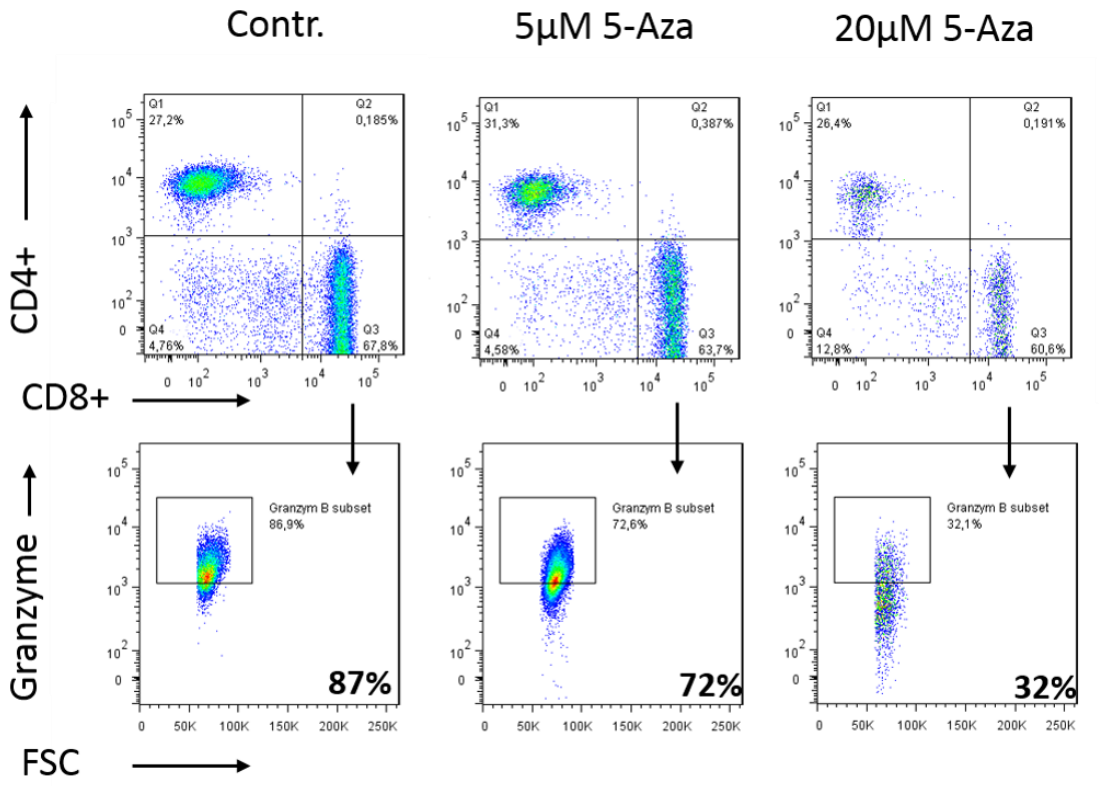
Supplementary Figure 1

Figure Legend

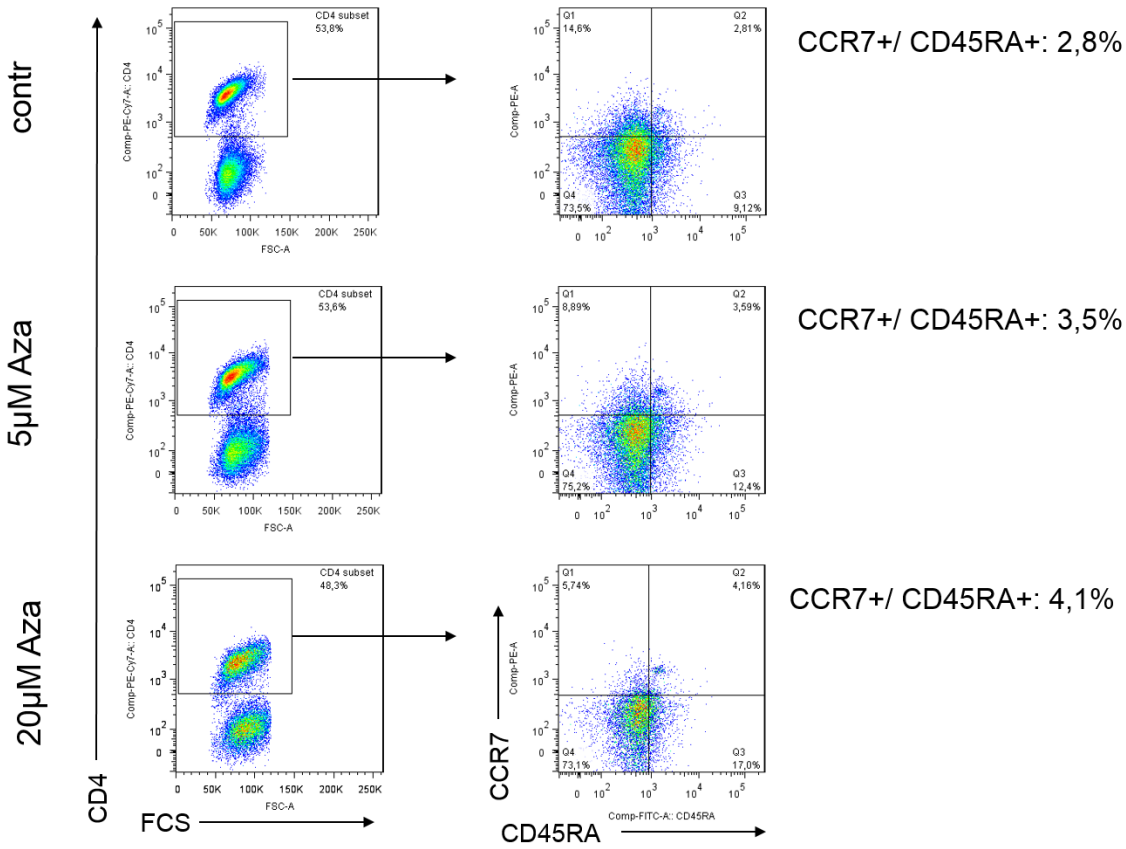
Figure S1. CD3+ T- cells were treated with 5µM, 20µM or without 5-Aza for 48h. Then cells were stimulated with PMA and ionomycin in the presence of brevedinA for 4.5h. Thereafter T- cells were analysed for the expression of CD4 and CD8. The CD8+ T-cells were further assessed for the production of granzyme. A representative FACS pot of three independent experiments is shown.



Supplementary Figure 2.

Figure Legend

Figure S2. Gating strategy for identification of naïve T- cells. T- cells were cultured for 48h with the indicated dosages of 5-Aza. Untreated T- cells were used as control. Cells were analysed for the expression of CD4 to identify CD4+ T- cells which were further sub gated for the expression of CD45RA and CCR7.Cells expressing both (CD45RA+/CCR7+) were considered to be naïve T- cells. The same strategy was used to identify naïve CD8+ T- cells.



Supplementary Table 1

Patient	Age	Sex	Disease	Cytogenetic molecular genetics	Conditioning	Stem cell source	Outcome	5-Aza start
1	63y	M	sAML	Tri8, CBL mut	TBI / Flu	PBSC	death	+ 66 d
2	57y	M	CMML	nk, TET2 mut, CBL mut	FLAMSA/ Bu Cy	PBSC	alive	+ 96 d
3	61y	M	MDS/MPN	nk NRAS mut	Bu / Flu	PBSC	alive	+ 127 d

Abbreviations: (M) male, (sAML) secundary actue myeloblastic leukemia, (CMML) chronic myelomonocytic leukemia, (MDS/MPN) myelodysplastic syndrome, myeloproliferative neoplasme. (Tri8) trisomie of chromosome 8, (nk) normal caryotype, (NRAS mut) NRAS mutation codon 61, (CBL mut) CAS-BR-M murine ecotropic retroviral transforming sequence homolog mutation, (TET2 mut) TET oncogene family member 2 mutation, (FLAMSA) Fludarabine, mAmsacrine, Cytarbine, (Bu) Busulphan, (Cy) Cyclophosphamide, (TBI) total body irradiation, (Flu) Fludarabine , (PBSC) peripheral blood stem cells.