Supplementary Table 1. Comparison of maternal and infant characteristics for lopinavir/ritonavir- and nelfinavir- exposed groups.

	Number with charac		
Characteristic	evaluated <sup>a</sup> (%) <sup>b</sup>		p-value
	Lopinavir/ritonavir	Nelfinavir	-
Initial maternal CD4 count <sup>c</sup>			
Mean cells/mm <sup>3</sup> (range)	559 (15-1176)	496 (150-769)	0.27
CD4 <200 cells/mm <sup>3</sup>	1/37 (3%)	1/22 (4%)	
CD4 200-500 cells/mm <sup>3</sup>	14/37 (38%)	7/22 (32%)	0.90
CD4 >500 cells/mm <sup>3</sup>	22/37 (59%)	14/22 (64%)	
Mean days of detectable maternal viremia	125 (0-274)	172 (0-288)	0.05
during pregnancy <sup>d</sup> (range)	123 (0 274)	172 (0 200)	0.05
Maternal viral load detectable at any time	29/51 (57%)	24/31 (77%)	0.09
during pregnancy <sup>d</sup>			
Entry maternal viral load detectable <sup>c,d</sup>	25/50 (50%)	15/23 (65%)	0.11
Maternal viral load detectable ≥90 days after	5/41 (12%)	6/21 (29%)	0.16
antiretroviral initiation <sup>d</sup>	0, 12 (2270)	0,22(20,0)	0.10
Maternal viral load detectable within 28 days of	3/32 (9%)	2/18 (11%)	>0.99
delivery <sup>d</sup>			
Mean days of antenatal antiretroviral therapy during	170 (40-287)	167 (46-287)	
pregnancy (range)			0.86

Mean days of lopinavir/ritonavir or nelfinavir during	152 (29-280)	156 (28-287)	0.81
pregnancy (range)			
Lopinavir/ritonavir or nelfinavir initiated prior to	16/54 (30%)	11/36 (31%)	>0.99
conception			
Maternal co-infection with Hepatitis B	1/45 (2%)	1/21 (5%)	0.54
Maternal co-infection with Hepatitis C	4/41 (10%)	2/27 (7%)	>0.99
Mean maternal age at delivery, years (range)	29.6 (20.2-40.6)	30.7 (21.4-43.3)	0.37
Maternal parity, mean number of prior deliveries	1.6 (0-5)	1.6 (0-4)	0.91
(range)	1.0 (0.5)	1.0 (0 +)	
Male infants (%)	24/51 (47%)	15/34 (44%)	0.83
Infant birthweight			
Small for gestational age	7/52 (13%)	3/29 (10%)	
Appropriate for gestational age	45/52 (87%)	25/29 (86%)	0.46
Large for gestational age	0/52 (0%)	1/29 (3%)	

<sup>a</sup>Denominator represents the number of infants with available data.

<sup>b</sup>Unless units of measurement are otherwise indicated.

<sup>c</sup>Earliest known maternal laboratory values during pregnancy.

<sup>d</sup>Detectable viral load defined as  $\geq$ 400 copies/mL, as this was the limit of detection for the earliest data.

Supplementary Table 2. Frequency of infant laboratory adverse events at birth associated with

Laboratory test <sup>a</sup>	Zidovudine <sup>b</sup>	Abacavir, stavudine,	Odds Ratio (95% CI)
		or tenofovir <sup>b</sup>	p-value
Hgb	10/85 (12%)	1/35 (3%)	4.7 (0.58-37.9) p=0.15
ANC	10/67 (15%)	10/26 (38%)	0.36 (0.10-1.3) p=0.11
Plts	3/80 (4%)	1/35 (3%)	1.3 (0.13-13.2) p=0.81
AST	14/76 (18%)	2/35 (6%)	3.7 (0.80-17.4) p=0.09
Highest grade AE, all tests	32/86 (37%)	12/36 (33%)	2.1 (0.78-5.4) p=0.14

exposure to maternal zidovudine vs. abacavir, stavudine, or tenofovir.

Multivariate analysis using logistic regression was used to model grade ≥1 AE (yes/no) as a function of maternal antiretroviral treatment. No significant differences were found.

Hgb, hemoglobin; ANC, absolute neutrophil count; Plts, platelets; AST, aspartate aminotransferase; AE, adverse event.

<sup>a</sup>There was 1 adverse event for alanine aminotransferase in the ZDV group, not shown separately but included in the maximum adverse events.

<sup>b</sup>Number of adverse events / Number exposed (%).