

Supplemental Appendix:

Assessment of Systemic and Gastrointestinal Tissue Damage Biomarkers for GVHD Risk Stratification

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Table S1: Patient distribution by center

	Training (n=352)	Validation (n=378)
Bambino Gesu Children's Hospital	0	18
Children's Hospital of Los Angeles	0	7
City of Hope Comprehensive Cancer Center	0	11
Columbia University Medical Center	0	5
Emory University	4	18
Hospital for Sick Children	0	1
Icahn School of Medicine at Mount Sinai	17	34
King Chulalongkorn Memorial Hospital	7	2
Mayo Clinic	21	23
Massachusetts General Hospital	0	36
Ohio State University	22	57
University Hospital Carl Gustav Carus Dresden	9	1
University of Erlangen	0	31
University of Hamburg	41	39
University of Michigan	178	4
University of Pennsylvania	11	22
University of Regensburg	32	36
University of Würzburg	10	11
Vanderbilt University	0	22
Total	352	378

Table S2: AICs for each algorithm in the training cohort.

1 Biomarker	AIC	2 Biomarker	AIC	3 Biomarker	AIC	4 Biomarker	AIC
ST2	807.7	+ REG3	792.2	+ TNFR1	792.5	+ TIM3	793.0
				+ TIM3	793.9		
		+ TNFR1	803.3	+ TIM3	803.5		
		+ TIM3	809.7				
REG3	799.8	+ TNFR1	795.8	+ TIM3	796.8		
		+ TIM3	801.8				
TNFR1	809.7	+ TIM3	810.3				
TIM3	829.3						

The first column contains algorithms of single biomarkers. Additional biomarkers are added sequentially in each cell to the right.

Table S3: TNFR1+TIM3 algorithm and threshold performance.

Algorithm*: $\log[-\log(1 - \hat{p})] = -9.266 + 2.470 \log_{10} \text{TNFR1} - 0.375 \log_{10} \text{TIM3}$

Threshold	Sensitivity	Specificity	Product
0.19	0.65	0.60	0.390
0.2	0.63	0.65	0.410
0.21	0.60	0.70	0.420
0.22	0.56	0.72	0.403
0.23	0.53	0.75	0.398

Table S4: TNFR1+ST2 algorithm and threshold performance.

Algorithm*: $\log[-\log(1 - \hat{p})] = -11.287 + 1.062 \log_{10} \text{ST2} + 1.329 \log_{10} \text{TNFR1}$

Threshold	Sensitivity	Specificity	Product
0.2	0.74	0.64	0.474
0.21	0.72	0.66	0.475
0.22	0.68	0.70	0.476
0.23	0.65	0.72	0.468
0.24	0.63	0.75	0.473

Table S5: TNFR1+REG3 α algorithm and threshold performance.

Algorithm*: $\log[-\log(1 - \hat{p})] = -7.543 + 1.218 \log_{10} \text{TNFR1} + 0.884 \log_{10} \text{REG3}\alpha$

Threshold	Sensitivity	Specificity	Product
0.14	0.88	0.45	0.396
0.15	0.82	0.52	0.426
0.16	0.81	0.57	0.462
0.17	0.74	0.60	0.444
0.18	0.67	0.64	0.429

Table S6: ST2+REG3 α algorithm and threshold performance.

Algorithm*: $\log[-\log(1 - \hat{p})] = -7.823 + 1.027 \log_{10} \text{ST2} + 0.875 \log_{10} \text{REG3}\alpha$

Threshold	Sensitivity	Specificity	Product
0.19	0.68	0.66	0.449
0.2	0.68	0.68	0.462
0.21	0.65	0.72	0.468
0.22	0.63	0.72	0.454
0.23	0.61	0.74	0.451

* \hat{p} = estimated predicted probability of six month NRM

Table S7: AUC of the ROC curves for individual biomarker algorithms in the validation cohort.

Biomarker	AUC
TNFR1	0.58
TIM3	0.56
IL6	0.55
ST2	0.73
REG3 α	0.75

Table S8: Performance of two biomarker algorithms using the thresholds that provide sensitivity closest to 0.8

Algorithm	Threshold	Sensitivity	Specificity	PPV	NPV
TNFR1+TIM3	0.13	0.82	0.24	0.15	0.89
TNFR1+ST2	0.12	0.82	0.34	0.17	0.92
TNFR1+REG3 α	0.17	0.80	0.53	0.22	0.94
ST2+REG3 α	0.15	0.84	0.59	0.26	0.96

Table S9: Performance of two biomarker algorithms using the thresholds that provide specificity closest to 0.8

Algorithm	Threshold	Sensitivity	Specificity	PPV	NPV
TNFR1+TIM3	0.26	0.33	0.81	0.23	0.88
TNFR1+ST2	0.22	0.55	0.80	0.31	0.91
TNFR1+REG3 α	0.28	0.47	0.80	0.29	0.9
ST2+REG3 α	0.24	0.67	0.82	0.39	0.94

Table S10: ST2+REG3 α algorithm performance characteristics in patients presenting with LGI \pm other or skin only GVHD

	Sensitivity	Specificity	PPV	NPV
LGI \pm other	0.93	0.61	0.48	0.96
Skin only	0.47	0.81	0.17	0.95

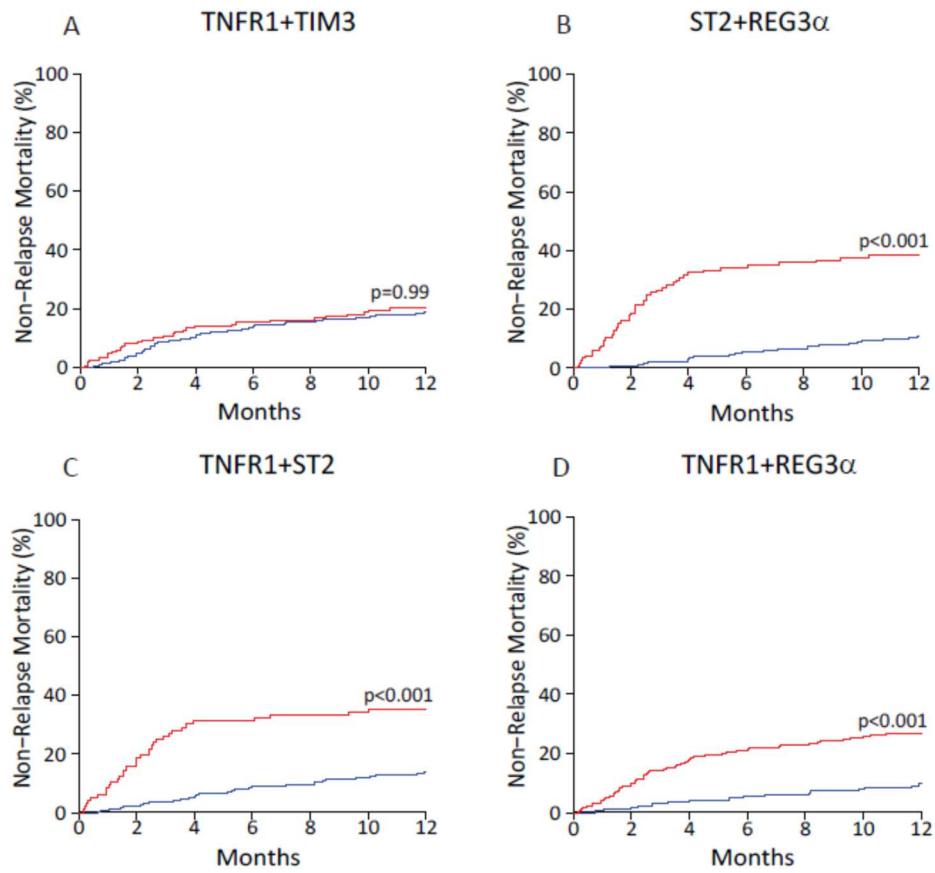


Figure S1: 12 month NRM for risk groups defined by two biomarker algorithms. The cumulative incidence of 12 month NRM is shown for high (red) and low (blue) risk patients (A) TNFR1+TIM3 (20% vs 19%, $p=0.99$); (B) ST2+REG3 α (38% vs 11%, $p<0.001$); (C) TNFR1+ST2 (35% vs 14%, $P<0.001$); and (D) TNFR1+REG3 α (27% vs 10%, $p<0.001$).

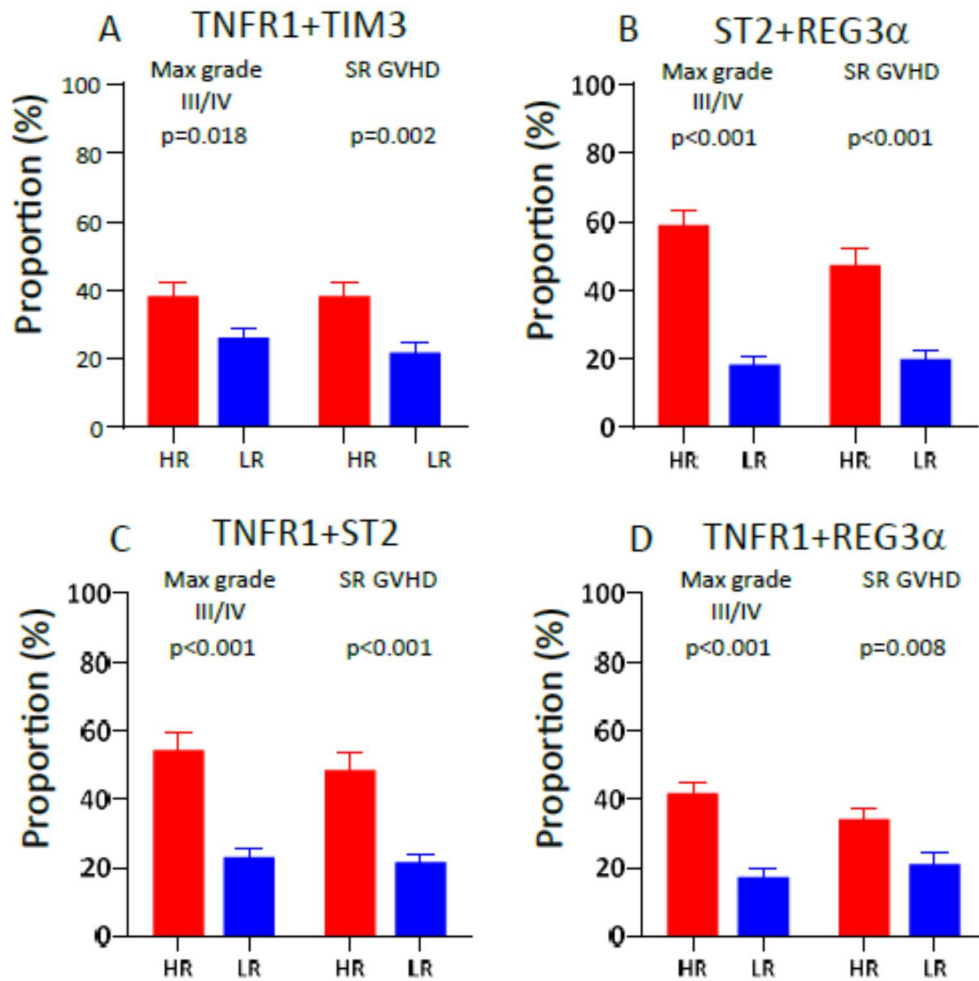


Figure S2: GVHD outcomes in risk groups defined by two biomarker algorithms. The proportion of patients with maximum grade III/IV GVHD for high risk patients (red) compared to low risk patients (blue) for each algorithm: (A) TNFR1+TIM3 (38% vs 26%, $p=0.018$), (B) ST2+REG3 α (59% vs 18%, $p<0.001$), (C) TNFR1+ST2 (54% vs 23%, $P <0.001$), and (D) TNFR1+REG3 α (42% vs 17%, $p <0.001$). The proportion of patients who developed steroid refractory GVHD for high risk patients compared to low risk patients for each algorithm was: (A) TNFR1+TIM3 (38% vs 22%, $p=0.002$), (B) ST2+REG3 α (47% vs 20%, $p<0.001$), (C) TNFR1+ST2 (48% vs 21%, $p <0.001$), and (D) TNFR1+REG3 α (34% vs 21%, $p=0.008$).

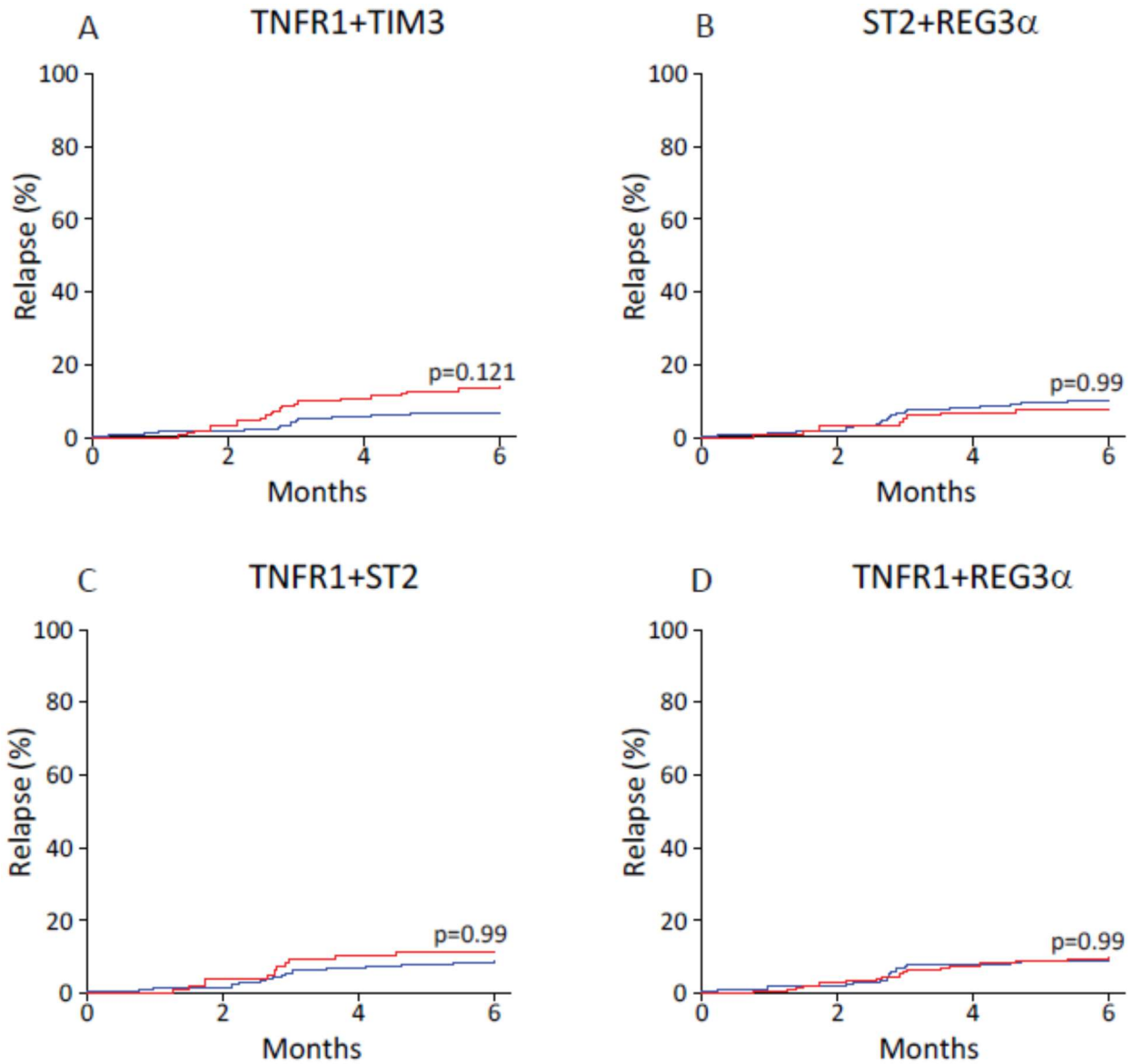


Figure S3: Cumulative incidence of relapse in risk groups defined by two biomarker algorithms. The cumulative incidence of relapse is shown for high (red) and low (blue) risk patients: (A) TNFR1+TIM3 (14% vs 7%, $p=0.121$); (B) ST2+REG3α (8% vs 10%, $p=0.99$); (C) TNFR1+ST2 (11% vs 9%, $P=0.99$); and (D) TNFR1+REG3α (10% vs 9%, $p=0.99$).

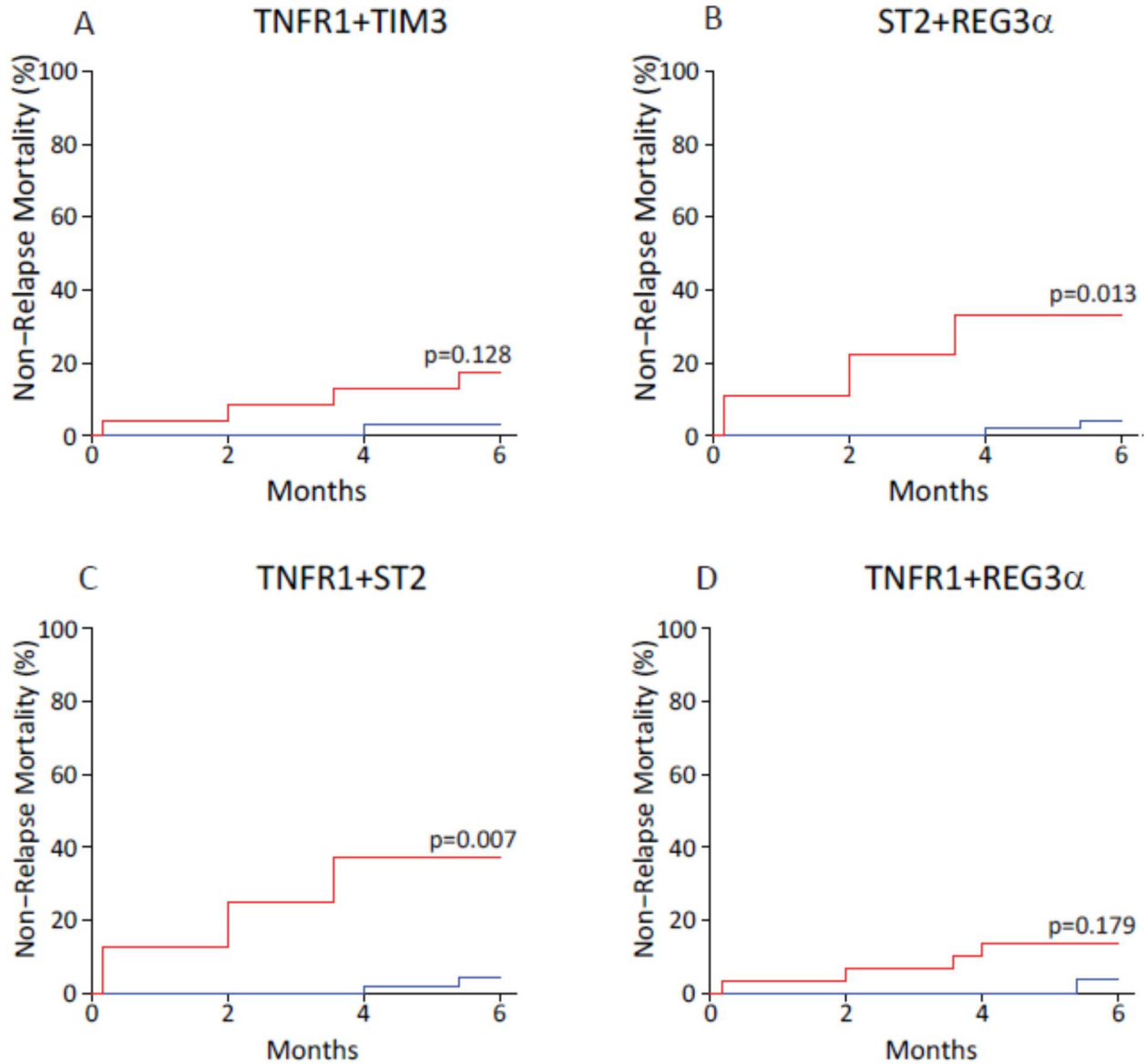


Figure S4: 6 month NRM for risk groups defined by two biomarker algorithms in patients who received post-transplant cyclophosphamide as GVHD prophylaxis. The cumulative incidence of 6 month NRM is shown for high (red) and low (blue) risk patients (A) TNFR1+TIM3 (17% vs 3%, $p=0.128$); (B) ST2+REG3 α (33% vs 4%, $p=0.013$); (C) TNFR1+ST2 (38% vs 4%, $P=0.007$); and (D) TNFR1+REG3 α (14% vs 4%, $p=0.179$)