LETTER TO THE EDITOR

Decitabine salvage for *TP53*-mutated, relapsed/refractory acute myeloid leukemia after cytotoxic induction therapy

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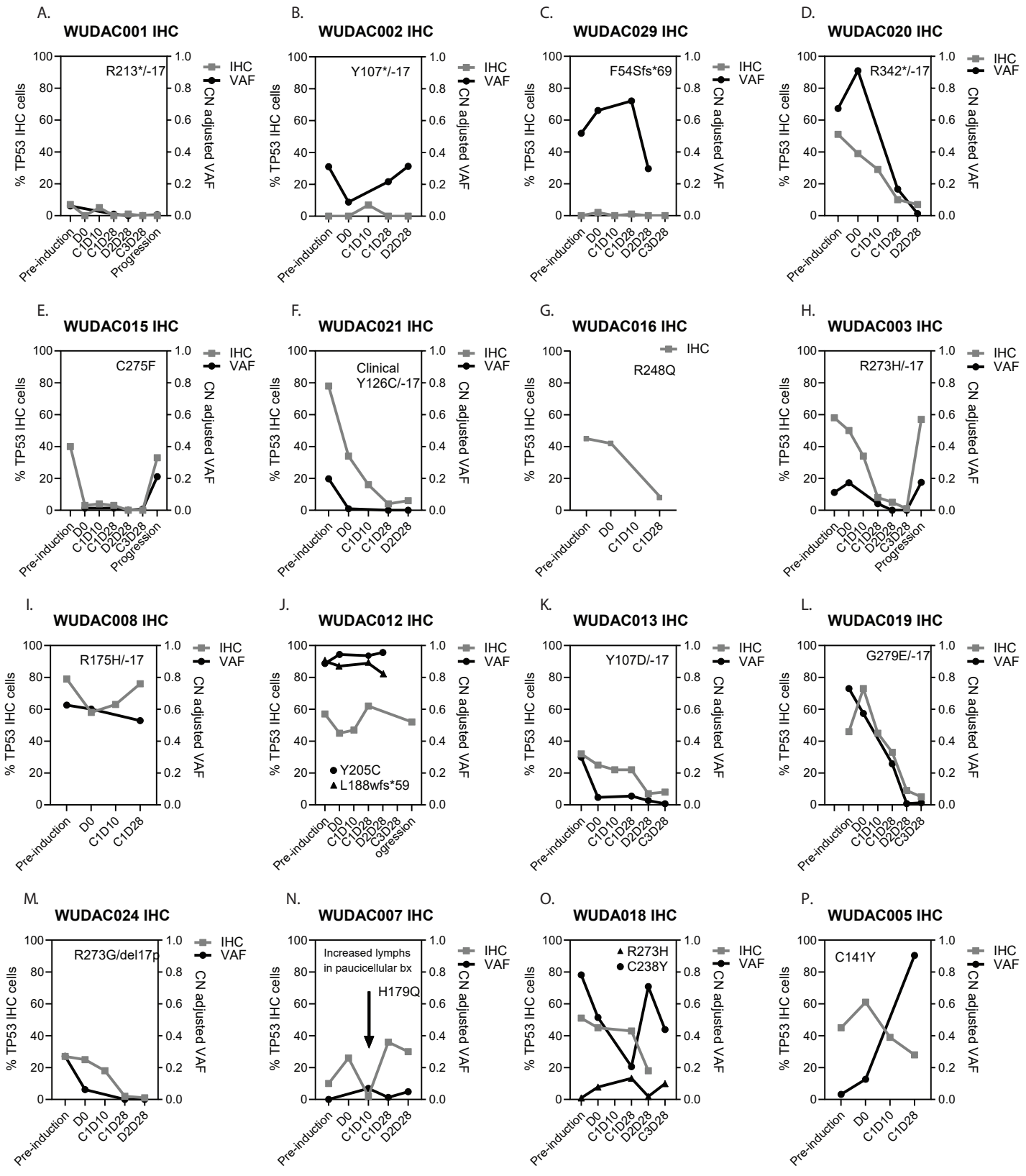
Supplementary Material Legends

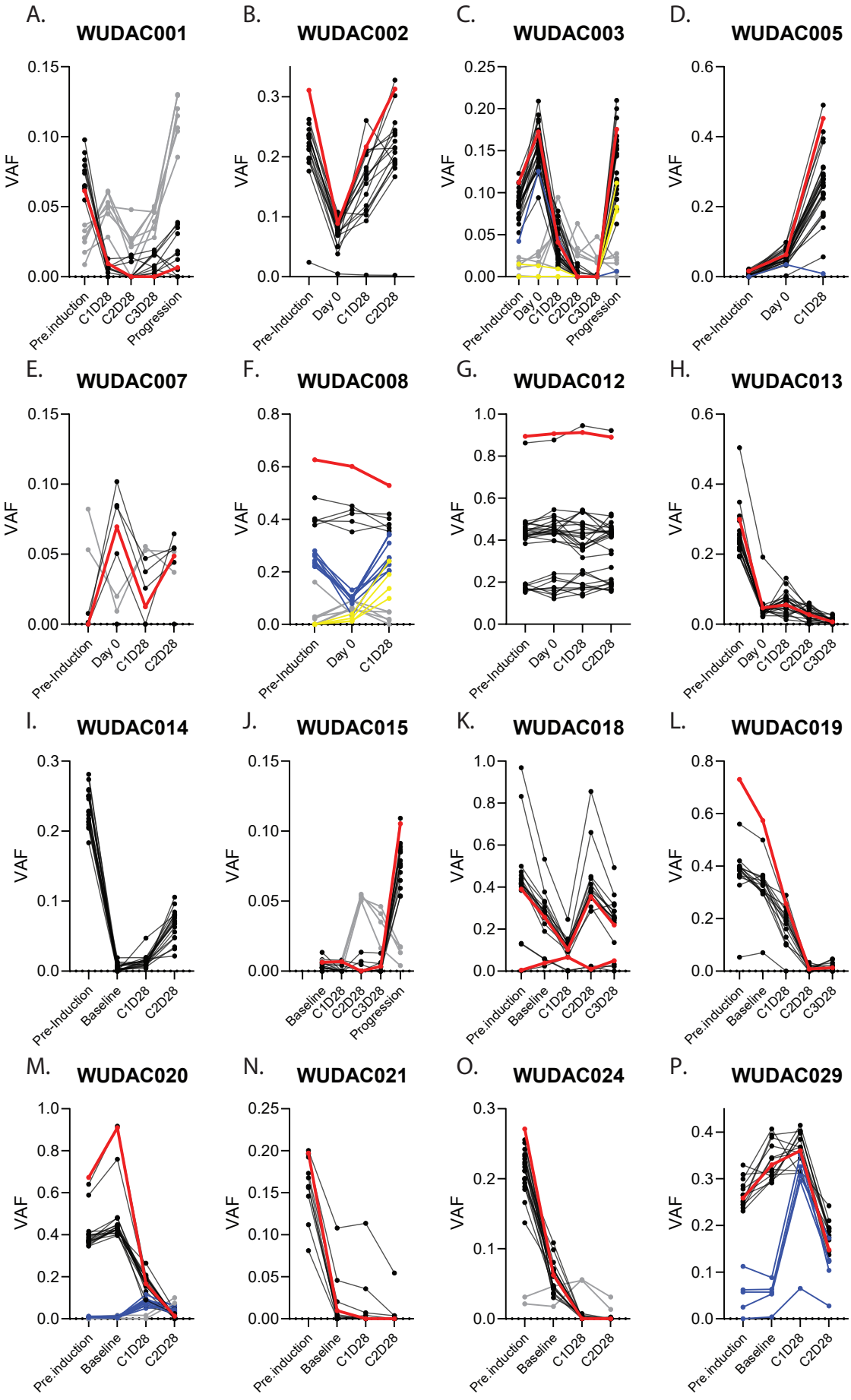
Supplementary Figure 1. Line plots showing the changes over the treatment course of %TP53 positive bone marrow cells with IHC (gray line and left y-axis) compared to TP53 adjusted VAF determined with exome sequencing (black line and right y-axis). Of note, A-C are cases with negative IHC staining due to TP53 nonsense mutation (resulting in premature truncation and absent IHC staining). D. WUDAC020 presented with a nonsense mutation (R342*) that resulted in increased TP53 staining by IHC. E and F represent two cases (WUDAC015 and 021) with a significant decrease in molecular tumor burden noted after induction chemotherapy and before enrollment in the trial. G. WUDAC016 is a case for which no follow up blood samples were available for longitudinal exome response assessment (no VAF comparison available).

Supplementary Figure 2. Line plots showing exome results and subclonal architecture for each case during treatment. TP53 mutations in each graph are indicated by the red line. Other variants are in grey. Note that WUDAC014 does not have a TP53 mutation, but was enrolled based on TP53 deletion detected by FISH.

Supplementary Table. Subtab 1 contains additional clinical data for the subjects enrolled in the trial. Subtab 2 shows the cytogenetic studies results for the subjects enrolled in the trial during the course of treatment. Subtab 3 lists additional somatic mutations that were used to track the clonal response along with the TP53 clone.



Supplemental Figure 1.



Supplemental Figure 2.