

Ribonucleotide reductase inhibitors suppress SAMHD1 ara-CTPase activity enhancing cytarabine efficacy

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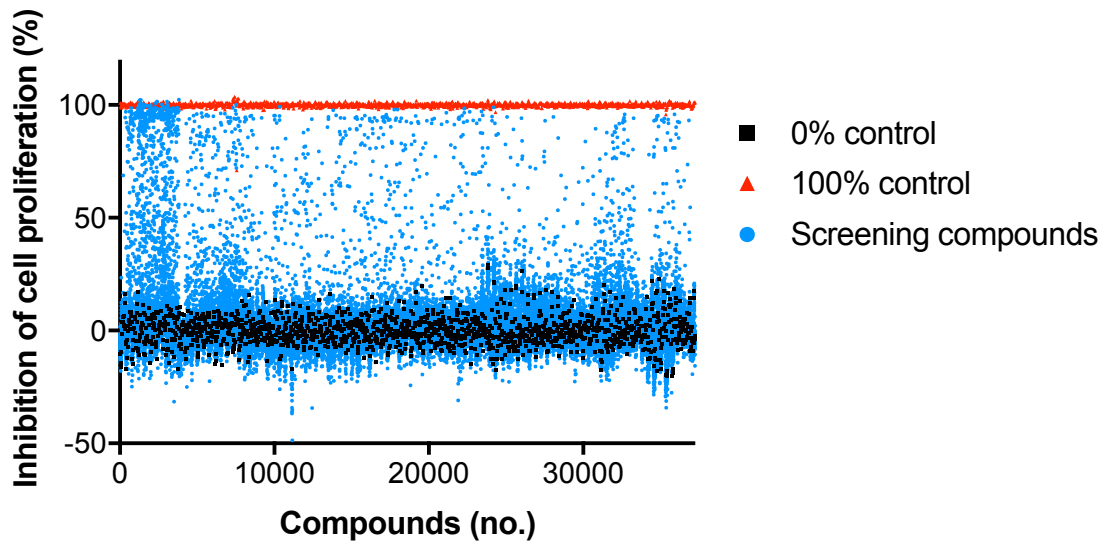
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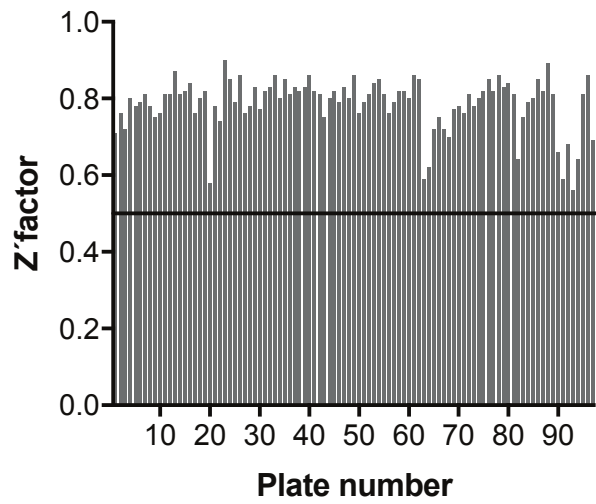
Table S4 | Summary of clinical studies combining irreversible inhibitors of ribonucleotide reductase with ara-C

Supplementary References

A



B



C

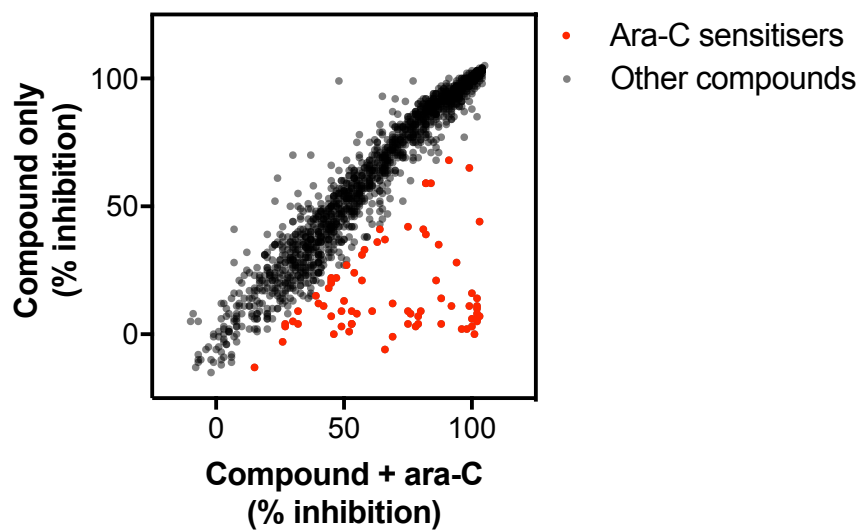


Figure S1 | Phenotypic screen for SAMHD1-dependent ara-C sensitisers

- A)** SAMHD1^{+/+} THP-1 cells in the presence of ara-C at an EC₁₀ were incubated with a one of 33'467 compounds for 72 h before determining the inhibition of cell proliferation using an ATP-release assay. Percentage of cell proliferation inhibition is indicated by blue circles for compounds, black squares for negative controls, and red triangles for positive controls. For details see **Appendix Supplementary Methods**.
- B)** Z' factors for the phenotypic screen per 384-plate. Z' factors were determined as described before (Zhang et al, 1999). Black line indicates a Z' factor of 0.5.
- C)** Approximately 1'600 compounds that inhibited cell proliferation of THP-1 SAMHD1^{+/+} cells in (A) with at least 30% were re-tested the absence or presence of ara-C at an EC₁₀. Grey dots indicate compounds without apparent sensitisation to ara-C whereas red dots indicate compounds that sensitised cells to ara-C.

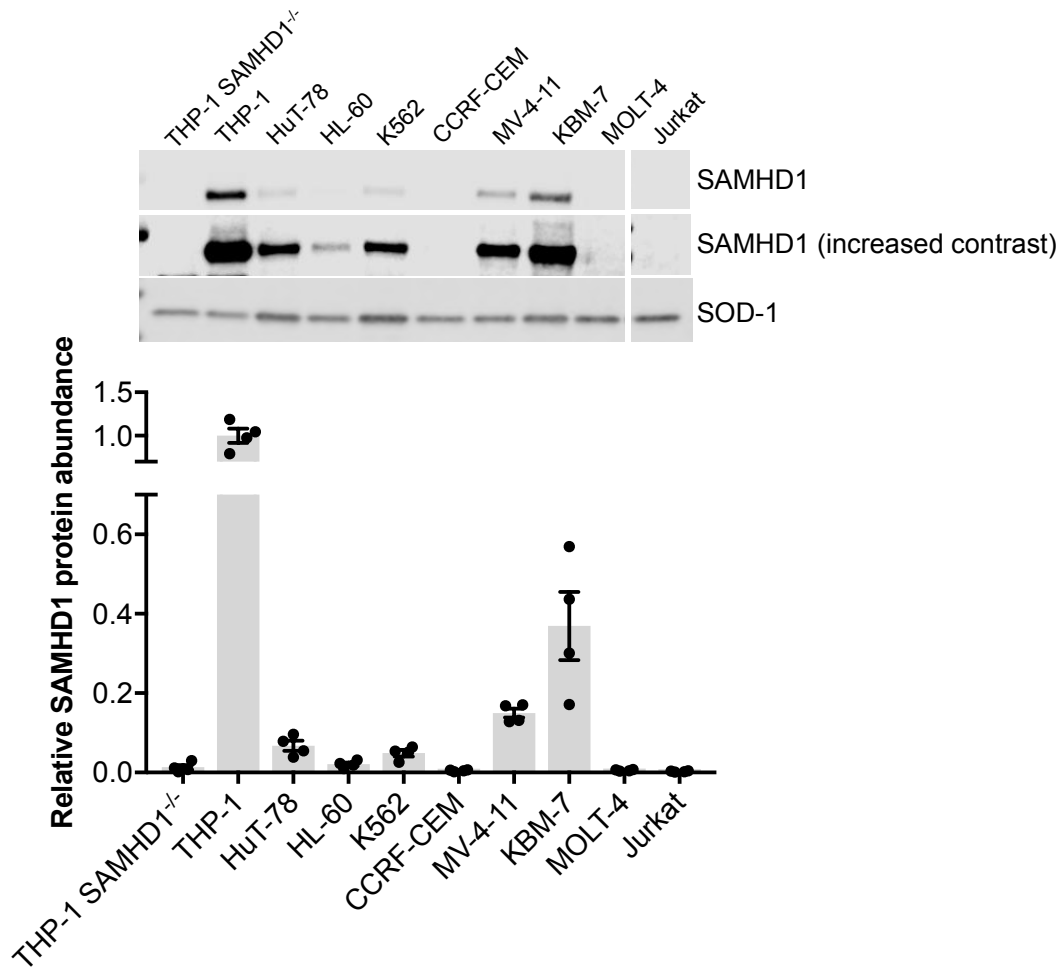


Figure S2 | SAMHD1 expression in cell line panel

Western blot analysis of SAMHD1 protein abundance in a panel of haematological cancer cell lines. SAMHD1 protein levels, relative to SOD-1 and normalised to THP-1, from four independent experiments are plotted. Error bars indicate s.e.m.

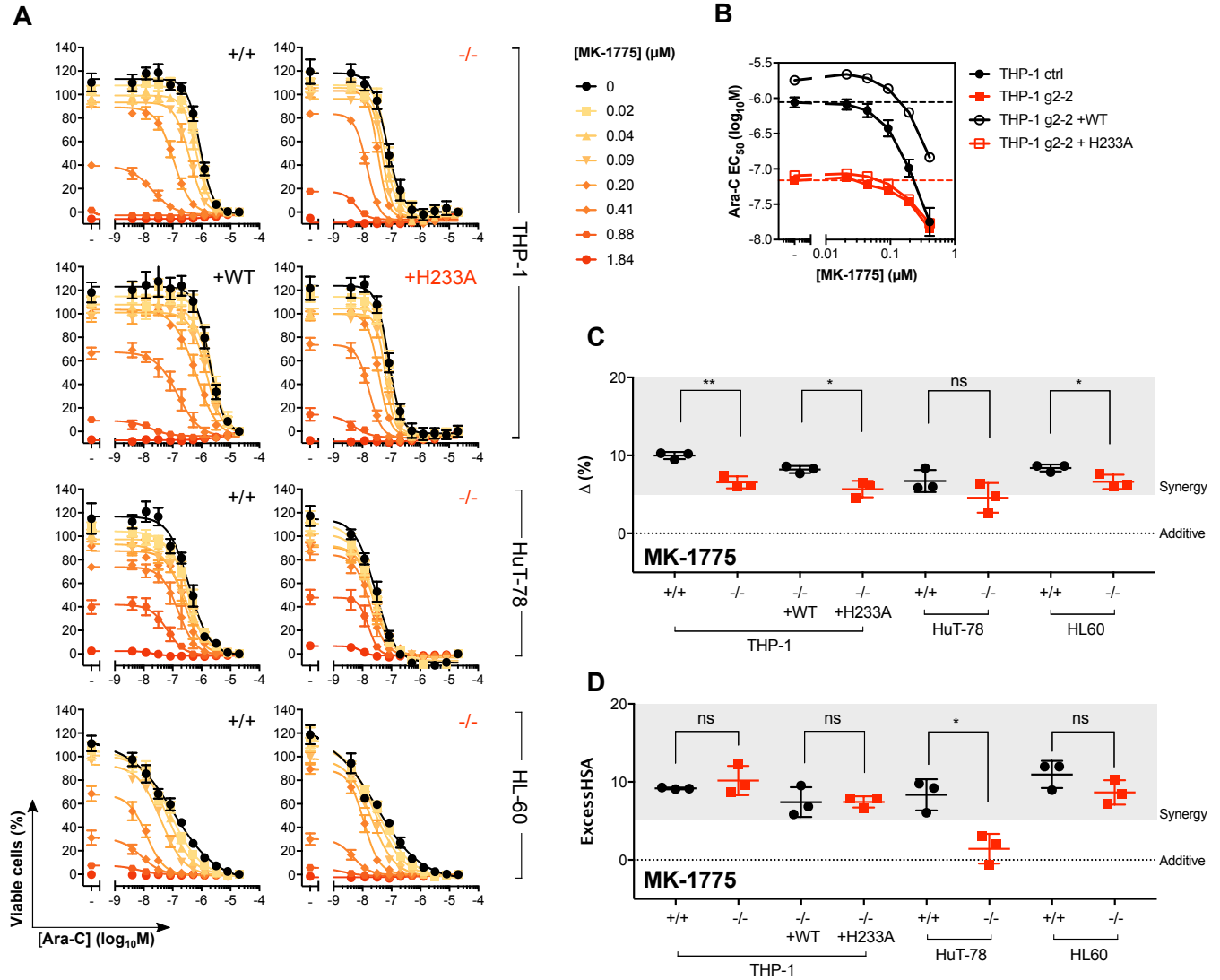


Figure S3 | Wee1 inhibitor, MK-1775, synergises with ara-C in a SAMHD1-independent manner

- A)** Proliferation inhibition analysis of ara-C and MK-1775 combination treatment in SAMHD1-proficient ($^{+/+}$), deficient ($^{-/-}$) and rescue (WT, wild-type; H233A, catalytic-dead) cell line pairs. Error bars indicate s.e.m. of 3 independent experiments each performed in duplicate.
- B)** Half-maximal effective concentration (EC_{50}) values for ara-C plotted as a function of MK-1775 concentration in SAMHD1-proficient ($^{+/+}$), deficient ($^{-/-}$) and rescue (WT, wild-type; H233A, catalytic-dead) THP-1 cell line pairs. Ara-C EC_{50} values for SAMHD1 $^{+/+}$ and SAMHD1 $^{-/-}$ THP-1 cells in the absence of MK-1775 is indicated by the black and red dotted line, respectively. Error bars indicate s.e.m. of three independent experiments each performed in duplicate.
- C)** Drug synergy plots for ara-C and MK-1775 in the SAMHD1-proficient ($^{+/+}$), deficient ($^{-/-}$) and rescue (WT, wild-type; H233A, catalytic-dead) cell line pairs. Zero, >0 , or <0 corresponds to additive, synergy, or antagonism, respectively, whilst >5 indicates strong synergy. Each data point indicates an average delta score from a single dose-response matrix experiment performed in duplicate. The horizontal line and the error bars indicate the mean and s.d., respectively, statistical significance was determined using a two-tailed unpaired t -test: ns, not significant, $P \geq 0.05$; *, $P < 0.05$; **, $P < 0.01$.
- D)** Drug synergy plots for ara-C and MK-1775 in the SAMHD1-proficient ($^{+/+}$), deficient ($^{-/-}$) and rescue (WT, wild-type; H233A, catalytic-dead) cell line pairs. Zero, >0 , or <0 corresponds to additive, synergy, or antagonism, respectively, >5 indicates strong synergy. Each data point indicates an average excess HSA synergy score from a single dose-response matrix experiment performed in duplicate. The horizontal line and the error bars indicate the mean and s.d., respectively, statistical significance was determined using a two-tailed unpaired t -test: ns, not significant, $P \geq 0.05$; *, $P < 0.05$.

Data information: Detail of statistical testing in (C): For THP-1 $^{+/+}$ vs $^{-/-}$, $n = 3$, $P = 0.0027$, $t = 6.634$, $df = 4$; THP-1 WT vs H233A, $n = 3$, $P = 0.0194$, $t = 3.782$, $df = 4$; HuT-78 $^{+/+}$ vs $^{-/-}$, $n = 3$, $P = 0.1918$, $t = 1.569$, $df = 4$; HL-60 $^{+/+}$ vs $^{-/-}$, $n = 3$, $P = 0.0399$, $t = 3.002$, $df = 4$. Details of statistical testing in (D): For THP-1 $^{+/+}$ vs $^{-/-}$, $n = 3$, $P = 0.4020$, $t = 0.9366$, $df = 4$; THP-1 WT vs H233A, $n = 3$, $P = 0.9851$, $t = 0.01989$, $df = 4$; HuT-78 $^{+/+}$ vs $^{-/-}$, $n = 3$, $P = 0.0123$, $t = 4.332$, $df = 4$; HL-60 $^{+/+}$ vs $^{-/-}$, $n = 3$, $P = 0.1654$, $t = 1.695$, $df = 4$.

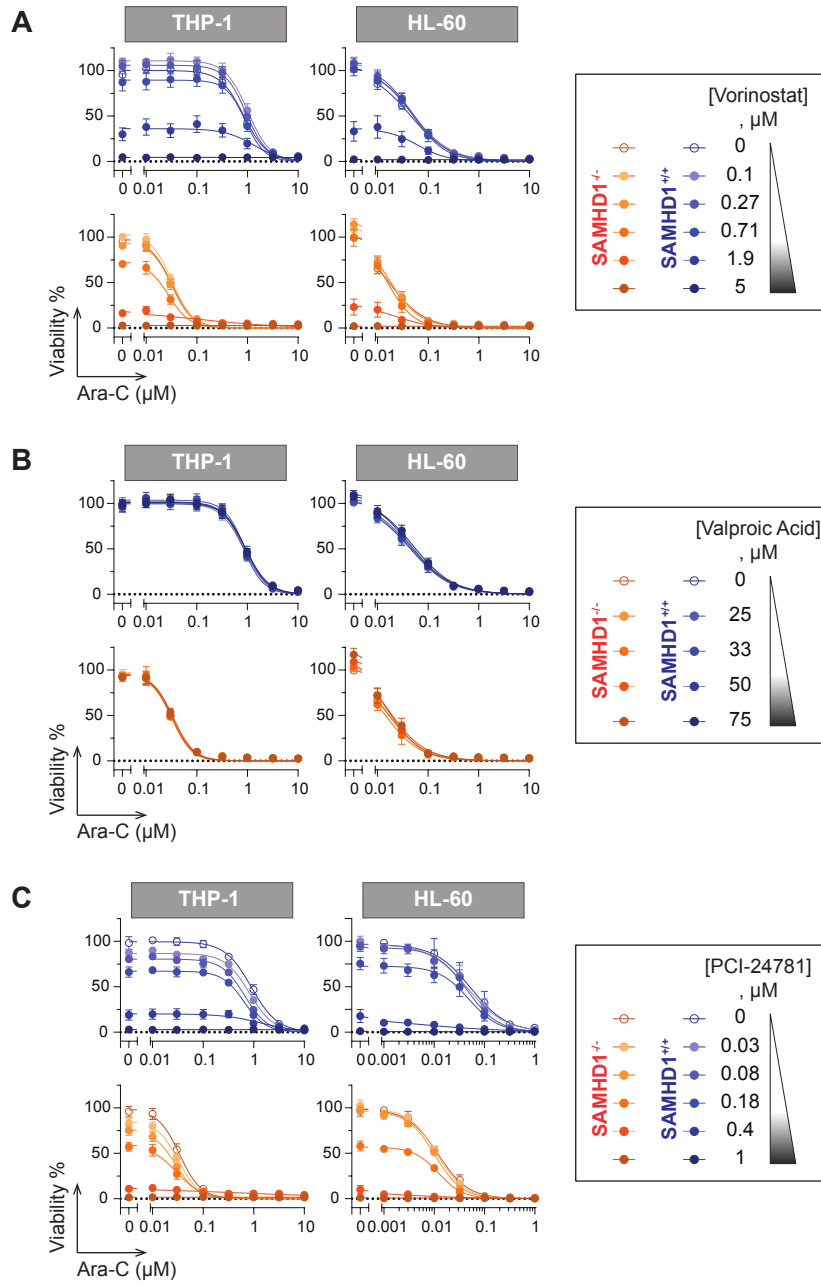


Figure S4 | HDAC inhibitors did not sensitise cells to ara-C in a SAMHD1-dependent manner

SAMHD1-proficient (^{+/+}) or -deficient (^{-/-}) THP-1 or HL-60 cells were treated with a dose-response matrix composed of ara-C and an HDAC inhibitor, either vorinostat (A), valproic acid (B) or PCI-24781 (C). Four days post-treatment, cell viabilities were assayed using resazurin reduction viability assay.

Data information: Cell viability percentages (%) were calculated by normalizing to DMSO-treated controls. Mean viability % \pm s.e.m. of $n = 2-3$ were shown with viability curves (non-linear regression, GraphPad Prism).

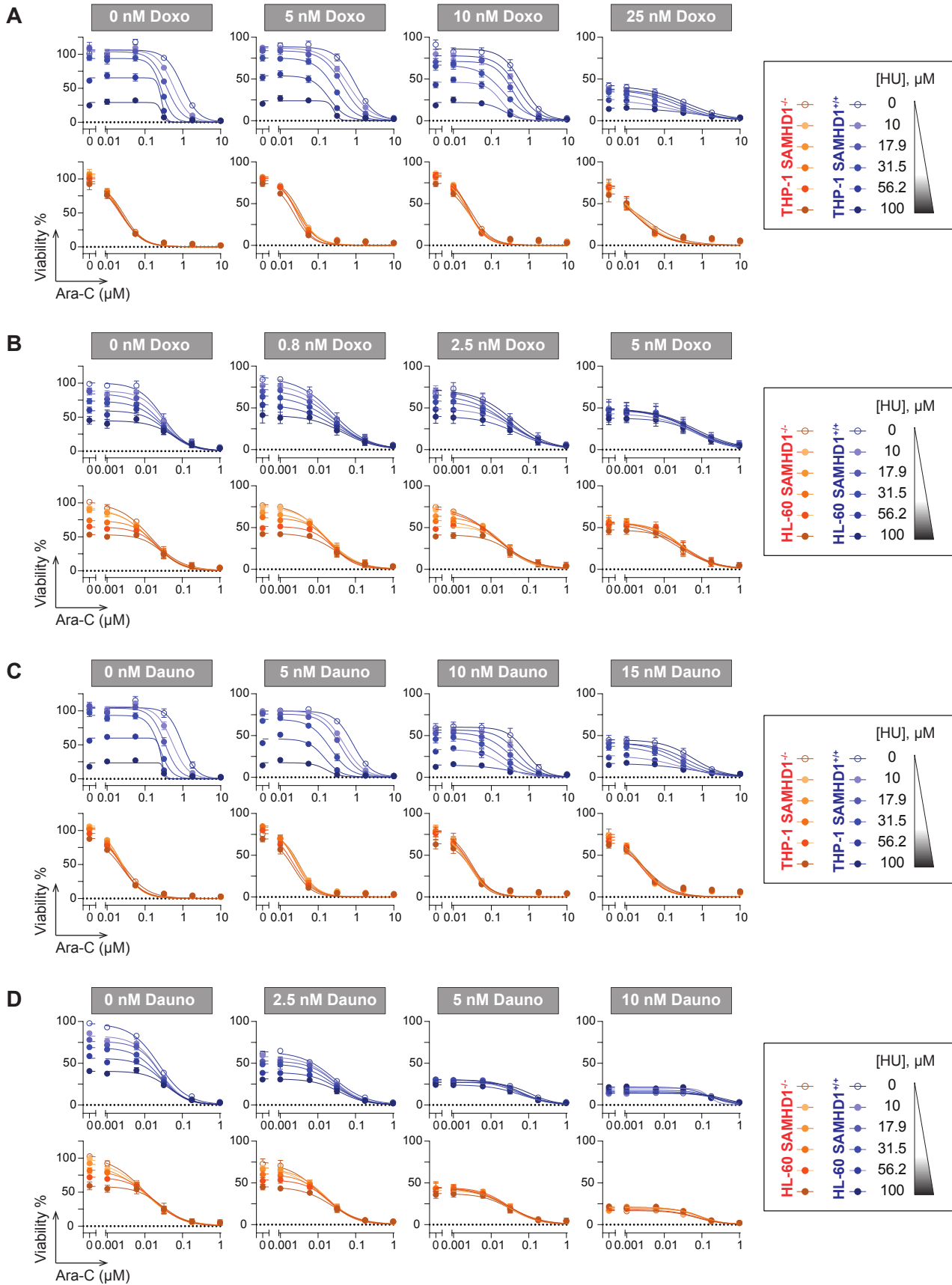
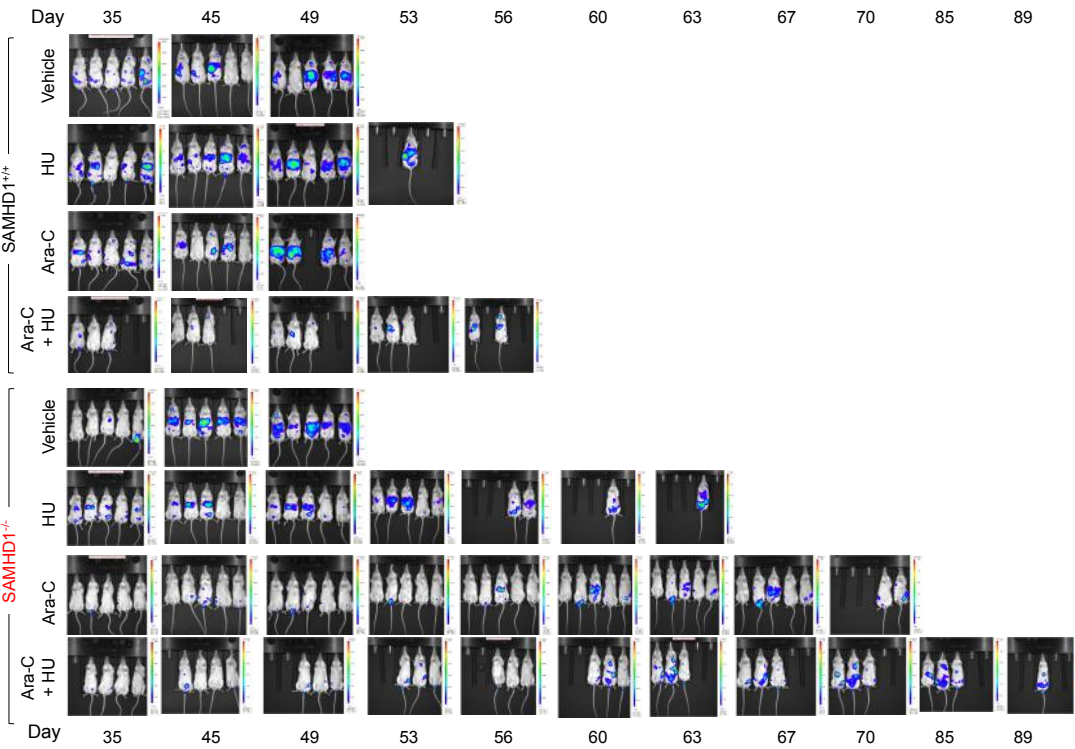


Figure S5 | Addition of anthracycline did not influence SAMHD1-dependent HU-mediated sensitisation of ara-C

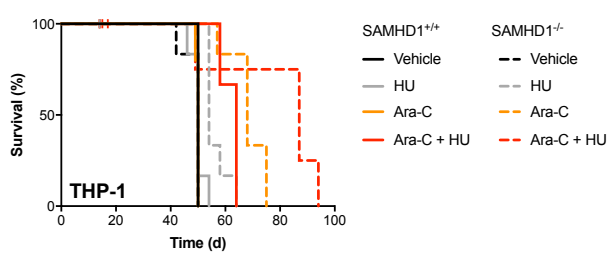
SAMHD1-proficient (^{+/+}) or -deficient (^{-/-}) THP-1 (A, C) or HL-60 (B, D) cells were treated with a dose-response matrix of HU and ara-C, in the absence or presence of increasing concentrations of doxorubicin (Doxo; A, B) or daunorubicin (Dauno; C, D) for four days before cell viabilities were determined using resazurin reduction viability assay.

Data information: Cell viability percentages (%) were calculated by normalizing to DMSO-treated controls. Mean viability % \pm s.e.m. of $n \geq 3$ were shown with viability curves (non-linear regression, GraphPad Prism).

A



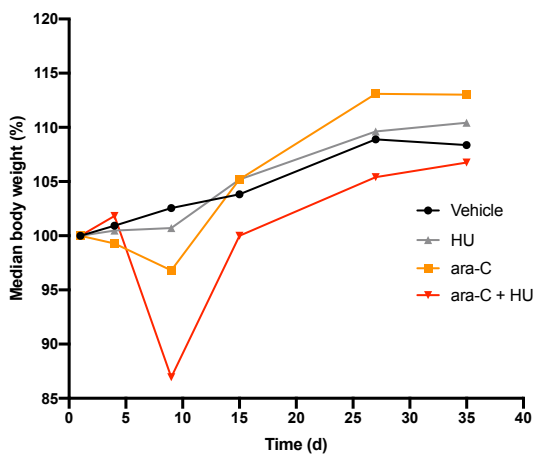
B



C

Log-rank (Mantel-Cox) test		+/+				-/-			
		Vehicle	Ara-C	HU	Ara-C + HU	Vehicle	Ara-C	HU	Ara-C + HU
+/+	Vehicle								
	Ara-C	0.3173							
	HU	0.9486							
	Ara-C + HU	0.0082	0.0141	0.0079					
-/-	Vehicle	0.3613			0.0095				
	Ara-C		0.0018		0.054	0.0012			
	HU			0.0056	0.109	0.0012			
	Ara-C + HU				0.1691	0.0838	0.0737	0.0596	

D



E

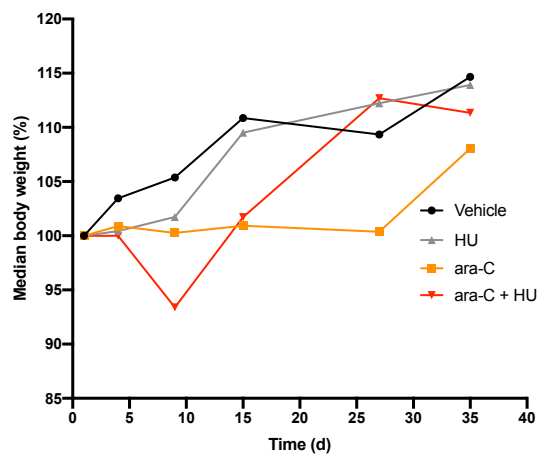


Figure S6 | Ara-C and HU combination treatment in SAMHD1-proficient and deficient THP-1 AML orthotopic xenotransplant mouse model

A) Representative images of NOD/SCID mice ($n = 6$ per treatment group) injected i.v. with luciferase-expressing SAMHD1-proficient ($^{+/+}$) or deficient ($^{-/-}$) THP-1 cell clones (day 0) and treated with ara-C and/or HU i.p. as indicated (day 6). On the indicated days, mice were injected with D-luciferin i.p. to monitor disease progression.

B) Kaplan-Meier analysis, tick marks indicate censored animals.

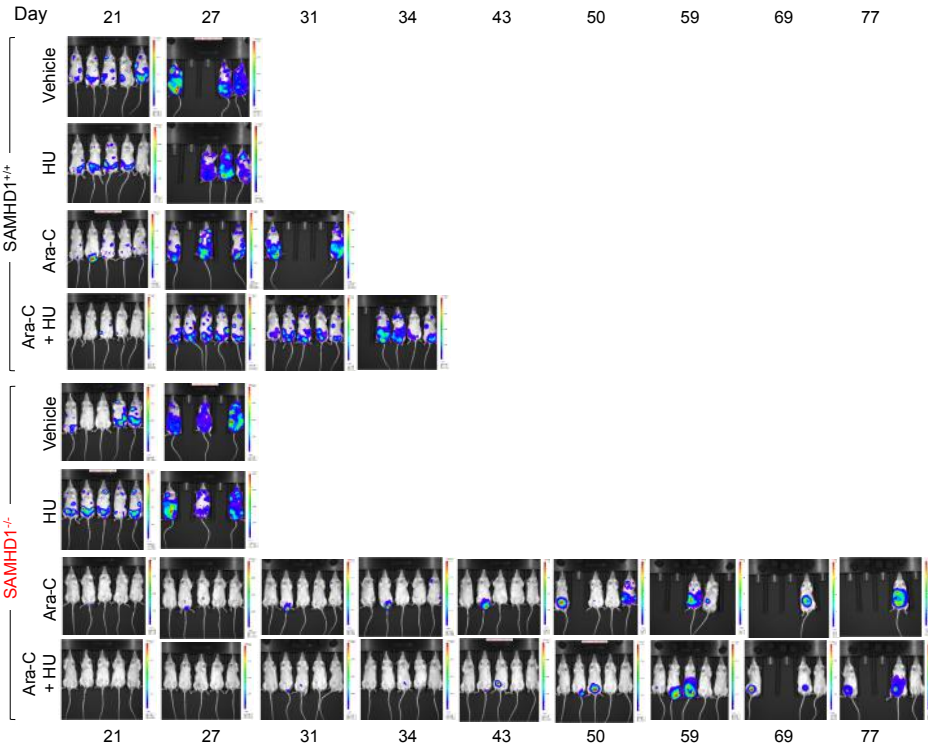
C) P value matrix comparing indicated treatment groups using Log-rank Mantel Cox test: ns, not significant, $P \geq 0.05$, white; *, $P < 0.05$, blue; **, $P < 0.01$, red.

D) Median body weight of animals per treatment group bearing THP-1 SAMHD1 $^{+/+}$ xenotransplants during the experiment (day 1 until day 35).

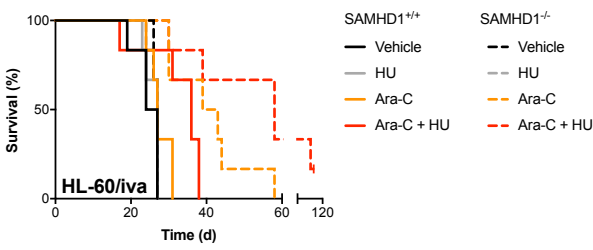
E) Median body weight of animals per treatment group bearing THP-1 SAMHD1 $^{-/-}$ xenotransplants during the experiment (day 1 until day 35).

Data information: Details of statistical testing in (C): for $^{+/+}$ vehicle vs $^{+/+}$ HU, $n = 5$ and 6 , respectively, $P = 0.9486$, $\chi^2 = 0.004149$, $df = 1$; $^{+/+}$ vehicle vs $^{+/+}$ ara-C, $n = 5$ and 6 , respectively, $P = 0.3173$, $\chi^2 = 1$, $df = 1$; $^{+/+}$ vehicle vs $^{+/+}$ ara-C + HU, $n = 5$ and 3 , respectively, $P = 0.0082$, $\chi^2 = 7$, $df = 1$; $^{+/+}$ HU vs $^{+/+}$ ara-C + HU, $n = 6$ and 3 , respectively, $P = 0.0079$, $\chi^2 = 7.059$, $df = 1$; $^{+/+}$ ara-C vs $^{+/+}$ ara-C + HU, $n = 5$ and 3 , respectively, $P = 0.0141$, $\chi^2 = 6.028$, $df = 1$. For $^{-/-}$ vehicle vs $^{-/-}$ HU, $n = 6$, $P = 0.0012$, $\chi^2 = 10.48$, $df = 1$, $^{-/-}$ vehicle vs $^{-/-}$ ara-C, $n = 6$, $P = 0.0012$, $\chi^2 = 10.48$, $df = 1$, $^{-/-}$ vehicle vs $^{-/-}$ ara-C + HU, $n = 6$ and 4 , respectively, $P = 0.0838$, $\chi^2 = 2.989$, $df = 1$; $^{-/-}$ HU vs $^{-/-}$ ara-C + HU, $n = 6$ and 4 , respectively, $P = 0.0596$, $\chi^2 = 3.549$, $df = 1$; $^{-/-}$ ara-C vs $^{-/-}$ ara-C + HU, $n = 6$ and 4 , respectively, $P = 0.0737$, $\chi^2 = 3.199$, $df = 1$. For $^{+/+}$ vehicle vs $^{-/-}$ vehicle, $n = 5$ and 6 , respectively, $P = 0.3613$, $\chi^2 = 0.8333$, $df = 1$; $^{+/+}$ ara-C vs $^{-/-}$ ara-C, $n = 5$ and 6 , respectively, $P = 0.0018$, $\chi^2 = 9.771$, $df = 1$; $^{+/+}$ HU vs $^{-/-}$ HU, $n = 6$, $P = 0.0056$, $\chi^2 = 7.669$, $df = 1$; $^{+/+}$ ara-C + HU vs $^{-/-}$ ara-C + HU, $n = 3$ and 4 , respectively, $P = 0.1691$, $\chi^2 = 1.891$, $df = 1$; $^{+/+}$ ara-C + HU vs $^{-/-}$ vehicle, $n = 3$ and 5 , respectively, $P = 0.0095$, $\chi^2 = 6.732$, $df = 1$; $^{+/+}$ ara-C + HU vs $^{-/-}$ ara-C, $n = 3$ and 6 , respectively, $P = 0.0540$, $\chi^2 = 3.714$, $df = 1$; $^{+/+}$ ara-C + HU vs $^{-/-}$ HU, $n = 3$ and 6 , respectively, $P = 0.1090$, $\chi^2 = 2.568$, $df = 1$.

A



B

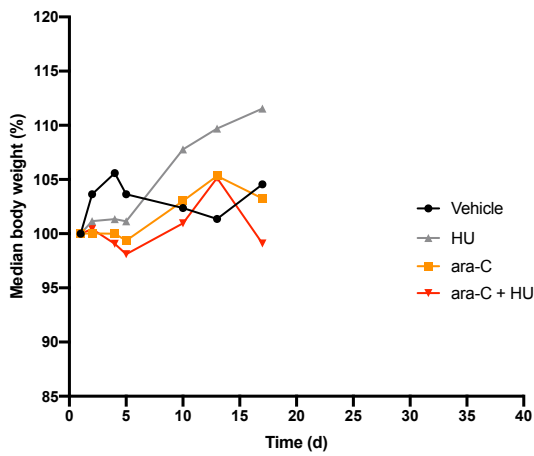


C

Log-rank (Mantel-Cox) test		+/+				-/-			
		Vehicle	Ara-C	HU	Ara-C + HU	Vehicle	Ara-C	HU	Ara-C + HU
+/+	Vehicle								
	Ara-C	0.1845							
	HU	0.5999							
	Ara-C + HU	0.0186	0.0316	0.022					
-/-	Vehicle				0.0217				
	Ara-C		0.015		0.0715	0.0012			
	HU			0.8801	0.022	0.8821			
	Ara-C + HU				0.0123	0.0012	0.0893	0.0012	

ns
*
**

D



E

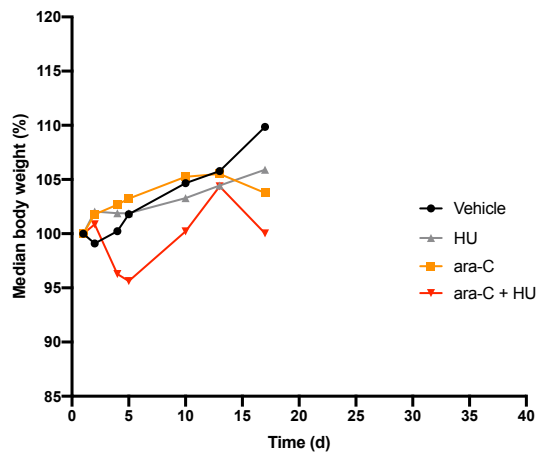


Figure S7 | Ara-C and HU combination treatment in SAMHD1-proficient and deficient HL60/iva AML orthotopic xenotransplant mouse model

- A)** Representative images of NOD/SCID mice ($n = 6$ per treatment group) injected i.v. with luciferase-expressing SAMHD1-proficient ($^{+/+}$) or deficient ($^{-/-}$) HL-60/iva cell clones (day 0) and treated with ara-C and/or HU as indicated (day 6). On the indicated days, mice were injected with D-luciferin to monitor disease progression.
- B)** Kaplan-Meier analysis, tick marks indicate censored animals.
- C)** P value matrix comparing indicated treatment groups using Log-rank Mantel Cox test: ns, not significant, $P \geq 0.05$, white; *, $P < 0.05$, blue; **, $P < 0.01$, red.
- D)** Median body weight of animals per treatment group bearing HL60/iva SAMHD1 $^{+/+}$ xenotransplants during the experiment (day 1 until day 17).
- E)** Median body weight of animals per treatment group bearing HL60/iva SAMHD1 $^{-/-}$ xenotransplants during the experiment (day 1 until day 17).

Data information: Details of statistical testing in (C): for $^{+/+}$ vehicle vs $^{+/+}$ HU, $n = 6$, $P = 0.5999$, $\chi^2 = 0.2752$, $df = 1$; $^{+/+}$ vehicle vs $^{+/+}$ ara-C, $n = 6$, $P = 0.1845$, $\chi^2 = 1.761$, $df = 1$; $^{+/+}$ vehicle vs $^{+/+}$ ara-C + HU, $n = 6$, $P = 0.0186$, $\chi^2 = 5.542$, $df = 1$; $^{+/+}$ HU vs $^{+/+}$ ara-C + HU, $n = 6$, $P = 0.0220$, $\chi^2 = 5.248$, $df = 1$; $^{+/+}$ ara-C vs $^{+/+}$ ara-C + HU, $n = 6$, $P = 0.0316$, $\chi^2 = 4.619$, $df = 1$. For $^{-/-}$ vehicle vs $^{-/-}$ HU, $n = 6$, $P = 0.8821$, $\chi^2 = 0.022$, $df = 1$; $^{-/-}$ vehicle vs $^{-/-}$ ara-C, $n = 6$, $P = 0.0012$, $\chi^2 = 10.56$, $df = 1$; $^{-/-}$ vehicle vs $^{-/-}$ ara-C + HU, $n = 6$ and 5, respectively, $P = 0.0012$, $\chi^2 = 10.56$, $df = 1$; $^{-/-}$ HU vs $^{-/-}$ ara-C + HU, $n = 6$ and 5, respectively, $P = 0.0012$, $\chi^2 = 10.43$, $df = 1$; $^{-/-}$ ara-C vs $^{-/-}$ ara-C + HU, $n = 6$ and 5, respectively, $P = 0.0893$, $\chi^2 = 2.886$, $df = 1$. For $^{+/+}$ vehicle vs $^{-/-}$ vehicle, $n = 6$, $P = 0.3750$, $\chi^2 = 0.7872$, $df = 1$; $^{+/+}$ ara-C vs $^{-/-}$ ara-C, $n = 6$, $P = 0.0150$, $\chi^2 = 5.918$, $df = 1$; $^{+/+}$ HU vs $^{-/-}$ HU, $n = 6$, $P = 0.8801$, $\chi^2 = 0.02274$, $df = 1$; $^{+/+}$ ara-C + HU vs $^{-/-}$ ara-C + HU, $n = 6$ and 5, respectively, $P = 0.0123$, $\chi^2 = 6.261$, $df = 1$; $^{+/+}$ ara-C + HU vs $^{-/-}$ vehicle, $n = 6$, $P = 0.0217$, $\chi^2 = 5.271$, $df = 1$; $^{+/+}$ ara-C + HU vs $^{-/-}$ ara-C, $n = 6$, $P = 0.0715$, $\chi^2 = 3.248$, $df = 1$; $^{+/+}$ ara-C + HU vs $^{-/-}$ HU, $n = 6$, $P = 0.0220$, $\chi^2 = 5.248$, $df = 1$.

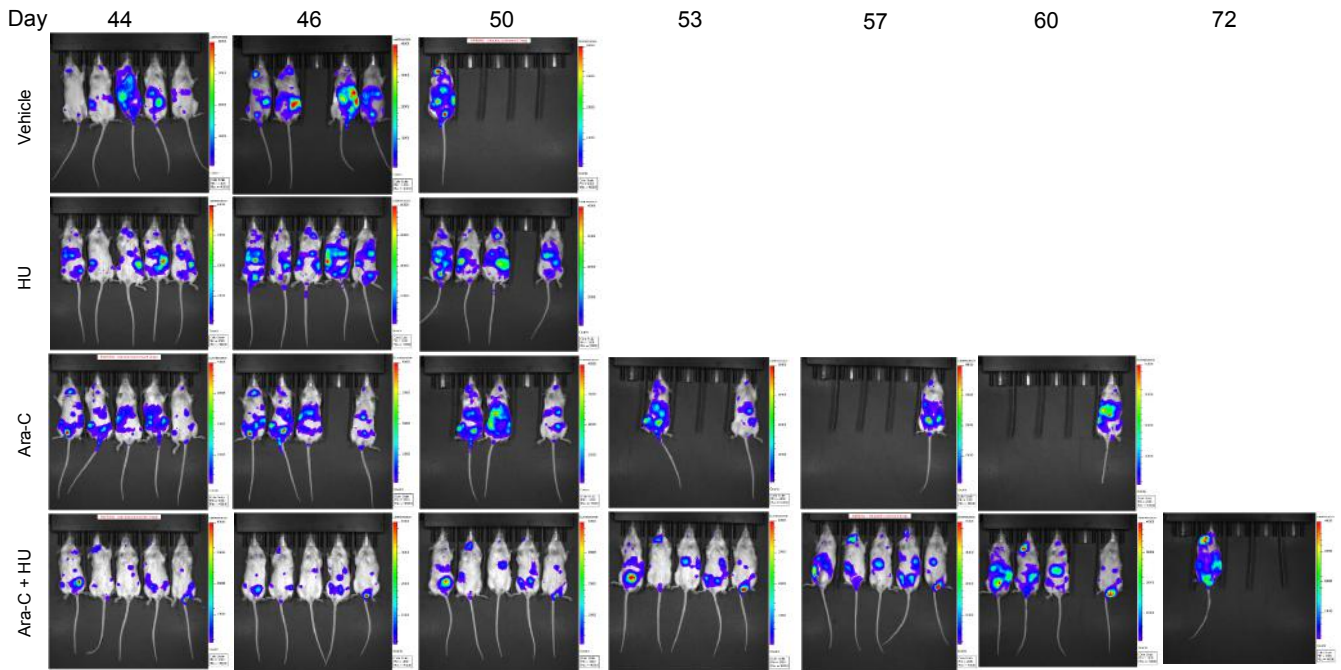
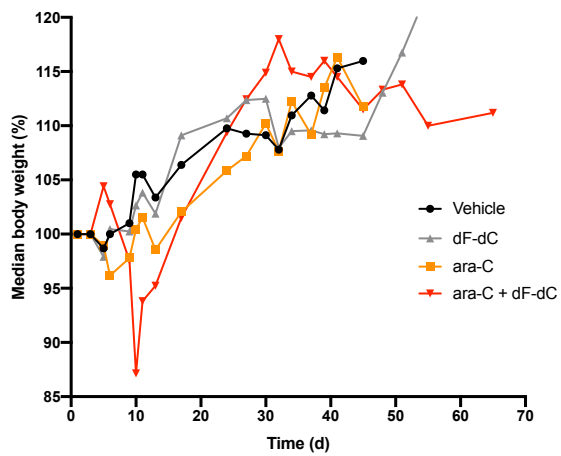
A**B**

Figure S8 | Ara-C and dF-dC combination treatment in SAMHD1-proficient THP-1 AML orthotopic xenotransplant mouse model

- A)** Representative images of NOD/SCID mice ($n = 7$ per treatment group) injected i.v. with luciferase-expressing SAMHD1-proficient THP-1 cell clone (day 0) and treated with ara-C and/or dF-dC as indicated (day 6). On the indicated days, mice were injected with D-luciferin to monitor disease progression.
- B)** Median body weight of animals per treatment group during the experiment (day 1 until day 65).

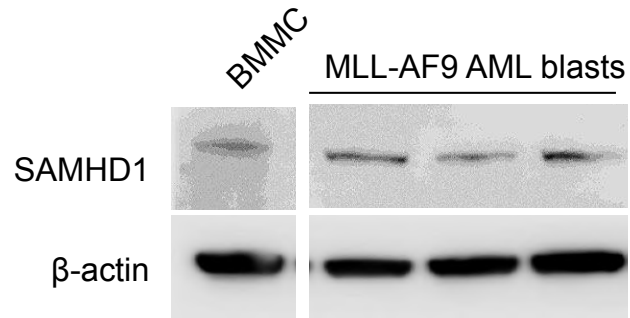
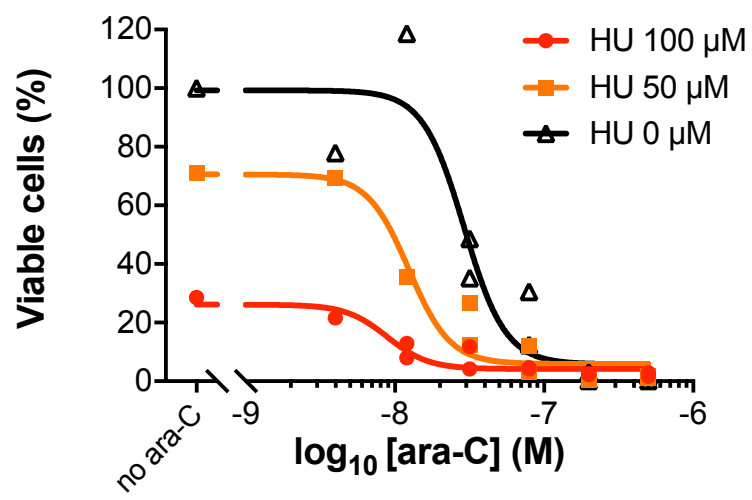
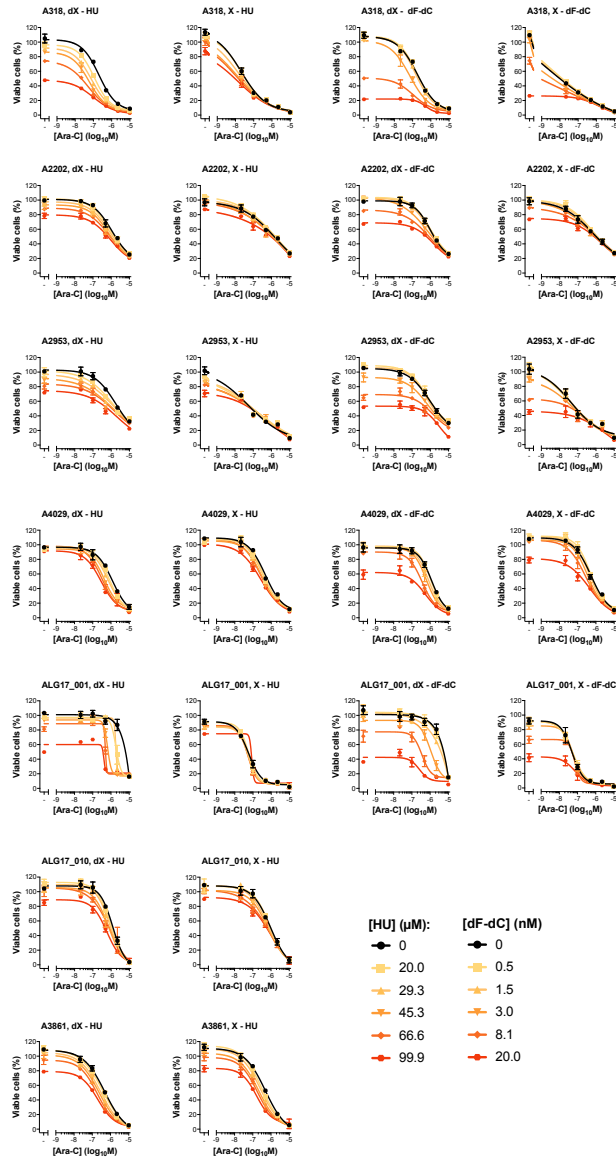
A**B**

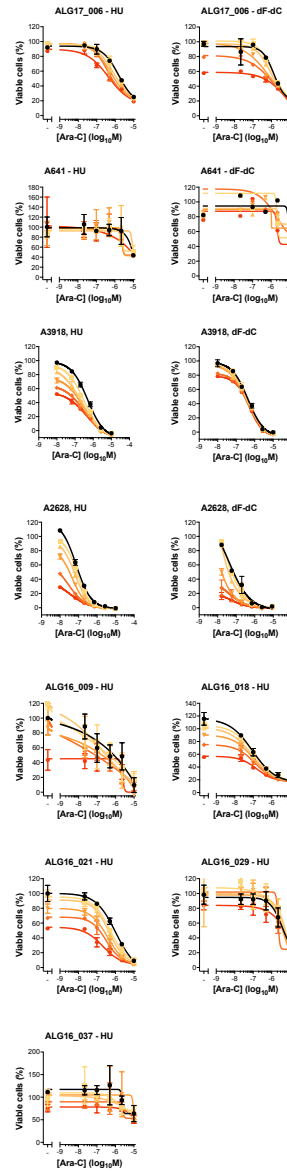
Figure S9 | SAMHD1 expression in *MLL-AF9* murine AML blasts and sensitisation to ara-C by HU

- A)** Immunoblot of murine bone mononuclear cells (BMMCs, left lane) and *MLL-AF9* murine AML blast (right lanes) lysates stained for SAMHD1 and β -actin using a polyclonal rabbit anti-SAMHD1 antibody (Proteintech, 12586-1-AP) and a monoclonal mouse anti- β -actin IgG1 coupled to horse-radish peroxidase (Santa Cruz Biotechnology, sc-47778 HRP).
- B)** *MLL-AF9* murine AML blast were treated with increasing concentrations of ara-C for 72 h in the presence of HU at the indicated concentrations prior to determining cell viability using an ATP-release assay. Calculated EC_{50} values are 29.9 nM, 12.4 nM, and 8.9 nM for 0 μ M, 50 μ M, and 100 μ M of HU, respectively, Curve fitting was performed using non-linear regression in Prism 7. Extra sum-of-squares F test showed was performed: $F = 25.96$; $DFn = 2$; $DFd = 55$; $P < 0.0001$.

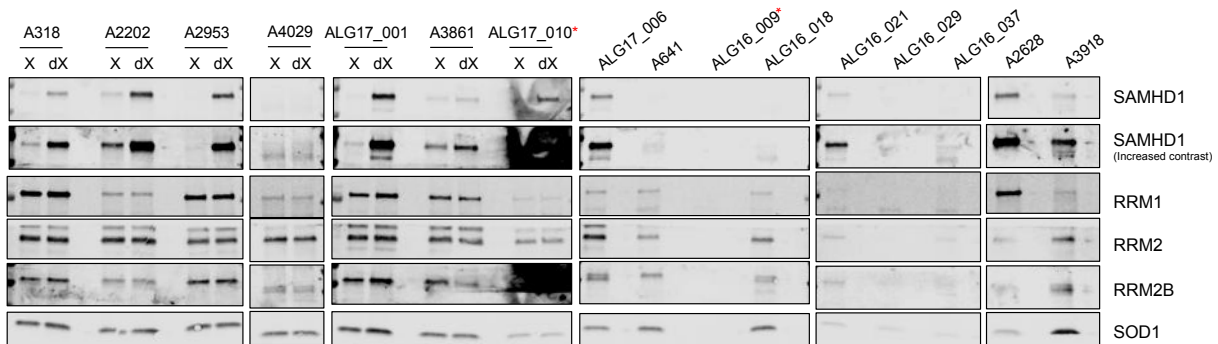
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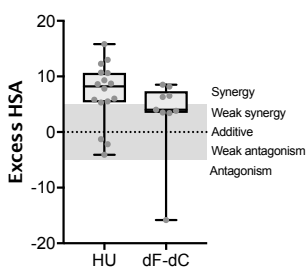
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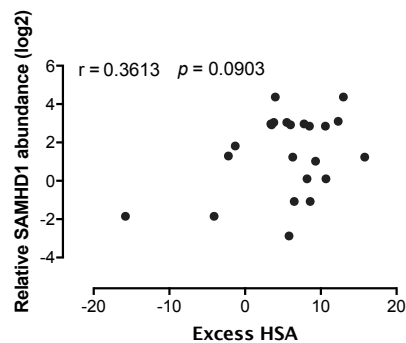
C



D



E



F

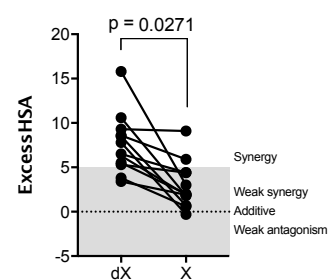


Figure S10 | Ara-C and RNR inhibitors HU and dF-dC synergise in patient-derived AML blasts in a SAMHD1-dependent manner

- A)** Proliferation inhibition analysis of ara-C and RNRi (HU or dF-dC) combination treatment in patient-derived AML blasts pre-treated with control (dX) or Vpx-containing (X) VLPs. Error bars indicate s.d. of a single experiment performed in triplicate. Panels “A2953, dX – HU” and “A2953, X – HU” are identical to the panels shown in Fig 3D. Panels “ALG17_001, dX – dF-dC” and “ALG17_001, X – dF-dC” are identical to the panels shown in Fig 3F. Clinicopathological features can be found in Table S2.
- B)** Proliferation inhibition analysis of ara-C and RNRi (HU or dF-dC) combination treatment in patient-derived AML blasts. Error bars indicate s.d. of a single experiment performed in triplicate, with the exception of sample A641 for ara-C vs dF-dC, which is data obtained in singlet. Clinicopathological features can be found in Table S2.
- C)** Immunoblot analysis of patient-derived AML blasts pre-treated or not with control (dX) or Vpx-containing (X) VLPs. The red asterisk indicates samples omitted from quantification.
- D)** Drug synergy plots for ara-C and HU or dF-dC in primary patient-derived AML blasts. Zero, >0, or <0 corresponds to additive, synergy, or antagonism, respectively, whilst >5 indicates strong synergy and <5 indicates strong antagonism. Each data point indicates an average excess HSA score from a single patient sample subjected to a dose-response matrix experiment performed in triplicate, $n = 16$ for HU and $n = 9$ for dF-dC. Median, upper and lower quartiles, and range of excess HSA scores are indicated by box-and-whisker plots. For proliferation inhibition curves for each sample see (A) and (B), and for patient characteristics see **Appendix Table S2**.
- E)** Pearson correlation of relative SAMHD1 protein abundance and excess HSA synergy scores for ara-C and HU or dF-dC in primary patient-derived AML blasts ($n = 23$). For Western blot analysis of SAMHD1 protein abundance see (C).
- F)** Paired drug synergy plot for ara-C and RNRi (HU, $n = 7$; dF-dC, $n = 5$) in primary patient-derived AML blasts pre-treated with control (dX) or Vpx-containing (X) VLPs. Each data point indicates an average excess HSA score from a single patient sample subjected to a dose-

response matrix experiment performed in triplicate. Statistical significance determined using two-way ANOVA, $n = 12$, $F = 11.6$, $dF = 1$.

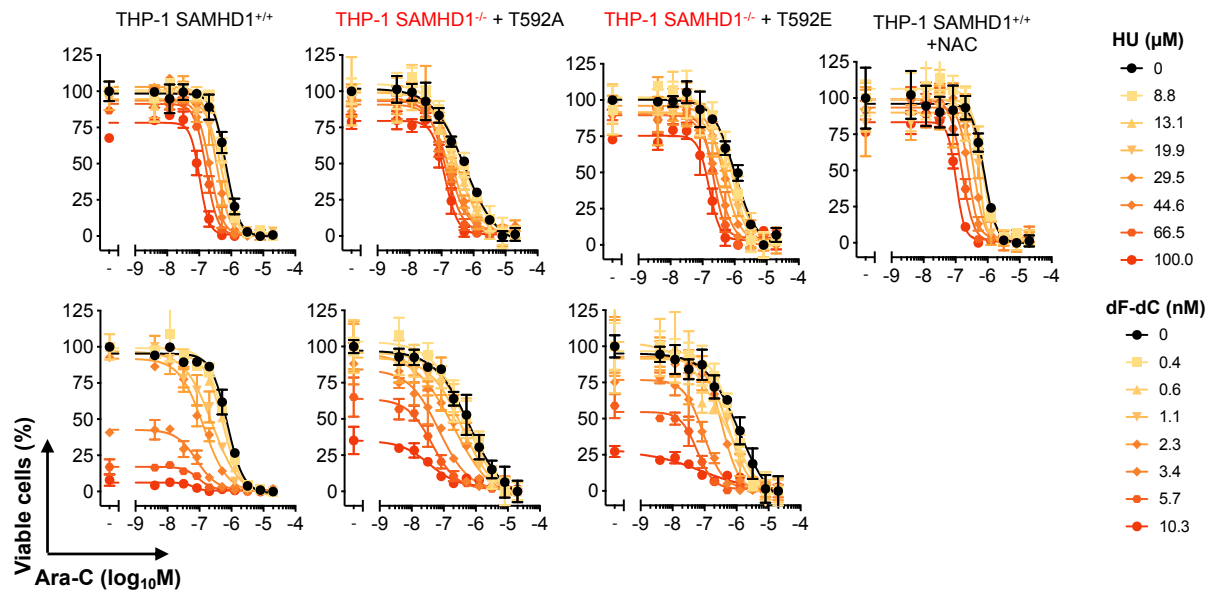


Figure S11 | Interrogating the role of reactive oxygen species or phosphorylation status of SAMHD1 at T592 upon ara-C and RNRi synergy

Proliferation inhibition analysis of ara-C and RNRi (HU or dF-dC) in SAMHD1-proficient (^{+/+}) or -deficient (^{-/-}) THP-1 cells, the latter with rescue expression of phosphomimic (T592E) or phosphorylation-null (T592A) SAMHD1 mutant, or pre-treatment with ROS scavenger *N*-acetylcysteine (NAC, 5 mM for 4 hrs), as indicated. Representative of 2 experiments shown, error bars indicate s.d. of experimental triplicates.

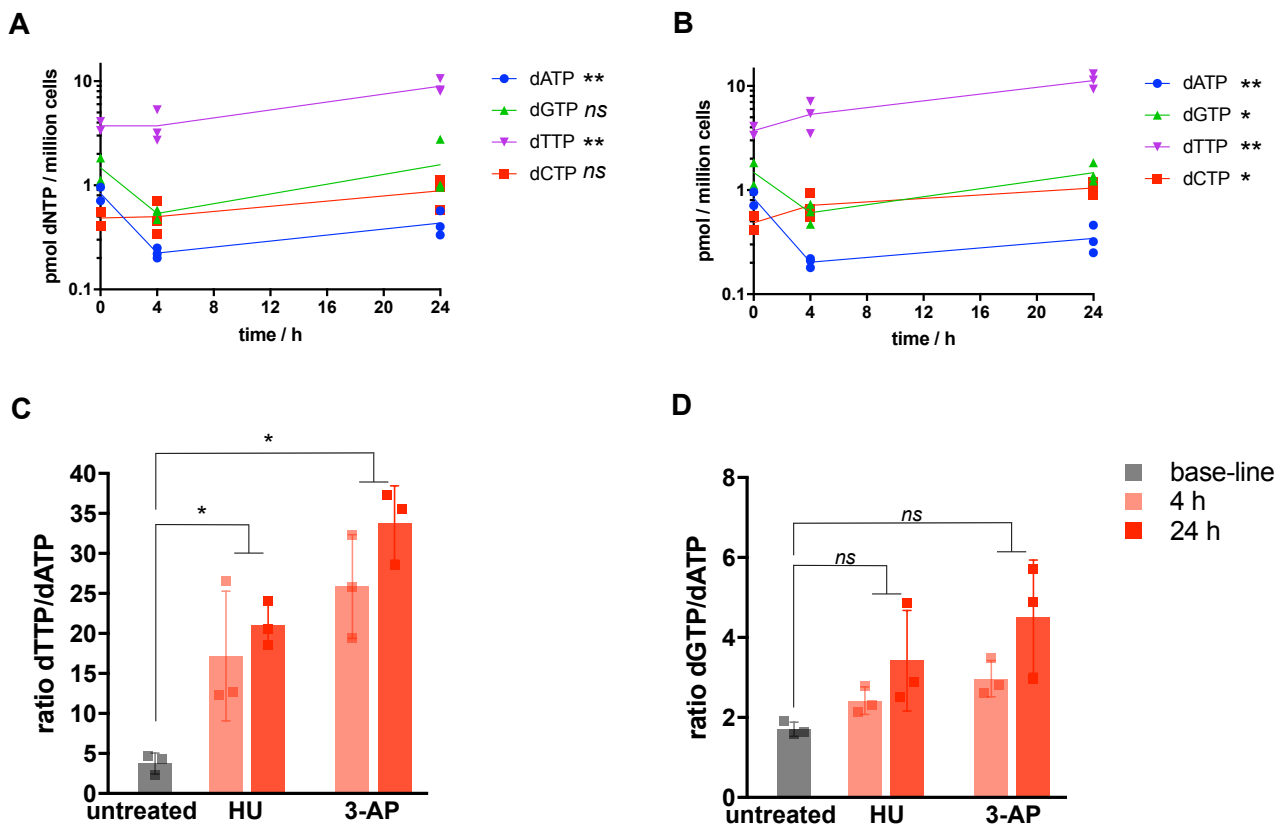
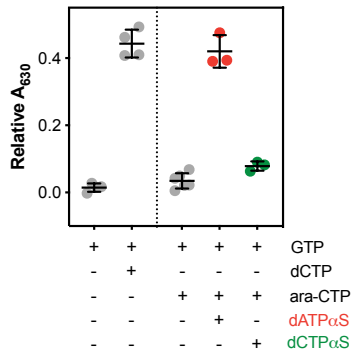


Figure S12 | RNR inhibitors induce nucleotide pool imbalance

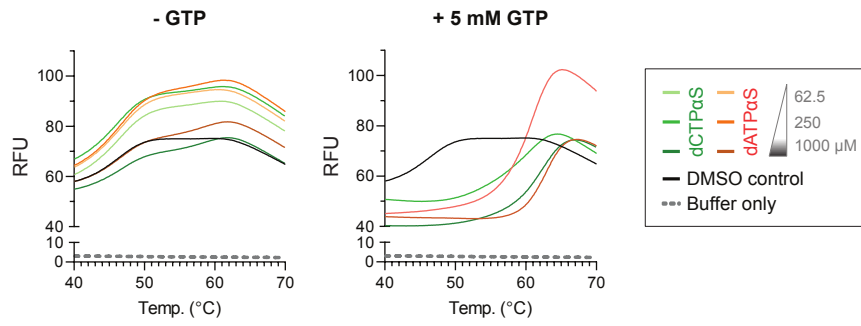
A-B) THP-1 SAMHD1^{+/+} cells were treated for 0 h, 4 h or 24 h with either 50 μ M HU (A) or 2.5 nM 3-AP (B) prior to determination of intracellular amounts of dNTPs using a primer-extension assay. Individual dots represent single measurements of dATP (blue), dGTP (green), dTTP (purple), or dCTP (red) for a total of three independent experiments. Statistical analyses were performed using one-way ANOVA for each dNTP. HU: dATP: $F=18$; $R^2=0.8786$; $P=0.0051$. dGTP: $F=1.985$; $R^2=0.4426$; $P=0.2320$. dTTP: $F=15.67$; $R^2=0.8624$; $P=0.0070$. dCTP: $F=2.936$; $R^2=0.5423$; $P=0.1417$. 3-AP: dATP: $F=22.85$; $R^2=0.9014$; $P=0.0031$. dGTP: $F=7.159$; $R^2=0.7412$; $P=0.0341$. dTTP: $F=14.93$; $R^2=0.8566$; $P=0.0078$. dCTP: $F=7.544$; $R^2=0.7511$; $P=0.0309$.

C-D) Ratios of dGTP-to-dATP (C) and dTTP-to-dATP (D) were calculated and normalised to untreated cells. Three independent experiments were performed. Statistical analyses were done using unpaired two-tailed *t*-tests. c, HU vs. untreated: $t = 2.422$; $df = 2$; $P = 0.1364$. 3-AP vs. untreated: $t = 2.629$; $df = 2$; $P = 0.1193$. d, HU vs. untreated: $t = 7.928$; $df = 2$; $P = 0.0155$. 3-AP vs. untreated: $t = 6.57$; $df = 2$; $P = 0.0224$.

A



B



C

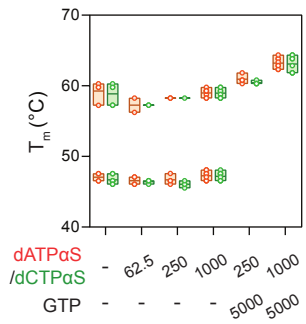


Figure S13 | Additional biochemical and thermal shift analyses of SAMHD1

- A)** Recombinant SAMHD1 was incubated with the indicated nucleotide combinations (each 200 μM) in the enzyme-coupled malachite green assay. Absorbance at 630 nm indicates liberated inorganic phosphate. Representative of 2 experiments shown, error bars indicate s.d. of experimental triplicates or quadruplicates.
- B)** Recombinant SAMHD1 protein (5 μM) was treated with the indicated concentrations of dATP αS or dCTP αS , alone or combined with GTP, for 30 mins before heat-induced denaturation was monitored in the differential scanning fluorimetry (DSF) assay. Mean relative fluorescence units (RFU) of melting curves from 1-2 experiments performed in quadruplicates shown.
- C)** Melting temperatures of recombinant SAMHD1 proteins as treated in B are summarized. Mean and range are indicated as floating bars with individual replicates plotted from 1-2 experiments.

Supplementary tables

Table S1 | Overview of reported SAMHD1 inhibitors

Inhibitor	Molecule	Mode of action	References
Vpx	Protein	Binds to SAMHD1 and recruits it for DCAF1/DDB1 CUL4A proteasomal degradation machinery for SAMHD1 ubiquitination and degradation	(Hrecka et al, 2011; Laguette et al, 2011)
SMDU-TP	Deoxynucleoside triphosphate analogue ((2'S)-2'-methyl-dUTP)	Interferes with SAMHD1 residue Y374; binds to active site but prevents helix A351-V378 conformational change required for dNTP hydrolysis	(Hollenbaugh et al, 2017)
pppCH2-dU	dUTP analogue with a methylene bridge connecting the α phosphate and 5' carbon	Prevents formation of active tetramer and dNTP hydrolysis by antagonistic binding to the allosteric A2 sites	(Seamon et al, 2014)
Sapacitabine-TP	Prodrug of 2'-C-cyano-2'-deoxy-1-beta-D-arabinopentofuranosylcytosine (CNDAC)	Predicted inhibitor; (2'S)-2'cyano group which is predicted to block helix A351-V378 conformational change similarly to methyl group in SMDU-TP	(Hollenbaugh et al, 2017)
DFP-10917	2'-C-cyano-2'-deoxy-1-beta-D-arabinopentofuranosylcytosine (CNDAC)	Predicted inhibitor; (2'S)-2'cyano group which is predicted to block helix A351-V378 conformational change similarly to methyl group in SMDU-TP	(Hollenbaugh et al, 2017)
Zn²⁺ salt of cephalosporine C	Divalent cation	Zn ²⁺ salt of the beta-lactam antibiotic cephalosporine C but also Zn ²⁺ alone (from chloride salt) was a potent inhibitor of SAMHD1 (IC ₅₀ ~2.1 μ M); mode of action unknown	(Seamon & Stivers, 2015)
dGuo	Deoxyguanosine	Binds guanine nucleoside-specific A1 activator site (IC ₅₀ ~488 μ M)	(Seamon & Stivers, 2015)
Aciclovir	Acycloguanosine	Binds guanine nucleoside-specific A1 activator site (IC ₅₀ ~764 μ M)	(Seamon & Stivers, 2015)
Lomofungin	Antimicrobial drug	Unknown mechanism. IC ₅₀ with dGTP as a substrate 20.1 μ M.	(Mauney et al, 2018)

Troglitazone	Antidiabetic	Unknown mechanism. IC50 with dGTP as a substrate 23.76 μM .	(Mauney et al, 2018)
Montelukast	Leukotriene receptor antagonist	Unknown mechanism. IC50 with dGTP as a substrate 28.62 μM .	(Mauney et al, 2018)
Pranlukast	Leukotriene receptor antagonist	Unknown mechanism. IC50 with dGTP as a substrate 33.19 μM .	(Mauney et al, 2018)
L-thyroxine	Thyroid hormone	Unknown mechanism. IC50 with dGTP as a substrate 34.17 μM .	(Mauney et al, 2018)
Ergotamine	Ergot alkaloid	Unknown mechanism. IC50 with dGTP as a substrate 62.8 μM .	(Mauney et al, 2018)
Amrinone	Inhibitor of phosphodiesterase III	Unknown mechanism. IC50 with dGTP as a substrate 66.43 μM .	(Mauney et al, 2018)
Retinoic Acid	Vitamin A ₁ metabolite	Unknown mechanism. IC50 with dGTP as a substrate 75.67 μM .	(Mauney et al, 2018)
Ethacrynic Acid	NKCC2 inhibitor	Unknown mechanism. IC50 with dGTP as a substrate 75.94 μM .	(Mauney et al, 2018)
Hexestrol	Synthetic oestrogen	Unknown mechanism. IC50 with dGTP as a substrate 94.66 μM .	(Mauney et al, 2018)
Tolfenamic acid	COX inhibitor	Unknown mechanism. IC50 with dGTP as a substrate 178.2 μM .	(Mauney et al, 2018)
Bexarotene	Retinoid	Unknown mechanism. IC50 with dGTP as a substrate 216.6 μM .	(Mauney et al, 2018)
Sulindac	NSAID	Unknown mechanism. IC50 with dGTP as a substrate 281.7 μM .	(Mauney et al, 2018)
Zolmitriptan	Serotonin receptor antagonist	Unknown mechanism. IC50 with dGTP as a substrate 471.2 μM .	(Mauney et al, 2018)
Nifedipine	Calcium channel blocker	Unknown mechanism. IC50 with dGTP as a substrate 503.3 μM .	(Mauney et al, 2018)
Tetracycline	Inhibitor of bacterial translation	Unknown mechanism. IC50 with dGTP as a substrate 605.7 μM .	(Mauney et al, 2018)

Nisoldipine	Calcium channel blocker	Unknown mechanism. IC50 with dGTP as a substrate 783.3 μ M.	(Mauney et al, 2018)
Medroxyprogesterone acetate	Progestin	Unknown mechanism. IC50 with dGTP as a substrate 1.6 mM.	(Mauney et al, 2018)
Trifluoperazine	Antipsychotic	Unknown mechanism. IC50 with dGTP as a substrate 2.4 mM.	(Mauney et al, 2018)
Primaquine	Antimalarial drug	Unknown mechanism. IC50 with dGTP as a substrate 4.9 mM.	(Mauney et al, 2018)
Adapalene	Retinoid	Unknown mechanism. IC50 with dGTP as a substrate 6.6 mM.	(Mauney et al, 2018)
Aprepitant	Neurokinin receptor antagonist	Unknown mechanism. IC50 with dGTP as a substrate 8.1 mM.	(Mauney et al, 2018)
Tolcapone	catechol- <i>O</i> -methyltransferase inhibitor	Unknown mechanism. IC50 with dGTP as a substrate 8.9 mM.	(Mauney et al, 2018)

Table S2 | Characteristics of AML patients

ID	Age (years)	gender	Complete remission	EFS (days)	OS (days)	risk group	cytogenetics	FLT3	CEBPA	NPM1	other
<i>adult</i>											
ALG17_010	73	M	N/A	N/A	alive	poor	46,XX	ITD	wt	wt	
ALG17_006	74	M	N/A	N/A	8	favourable	46,XX,inv(16)	N/A	N/A	N/A	CBFβ rearrangement
ALG17_001	48	M	N/A	N/A	alive	intermediate	47,XY,+8[9]/46,XY[1]	N/A	N/A	N/A	NOTCH1 mutation
ALG16_037	40	F	N/A	N/A	alive	favourable	46,XX[20]	wt	wt	mut	
ALG16_029	39	M	N/A	N/A	alive	intermediate	47,XY,+8[7]/46,XY[3]	wt	wt	wt	
ALG16_021	71	M	N/A	N/A	489	intermediate	47,XY,+13[2]/46,XX[18]	ITD	wt	mut	
ALG16_018	70	M	N/A	N/A	66	poor	45,XY,-7[19]/46,XY[1]	N/A	N/A	N/A	
ALG16_009	86	M	N/A	N/A	95	favourable	46,XXY[20]	wt	wt	mut	
<i>paediatric</i>											
A318	2	M	Yes	no event	alive	intermediate	46,XY,-19,+mar	N/A	N/A	N/A	t(9;11)
A394	7	M	Yes	no event	alive	intermediate	47,XY,+4[15]/46,XY[10]	wt	wt	wt	
A641	2	F	Yes	no event	alive	intermediate	48,XX,-8,-21c[2]/49,idem,+?22[3]/47,XX,+21c[22]	N/A	N/A	N/A	M. Down
A2202	16	F	Yes	no event	alive	favourable	46,XX,t(15;17)(q24;q21)[11]	N/A	N/A	N/A	APL
A2628	8	M	Yes	1122	alive	intermediate	46,XY,t(7;12)(p12;p12)[4],46,XY,idel,del(5)(p2,XXYY)(q13q31)[2]/46,XXY[5]	wt	N/A	N/A	
A2953	5	F	Yes	no event	alive	intermediate	46,XX,(9;11)(p21-22;q23)	ITD	wt	mut	
A3861	7	M	Yes	625	alive	poor	46,XX,t(9;22)(q34;q11)[8]/55,idel,+Y,der(2)(q36;q16)+3,-der(4)(t1-4)(q31;q34)+8,+10,+13,+19,+21,-der(22)(9;22)[16]	wt	N/A	wt	
A3918	8	F	Yes	no event	alive	intermediate	46,XX,t(7)(p10)[28]/46,XX[3]	wt	wt	wt	
A3922	3	F	Yes	188	206	poor	45,XX,-7[14]/46,XX[2]	wt	wt	wt	
A4003	0.5	F	No	0	3	poor	46,XX,t(11;19)(q23;q13.3)	N/A	N/A	N/A	
A4022	1	M	Yes	no event	alive	favourable	46,XX,inv(16)(p13q22)/47,XY,inv(16)(p13q22)+8/46,XXY 46,XY,inv(16)(p13;q22)	N/A	N/A	N/A	
A4029	4	F	Yes	no event	alive	intermediate	46,XX[21]	ITD	N/A	mut	

FLT3: fms like tyrosine kinase 3; CEBPA: CCAA1 enhancer-binding protein alpha; NPM1: nucleophosmin; CBFβ: Core-binding factor subunit beta
 APL: acute promyelomonocytic leukaemia; ITD: internal tandem duplication

Table S3 | Summary of pre-clinical studies combining irreversible inhibitors of RNR with ara-C

<i>Cell lines</i>				
RNRi added to ara-C	Cell line(s)	Results	SAMHD1 status/comment	Reference
HU	HL-60, MOLT-4	3-fold increase of ara-CTP in HL-60, but not in MOLT-4	MOLT-4 cells are SAMHD1-negative whereas HL-60 cells are SAMHD1-positive (Fig. S2C). Consistent with SAMHD1-dependent synergism	(Ahlmann et al, 2001)
HU	CCRF-CEM, HL-60, CHO	Increased ara-CTP in Raji (3.7-fold), HL-60 (3.5-fold) and CHO (8.1-fold), but not in CCRF-CEM	CCRF-CEM cells are SAMHD1-negative whereas HL-60 cells are SAMHD1-positive (Fig. S2C). Consistent with SAMHD1-dependent synergism	(Heinemann et al, 1998)
HU	MOLT-4, HL-60	Increased ara-CTP in HL-60 (2-fold), BALL-1 (2-fold) and Raji (5-fold), not in MOLT-4, CCRF-CEM, U-937; synergism in HL-60, not in MOLT-4	MOLT-4, CEM and U-937 cells are SAMHD1-negative whereas HL-60 cells are SAMHD1-positive ((Laguette et al, 2011) and Fig. S2C). Consistent with SAMHD1-dependent synergism	(Kubota et al, 1988)
HU	CEM, HL-60	Increased ara-CTP in HL-60, not in CEM; 50-fold sensitization to ara-C in HL-60, no sensitization in CEM	CEM cells are SAMHD1-negative whereas HL-60 cells are SAMHD1-positive (Fig. S2C). Consistent with SAMHD1-dependent synergism	(Kubota et al, 1989)
dF-dC	K562	3-fold increase in ara-CTP	K562 cells are SAMHD1-positive (Fig. S2C)	(Gandhi & Plunkett, 1990)

dF-dC	HL-60	3-fold increase of ara-CMP in nuclear DNA; 3-fold increase of apoptosis; 14-fold decrease in clonogenic survival; reduced proportion of cells in S-phase	HL-60 cells are SAMHD1-positive (Fig. S2C)	(Santini et al, 1996)
dF-dC	HL-60	Moderate synergism	HL-60 cells are SAMHD1-positive (Fig. S2C)	(Hubeek et al, 2004)
HU	Ara-C-resistant HL-60	Up to 10-fold reduction in colony formation, no effect on cell cycle distribution and ara-CTP accumulation	HL-60 cells are SAMHD1-positive (Fig. S2C)	(Bhalla et al, 1991)
HU	HL-60	Increase in intracellular ara-CTP, reduced ara-CMP incorporation in nuclear DNA	HL-60 cells are SAMHD1-positive (Fig. S2C)	(Howell et al, 1982)
HU	L1210, HL-60	2-3-fold increase of intracellular ara-CTP, increased ara-CMP incorporation into nuclear DNA, 10-fold decrease in clonogenic survival	HL-60 cells are SAMHD1-positive (Fig. S2C)	(Rauscher & Cadman, 1983)
HU	HL-60, Ara-C-resistant HL-60, U-937	increase in cytotoxicity and apoptosis	U-937 cells are SAMHD1-negative whereas HL-60 cells are SAMHD1-positive ((Laguet et al, 2011) and Fig. S2C)	(Freund et al, 1998)
HU	CCRF-CEM	5-fold increase of ara-CTP, decreased ara-CMP incorporation into DNA, 10-fold reduced colony formation	CCRF-CEM cells are SAMHD1-negative, conflicting results with (Heinemann et al, 1998) (Kubota et al, 1989; Kubota et al, 1988)	(Tanaka et al, 1985)

HU, dF-dC	CCRF-CEM	Increased ara-CMP incorporation into DNA	CCRF-CEM cells are SAMHD1-negative, conflicting results with (Heinemann et al, 1998) (Kubota et al, 1989; Kubota et al, 1988)	(Iwasaki et al, 1997)
HU	Novikoff rat hepatoma cells	4.5-fold increase of ara-C incorporation	unknown	(Plagemann et al, 1978)
3-AP	SW1573, H460	Synergism, 2- to 4-fold increased ara-CTP accumulation, 1.5-fold increased ara-CMP incorporation into DNA	unknown	(Sigmond et al, 2007)
HU	BNML	reduction in proliferation and colony formation; increased ara-CMP in nuclear DNA	unknown	(Colly et al, 1992)
HU	SB	Synergistic, 7.5-fold increase in ara-C incorporation	unknown	(Streifel & Howell, 1981)
HU	L1210	2.9-fold increase in ara-CTP	unknown	(Walsh et al, 1980)
<i>Patient blasts ex vivo</i>				
RNRi added to ara-C	Cancer type(s)	Results		Reference
dF-dC	CML (blast phase)	Strong decrease in clonogenic survival; reduced proportion of cells in S-phase; increased apoptosis		(Santini et al, 1997)
dF-dC, HU	Paediatric AML	synergism		(Hubeek et al, 2005)
dF-dC	CML	Additive effects		(Lech-Maranda et al, 2000)

HU	Paediatric AML, pre-B-ALL, T-ALL, ALL relapse	1.5-fold increase of ara-CTP in AML blasts	(Ahlmann et al, 2001)
HU	AML, ALL	increase of ara-CTP	(Streifel & Howell, 1981)
dF-dC	40 AML samples	No effect on ara-CTP	(Braess et al, 2000)
<i>In vivo studies</i>			
RNRi added to ara-C	Cancer type(s)	Results	Reference
dF-dC	L1210 and P388 (mouse)	3-fold and 1.6-fold increase in survival when dF-dC given prior to ara-C	(Lech-Maranda et al, 2000)
HU	L1210 (mouse)	Synergistic increase in survival	(Moran & Straus, 1980)
HU	L1210 (mouse)	2-fold increase in intracellular ara-CTP	(Walsh et al, 1980)

Table S4 | Summary of clinical studies combining irreversible inhibitors of ribonucleotide reductase with ara-C

Regimen	Patients	Results	Reference
100 mg/m ² ara-C continuous infusion on day 1-5, escalating doses of HU every 6 hours on day 1-5 of a 4 week course	21 patients with relapsed/refractory acute leukaemia or lymphoma	Toxicity: myelosuppression, skin rash Efficacy: complete response in 2 patients (CML (blast crisis and histiocytic lymphoma))	(Howell et al, 1982)
1 g HU every 2-3 h for a total of 10-15 doses prior to 1 mg/kg ara-C every 6 hours for a total of 4 doses (starting 8 h after the last HU dose)	4 patients with AML	Complete remission in 1 patient	(Sauer et al, 1976)
1200 mg/m ² HU 2 h prior to ara-C (dose escalation) on day 1,2,3 and 8,9,10 of 21 day course	26 paediatric patients with ALL, 7 paediatric patients with AML	Toxicity: tolerable Efficacy: complete response in 5 ALL and 1 AML patient, partial response in 3 ALL and 2 AML patients	(Dubowy et al, 2008)
24 h continuous infusion of 3 g HU on day 1 and 4 followed by 200 mg/m ² ara-C 48 h continuous infusion on day 2 to 3 and 5 to 6	13 patients with AML, 1 patient with CML (blast crisis)	3 complete and 3 partial responses (all AML)	(Zittoun et al, 1985)
500 mg HU every 6 h for 4 doses followed 12 h later by 100 mg/m ² ara-C as continuous infusion on day 1 to 3 and concomitantly 500 mg HU every 4 hours. Cycle duration: 28 days.	21 patients with lymphoma	Toxicity: myelosuppression Efficacy: 4 complete responses, 5 partial responses	(Schilsky et al, 1992; Schilsky et al, 1987)
20 mg/m ² ara-C daily as continuous infusion on day 1 to 21 with 500 mg HU every 12 hours (and 0.25 µg calcitriol every 12 hours)	29 elderly AML patients	Toxicity: myelosuppression Efficacy: 13 complete responses, 10 partial responses	(Slapak et al, 1992)
500 mg HU every 6 hours on day -2 to 0 and every 8 hours from day 0 to 19, 20 mg/m ² ara-C continuous infusion on	19 elderly AML patients	Toxicity: myelosuppression Efficacy: 7 complete responses, 6 partial responses	(Frenette et al, 1995)

day 0 to 19, 250 µg GM-CSF as continuous infusion on day - 1 to 6			
50 mg/kg HU on day 1 to 5 of cycle 1, 3 g/m ² ara-C every 12 hours on day 3 and 4 of cycle 1. In addition asparaginase, etoposide, dexamethasone, cyclophosphamide, mitoxantrone, methotrexate and hydrocortisone during either cycle 1 or 2	6 patients with relapsed/refractory paediatric ALL	Toxicity: myelosuppression, stomatitis Efficacy: 6 complete remission	(Higashigawa et al, 1997)
3-AP 105 mg/m ² as 6 h infusion on day 1 to 5 directly followed by 100 to 800 mg/m ² ara-C as 18 h infusion on day 1 to 5	28 patients with AML, 1 patient with MDS, 3 patients with ALL	Toxicity: mucositis, neuropathy, myelosuppression Efficacy: 4 complete responses (all AML)	(Yee et al, 2006)
3-AP (dose-escalation) from on day 2 to 5 as 2 h infusion 4 h prior to ara-C infusion, ara-C 1 g/m ² on day 1 to 5 as 2 h infusion	25 patients with relapsed/refractory AML	Toxicity: myelosuppression, methaemoglobinaemia Efficacy: 2 complete and 1 partial response	(Odenike et al, 2008)

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