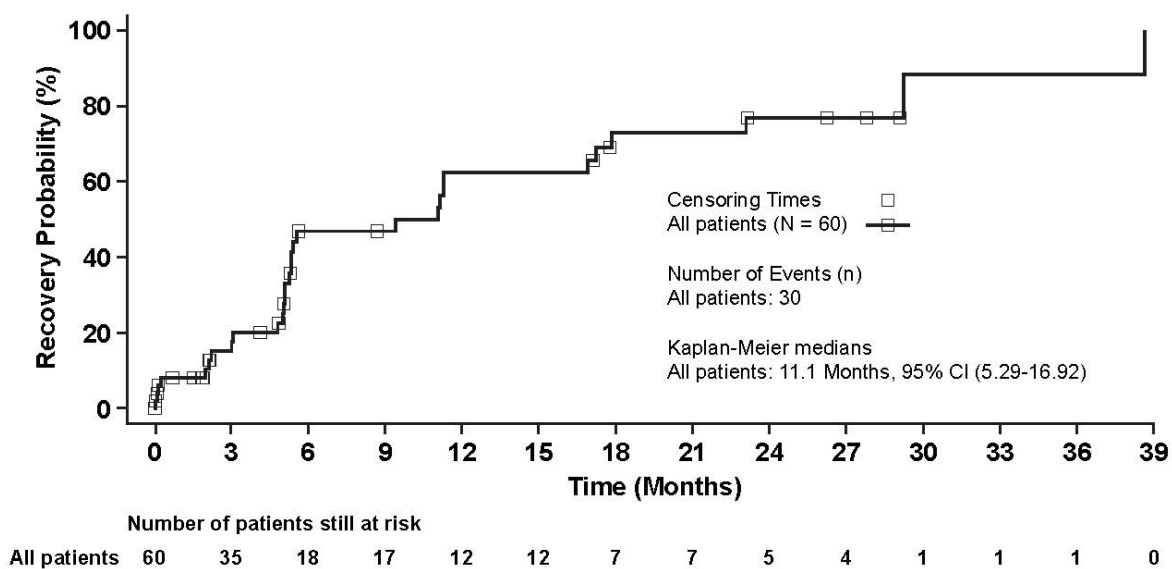


## SUPPLEMENTAL FIGURES AND TABLES

### Supplemental Figure 1. B-cell recovery in responders censoring for anti-cancer therapies.

Only patients who achieved a BOR of CR or PR are summarized. Time to B-cell recovery is defined as the time from onset of remission date to the earliest time when the CD19+ count is quantifiable (ie, not below limit of quantification). All responding patients were censored or experienced B-cell recovery by 39 months. BOR, best overall response; CI, confidence interval; CR, complete response; PR, partial response.



**Supplemental Table 1. Rituximab and B-cell aplasia prior to tisagenlecleucel infusion**

| <b>Prior to tisagenlecleucel infusion</b> | <b>Responders (n=60)</b> | <b>All patients (N=115)</b> |
|---|--------------------------|-----------------------------|
| Patients with B-cell aplasia, n (%)       | 44 (73)                  | 85 (74)                     |
| Patients' start date of rituximab, n (%)  |                          |                             |
| ≤1 month prior                            | 1 (2)                    | 3 (3)                       |
| >1 to ≤3 months prior                     | 2 (3)                    | 3 (3)                       |
| >3 to ≤6 months prior                     | 4 (7)                    | 19 (16.5)                   |
| >6 to ≤12 months prior                    | 21 (35)                  | 43 (37)                     |
| >12 months prior                          | 32 (53)                  | 45 (39)                     |

Note: Data were not available for 2 patients.

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**Supplemental Table 2. Hypogammaglobulinemia and IVIG use post tisagenlecleucel infusion**

|  | <b>Responders (n=60)</b> | <b>All patients (N=115)</b> |
|--|--------------------------|-----------------------------|
| Hypogammaglobulinemia, n (%)   | 35 (58)                  | 62 (54)                     |
| Hypogammaglobulinemia with IgG $\geq$ 4 g/L prior to infusion, n/N (%) | 16/36 (44)               | 29/68 (43)                  |
| Patients with hypogammaglobulinemia who received IVIG, n (%)           | 20 (33)                  | 27 (23)                     |

IgG, immunoglobulin G; IVIG, intravenous immunoglobulin.

**Supplemental Table 3. Secondary malignancies at any time post tisagenlecleucel infusion among infused patients (N=115)**

| <b>Secondary malignancy, n (%)</b>    | <b>All grades</b> | <b>Grade ≥3</b> | <b>Prior ASCT</b> | <b>Number of prior lines of therapy</b> |
|---------------------------------------|-------------------|-----------------|-------------------|---|
| <b>Total</b>                          | <b>9 (8)</b>      | <b>7 (6)</b>    | <b>4</b>          | <b>N/A</b>                              |
| Prostate cancer                       | 3 (3)             | 3 (3)           | 1                 | 2-5                                     |
| Basal cell carcinoma                  | 2 (2)             | 0               | 1                 | 1-2                                     |
| Acute myeloid leukemia                | 1 (0.9)           | 1 (0.9)         | 1                 | 3 <sup>a</sup>                          |
| Invasive ductal breast carcinoma      | 1 (0.9)           | 1 (0.9)         | 1                 | 4                                       |
| Myelodysplastic syndrome <sup>b</sup> | 1 (0.9)           | 1 (0.9)         | 0                 | 3 <sup>c</sup>                          |
| Neuroendocrine carcinoma <sup>d</sup> | 1 (0.9)           | 1 (0.9)         | 0                 | 2                                       |

<sup>a</sup>Lines of prior therapies included one regimen of rituximab, doxorubicin, etoposide, vincristine, and cyclophosphamide; one regimen of rituximab and cytarabine; and one regimen of carmustine, cytarabine, etoposide, melphalan, gemcitabine, and oxaliplatin. <sup>b</sup>Patient experienced 100 days of isolated neutropenia before MDS diagnosis. <sup>c</sup>Lines of prior therapies included selinexor, ibrutinib, and pixantrone. <sup>d</sup>Patient did not respond to tisagenlecleucel therapy.

ASCT, autologous stem cell transplantation; MDS, myelodysplastic syndrome; N/A, not applicable.