SUPPLEMENTARY TABLES AND FIGURES

Suppl. Table 1: Conditioning regimens used in the trial.

Conditioning regimen	n	CsA/Mtx	Tac/Sir
Cy	3	1	2
fTBI+Cy	52	23	29
Bu+Cy	16	10	6
Flu+TBI	4	2	2
Flu+Bu	56	33	23
Flu+Cy	17	8	9
Flu+Cy+fTBI	31	13	18
Flu+Treo	30	16	14

Abbreviations: CsA, cyclosporine A; Mtx, methotrexate; Tac, tacrolimus; Sir, sirolimus; Cy, cyclophosphamide; fTBI, fractionated total body irradiation; Bu, busulphan; Flu, fludarabine; TBI, total body irradiation; Treo, Treosulphan.

Suppl. Table 2: Number of post-transplant infections, according to treatment arm

Variable	CsA/Mtx	Tac/Sir
CMV*	48	49
BSI	19	27
PTLD^	9	6
IFI	9	5

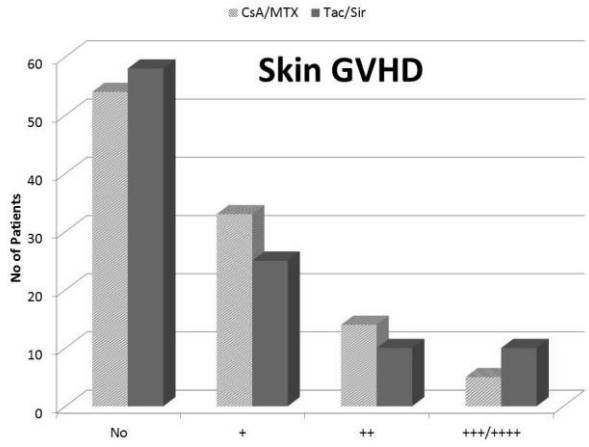
*Patients who received pre-emptive therapy for clinically relevant CMV viremia.
^As per definition in:

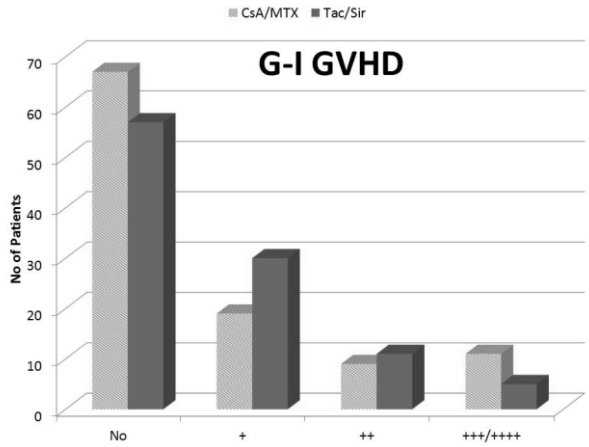
Loren AW, Porter DL, Stadtmauer EA, Tsai DE. Post-transplant lymphoproliferative disorder: a review. Bone Marrow Transplantation. 2003;31:145-55.

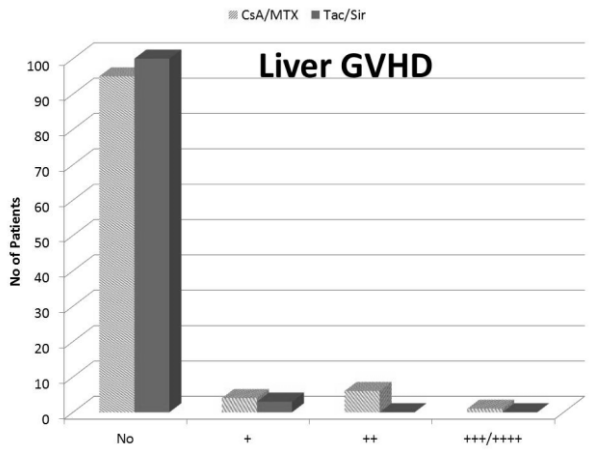
Sundin M, Le Blanc K, Ringdén O, Barkholt L, Omazic B, Lergin C et al. The role of HLA mismatch, splenectomy and recipient Epstein-Barr virus seronegativity as risk factors in post-transplant lymphoproliferative disorder following allogeneic hematopoietic stem cell transplantation. Haematologica. 2006;91:1059-67.

Abbreviations: CsA, cyclosporine A; Mtx, methotrexate; Tac, tacrolimus; Sir, sirolimus; CMV, cytomegalovirus; BSI, bloodstream infections; PTLD, post-transplant lymphoproliferative disorder; IFI, invasive fungal infection.

Suppl. Figure 1: Acute GVHD outcomes (organ manifestations and grades), according to treatment arm.

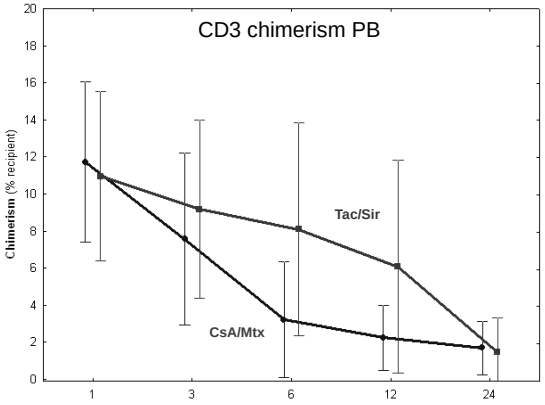


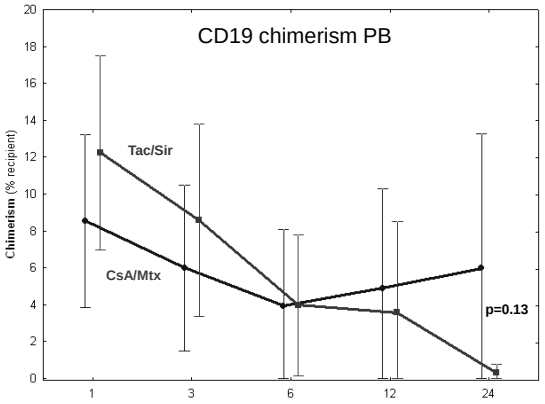


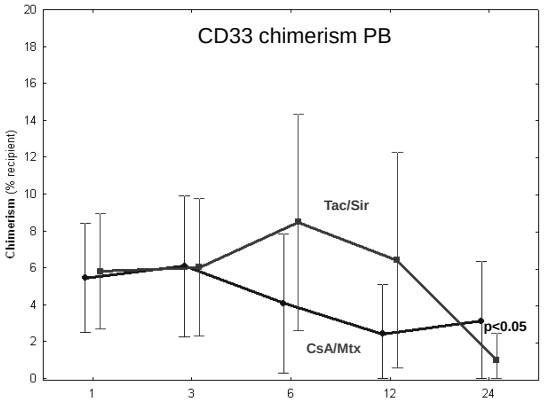


Suppl. Figure 2: Chimerism outcomes, % of recipient, by month after HSCT.
Panel A: Cell lineages in peripheral blood (PB), according to treatment arm.
Panel B: Cell lineages in bone marrow (BM), according to treatment arm.

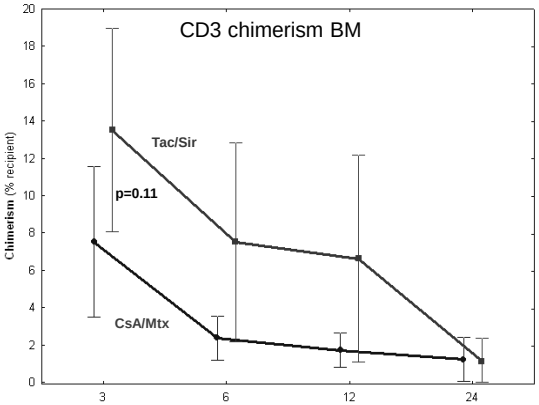
Panel A:

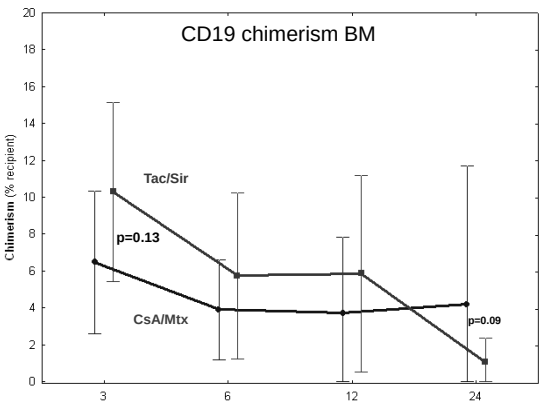


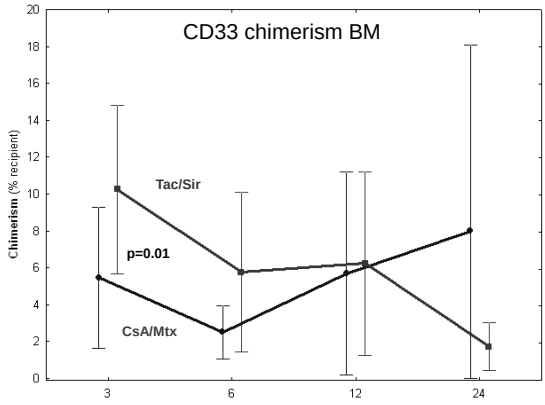


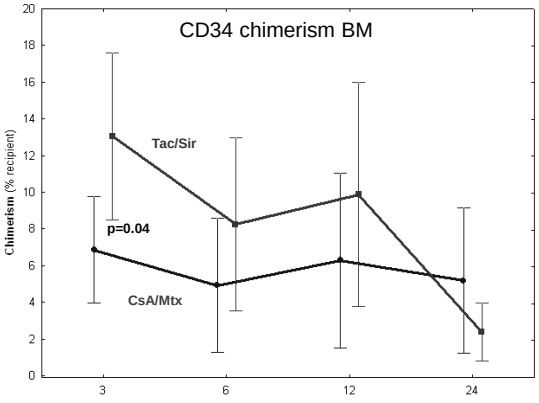


Panel B:









Suppl. Figure 3: Cumulative incidence of relapse (malignant diagnoses).