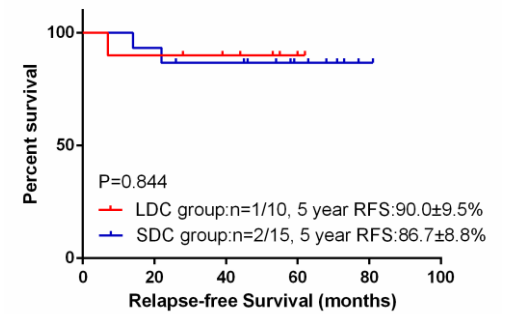
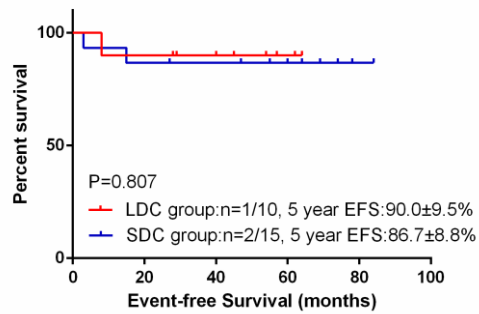
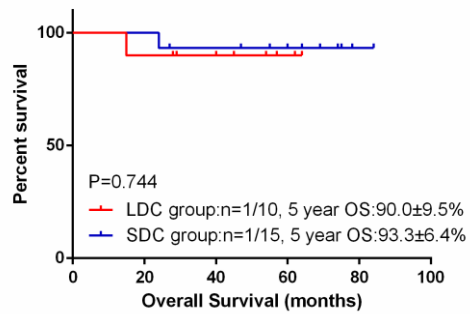


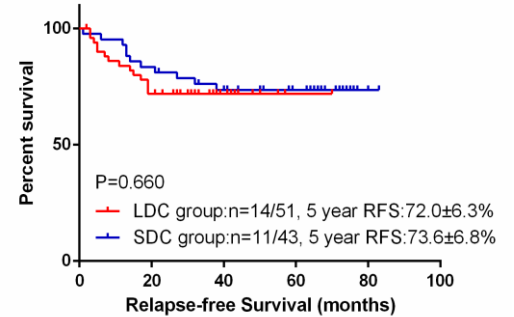
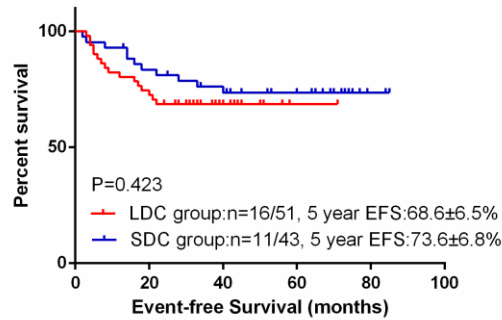
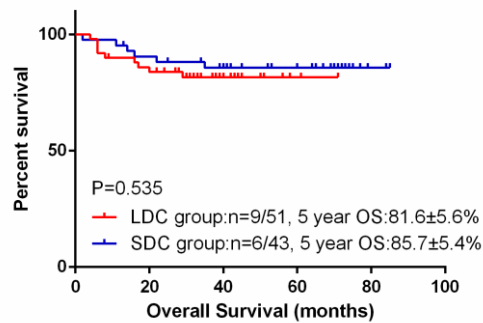
Supplemental Figure Legends

Supplemental Figure 1. **Outcome according to risk classification and treatment group.** Abbreviations: LDC, low-dose chemotherapy; SDC, standard-dose chemotherapy; OS, overall survival; EFS, event-free survival; RFS, relapse-free survival.

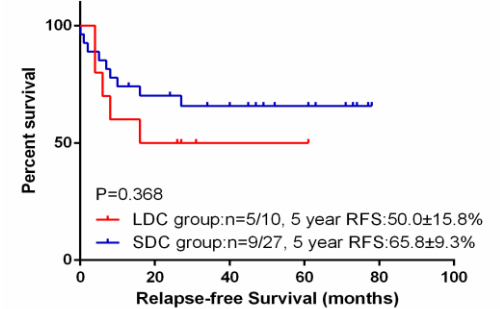
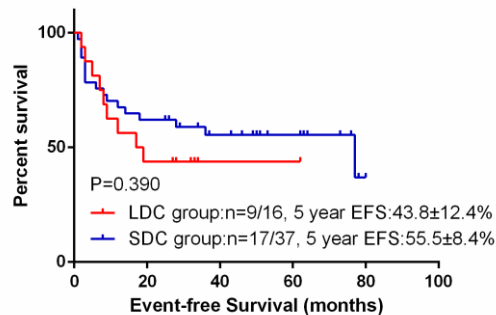
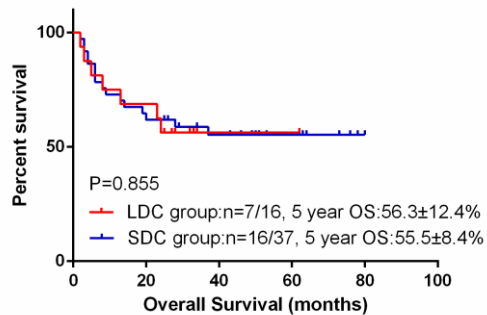
Definitive low risk



Definitive intermediate risk



Definitive high risk



Supplemental Table 1. Provisional risk classification

| Risk classification | Criteria |
|---------------------|--|
| Low risk | <ol style="list-style-type: none"> 1. <i>t(8;21)(q22;q22)/RUNX1–RUNX1T1</i>, <i>inv(16)(p13.1q22)</i>, <i>t(16;16)(p13.1;q22)/CBFB–MYH11</i>, <i>t(1;11)(q21;q23)/MLL–MLLT11(AF1Q)</i>, or 2. Normal karyotype with <i>NPM1</i> mutations, <i>CEBPα</i> biallelic mutations, and 3. Absence of numerical changes (-X, -Y) or mutations in AML-related genes (<i>CBL</i>, <i>NRAS</i>, <i>c-KIT</i>, <i>PTPN11</i>, <i>FLT3</i>) and 4. Absence of extramedullary involvement or myeloid sarcoma. |
| Intermediate risk | <ol style="list-style-type: none"> 1. Low-risk cases with $WBC \geq 100 \times 10^9/L$, numerical or structural karyotype abnormalities, extramedullary involvement (CNS, testicles, skin), or myeloid sarcoma; 2. <i>t(9;11)(p22;q23)/MLL–MLLT3(AF9)</i>; 3. Cases that do not meet the low-risk or high-risk criteria. |
| High risk | <ol style="list-style-type: none"> 1. No low-risk cases with $WBC \geq 100 \times 10^9/L$ or myeloid sarcoma; 2. Specific gene rearrangements: <i>t(5;11)(q35;p15.5)/NUP98–NSD1</i>, <i>t(6;11)(q27;q23)/KMT2A–AFDN(AF6)</i>, <i>t(4;11)(q21;q23)/KMT2A–AFF1(AF4)</i>, <i>t(10;11)(p12;q23)/KMT2A–MLLT10(AF10)</i>, <i>t(6;9)(p23;q34)/DEK–NUP214</i>, <i>t(7;12)(q36;p13)/MNX1–ETV6</i>, <i>t(9;22)(q34;q11.2)/BCR–ABL</i>, <i>t(8;16)(p11;p13)/KAT6A–CREBBP</i>, <i>t(16;21)(q24;q22)/RUNX1–CBFA2T3</i>, <i>inv(16)(p13.3q24.3)/CBFA2T3–GLIS2</i>, <i>t(11;12)(p15;p13)/NUP98–KDM5A</i>, <i>t(7;11)(p15.2;p15.4)/NUP98–HOX13</i>, <i>inv(3)(q21.3q26.2)</i>, <i>t(3;3)(q21.3q26.2)/RPN1–MECOM</i>, or <i>FLT3-ITD</i>; mutations in <i>RUNX1</i>, <i>TP53</i>, and <i>ASXL1</i>; <i>KMT2A</i> dup; or other <i>KMT2A</i> rearrangements; multidrug-resistant (MRD-1) AML; 3. Complex karyotype (harboring 3 or more acquired chromosome aberrations, including translocation); 4. AML-M6; 5. t-AML |

Supplemental Table 2 and Supplemental Table 3 appear online as separate Excel files.

Supplemental Table 4. Univariate analysis of overall survival and event-free survival for the whole cohort

| Factor | n (%) | Overall survival | | | Event-free survival | | |
|-------------------------------|------------|------------------|-------------|--------------|---------------------|-------------|----------|
| | | HR | 95% CI | <i>P</i> | HR | 95% CI | <i>P</i> |
| Age, years | | | | | | | |
| 1-10 | 129 (70.5) | Reference | | | Reference | | |
| <1 | 10 (5.5) | 1.864 | 0.658-5.283 | 0.241 | 1.170 | 0.420-3.259 | 0.763 |
| >10 | 44 (24.0) | 1.419 | 0.755-2.667 | 0.278 | 1.186 | 0.680-2.070 | 0.547 |
| Sex | | | | | | | |
| Male | 106 (57.9) | Reference | | | Reference | | |
| Female | 77 (42.1) | 1.168 | 0.665-2.051 | 0.589 | 1.009 | 0.621-1.639 | 0.972 |
| WBC, ×10⁹/L | | | | | | | |
| <100 | 152 (83.1) | Reference | | | Reference | | |
| ≥100 | 31 (16.9) | 2.241 | 1.205-4.167 | 0.011 | 1.421 | 0.788-2.563 | 0.242 |
| FAB subtype | | | | | | | |
| M1/M2 | 81 (44.3) | Reference | | | Reference | | |

| | | | | | | | |
|----------------------------------|------------|-----------|--------------|--------------|-----------|--------------|--------------|
| M4/M5 | 80 (43.7) | 1.977 | 1.032-3.787 | 0.040 | 1.465 | 0.863-2.489 | 0.158 |
| M7 | 8 (4.4) | 2.130 | 0.612-7.414 | 0.235 | 1.222 | 0.368-4.060 | 0.743 |
| Other | 14 (7.6) | 2.860 | 1.098-7.451 | 0.031 | 2.450 | 1.098-5.464 | 0.029 |
| Definitive risk | | | | | | | |
| Low risk | 25 (14.5) | Reference | | | Reference | | |
| Intermediate risk | 94 (54.7) | 2.165 | 0.495-9.469 | 0.305 | 2.573 | 0.781-8.484 | 0.120 |
| High risk | 53 (30.8) | 7.291 | 1.717-30.969 | 0.007 | 5.420 | 1.639-17.925 | 0.006 |
| Treatment group | | | | | | | |
| SDC/SDC | 96 (53.6) | Reference | | | Reference | | |
| LDC/SDC | 25 (14.0) | 1.703 | 0.791-3.665 | 0.174 | 2.004 | 1.025-3.917 | 0.042 |
| LDC/LDC | 58 (32.4) | 0.919 | 0.468-1.807 | 0.808 | 1.132 | 0.642-1.994 | 0.669 |
| Omacetaxine mepesuccinate | | | | | | | |
| No | 112 (63.6) | Reference | | | Reference | | |
| Yes | 64 (36.4) | 0.748 | 0.390-1.437 | 0.384 | 0.714 | 0.410-1.242 | 0.233 |
| HSCT | | | | | | | |
| No | 97 (53.0) | Reference | | | Reference | | |

| | | | | | | | |
|-----|-----------|-------|-------------|--------------|-------|-------------|-------|
| Yes | 86 (47.0) | 0.423 | 0.230-0.777 | 0.006 | 0.704 | 0.433-1.145 | 0.157 |
|-----|-----------|-------|-------------|--------------|-------|-------------|-------|

Abbreviations: CI, confidence interval ; FAB, French–American–British; HR, hazard ratio; HSCT, hematopoietic stem cell transplantation; LDC, low-dose chemotherapy; SDC, standard-dose chemotherapy; WBC, white blood cell.

Selected data on 46 study patients have been reported previously.²⁰

Supplemental Table 5. Multivariate Cox regression analysis of survival for patients with initial WBC count $< 100 \times 10^9/L$

| Variables | n (%) | Overall survival | | | Event-free survival | | |
|------------------------|-----------|------------------|--------------|--------------|---------------------|--------------|--------------|
| | | HR | 95% CI | <i>P</i> | HR | 95% CI | <i>P</i> |
| Treatment group | | | | | | | |
| SDC/SDC | 72 (49.0) | Reference | | | Reference | | |
| LDC/LDC | 53 (36.0) | 1.595 | 0.705-3.608 | 0.262 | 1.539 | 0.802-2.951 | 0.195 |
| LDC/SDC | 22 (15.0) | 1.698 | 0.636-4.534 | 0.291 | 1.819 | 0.806-4.106 | 0.150 |
| Initial risk | | | | | | | |
| Low risk | 25 (17.0) | Reference | | | Reference | | |
| Intermediate risk | 93 (63.3) | 3.281 | 0.753-14.302 | 0.114 | 3.434 | 1.039-11.349 | 0.043 |
| High risk | 29 (19.7) | 9.273 | 1.956-43.973 | 0.005 | 5.672 | 1.559-20.636 | 0.008 |
| HSCT | | | | | | | |
| No | 77 (52.4) | Reference | | | Reference | | |
| Yes | 70 (47.6) | 0.252 | 0.111-0.576 | 0.001 | 0.556 | 0.305-1.012 | 0.055 |

Abbreviations: CI, confidence interval; HR, hazard ratio; HSCT, hematopoietic stem cell transplantation; LDC, low-dose chemotherapy; SDC, standard-dose chemotherapy; WBC, white blood cell.

Supplemental Table 6. Selected adverse events observed in remission induction I and II and in consolidation I

| Adverse events | Remission induction I | | | | Remission induction II | | | | Consolidation I | | | |
|--------------------------------|---------------------------|---------------------------|-----------------------------|------------------|--------------------------|---------------------------|-----------------------------|------------------|--------------------------|--------------------------|-----------------------------|--------------|
| | LDC (N = 83*) n (%) | SDC (N = 100) n (%) | Total (N = 183) n (%) | <i>P</i> † | LDC (N = 58) n (%) | SDC (N = 118) n (%) | Total (N = 176) n (%) | <i>P</i> † | LDC (N = 54) n (%) | SDC (N = 97) n (%) | Total (N = 151) n (%) | <i>P</i> † |
| Platelet recovery, days | | | | | | | | | | | | |
| Median | 11 | 16 | 14 | <0.001 | 3 | 7.5 | 4 | <0.001 | 5 | 8 | 7 | 0.005 |
| Range | 0-30 | 3-33 | 0-33 | | 0-23 | 0-37 | 0-37 | | 0-25 | 0-34 | 0-34 | |
| Days with neutropenia | | | | | | | | | | | | |
| Median | 12 | 20 | 17 | <0.001 | 6.5 | 15 | 12 | <0.001 | 13.5 | 16.0 | 14.0 | 0.012 |
| Range | 0-30 | 3-47 | 0-47 | | 0-19 | 5-49 | 0-49 | | 6-29 | 6-67 | 6-67 | |
| Pneumonia | | | | | | | | | | | | |
| No | 57 (68.7) | 54 (54.0) | 111 (60.7) | 0.019 | 56 (96.6) | 95 (80.5) | 151 (85.8) | 0.013 | 40 (74.1) | 77 (79.4) | 117 (77.5) | 0.756 |
| Grade 1 or 2 | 6 (7.2) | 3 (3.0) | 9 (4.9) | | 0 (0.0) | 2 (1.7) | 2 (1.1) | | 0 (0.0) | 1 (1.0) | 1 (0.7) | |
| Grade 3 or 4 | 20 (24.1) | 43 (43.0) | 63 (34.4) | | 2 (3.4) | 20 (17.0) | 22 (12.5) | | 14 (25.9) | 18 (18.6) | 32 (21.1) | |
| Grade 5 | 0 (0.0) | 0 (0.0) | 0 (0.0) | | 0 (0.0) | 1 (0.8) | 1 (0.6) | | 0 (0.0) | 1 (1.0) | 1 (0.7) | |
| Febrile neutropenia | | | | | | | | | | | | |
| No | 32 (38.6) | 9 (9.0) | 41 (22.4) | <0.001 | 47 (81.0) | 13 (11.0) | 60 (34.1) | <0.001 | 4 (7.4) | 11 (11.4) | 15 (9.9) | 0.727 |
| Grade 1 or 2 | 0 (0.0) | 0 (0.0) | 0 (0.0) | | 0 (0.0) | 0 (0.0) | 0 (0.0) | | 0 (0.0) | 0 (0.0) | 0 (0.0) | |
| Grade 3 or 4 | 51 (61.4) | 91 (91.0) | 142 (77.6) | | 11 (19.0) | 104 (88.2) | 115 (65.3) | | 50 (92.6) | 85 (87.6) | 135 (89.4) | |
| Grade 5 | 0 (0.0) | 0 (0.0) | 0 (0.0) | | 0 (0.0) | 1 (0.8) | 1 (0.6) | | 0 (0.0) | 1 (1.0) | 1 (0.7) | |
| Sepsis | | | | | | | | | | | | |

| | | | | | | | | | | | | | |
|-----------------------------------|------------|-------------|-------------|---------|------------|------------|------------|-------|------------|------------|-------------|-------|---------|
| No | 81 (97.6) | 95 (95.0) | 176 (96.2) | 0.459 | 55 (94.8) | 105 (89.0) | 160 (90.9) | 0.270 | 44 (81.5) | 69 (71.1) | 113 (74.8) | 0.350 | |
| Grade 1 or 2 | 0 (0.0) | 0 (0.0) | 0 (0.0) | | 0 (0.0) | 0 (0.0) | 0 (0.0) | | 0 (0.0) | 0 (0.0) | 0 (0.0) | | 0 (0.0) |
| Grade 3 or 4 | 2 (2.4) | 5 (5.0) | 7 (3.8) | | 3 (5.2) | 13 (11.0) | 16 (9.1) | | 10 (18.5) | 27 (27.9) | 37 (24.5) | | |
| Grade 5 | 0 (0.0) | 0 (0.0) | 0 (0.0) | | 0 (0.0) | 0 (0.0) | 0 (0.0) | | 0 (0.0) | 1 (1.0) | 1 (0.7) | | |
| Bleeding | | | | | | | | | | | | | |
| No | 81 (97.6) | 88 (88.0) | 169 (92.4) | 0.046 | 58 (100.0) | 113 (95.8) | 171 (97.2) | 0.400 | 54 (100.0) | 97 (100.0) | 151 (100.0) | -- | |
| Grade 1 or 2 | 0 (0.0) | 6 (6.0) | 6 (3.3) | | 0 (0.0) | 4 (3.4) | 4 (2.3) | | 0 (0.0) | 0 (0.0) | 0 (0.0) | | |
| Grade 3 or 4 | 2 (2.4) | 5 (5.0) | 7 (3.8) | | 0 (0.0) | 1 (0.8) | 1 (0.5) | | 0 (0.0) | 0 (0.0) | 0 (0.0) | | |
| Grade 5 | 0 (0.0) | 1 (1.0) | 1 (5.5) | | 0 (0.0) | 0 (0.0) | 0 (0.0) | | 0 (0.0) | 0 (0.0) | 0 (0.0) | | |
| Oral mucositis | | | | | | | | | | | | | |
| No | 82 (98.8) | 89 (89.0) | 171 (93.4) | 0.007 | 58 (100.0) | 115 (97.5) | 173 (98.3) | 0.552 | 54 (100.0) | 95 (97.9) | 149 (98.7) | 0.537 | |
| Grade 1 or 2 | 0 (0.0) | 0 (0.0) | 0 (0.0) | | 0 (0.0) | 0(0.0) | 0 (0.0) | | 0 (0.0) | 0 (0.0) | 0 (0.0) | | 0 (0.0) |
| Grade 3 or 4 | 1 (1.2) | 11 (11.0) | 12 (6.6) | | 0 (0.0) | 3 (2.5) | 3 (1.7) | | 0 (0.0) | 2 (2.1) | 2 (1.3) | | |
| Perianal rectal infection | | | | | | | | | | | | | |
| No | 83 (100.0) | 98 (98.0) | 181 (98.9) | 0.502 | 58 (100.0) | 109 (92.4) | 167 (94.9) | 0.031 | 54 (100.0) | 93 (95.9) | 147 (97.4) | 0.297 | |
| Grade 1 or 2 | 0 (0.0) | 0 (0.0) | 0 (0.0) | | 0 (0.0) | 0 (0.0) | 0 (0.0) | | 0 (0.0) | 0 (0.0) | 0 (0.0) | | 0 (0.0) |
| Grade 3 or 4 | 0 (0.0) | 2 (2.0) | 2 (1.1) | | 0 (0.0) | 9 (7.6) | 9 (5.1) | | 0 (0.0) | 4 (4.1) | 4 (2.6) | | |
| Gastrointestinal infection | | | | | | | | | | | | | |
| No | 83 (100.0) | 100 (100.0) | 183 (100.0) | -- | 58 (100.0) | 111 (94.1) | 169 (96.0) | 0.097 | 54 (100.0) | 97 (100.0) | 151 (100.0) | -- | |
| Grade 1 or 2 | 0 (0.0) | 0 (0.0) | 0 (0.0) | 0 (0.0) | 0 (0.0) | 0 (0.0) | 0 (0.0) | | 0 (0.0) | 0 (0.0) | 0 (0.0) | | |
| Grade 3 or 4 | 0 (0.0) | 0 (0.0) | 0 (0.0) | 0 (0.0) | 7 (5.9) | 7 (4.0) | 0 (0.0) | | 0 (0.0) | 0 (0.0) | | | |

Abbreviations: LDC, low-dose chemotherapy; SDC, standard-dose chemotherapy.

* Selected data on 46 study patients have been previously reported.²⁰

† The Mann–Whitney U test was used for continuous variables; Fisher’s exact test was used for categorical variables with 2×2 charts; Monte Carlo analysis was used for categorical variables with N×2 charts.

Supplemental Table 7. Blood products usage and cost of remission induction I and II and consolidation

| | Remission induction I | | | | Remission induction II | | | | Consolidation I | | | |
|-----------------------------------|-----------------------|------------------|--------------------|------------------|------------------------|------------------|--------------------|------------------|-----------------|-----------------|--------------------|------------------|
| Treatment | LDC (N = 83*) | SDC (N = 100) | Total (N = 183) | P | LDC (N = 58) | SDC (N = 118) | Total (N = 176) | P | LDC (N = 54) | SDC (N = 97) | Total (N = 151) | P |
| PRBCs, U | | | | | | | | | | | | |
| Median | 3 | 5 | 4 | <0.001 | 0 | 3 | 2 | <0.001 | 1 | 2 | 2 | <0.001 |
| Range | 0-12 | 1-24 | 0-24 | | 0-12 | 0-14 | 0-14 | | 0-6 | 0-12 | 0-12 | |
| PLTs, IU | | | | | | | | | | | | |
| Median | 30 | 40 | 30 | 0.001 | 10 | 20 | 20 | <0.001 | 20 | 20 | 20 | 0.096 |
| Range | 0-90 | 10-150 | 0-150 | | 0-50 | 0-90 | 0-90 | | 0-80 | 5-70 | 0-80 | |
| Cost of transfusions, \$ | | | | | | | | | | | | |
| Median | 723 | 973 | 825 | <0.001 | 210 | 569 | 450 | <0.001 | 420 | 600 | 540 | 0.011 |
| Range | 0.0-2,325 | 300-3,870 | 0.0-3,870 | | 0.0-1,286 | 0.0-3,804 | 0.0-3,804 | | 0.0-1,901 | 105-1,631 | 0.0-1,910 | |
| Cost of antibiotics, \$ | | | | | | | | | | | | |
| Median | 1,350 | 2,710 | 2,162 | <0.001 | 0.0 | 1,573 | 868 | <0.001 | 1,259 | 1,510 | 1,413 | 0.485 |
| Range | 0.0-1,726 | 0.0-13,700 | 0.0-1,726 | | 0.0-3,973 | 0.0-11,047 | 0.0-11,047 | | 0.0-8,445 | 0.0-9,310 | 0.0-9,310 | |
| Total cost, \$[†] | | | | | | | | | | | | |
| Median | 9,043 | 10,731 | 9,805 | 0.082 | 2,369 | 5,398 | 4,369 | <0.001 | 5,574 | 5,478 | 5,500 | 0.930 |
| Range | 4,016-33,746 | 958-28,503 | 958-33,746 | | 990-15,769 | 1,203-22,478 | 990-22,478 | | 1,886-22,596 | 776-20,247 | 776-22,596 | |

Abbreviations: LDC, low-dose chemotherapy; PRBCs, packed red blood cells; PLTs, platelets; SDC, standard-dose chemotherapy.

* Selected data on 46 study patients have been previously reported.²⁰

†Total cost includes chemotherapy, transfusions of blood and platelets, antibiotics, various tests, and inpatient consumptions.

Supplemental Table 8. Selected supportive care measures

| Pediatric Oncology Unit | Characteristics |
|--|---|
| Hospital rooms for pediatric hematology | The pediatric hematology unit has 24 rooms without air filters or controlled ventilation pressure. There is a sink for handwashing and a dedicated bathroom for the patients. The number of patients per room varies from 1 to 3, and one parent for each patient is allowed. |
| Clinical laboratory | Routine ancillary tests are available 24 hours per day/7 days a week. Time to return results is as follows: <ol style="list-style-type: none"> 1. CBC and electrolytes—1 hour 2. Biochemical panel—2 to 4 hours 3. Microbiology—8 to 12 hours |
| Hospital Infection Control | A hospital infection control committee monitors the entire hospital's infection rates and makes recommendations. |
| Nursing | Dedicated pediatric oncology trained nurses or general pediatric nurses are available. A ratio of nurses to patients of 1:3 is maintained, including on weekends. |
| Prophylactic antibiotics and antifungals | Prophylactic antibiotics are not used. Fluconazole is used during periods of neutropenia. |
| Central line catheters | A peripheral inserted central venous catheter, port-cath, or tunneled central venous catheter is selected according to the patients' age, physical status, and type of therapy. A nurse provides routine care according to the requirements of each central line catheter. |
| Patient and family education | Education for patients and families by nurses and physicians is started at the time of admission. The educational content includes nutritional guidelines during chemotherapy, hygiene, and infection prevention and detection. Parents are instructed to report immediately to the hospital in cases of abnormal temperature or signs of bleeding. |
| Fever and neutropenia | All patients with AML start antimicrobial during neutropenia if they develop fever, oral mucositis, skin infection, diarrhea, or hemodynamic instability. If the ANC is less than $0.5 \times 10^9/L$, meropenem or imipenem is used first. If the patient does not improve within 48 hours, vancomycin is started. Teicoplanin or linezolid is administered if patients do not tolerate vancomycin. The antibiotic and antifungal coverage is modified according to the results of microbiology tests. Caspofungin, fluconazole, and voriconazole are available. If the ANC is more than $0.5 \times 10^9/L$, a second- or third-generation cephalosporin is used as a first antibiotic. |
| Physician coverage | The unit is staffed by two teams, each consisting of one senior physician coordinating the treatment with two junior pediatric hematologists, undergraduate medical students, and residents in training. |

| | |
|----------------------------------|--|
| Intensive care unit | A general pediatric intensive care unit is available. Pediatric acute care attendings and the primary senior hematologist coordinate the care. |
| Blood products | Platelet concentrate and packed red cells are transfused for patients with a platelet count less than $20 \times 10^9/L$ and a hemoglobin level less than 60 g/L, respectively. The blood products are leukoreduced but are not irradiated (except during HSCT). |
| Housing for families | If the family's home is more than 2 driving hours from the hospital, parents are instructed to rent a house near the hospital. |
| Other hospitals in the community | Depending on the distance between the hospital and the patient's home, the primary physician on service determines whether to refer a patient with fever to another local hospital. The primary physician on service monitors the progress of the patients admitted to the treating hospitals. |