

SUPPLEMENTARY APPENDIX

INTEGRATED MUTATIONAL AND CYTOGENETIC ANALYSIS IDENTIFIES NEW PROGNOSTIC SUBGROUPS IN CHRONIC LYMPHOCYTIC LEUKEMIA

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SUPPLEMENTARY METHODS

Patients

The training series was represented by a multicentric cohort of 637 newly diagnosed and previously untreated CLL patients who consecutively presented for initial evaluation at four institutions from June 1996 through June 2011 (Table S1). Regular follow-up (at least three visits/year) was available for 583 (91.5%) patients (Table S1). Features at presentation did not differ between cases with complete follow-up and cases lacking follow-up information. The clinical database was updated in May 2012. After a median observation of 5.6 years in alive patients, 178/583 patients had died (5-year OS: 72.9%; 10-year OS: 50.7%).

The validation series was represented by a cohort of 370 newly diagnosed and previously untreated CLL patients who consecutively presented for initial evaluation from June 1996 through June 2011 (Table S1) and provided with regular follow-up (at least three visits/year). The clinical and genetic features of the validation series are provided in table S1. The clinical database was updated in February 2012. After a median observation of 5.9 years in alive patients, 62/370 patients had died (5-year OS: 89.5%; 10-year OS: 65.8%).

Time-dependent analysis and analysis of clonal evolution were based on a mono-institutional cohort of 257 CLL out of the 637 cases of the training series. Inclusion criteria for time-dependent analysis were: *i*) having at least two years of follow-up after diagnosis; and either *ii*) availability of ≥ 2 sequential samples (patients: 202; sequential samples: 469; median interval between baseline and last sequential sample: 62.8 months) collected at: *a*) diagnosis; *b*) each progression requiring treatment; *c*) last follow-up; or *iii*) availability of the baseline sample collected at presentation in patients treated at diagnosis and persistently in continuous remission after first line treatment (patients: 55).

Mutation analysis

The mutation hotspots of *TP53* (exons 4-9, including splicing sites; RefSeq NM_000546.5), *NOTCH1* (exon 34; RefSeq NM_017617.2), *SF3B1* (exons 14, 15, 16, 18, including splice sites; RefSeq NM_012433.2), *MYD88* (exons 3, 5, including splicing sites; RefSeq NM_002468.4), and *BIRC3* (exons 6-9, including splicing sites; RefSeq NM_001165.4) genes were analyzed by PCR amplification and DNA direct sequencing of high molecular weight genomic DNA. Sequences for all annotated exons and flanking splice sites were retrieved from the UCSC Human Genome database using the corresponding mRNA accession number as a reference. PCR primers, located ~50 bp upstream or downstream to target exon boundaries, were either derived from previously published studies or designed in the Primer 3 program (<http://frodo.wi.mit.edu/primer3/>) and filtered using UCSC in silico PCR to exclude pairs yielding more than a single product. All PCR primers and conditions are available upon request. Purified amplicons were subjected to conventional DNA Sanger sequencing using the ABI PRISM 3100 Genetic Analyzer (Applied Biosystems), and compared to the corresponding germline sequences using the Mutation Surveyor Version 4.0.5 software package (SoftGenetics) after automated and/or manual curation. Of the evaluated sequences, 99% had a Phred score of 20 or more and 97% had a score of 30 or more. Candidate variants were confirmed from both strands on independent PCR products. The following databases were used to exclude known germline variants: Human dbSNP Database at NCBI (Build 136) (<http://www.ncbi.nlm.nih.gov/snp>); Ensembl Database (<http://www.ensembl.org/index.html>); The 1000 Genomes Project (<http://www.1000genomes.org/>); five single-genome projects available at the UCSC Genome Bioinformatics resource (<http://genome.ucsc.edu/>). Synonymous variants, previously reported germline polymorphisms and changes present in the matched normal DNA were removed from the analysis.¹⁻⁵

IGHV-IGHD-IGHJ rearrangement analysis

PCR amplification of *IGHV-IGHD-IGHJ* rearrangements was performed on HMW genomic DNA using *IGHV* leader primers or consensus primers for the *IGHV* FR1 along with appropriate *IGHJ* genes, as previously described.⁶ PCR products were directly sequenced with the ABI PRISM BigDye Terminator v1.1 Ready Reaction Cycle Sequencing kit (Applied Biosystems) using the ABI PRISM 3100 Genetic Analyzer (Applied Biosystems). Sequences were analyzed using the IMGT databases and the IMGT/V-QUEST tool (version 3.2.17, Université Montpellier 2, CNRS, LIGM, Montpellier, France).

Fluorescence in situ hybridization (FISH)

Probes used for FISH analysis were: *i*) LSID13S319 (13q14 deletion), CEP12 (trisomy 12), LSIp53 (17p13/*TP53* deletion), and LSIATM (11q2-q23/*ATM* deletion) (Abbott, Rome, Italy); and *ii*) the RP11-177O8 (*BIRC3*) BAC clone.⁴ The labeled BAC probe was tested against normal control metaphases to verify the specificity of the hybridization. For each probe, at least 400 interphase cells with well-delineated fluorescent spots were examined. Nuclei were counterstained with 4',6'-diamidino-2-phenylindole (DAPI) and antifade reagent, and signals were visualized using an Olympus BX51 microscope (Olympus Italia, Milan, Italy). The presence of 13q14 deletion, trisomy 12, 11q22-q23 deletion, 17p13 deletion, and *BIRC3* deletion was scored when the percentage of nuclei with the abnormality was above our internal cut off (5%, 5%, 7%, 10%, and 10% respectively), defined as the mean plus 3 standard deviations of the frequency of normal control cells exhibiting the abnormality.⁴

Prognostic factors

Fixed exposure variables collected at diagnosis and included in the dataset were age (continuous), gender (female vs male), Rai stage (0-I vs II vs III-IV), *IGHV* mutation status (*IGHV* homology <98% vs *IGHV* homology ≥98%), del13q14 (absent vs present), +12 (absent vs present), del11q22-q23 (absent vs present), del17p13 (absent vs present), mutation status of *TP53* (absent vs present), *NOTCH1* (absent vs present), *SF3B1* (absent vs present), *MYD88* (absent vs present) and *BIRC3* (absent vs present), *BIRC3* deletion (absent vs present), *TP53* disruption (absent vs present), *BIRC3* disruption (absent vs present) and the integrated mutational and cytogenetic model (very-low risk vs low-risk vs intermediate-risk vs high-risk). Time-varying exposure variables repeatedly assessed at clinically relevant time points (i.e. disease progression or last follow-up) and registered in the dataset for the time-dependent analysis were age (≤65 years vs >65 years), Rai stage (0-I vs II vs III-IV), del11q22-q23 (absent vs present), del17p13 (absent vs present), mutation status of *TP53* (absent vs present), *NOTCH1* (absent vs present), *SF3B1* (absent vs present), *MYD88* (absent vs present) and *BIRC3* (absent vs present), *BIRC3* deletion (absent vs present), *TP53* disruption (absent vs present), *BIRC3* disruption (absent vs present) and the integrated mutational and cytogenetic model (very-low risk vs low-risk vs intermediate-risk vs high-risk). The date of modification of these covariates during follow-up was also registered.

Proportional hazard regression

The proportional hazard assumption was assessed by plotting the smoothed Schoenfeld residuals against time. Assumption of linearity for continuous variable was assessed by plotting the smoothed martingale residuals.⁷ Possible interactions were tested.⁸ The bias corrected c-index and calibration slope of the Cox model were calculated through the .632 bootstrap method (1000 resamplings).^{8,9} The heuristic shrinkage estimator was calculated using the formula (model likelihood ratio χ^2) - (number of degree of freedom in the model)/(model likelihood ratio χ^2).^{8,10} This approach provides an estimate of prediction accuracy of the Cox model to protect against overfitting.

Internal validation

Internal validation was performed using a bootstrapping resampling procedure.¹¹ In the first step, 1000 bootstrap samples were generated randomly with replacement from the original CLL population. Cox regression was applied to each bootstrap sample with the same covariates as the original modeling. The percentage of bootstrap samples for which each covariate was selected as significant in the model was then calculated. Percent of selection reflects the prognostic importance of a covariate, because it is expected that an important covariate will be selected for the majority of bootstrap samples. In the second step, 1000 additional bootstrap samples were generated randomly with replacement from the original CLL population. Cox regression was applied to each bootstrap sample with the same covariates as the original modeling. For each covariate, the mean standard deviation and confidence intervals were computed for the 1000 bootstrap replications.

Recursive partitioning

Compared to the Cox-fitted model, recursive partitioning for survival data with censoring has the advantage of a more objective and non arbitrary construction of a hierarchical classification of covariates.^{12,13} The first step in recursive partitioning analysis was to find the best split of the data into two groups (nodes) by the genetic predictor variable that captures the most information in the variability of OS. The process was recursively repeated, so succeeding steps find the best splits of the data within each of the nodes resulting from prior splits (daughter nodes). The entire dataset was considered as the primary node. Three major steps were utilized to derive the best decision tree: *i*) growing an initial tree under the following constraints and stopping rules: *a*) split criteria of $p < 0.05$ according to the log-rank test adjusted for multiple comparisons; *b*) >20 patients in a node in order to be considered for splitting; *c*) >20 patients in a terminal node; *ii*) applying a pruning algorithm based on the complexity parameter

($cp=0.015$); and *iii*) cross-validating the best tree size. Ten-fold cross-validation was used to determine the best tree size. The best number of splits was identified as that showing a cross-validation error lower than the smallest cross validation error + the corresponding standard error.

Random survival forest

A random survival forest was generated by drawing 1000 bootstrap samples from the original dataset and growing a tree for each bootstrapped sample.¹⁴ Log-rank was utilized as splitting rule. At each branch, a random set of genetic variables were chosen as candidates to split the branch into two other branches, and the variable maximizing the log-rank statistic was used for splitting. The number of variables assessed at each branch was 4/5 of the total number of variables. Trees were grown under the constraint that a terminal node should have at least 1 unique event (death). The most important variables were identified as those that most frequently split the branches near the tree trunks.¹⁵ There were no prespecified assumptions regarding variables, and randomization was introduced into this model by both random bootstrap sampling of patients from the original cohort and random sampling of variables for each tree branch. Importance of a variable was assessed by minimal depth from the tree trunk. The most predictive genetic variables for the cohort were defined as those whose minimal depth (averaged over the forest) was smaller than the mean minimal depth determined under the null hypothesis of no effect.

Amalgamation

Within a tree, any two terminal nodes of patients arising from the same parent node must be significantly different with respect to survival. The same is not necessarily true for clusters of patients arising from different parent nodes. To achieve better efficiency, an amalgamation algorithm was used to merge terminal nodes that showed homogenous survival.¹² At each step of the amalgamation algorithm, log-rank statistics testing the hypothesis that the survival of two nodes differed versus the hypothesis that they were the same was calculated, and the one with the greatest significance level was searched. If this maximal significance level was greater than 0.05, the two corresponding nodes were joined to form one new terminal node. The same procedure was then applied on the set of the new terminal nodes. This recursive amalgamation algorithm was stopped when no significance level greater than 0.05 was found.

Relative survival

Estimates of the expected survival were calculated utilizing Italian life tables stratified by age, sex and calendar year that were obtained from the Human Mortality Database (<http://www.mortality.org/>, accessed June 18 2012).¹⁶ The major advantage of relative survival is that it provides a measure of the excess mortality experienced by CLL patients, irrespective of whether the excess mortality is directly or indirectly attributable to the disease.

SUPPLEMENTARY FIGURE LEGENDS

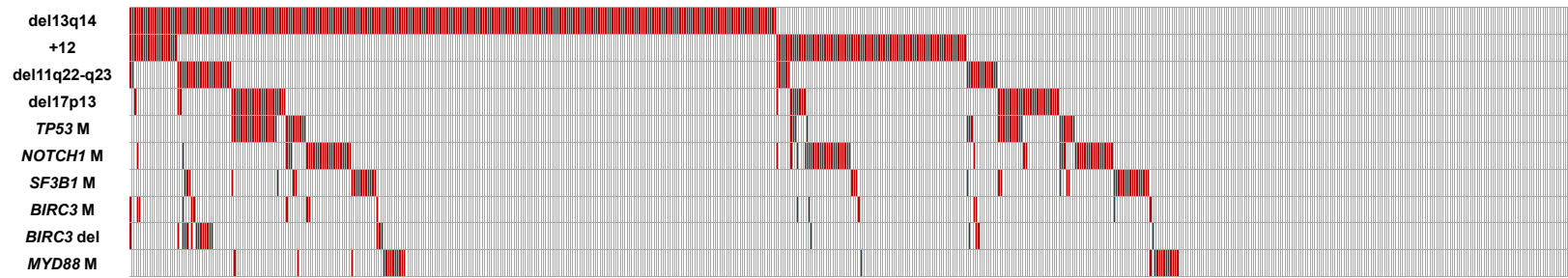
- Fig S1. Molecular complexity of newly diagnosed CLL.** Panel A. Heat map showing the mutual relationship of gene mutations and cytogenetic lesions in newly diagnosed CLL from the training series. Rows correspond to identical lesions, and columns represent individual patients color-coded based on the molecular status (white: absence of the lesion; red: presence of the lesion). Panel B. Prevalence of gene mutations and cytogenetic lesions in newly diagnosed CLL from the training series. Panel C. Circos plot representing the relative frequency and pairwise co-occurrence of gene mutations and cytogenetic lesions in newly diagnosed CLL from the training series. The length of the arc corresponds to the frequency of the genetic lesions. The width of the ribbon corresponds to the percentage of patients in which the two connected genetic lesions co-occur. Pairwise associations and anti-associations between genetic lesions were calculated with the use of Fisher's exact test and corrected for multiple hypothesis testing. The asterisk indicates statistically significant associations ($p < 0.05$).
- Fig S2. Circos plots showing the pairwise co-occurrence of mutational and cytogenetic lesions in the training series.** The length of the arc corresponds to the frequency of the genetic lesions. The width of the ribbon corresponds to the percentage of patients in which the two connected genetic lesions co-occurred.
- Fig S3. Kaplan-Meier estimates of overall survival (OS) according to the FISH cytogenetic model in the training series.** Cases harboring del17p13 irrespective of co-occurring cytogenetic lesions are represented by the red line. Cases harboring del11q22-q23 in the absence of del17p13 are represented by the purple line. Cases harboring +12 in the absence of del17p13 and del11q22-q23 are represented by the yellow line. Cases harboring a normal FISH karyotype are represented by the green line. Cases harboring del13q14 deletion in the absence of other cytogenetic abnormalities are represented by the blue line. Nr=not reached.
- Fig S4. Kaplan-Meier estimates of overall survival (OS) and treatment free survival according to the integrated mutational and cytogenetic model in early stage CLL from the training series.** Panel A. Overall survival (OS). Panel B. Probability of progressive disease requiring treatment according to IWCLL-NCI guidelines as indicated by treatment free interval. Cases harboring *TP53* and/or *BIRC3* disruption (*TP53* DIS/*BIRC3* DIS) independent of co-occurring genetic lesions are represented by the red line. Cases harboring *NOTCH1* mutations (*NOTCH1* M) and/or *SF3B1* mutations (*SF3B1* M) and/or del11q22-q23 in the absence of *TP53* and *BIRC3* disruption are represented by the yellow line. Cases harboring +12 in the absence of *TP53* disruption, *BIRC3* disruption, *NOTCH1* mutations, *SF3B1* mutations and del11q22-q23, and cases wild type for all genetic lesions (Normal) are represented by the green line. Cases harboring del13q14 as the sole genetic lesion are represented by the blue line. Nr=not reached.
- Fig S5. Kaplan-Meier estimates of overall survival (OS) according to the integrated mutational and cytogenetic model in CLL diagnosed in 2005 or afterwards (panel A) and in CLL treated with fludarabine-cyclophosphamide-rituximab.** Cases harboring *TP53* and/or *BIRC3* disruption (*TP53* DIS/*BIRC3* DIS) independent of co-occurring genetic lesions are represented by the red line. Cases harboring *NOTCH1* mutations (*NOTCH1* M) and/or *SF3B1* mutations (*SF3B1* M) and/or del11q22-q23 in the absence of *TP53* and *BIRC3* disruption are represented by the yellow line. Cases harboring +12 in the absence of *TP53* disruption, *BIRC3* disruption, *NOTCH1* mutations, *SF3B1* mutations and del11q22-q23, and cases wild type for all genetic lesions (Normal) are represented by the green line. Cases harboring del13q14 as the sole genetic lesion are represented by the blue line.
- Fig S6. Kaplan-Meier estimates of overall survival (OS) according to the integrated mutational and cytogenetic model in the validation series.** Cases harboring *TP53* and/or *BIRC3* disruption (*TP53* DIS/*BIRC3* DIS) independent of co-occurring genetic lesions are represented by the red line. Cases harboring *NOTCH1* mutations (*NOTCH1* M) and/or *SF3B1* mutations (*SF3B1* M) and/or del11q22-q23 in the absence of *TP53* and *BIRC3* disruption are represented by the yellow line. Cases harboring +12 in the absence of *TP53* disruption, *BIRC3* disruption, *NOTCH1* mutations, *SF3B1* mutations and del11q22-q23,

and cases wild type for all genetic lesions (Normal) are represented by the green line. Cases harboring del13q14 as the sole genetic lesion are represented by the blue line. Nr=not reached.

Fig S7. Comparison of the variant allele frequency of *TP53*, *NOTCH1*, *SF3B1*, *MYD88* and *BIRC3* mutations across sequential samples. Modifications of the mutant allele frequency during disease course was estimated by next generation sequencing in 79 paired sequential samples from 56 patients (median depth of coverage: 719x; range: 479-998x). The red box plots represent the baseline samples. The yellow box plots represent the sequential samples. The bottom and top of the box represents the 25th and 75th percentile. The band near the middle of the box represents the median. The ends of the whiskers represent the smallest and the largest value not classified as outliers. Circles and stars represent outlier values.

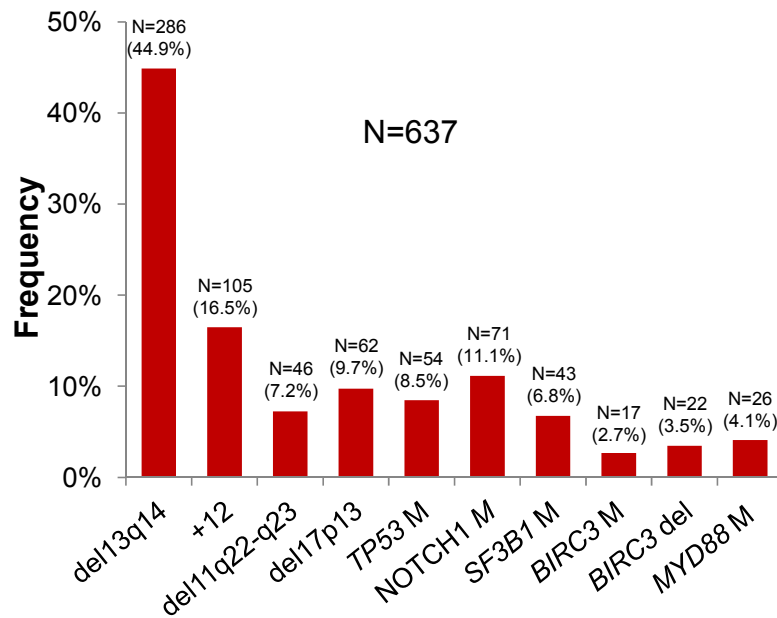
Fig S8. Clonal fluctuation of genetic lesions in three CLL patients. Patient 1 lost the c.1996A>G p.K666E mutation of *SF3B1* but concomitantly developed a new c.2098A>G p.K700E mutation of *SF3B1*. Patient 24 lost the c.637C>T p.R213* mutation of *TP53* but concomitantly developed a new c.743G>A p.R248Q mutation of *TP53*. Patient 22 lost the c.7544_7545delCT p.P2515fs*4 mutation of *NOTCH1*, but concomitantly developed the c.2098A>G p.K700E mutation of *SF3B1*. Genetic lesions are reported on the vertical axis. Follow-up is reported on the horizontal axis. Circles are color-coded based on the molecular status (white: absence of the lesion; red: presence of the lesion). Arrows represent clinically relevant time points. FC, fludarabine-cyclophosphamide; FCR, fludarabine-cyclophosphamide-rituximab; BA, bendamustine-alemtuzumab, R-CHOP, rituximab-cyclophosphamide-doxorubicin-vincristine-prednisone; R-DHAP, rituximab-dexamethasone-high dose cytarabine-cisplatin.

A



Newly diagnosed CLL (N=637)

B



C

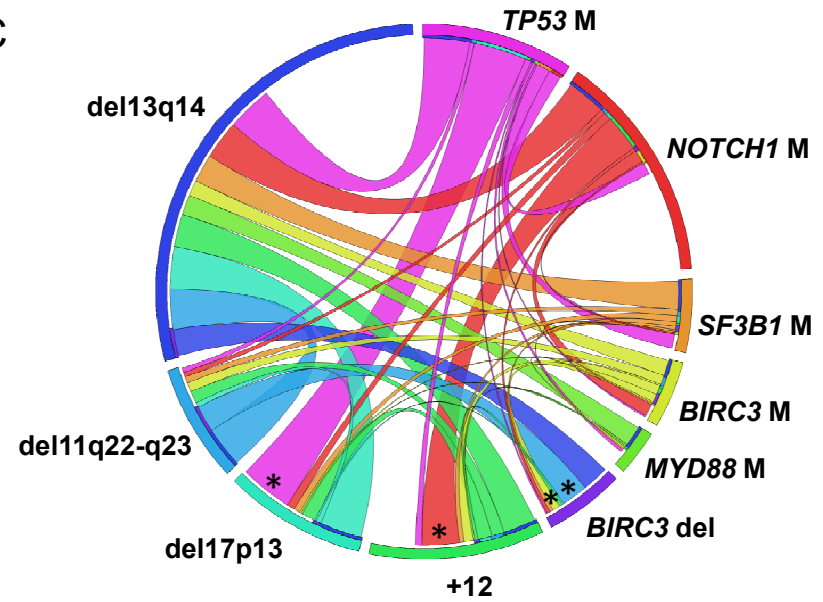


Figure S1

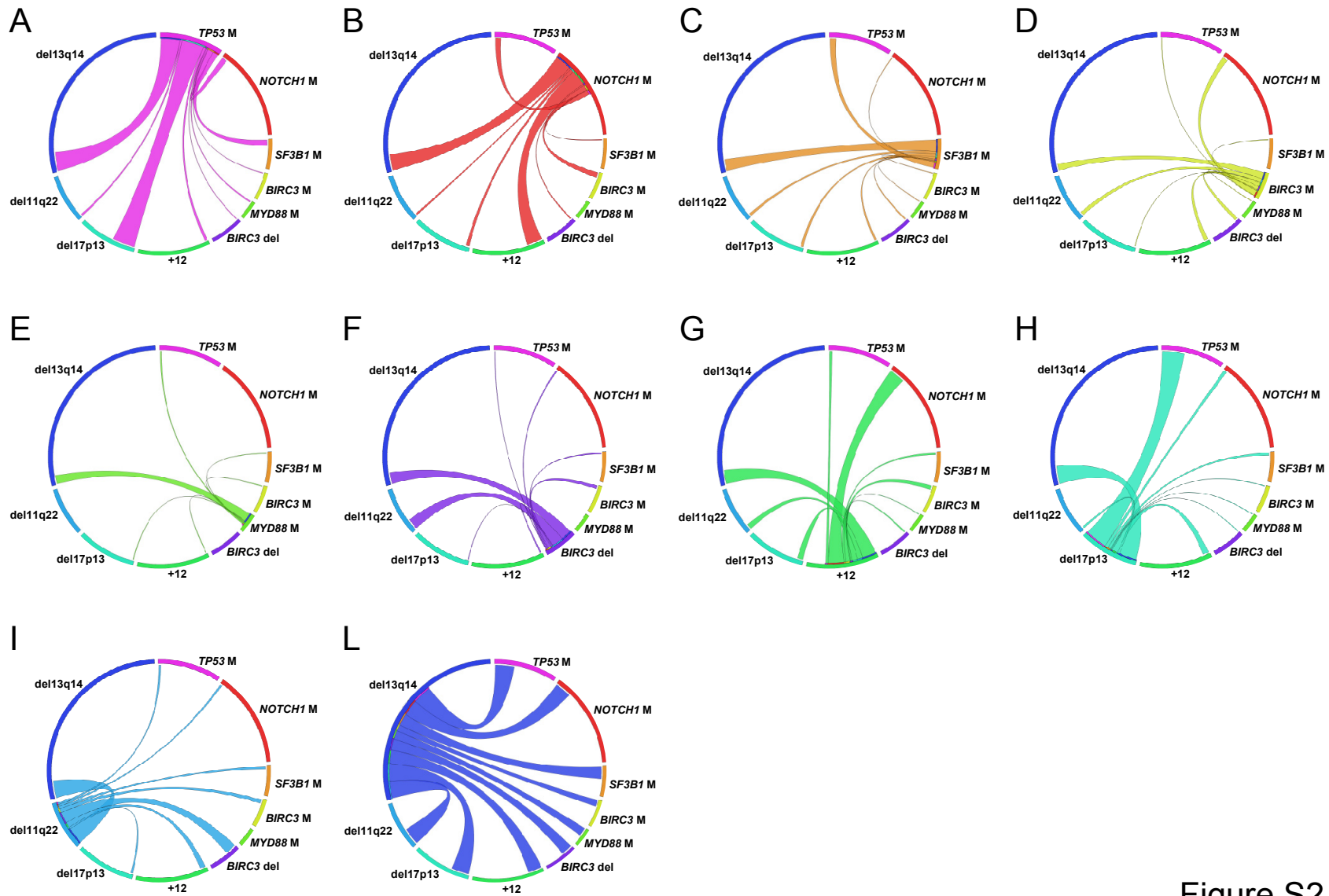
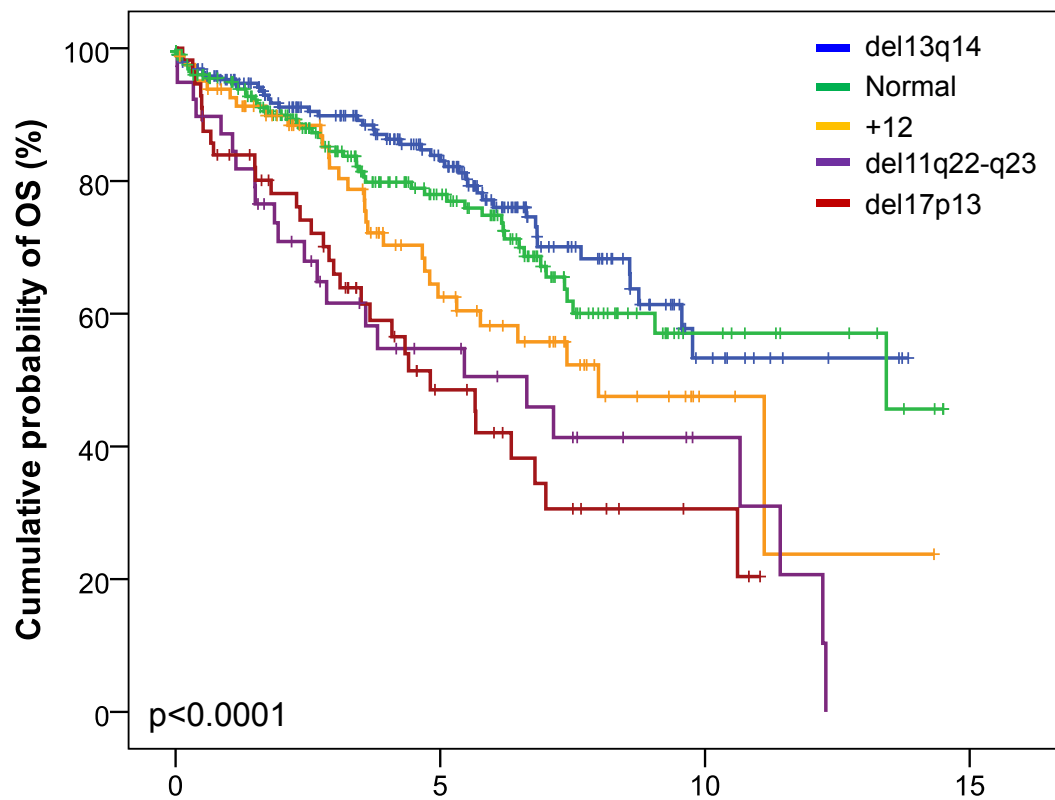


Figure S2



No. At risk

| | 0 | 5 | 10 | 15 |
|--------------|-----|----|----|----|
| del13q14 | 194 | 99 | 11 | 0 |
| Normal | 212 | 79 | 12 | 0 |
| +12 | 82 | 32 | 3 | 0 |
| del11q22-q23 | 39 | 14 | 4 | 0 |
| del17p13 | 56 | 16 | 3 | 0 |

| | Events | Total | Median | 95% CI |
|--------------|--------|-------|--------|-----------|
| del13q14 | 44 | 194 | nr | - |
| Normal | 50 | 212 | 13.4 | 10.2-16.6 |
| +12 | 30 | 82 | 7.8 | 5.7-10.2 |
| del11q22-q23 | 23 | 39 | 8.8 | 2.8-10.4 |
| del17p13 | 31 | 56 | 4.8 | 3.2-6.4 |

Figure S3

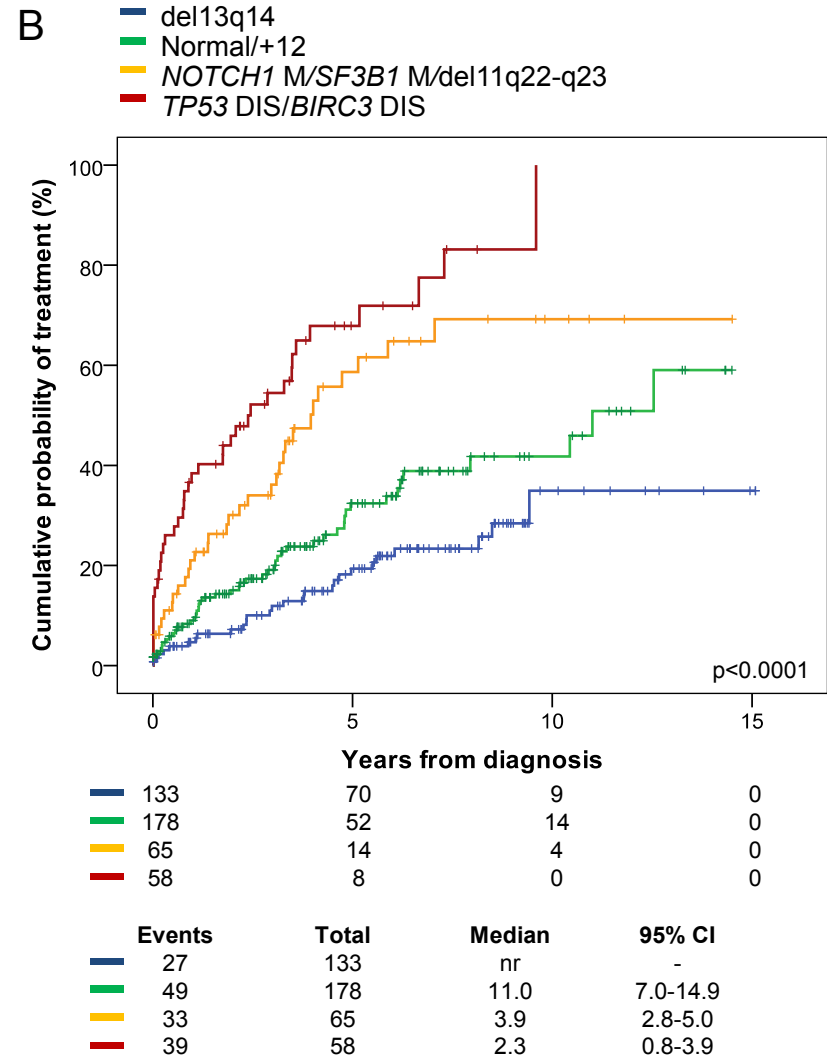
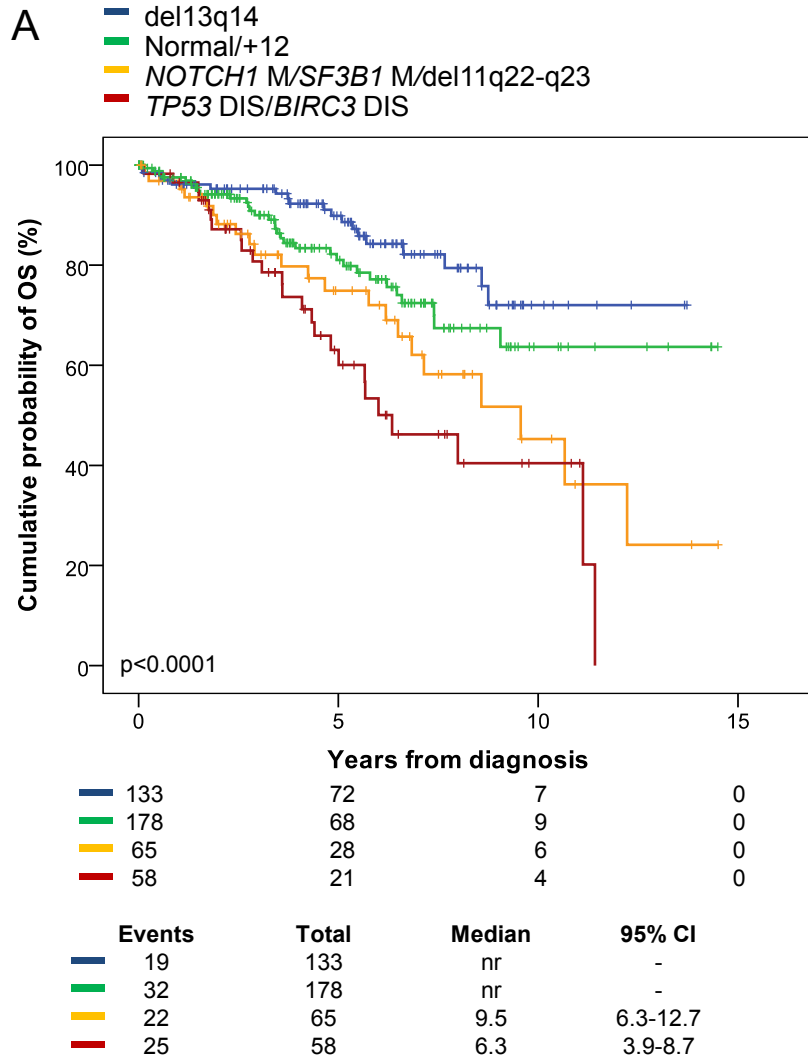
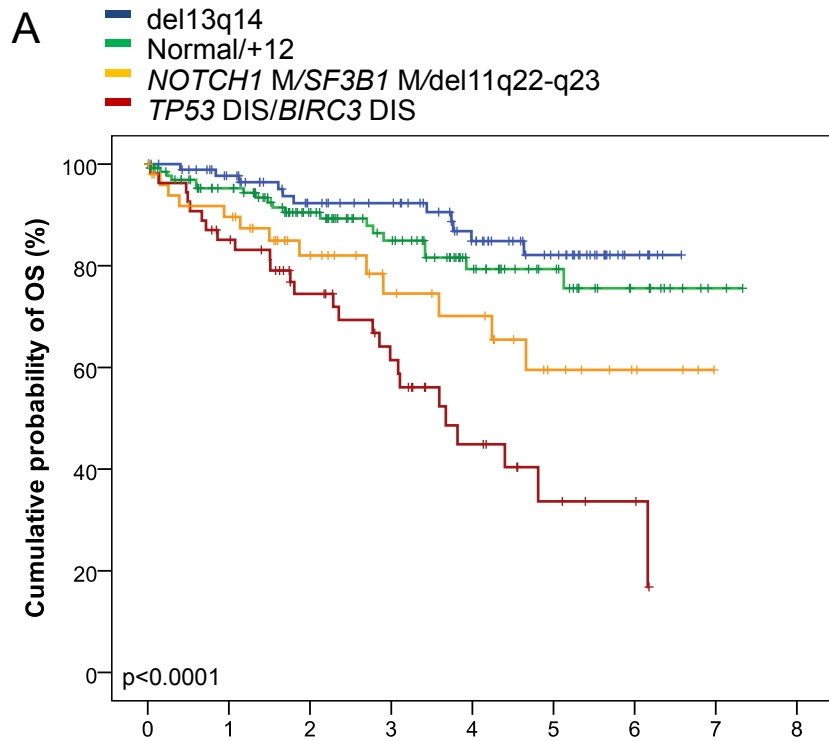
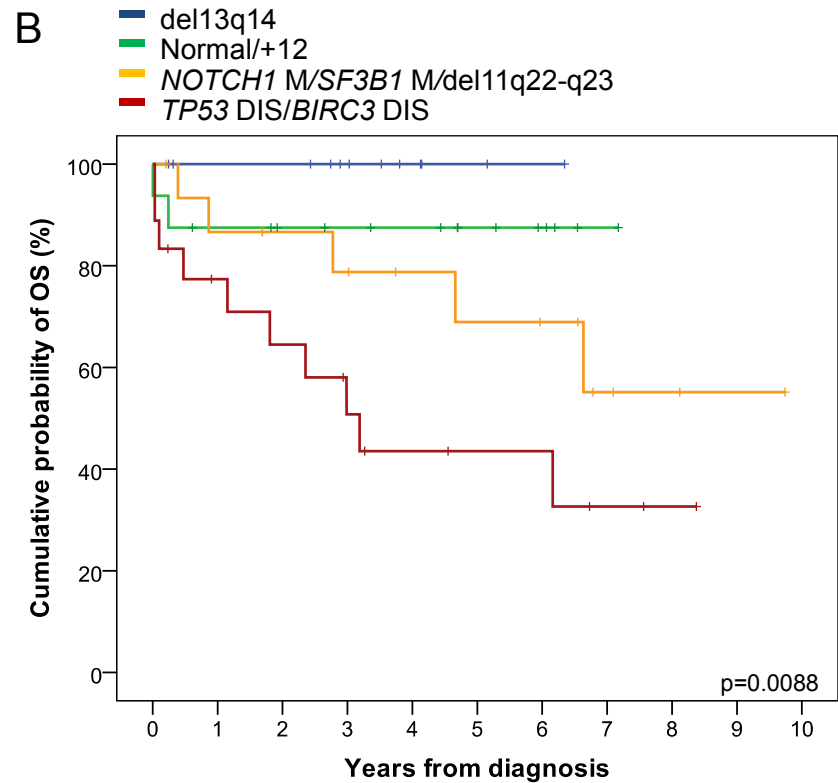


Figure S4



| | | | | | | | | | |
|-------------------------------|-----|-----|----|----|----|----|----|---|---|
| del13q14 | 92 | 80 | 64 | 58 | 42 | 27 | 7 | 0 | 0 |
| Normal/+12 | 137 | 109 | 80 | 58 | 35 | 23 | 11 | 2 | 0 |
| NOTCH1 M/SF3B1 M/del11q22-q23 | 51 | 42 | 28 | 19 | 16 | 8 | 4 | 0 | 0 |
| TP53 DIS/BIRC3 DIS | 54 | 44 | 32 | 23 | 12 | 5 | 3 | 0 | 0 |

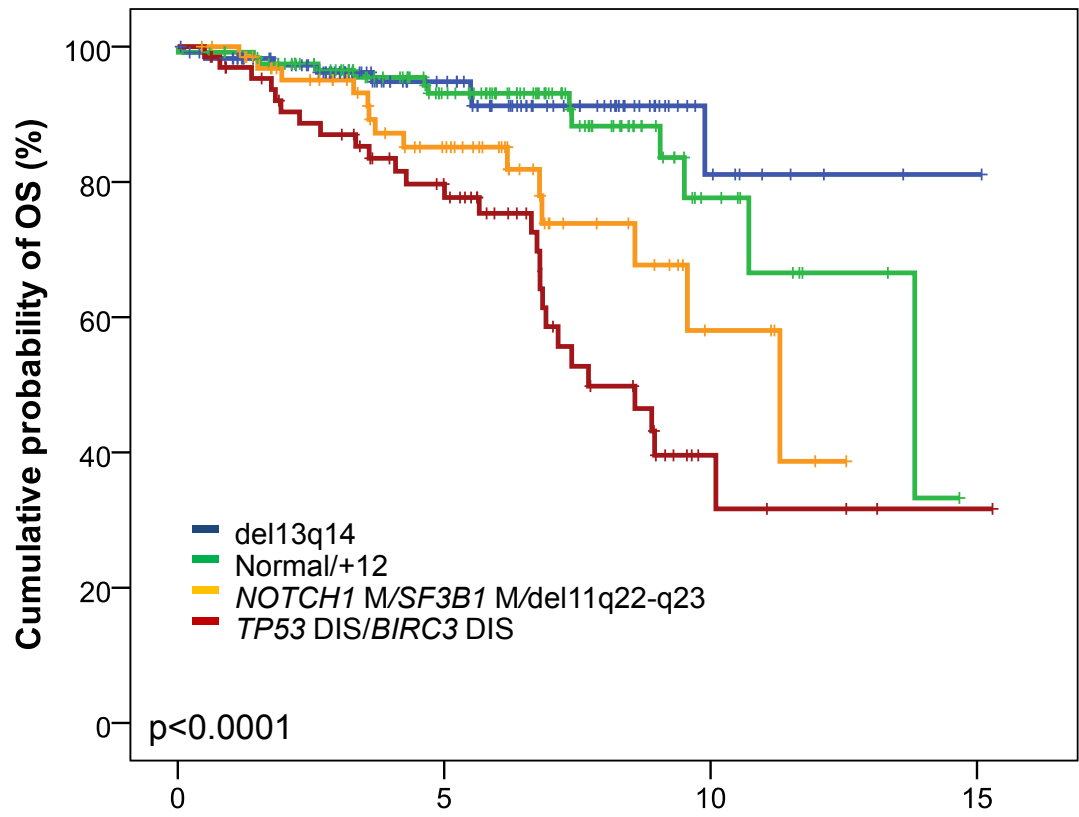
| | Events | Total | 5-years OS | 95% CI |
|-------------------------------|--------|-------|------------|------------|
| del13q14 | 11 | 92 | 82.1% | 72.0-92.2% |
| Normal/+12 | 19 | 137 | 79.4% | 70.2-88.6% |
| NOTCH1 M/SF3B1 M/del11q22-q23 | 13 | 51 | 59.5% | 40.3-78.8% |
| TP53 DIS/BIRC3 DIS | 26 | 54 | 33.7% | 15.1-52.3% |



| | | | | | | | | | | | |
|-------------------------------|----|----|----|----|---|---|---|---|---|---|---|
| del13q14 | 12 | 10 | 10 | 7 | 4 | 2 | 1 | 0 | 0 | 0 | 0 |
| Normal/+12 | 16 | 13 | 11 | 10 | 9 | 6 | 4 | 1 | 0 | 0 | 0 |
| NOTCH1 M/SF3B1 M/del11q22-q23 | 16 | 13 | 11 | 10 | 8 | 7 | 6 | 3 | 2 | 1 | 0 |
| TP53 DIS/BIRC3 DIS | 18 | 12 | 10 | 7 | 5 | 4 | 4 | 2 | 1 | 0 | 0 |

| | Events | Total | 5-years OS | 95% CI |
|-------------------------------|--------|-------|------------|------------|
| del13q14 | 0 | 12 | 100% | |
| Normal/+12 | 2 | 16 | 87.5% | 71.3-100% |
| NOTCH1 M/SF3B1 M/del11q22-q23 | 5 | 16 | 68.9% | 42.9-94.9% |
| TP53 DIS/BIRC3 DIS | 10 | 18 | 43.5% | 18.5-69.5% |

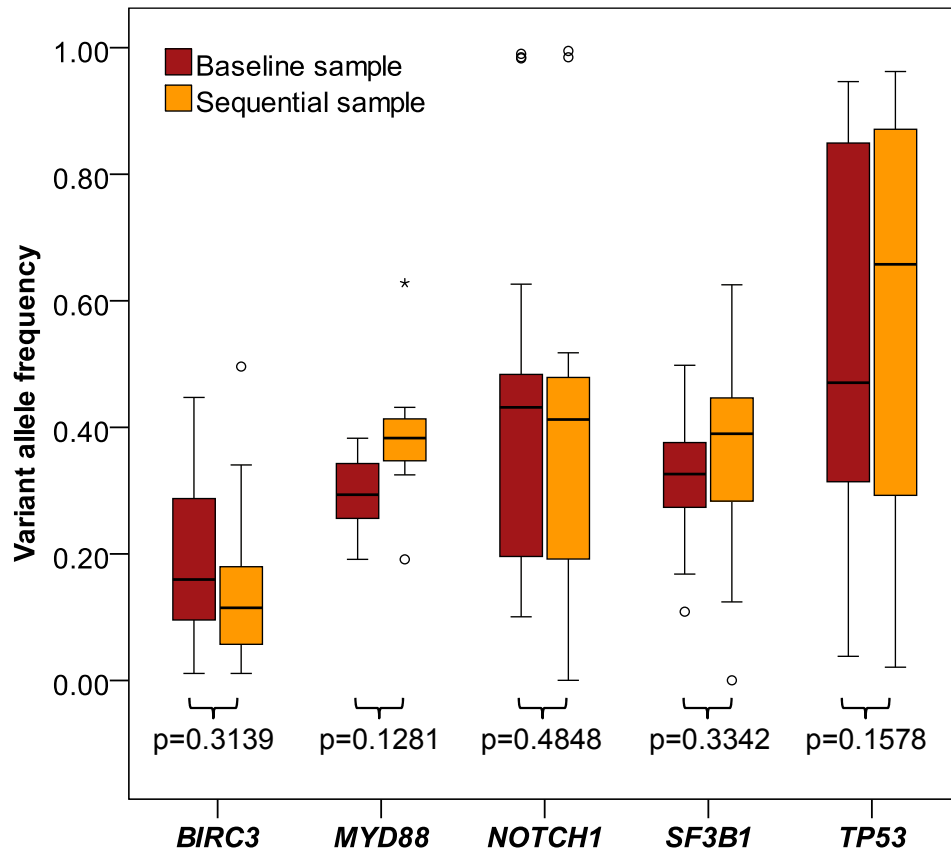
Figure S5



| | | | | |
|-------------------------------|-----|----|----|---|
| del13q14 | 116 | 57 | 8 | 1 |
| Normal/+12 | 122 | 73 | 10 | 0 |
| NOTCH1 M/SF3B1 M/del11q22-q23 | 66 | 37 | 5 | 0 |
| TP53 DIS/BIRC3 DIS | 66 | 40 | 5 | 1 |

| Events | Total | Median | 95% CI |
|-------------------------------|-------|--------|----------|
| del13q14 | 8 | nr | - |
| Normal/+12 | 13 | 13.8 | 9.3-18.2 |
| NOTCH1 M/SF3B1 M/del11q22-q23 | 14 | 11.2 | 8.1-14.4 |
| TP53 DIS/BIRC3 DIS | 27 | 7.7 | 5.5-9.8 |

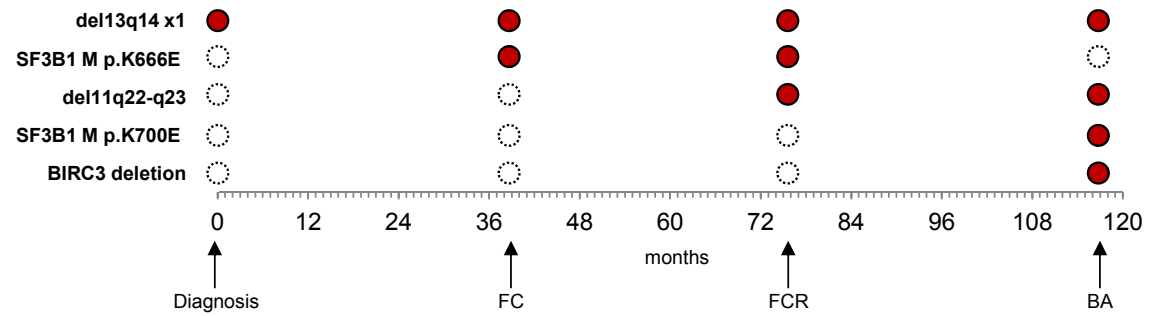
Figure S6



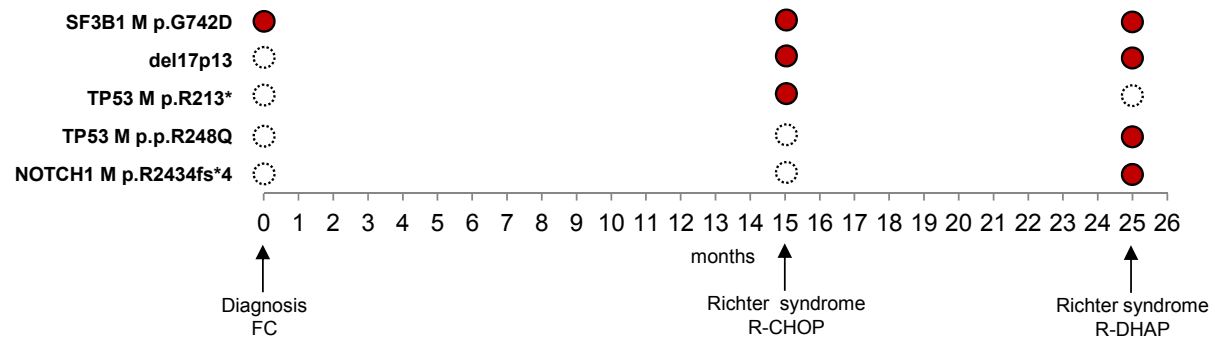
| Gene | Variant allele frequency | |
|---------------|--------------------------|-------------------|
| | Baseline sample | Sequential sample |
| <i>BIRC3</i> | 0.15 | 0.11 |
| <i>MYD88</i> | 0.29 | 0.38 |
| <i>NOTCH1</i> | 0.43 | 0.41 |
| <i>SF3B1</i> | 0.32 | 0.39 |
| <i>TP53</i> | 0.47 | 0.65 |

Figure S7

Patient 1



Patient 24



Patient 22

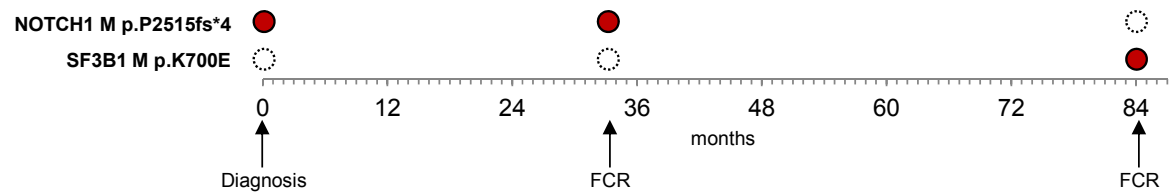


Figure S8

Table S1. Clinical features at presentation of the CLL cohorts ^a

| | Training series | | | | | | | | | Validation series | | | p ^b |
|----------------------------|--------------------|-------|-------|-------------------|-------|-------|---------------------------|-------|-------|-------------------|-------|-------|----------------|
| | Molecular analysis | | | Survival analysis | | | Clonal evolution analysis | | | | | | |
| | N | Total | % | N | Total | % | N | Total | % | N | Total | % | |
| Age >65 years | 326 | 637 | 51.2% | 312 | 583 | 53.5% | 177 | 257 | 68.9% | 189 | 370 | 51.1% | 0.4631 |
| Male gender | 372 | 637 | 58.4% | 341 | 583 | 58.5% | 143 | 257 | 55.6% | 207 | 370 | 55.9% | 0.4387 |
| Rai stage | | | | | | | | | | | | | |
| 0-I | 477 | 637 | 74.9% | 434 | 583 | 74.4% | 186 | 257 | 72.4% | 279 | 370 | 75.4% | 0.7386 |
| II | 73 | 637 | 11.5% | 69 | 583 | 11.8% | 27 | 257 | 10.5% | 64 | 370 | 17.3% | 0.0177 |
| III-IV | 87 | 637 | 13.7% | 80 | 583 | 13.7% | 44 | 257 | 17.1% | 27 | 370 | 7.3% | 0.0022 |
| IGHV homology ≥98% | 247 | 628 | 39.3% | 234 | 575 | 40.7% | 90 | 250 | 36.0% | 147 | 368 | 39.9% | 0.8189 |
| del13q14 | 286 | 637 | 44.9% | 257 | 583 | 44.1% | 128 | 257 | 49.8% | 194 | 370 | 52.4% | 0.0119 |
| +12 | 105 | 637 | 16.5% | 97 | 583 | 16.6% | 51 | 257 | 19.8% | 46 | 370 | 12.4% | 0.0764 |
| del11q22-q23 | 46 | 637 | 7.2% | 42 | 583 | 7.2% | 19 | 257 | 7.4% | 41 | 370 | 11.1% | 0.0386 |
| del17p13 | 62 | 637 | 9.7% | 56 | 583 | 9.6% | 26 | 257 | 10.1% | 25 | 370 | 6.8% | 0.1243 |
| FISH stratification | | | | | | | | | | | | | |
| del13q14 | 217 | 637 | 34.1% | 194 | 583 | 33.3% | 95 | 257 | 37.0% | 148 | 370 | 40.0% | 0.0349 |
| Normal | 226 | 637 | 35.5% | 212 | 583 | 36.4% | 77 | 257 | 30.0% | 115 | 370 | 31.1% | 0.0941 |
| +12 | 89 | 637 | 14.0% | 82 | 583 | 14.1% | 41 | 257 | 16.0% | 43 | 370 | 11.6% | 0.1381 |
| del11q22-q23 | 43 | 637 | 6.8% | 39 | 583 | 6.7% | 18 | 257 | 7.0% | 39 | 370 | 10.5% | 0.0346 |
| del17p13 | 62 | 637 | 9.7% | 56 | 583 | 9.6% | 26 | 257 | 10.1% | 25 | 370 | 6.8% | 0.1243 |
| TP53 mutation | 54 | 637 | 8.5% | 50 | 583 | 8.6% | 27 | 257 | 10.5% | 33 | 370 | 8.9% | 0.8550 |
| NOTCH1 mutation | 71 | 637 | 11.1% | 67 | 583 | 11.5% | 29 | 257 | 11.3% | 37 | 370 | 10.0% | 0.4715 |
| SF3B1 mutation | 43 | 637 | 6.8% | 41 | 583 | 7.0% | 17 | 257 | 6.6% | 24 | 370 | 6.5% | 0.7445 |
| MYD88 mutation | 26 | 637 | 4.1% | 24 | 583 | 4.1% | 9 | 257 | 3.5% | - | - | - | |
| BIRC3 mutation | 17 | 637 | 2.7% | 14 | 583 | 2.4% | 7 | 257 | 2.7% | 18 | 370 | 4.9% | 0.0396 |
| BIRC3 deletion | 22 | 637 | 3.5% | 20 | 583 | 3.4% | 9 | 257 | 3.5% | 11 | 370 | 2.9% | 0.6401 |

^a IGHV, immunoglobulin heavy variable gene; FISH, fluorescence in situ hybridization^b Comparison between the Survival analysis cohort of the Training series and the Validations series

Table S2. TP53, NOTCH1, SF3B1, BIRC3 and MYD88 somatic mutations in the training series

| Sample ID | Gene | Nucleotide change | Amino acid change | COSMIC [^] | RefSeq |
|-----------|----------|-------------------------------|----------------------|---------------------|-------------|
| 14450 | BIRC3* | c.1101_1132del32 | p.G367fs*6 | N | NM_001165.4 |
| 14263 | BIRC3* | c.1270G>T; c.1183_1352del4894 | p.E424*; p.V395fs*78 | N; N | NM_001165.4 |
| 3878 | BIRC3* | c.1279_1280insA | p.I427fs*11 | N | NM_001165.4 |
| 3714 | BIRC3* | c.1638_1639insA | p.Q547fs*12 | N | NM_001165.4 |
| 5889 | BIRC3* | c.1663_1666del4 | p.R555fs*12 | N | NM_001165.4 |
| 14281 | BIRC3 | c.1281_1285del5 | p.I427fs*9 | N | NM_001165.4 |
| 9696 | BIRC3 | c.1282delA | p.R428fs*19 | N | NM_001165.4 |
| 12684 | BIRC3 | c.1284_1288del5 | p.R428fs*8 | N | NM_001165.4 |
| 6070 | BIRC3 | c.1313_1314delAA | p.E438fs*13 | N | NM_001165.4 |
| 12915 | BIRC3 | c.1633G>T | p.E545* | N | NM_001165.4 |
| 12857 | BIRC3 | c.1639delC | p.Q547fs*21 | N | NM_001165.4 |
| 5114 | BIRC3 | c.1641delA | p.Q547fs*21 | N | NM_001165.4 |
| 10471 | BIRC3 | c.1658_1661del4 | p.E553fs*22 | N | NM_001165.4 |
| 10755 | BIRC3 | c.1660G>T | p.E554* | N | NM_001165.4 |
| 12914 | BIRC3 | c.1672A>G | p.K558E | N | NM_001165.4 |
| 12904 | BIRC3 | c.1748_1780del133 | p.P583fs*12 | N | NM_001165.4 |
| 8667 | BIRC3 | c.1798C>G | p.R600G | N | NM_001165.4 |
| 5114 | MYD88 | c.649G>T | p.V217F | Y | NM_002468.4 |
| 5096 | MYD88 | c.649G>T | p.V217F | Y | NM_002468.4 |
| 4848 | MYD88 | c.649G>T | p.V217F | Y | NM_002468.4 |
| 7835 | MYD88 | c.649G>T | p.V217F | Y | NM_002468.4 |
| 12664 | MYD88 | c.649G>T | p.V217F | Y | NM_002468.4 |
| 14525 | MYD88 | c.794T>C | p.L265P | Y | NM_002468.4 |
| 14534 | MYD88 | c.794T>C | p.L265P | Y | NM_002468.4 |
| 10628 | MYD88 | c.794T>C | p.L265P | Y | NM_002468.4 |
| 3560 | MYD88 | c.794T>C | p.L265P | Y | NM_002468.4 |
| 10894 | MYD88 | c.794T>C | p.L265P | Y | NM_002468.4 |
| 8436 | MYD88 | c.794T>C | p.L265P | Y | NM_002468.4 |
| 10879 | MYD88 | c.794T>C | p.L265P | Y | NM_002468.4 |
| 10637 | MYD88 | c.794T>C | p.L265P | Y | NM_002468.4 |
| 3501 | MYD88 | c.794T>C | p.L265P | Y | NM_002468.4 |
| 3722 | MYD88 | c.794T>C | p.L265P | Y | NM_002468.4 |
| 5170 | MYD88 | c.794T>C | p.L265P | Y | NM_002468.4 |
| 3965 | MYD88 | c.794T>C | p.L265P | Y | NM_002468.4 |
| 4048 | MYD88 | c.794T>C | p.L265P | Y | NM_002468.4 |
| 8762 | MYD88 | c.794T>C | p.L265P | Y | NM_002468.4 |
| 4767 | MYD88 | c.794T>C | p.L265P | Y | NM_002468.4 |
| 12639 | MYD88 | c.794T>C | p.L265P | Y | NM_002468.4 |
| 6525 | MYD88 | c.794T>C | p.L265P | Y | NM_002468.4 |
| 10865 | MYD88 | c.794T>C | p.L265P | Y | NM_002468.4 |
| 12924 | MYD88 | c.794T>C | p.L265P | Y | NM_002468.4 |
| 12689 | MYD88 | c.794T>C | p.L265P | Y | NM_002468.4 |
| 12671 | MYD88 | c.794T>C | p.L265P | Y | NM_002468.4 |
| 6727 | NOTCH1** | c.6485_6847del1363 | p.P2162del122 | N | NM_017617.2 |
| 12857 | NOTCH1** | c.6802_6803delGA | p.E2268fs*86 | N | NM_017617.2 |
| 12685 | NOTCH1** | c.6987_6988insG | p.S2330fs*25 | Y | NM_017617.2 |
| 12907 | NOTCH1** | c.7006_7007insC | p.L2336fs*19 | Y | NM_017617.2 |
| 7398 | NOTCH1** | c.7023_7024ins4 | p.S2342fs*13 | Y | NM_017617.2 |
| 6426 | NOTCH1** | c.7247_7274del28 | p.P2416fs*11 | N | NM_017617.2 |
| 12884 | NOTCH1** | c.7250_7251insCAC | p.Q2417>HT | N | NM_017617.2 |
| 7140 | NOTCH1** | c.7389_7390CG>T | p.P2463fs*15 | Y | NM_017617.2 |
| 3878 | NOTCH1** | c.7391delC | p.A2464fs*14 | Y | NM_017617.2 |
| 7140 | NOTCH1** | c.7411_7429del19 | p.S2471fs*1 | N | NM_017617.2 |
| 3985 | NOTCH1** | c.7433delC | p.T2478fs*6 | N | NM_017617.2 |
| 5675 | NOTCH1** | c.7446delC | p.F2482fs*2 | N | NM_017617.2 |
| 12124 | NOTCH1 | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 6070 | NOTCH1 | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 8667 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 3494 | NOTCH1 | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 11730 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 5303 | NOTCH1 | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 11724 | NOTCH1 | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 9273 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 5368 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 3724 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 9930 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 5889 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 5825 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |

| | | | | | |
|-------|----------|------------------|----------------|---|-------------|
| 4261 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 5726 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 12174 | NOTCH1 | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 4341 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 5984 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 4844 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 5765 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 3975 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 3701 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 3648 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 4233 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 6892 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 3706 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 3392 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 6624 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 11815 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 10267 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 4800 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 10320 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 5565 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 13692 | NOTCH1 | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 14260 | NOTCH1 | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 3121 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 3979 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 12926 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 12858 | NOTCH1 | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 12915 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 12847 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 12875 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 12864 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 12887 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 12922 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 12831 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 12839 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 12916 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 12834 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 12832 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 12684 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 10471 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 12686 | NOTCH1 | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 12660 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 7831 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 12810 | NOTCH1** | c.7544_7545delCT | p.P2515fs*4 | Y | NM_017617.2 |
| 14532 | NOTCH1 | c.7321C>T | p.Q2441* | Y | NM_017617.2 |
| 14524 | NOTCH1 | c.7544_7545delCT | p.2515fs*4 | Y | NM_017617.2 |
| 14547 | NOTCH1 | c.7544_7545delCT | p.2515fs*4 | Y | NM_017617.2 |
| 4845 | SF3B1*** | c.1890A>T | p.R630S | Y | NM_012433.2 |
| 7228 | SF3B1*** | c.1986C>A | p.H662Q | Y | NM_012433.2 |
| 4919 | SF3B1 | c.1986C>A | p.H662Q | Y | NM_012433.2 |
| 11772 | SF3B1*** | c.1996A>G | p.K666E | Y | NM_012433.2 |
| 7040 | SF3B1*** | c.1996A>G | p.K666E | Y | NM_012433.2 |
| 9094 | SF3B1*** | c.1998G>T | p.K666N | Y | NM_012433.2 |
| 5565 | SF3B1*** | c.2094_2101del6 | p.delQ699_K700 | Y | NM_012433.2 |
| 11480 | SF3B1*** | c.2098A>G | p.K700E | Y | NM_012433.2 |
| 4602 | SF3B1*** | c.2098A>G | p.K700E | Y | NM_012433.2 |
| 7561 | SF3B1*** | c.2098A>G | p.K700E | Y | NM_012433.2 |
| 4681 | SF3B1*** | c.2098A>G | p.K700E | Y | NM_012433.2 |
| 11197 | SF3B1*** | c.2098A>G | p.K700E | Y | NM_012433.2 |
| 10676 | SF3B1*** | c.2098A>G | p.K700E | Y | NM_012433.2 |
| 3981 | SF3B1*** | c.2098A>G | p.K700E | Y | NM_012433.2 |
| 11785 | SF3B1*** | c.2098A>G | p.K700E | Y | NM_012433.2 |
| 11196 | SF3B1*** | c.2098A>G | p.K700E | Y | NM_012433.2 |
| 4938 | SF3B1 | c.2111T>A | p.I704N | Y | NM_012433.2 |
| 3726 | SF3B1 | c.2219G>A | p.G740E | Y | NM_012433.2 |
| 3950 | SF3B1*** | c.2219G>A | p.G740E | Y | NM_012433.2 |
| 9201 | SF3B1 | c.2225G>A | p.G742D | Y | NM_012433.2 |
| 5965 | SF3B1 | c.2225G>A | p.G742D | Y | NM_012433.2 |
| 10642 | SF3B1 | c.2225G>A | p.G742D | Y | NM_012433.2 |
| 6434 | SF3B1 | c.2225G>A | p.G742D | Y | NM_012433.2 |
| 14526 | SF3B1 | c.1866G>T | p.E622D | Y | NM_012433.2 |

| | | | | | |
|-------|-------|----------------------|------------------|------|-------------|
| 14529 | SF3B1 | c.1866G>T | p.E622D | Y | NM_012433.2 |
| 7003 | SF3B1 | c.1996A>G | p.K666E | Y | NM_012433.2 |
| 9022 | SF3B1 | c.2008C>G | p.Q670E | Y | NM_012433.2 |
| 9614 | SF3B1 | c.2097_2104delAAAGTT | p.delK700_V701 | N | NM_012433.2 |
| 10755 | SF3B1 | c.2098A>G | p.K700E | Y | NM_012433.2 |
| 10356 | SF3B1 | c.2098A>G | p.K700E | Y | NM_012433.2 |
| 4570 | SF3B1 | c.2098A>G | p.K700E | Y | NM_012433.2 |
| 4463 | SF3B1 | c.2098A>G | p.K700E | Y | NM_012433.2 |
| 12919 | SF3B1 | c.2098A>G | p.K700E | Y | NM_012433.2 |
| 12845 | SF3B1 | c.2098A>G | p.K700E | Y | NM_012433.2 |
| 10470 | SF3B1 | c.2098A>G | p.K700E | Y | NM_012433.2 |
| 12646 | SF3B1 | c.2098A>G | p.K700E | Y | NM_012433.2 |
| 12689 | SF3B1 | c.2098A>G | p.K700E | Y | NM_012433.2 |
| 3451 | SF3B1 | c.2110_2111insCCA | p.T703insP | N | NM_012433.2 |
| 5125 | SF3B1 | c.2110A>T | p.I704F | N | NM_012433.2 |
| 8990 | SF3B1 | c.2110A>T | p.I704F | N | NM_012433.2 |
| 9767 | SF3B1 | c.2110A>T | p.I704F | N | NM_012433.2 |
| 12837 | SF3B1 | c.2110A>T | p.I704F | N | NM_012433.2 |
| 14549 | SF3B1 | c.2225G>A | p.G742D | Y | NM_012433.2 |
| 4764 | TP53 | c.150delT | p.I50fs*73 | Y | NM_000546.5 |
| 12682 | TP53 | c.217G>A | p.V73M | Y | NM_000546.5 |
| 12889 | TP53 | c.290_306del17 | p.V97fs*46 | N | NM_000546.5 |
| 5125 | TP53 | c.329G>A | p.R110H | Y | NM_000546.5 |
| 9582 | TP53 | c.329G>T | p.R110L | Y | NM_000546.5 |
| 3560 | TP53 | c.334G>A | p.G112S | Y | NM_000546.5 |
| 12926 | TP53 | c.334G>A | p.G112S | Y | NM_000546.5 |
| 8046 | TP53 | c.365_366delITG | p.V122fs*26 | Y | NM_000546.5 |
| 4831 | TP53 | c.377A>G | p.Y126C | Y | NM_000546.5 |
| 4232 | TP53 | c.404G>T | p.C135F | Y | NM_000546.5 |
| 12833 | TP53 | c.422G>A | p.C141Y | Y | NM_000546.5 |
| 10553 | TP53 | c.452C>G | p.P151R | Y | NM_000546.5 |
| 4274 | TP53 | c.455_456insC | p.P152fs*17 | N | NM_000546.5 |
| 7812 | TP53 | c.472C>A; c.658T>C | p.R158S; p.Y220H | N; Y | NM_000546.5 |
| 7911 | TP53 | c.473G>A | p.R158H | Y | NM_000546.5 |
| 4845 | TP53 | c.536A>G | p.H179R | Y | NM_000546.5 |
| 5538 | TP53 | c.536A>G | p.H179R | Y | NM_000546.5 |
| 4997 | TP53 | c.536A>T | p.H179L | Y | NM_000546.5 |
| 10470 | TP53 | c.550_553delGATA | p.D184fs*62 | Y | NM_000546.5 |
| 9930 | TP53 | c.569_581del13 | p.P190fs*53 | N | NM_000546.5 |
| 12879 | TP53 | c.614A>G | p.Y205C | Y | NM_000546.5 |
| 12920 | TP53 | c.625_626delAG | p.R209fs*6 | Y | NM_000546.5 |
| 7916 | TP53 | c.646G>A | p.V216M | Y | NM_000546.5 |
| 5167 | TP53 | c.673-2A>G | splice site | N | NM_000546.5 |
| 3724 | TP53 | c.701A>G | p.Y234C | Y | NM_000546.5 |
| 4270 | TP53 | c.701A>G | p.Y234C | Y | NM_000546.5 |
| 12883 | TP53 | c.701A>G c.747G>T | p.Y234C; p.R249S | Y; Y | NM_000546.5 |
| 7269 | TP53 | c.710G>T | p.M237I | Y | NM_000546.5 |
| 10472 | TP53 | c.715A>G | p.N239D | Y | NM_000546.5 |
| 6342 | TP53 | c.716A>T | p.N239I | N | NM_000546.5 |
| 9022 | TP53 | c.721T>G | p.S241A | Y | NM_000546.5 |
| 3204 | TP53 | c.733G>A | p.G245S | Y | NM_000546.5 |
| 14532 | TP53 | c.733G>T | p.G245C | Y | NM_000546.5 |
| 11325 | TP53 | c.734G>T | p.G245V | Y | NM_000546.5 |
| 12857 | TP53 | c.740delA | p.N247fs*98 | Y | NM_000546.5 |
| 7912 | TP53 | c.742C>T | p.R248W | Y | NM_000546.5 |
| 12891 | TP53 | c.743G>A | p.R248Q | Y | NM_000546.5 |
| 6270 | TP53 | c.747G>T | p.R249S | Y | NM_000546.5 |
| 14549 | TP53 | c.790delC | p.L264fs*81 | Y | NM_000546.5 |
| 12646 | TP53 | c.794T>C | p.L265P | Y | NM_000546.5 |
| 5967 | TP53 | c.796G>A | p.G266R | Y | NM_000546.5 |
| 11480 | TP53 | c.797G>A | p.G266E | Y | NM_000546.5 |
| 12828 | TP53 | c.797G>A | p.G266E | Y | NM_000546.5 |
| 6012 | TP53 | c.817C>A | p.R273S | Y | NM_000546.5 |
| 3955 | TP53 | c.817C>T | p.R273C | Y | NM_000546.5 |
| 10628 | TP53 | c.824G>A | p.C275Y | Y | NM_000546.5 |
| 5141 | TP53 | c.824G>A | p.C275Y | Y | NM_000546.5 |
| 9878 | TP53 | c.843C>G | p.D281E | Y | NM_000546.5 |
| 4602 | TP53 | c.848G>A | p.R283H | Y | NM_000546.5 |
| 12858 | TP53 | c.854_855insT | p.E285fs*20 | Y | NM_000546.5 |
| 12124 | TP53 | c.856G>A | p.E286K | Y | NM_000546.5 |

| | | | | | |
|--------------|------|---------------|-------------|---|-------------|
| 5565 | TP53 | c.869G>A | p.R290H | Y | NM_000546.5 |
| 14542 | TP53 | c.911_915del4 | p.T304fs*91 | N | NM_000546.5 |
| 5570 | TP53 | c.918+1G>T | splice site | N | NM_000546.5 |

* Mutations previously reported in Rossi D, et al. Blood 2012; 119:2854-2862

** Mutations previously reported in Rossi D, et al. Blood 2012; 119:521-529

*** Mutations previously reported in Rossi D, et al. Blood 2011; 118:6904-6908

^Genes annotated in the COSMIC database v60; Y, yes; N, no

Table S3. Time-fixed analysis of the impact of genetic lesions on OS in the training series ^a

| | Events | Total | 5-year OS | Univariate analysis | | | | Multivariate analysis | | | | Internal bootstrapping validation | | | | |
|----------------------------|--------|-------|-----------|---------------------|------|------|---------|-----------------------|------|------|---------|-----------------------------------|------|------|---------------------|-------|
| | | | | HR | LCI | UCI | p | HR | LCI | UCI | p | Bootstrap parameters (mean) | | | Bootstrap selection | |
| No del13q14 | 104 | 326 | 70.2% | 1.00 | - | - | 0.2349 | 1.00 | - | - | 0.6777 | 1.00 | - | - | - | 28.5% |
| del13q14 | 74 | 257 | 76.0% | 0.83 | 0.62 | 1.12 | | 0.93 | 0.68 | 1.29 | | 0.95 | 0.68 | 1.32 | | |
| No +12 | 138 | 486 | 75.7% | 1.00 | - | - | 0.0200 | 1.00 | - | - | 0.0326 | 1.00 | - | - | - | 75.8% |
| +12 | 40 | 97 | 59.4% | 1.52 | 1.07 | 2.16 | | 1.52 | 1.04 | 2.22 | | 1.51 | 1.05 | 2.29 | | |
| No del11q22-q23 | 154 | 541 | 74.4% | 1.00 | - | - | 0.0011 | 1.00 | - | - | 0.0188 | 1.00 | - | - | - | 81.9% |
| del11q22-q23 | 24 | 42 | 54.8% | 2.06 | 1.33 | 3.17 | | 1.83 | 1.10 | 3.02 | | 1.89 | 1.12 | 3.18 | | |
| No NOTCH1 mutation | 145 | 516 | 75.2% | 1.00 | - | - | 0.0027 | 1.00 | - | - | 0.0131 | 1.00 | - | - | - | 84.2% |
| NOTCH1 mutation | 33 | 67 | 56.3% | 1.79 | 1.22 | 2.61 | | 1.65 | 1.11 | 2.46 | | 1.69 | 1.13 | 2.54 | | |
| No SF3B1 mutation | 160 | 542 | 73.8% | 1.00 | - | - | 0.0098 | 1.00 | - | - | 0.0159 | 1.00 | - | - | - | 78.1% |
| SF3B1 mutation | 18 | 41 | 60.3% | 1.91 | 1.17 | 3.11 | | 1.87 | 1.12 | 3.11 | | 1.92 | 1.14 | 3.23 | | |
| No MYD88 mutation | 174 | 559 | 72.0% | 1.00 | - | - | 0.1728 | 1.00 | - | - | 0.5205 | 1.00 | - | - | - | 22.8% |
| MYD88 mutation | 4 | 24 | 95.8% | 0.50 | 0.19 | 1.35 | | 0.72 | 0.26 | 1.96 | | 0.73 | 0.28 | 1.98 | | |
| No TP53 disruption | 136 | 509 | 76.5% | 1.00 | - | - | <0.0001 | 1.00 | - | - | <0.0001 | 1.00 | - | - | - | 99.9% |
| TP53 disruption | 42 | 74 | 50.7% | 2.54 | 1.79 | 3.59 | | 2.49 | 1.72 | 3.59 | | 2.54 | 1.75 | 3.70 | | |
| No BIRC3 disruption | 161 | 553 | 74.0% | 1.00 | - | - | 0.0019 | 1.00 | - | - | 0.0396 | 1.00 | - | - | - | 70.6% |
| BIRC3 disruption | 17 | 30 | 52.5% | 1.91 | 1.17 | 3.11 | | 1.90 | 1.03 | 3.50 | | 2.00 | 1.07 | 3.74 | | |

^aOS, overall survival; HR, hazard ratio; LCI, 95% lower confidence interval; UCI, 95% upper confidence interval

Shrinkage coefficient: 0.86

Discrimination: bias-corrected c-index: 0.639; optimism: 0.016

Calibration: bias-corrected calibration slope: 0.875; optimism: 0.125

Table S4. Variable importance measure for the random survival forest model in the training series

| Top variables | Minimal depth |
|-------------------------|----------------------|
| <i>TP53</i> disruption | 0.512 |
| <i>BIRC3</i> disruption | 1.766 |
| <i>SF3B1</i> mutation | 1.864 |
| <i>NOTCH1</i> mutation | 1.880 |
| del11q22-q23 | 1.902 |
| +12 | 2.150 |

Variables included in the analysis: *TP53* disruption, *BIRC3* disruption, *SF3B1* mutation, *NOTCH1* mutation, del11q22-q23, +12, del13q14
Mean minimal depth threshold: 2 · 10³

Table S5. Distribution of clinical and biological features across subgroups defined by the mutational and cytogenetic model in the training series ^a

| | del13q14 | | | Normal/+12 | | | <i>NOTCH1</i> M/ <i>SF3B1</i> M/del11q22-q23 | | | <i>TP53</i> DIS/ <i>BIRC3</i> DIS | | | p |
|----------------------------------|---------------|-------|------|---------------|-------|------|--|-------|------|-----------------------------------|-------|------|---------|
| | N | Total | % | N | Total | % | N | Total | % | N | Total | % | |
| Median age (yr) | 66.5 (median) | | | 66.6 (median) | | | 67.6 (median) | | | 67.9 (median) | | | 0.7931 |
| Male gender | 81 | 155 | 52.3 | 127 | 228 | 55.7 | 56 | 99 | 56.6 | 77 | 101 | 76.2 | 0.0009 |
| Rai stage III-IV | 11 | 155 | 7.1 | 24 | 228 | 10.5 | 17 | 99 | 17.2 | 28 | 101 | 27.7 | <0.0001 |
| <i>IGHV</i> homology ≥98% | 29 | 152 | 19.1 | 75 | 224 | 33.5 | 66 | 98 | 67.3 | 64 | 101 | 63.4 | <0.0001 |

^a*IGHV*, immunoglobulin heavy variable gene

Table 6S. Time-fixed univariate and multivariate analysis of OS in the validation series ^a

| | Univariate analysis | | | | Multivariate analysis | | | |
|--|---------------------|------|-------|----------------------|-----------------------|------|------|---------------------|
| | HR | LCI | UCI | p | HR | LCI | UCI | p |
| Age (in year units) ^b | 1.04 | 1.01 | 1.06 | 0.0033 | 1.05 | 1.02 | 1.07 | 0.0004 |
| Female | 1.00 | - | - | | 1.00 | - | - | |
| Male | 1.12 | 0.67 | 1.85 | 0.6591 | 0.90 | 0.53 | 1.53 | 0.7026 |
| Rai stage | | | | | | | | |
| 0-I | 1.00 | - | - | | 1.00 | - | - | |
| II | 1.47 | 0.76 | 2.86 | <0.0001 ^c | 1.18 | 0.59 | 2.36 | 0.0259 ^c |
| III-IV | 4.54 | 2.51 | 8.20 | | 2.31 | 1.25 | 4.26 | |
| IGHV homology <98% | 1.00 | - | - | | 1.00 | - | - | |
| IGHV homology ≥98% | 6.80 | 3.62 | 12.78 | <0.0001 | 4.83 | 2.48 | 9.40 | <0.0001 |
| Integrated mutational and cytogenetic model | | | | | | | | |
| Very-low risk | 1.00 | - | - | | 1.00 | - | - | |
| Low-risk | 1.31 | 0.54 | 3.16 | | 1.24 | 0.50 | 3.03 | |
| Intermediate-risk | 2.94 | 1.23 | 7.02 | <0.0001 ^c | 2.02 | 0.83 | 4.90 | 0.0053 ^c |
| High-risk | 5.17 | 2.35 | 11.39 | | 3.57 | 1.55 | 8.21 | |

^aOS, overall survival; HR, hazard ratio; LCI, 95% lower confidence interval; UCI, 95% upper confidence interval; *IGHV*, immunoglobulin heavy variable gene

^bAnalyzed as a continuous variable

^cp for trend

Shrinkage coefficient: 0.90

Discrimination: bias-corrected c-index: 0.782; optimism: 0.023

Calibration: bias-corrected calibration slope: 0.859; optimism: 0.15

Table S7. Distribution of FISH cytogenetic subgroups across the strata defined by the mutational and cytogenetic model in the training series

| | | Integrated mutational and cytogenetic model | | | | | | | | Total |
|------------|--------------|---|-------|------------|-------|-------------------------------|-------|--------------------|-------|-------|
| | | del13q14 | | Normal/+12 | | NOTCH1 M/SF3B1 M/del11q22-q23 | | TP53 DIS/BIRC3 DIS | | |
| | | N | % | N | % | N | % | N | % | |
| FISH model | del13q14 | 155 | 79.9% | 0 | 0.0% | 28 | 14.4% | 11 | 5.7% | 194 |
| | Normal | 0 | 0.0% | 171 | 80.7% | 31 | 14.6% | 10 | 4.7% | 212 |
| | +12 | 0 | 0.0% | 57 | 69.5% | 19 | 23.2% | 6 | 7.3% | 82 |
| | del11q22-q23 | 0 | 0.0% | 0 | 0.0% | 21 | 53.8% | 18 | 46.2% | 39 |
| | del17p13 | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 56 | 100% | 56 |

Table S8. Newly developed genetic lesions in CLL patients showing clonal evolution

| Patient ID | Sample ID | Timepoint | Months since diagnosis | <i>TP53</i> mutation | <i>NOTCH1</i> mutation | <i>SF3B1</i> mutation | <i>MYD88</i> mutation | <i>BIRC3</i> mutation | +12 | del17p13 | del11q22-q23 | del13q14 | <i>BIRC3</i> deletion |
|------------|-----------|-------------------------------|------------------------|----------------------|------------------------|-----------------------|-----------------------|---|-----|----------|--------------|----------------------|-----------------------|
| 1 | 3715 | diagnosis and first treatment | 0.0 | - | - | - | - | - | - | - | - | 35% (x1) | - |
| 1 | 5001 | second treatment | 38.1 | - | - | c.1996A>G p.K666E | - | - | - | - | - | 40% (x1) | - |
| 1 | 7915 | third treatment | 75.6 | - | - | c.1996A>G p.K666E | - | - | - | - | 10% | 49% (x1) | - |
| 1 | 13425 | fourth treatment | 116.8 | - | - | c.2098A>G p.K700E | - | - | - | - | 90% | 92% (x1) | 58% |
| 2 | 4932 | diagnosis | 0.0 | - | - | - | - | - | - | - | - | 12% (x1) | - |
| 2 | 14285 | first treatment | 68.4 | - | - | - | c.649G>T p.V217F | - | - | - | - | 30% (x1) 19% (x2) | - |
| 3 | 9630 | diagnosis | 0.0 | - | - | - | - | - | 69% | - | - | 74% (x1) | - |
| 3 | 14461 | first treatment | 34.5 | c.817C>T p.R273C | - | - | - | - | 50% | 70% | - | 82% (x1) | - |
| 4 | 14263 | diagnosis and first treatment | 0.0 | - | - | - | - | c.1270G>T p.E424*; c.1183_1352del4 894 p.V395fs*78 | - | - | - | 10% (x1) | - |
| 4 | 14264 | second treatment | 60.2 | - | - | - | - | c.1270G>T p.E424*; c.1183_1352del4 894 p.V395fs*78 | - | - | 29% | 10% (x1) | 33% |
| 4 | 14265 | third treatment | 74.0 | - | - | - | - | c.1270G>T p.E424*; c.1183_1352del4 894 p.V395fs*78 | - | - | 35% | 10% (x1) | 39% |
| 4 | 6550 | fourth treatment | 103.6 | - | - | - | - | c.1270G>T p.E424*; c.1183_1352del4 894 p.V395fs*78 | - | - | 45% | 10% (x1) | 84% |
| 4 | 8080 | fifth treatment | 114.0 | - | - | - | - | c.1270G>T p.E424*; c.1183_1352del4 894 p.V395fs*78 | - | - | 60% | 22% (x1) | 86% |
| 4 | 14324 | sixth treatment | 141.8 | - | - | - | - | c.1270G>T p.E424*; c.1183_1352del4 894 p.V395fs*78 | - | - | 80% | 42% (x1) | 85% |
| 5 | 5537 | diagnosis | 0.0 | - | - | - | - | - | - | - | - | 10% (x2) | - |
| 5 | 14573 | first treatment | 80.8 | c.523C>G p.R175G | - | - | - | - | - | - | - | 30% (x2) | - |
| 6 | 9872 | diagnosis | 0.0 | - | - | - | - | - | 10% | - | - | 36% (x1) | - |
| 6 | 14495 | last follow-up | 31.8 | - | - | - | - | - | 10% | - | - | 10% (x1) 19% (x2) | - |
| 7 | 9696 | diagnosis | 0.0 | - | - | - | - | c.1282delA p.R428fs*19 | 55% | - | 55% | 69% (x1) | 51% |
| 7 | 14462 | last follow-up | 34.1 | - | - | - | - | c.1282delA p.R428fs*19; c.1609delG | 37% | - | 74% | 66% (x1) | 61% |

| | | | | | | | | | | | | | | |
|----|-------|------------------------------------|------|--|---------------------------------|----------------------|---|----------------------------------|---|-----|-----|-----|----------------------|-----|
| 8 | 4716 | diagnosis | 0.0 | - | - | - | - | p.E537fs*31 | - | 70% | - | - | - | - |
| 8 | 13443 | first treatment | 86.5 | - | c.7544_7545delCT p.P2515fs*4 | - | - | c.1639delC p.Q547fs*21 | - | 83% | - | - | - | - |
| 9 | 5726 | diagnosis and first treatment | 0.0 | - | c.7544_7545delCT p.P2515fs*4 | - | - | - | - | - | - | - | 10% (x1) | - |
| 9 | 14235 | second treatment | 24.1 | - | c.7544_7545delCT p.P2515fs*4 | - | - | - | - | - | 24% | 14% | 33% (x1) | - |
| 9 | 9958 | third treatment | 46.0 | c.408A>C p.Q136H e c.784G>C p.G262R | c.7544_7545delCT p.P2515fs*4 | - | - | - | - | - | 52% | 40% | 53% (x1) | - |
| 10 | 4718 | diagnosis | 0.0 | - | - | - | - | - | - | 10% | - | - | 72% (x1) | - |
| 10 | 6756 | first treatment | 30.5 | - | - | - | - | - | - | 10% | - | - | 70% (x1) | - |
| 10 | 12276 | second treatment | 78.4 | - | - | - | - | - | - | 10% | 17% | - | 80% (x1) | - |
| 10 | 14470 | third treatment | 87.3 | c.743G>A p.R248Q | - | c.1997A>C p.K666T | - | - | - | 56% | 73% | - | 50% (x1) | - |
| 11 | 3703 | diagnosis | 0.0 | - | - | - | - | - | - | 55% | - | - | 61% (x1) | - |
| 11 | 14311 | first treatment | 70.8 | - | - | - | - | c.1281_1290del11 0 p.I427fs*1 | - | 68% | - | - | 65% (x1) | - |
| 11 | 9482 | second treatment | 89.8 | - | - | - | - | c.1281_1290del11 0 p.I427fs*1 | - | 44% | - | - | 77% (x1) | - |
| 12 | 4341 | diagnosis | 0.0 | - | c.7544_7545delCT p.P2515fs*4 | - | - | - | - | 74% | - | - | - | - |
| 12 | 5391 | Richter syndrome transformation | 0.0 | c.818G>A p.R273H | c.7544_7545delCT p.P2515fs*4 | - | - | - | - | 10% | - | - | - | - |
| 13 | 4715 | diagnosis | 0.0 | - | - | - | - | - | - | 22% | - | - | - | - |
| 13 | 4880 | first treatment | 5.7 | - | - | - | - | - | - | 77% | - | - | - | - |
| 13 | 14236 | second treatment | 30.6 | - | - | - | - | - | - | 80% | - | - | - | - |
| 13 | 11678 | third treatment | 73.5 | - | - | - | - | - | - | 76% | - | - | - | - |
| 13 | 13721 | fourth treatment | 88.4 | - | - | - | - | - | - | 81% | 13% | - | - | - |
| 14 | 9245 | diagnosis | 0.0 | - | - | - | - | - | - | - | - | - | 42% (x2) | - |
| 14 | 14459 | last follow-up | 55.4 | c.731G>A p.G244D | - | - | - | - | - | - | 58% | - | 94% (x2) | - |
| 15 | 7274 | diagnosis and first treatment | 0.0 | - | - | - | - | - | - | - | - | - | 10% (x1) | - |
| 15 | 14453 | second treatment | 29.3 | - | - | c.1986C>A p.H662Q | - | - | - | - | - | 74% | 79% (x1) | 77% |
| 16 | 7146 | diagnosis | 0.0 | - | - | - | - | - | - | - | - | - | 97% (x1) | - |
| 16 | 12957 | first treatment | 56.2 | - | - | - | - | - | - | - | 10% | - | 50% (x1) 48% (x2) | - |
| 17 | 4326 | diagnosis | 0.0 | - | - | - | - | - | - | - | - | - | - | - |
| 17 | 14279 | last follow-up | 46.8 | - | - | - | - | - | - | - | - | 35% | - | 35% |
| 18 | 5564 | diagnosis and first treatment | 0.0 | - | - | - | - | - | - | - | - | - | 19% (x1) | - |
| 18 | 14071 | second treatment | 77.2 | - | - | c.1866G>T p.E622D | - | - | - | - | - | - | 29% (x1) | - |
| 19 | 7033 | diagnosis | 0.0 | - | - | - | - | - | - | - | - | - | 75% (x1) | - |
| 19 | 14382 | first treatment | 26.1 | - | - | - | - | - | - | - | - | - | 93% (x1) | - |
| 19 | 14334 | second treatment | 59.5 | - | - | - | - | - | - | - | - | 10% | 59% (x1) | 10% |
| 20 | 5074 | diagnosis | 0.0 | - | - | - | - | - | - | - | - | - | - | - |
| 20 | 9278 | first treatment | 31.5 | - | - | - | - | - | - | - | - | - | - | - |
| 20 | 14325 | second treatment | 58.7 | - | - | - | - | - | - | - | 10% | 10% | - | - |

| | | | | | | | | | | | | | |
|----|-------|------------------------------------|------|---------------------|----------------------------------|----------------------|---|---|-----|-----|-----|----------|-----|
| 21 | 6782 | diagnosis | 0.0 | - | - | - | - | - | - | - | - | - | - |
| 21 | 14467 | last follow-up | 62.2 | - | - | - | - | - | - | 12% | - | - | 10% |
| 22 | 3648 | diagnosis | 0.0 | - | c.7544_7545delCT p.P2515fs*4 | - | - | - | - | - | - | - | - |
| 22 | 14257 | first treatment | 33.1 | - | c.7544_7545delCT p.P2515fs*4 | - | - | - | - | - | - | - | - |
| 22 | 9080 | second treatment | 84.1 | - | - | c.2098A>G p.K700E | - | - | - | - | - | - | - |
| 23 | 5842 | diagnosis | 0.0 | - | - | - | - | - | 28% | - | - | - | - |
| 23 | 14367 | last follow-up | 75.2 | - | c.7544_7545delCT p.P2515fs*4 | - | - | - | 39% | - | - | - | - |
| 24 | 10642 | diagnosis and first treatment | 0.0 | - | - | c.2225G>A p.G742D | - | - | - | - | - | - | - |
| 24 | 4692 | Richter syndrome transformation | 15.3 | c.637C>T p.R213* | - | c.2225G>A p.G742D | - | - | - | 33% | - | - | - |
| 24 | 4304 | Richter syndrome relapse | 25.8 | c.743G>A p.R248Q | c.7295_7344dupl50 p.R2434fs*4 | c.2225G>A p.G742D | - | - | - | 30% | - | - | - |
| 25 | 5076 | diagnosis and first treatment | 0.0 | - | - | - | - | - | 63% | - | - | - | - |
| 25 | 6734 | Richter syndrome transformation | 21.5 | - | - | - | - | - | 56% | 10% | - | - | - |
| 25 | 7227 | Richter syndrome relapse | 30.3 | - | c.7321C>T p.Q2441* | - | - | - | 41% | 14% | - | - | - |
| 25 | 9921 | Richter syndrome relapse | 47.0 | c.716A>C p.N239T | c.7321C>T p.Q2441* | - | - | - | 60% | 21% | - | - | - |
| 26 | 4293 | diagnosis and first treatment | 0.0 | - | - | - | - | - | - | - | 35% | - | - |
| 26 | 4614 | second treatment | 4.9 | - | - | c.2110A>T p.I704F | - | - | - | - | 40% | - | - |
| 26 | 7181 | Richter syndrome transformation | 45.1 | - | - | c.2110A>T p.I704F | - | - | - | - | 89% | - | - |
| 27 | 10872 | diagnosis | 0.0 | - | - | - | - | - | - | - | - | - | - |
| 27 | 14376 | last follow-up | 25.3 | - | - | - | - | - | - | 12% | - | - | - |
| 28 | 9483 | diagnosis | 0.0 | - | - | - | - | - | - | - | - | - | - |
| 28 | 14571 | last follow-up | 37.0 | - | - | - | - | - | - | 10% | - | - | - |
| 29 | 5866 | diagnosis | 0.0 | - | - | - | - | - | - | - | - | 44% (x1) | - |
| 29 | 14340 | first treatment | 56.0 | - | - | - | - | - | - | - | - | 10% (x1) | - |
| 30 | 11178 | diagnosis | 0.0 | - | - | - | - | - | - | - | - | 8% (x2) | - |
| 30 | 12644 | Richter syndrome transformation | 11.9 | - | c.7544_7545delCT p.P2515fs*4 | - | - | - | - | - | - | - | - |
| 31 | 6503 | diagnosis | 0.0 | - | - | - | - | - | - | - | - | 10% (x1) | - |
| 31 | 14314 | last follow-up | 30.0 | - | - | c.2098A>G p.K700E | - | - | - | - | - | 60% (x1) | - |
| 32 | 6288 | diagnosis | 0.0 | - | - | - | - | - | - | - | - | 14% (x1) | - |
| 32 | 9321 | first treatment | 31.7 | - | - | - | - | - | - | - | - | 61% (x1) | - |
| 33 | 4997 | diagnosis and first treatment | 0.0 | c.536A>T p.H179L | - | - | - | - | - | 92% | - | 87% (x1) | - |
| 33 | 6867 | Richter syndrome transformation | 24.5 | c.536A>T p.H179L | - | - | - | - | - | 88% | - | 72% (x1) | - |
| 34 | 7275 | diagnosis | 0.0 | - | - | - | - | - | 16% | - | - | - | - |
| 34 | 9289 | first treatment | 11.0 | c.817C>T p.R273C | - | - | - | - | 10% | - | - | - | - |

| | | | | | | | | | | | | | |
|----|-------|----------------------------------|------|---|---|----------------------|---|---|-----|---|-----|----------------------|-----|
| 35 | 4652 | diagnosis and first treatment | 0.0 | - | - | - | - | - | 77% | - | - | 34% (x1) 29% (x2) | - |
| 35 | 9244 | second treatment | 42.4 | - | - | - | - | - | 79% | - | 33% | 37% (x1) 30% (x2) | 29% |
| 36 | 4982 | diagnosis | 0.0 | - | - | - | - | - | - | - | - | - | - |
| 36 | 12739 | last follow-up | 73.8 | - | - | c.2098A>G p.K700E | - | - | - | - | - | - | - |

Table S9. Prevalence of newly developed genetic lesions in sequentially assessed CLL

| | N | Total | % |
|-------------------------|----------|--------------|----------|
| del13q14 x 1 | 0 | 202 | 0.0% |
| del13q14 x 2 | 4 | 202 | 1.9% |
| +12 | 0 | 202 | 0.0% |
| del11q22-q23 | 10 | 202 | 5.0% |
| del17p13 | 10 | 202 | 5.0% |
| <i>TP53</i> mutation | 9 | 202 | 4.5% |
| <i>NOTCH1</i> mutation | 5 | 202 | 2.5% |
| <i>SF3B1</i> mutation | 8 | 202 | 4.0% |
| <i>MYD88</i> mutation | 1 | 202 | 0.5% |
| <i>BIRC3</i> mutation | 5 | 202 | 2.5% |
| <i>BIRC3</i> deletion | 7 | 202 | 3.4% |
| <i>TP53</i> disruption | 13 | 202 | 6.4% |
| <i>BIRC3</i> disruption | 11 | 202 | 5.4% |

Table S10. Time-dependent analysis of the impact of genetic lesions on OS ^a

| | Univariate analysis | | | | Multivariate analysis | | | |
|-----------------------------------|---------------------|------|------|---------|-----------------------|------|------|---------|
| | HR | LCI | UCI | p | HR | LCI | UCI | p |
| No <i>TP53</i> disruption | 1.00 | - | - | | 1.00 | - | - | |
| <i>TP53</i> disruption | 3.63 | 2.25 | 5.86 | <0.0001 | 3.30 | 1.99 | 5.47 | <0.0001 |
| No <i>BIRC3</i> disruption | 1.00 | - | - | | 1.00 | - | - | |
| <i>BIRC3</i> disruption | 2.45 | 1.27 | 4.72 | 0.0077 | 2.59 | 1.19 | 5.64 | 0.0166 |
| No <i>NOTCH1</i> mutation | 1.00 | - | - | | 1.00 | - | - | |
| <i>NOTCH1</i> mutation | 2.52 | 1.47 | 4.30 | 0.0007 | 1.95 | 1.09 | 3.49 | 0.0247 |
| No <i>SF3B1</i> mutation | 1.00 | - | - | | 1.00 | - | - | |
| <i>SF3B1</i> mutation | 2.42 | 1.31 | 4.49 | 0.0048 | 1.82 | 0.94 | 3.54 | 0.0766 |
| No del11q14 | 1.00 | - | - | | 1.00 | - | - | |
| del13q14 | 0.56 | 0.36 | 0.88 | 0.0113 | 0.66 | 0.41 | 1.06 | 0.0850 |
| No del11q22-q23 | 1.00 | - | - | | 1.00 | - | - | |
| del11q22-q23 | 2.55 | 1.39 | 4.69 | 0.0026 | 1.59 | 0.79 | 3.23 | 0.1961 |
| No <i>MYD88</i> mutation | 1.00 | - | - | | 1.00 | - | - | |
| <i>MYD88</i> mutation | 0.30 | 0.04 | 2.19 | 0.2370 | 0.55 | 0.07 | 3.97 | 0.5494 |
| No +12 | 1.00 | - | - | | 1.00 | - | - | |
| +12 | 1.44 | 0.88 | 2.37 | 0.1510 | 1.14 | 0.65 | 1.99 | 0.6536 |

^aOS, overall survival; HR, hazard ratio; LCI, 95% lower confidence interval; UCI, 95% upper confidence interval

Table S11. Time-dependent univariate and multivariate analysis of OS ^a

| | Univariate analysis | | | | Multivariate analysis | | | |
|--|---------------------|------|-------|----------------------|-----------------------|------|------|----------------------|
| | HR | LCI | UCI | p | HR | LCI | UCI | p |
| Age ≤ 65 years | 1.00 | - | - | | 1.00 | - | - | |
| Age >65 years ^b | 3.73 | 1.86 | 7.45 | 0.0002 | 4.02 | 1.95 | 8.26 | 0.0001 |
| Female | 1.00 | - | - | | 1.00 | - | - | |
| Male ^c | 1.37 | 0.88 | 2.14 | 0.1670 | 1.35 | 0.84 | 2.16 | 0.2090 |
| Rai stage ^b | | | | | | | | |
| 0-I | 1.00 | - | - | | 1.00 | - | - | |
| II | 2.20 | 1.04 | 4.66 | <0.0001 ^d | 1.36 | 0.62 | 2.97 | <0.0001 ^d |
| III-IV | 6.78 | 4.20 | 10.96 | | 4.51 | 2.69 | 7.58 | |
| <i>IGHV</i> homology <98 | 1.00 | - | - | | 1.00 | - | - | |
| <i>IGHV</i> homology ≥98% ^c | 1.63 | 1.05 | 2.54 | 0.0299 | 1.12 | 0.69 | 1.81 | 0.6366 |
| Integrated mutational and cytogenetic model ^b | | | | | | | | |
| Very-low risk | 1.00 | - | - | | 1.00 | - | - | |
| Low-risk | 2.10 | 1.00 | 4.21 | | 1.64 | 0.76 | 3.53 | |
| Intermediate-risk | 4.01 | 1.90 | 8.46 | <0.0001 ^d | 2.19 | 1.00 | 4.92 | 0.0003 ^d |
| High-risk | 6.77 | 3.41 | 13.43 | | 3.56 | 1.67 | 7.58 | |

^aOS, overall survival; HR, hazard ratio; LCI, 95% lower confidence interval; UCI, 95% upper confidence interval; *IGHV*, immunoglobulin heavy variable gene

^bTime-varying variables

^cTime-fixed variables

^dp for trend

SUPPLEMENTARY REFERENCES

1. Pospisilova S, Gonzalez D, Malcikova J, et al. ERIC recommendations on TP53 mutation analysis in chronic lymphocytic leukemia. *Leukemia*. 2012;26(7):1458–1461.
2. Rossi D, Bruscazzin A, Spina V, et al. Mutations of the SF3B1 splicing factor in chronic lymphocytic leukemia: association with progression and fludarabine-refractoriness. *Blood*. 2011;118(26):6904–6908.
3. Rossi D, Rasi S, Fabbri G, et al. Mutations of NOTCH1 are an independent predictor of survival in chronic lymphocytic leukemia. *Blood*. 2012;119(2):521–529.
4. Rossi D, Fangazio M, Rasi S, et al. Disruption of BIRC3 associates with fludarabine chemorefractoriness in TP53 wild-type chronic lymphocytic leukemia. *Blood*. 2012;119(12):2854–2862.
5. Fabbri G, Rasi S, Rossi D, et al. Analysis of the chronic lymphocytic leukemia coding genome: role of NOTCH1 mutational activation. *J Exp Med*. 2011;208(7):1389–1401.
6. Rossi D, Spina V, Cerri M, et al. Stereotyped B-cell receptor is an independent risk factor of chronic lymphocytic leukemia transformation to Richter syndrome. *Clin Cancer Res*. 2009;15(13):4415–4422.
7. Schoenfeld D. Partial residuals for the proportional hazard regression model. *Biometrika*. 1982;69(1):239–241.
8. Harrell FE Jr, Lee K, Mark DB. Multivariable prognostic models: issues in developing models, evaluating assumptions and adequacy, and measuring and reducing errors. *Stat Med*. 1996;15(4):361–387.
9. Efron B, Tibshirani R. Improvements on cross-validation: the .632_bootstrap method. *JASA*. 1997;92(4328):548–560.
10. Van Houwelingen JC, Le Cessie S. Predictive value of statistical models. *Stat Med*. 1990;9(11):1303–1325.
11. Chen CH, George SL. The bootstrap and identification of prognostic factors via Cox's proportional hazards regression model. *Stat Med*. 1985;4(1):39–46.
12. Ciampi A, Negassa A, Lou Z. Tree-structured prediction for censored survival data and the Cox model. *J Clin Epidemiol*. 1995;48(5):675–689.
13. Segal MR. Regression trees for censored-data. *Biometrics*. 1988;44(1):35–47.
14. Ishwaran H, Kogalur UB, Blackstone EH, Lauer MS. Random survival forests. *Ann Appl Stat*. 2008;2(3):841–860.
15. Ishwaran H, Kogalur UB, Gorodeski EZ, Minn AJ, Lauer MS. High dimensional variable selection for survival data. *J Am Stat Assoc*. 2010;105(489):205–217.
16. Dickman PW, Sloggett A, Hills M, Hakulinen T. Regression models for relative survival. *Stat Med*. 2004;23(1):51–64.