

Subcutaneous azacitidine maintenance in transplant-ineligible patients with acute myeloid leukemia: a single-center retrospective study

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Supplemental data

Table S1. Record of toxicities during AZA maintenance.

| | N = 39 |
|--|---------------|
| AZA maintenance cycles | |
| Median (range) | 6 (1-38) |
| Mean (standard deviation) | 10.7 (10.5) |
| AZA schedule modification, n (%) | |
| Yes | 14 (36) |
| No | 22 (56) |
| Missing data | 3 (8) |
| Type of modification, n (%) | |
| 5 days AZA every 28 days | 7 (18) |
| 7 days AZA every 6 weeks | 4 (10) |
| 5 days AZA every 6 weeks | 3 (8) |
| Cause of dose reduction, n (%) | |
| Cytopenia | 9 (23) |
| Infection | 3 (8) |
| Nausea | 1 (2.5) |
| Systematic reduction | 1 (2.5) |
| Cause of AZA discontinuation, n (%) | |
| Persistent CR | 7 (18) |
| HSCT | 2 (5) |
| Relapse/progression | 14 (36) |
| Other cancer | 1 (2.5) |
| Death | 1 (2.5) |
| Cytopenia | 3 (8) |
| Infection | 3 (8) |
| Nausea | 1 (2.5) |
| Unknown | 3 (8) |
| Patients receiving AZA at end of follow up, n (%) | 4 (10) |

Figure S1. Genomic landscape at diagnostic of patients treated with AZA maintenance.

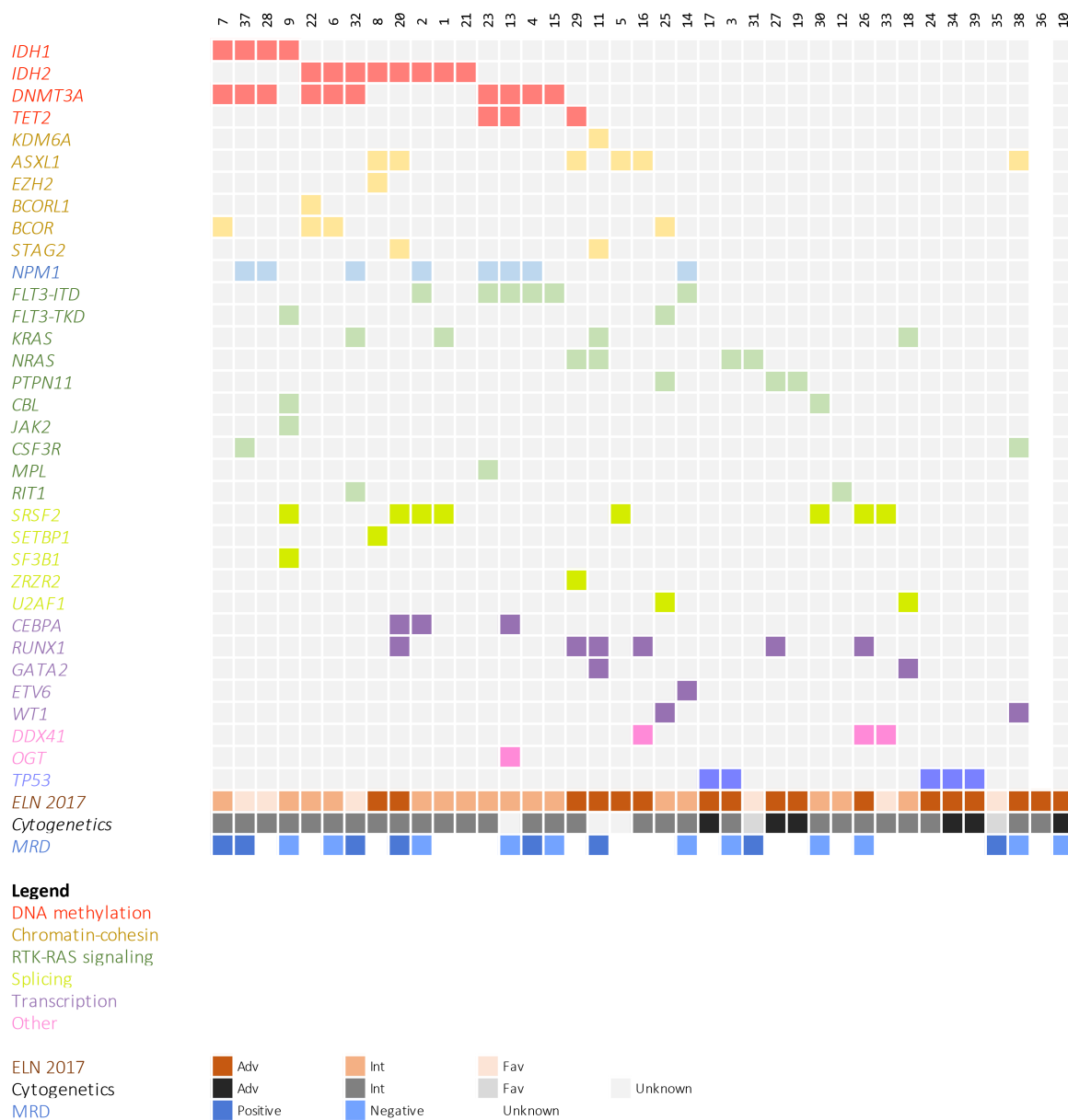


Figure S2. Hypothesis on clonal evolution during AZA maintenance. The first time point (referred to as month 0) corresponds to diagnosis. Next, the following point corresponds to remission and variant allele frequency is by convention represented at 0% at month 1 as in most situation (except patients 6 and 22) NGS was not performed on remission samples. In one case (Patient 22), NGS was performed during a first remission, then at relapse, then during a second remission and finally at the time of a second relapse at month 63. Clonal evolution illustrations were performed using the “fishplot” package for R (version 0.5.1).

