononuclear cells were isolated
45 through a density gradient (Ficoll, Eurobio) and magnetically sorted according to their
46 expression of CD34 (AutoMACS Pro, Miltenyi Biotec). CD34⁺ fraction was extracted
47 and frozen at -80°C in albumin + 20% DMSO. When needed, cells were thawed
48 following our local protocol with a viability > 90% after thawing.

49

50 **Cell culture**

51 All cells were cultured at 37°C with CO₂ 5%.
52 Culture medium for HL60 cells contained RPMI, Foetal Bovine Serum (FBS) 10%,
53 Glutamine 1%, penicillin/streptomycin 1% (Life Technologies, Paisley, UK).
54 Culture medium for MSCs contained DMEM, FBS 10%, Glutamine 1%,
55 penicillin/streptomycin 1%. Cells were expanded until 90-100% of confluence. EVs
56 were extracted when cells reached a confluence of 90-100% at the second passage.
57 Seventy-two hours before EVs extraction, MSCs were incubated in Exofree medium,
58 i.e. their usual culture medium deprived of FBS EVs through an overnight 100000g
59 ultracentrifuge. This process also participated to cell stimulation by depriving them of
60 some of FBS nutritive elements.
61 Monocytes were cultured in a serum-free medium containing RPMI and Glutamine 1%.
62 Serum deprivation was intentional to stimulate cell activation and vesiculation. Culture
63 flasks were coated with polyhydroxyethylmethacrylate (pHEMA, Sigma Aldrich, Saint
64 Louis, USA) to prevent adherence to plastic so that cells could be analyzed at the end
65 of the culture. At the end of the culture (H37-H40), a new cytopsin was performed as
66 well as a flow cytometry quantification of cell viability with AnnexinV-FITC and 7-AAD
67 (BD Biosciences) markers.
68 CD34⁺ cells (hereafter HSCs) were cultured in a medium containing Myelocult™
69 H5100 (Stemcell technologies) with 100 ng/mL of FLT3-ligand (Peprotech), 100 ng/mL
70 of Stem Cell Factor (SCF, Peprotech) and 50 ng/mL of Thrombopoietin (TPO,
71 Peprotech).

72

73 **EVs extraction**

74 EVs derived from MSCs were extracted after a 72-hours incubation in exosome-free
75 medium (Exofree medium). EVs derived from monocytes were extracted after 37 to 44
76 hours of incubation in serum-free medium.

77 Culture supernatant was collected and centrifuged successively (Supplemental Figure
78 1A): 800g for 10 minutes, 2 000g for 10 minutes, 10 000g for 30 minutes, and 100 000g
79 for 1 hour and 10 minutes in a fixed-angle rotor (70ti, Beckman Coulter) using Optima
80 L-60 Ultracentrifuge (Beckman Coulter). This is an adaptation of C. Théry's protocol
81 (Théry et al, Curr Protoc Cell Biol, 2006). The second 100 000g ultracentrifugation was
82 not done to increase the amount of EVs collected even though it probably implies a
83 higher protein contamination.

84 10 000g and 100 000g pellets were resuspended in PBS filtered at 0.22µm and
85 corresponded respectively to the collects of medium EVs (mEVs) and small EVs
86 (sEVs). NTA characterization and hemostasis experiments were performed on fresh
87 EVs.

88

89 **EVs characterization**

90 *Nanoparticle Tracking Analysis*

91 All EVs samples were analyzed by *Nanoparticle Tracking Analysis* on Nanosight
92 NS300 (Malvern, UK). This technique calculates the particles size and concentration
93 based both on light scattering and Brownian motion but does not provide any functional
94 data.

95 The same acquisition parameters (camera level 11, detection threshold 6) were used
96 all along the different experimentations and the focus was adapted to each sample to
97 improve the EVs discrimination. PBS used for rinses and dilutions had been filtered at
98 0.22µm to prevent small impurities to modify the results.

99 Two dilutions were tested for each sample EVs derived from MSCs and monocytes,
100 and repeated recordings were realized. For each sample dilution, the software records
101 a number of events and calculate the concentration according to the dilution and the
102 volume. Then we calculated final concentration as the mean of the concentrations of
103 each of the two dilutions, pondered on the number of events recorded by the
104 instrument.

105

106 **Western Blot**

107 EVs isolated and MSCs were washed in cold TBS (Bio-Rad, Hercules, CA, USA). **They**
108 **were resuspended in reducing Laemmli Buffer (Laemmli Sample Buffer with β -**
109 **mercaptoethanol) for Alix and Flotillin, or non-reducing Laemmli Buffer for CD63**
110 **(Laemmli Sample Buffer only).** Samples were heated at 60°C for 5 minutes and
111 separated on a SDS-PAGE gel (Any kD Precast Gels, Bio-Rad, CA, USA). Proteins
112 were transferred with Trans-Blot system (Bio-rad, Hercules, CA, USA) on nitrocellulose
113 membrane. Membrane was blocked in TBST (Bio-rad, Hercules, CA, USA) containing
114 3% of BSA (Merck) and incubated overnight at 4°C with primary antibody (Rabbit anti-
115 ALIX, ab76608 1/1000e, AbCam; Rabbit anti-CD63, ab216130 1/500, Abcam; Mouse
116 anti-Flotillin, 610820 1/1000e, BD, Mouse anti-Tissue Factor (anti human-CD142,
117 clone HTF-1), 16-1429-82 1/1000, eBioscience). After incubation, membrane was
118 washed three times in TBST for 15 minutes at RT. Membrane was incubated with the
119 HRP-conjugated secondary antibody (Goat Anti-Rabbit IgG-HRP, Jackson
120 ImmunoResearch, Goat Anti-mouse IgG-HRP, Jackson ImmunoResearch) during 1
121 hour at AT. After incubation, membrane was washed three time in TBST for 15 minutes
122 and imaged with ChemiDoc+ (Bio-rad, Hercules, CA, USA).

123

124

125 **Hemostasis**

126

127 *Plasma preparation*

128 Due to small amounts of thrombin generated with the commercial normal poor platelet
129 plasma initially used (CCN-10, Cryopep, Montpellier, France) and also to prevent a
130 systematic bias due to a single plasma lot, we switched to a single healthy donor
131 plasma prepared following guidelines (Lacroix R et al, JTH 2013) and then to a pool of
132 4 healthy donors plasmas (2 women and 2 men). Within less than two hours after blood
133 sampling, two successive centrifugations (2500g, 15 minutes, room temperature) were
134 performed, plasma was aliquoted in 1 ml fractions.

135

136 *Thrombin generation assay (TGA)*

137 Thrombin generation was measured using the Calibrated Automated Thrombogram
138 (CAT) initiated by automatically dispensing fluorogenic substrate (FluCa, Stago),
139 calibrated against the Thrombin Calibrator commercialized by Diagnostica Stago. Data
140 were analyzed with Thrombinoscope software (V5.0, Thrombinoscope BV), according
141 to Hemker's method (Hemker et al, 2003).

142 For each TGA, a positive control containing 0.5 pM of tissue factor and 2 μM of
143 phospholipids (PPP Reagent Low half diluted in PBS, Stago, France), and a negative
144 control containing 2 μM of phospholipids only (MP-Reagent half diluted in PBS, Stago)
145 were used.

146 For each MSCs culture we measured the thrombin generated by 0.2 million of cells,
147 115 million of mEVs half diluted in MP-Reagent and 115 million of sEVs half diluted in
148 MP-Reagent. EVs quantification was obtained thanks to NTA data.

149 For each monocytes culture, we measured the thrombin generated by 10 million of
150 mEVs or sEVs half diluted in MP-Reagent. The number of cells and EVs tested was
151 chosen based on the poorer sample.

152 20 μ l of controls (FT 0.5pM, MPR) or samples (cells, mEvs or sEvs) were mixed with
153 80 μ l of plasma in a 96-well plate (Immulon 2HB, Thermo Scientific).

154 For each test, we analyzed statistically the lag time (minutes) and the peak of thrombin
155 generated (nM).

156 Some thrombin generation assays were conducted with a normal plasma compared
157 with a factor VII-deficient lyophilized plasma (defVII-PPP, Diagnostica Stago, France).

158 Other thrombin generation assay on EVs were performed with or without an inhibiting
159 anti-tissue factor antibody at a final concentration of 8 μ g/ml (anti human-CD142, clone
160 HTF-1, eBioscience).

161 In order to overcome the plasma change variability, we normalized the lag time and
162 the thrombin peak on the positive control (TF 0.5 pM). Results are thus presented as
163 fold changes between samples and controls.

164

165 *Fibrinography*

166 This new approach of coagulation enables an analysis of the coagulation phase but
167 also the fibrinolysis phase when adding tissue Plasminogen Activator (t-PA) along with
168 tissue factor at the reaction onset (Yeromonahos et al, Biophys J 2010; Yeromonahos
169 et al, Arterioscler Thromb Vasc Biol 2012; Dassi et al, Hemasphere 2019 *In press*).

170 The model was developed from fibrin physical properties of light diffusion to determine
171 the internal nanostructure of fibrin fibers during the clot formation. This structural
172 analysis enables the calculation of the mean number of protofibrils per fibrin fiber
173 according the time.

174

175 With Fibrinography, in a normal plasma, we can see an increase of the number of
176 protofibrils per fibrin fiber during the clot formation and a decreasing number during
177 fibrinolysis.

178 Fibrinography data were recorded as triplicates on a spectrophotometer
179 (SPECTROstar Omega, BMG Labtech, Champigny sur Marne, France).

180 80 μ l of normal plasma (CCN-10, Cryopep, Montpellier, France) were added to 20 μ l
181 of controls or samples in a 96-well plate (Immulon 2HB, Thermo Scientific).
182 Fibrinography test was triggered by an automatic injection of 20 μ L of Fluobuffer
183 (calcium chlorure solution 100 mM, Stago, France). Optic density evolution was
184 followed every 20 to 22 seconds.

185 Calculation of fibrin nanostructure was realized based on Yeromonahos equation
186 (Yeromonahos, Biophys J 2010; Dassi et al, Hemasphere 2019 *In press*). For each
187 test the “clot lysis time” was extracted. It corresponds to the delay between the 50%
188 peak time and the second value of 50% of the peak during the fibrinolysis phase
189 (Figure 3A). The coagulation time and the T_{Np97} were also analysed. They correspond
190 respectively to the time of the beginning of coagulation and the time at 97% of clot
191 formation.

192 For each experiment, a positive coagulation control containing 0.5 pM of tissue factor
193 and 2 μ M of phospholipids (PPP Reagent Low half diluted in PBS, Stago, France), a
194 positive fibrinolysis control containing 0.5 pM of tissue factor, 2 μ M of phospholipids
195 and 80 ng/mL of Actilyse (t-PA, Boehringer Mannheim, Germany) were tested.

196 For each MSCs, we measured the impact on coagulation and fibrinolysis of 115 million
197 of mEVs or sEVs half diluted in TF, MP-Reagent and t-PA. The number of cells and

198 EVs tested was normalized based on the poorer sample and is identical to the TGA
199 experiments. EVs quantification was obtained thanks to NTA data.

200

201 **Transmission Electron Microscopy: evidence of TF on sEVs membranes**

202 sEVs were used fresh (i.e directly after extraction) for electron microscopy assay and
203 resuspended in PBS. Grids were coated with carbon the day before the assay. Vesicles
204 were adsorbed at room temperature during 5 minutes on carbon grids. Grids were put,
205 on their coated side, on a 10 μ L drop containing sEVs previously filled on a parafilm
206 sheet. sEVs were fixed 5 minutes with a PBS+PFA 4% fixing solution. After washing
207 and blocking steps by transferring the grids from one drop to another, sEVs were
208 incubated with the anti-TF rabbit polyclonal primary antibody (1/10, ab104513, AbCam)
209 during 30 minutes. Then, they were washed in 1mg/mL PBS/BSA solution to saturate
210 non-specific sites and incubated with the gold labelled anti-protein A rabbit monoclonal
211 secondary antibody (PAG15 1/50, Utrecht Medical School) for 1 hour. Then, grids were
212 successively washed in PBS for 5 minutes and in water for 10 minutes. Finally, grids
213 were transferred onto drops of methylcellulose 2%/uranyl acetate 5% solution (in 9/1
214 proportions), incubated on ice and in dark for 10 minutes. Grids were collected with a
215 loop and dried on Whatman paper and stored for at least 2 hours before reading on
216 the microscope. Grids have been observed with a transmission electron microscope
217 (JEOL1200 EX) with a digital camera (VELETA).

218

219 **MSCs and monocytes supernatant co-culture**

220 CMML monocytes were cultured during 48 hours in RPMI medium only complemented
221 with Glut 1%. Afterwards, monocytes were pelleted and supernatant recovered to

222 eliminate cells and others debris by serial centrifugations (800g, 10 minutes; 800g, 10
223 minutes; 2000g, 10minutes).

224 Firstly, 0.2 million MSCs issued from healthy donor were cultured with monocytes
225 supernatant and 0.2 million MSCs of the same patient were cultured with a medium
226 containing RPMI and Glut 1% during 48 hours. Afterwards, hemostasis assays were
227 performed on MSCs.

228 In a second time, five culture conditions were tested. For each, 0.2 million MSCs issued
229 from healthy donor were cultured with different types of supernatant during 48 hours:
230 1) Medium alone 2) Monocytes supernatant 3) Monocytes supernatant ExoFree
231 (ultracentrifuged twice to eliminate EVs) 4) The pellet after first ultracentrifugation
232 corresponding to mEVs resuspended in Medium 5) The pellet after the second
233 ultracentrifugation corresponding to sEVs resuspended in Medium 6) mEVS and sEVs
234 isolated from CMML monocytes SN in the same time. Both mEVs and sEVs were
235 characterized with Nanoparticle Tracking Analysis and counted, so that the same
236 amount of mEVs and sEVs were putted in culture medium (fixed to 10 million EVs as
237 for previous experiments). Afterwards, hemostasis assays were performed on MSCs.
238 For each condition, TGA was performed on approximately 0.025 million MSCs, in
239 replicates with or without an inhibiting anti-tissue factor antibody (anti human-CD142,
240 clone HTF-1, eBioscience) at a final concentration of 8 µg/ml.

241

242 **HSCs and sEVs co-culture**

243 ***Incorporation of CMML sEVs into HD HSCs***

244 To demonstrate the transfer of sEVs produced by CMML MSCs into HSCs, we labelled
245 sEVs with 2 µM of Vybrant DiD cell-labeling solution (Molecular Probes, Thermo Fisher
246 Scientific France) during 1 hour at 37°C. Labelled sEVs were then washed with PBS

247 and recovered by 100 000 g ultracentrifugation. They were then applied on HSCs. For
248 this experiment, HSCs were thawed, according to our protocol, only few hours before
249 co-culture with sEVs. Cells were counted and seeded on chambered cell culture Slides
250 equivalent to 96 wells culture plate (Nunc Lab-Tek, Sigma, France) to allow direct
251 microscope observation and to optimize cells viability. The medium used was
252 Myelocult H5100 (StemCell technologies) with 100 ng/mL of FLT3-ligand (Peprotech),
253 100 ng/mL of Stem Cell Factor (SCF, Peprotech) and 50 ng/mL of Thrombopoietin
254 (TPO, Peprotech) and 100 ng/mL of IL-3 (Miltenyi). sEVs were applied on cells at the
255 rate of 10^5 sEVs per HSC (we have set this concentration based on previous assays
256 to optimize the visualization of the penetration of Evs in HSCs). After 18 hours, 1 μ l of
257 anti-CD34-FITC was added to wells containing HSCs for imaging on live cells by
258 confocal microscopy (63x/1.4 oil immersion objective, Zeiss Dynascope LSM710 NLO
259 from Institute for Advanced Biosciences in Grenoble). Images were taken at the level
260 of the equatorial planes of the cells.

261

262 ***Thrombin generation assay (TGA) of HSCs***

263 CMML or HD HSCs were thawed according to our protocol. After thawing, HSCs were
264 counted and cultured for 48h in 96 wells plate. Thereafter, they were counted again
265 and co-cultured without or with sEVs (derived from CMML or HD MSCs) at the rate of
266 1.10^5 sEVs per HSCs during 48h. They were cultured in a medium containing
267 Myelocult™ H5100 (Stemcell technologies) with 100 ng/mL of FLT3-ligand
268 (Peprotech), 100 ng/mL of Stem Cell Factor (SCF, Peprotech) and 50 ng/mL of
269 Thrombopoietin (TPO, Peprotech).

270 Afterwards, cells were harvested and hemostasis assays were performed with or
271 without an inhibiting anti-tissue factor antibody at a final concentration of 8 µg/ml (anti
272 human-CD142, clone HTF-1, eBioscience).

273

274 ***Proliferation-Thymidine incorporation***

275 CMML or HD HSCs were thawed and counted according to our protocol. They were
276 co-cultured with or without sEVs (derived from HD or CMML MSCs) at the rate of 1.10^5
277 sEVs per HSCs. For condition conditions with HTF-1, sEVs were previously incubated
278 with the antibody during 1 hour before to be added on HSCs. During co-culture, HSCs
279 were cultured in a medium containing Myelocult™ H5100 (Stemcell technologies) with
280 100 ng/mL of FLT3-ligand (Peprotech), 100 ng/mL of Stem Cell Factor (SCF,
281 Peprotech) and 50 ng/mL of Thrombopoietin (TPO, Peprotech), in triplicates in 96
282 round-bottom wells plate during 6 days.

283 After 6 days of culture, 1µCi/well ³H-[methylthymidine] was added for the last 16-18
284 hours. Cells were collected with a Filtermate 196 multiple harvester (Packard Inc,
285 Prospect, Ct) and thymidine incorporation was measured in a TopCount liquid
286 scintillation counter (Packard Inc).

287

288 **Statistics**

289 Statistics were made with bilateral unpaired or paired t-test on Graphpad Prism5
290 software (<http://www.graphpad.com/scientific-software/prism/>). Results are expressed
291 as mean ± SEM. Spearman test was performed to study the correlation between
292 CMML biological characteristics and EVs PCA. Statistical significance was determined
293 by a p-value ≤ 0.05. Significance of the test: * ≤0.05, ** ≤0.005, *** ≤0.0005, ****
294 ≤0.0001.

296

297 SUPPLEMENTAL FIGURES

298

299 **Supplemental Table 1– Patients and samples**

300 CMML: chronic myelomonocytic leukemia, HD: healthy donor, MSCs: mesenchymal
301 stromal cells, HSCs: hematopoietic stem cells, TGA: Thrombin Generation Assay.
302 EVs: extracellular vesicles

303

304 **Supplemental Table 2 – Correlation between CMML biological characteristics
305 and EVs PCA**

306 CMML: chronic myelomonocytic leukemia, HD: healthy donor, HSCs: hematopoietic
307 stem cells, SN: supernatant, mEVs: medium extracellular vesicles, sEVs: small
308 extracellular vesicles.

309 Spearman test was performed. Statistical significance was determined by a p-value
310 ≤ 0.05 .

311

312

313 **Supplemental Figure 1 – Characterization of sEVs**

314 CMML: chronic myelomonocytic leukemia, HD: healthy donor, MSCs: mesenchymal
315 stromal cells, SN: supernatant, mEVs: medium extracellular vesicles, sEVs: small
316 extracellular vesicles

317 **A** – sEVs extraction in culture supernatant (SN) with an adaptation of C. Théry's
318 protocol.

319 **B** – sEVs visualization by electron microscopy. **Two small EVs of 67 and 80nm**
320 **respectively with the typical cup shape appearance.**

321 Observation was made on transmission electron microscope (JEOL1200 EX) with a
322 digital camera (VELETA), G=100 000, at room temperature.

323 **C** – Western blot analysis of HD or CMML MSCs, mEVs and sEVs showing the
324 expression of Flotillin (48 kDa), Alix (100 kDa for the monomeric form and 200 kDa for
325 dimeric form) and CD63 (26-50 kDa).

326 MSCs were used as positive control and Exofree medium as negative control.

327 CD63 is a glycoprotein and an EVs tetraspanin well-known marker. It shows variable
328 aspect on depending on the cell and EVs because of its different N-linked glycosylation
329 sites. Therefore, it can have the aspect of a smear spanning from 26kDa to 50kDa
330 according to its glycosylation status.

331

332 **Supplemental Figure 2 – Monocytes isolation and culture (CMML patient)**

333 CMML: chronic myelomonocytic leukemia

334 **A** – Cytospin of CD14⁺ fraction after cell sorting.

335 Optic microscopy, May Grünwald Giemsa staining, G=40, at room temperature.

336 **B** – Flow cytometry characterization of CD14⁺ fraction after cell sorting.

337 **C** – Cytospin of CD14⁺ fraction after 40h of incubation with serum deprivation.

338 Optic microscopy, May Grünwald Giemsa staining, G=40, at room temperature.

339 **D** – Flow cytometry characterization of apoptosis and necrosis after 40h of incubation
340 with serum deprivation.

341

342 **Supplemental Figure 3 – Co-culture HSCs with sEVs from HD and CMML HSCs**
343 **without or with anti-HTF-1 antibody.**

344 CMML: chronic myelomonocytic leukemia, HD: healthy donor, HSCs: hematopoietic
345 stem cells, SN: supernatant, mEVs: medium extracellular vesicles, sEVs: small
346 extracellular vesicles, TF: Tissue Factor, TGA: Thrombin Generation Assay.
347 Lag times are expressed as fold changes of the lag time obtained with positive control
348 (TF 0.5 pM).
349 The negative control used was MPR 0.5. Any thrombin generated after corresponded
350 to contact phase activation.
351 Experiments were performed without or with a blocking anti TF antibody HTF-1 at the
352 final concentration of 8µg/ml.
353 Significance of the test: * ≤0.05, ** ≤0.005, *** ≤0.0005, **** ≤0.0001
354 **A** – TGA results performed with or without HTF-1 and after HD HSCs and sEVs co-
355 culture.
356 **B** – HSCs proliferation assay results performed with or without HTF-1 and after HSCs
357 co-culture with sEVs.
358

Supplemental Table 1

	demography			disease characteristics							Cells utilisation	EVs procoagulant activity			
	age	sex	bone marrow karyotype	molecular biology	blood %MO-1	Marrow myeloblasts (%)	Marrow monocytes (%)	peripheral monocytes (G/L)	CMML type (0-1-2)	Fold change Lagtime mEVs		Fold change Lagtime sEVs	Fold change Lagtime Evs		
CMML MSCs (n=5)	patient 1	76	M	46 XY del (13)(q13q21)(3)/46 XY (17)	ND	ND	1,5	6	3.2	1	TGA on MSCs and EVs collect	0,5	0,3	0,4	
	patient 2	66	F	46 XX (20)	TET2	99,4	8	14	3.5	2		0,4	0,4	0,4	
	patient 3	68	M	46 XY (20)	ND	ND	5,5	2	13.7	0		0,5	0,3	0,4	
	patient 4	90	F	46 XX (20)	ND	90	1,5	14,5	1.5	2		0,7	0,5	0,6	
	patient 5	92	F	46 XX (20)	ND	87	5,5	4	1.4	0		0,3	0,5	0,4	
HD MSCs (n=8)	patient 6	61	F	ND	ND	ND									
	patient 7	74	M	ND	ND	ND									
	patient 8	68	M	46 XY (20)	ND	ND									
	patient 9	53	M	ND	ND	72									
	patient 10	40	M	ND	ND	ND									
	patient 11	64	M												
patient 12	57	F	cardiac surgery patient												
patient 13	61	M	cardiac surgery patient												
CMML monocytes (n=13)	patient 14	74	M	47, XY, +14(18)/46, XY(2)	ND	82	2	9,5	1.3	2	TGA on EVs monocytes	0,1	0,2	0,2	
	patient 15	84	F	46 XX (20)	ND	91	4,5	8	1.1	1		0,3	0,3	0,3	
	patient 16	78	M	46 XY (20)	ASXL1, JAK2, TET2	94.4	2,5	14	3,2	2		0,2	0,3	0,2	
	patient 17	84	M	46 XY (20)	SRSF2, TET2	97,5	1	16	2.3	2		0,3	0,5	0,4	
	patient 18	74	M	46 XY (20)	ND	75.6	1,5	7,5	1.4	1		0,6	0,7	0,7	
	patient 19	85	F	46 XX (20)	CBL, SRSF2, TET2	81.5	1,5	10,5	1.3	2		0,7	1,0	0,8	
	patient 20	74	M	47, XY, +14(18)/46, XY(2)	ND	82	2	9,5	1.3	2		0,2	0,2	0,2	
	patient 21	67	F	46 XX (20)	TET2	72	8	16,5	3.5	2	0,2	0,4	0,3		
	patient 22	79	F	45,X,-X(20)	ND	94,6			1.91						
	patient 23	81	M	46 XY (20)	ND	93.1			1.8						
patient 24	84	M	45,X,-Y(20)	ND	96.7			1.8							
Reactional monocytes (n=4)	patient 25	58	F	46 XX (20) t(X;2)(q21;q23)(20)	ND	89			2.8		Co-culture with HD MSCs				
	patient 26	85	M	45, X, -Y (20)	ND	67			3.9						
	patient 27	82	F	46 XX (20)	ND	55.1			0.89						
	patient 28	68	M	ND	ND	65.7			0.8						
HD monocytes (n=1)	patient 29	52	F	ND	ND	78			1		TGA on EVs monocytes				
	patient 30	87	M	45,X,-Y(6)/46 XY (14)	ND	40.8			0.81						
CMML HSCs (n=5)	patient 31	unknown (anonymous blood donor patient)										Co-culture with sEVs			
patient 32	77	M	46 XY (20)	ND	84			0.3							
patient 33	75	M	46 XY (20)	ND	85			1.4							
patient 34	93	F	46 XX (20)	ND	80			1.3							
patient 35	67	F	46 XX (20)	TET2	72			3.5							
HD HSCs (n=6)	patient 36	58	F	46 XX (20) t(X;2)(q21;q23)(20)	ND	89			2.8		Co-culture with sEVs				
	patient 37	75	M	ND	ND	88			1.1						
	patient 38	81	M	45,X,-Y(7)/46 XY (13)	ND	91			0.3						
	patient 39	77	F	ND	ND	73			0.5						
	patient 40	61	M	cardiac surgery patient											
	patient 40	83	F	ND	ND	62			0.4						
patient 40	83	F	ND	ND	62			9.4							

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360

361

Supplemental Table 2

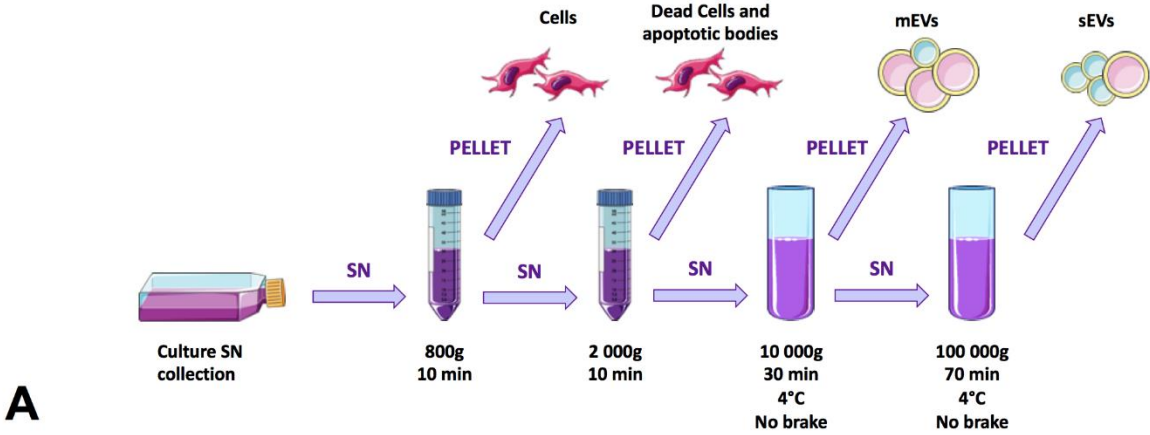
		Statistical analysis			
		Marrow myeloblasts (%)	Marrow monocytes (%)	Blood monocytes (G/L)	CMML type (0-1-2)
CMML MSCs Evs (Fold change lagtime)	mEVs	r=-0,703	r=0,4104	r=-0,0513	r=0,4056
		p=0,2333	p=0,5000	p=>0.9999	p=0,6000
	sEVs	r=0	r=0,4743	r=-0,9487	r=0,25
		p=>0.9999	p=0,4667	p=0,0667	p=0,8667
	EVs	r=-0,559	r=0,7071	r=-0,7071	r=0,559
		p=0,6000	p=0,4000	p=0,4000	p=0,8000
CMML Monocytes EVs (Fold change lagtime)	mEVs	r=-0,5138	r=-0,3273	r=-0,3119	r=-0,4025
		p=0,2413	p=0,4778	p=0,4976	p=0,4762
	sEVs	r=-0,5455	r=0,01802	r=0,09091	r=-0,07977
		p=0,2099	p=0,9889	p=0,8468	p=0,9524
	EVs	r=-0,5688	r=-0,1637	r=-0,1743	r=-0,2415
		p=0,1968	p=0,7254	p=0,7016	p=0,6667

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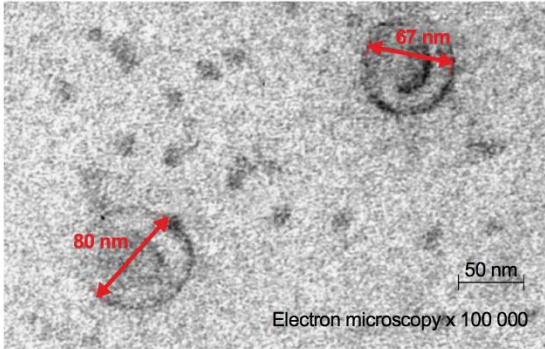
363

Supplemental Figure 1

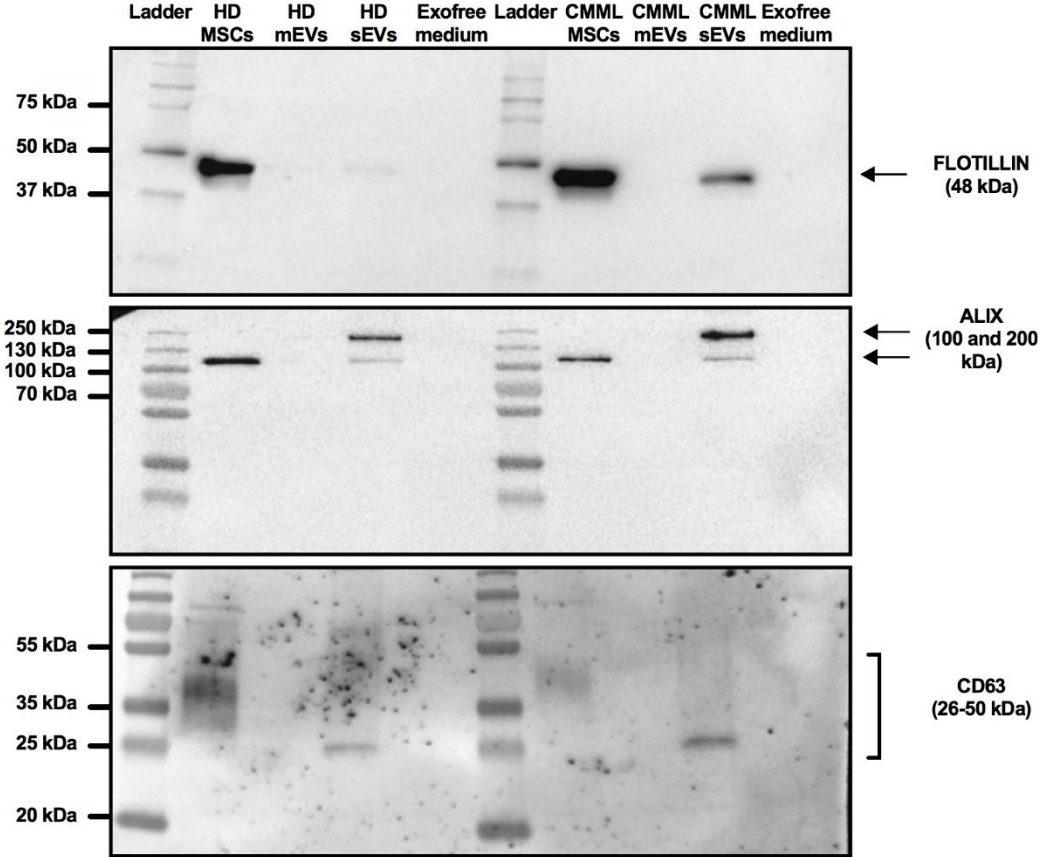
Differential ultracentrifugation: C.Thery's protocol adaptation



A

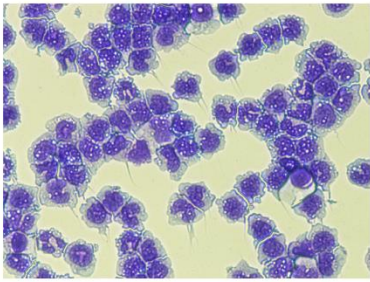


B

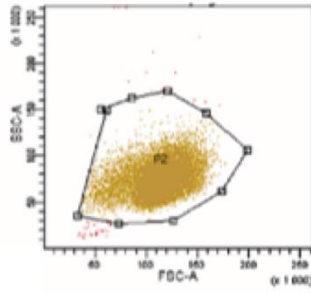


C

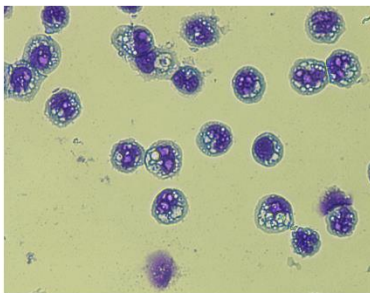
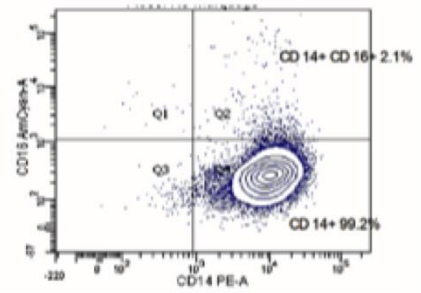
Supplemental Figure 2



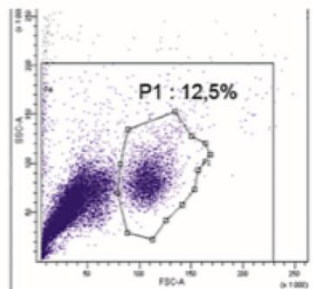
A



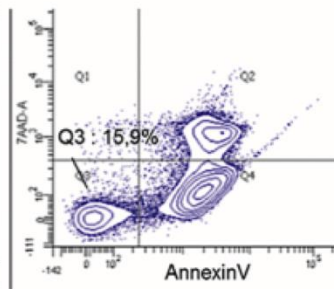
B



C

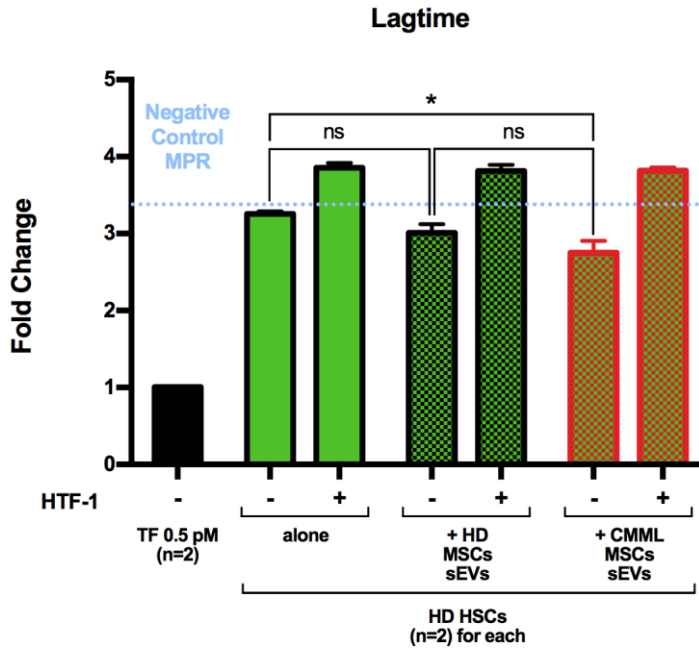


D

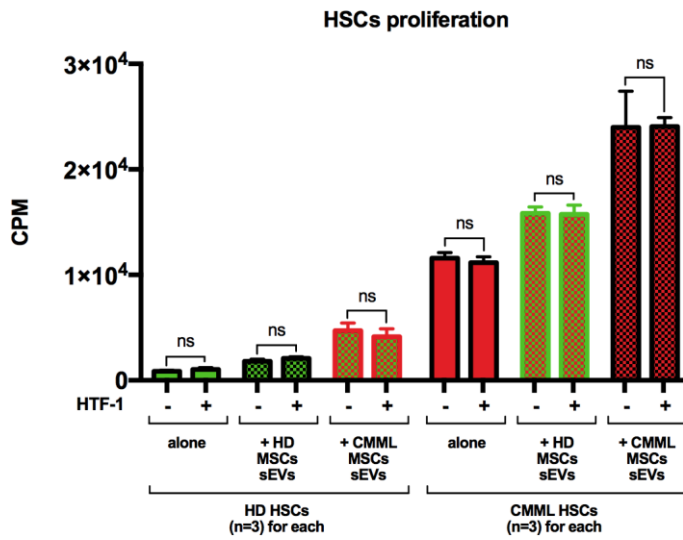


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Supplemental Figure 3



A



B