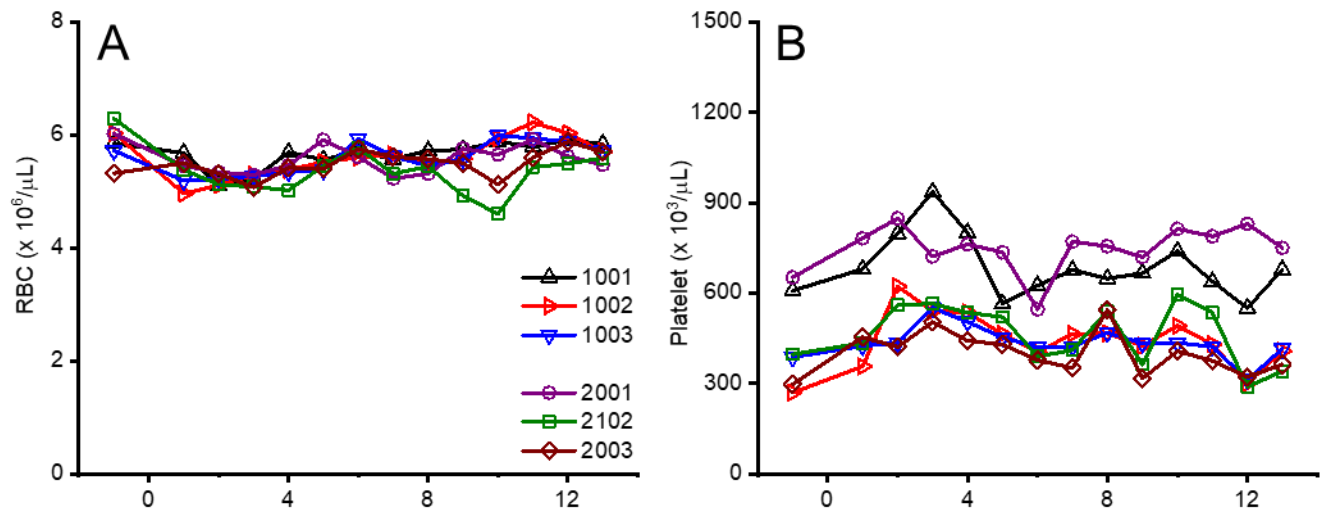


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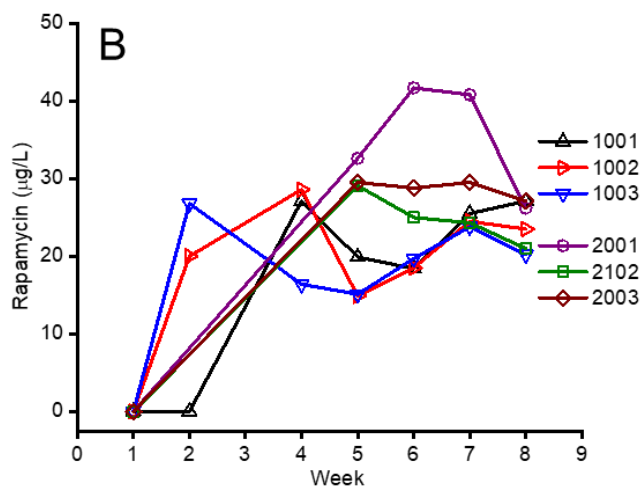
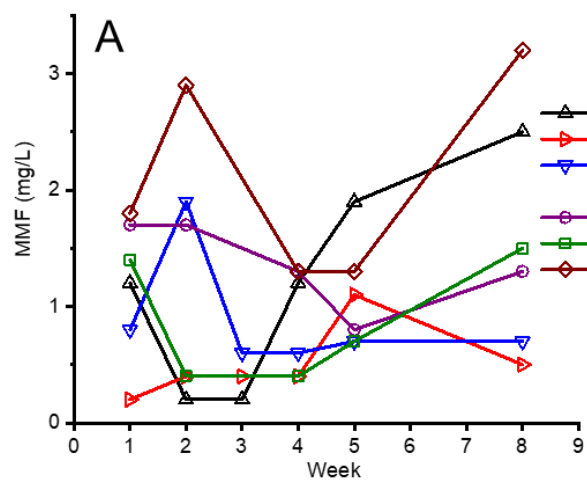
**Supplemental Information**

**Timing of Intensive Immunosuppression  
Impacts Risk of Transgene Antibodies  
after AAV Gene Therapy in Nonhuman Primates**

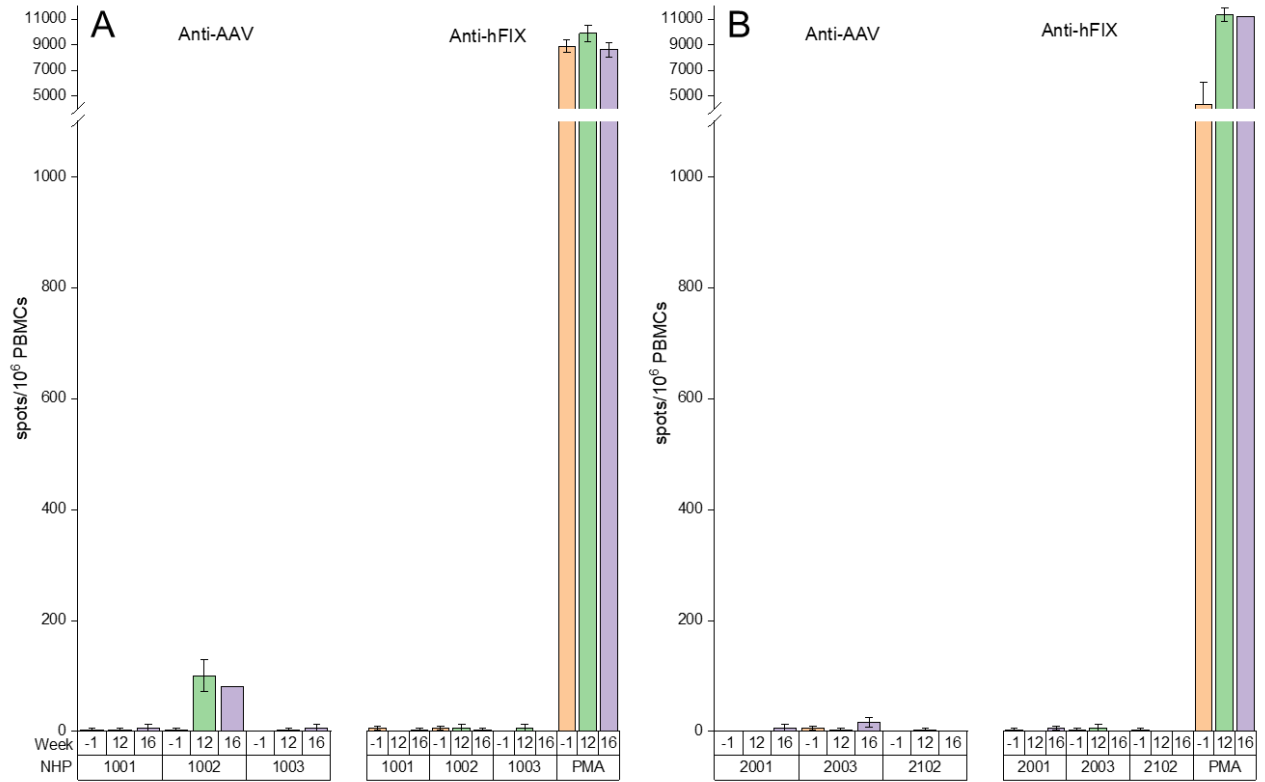
**Benjamin J. Samelson-Jones, Jonathan D. Finn, Patricia Favaro, J. Fraser  
Wright, and Valder R. Arruda**



**Supplementary Figure 1: Hematological parameters of NHPs before and after vector administration.** The red blood cell (RBC) count (A) and platelet count (B) of each NHP as indicated.

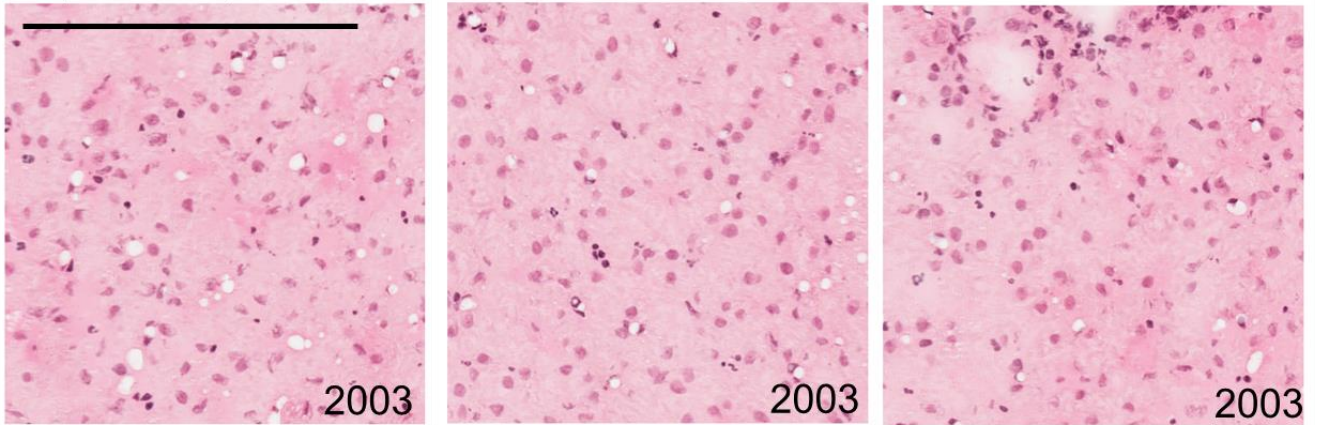


**Supplementary Figure 2: Plasma drug levels.** Plasma levels of MMF (A) and rapamycin (B) for each NHP through IS withdraw at week 8.

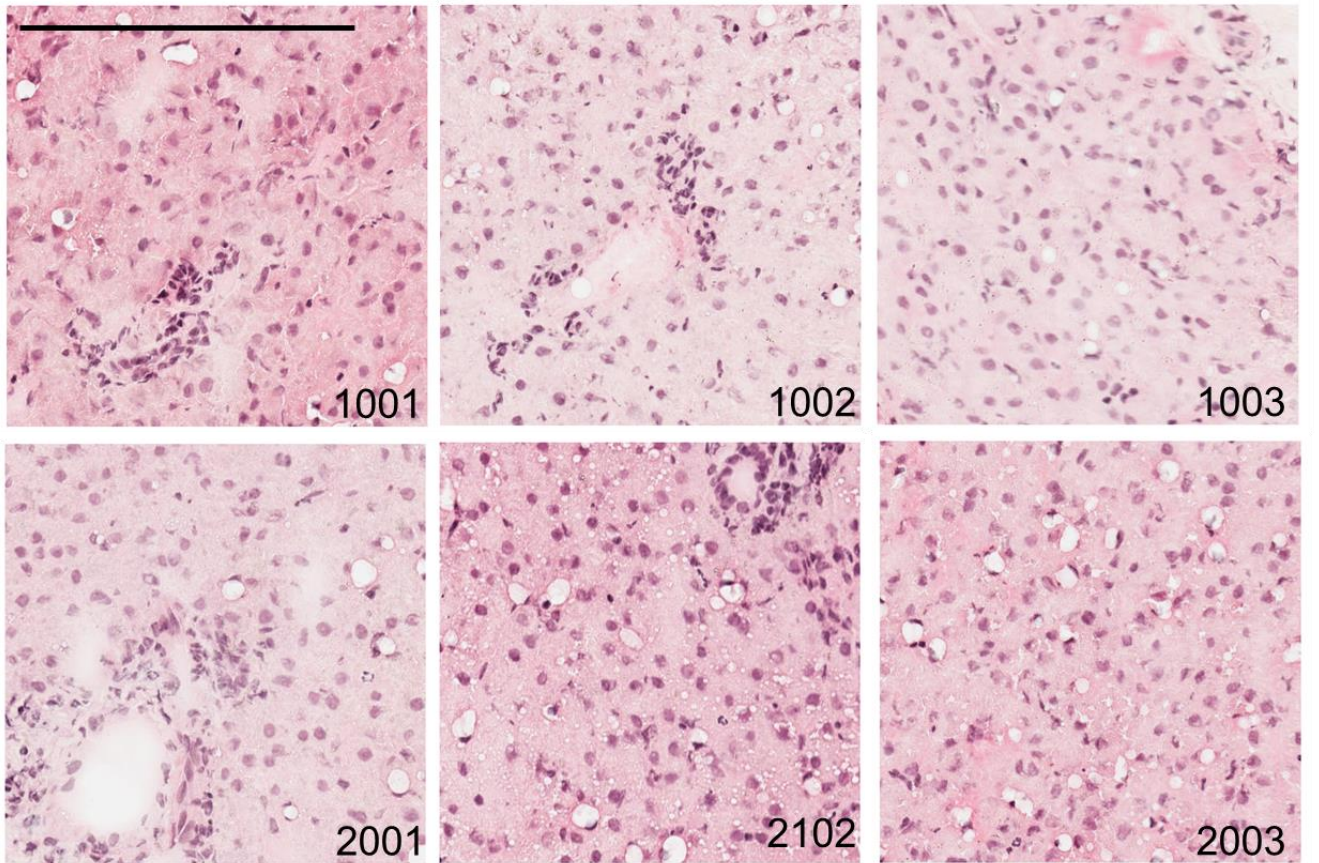


**Supplementary Figure 3: Cellular immune response to AAV and hFIX by ELISpot analysis before and after vector administration.** ELISpot analysis of PBMCs from NHPs in Group 1 (A), early ATG, or Group 2 (B), delayed ATG, collected at week -1, 12, and 16 and stimulated with either hFIX protein or empty AAV2 capsid particles, and detected based on IFN- $\gamma$  secretion. Phorbol myristate (PMA) is a positive control. Bars represent mean of triplicate measurement and error bars are  $\pm$  SEM. At some time points, no spots were detected.

A (Week 10)



B (Week 16)



**Supplementary Figure 4: Histology of liver biopsies.** Representative hematoxylin and eosin staining of liver biopsies obtained at 10 weeks (A) or 16 weeks (B) after vector administration of each NHP as indicated. Black bar indicates 200  $\mu\text{m}$ .