LETTER TO THE EDITOR

Measurable residual disease-guided therapy in intermediate-risk acute myeloid leukemia patients is a valuable strategy in reducing allogeneic transplantation without negatively affecting survival

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Tettero et al. Supplementary table and figures

		No. of patients evaluated	MRD-unguided group (%)	MRD-guided group (%)	*P*-value
Total			110 (100)	110 (100)	
Trial code	HO42a		40 (36)	0 (0)	
	HO81		7 (6)	0 (0)	
	HO92		5 (5)	0 (0)	
	HO102		58 (53)	0 (0)	
	HO132		0 (0)	110 (100)	
Male sex			53 (48)	56 (51)	0.686
Age (years)	≤45		30 (27)	42 (38)	0.223
	46-60		59 (54)	51 (46)	
	>60		21 (19)	17 (16)	
WHO/ECOG performance status	0		60 (55)	61 (56)	0.990
	1		46 (42)	45 (41)	
	2		4 (4)	4 (4)	
Diagnostic subgroup	AML		101 (92)	103 (94)	0.604
	High-risk RAEB		9 (8)	7 (6)	
AML type	De novo		94 (86)	100 (91)	0.247
	sAML		13 (12)	6 (6)	
	tAML		3 (3)	4 (4)	
WBC, x 10^9 /L	≤20		74 (67)	71 (65)	0.129
	20-100		33 (30)	29 (26)	
	>100		3 (3)	10 (9)	
Cytogenetics	CN-X-Y	215	94 (89)	76 (70)	0.003*
	CA rest		11 (10)	30 (28)	
	Monosomal karyotype[#]		1 (1)	3 (3)	
Sub classification of normal karyotype (NK)	NPM1-neg FLT3-ITD-neg	170	38 (40)	31 (41)	0.471
	NPM1-neg FLT3-ITD-pos		13 (14)	5 (7)	
	NPM1-pos FLT3-ITD-pos		35 (37)	32 (42)	
	NPM1/FLT3-ITD-unknown		8 (9)	8 (11)	
Gene mutations	NPM1-pos	200	37 (34)	36 (33)	0.895
	FLT3-ITD-pos	198	50 (46)	42 (38)	0.544
	NPM1-neg FLT3-ITD-neg	198	50 (46)	56 (51)	0.293
	NPM1-neg FLT3-ITD-pos		14 (13)	6 (6)	
	NPM1-pos FLT3-ITD-pos		36 (33)	36 (33)	
	IDH1-pos	183	11 (13)	11 (11)	0.722
	IDH2-pos	184	17 (20)	16 (16)	0.544
MRD status after cycle II	Neg		89 (81)	77 (70)	0.060
	Pos		21 (19)	33 (30)	
Consolidation therapy received	Cycle 3		18 (16)	13 (12)	0.772
	Auto-SCT		21 (19)	24 (22)	
	Allo-SCT		57 (52)	60 (55)	
	None		14 (13)	13 (12)	

Table S1: Characteristics of MRD-guided and MRD-unguided group. Not shown is ASXL1, CEPBA, RUNX1, TP53, t(8;21) and inv(16) because all patients were negative. [#]All patients with a monosomal karyotype had a t(9;11)(p21.3;q23.3) simultaneously present, which takes precedence over

rare, concurrent adverse-risk gene mutations, making these patients intermediate risk according to the ELN-2017 classification. CA, abnormal cytogenetics; CN, normal cytogenetics; ECOG, Eastern Cooperative Oncology Group; neg, negative; pos, positive; sAML, secondary AML (after myelodysplastic syndrome and antecedent hematologic disease); tAML, therapy-related AML (in case of previous chemotherapy or radiotherapy); WHO, World Health Organization. Statistical differences are assessed using Pearson Chi-Square test or Fisher's Exact Test in categorical variables, and the Mann-Whitney U test was used to analyze continuous variables.

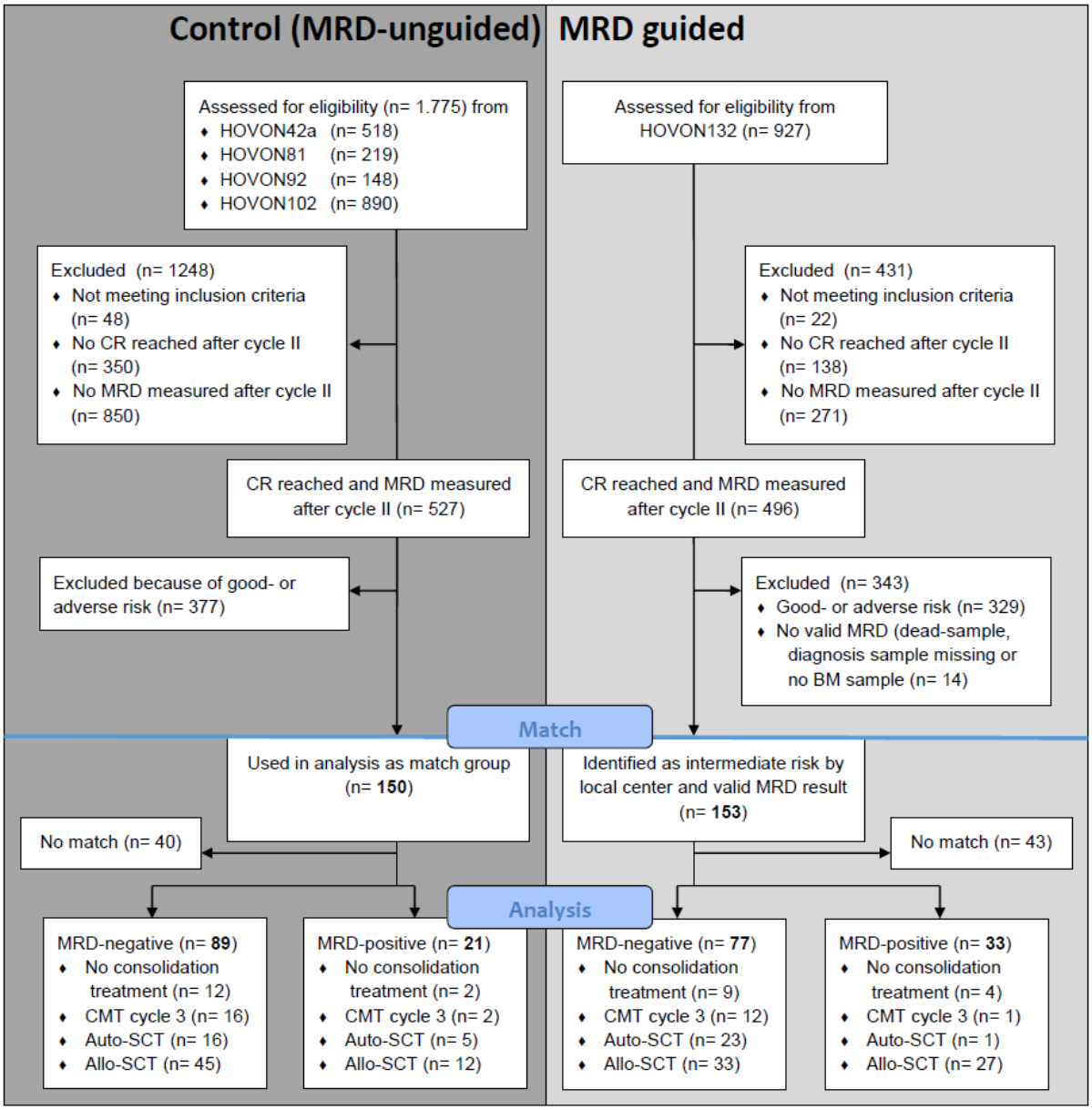

Figure S1. Consort diagram. Four studies were used for the matched MRD-unguided group (left side) and one study for the MRD guided group (right side). After matching, 110 patients remained in both groups.

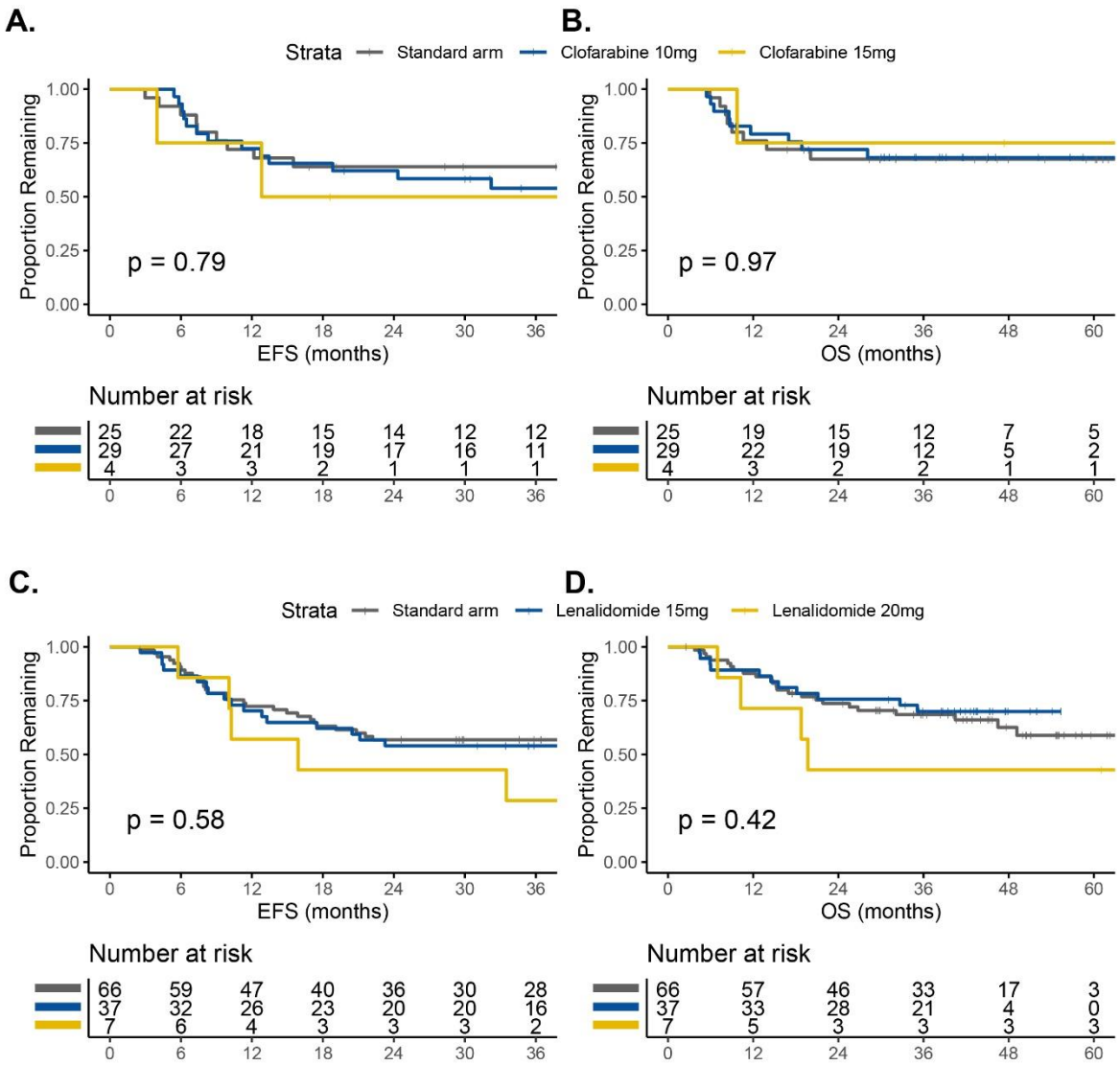

Figure S2: Event-free survival (EFS) and overall survival (OS) stratified by experimental agent randomization in the HO102 (top) and the HO132 study (bottom). The EFS and OS from the HO81 and HO92 studies were also not significantly different, but are not shown since only 7 and 5 patients are included, respectively. **(A)** EFS for patients included from the HO102 trial, stratified by randomization. **(B)** OS for patients included from the HO102 trial, stratified by randomization. **(C)** EFS for patients included from the HO132 trial, stratified by randomization. **(D)** OS for patients from HO132 trial, stratified by treatment arm.