Concurrent Dexamethasone Limits the Clinical Benefit of Immune Checkpoint Blockade in Glioblastoma

Supplemental Table S1.

	Overall	Dexamethasone at αPD-(L)1 initiation		
		None	<2mg daily	≥2mg daily
n	181	117	29	35
IDH-wildtype	181	117	29	35
Age at diagnosis, yr (median, IQR)	57.5 (50.3-64.6)	57.4 (51.4-64.2)	58.3 (47.8-67.3)	57.5 (51.6-65.5)
Sex				
Female	79	52	13	14
Male	102	65	16	21
Disease setting				
Recurrent	137	84	24	29
Newly-diagnosed	44	33	5	6
MGMT promoter methylation status				
Unmethylated	97	64	15	18
Methylated	59	37	8	14
Partially methylated	14	9	3	2
n/a	11	7	3	1
KPS at initiation of αPD-(L)1				
≤70	31	12	11	8
80	56	36	8	12
≥90	88	65	9	14
n/a	6	4	1	1
GTR prior to αPD-(L)1				
Yes	80	56	10	14
No	99	60	18	21
n/a	2	1	1	0
Tumor volume at start of αPD-(L)1, mm^3 (median, IQR)	8,112 (4,094-15,604)	6,528 (2,382-11,100)	11,481 (6,206-26,973)	13,796 (5,883-25,675)
αPD-(L)1 agents*				
Pembrolizumab	76	49	14	13
Nivolumab	72	45	11	16
Durvalumab	29	20	3	6
Cemiplimab	5	3	1	1
Atezolizumab	1	1	0	0
Concurrent systemic therapy				
Yes	118	70	21	27
No	36	29	4	3

*2 patients received multiple αPD-(L)1 agents concurrently. αPD-(L)1 that was received as part of a clinical trial, included: NCT02336165 (n=29), NCT02337491 (26), NCT02017717 (19), NCT03661723

(16), NCT02054806 (12), NCT02852655 (12), NCT02327078 (8), NCT03452579 (6), NCT03491683 (5), NCT01460134 (4), NCT03576612 (4), NCT02311920 (3), NCT02658981 (3), NCT03636477 (3), NCT02526017 (1), NCT02667587 (1), NCT03637764 (1), NCT02335918 (1).