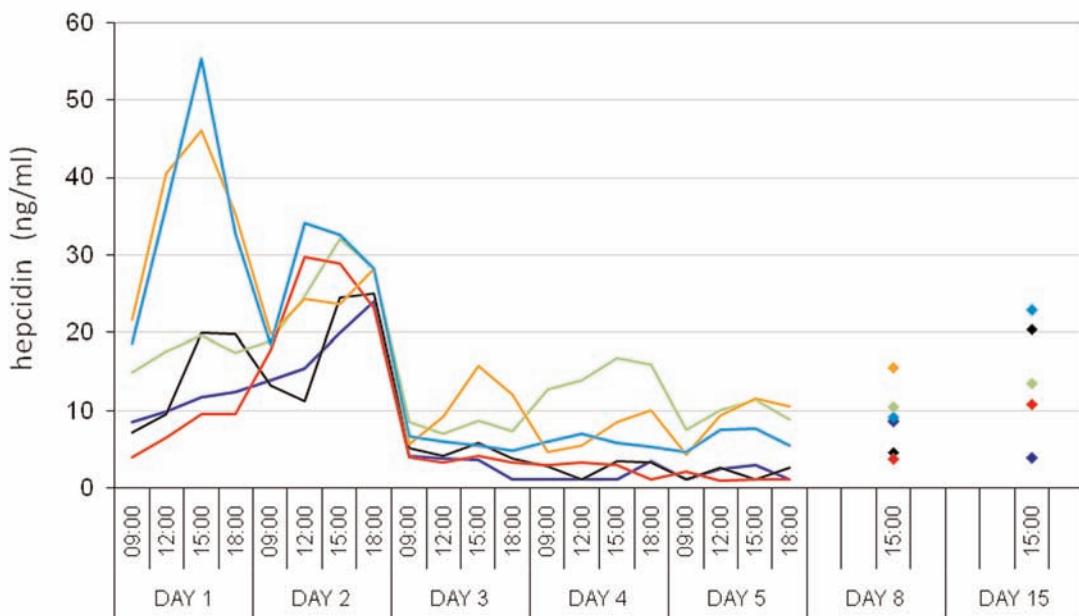


# Erythropoietin administration in humans causes a marked and prolonged reduction in circulating hepcidin

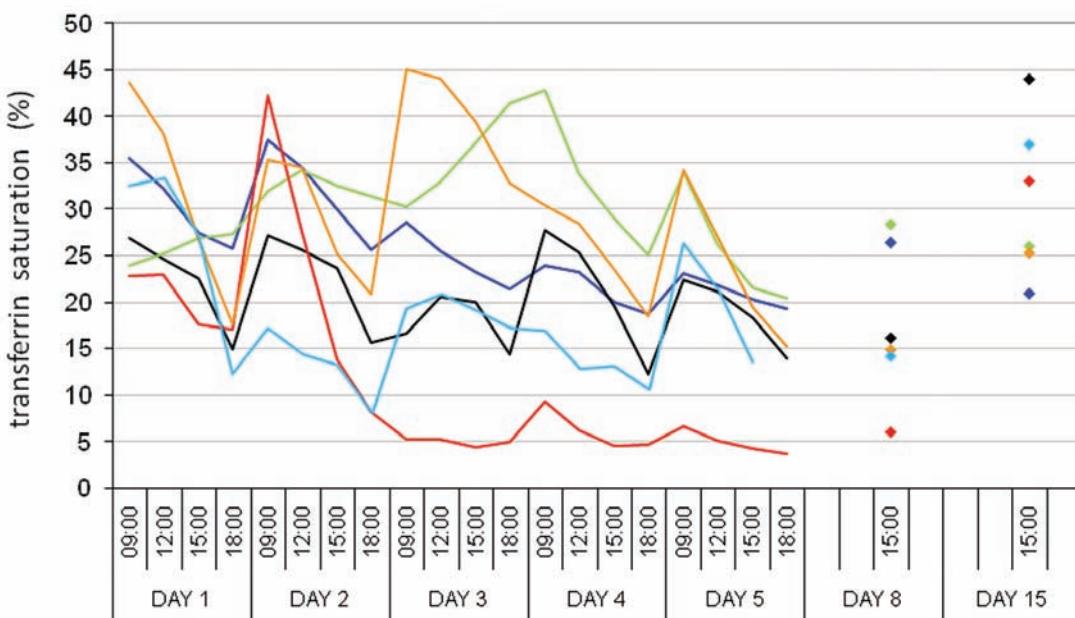
Damien R. Ashby,<sup>1,3</sup> Daniel P. Gale,<sup>1,4</sup> Mark Busbridge,<sup>2</sup> Kevin G. Murphy,<sup>3</sup> Neill D. Duncan,<sup>1</sup> Tom D. Cairns,<sup>1</sup> David H. Taube,<sup>1</sup> Stephen R. Bloom,<sup>3</sup> Frederick W.K. Tam,<sup>1</sup> Richard Chapman,<sup>2</sup> Patrick H. Maxwell,<sup>4</sup> and Peter Choi<sup>1</sup>

<sup>1</sup>Imperial College Kidney and Transplant Institute; <sup>2</sup>Department of Clinical Biochemistry, and <sup>3</sup>Department of Investigative Medicine, Hammersmith Hospital, Imperial College London; <sup>4</sup>Division of Medicine, University College London, UK

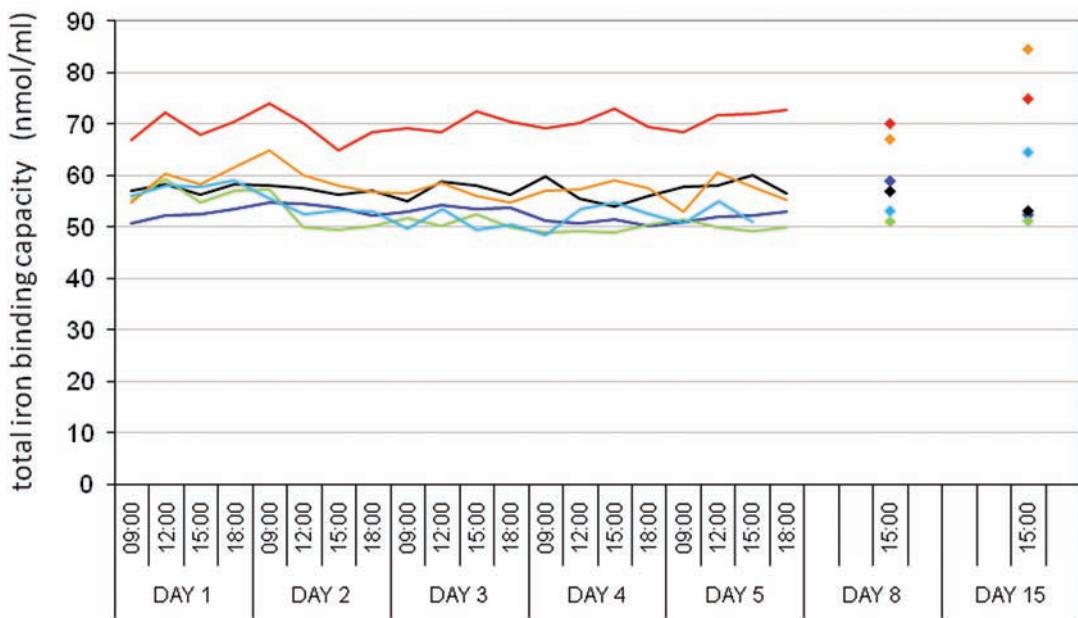
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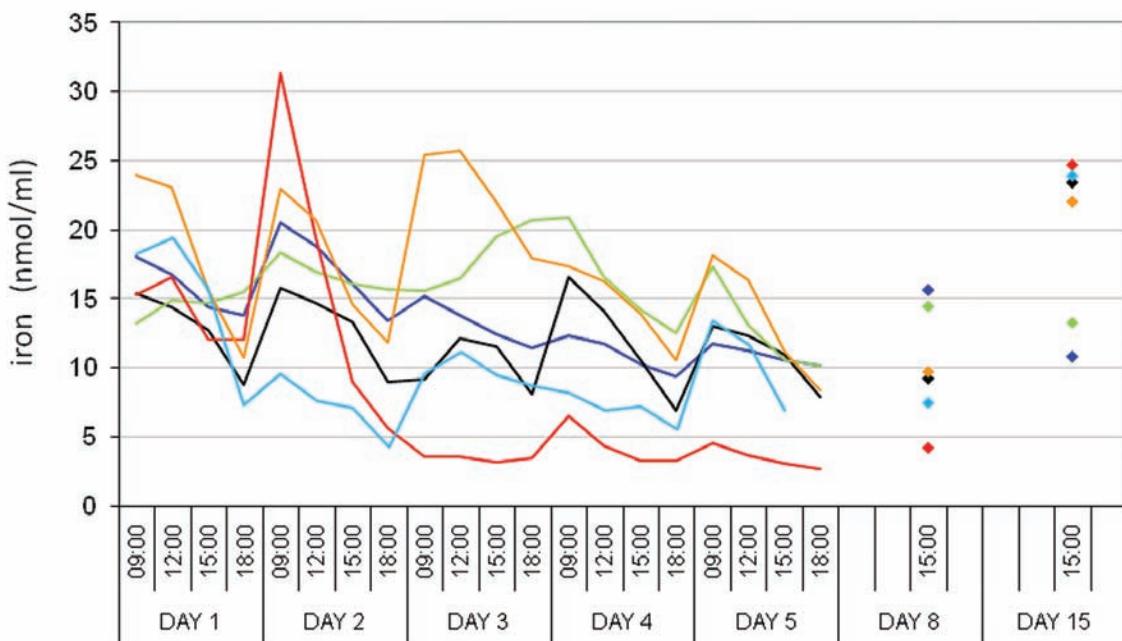
Online Supplementary Figure S1. Effect of erythropoietin administration on plasma hepcidin. Individual responses to erythropoietin administration at 09:00 on day 2.



Online Supplementary Figure S2. Effect of erythropoietin administration on plasma transferrin saturation. Individual responses to erythropoietin administration at 09:00 on day 2.



**Online Supplementary Figure S3.** Effect of erythropoietin administration on plasma total iron binding capacity. Individual responses to erythropoietin administration at 09:00 on day 2.



**Online Supplementary Figure S4.** Effect of erythropoietin administration on plasma iron. Individual responses to erythropoietin administration at 09:00 on day 2.