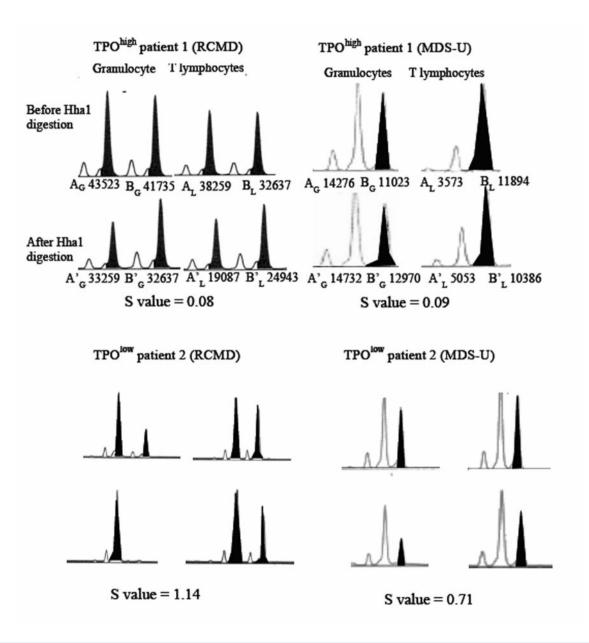
SUPPLEMENTARY APPENDIX

Increased plasma thrombopoietin levels in patients with myelodysplastic syndrome: a reliable marker for a benign subset of bone marrow failure

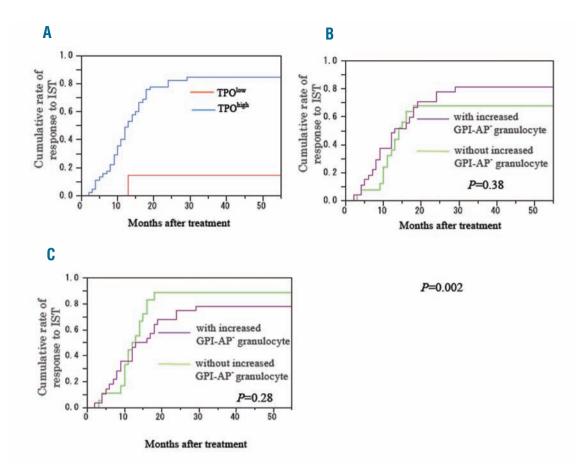
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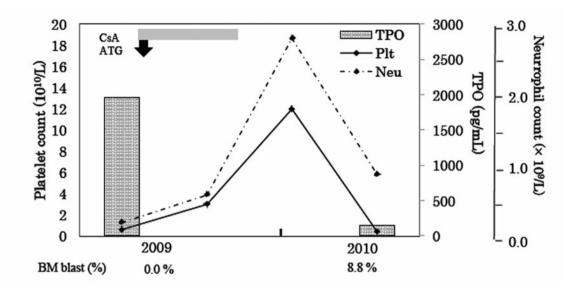
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Online Supplementary Figure S1. Skewing of the inactivation pattern for androgen receptor genes from the granulocytes of patients with myelodysplastic syndromes (MDS). Representative human androgen receptor assay results for two TPO^{high} patients (top; left, RCMD and right, MDS-U) and two TPO^{ligh} patients (bottom; left, RCMD and right, MDS-U) are shown. The S value represents the absolute values of log (CG/CL) (See Design and Methods).



Online Supplementary Figure S2. Cumulative rates of response to IST in different subsets of patients defined by TPO levels and the increase in percentages of GPI-AP⁻ granulocytes. A: TPO^{Mgh} and TPO^{Mgh} and TPO^{Mgh} patients; B: patients with or without increased GPI-AP⁻ granulocytes; C: TPO^{Mgh} patients with or without increased GPI-AP⁻ granulocytes.



Onbine Supplementary Figure S3. Clinical course of a patient with aplastic anemia that evolved into refractory anemia with excess of blasts as thrombopoietin levels decreased. Bone marrow examination revealed the presence of 8.8% myeloblasts and hypogranular neutrophils, as well as a pseudo-Pelger-Huet nucleus, with the recurrence of pancytopenia in October 2010. Plt: platelet count; TPO: thrombopoietin; Neu: neutrophils; BM: bone marrow; CsA: cyclosporine A; ATG: anti-thymocyte globulin.