

Supplementary information

Detection of early seeding of Richter transformation in chronic lymphocytic leukemia

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Supplementary Information

Detection of early seeding of Richter transformation in chronic lymphocytic leukemia

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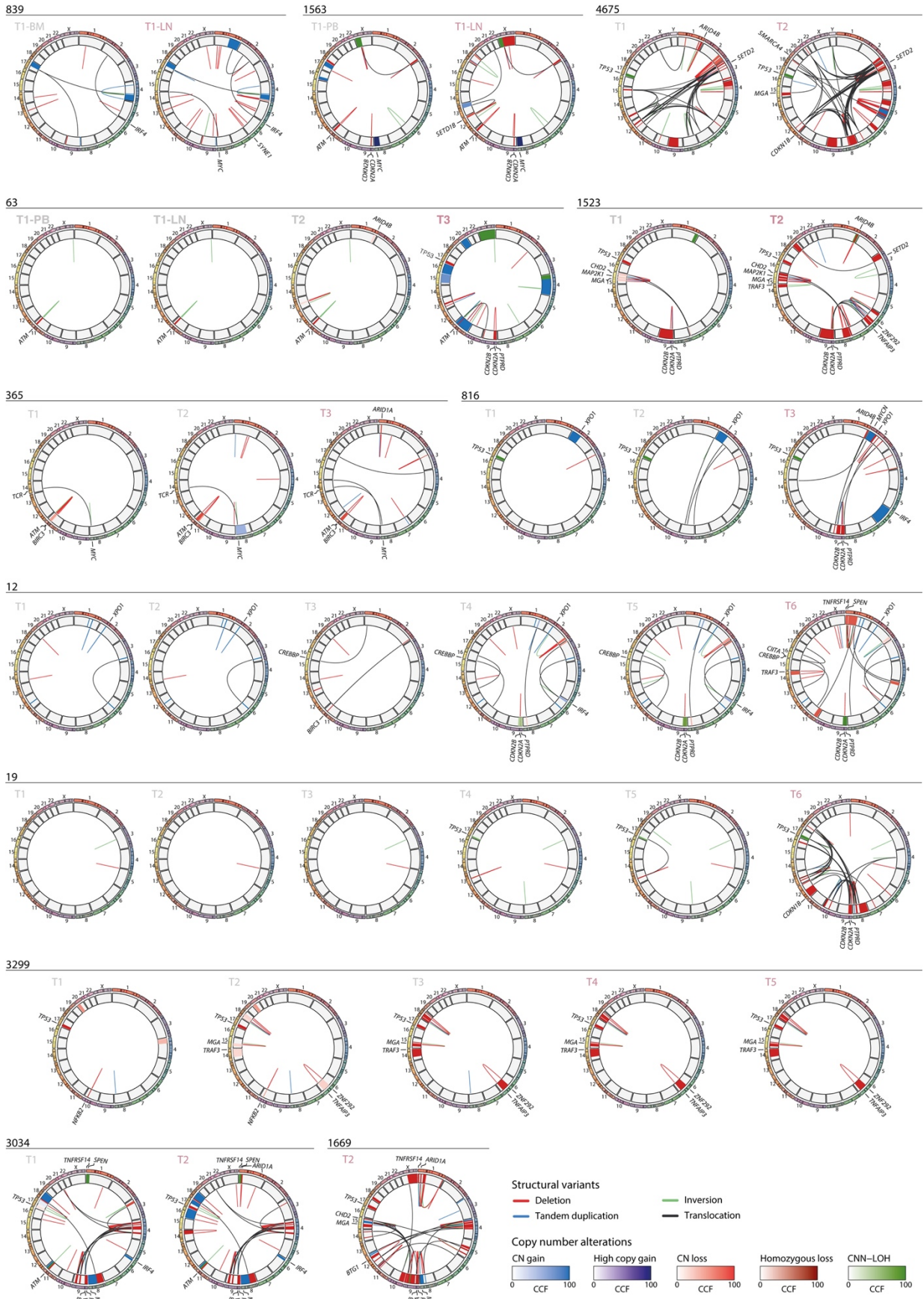
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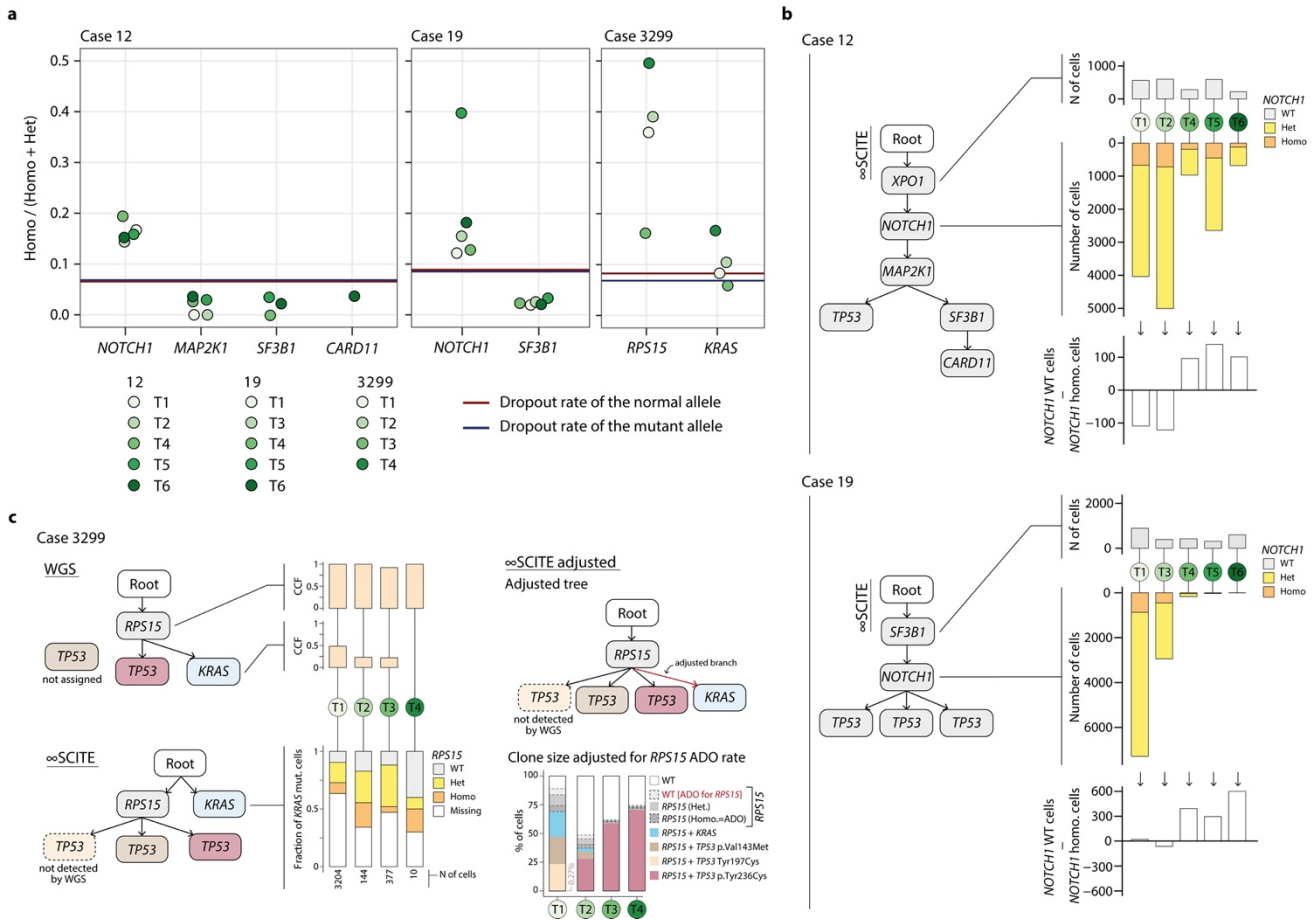
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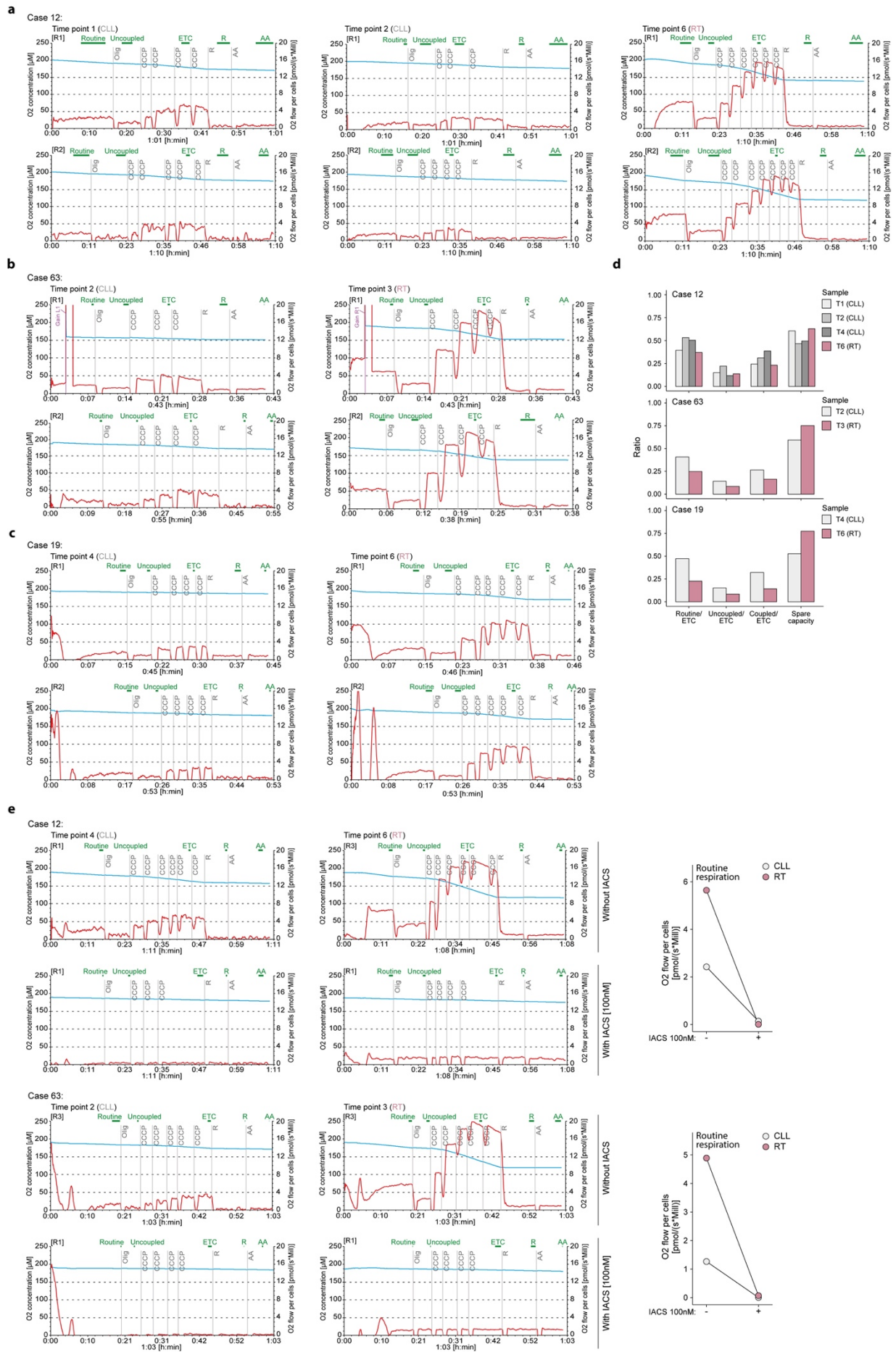


Supplementary Fig. 1. Structural alterations in CLL and RT. Circos plots illustrating the CNA and SV of each sample. Samples are grouped by patient. Chromosomes are displayed in the outer circle. The following section indicates the CNA painted according to their type. The transparency of the color is proportional to their cancer cell fraction (CCF). The inner circle represents the SV, linking together the breakpoints of the affected loci. Candidate driver genes affected by CNA and/or SV are annotated.

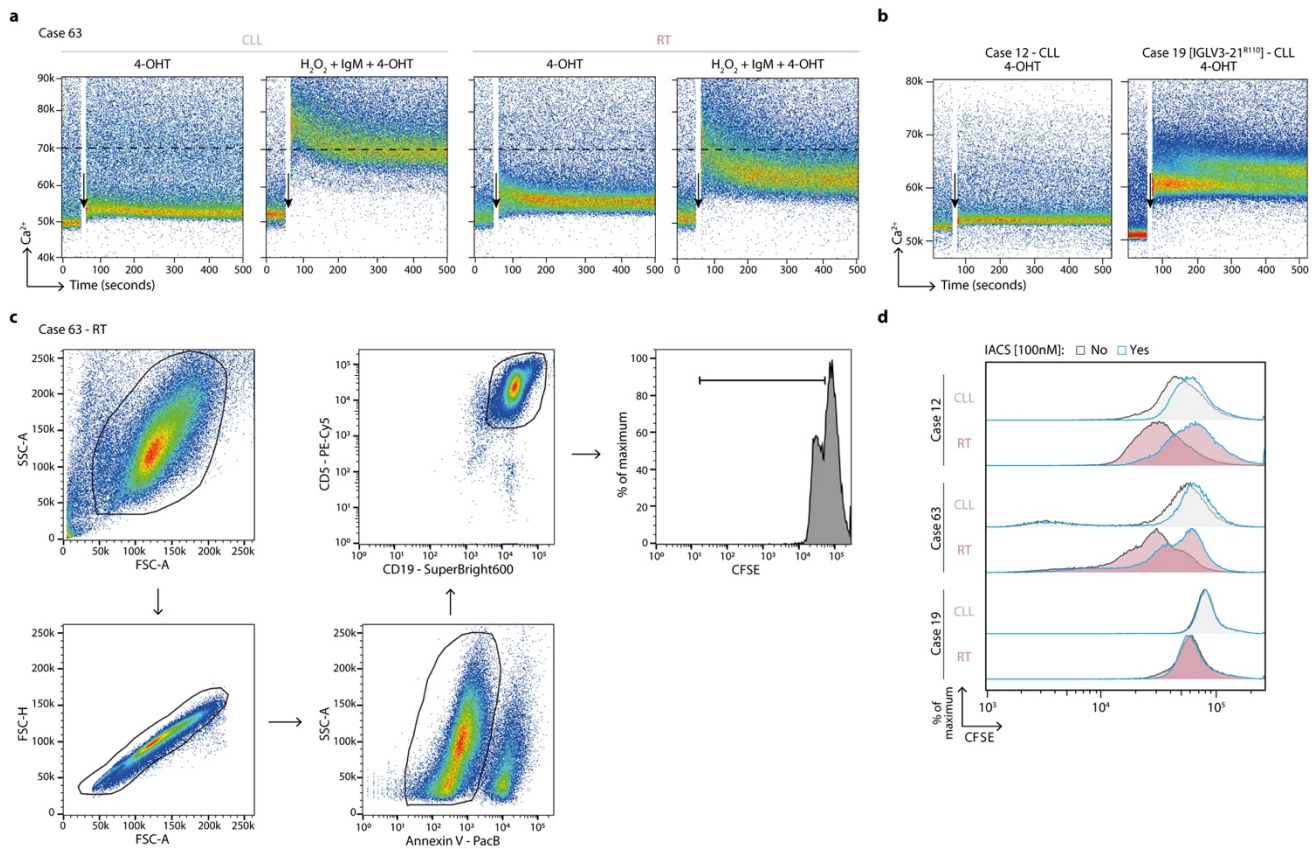


Supplementary Fig. 2. Case-specific considerations for scDNA-seq analyses. a. Allele dropout (ADO) rate of heterozygous mutations calculated based on the fraction of cells carrying a homozygous mutation (allele dropout of the wild-type allele). T, time point. Mean ADO rates calculated from heterozygous polymorphisms are represented with horizontal red/blue lines. *NOTCH1* and *RPS15* mutations had a higher ADO rate independently of the sample analyzed **b.** Mutation tree by ∞ SCITE for case 12 and 19 when including the *NOTCH1* mutations [left]. For each case, the first bar plot on the right shows the number of cells carrying mutations only in *XPO1* or *SF3B1*, respectively, which are potential ADO of the *NOTCH1* mutated allele. The second bar plot shows the number of cells assigned to the *NOTCH1* node colored by the genotype of *NOTCH1*. Note that a remarkable fraction of these cells carried and homozygous *NOTCH1* mutations (ADO of the *NOTCH1* wild-type, WT, allele), which is similar to the *XPO1/SF3B1* only cells (potential ADO of the *NOTCH1* mutated allele) [bottom bar plot], which suggest that the obtained phylogeny in which the *NOTCH1* mutation is acquired after *XPO1* (case 12) or after *SF3B1* (case 19) could be influenced by its higher ADO rate. Consequently, we decided to show the results of the analyses excluding *NOTCH1* mutations to avoid a potentially artefactual order of *XPO1-NOTCH1* and *SF3B1-NOTCH1* in case 12 and 19, respectively. Nonetheless, the initial node of the mutation tree obtained without considering *NOTCH1* was labelled as carrying both mutations. **c.** Reconstructed mutation tree for case 3299 based on WGS [top left] and ∞ SCITE [bottom left]. The first bar plot shows the cancer cell fraction (CCF) of *RPS15* and *KRAS* mutations by WGS, while the second one depicts the *RPS15* genotype of the cells assigned to the *KRAS* node by scDNA-seq.

Probably due to the high ADO rate of *RPS15*, ∞ SCITE reported that *RPS15* and *KRAS* mutations were acquired in independent cells. However, in the first three time points analyzed, in which *KRAS* mutation was present in >10 cells, the fraction of *KRAS* mutant cells carrying a heterozygous or homozygous (ADO of the wild-type allele) *RPS15* mutation was higher than the number of *RPS15* wild-type cells. The high number of cells with missing *RPS15* genotype due to low sequencing coverage in this region could also impair the output of ∞ SCITE. Therefore, we forced *KRAS* to be a branch of *RPS15* (∞ SCITE adjusted' plot). The bar plot on the bottom right side of the panel shows the procedure conducted to adjust for the high ADO rate of *RPS15*.



Supplementary Fig. 3. Respiratory capacity of intact CLL and RT cells. **a-c.** Overview of the respirometry assays conducted in intact CLL and RT cells of case 12 (a), 63 (b), and 19 (c). Two technical replicates of each sample [top and bottom] were performed. ETC, electron transfer system capacity; R, rotenone; AA, antimycin A; Olig, oligomycin; CCCP, ionophore carbonyl cyanide m-chlorophenyl hydrazine. **d.** Flux control ratios for case 12 [top], 63 [middle], and 19 [bottom]. Routine/ETC, routine respiration out of ETC; Uncoupled/ETC, uncoupled oxygen consumption out of ETC; Coupled/ETC, coupled oxygen consumption out of ETC (i.e., used to drive phosphorylation of ADP to ATP); Spare capacity; reserve respiratory capacity. **e.** Respirometry assays conducted in intact CLL and RT cells of case 12 [top] and 63 [bottom] with or without treatment with IACS-010759 (IACS) at 100nM for 1 hour [left]. Summary of the routine respiration of CLL and RT cells with and without IACS-010759 treatment.



Supplementary Fig. 4. BCR signaling and proliferation experiments in CLL and RT cells. **a.** Ca^{2+} release kinetics by flow cytometry from case 63 in different timepoints (CLL and RT) with and without BCR stimuli ($\text{H}_2\text{O}_2 + \text{IgM}$). Different BCR activation was observed between CLL and RT samples with a lower Ca^{2+} release in RT. **b.** Ca^{2+} release kinetics by flow cytometry for CLL cells lacking the IGLV3-21^{R110} mutation (case 12) [left] or carrying the IGLV3-21^{R110} mutation (case 19) [right] upon incubation with 4-OHT without IgM stimulation. CLL cells from case 19 showed an autonomous BCR signaling in line with the presence of the IGLV3-21^{R110} mutation. **c.** Flow cytometry gating strategy in case 63 for proliferating cells. Gating analysis was as follow: cell identification in FSC-A vs. SSC-A plot, singlet identification in FSC-A vs. FCS-H plot, alive cells in AnnexinV - PacB vs. SSC-A plot, tumoral cells ($\text{CD}19^+ \text{CD}5^+$) in CD19 - SuperBright600 vs. CD5 - PE-Cy5 plot, and proliferating cells in CFSE histogram. **d.** CLL and RT cells from cases 12, 63, and 19 were treated with IACS-010759 to assess growth inhibition, measured as CFSE low cells (% proliferating cells). Treated (blue line) or non-treated (black line) cells with IACS-010759 (IACS) at 100nM for 72 hours are represented in histograms as CFSE intensity vs. normalized cell count.