

Human Autoimmunity at Single Cell Resolution in Aplastic Anemia Before and After Effective Immunotherapy

Zhijie Wu^{1,*}, Shouguo Gao^{1,*}, Xingmin Feng^{1,*}, Haoran Li¹, Nicolas Sompairac², Shirin Jamshidi², Desmond Choy², Rita Antunes Dos Reis², Qingyan Gao¹, Sachiko Kajigaya¹, Lemlem Alemu¹, Diego Quinones Raffo¹, Emma M. Groarke¹, Shahram Korasti^{2,3,†}, Bhavisha Patel^{1,†}, and Neal S. Young^{1,†}

*These authors contributed equally.

†These authors jointly supervised this work.

Supplementary Data

Supplementary Data 1. Patients' characteristics.

Supplementary Data 2. An antibody panel for CyTOF.

Supplementary Data 3. TCR sequences for GLIPH2 analysis.

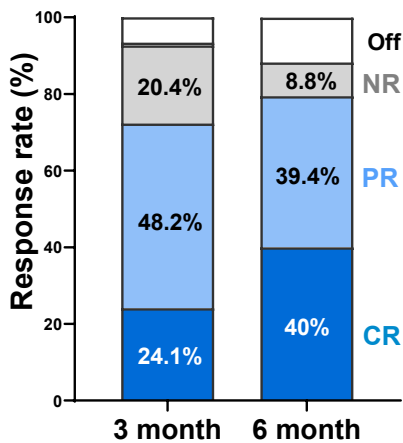
Supplementary Data 4. Single-cell sequence metrics of single-cell RNA and single-cell TCR/BCR V(D)J Sequencing.

a

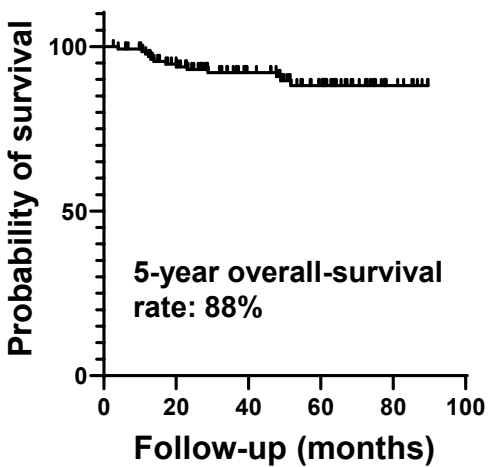
EPAG-IST group	
Patients cohorts, n	n = 137
Cohort 3	31
Extension	86
Lab explorative	20
Age (y), mean (range)	
Sex (female/male)	71/66
Disease severity (SAA/VSAA)	70/67
3 month response, n (%)	
Overall response	99 (72.3)
Complete response	33 (24.1)
Partial response	66 (48.2)
No response	28 (20.4)
N/A	1 (0.7)
Off study	9 (6.6)
6 month response, n (%)	
Overall response	109 (80.0)
Complete response	55 (40.0)
Partial response	54 (39.4)
No response	12 (8.8)
Off study	16 (11.7)
Baseline ANC (K/ul), mean (range)	0.32473 (0.000-1.930)
Baseline PLT (K/ul), mean (range)	8.43 (0-41)
Baseline ARC (K/ul), mean (range)	23.71 (2.0-97.1)
Baseline ALC (K/ul), mean (range)	1.4022 (0.13-3.98)
Mean time to follow up, month (range)	46.9 (4-89.6)

*IST, immunosuppressive therapy; EPAG, eltrombopag; SAA, severe aplastic anemia; VSAA, very severe aplastic anemia; ANC, absolute neutrophil count; PLT, platelet; ARC, absolute reticulocyte count; ALC, absolute lymphocyte count.

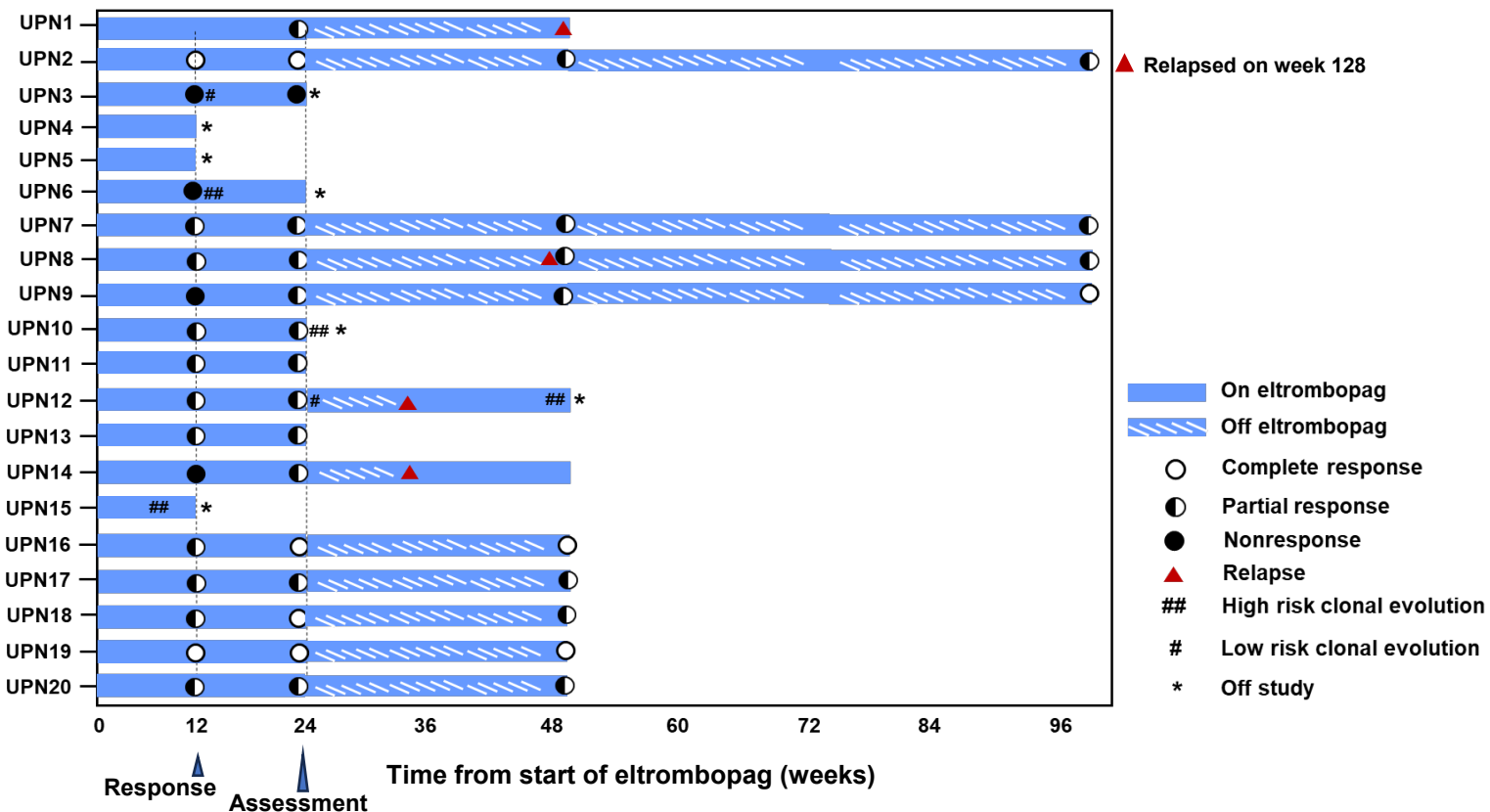
b



c

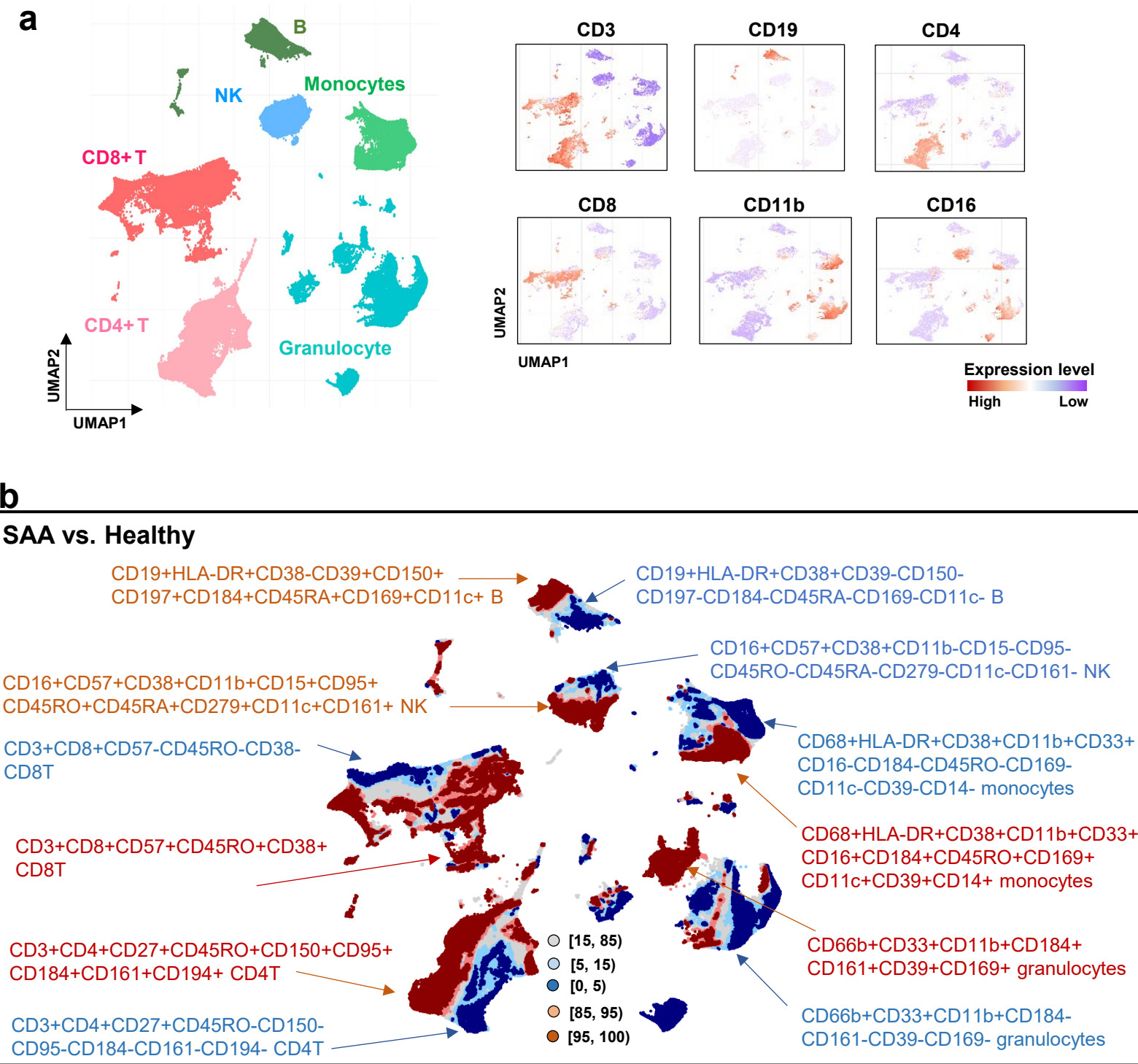


d

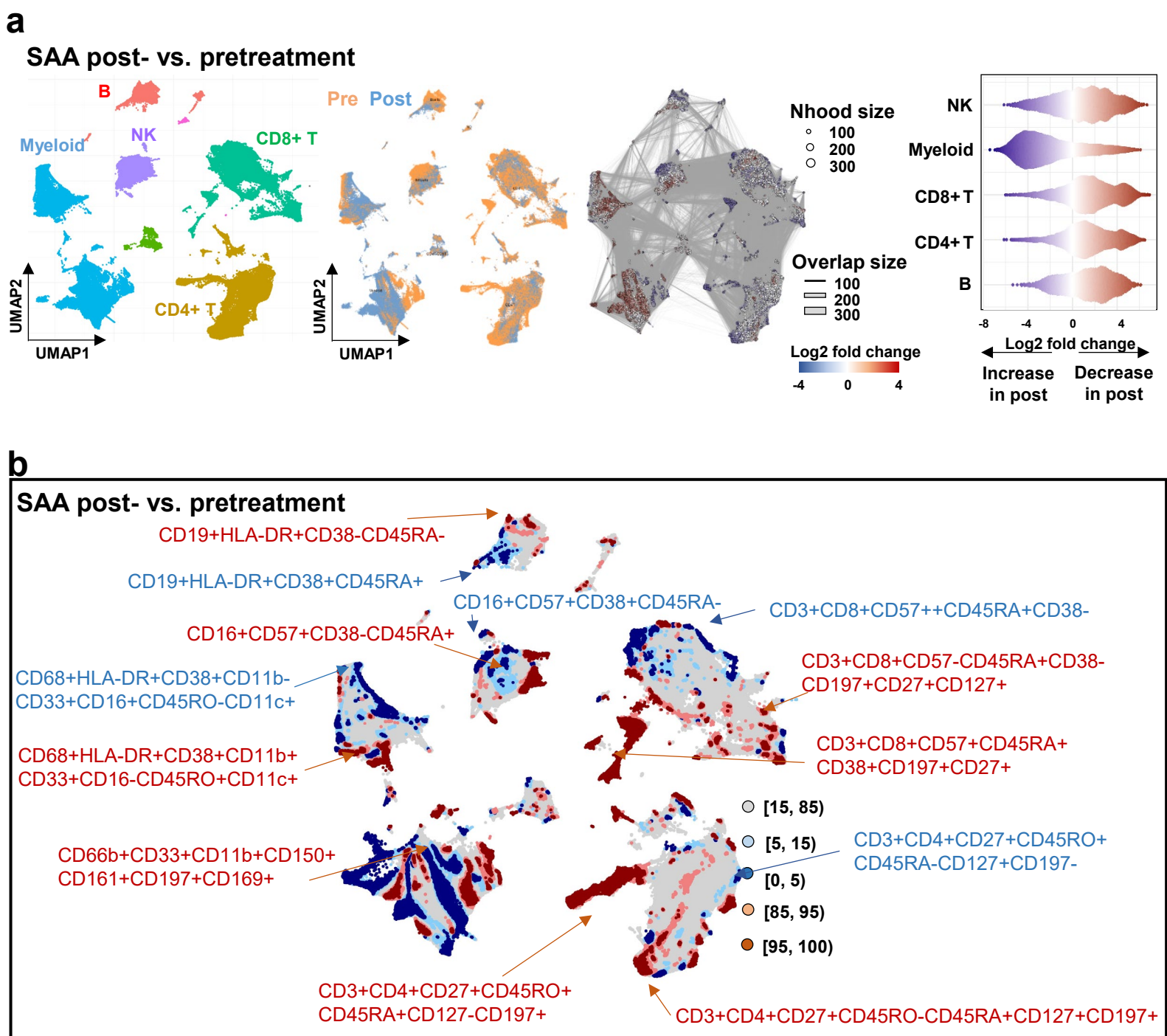


Supplementary Fig. 1 Clinical characteristics of patient cohorts. **a**, A table showing summary of clinical characteristics of EPAG-IST cohort of patients ($n = 137$), including age, sex, disease severity, responses at 3 months and 6 months after IST, and baseline blood counts. **b**, A bar chart showing response categories (including CR, PR, NR and off study) at 3 months and 6 months after IST. **c**, Kaplan-Meier showing survival of this cohort of patients with medium follow-up time 24.4 months.

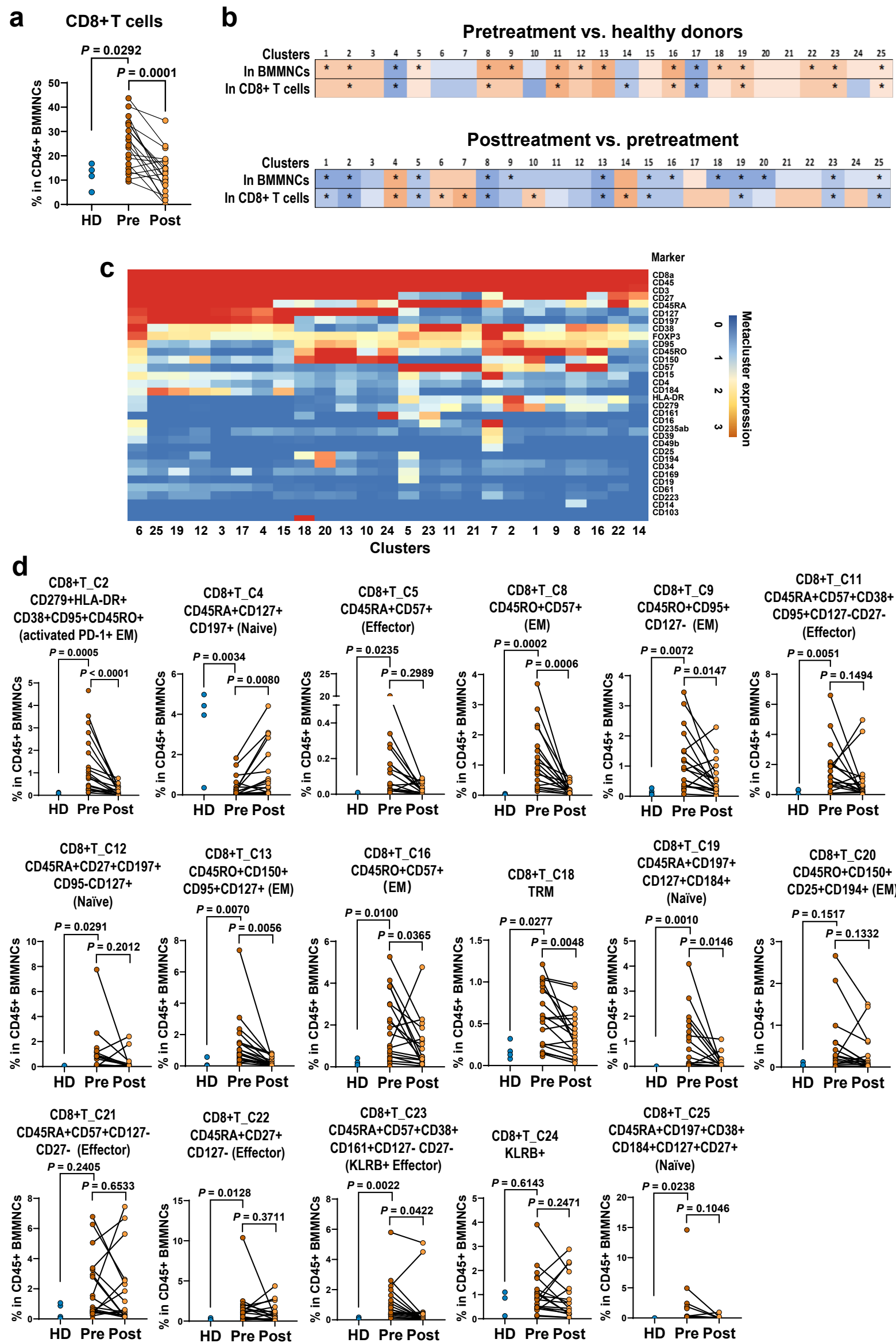
d, A Swimmer plot of patient outcomes for a laboratory explorative cohort ($n = 20$). Bars represent treatment and follow-up windows; circles represent responses to treatment and stars designate timepoints at which patients went off-study. EPAG-IST, an eltrombopag-immunosuppressive therapy; CR, complete response; PR, partial response; NR, non-response.



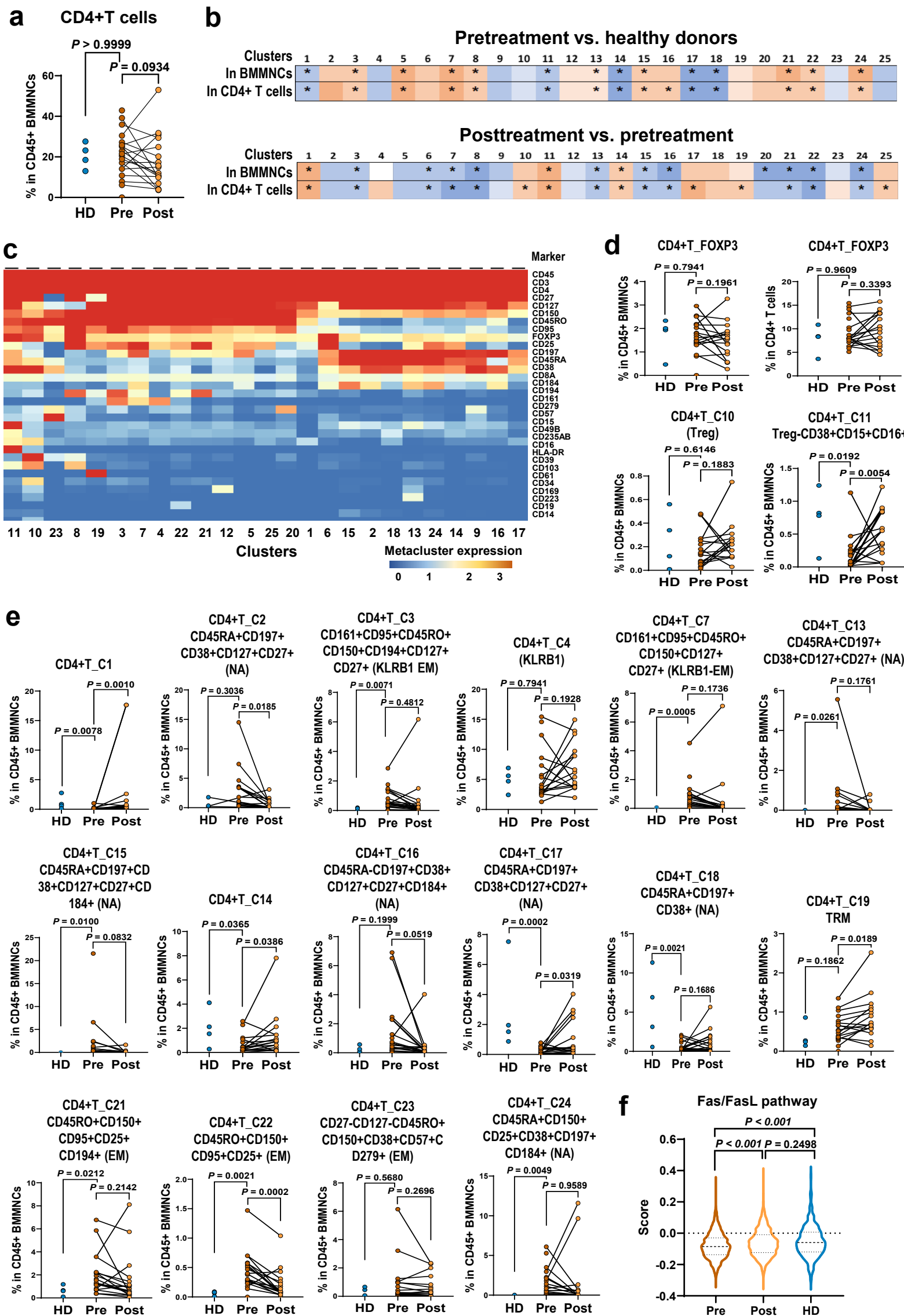
Supplementary Fig. 2 Phenotyping of bone marrow hematopoietic and immune cells using CyTOF in disease. **a**, Same UMAP of Fig. 1c embedding of CyTOF data based on T-REX analysis, represented cell type specific markers were shown on the right. **b**, Differential abundance and phenotypes of cell populations between SAA patients and healthy donors were compared. A red color indicates clusters with patients' cells (pretreatment samples) constituting >95% of cells and a blue color indicates clusters with healthy donors' cells constituting >95%. For example, CD3⁺CD8⁺CD57⁺CD45RO⁺CD38⁺CD8⁺ T cells were increased in patients, while CD3⁺CD8⁺CD57⁻CD45RO⁻CD38⁻CD8⁺ T cells were less abundant in patients.



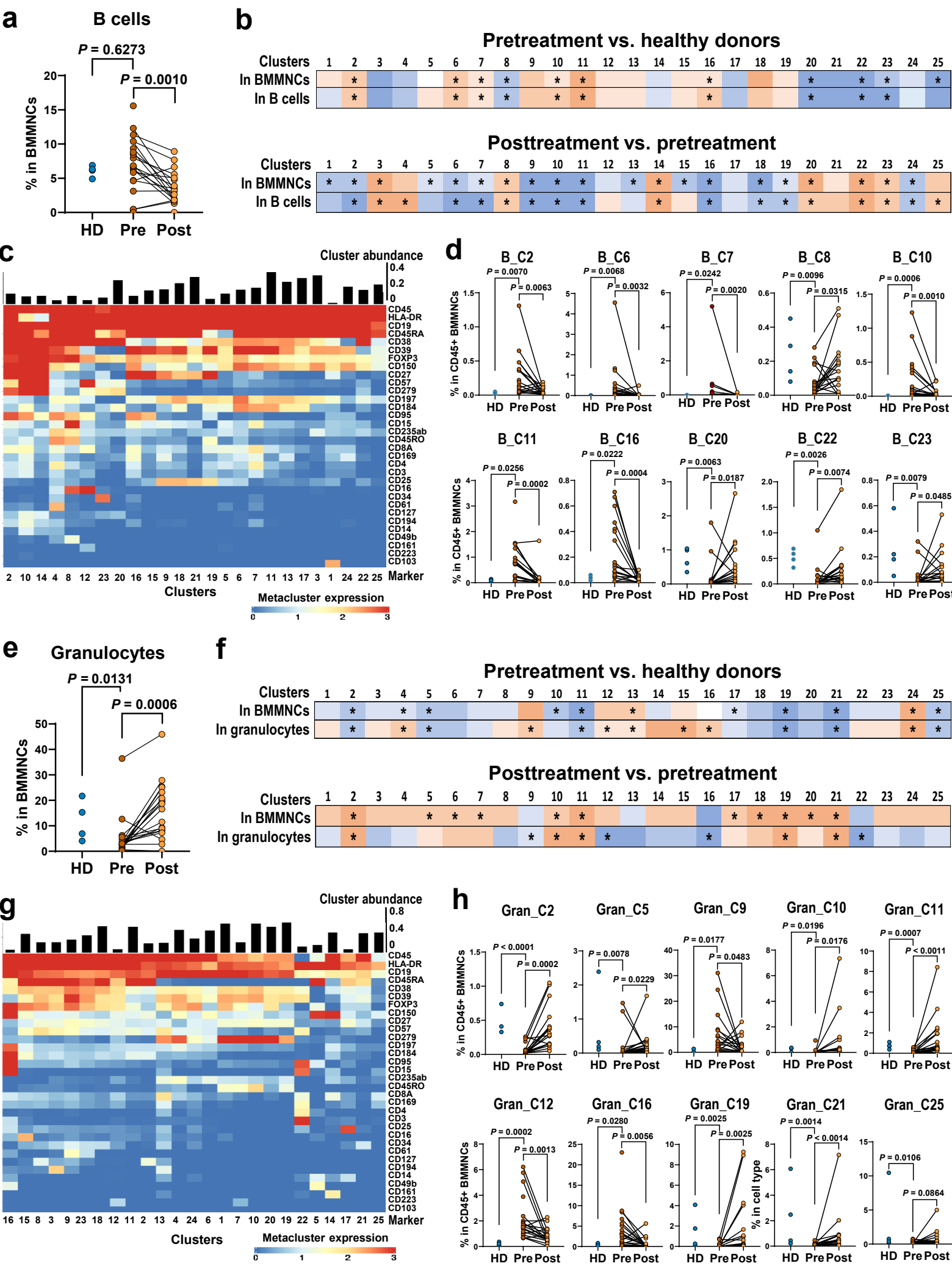
Supplementary Fig. 3 Phenotyping of bone marrow hematopoietic and immune cells using CyTOF before and after treatment. **a**, Left: UMAP showing differential abundance of cell populations in SAA patients post- versus before-treatment by T-REX. An orange color indicates clusters with patients' cells (posttreatment samples) constituting >95% of cells and a blue color indicates clusters with pretreatment cells constituting >95%. Right: graph representation of Nhoods identified by Milo. Nodes are Nhoods, colored by log2FC between posttreatment samples of SAA patients and pretreatment samples ($n = 16$). Nondifferential abundance Nhoods ($FDR \geq 0.1$) are colored white, and sizes correspond to the number of cells in a Nhood. Graph edges depict the number of cells shared between adjacent Nhoods. A Beeswarm plot showing adjusted log2FC of cell population abundance in SAA patients post- versus pretreatment samples in Nhoods. **b**, UMAP showing phenotypes of cell populations in SAA patients post- versus before-treatment by T-REX. For example, CD68⁺HLA-DR⁺CD38⁺CD11b⁻CD33⁺CD16⁺CD45RO⁻CD11c⁺ myeloid cells decreased while CD68⁺HLA-DR⁺CD38⁺CD11b⁺CD33⁺CD16⁻CD45RO⁺CD11c⁺ myeloid cells increased after treatment. CyTOF, Cytometry by Time-Of-Flight; UMAP, Uniform Manifold Approximation and Projection; SAA, severe aplastic anemia; log2FC, log2 fold change; FDR, false discovery rate.



Supplementary Fig. 4 Phenotyping of CD8⁺ T cell subclusters using CyTOF. **a**, A scatter plot showing frequency (% in CD45⁺ BMMNCs) of CD8⁺ T cells of healthy controls ($n = 4$), pretreatment samples of SAA patients ($n = 20$) and posttreatment samples ($n = 16$). P values with the two-sided unpaired and paired Mann-Whitney test are shown. **b**, Heatmaps showing difference of frequency of 25 clusters of CD8⁺ T cells in pretreatment samples versus healthy donors (top) and in posttreatment samples versus pretreatment samples (bottom). A red color indicates fold changes to be higher than 1, and a blue color indicates fold changes to be lower than 1. Stars present statistical significance ($P < 0.05$; P values were calculated with the two-sided unpaired Mann-Whitney test). **c**, Binary clustering of 25 clusters of CD8⁺ T cells based on surface marker expression. Relative expression bars are shown on the right. **d**, Scatter plots showing frequency (% in CD45⁺ BMMNCs) of representative CD8⁺ T clusters of healthy controls ($n = 4$), pretreatment samples of SAA patients ($n = 20$) and posttreatment samples ($n = 16$). P values with the two-sided unpaired and paired Mann-Whitney test are shown. Many clusters had differential abundance, for example, CD8⁺T_C8 and CD8⁺T_C16 [CD45RO⁺CD57⁺, an effector memory (EM) phenotype] was significantly higher in pretreatment samples as compared to healthy donors, and dramatically decreased after treatment, and CD8⁺T_C2 (CD279⁺HLA-DR⁺CD38⁺CD95⁺CD45RO⁺ activated PD-1⁺ EM phenotype) was higher in pretreatment samples and decreased after treatment. BMMNCs, bone marrow mononuclear cells.



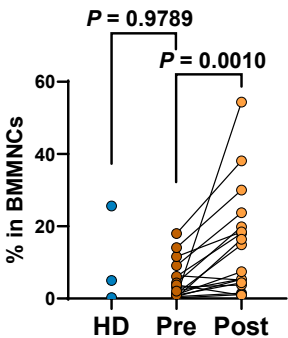
Supplementary Fig. 5 Phenotyping of CD4⁺ T cell subclusters using CyTOF. **a**, A scatter plot showing frequency (% in CD45⁺ BMMNCs) of CD4⁺ T cells of healthy controls ($n = 4$), pretreatment samples of SAA patients ($n = 20$) and posttreatment samples ($n = 16$). P values with the two-sided unpaired and paired Mann-Whitney test are shown. **b**, Heatmaps showing difference of frequency of 25 CD4⁺ T cell clusters in pretreatment samples versus healthy donors (top), and in posttreatment samples versus pretreatment samples (bottom). A red color indicates fold change to be higher than 1, and a blue color indicates fold change to be lower than 1. Stars present statistical significance ($P < 0.05$; P values were calculated with the two-sided unpaired Mann-Whitney test). **c**, Binary clustering of 25 clusters of CD4⁺ T cells based on surface marker expression. A relative expression bar is shown on the bottom. **d**, Scatter plots showing frequency (% in CD45⁺ BMMNCs) of CD4⁺ Treg clusters of healthy controls ($n = 4$), pretreatment samples of SAA patients ($n = 20$) and posttreatment samples ($n = 16$). P values with the two-sided unpaired and paired Mann-Whitney test are shown. **e**, Scatter plots showing frequency (% in CD45⁺ BMMNCs) of representative CD4⁺ T clusters of healthy controls ($n = 4$), pretreatment samples of SAA patients ($n = 20$) and posttreatment samples ($n = 16$). P values with the two-sided unpaired and paired Mann-Whitney test are shown. **f**, A dot plot showing Fas/FasL pathway scores of CD4⁺ Tregs in pre- ($n = 20$), post-treatment ($n = 16$) samples of SAA patients and healthy controls ($n = 4$). P values with the two-sided unpaired Mann-Whitney test are shown.



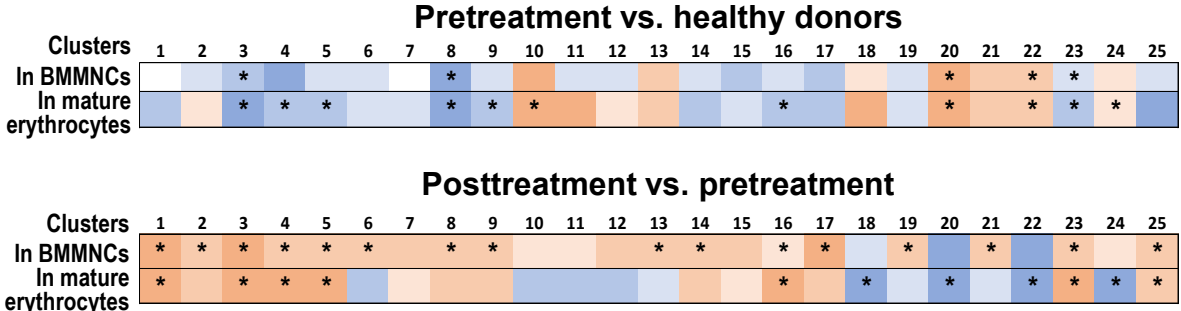
Supplementary Fig. 6 Phenotyping of B cell and granulocyte subclusters using CyTOF. **a**, A scatter plot showing frequency (% in CD45+ BMMNCs) of B cells of HD ($n = 4$), pretreatment ($n = 20$) and posttreatment samples ($n = 16$). P values with the two-sided unpaired and paired Mann-Whitney test are shown. **b**, Heatmaps showing difference of frequency of 25 B cell clusters in pretreatment samples versus HD (top) and in posttreatment versus pretreatment samples (bottom). Red color indicates fold change to

be higher than 1, and blue color indicates fold change to be lower than 1. Stars present statistical significance ($P < 0.05$; P values were calculated with the two-sided unpaired Mann-Whitney test). **c**, Binary clustering of 25 clusters of B cells based on surface marker expression. A relative expression bar is shown on the bottom. **d**, Scatter plots showing frequency (% in CD45⁺ BMMNCs) of representative B clusters of HD ($n = 4$), pretreatment ($n = 20$) and posttreatment samples ($n = 16$). P values with the two-sided unpaired and paired Mann-Whitney test are shown. **e**, A scatter plot showing frequency (% in CD45⁺ BMMNCs) of granulocytes of healthy controls ($n = 4$), pretreatment ($n = 20$) and posttreatment samples ($n = 16$). P values with the two-sided unpaired and paired Mann-Whitney test are shown. **f**, Heatmaps showing difference of frequency of 25 granulocyte clusters in pretreatment samples versus HD (top) and in posttreatment samples versus pretreatment samples (bottom). A red color indicates fold change to be higher than 1, and a blue color indicates fold change to be lower than 1. Stars present statistical significance ($P < 0.05$; P values were calculated with the two-sided unpaired Mann-Whitney test). **g**, Binary clustering of 25 clusters of granulocytes based on surface marker expression. A relative expression bar is shown on the bottom. **h**, Scatter plots showing frequency (% in CD45⁺ BMMNCs) of representative granulocyte clusters of HD ($n = 4$), pretreatment ($n = 20$) and posttreatment samples ($n = 16$). P values with the two-sided unpaired and paired Mann-Whitney test are shown.

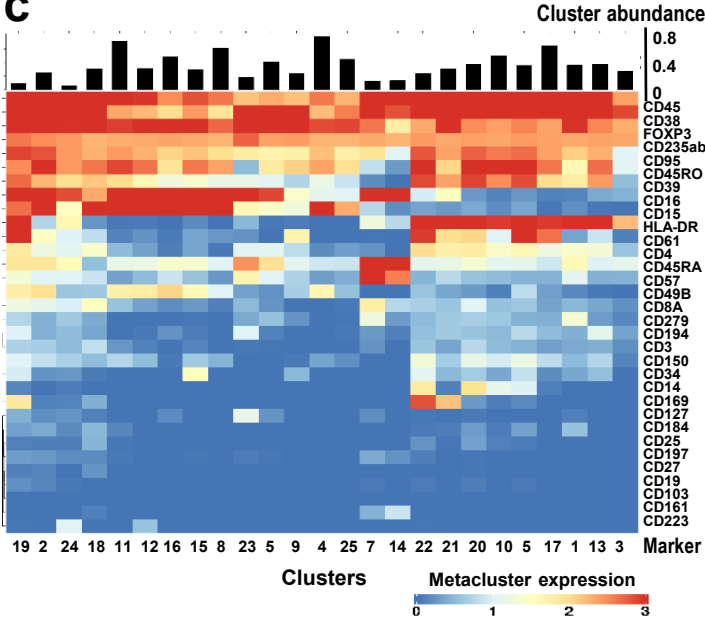
a Mature erythrocytes



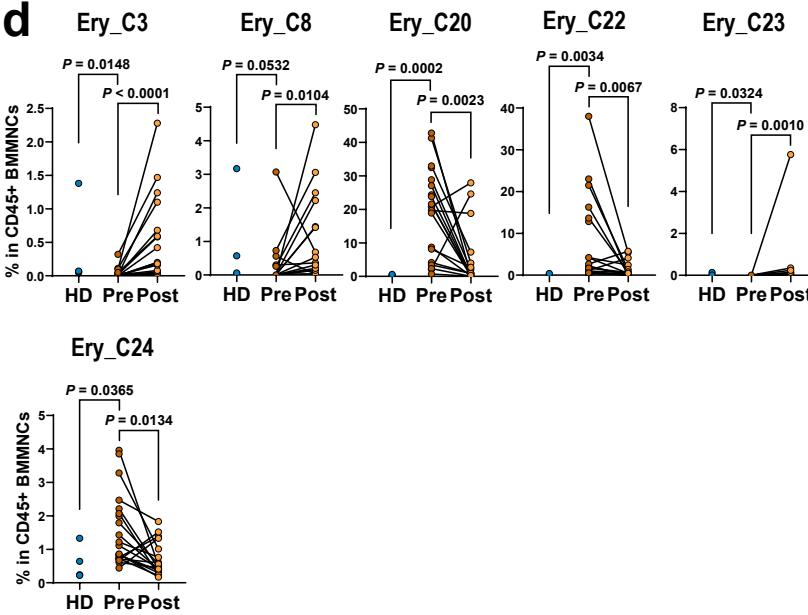
b



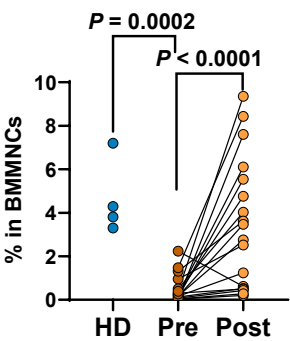
c



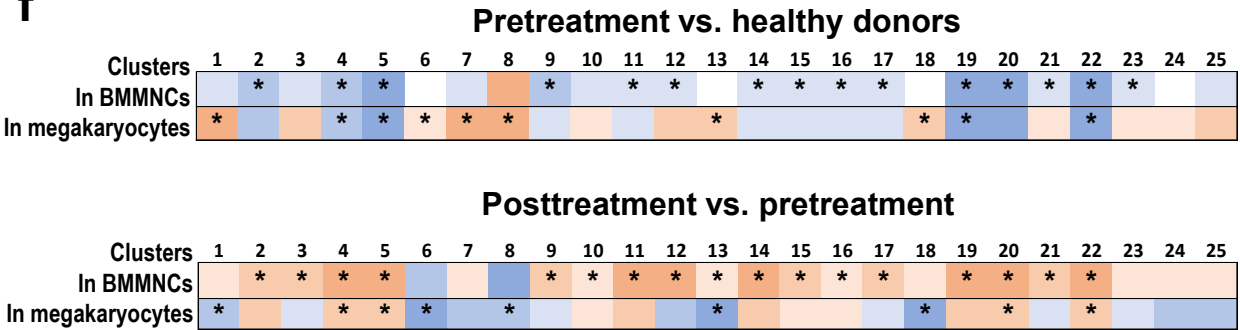
d



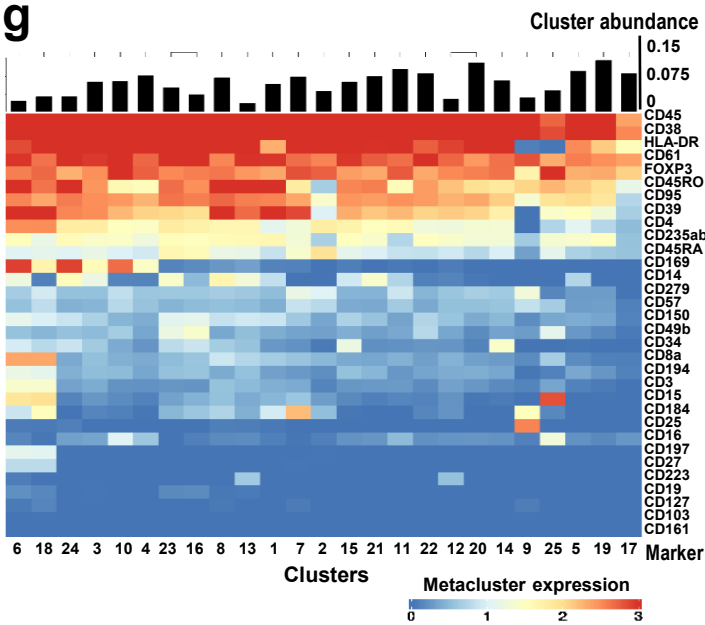
e Megakaryocytes



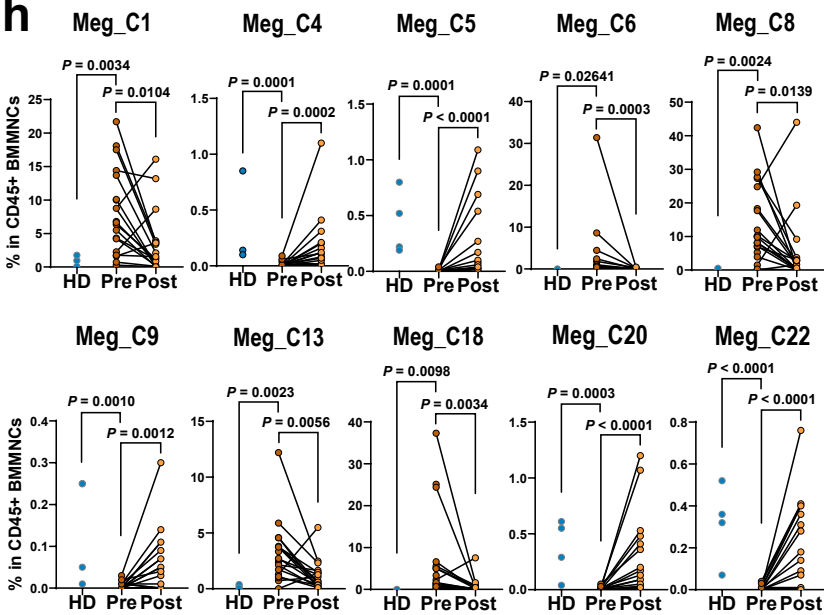
f



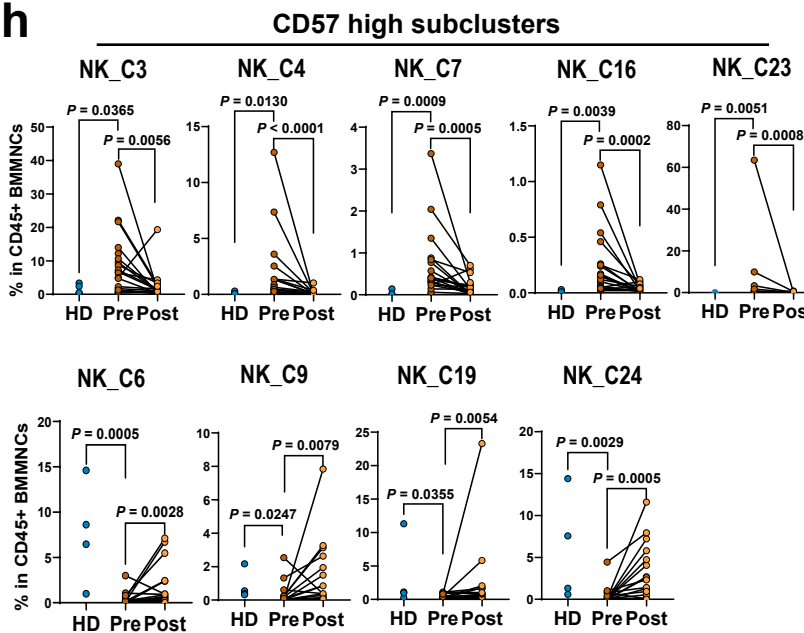
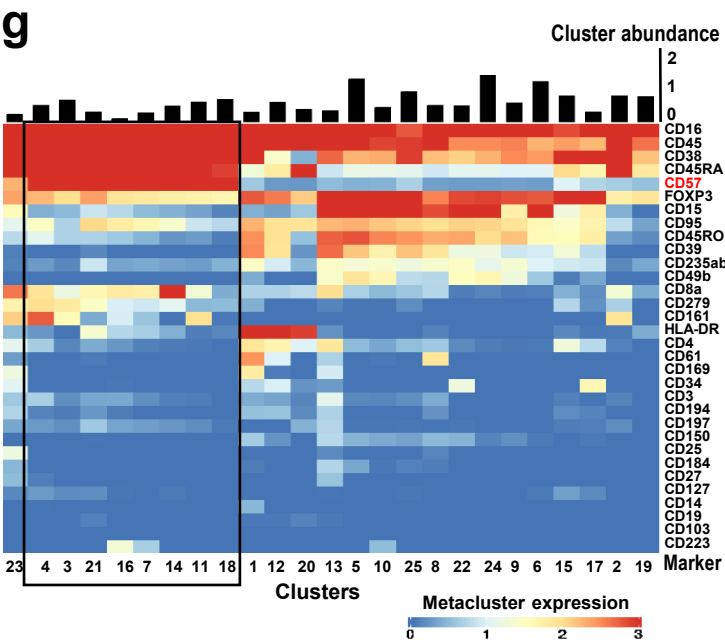
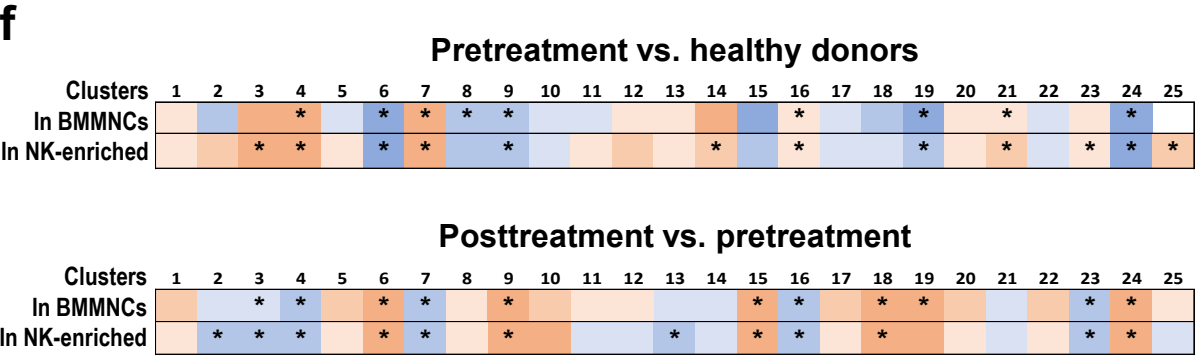
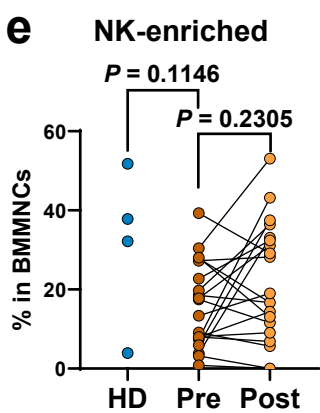
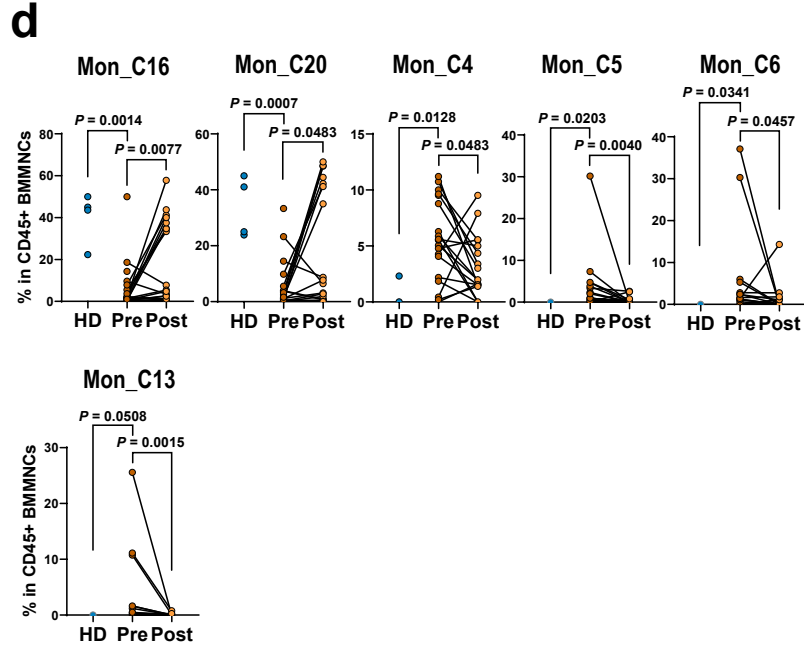
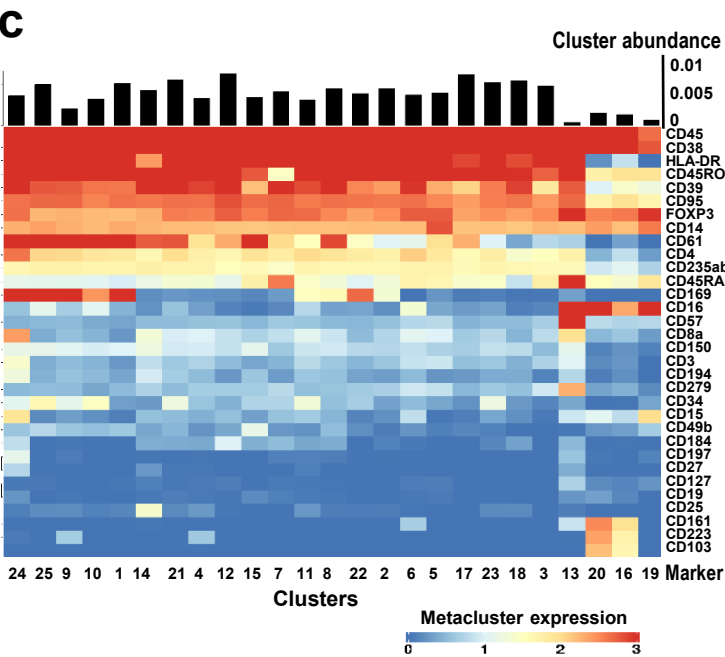
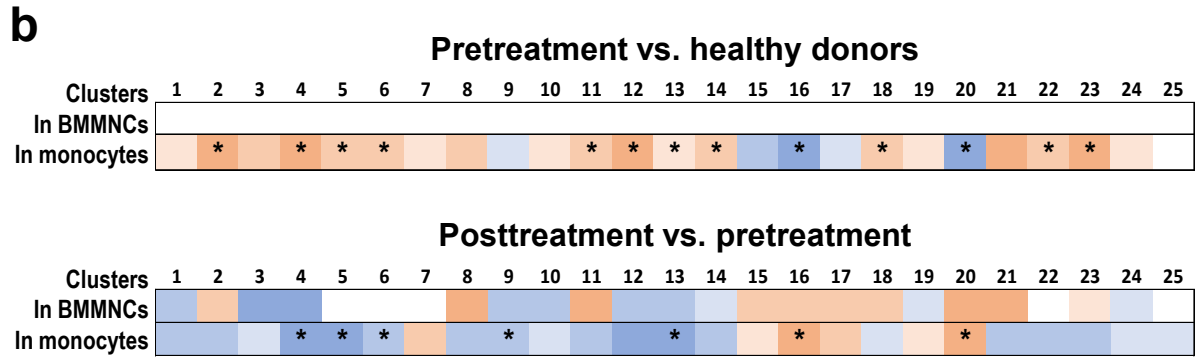
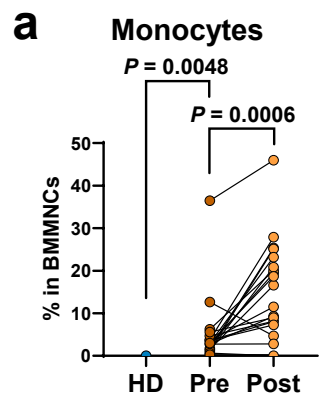
g



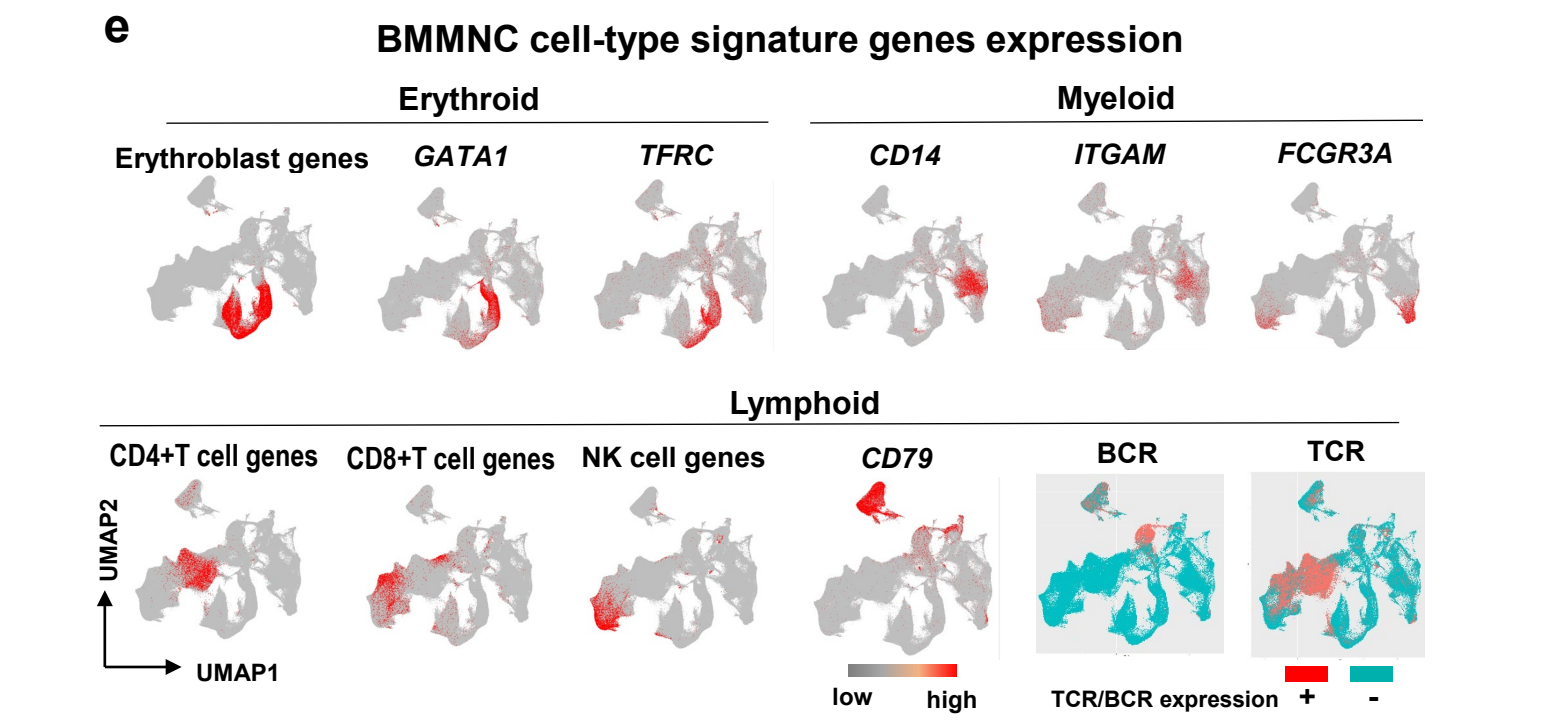
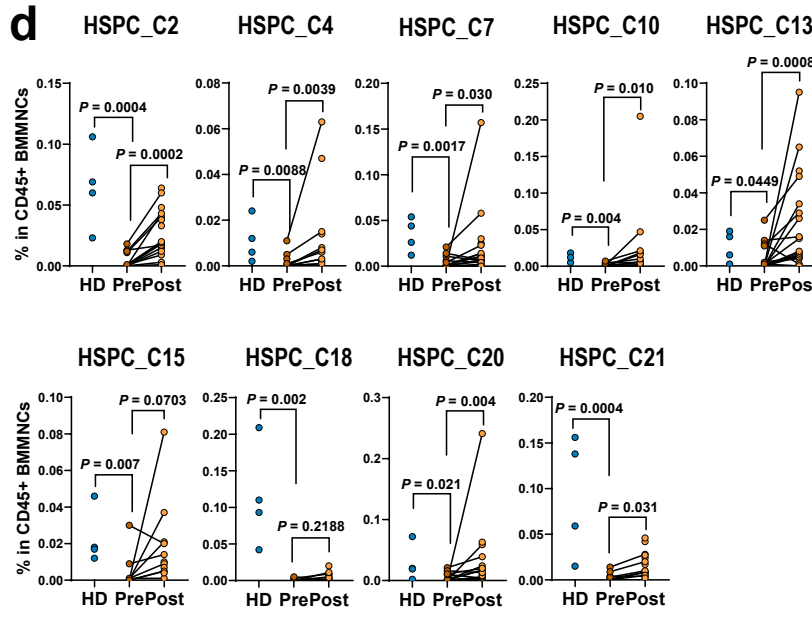
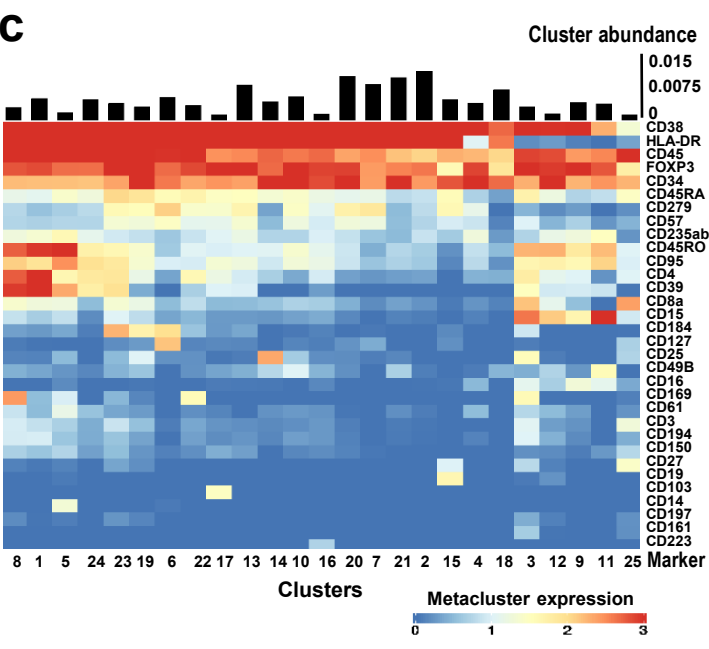
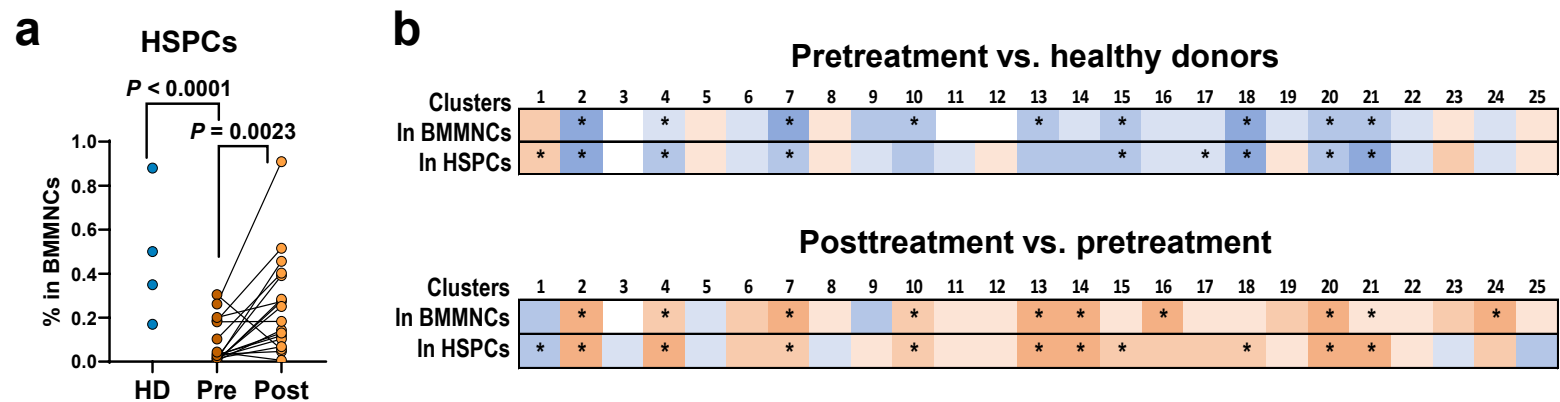
h



Supplementary Fig. 7 Phenotyping of mature erythrocyte and megakaryocyte subclusters using CyTOF. **a**, A scatter plot showing frequency (% in CD45⁺ BMMNCs) of mature erythrocytes of HD (*n* = 4), pretreatment (*n* = 20) and posttreatment samples (*n* = 16). *P* values with the two-sided unpaired and paired Mann-Whitney test are shown. **b**, Heatmaps showing difference of frequency of 25 mature erythrocyte clusters in pretreatment samples versus healthy donors (top) and in posttreatment versus pretreatment samples (bottom). Red color indicates fold change to be higher than 1, and blue color indicates fold change to be lower than 1. Stars present statistical significance (*P* < 0.05; *P* values were calculated with the two-sided unpaired Mann-Whitney test). **c**, Binary clustering of 25 clusters of mature erythrocytes based on surface marker expression. A relative expression bar is shown on the bottom. **d**, Scatter plots showing frequency (% in CD45⁺ BMMNCs) of representative mature erythrocyte clusters of HD (*n* = 4), pretreatment (*n* = 20) and posttreatment samples (*n* = 16). *P* values with the two-sided unpaired and paired Mann-Whitney test are shown. **e**, A scatter plot showing frequency (% in CD45⁺ BMMNCs) of megakaryocytes of HD (*n* = 4), pretreatment (*n* = 20) and posttreatment samples (*n* = 16). *P* values with the two-sided unpaired and paired Mann-Whitney test are shown. **f**, Heatmaps showing difference of frequency of 25 megakaryocyte clusters in pretreatment samples versus HD (top) and in posttreatment versus pretreatment samples (bottom). A red color indicates fold change to be higher than 1, and a blue color indicates fold change to be lower than 1. Stars present statistical significance (*P* < 0.05; *P* values were calculated with the two-sided unpaired Mann-Whitney test). **g**, Binary clustering of 25 clusters of megakaryocytes based on surface marker expression. A relative expression bar is shown on the right. **h**, Scatter plots showing frequency (% in CD45⁺ BMMNCs) of representative megakaryocyte clusters of HD (*n* = 4), pretreatment (*n* = 20) and posttreatment samples (*n* = 16). *P* values with the two-sided unpaired and paired Mann-Whitney test are shown.



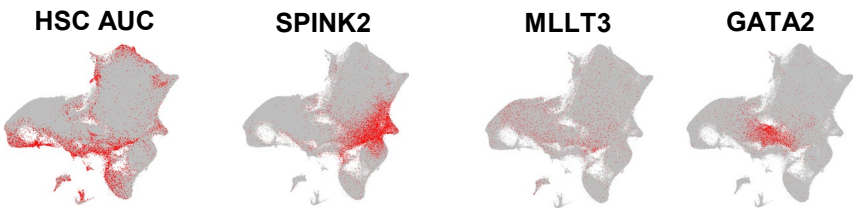
Supplementary Fig. 8 Phenotyping of monocyte and NK subclusters using CyTOF. **a**, A scatter plot showing frequency (% in CD45⁺ BMMNCs) of monocytes of HD (*n* = 4), pretreatment (*n* = 20) and posttreatment samples (*n* = 16). *P* values with the two-sided unpaired and paired Mann-Whitney test. **b**, Heatmaps showing difference of frequency of 25 monocyte cell clusters in pretreatment samples versus HD (top) and in posttreatment versus pretreatment samples (bottom). Red color indicates fold change to be > 1, and blue color indicates fold change to be < 1. Stars present statistical significance (*P* < 0.05; *P* values were calculated with the two-sided unpaired Mann-Whitney test). **c**, Binary clustering of 25 clusters of monocytes based on surface marker expression. A relative expression bar is shown on the bottom. **d**, Scatter plots showing frequency (% in CD45⁺ BMMNCs) of representative monocyte clusters of HD (*n* = 4), pretreatment (*n* = 20) and posttreatment samples (*n* = 16). *P* values with the two-sided unpaired and paired Mann-Whitney test. **e**, In the CyTOF analysis, NK cells were defined as CD16⁺ cells in CD3-CD19-CD235AB-CD14⁻ cells due to limitation of antibody panel. It may decrease the purity of NK cells defined here, so we named this population “NK-enriched cells”. A scatter plot showing frequency (% in CD45⁺ BMMNCs) of NK-enriched cells of HD (*n* = 4), pretreatment (*n* = 20) and posttreatment samples (*n* = 16). *P* values with the two-sided unpaired and paired Mann-Whitney test are shown. Notably, functionally activated NK cells (CD57 high clusters) were overrepresented in SAA patients and decreased after treatment; the total NK-enriched cell population tended to be higher (% in BMMNCs) in SAA and did not change significantly after treatment. **f**, Heatmaps showing difference of frequency of 25 NK cell clusters in pretreatment samples versus HD (top) and in posttreatment versus pretreatment samples (bottom). Color and start legend same as **b**. **g**, Binary clustering of 25 clusters of NK cells based on surface marker expression. **h**, Scatter plots showing frequency (% in CD45⁺ BMMNCs) of representative NK cell clusters of HD (*n* = 4), pretreatment (*n* = 20) and posttreatment samples (*n* = 16). *P* values with the two-sided unpaired and paired Mann-Whitney test are shown.



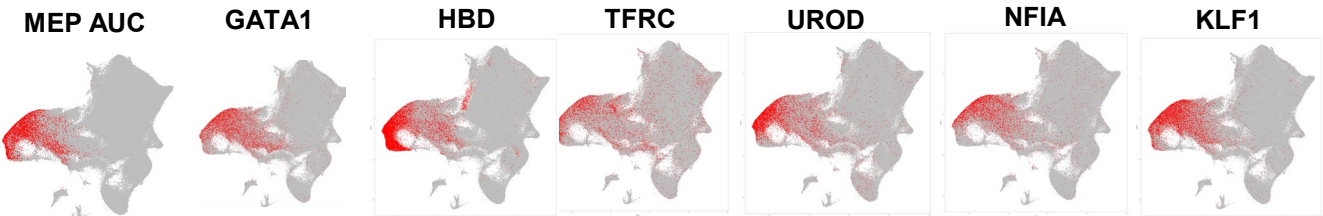
Supplementary Fig. 9 Phenotyping of HSPC subclusters using CyTOF. **a**, A scatter plot showing frequency (% in CD45⁺ BMMNCs) of HSPCs of healthy controls ($n = 4$), pretreatment samples of SAA patients ($n = 20$) and posttreatment samples ($n = 16$). P values with the two-sided unpaired and paired Mann-Whitney test are shown. **b**, Heatmaps showing difference of frequency of 25 monocyte cell clusters in pretreatment samples versus healthy donors (top) and in posttreatment samples versus pretreatment samples (bottom). A red color indicates fold change to be higher than 1, and a blue color indicates fold change to be lower than 1. Stars present statistical significance ($P < 0.05$; P values were calculated with the two-sided unpaired Mann-Whitney test). **c**, Binary clustering of 25 clusters of HSPCs based on surface marker expression. A relative expression bar is shown on the bottom. **d**, Scatter plots showing frequency (% in CD45⁺ BMMNCs) of representative HSPC clusters of healthy controls ($n = 4$), pretreatment samples of SAA patients ($n = 20$) and posttreatment samples ($n = 16$). P values with the two-sided unpaired and paired Mann-Whitney test are shown. HSPC, hematopoietic stem and progenitor cell. **e**, Expression of lineage signature genes, cell-type specific genes and TCR/BCR are highlighted in UMAP lots of batch-corrected single-cell gene expression in BMMNCs of all samples at different time points of SAA patients and healthy donors: the same UMAP plot in Fig. 1h.

a Signature gene expression of HSPC cell-types

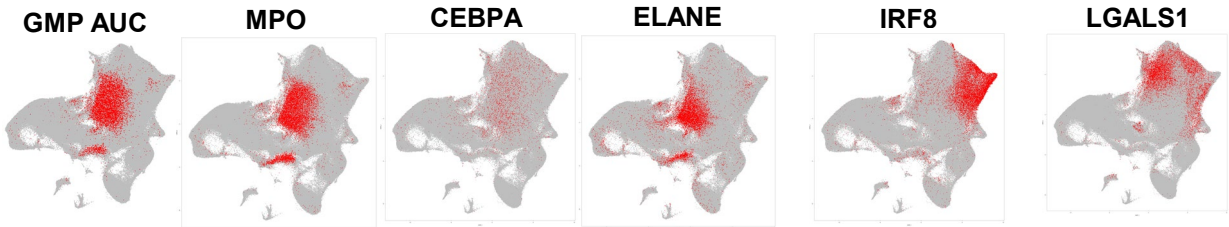
HSC signature genes



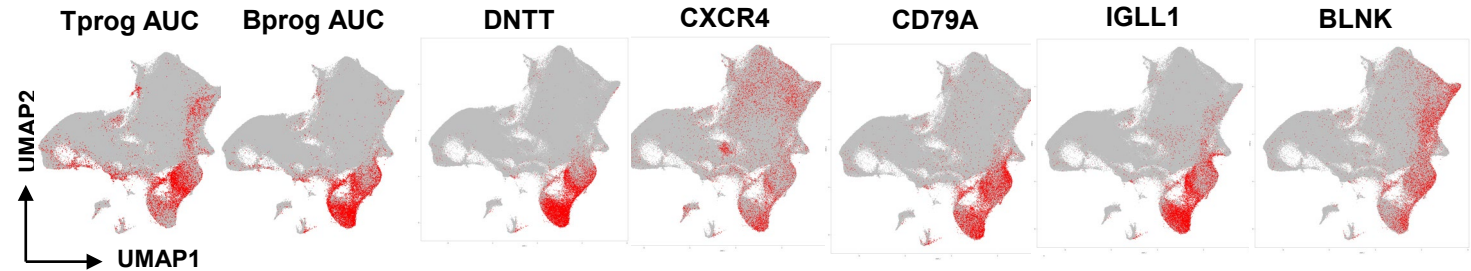
MEP signature genes



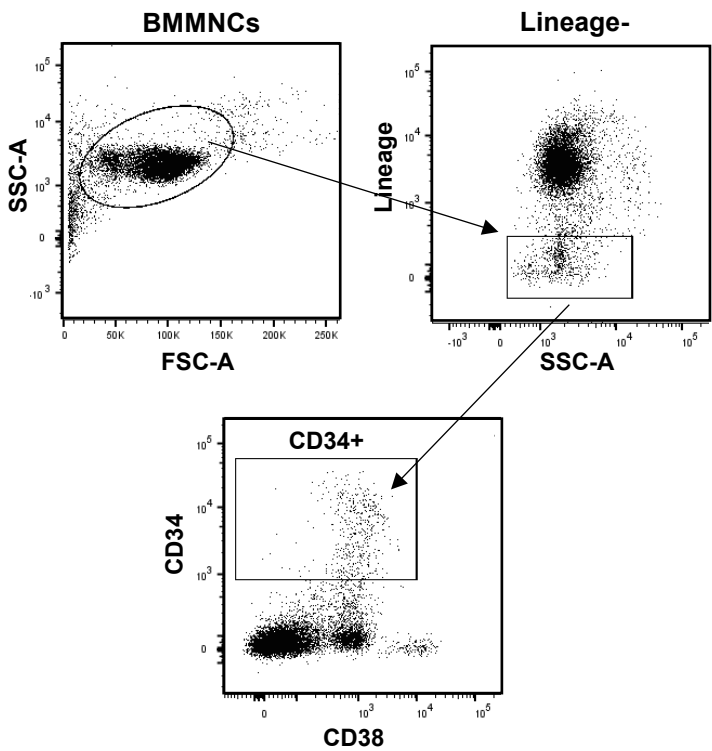
Myeloid signature genes



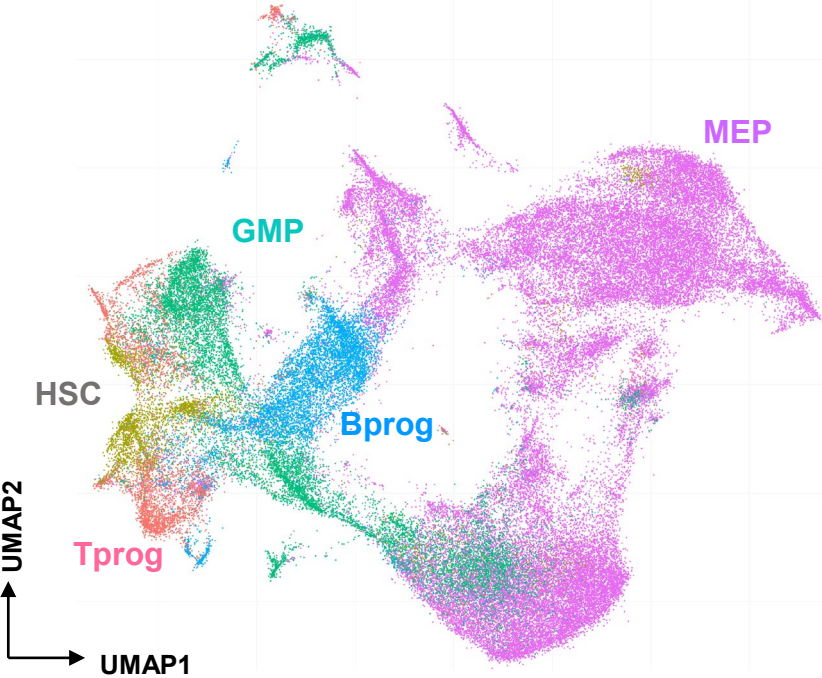
Lymphoid signature genes



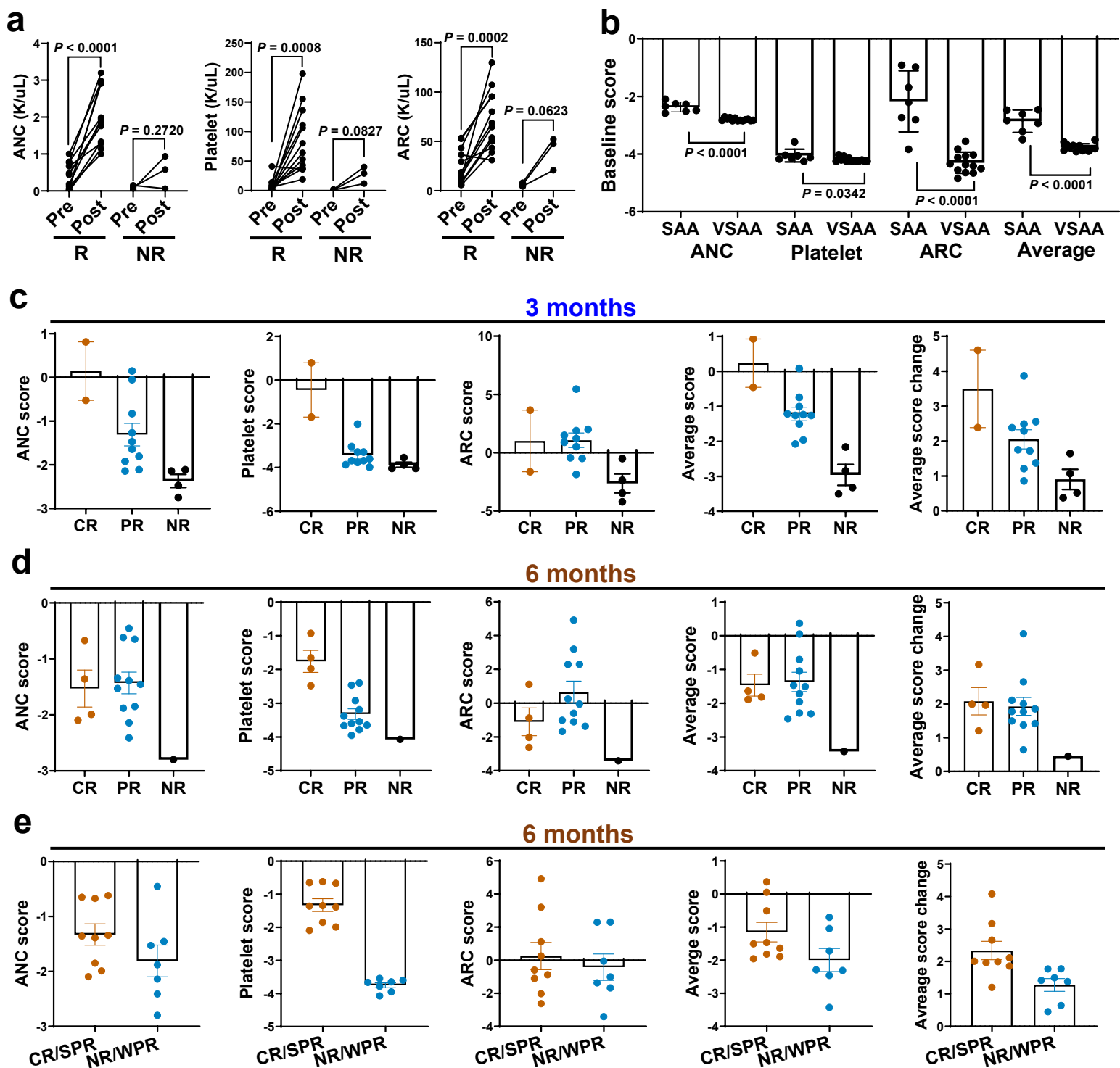
b FACS sorting strategy of HSPCs



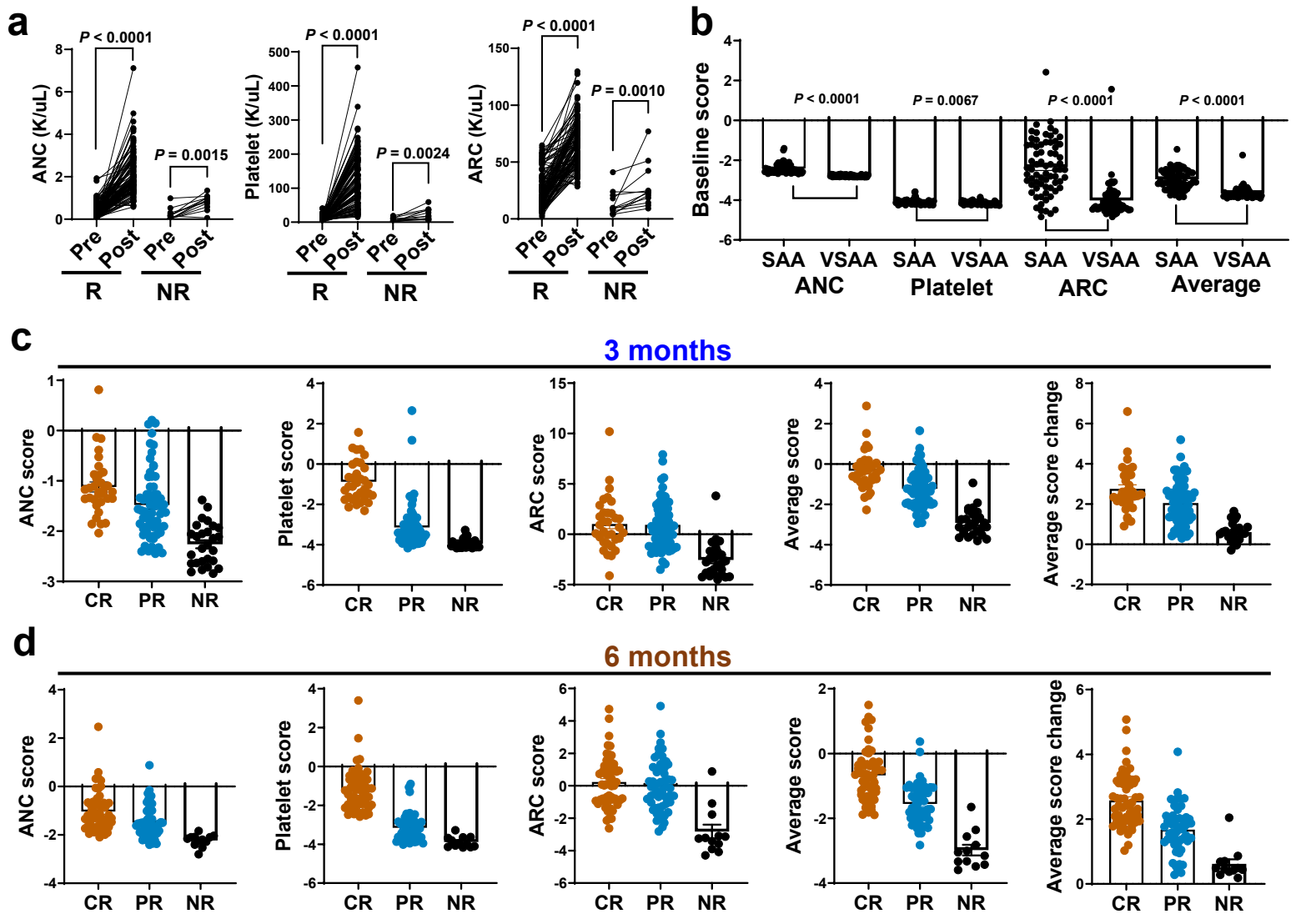
c Differentiation trajectory of HSPCs



Supplementary Fig. 10 Resolving heterogeneity of HSPCs using scRNA-seq in SAA. **a**, Expression of lineage signature genes are highlighted in UMAP lots of batch-corrected single-cell gene expression in HSPCs of all samples at different time points of SAA patients and healthy donors: the same UMAP plot in Fig. 2c. **b**, FACS sorting strategy for Lineage-CD34+ HSPCs from BMMNC samples. FACS data analyses shown in Fig. 2a correspond to Lineage-CD34+ HSPCs. **c**, Reconstruction of the hematopoietic hierarchy pseudotime ordering with Palantir. A color legend is the same as in Fig. 2c.

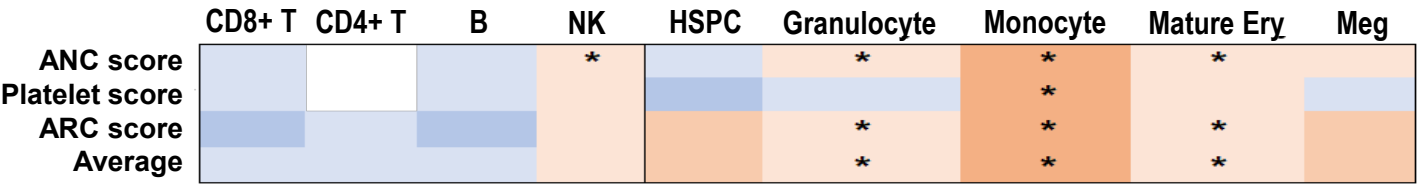


Supplementary Fig. 11 Converted blood count scores reflect a hematopoiesis level and hematopoietic recovery in SAA. **a**, Scatter plots showing blood counts (ANC, platelet, and ARC) at baseline and after IST in responders and non-responders, respectively, in a total of 20 patients. P values with the two-sided paired Mann-Whitney test are shown. **b**, A scatter plot showing blood count scores, including ANC score, platelet score, ARC score and an average blood count score at baseline in SAA and VSAA patients ($n = 20$). These blood count scores were calculated based on blood counts (Methods). Data are presented as mean values \pm SEM. P values with the two-sided unpaired Mann-Whitney test are shown. **c**, Scatter plots showing blood count scores, including ANC score, platelet score, ARC score, an average blood count score at 3 months and a change of average blood count score at 3 months after IST, in CR, PR and NR patients ($n = 20$). Data are presented as mean values \pm SEM. **d**, Scatter plots showing blood count scores, including ANC score, platelet score, ARC score, an average blood count score at 6 months and a change of average blood count score at 6 months after IST, in CR, PR and NR patients ($n = 20$). Data are presented as mean values \pm SEM. **e**, Scatter plots showing blood count scores, including ANC score, platelet score, ARC score, an average blood count score at 6 months and a change of average blood count score at 6 months after IST, in CR/SPR and NR/WPR patients ($n = 20$). Data are presented as mean values \pm SEM. TCR, T-cell receptor; BCR, B-cell receptor; ANC, absolute neutrophil count; ARC, absolute reticulocyte count; VSAA, very severe aplastic anemia; SPR, strong partial response; WPR, weak partial response.

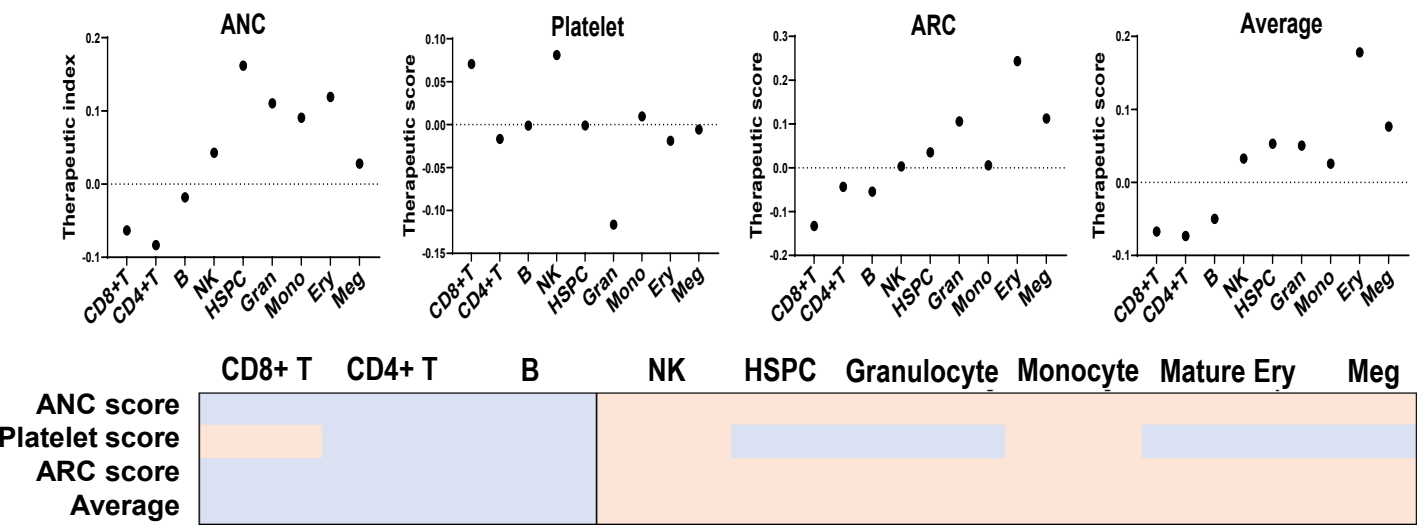


Supplementary Fig. 12 Converted blood count scores reflect a hematopoiesis level and hematopoietic recovery in SAA. **a**, Scatter plots showing blood counts (ANC, platelet, and ARC) at baseline and after IST in responders and non-responders, respectively, in a total of 137 patients. *P* values with the two-sided paired Mann-Whitney test are shown. **b**, A scatter plot showing blood count scores, including ANC score, platelet score, ARC score and an average blood count score at baseline in SAA and VSAA patients (*n* = 137). These blood count scores were calculated based on blood counts (Methods). Data are presented as mean values \pm SEM. *P* values with the two-sided unpaired Mann-Whitney test are shown. **c**, Scatter plots showing blood count scores, including ANC score, platelet score, ARC score, an average blood count score at 3 months and a change of average blood count score at 3 months after IST, in CR, PR and NR patients (*n* = 137). Data are presented as mean values \pm SEM. **d**, Scatter plots showing blood count scores, including ANC score, platelet score, ARC score, an average blood count score at 6 months and a change of average blood count score at 6 months after IST, in CR, PR and NR patients (*n* = 137). Data are presented as mean values \pm SEM.

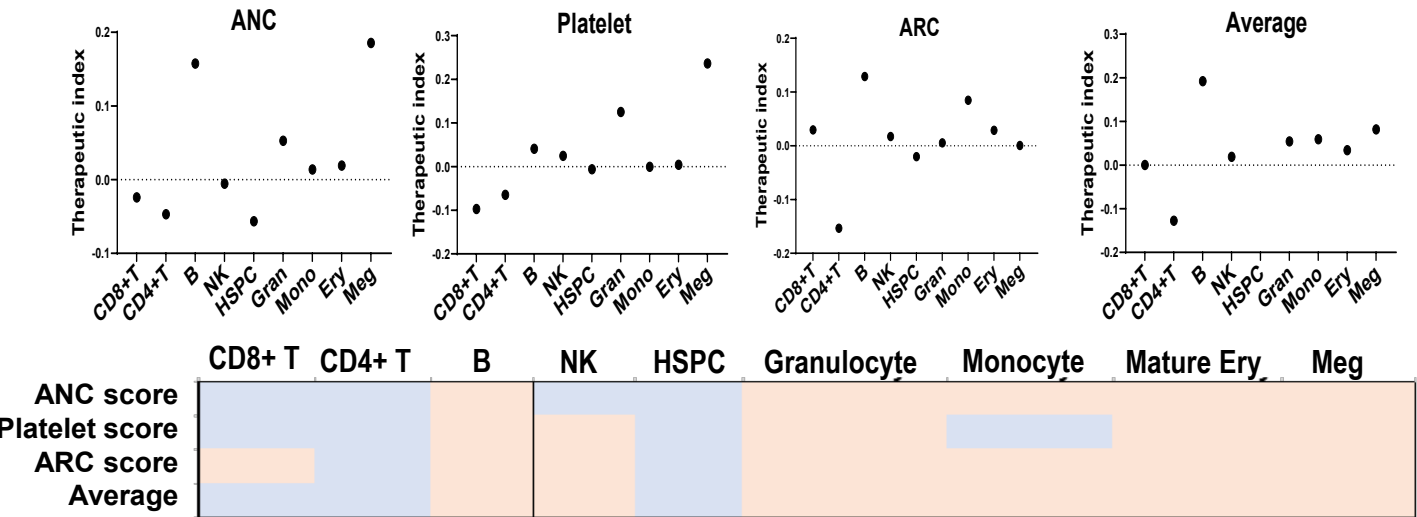
a Pretreatment samples: correlation of cell type frequency with blood count scores



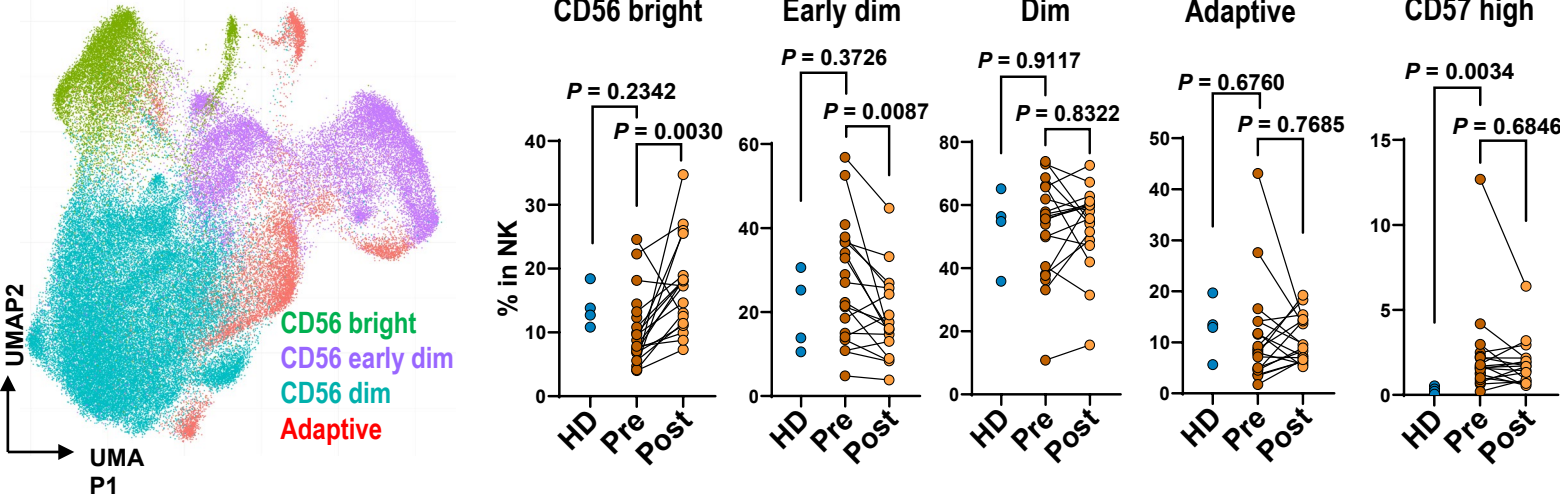
b Predictive index (with blood count scores at 6 months after treatment)



c Therapeutic index (with blood count score changes at 6 months after treatment)

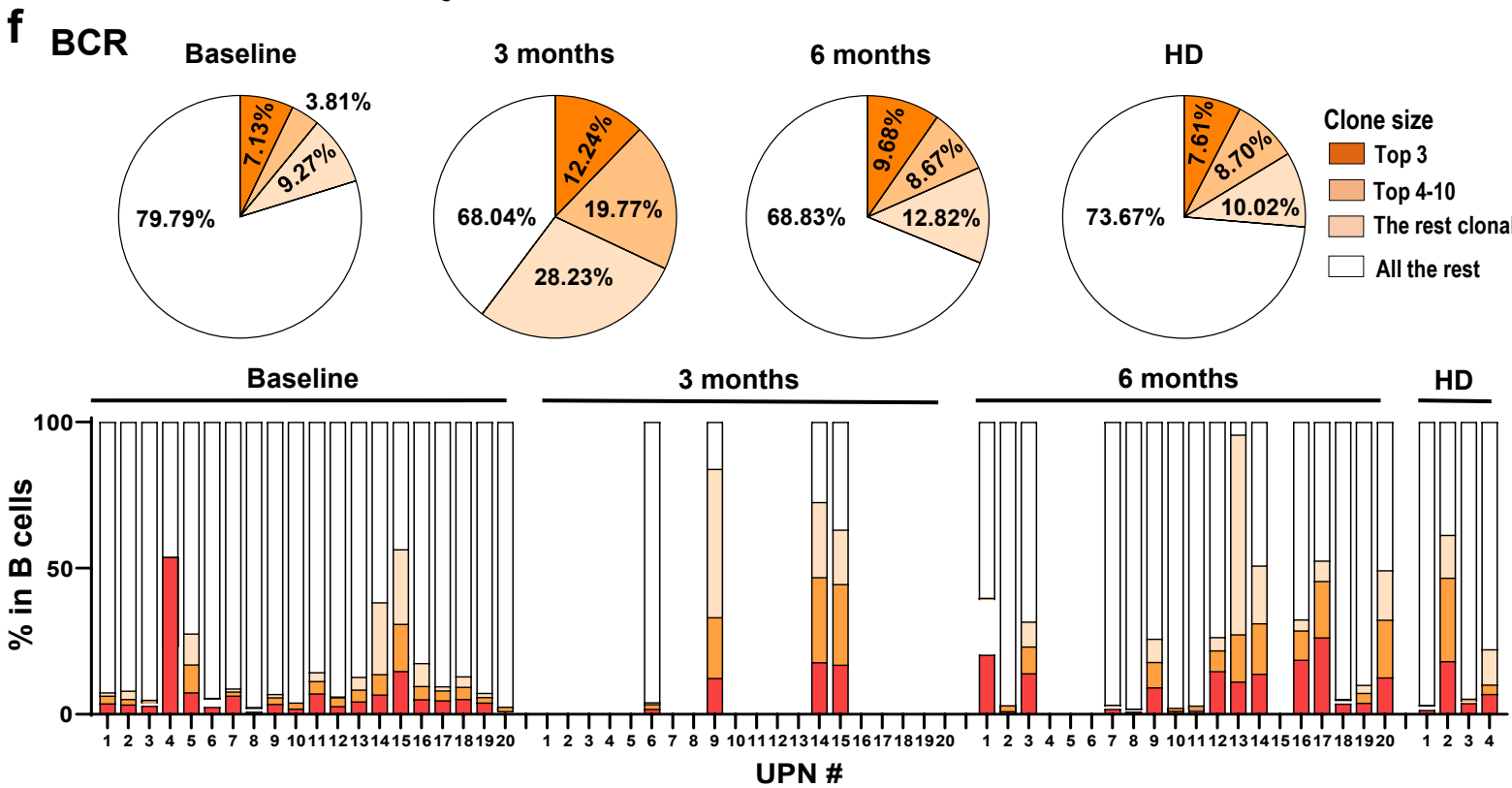
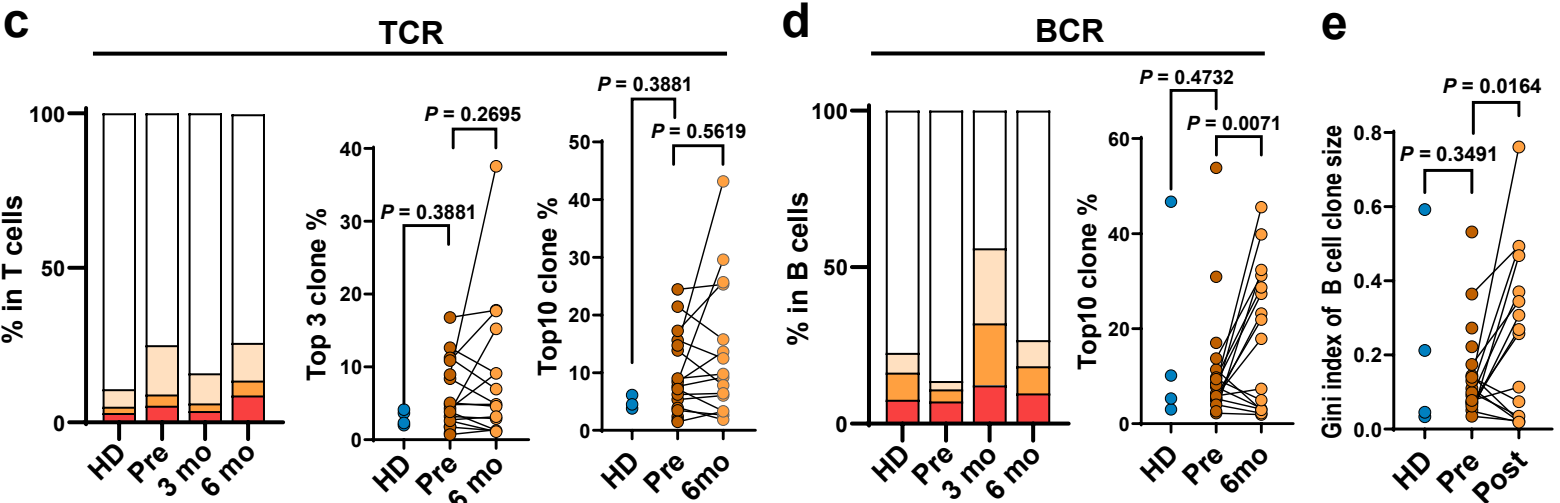
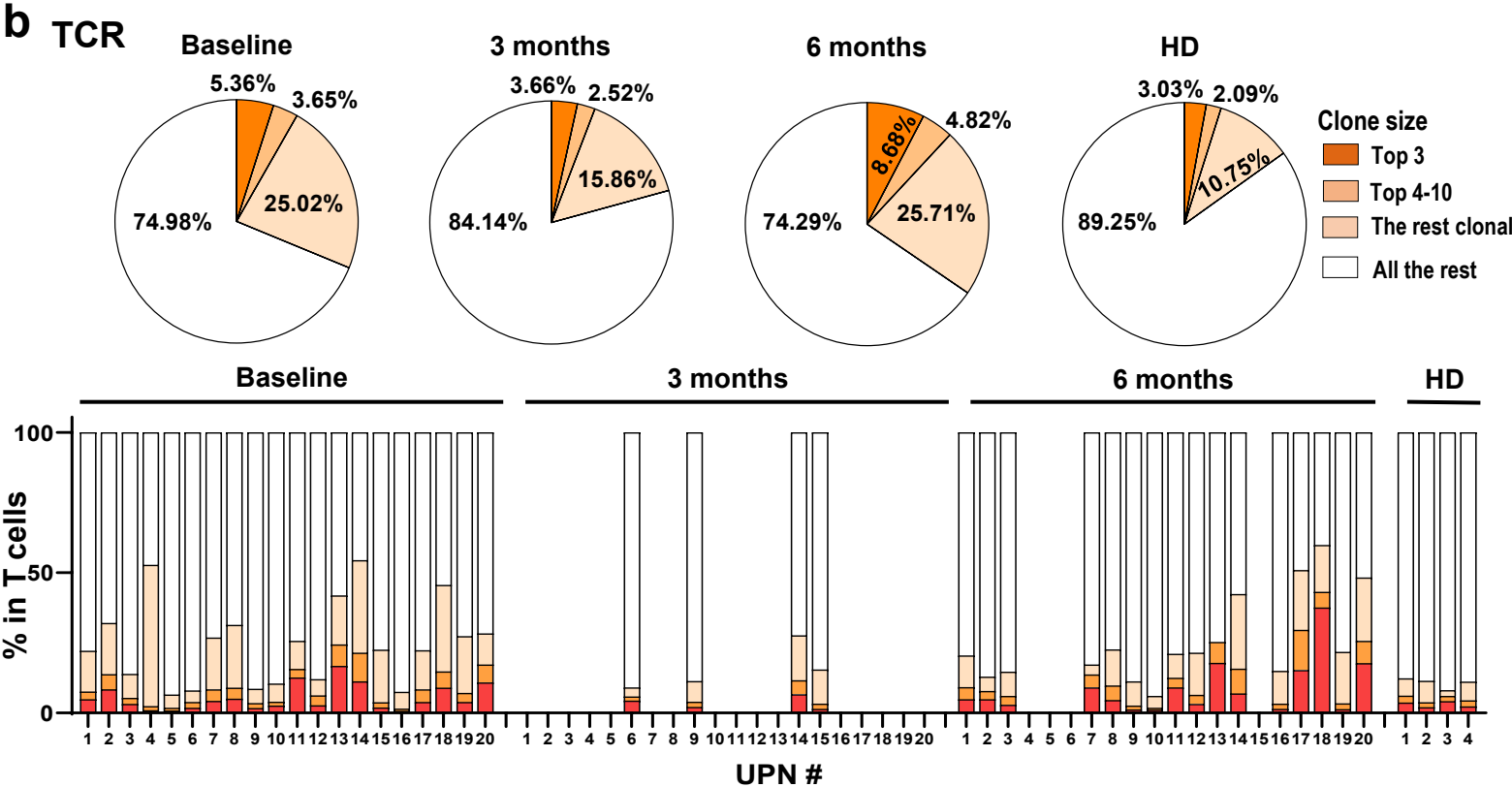
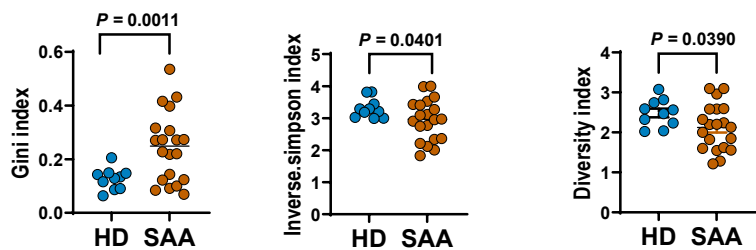


d NK cell subpopulations



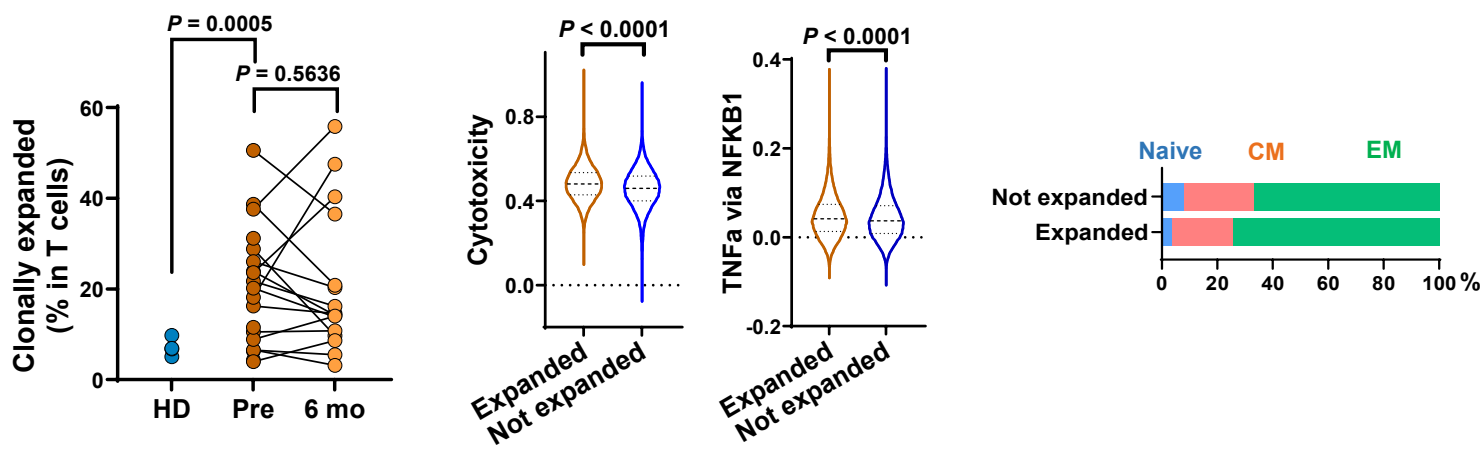
Supplementary Fig. 13 Using predictive and therapeutic indexes to quantify correlation of cell type frequency with blood count scores and blood count score changes. **a**, A heatmap showing correlation of cell type frequency in pretreatment samples with baseline blood count scores, including ANC, platelet, ARC and an average blood count score. A red color indicates a positive correlation, and a blue color indicates a negative correlation. Stars present statistical significance ($P < 0.05$; P values were calculated with the two-sided unpaired Mann-Whitney test). **b**, Predictive indexes for various cell types indicating correlation of cell type frequency with blood count scores at 6 months after IST. **c**, Therapeutic indexes for various cell types indicating correlation of cell type frequency with blood count score changes at 6 months after IST. **d**, UMAP projection of NK cells, which were assigned to four subtypes: CD56 bright, CD56 early dim, CD56 dim and adaptive NK cells. Scatter plots showing frequency (% in NK) of four subtypes of healthy controls ($n = 4$), pretreatment samples of SAA patients ($n = 20$) and posttreatment samples ($n = 16$). P values with the two-sided unpaired and paired Mann-Whitney test are shown.

a Gini Inverse.Simpson Shannon Diversity

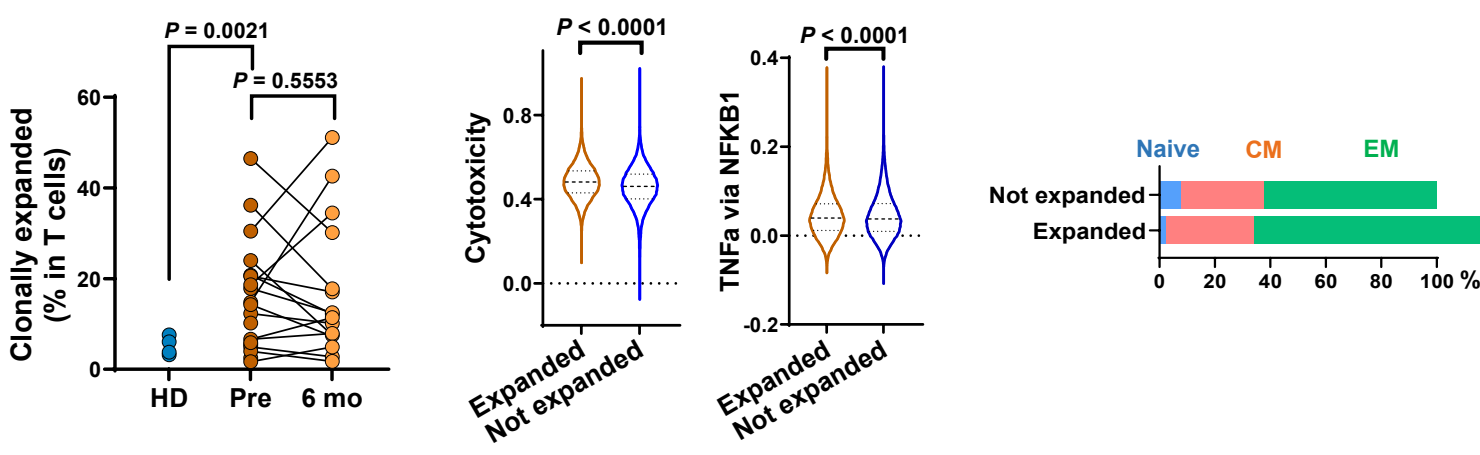


Supplementary Fig. 14 Clonal T cell expansion in SAA. **a**, A dot plot showing Gini index, Inverse.Simpson index, and Shannon diversity index of TCR clone size in SAA patients ($n = 20$) and healthy controls ($n = 10$). P values with the two-sided unpaired Mann-Whitney test are shown. **b**, Pie charts on the top summarizing frequency of T cell clones in pretreatment, 3-month, 6-month samples and in health controls. A bar chart at the bottom showing frequency of T cell clones (% in T cells) with clone size top 3, top 4-10, all the rest clones (with at least 2 cells with identical TCR) and cells without clonal TCR in individual samples. **c**, A bar chart comparing frequency of T cell clones in pretreatment, 3-month, 6-month samples and in healthy controls. Scatter plots showing frequency of top 3 (left) and top 10 (right) T cell clones in pretreatment, 6-month samples and in healthy controls. **d**, A bar chart comparing frequency of B cell clones in pretreatment, 3-month, 6-month samples and in healthy controls. Scatter plots showing frequency of top 3 (left) and top 10 (right) B cell clones in pretreatment, 6-month samples and in healthy controls. **e**, A scatter plot showing Gini indexes of BCR clone sizes in pre- ($n = 20$), post-treatment ($n = 16$) samples of SAA patients and healthy controls ($n = 4$). P values with the two-sided unpaired and paired Mann-Whitney test are shown. **f**, Pie charts on the top summarizing frequency of B cell clones in pretreatment, 3-month, 6-month samples and in health controls. A bar chart at the bottom showing frequency of B cell clones (% in B cells) with clone size top 3, top 4-10, and the rest clones (with at least 2 cells with identical BCR) and cells without clonal BCR in individual samples.

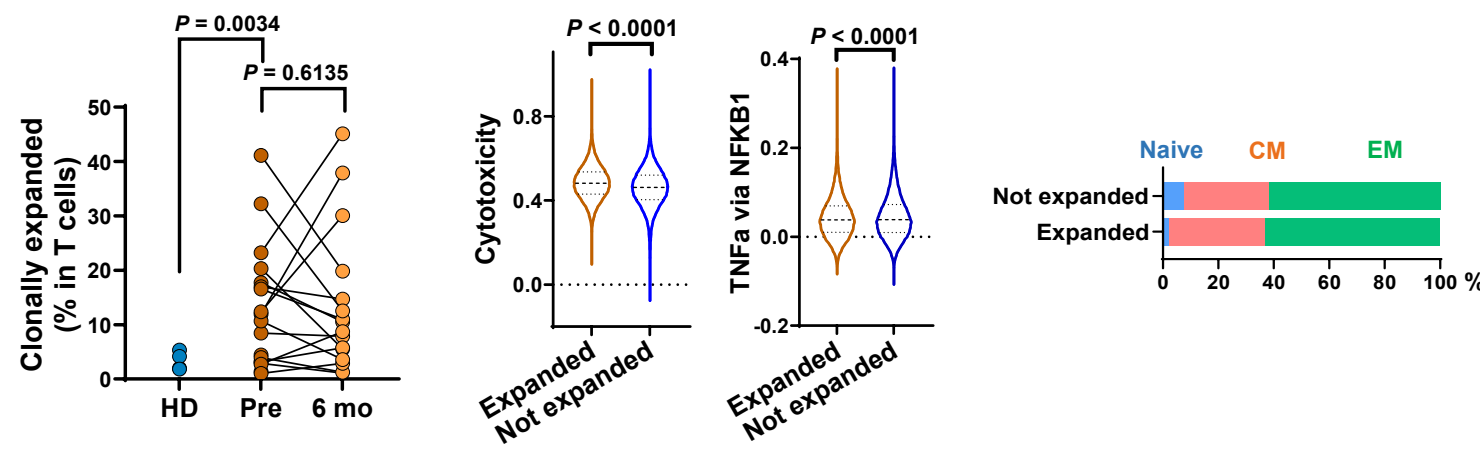
a With cut-off ≥5 cells



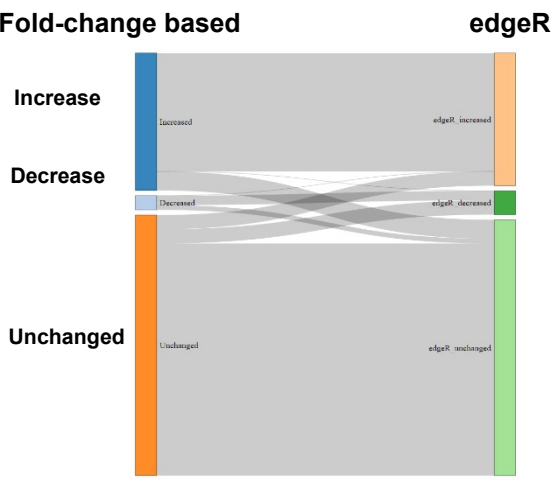
b With cut-off ≥10 cells



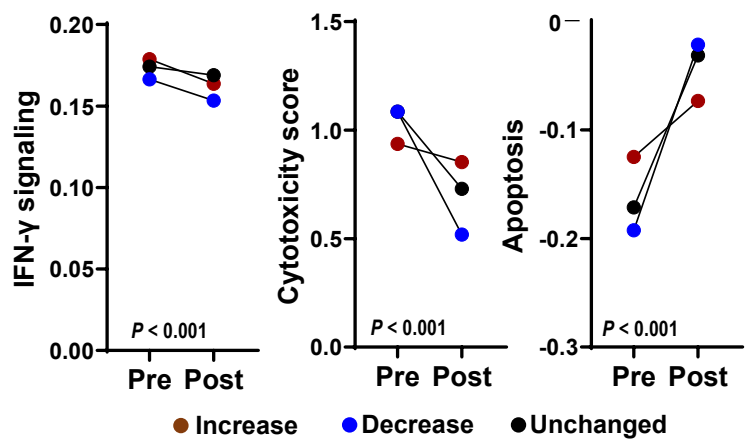
c With cut-off ≥20 cells



d Fold-change based

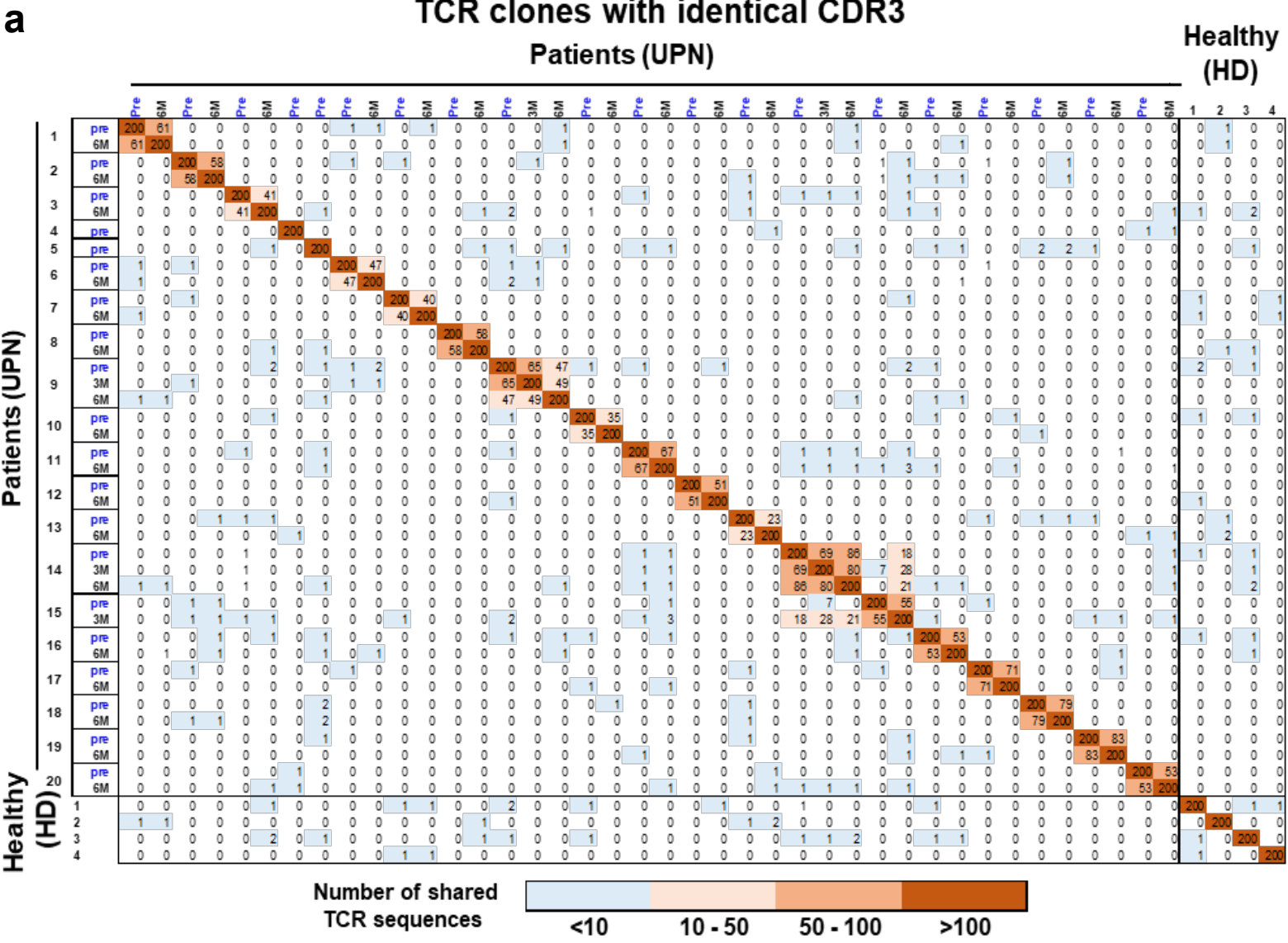


e

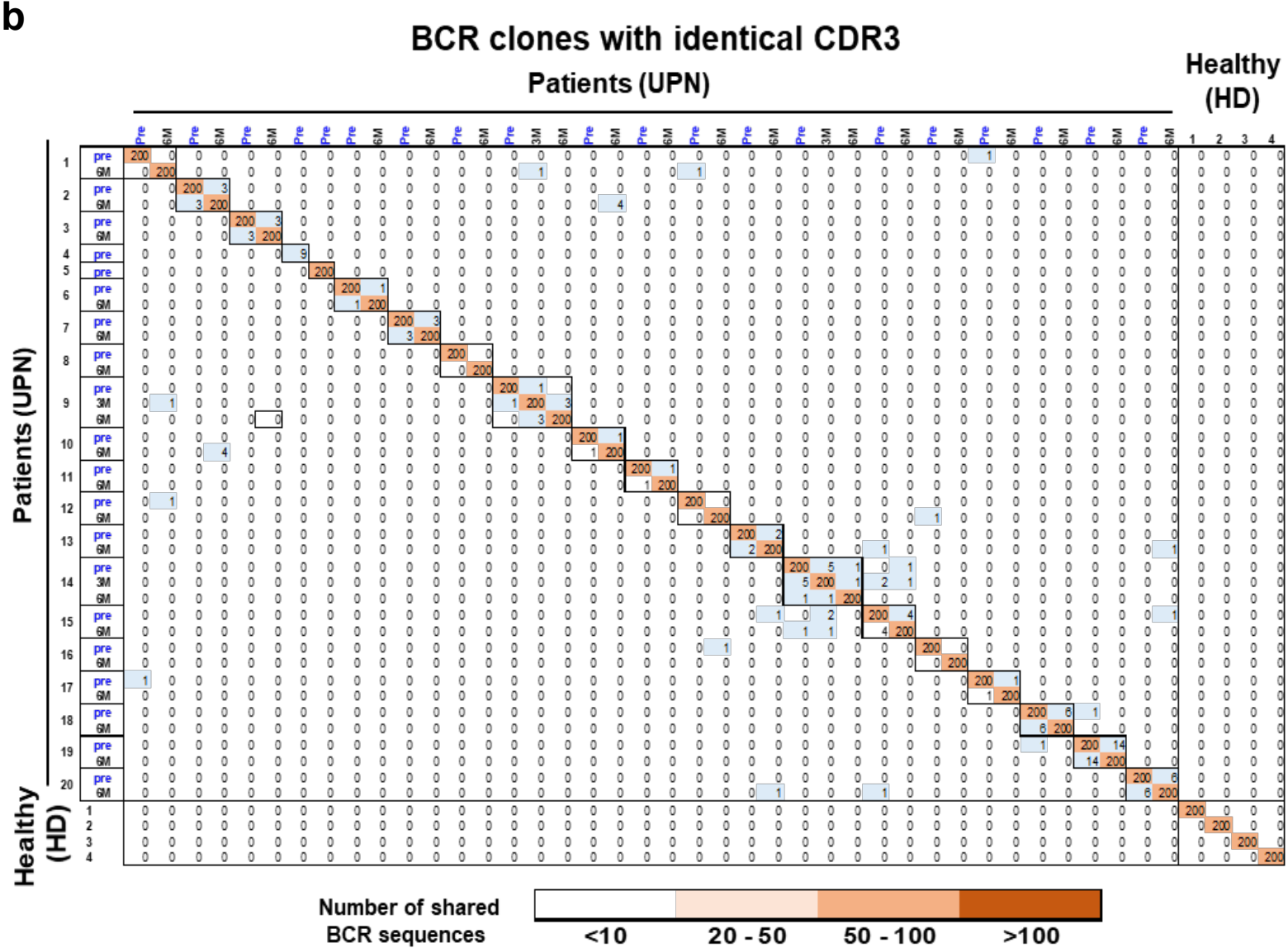


Supplementary Fig. 15 Consistency when using different cut-offs for definition of T cell clonal expansion and clone size dynamics. For statistical determination in analysis with an arbitrary (but widely-used) criteria for clone definition (clonally expanded T cells were defined as when there were > 2 cells with identical TCR), same analyses as shown in Fig. 4a and 4c were done with definition of expanded clones as ≥ 5 cells (**a**), ≥ 10 cells (**b**), and ≥ 20 cells (**c**) having identical TCR. Left panel, a dot plot showing frequency of total clonal expanded T cells in pre- ($n = 20$), post-treatment ($n = 16$) samples of SAA patients and healthy controls ($n = 4$). *P* values with the two-sided unpaired and paired Mann-Whitney test are shown. Middle panel, expression of T cytotoxicity genes and TNF- α via NF κ B signaling genes were plotted for clonally expanded T cells and T cells not expanded. *P* values with the two-sided unpaired and paired Mann-Whitney test were shown. Right panel, bar chart showing percentage of clonal expanded and nonexpanded T cells as naïve, CM, and EM. Among clones with at least 20 cells (for feasibility of comparison of gene expression), except for defining clonal dynamics based on fold change, edgeR was used to identify clones with an increase, decrease or unchanged dynamics pattern. **d**, A Sankey plot showing overall overlapping results of defining clonal size dynamics using fold change approach and edgeR. **e**, Same analysis as shown in Figure 4d, expression dynamics of IFN- γ signaling, cytotoxicity and cell apoptosis genes of increased, decreased and stable clones (defined by edgeR) after treatment.

a

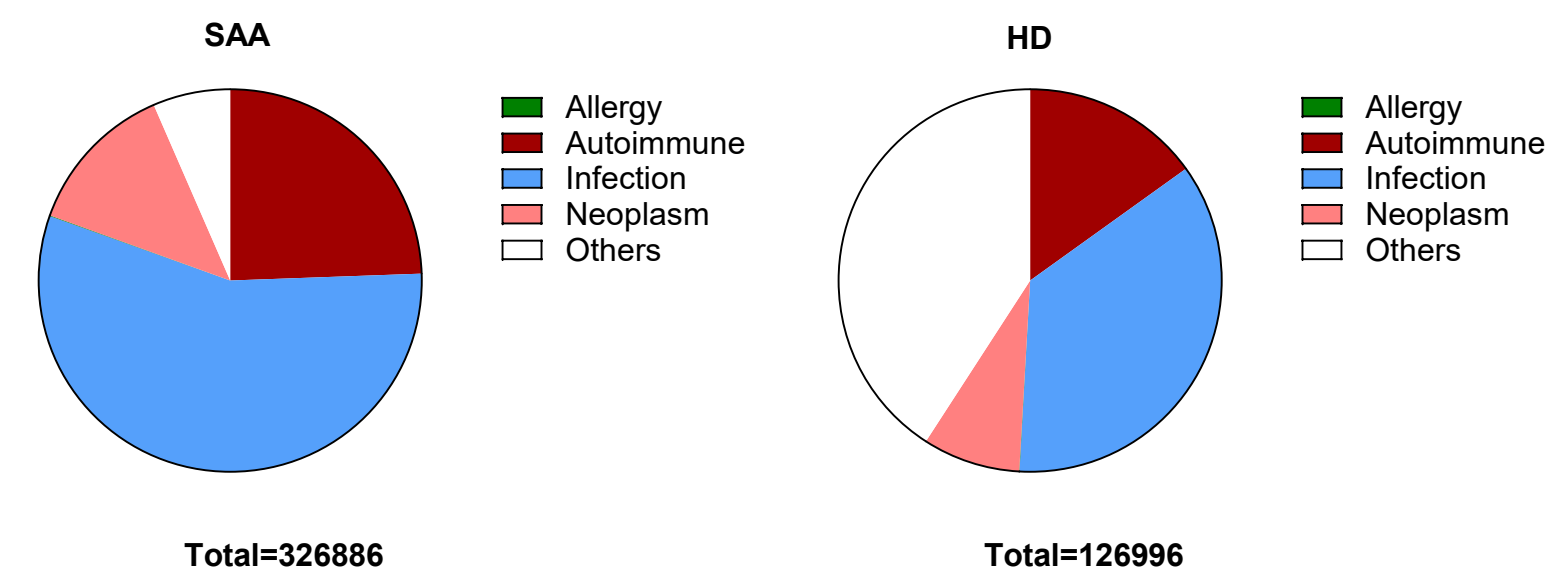


b

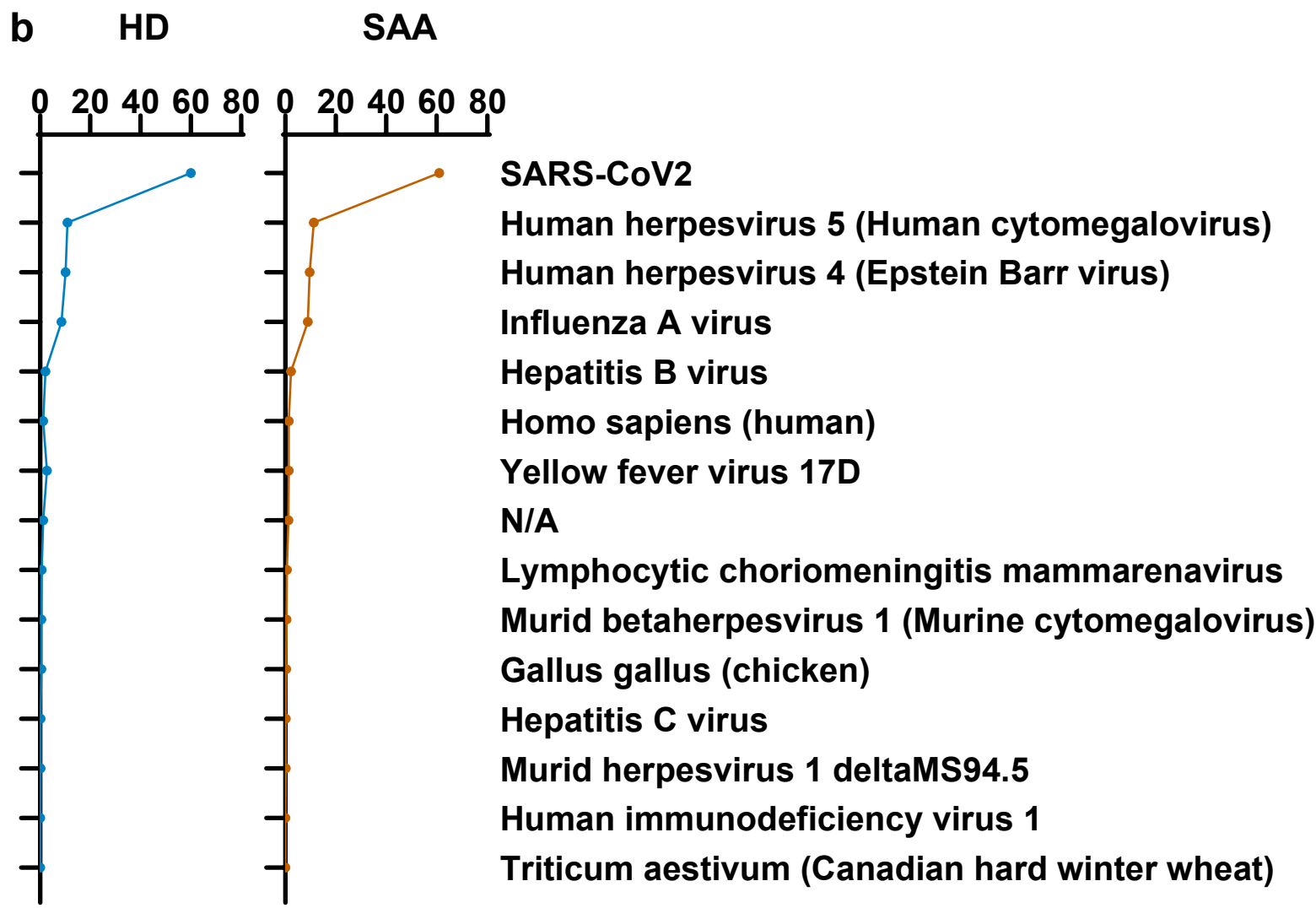


Supplementary Fig. 16 Lack of common TCR and BCR clonotypes in SAA patients. **a**, A heatmap plot showing the number of common TCR clones in pre- and posttreatment (3 and/or 6 months) samples of SAA patients ($n = 20$) and healthy controls ($n = 4$) among top 500 TCR clones. Both x-and y-axes represent samples of patients and healthy donors. Paired samples of the same SAA patients were adjacent. Numbers indicate counts of identical TCR clones shared among samples. A color scheme ranging from dark orange to dark blue represents the number of shared CDR sequences from high to low. In general, there was lack of common TCR usage in SAA, and few common TCR clones in healthy individuals or SAA patients. **b**, A heatmap plot showing the number of common BCR clones in pre- and posttreatment samples of SAA patients ($n = 20$) and healthy controls ($n = 4$) among top 500 BCR clones. Both x-and y-axes represent samples of patients and healthy donors. Paired samples of the same SAA patient were adjacent. Numbers indicate counts of identical BCR clones shared among samples. A color scheme ranging from dark orange to dark blue represents the number of shared CDR sequences from high to low. In general, there was lack of common BCR usage in SAA, and few common BCR clones in healthy individuals or SAA patients. CDR, complementarity determining region; HD, healthy donor; UPN, unique patient number; 3M, 3 months; 6M, 6 months.

a TCR



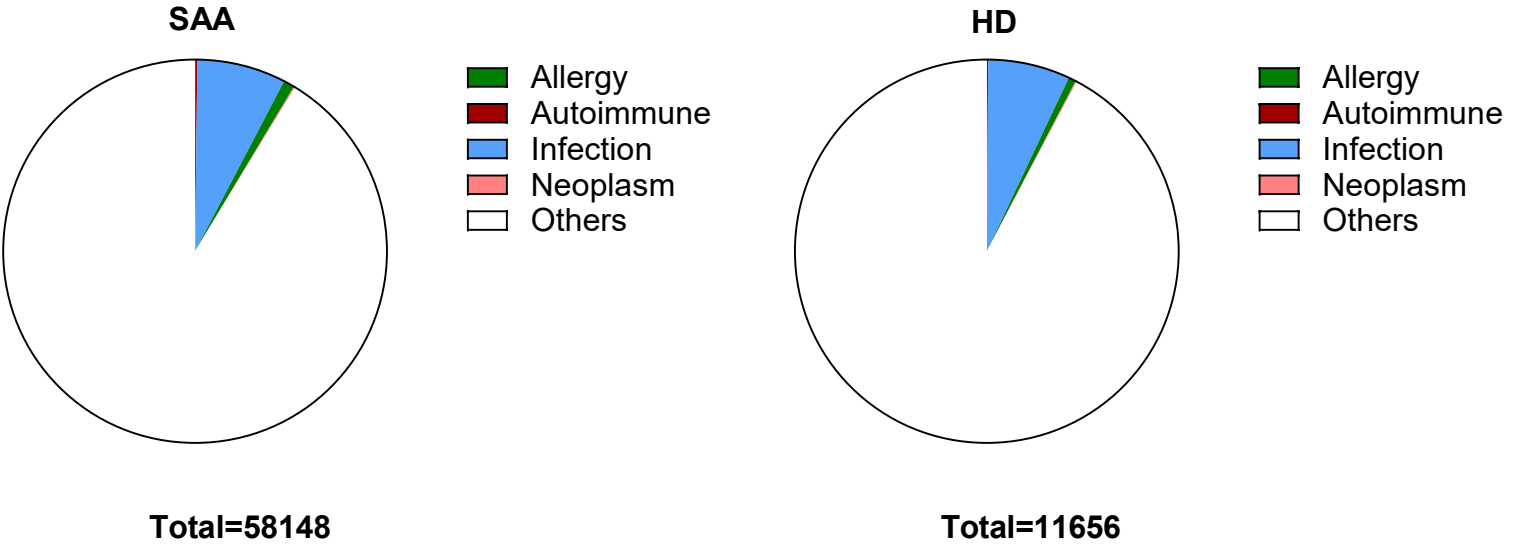
b



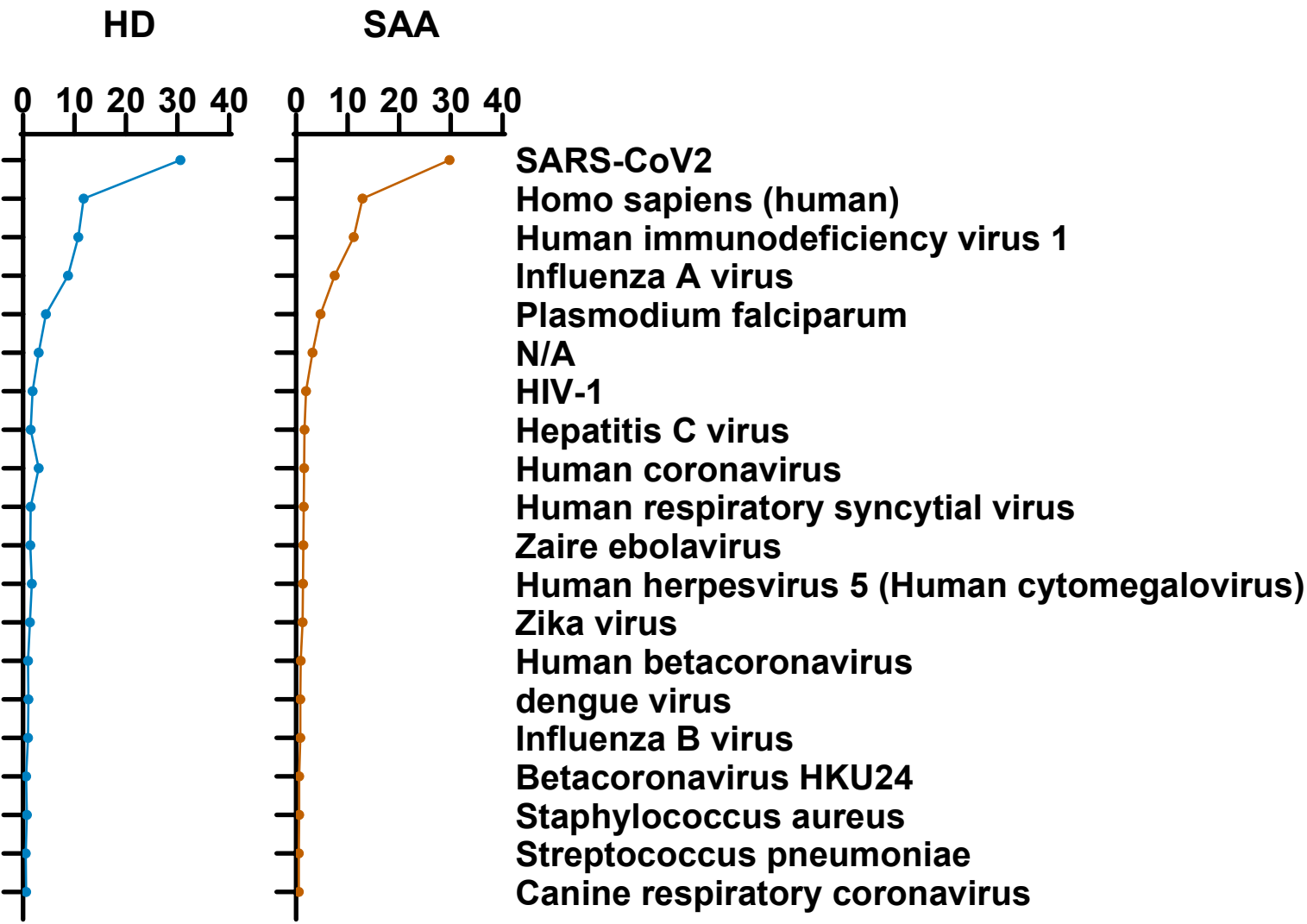
***N/A, not assigned to any virus in IEDB database.**

Supplementary Fig. 17 Interpretation of TCR sequences based on IEDB database. TCR sequences identified in SAA patients and healthy donors were compared to disease-specific or pathogen-specific TCR sequences in IEDB database. **a**, Pie charts showing TCR sequences were grouped to be related with allergy, autoimmune infectious, neoplasm diseases and others. **b**, Plot showing TCR sequences (frequency >0.1%) annotated to be specific to pathogens.

a BCR



b



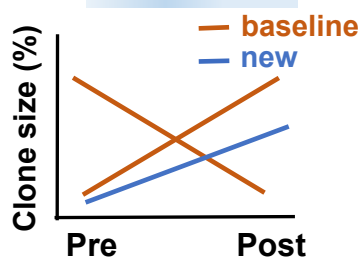
***N/A, not assigned to any virus in IEDB database.**

Supplementary Fig. 18 Interpretation of BCR sequences based on IEDB database. BCR sequences identified in SAA patients and healthy donors were compared to disease-specific or pathogen-specific BCR sequences in IEDB database. **a**, Pie charts showing BCR sequences were grouped to be related with allergy, autoimmune infectious, neoplasm diseases and others. **b**, Plot showing BCR sequences (frequency >0.5%) annotated to be specific to pathogens.

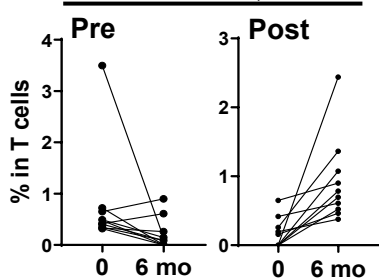


Supplementary Fig. 19 SAA-specific TCR specificity groups. Sequences and corresponding weblogs of 24 TCR specificity groups with different CDRs. In each panel, it indicates a sequence of this TCR specific group, the presence of this TCR specificity group in the number of SAA patients and healthy controls, a P value of difference of frequency, and the number of unique CDR3.

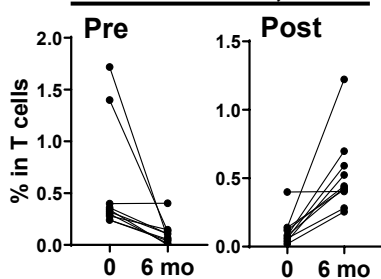
Pattern I



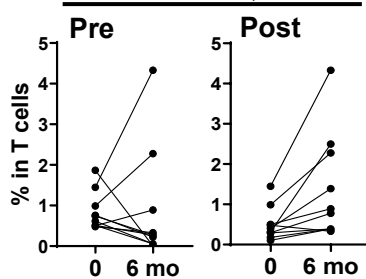
UPN1: 6 mo, SPR



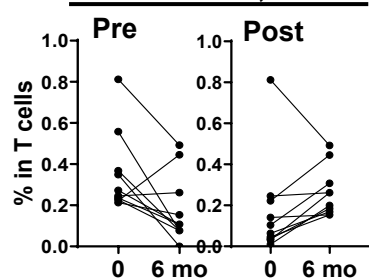
UPN3: 6 mo, NR



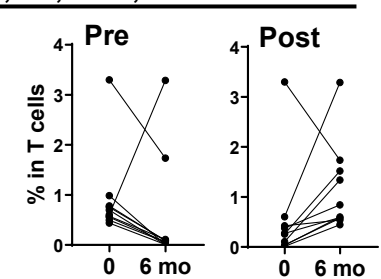
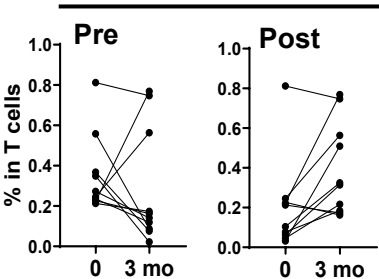
UPN7: 6 mo, SPR



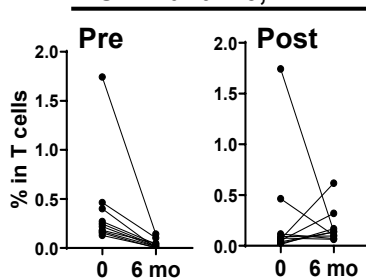
UPN9: 6 mo, WPR



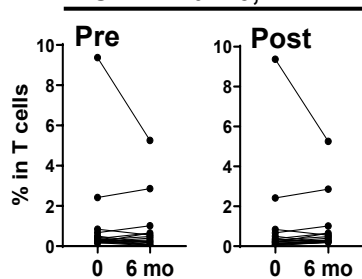
UPN8: 3 mo, PR; 6 mo, SPR



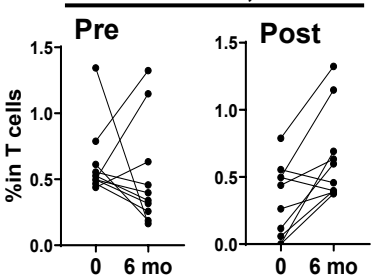
UPN10: 6 mo, WPR



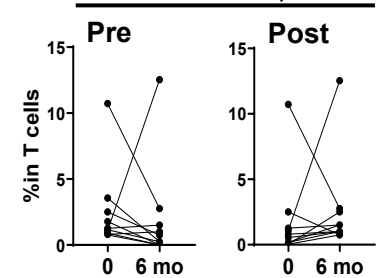
UPN11: 6 mo, WPR



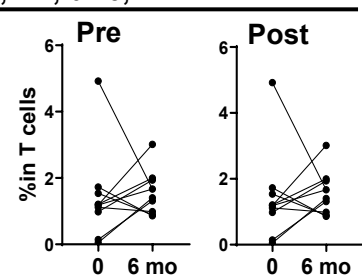
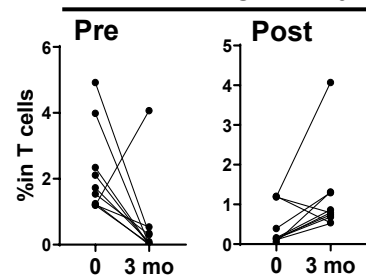
UPN1: 6mo, WPR



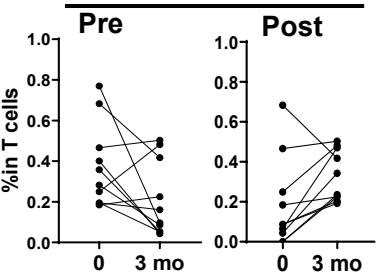
UPN13: 6mo, SPR



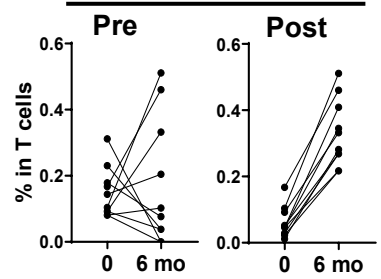
UPN14: 3mo, NR; 6mo, WPR



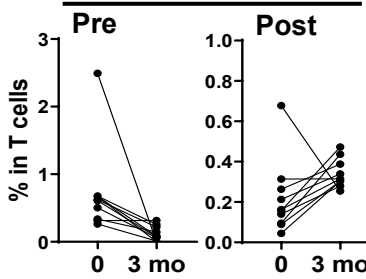
UPN15: 3 mo, evolve Off



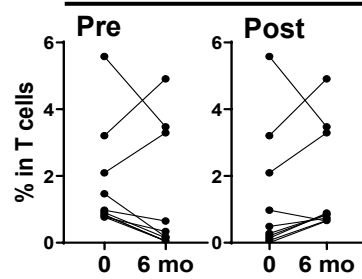
UPN16: 6 mo, CR



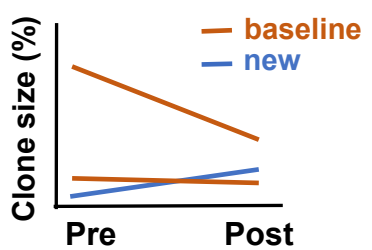
UPN19: 3 mo, CR



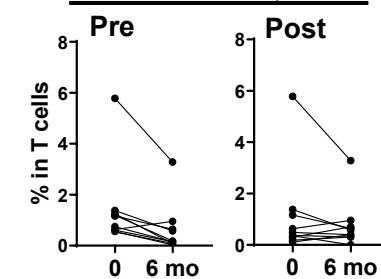
UPN20: 6 mo, CR



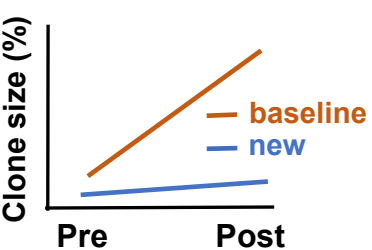
Pattern II



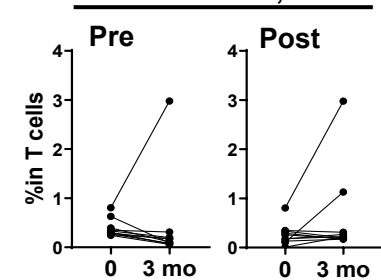
UPN2: 6 mo, CR



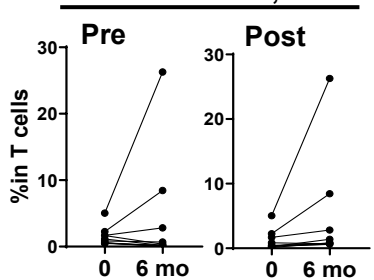
Pattern III



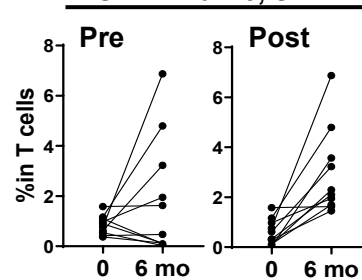
UPN6: 3 mo, NR



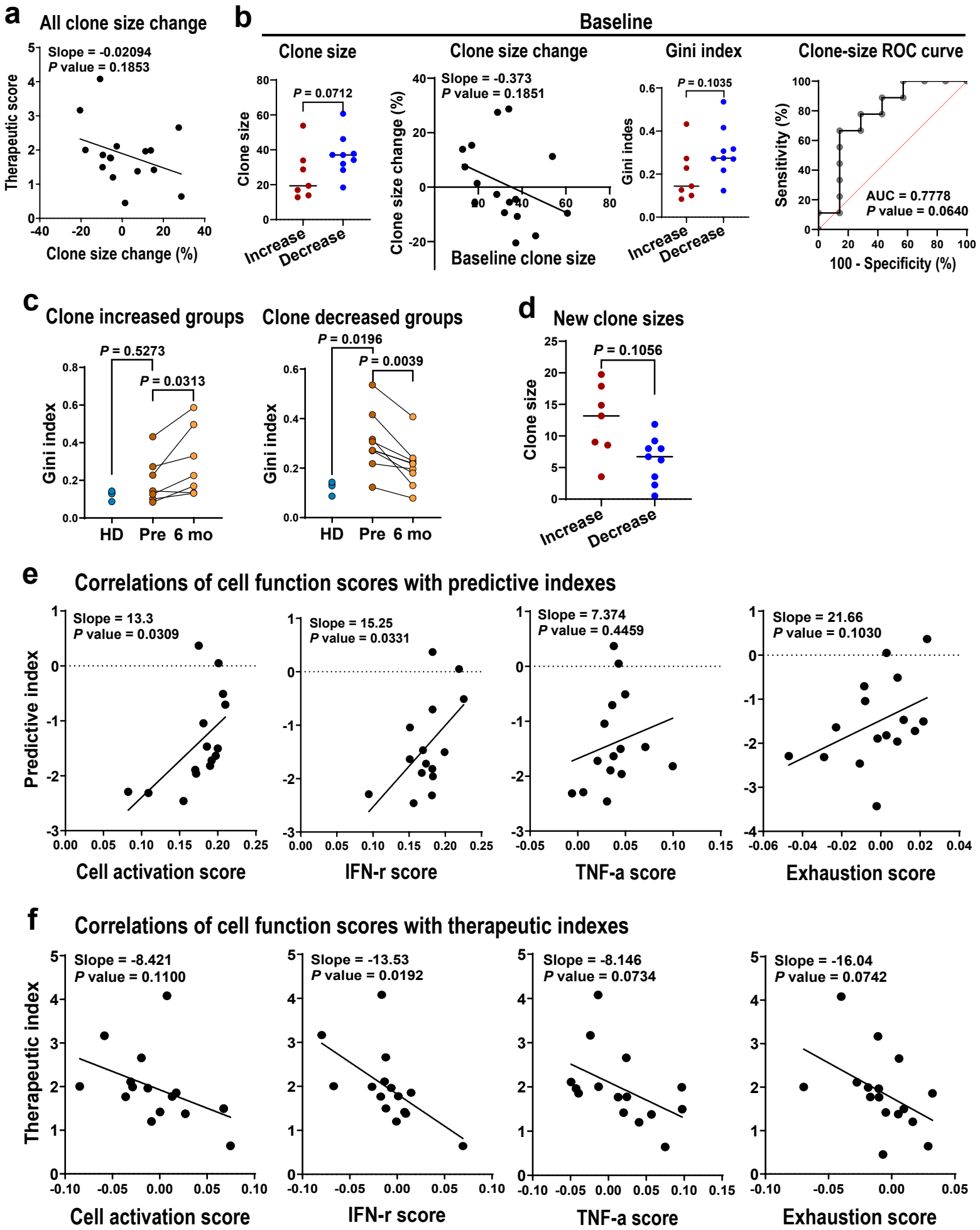
UPN18: 6 mo, CR



UPN17: 6 mo, SPR



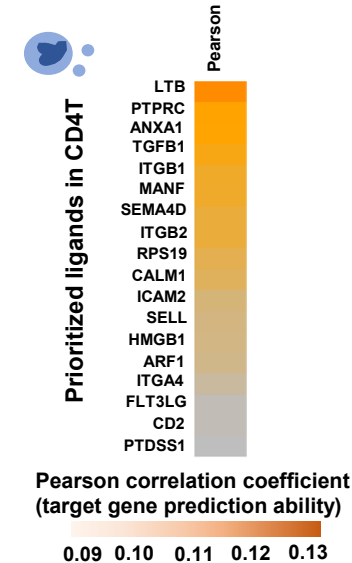
Supplementary Fig. 20 Three patterns of clonal kinetics of SAA patients pre- and posttreatment. For each patient, dynamics of their clones were grouped into three patterns. Pattern 1, many novel clones after treatment and variable dynamics of pre-existing clones (up or down, UPN1, 3, 7, 8, 9, 10, 11, 12, 15, 16, 17 and 19); pattern 2, decrease in pre-existing clones with few novel clones (UPN2); pattern 3, increase in preexisting clones with few novel clones (UPNs 6 and 18). Despite complexity, there was no correlation of clonal dynamics with response to treatment. Each panel includes a diagram illustrating a pattern of clonal kinetics. For each individual, a scatter plot on the left shows top ten clones pretreatment and a plot on the right shows top ten clones posttreatment. UPN, time point, and response at that time point are indicated on top.



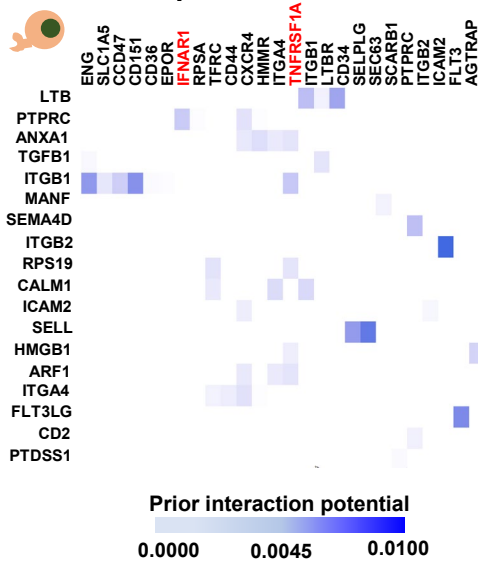
Supplementary Fig. 21 T cell clonal expansion dynamics associates with hematopoietic recovery. **a**, Correlation of changes of all clone sizes with therapeutic indexes was analyzed. *P* values and slope with the Pearson correlation test are shown. **b**, Clone sizes at baseline were compared in patients who had increased and decreased clone sizes after IST. *P* values with the two-sided unpaired and paired Mann-Whitney test are shown. Correlation of clone sizes at baseline with the changes of clone sizes after IST was analyzed. *P* values and slope with the Pearson correlation test are shown. Gini indexes at baseline were compared in patients who had increased and decreased clone sizes after IST. *P* values with the

two-sided unpaired Mann-Whitney test are shown. A ROC curve of clone sizes at baseline to predict clone size increase or decrease after treatment. AUC and *P* values are shown. **c**, Scatter plots showing Gini indexes of TCR clone sizes in healthy controls (*n* = 4), pre-, and posttreatment samples of patients who had increased (*n* = 7) and decrease (*n* = 9) clone sizes after IST. *P* values with the two-sided unpaired and paired Mann-Whitney test are shown. **d**, Novel clone sizes were compared in patients who had increased and decreased clone sizes after IST. *P* values with the two-sided unpaired Mann-Whitney test are shown. **e**, Correlations of cell function scores (including cell activation, IFN-g signaling, TNF-α signaling and exhaustion) with predictive indexes were analyzed. *P* values and slope with the Pearson correlation test are shown. **f**, Correlations of cell function scores (including cell activation, IFN-g signaling, TNF-α signaling and exhaustion) with therapeutic indexes were analyzed. *P* values and slope with the Pearson correlation test are shown.

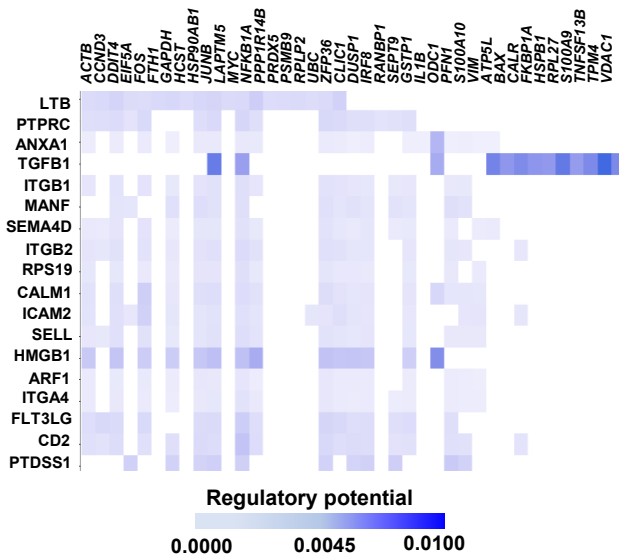
a Ligand activity



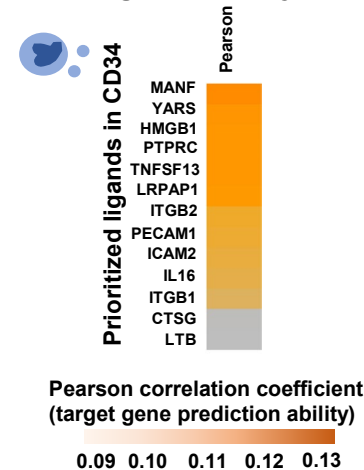
Receptors in CD34+ cells



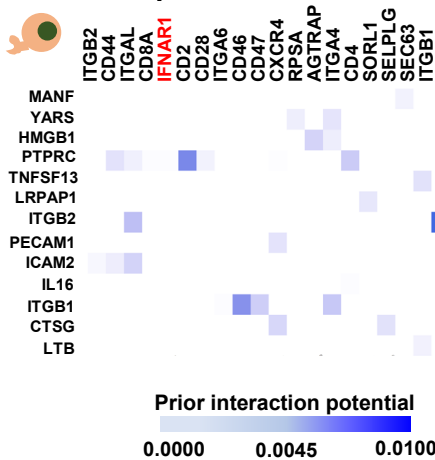
Predicted target genes in CD34+ cells



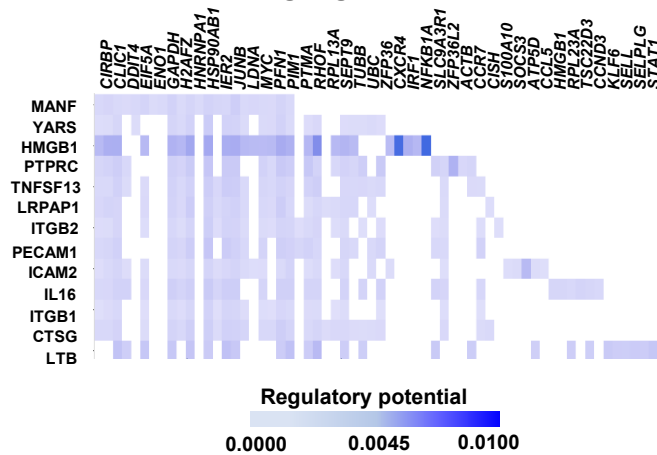
b Ligand activity



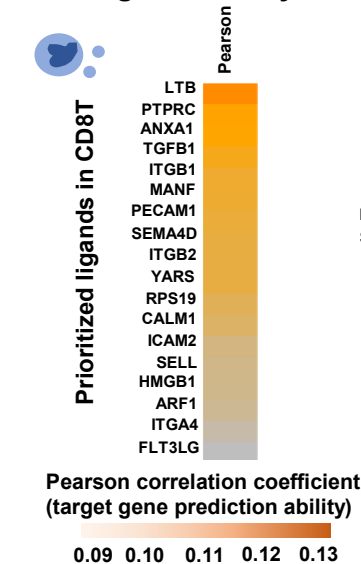
Receptors in CD4+ T cells



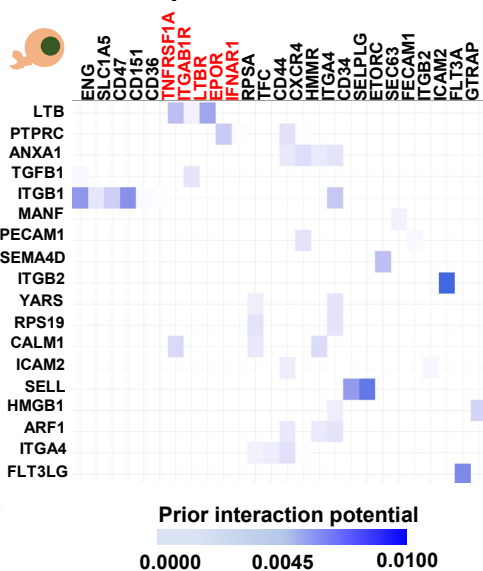
Predicted target genes in CD4+ T cells



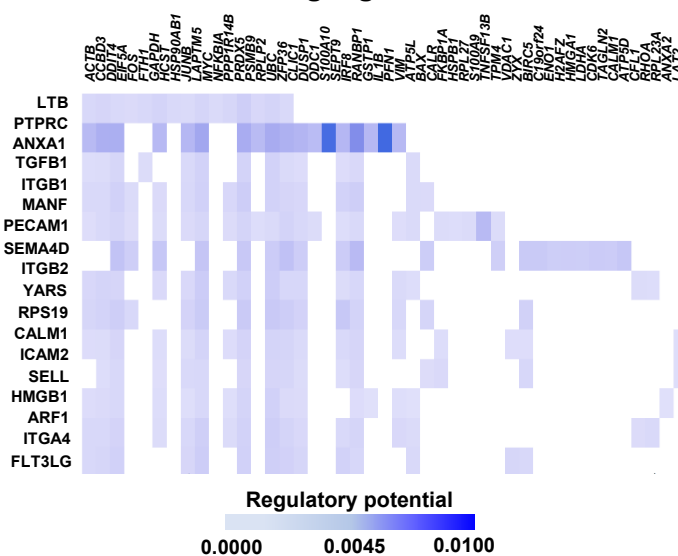
c Ligand activity



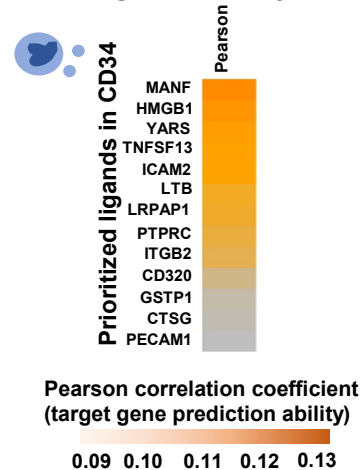
Receptors in CD34+ cells



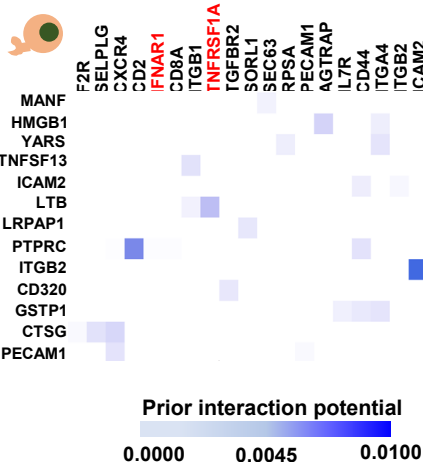
Predicted target genes in CD34+ cells



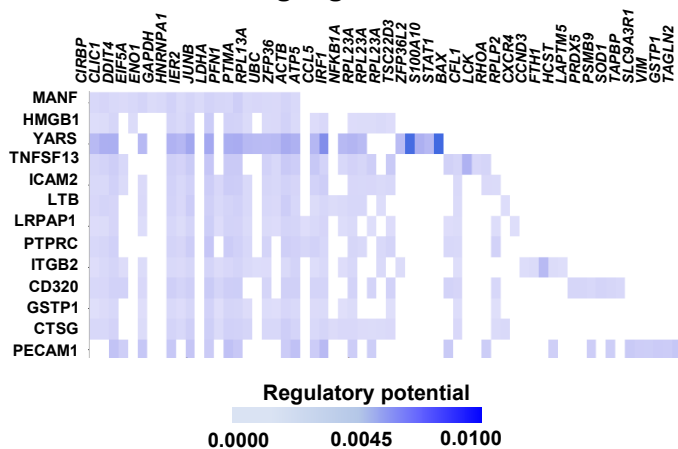
d Ligand activity



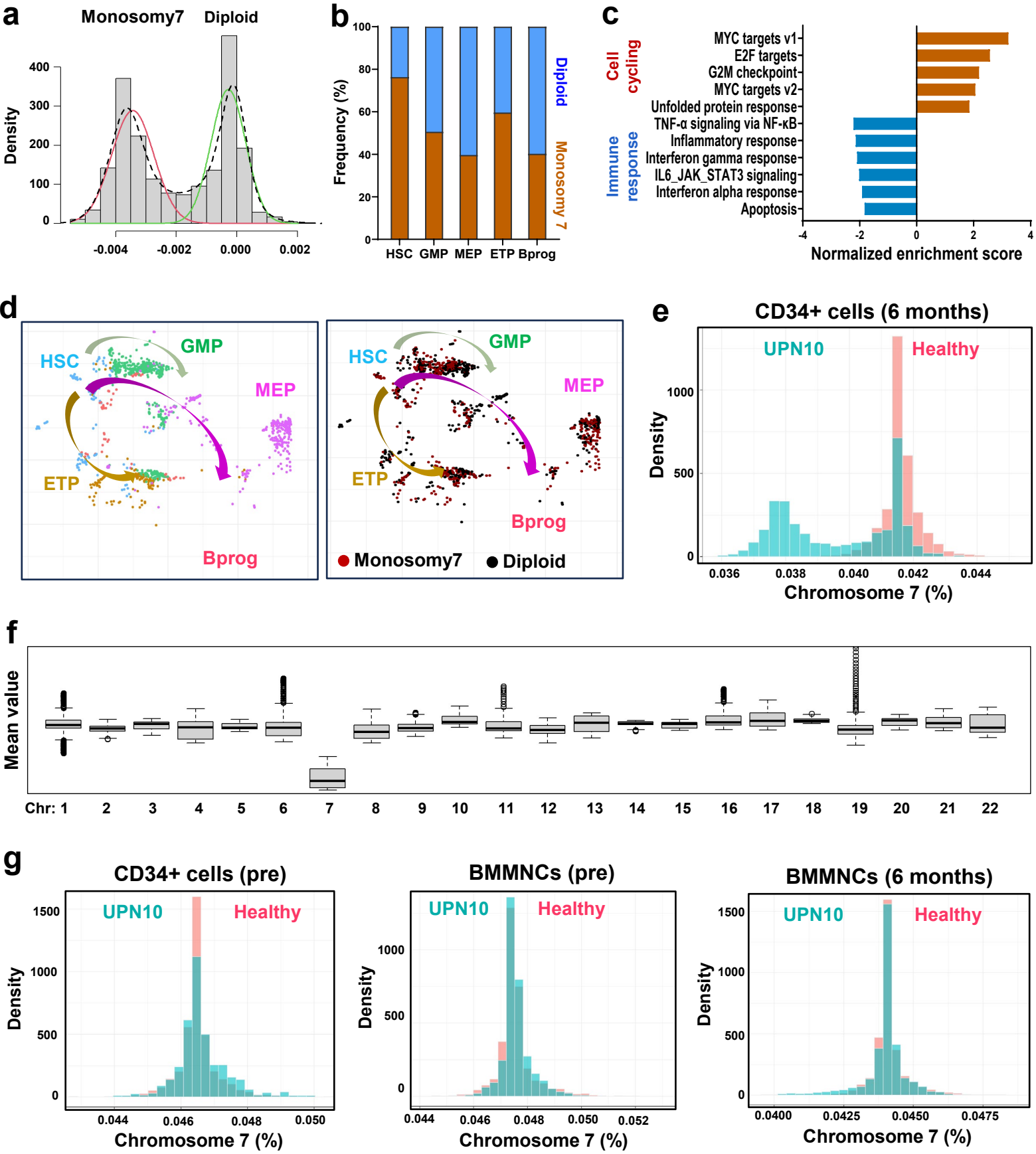
Receptors in CD8+ T cells



Predicted target genes in CD8+ T cells



Supplementary Fig. 22 Enhanced cell-cell interactions in SAA. Cell-cell interactions were defined by NicheNetr.⁵¹ **a**, Ligands expressed by CD4⁺ T cells were ranked by likelihood that ligands would affect gene expression changes in CD34⁺ HSPCs. Receptors expressed on CD34⁺ HSPCs were selected based on their known potential to interact with prioritized ligands. Finally, target genes were selected based on their differential expression in CD34⁺ HSPCs and their potential to be regulated by ligand-receptor interactions identified between CD4⁺ T cells and CD34⁺ HSPCs. **b**, Ligands expressed by CD34⁺ HSPCs were ranked by likelihood that ligands would affect gene expression changes in CD4⁺ T cells. Receptors expressed on CD4⁺ T were selected based on their known potential to interact with prioritized ligands. Finally, target genes were selected based on their differential expression in CD4⁺ T and their potential to be regulated by ligand-receptor interactions identified between CD34⁺ HSPCs and CD4⁺ T cells. **c**, Ligands expressed by CD8⁺ T cells were ranked by likelihood that ligands would affect gene expression changes in CD34⁺ HSPCs. Receptors expressed on CD34⁺ HSPCs were selected based on their known potential to interact with prioritized ligands. Finally, target genes were selected based on their differential expression in CD34⁺ HSPCs and their potential to be regulated by ligand-receptor interactions identified between CD8⁺ T cells and CD34⁺ HSPCs. Those downstream genes are involved in HSPC differentiation, cell cycling and apoptosis (ie. *OFS*, *MYC*, *MKP1*, *RANBP1*, *BAX*, *BIRC5*, *HMGA1*, and *CDK6*), immune response (*JUNB*, *NFKBIA*, *PSMB9*, *ZFP36*, *S100A10*, *IRF8*, *IL1B*, *FKBP1A*, and *VDAC1*), and differentiation (*S100A9* and *TNFSF13B*). **d**, Ligands expressed by CD34⁺ HSPCs were ranked by likelihood that ligands would affect gene expression changes in CD8⁺ T cells. Receptors expressed on CD8⁺ T were selected based on their known potential to interact with prioritized ligands. Finally, target genes were selected based on their differential expression in CD8⁺ T and their potential to be regulated by ligand-receptor interactions identified between CD34⁺ HSPCs and CD8⁺ T cells.



Supplementary Fig. 23 Detection of monosomy 7 cells by scRNA-seq. **a**, Histograms of read ratios on chromosome 7 in UPN10. Y-axis, density (frequency of cell number). X-axis, ratios of reads on chromosome 7 in individual cells relative to reads on all chromosomes of the same cell. **b**, Frequency (%) of monosomy 7 cells and diploid cells in each lineage in CD34⁺ HSPCs of UPN10 at 6 months after treatment. **c**, Bar plot showing top pathways enriched in upregulated genes in monosomy 7 cells as compared to diploid cells in CD34⁺ HSPCs of UPN10 at 6 months post-treatment. **d**, UMAPs of BMMNCs of UPN10 at 6 months after treatment, showing lineage differentiation (left), and distribution of monosomy 7 and diploid cells (right). **e**, Histograms of read ratios on chromosome 7 in CD34⁺ cells of UPN10 at 6 months after treatment and in those of healthy donors. Green, cells from UPN10; pink, cells from healthy donors. y-axis, frequency of cell number; x-axis, ratios of reads on chromosome 7 in individual cells relative

to reads on all chromosomes in the same cells. **f**, Average gene expression for individual chromosomes in single CD34⁺ cells of UPN10 at 6 months. Average gene expression levels of individual chromosomes from healthy donors were used for comparison. Chromosomal mapping read values were median centered. Top and bottom of the bars represent 25% and 75% quartiles, respectively. **g**, Histograms of read ratios on chromosome 7 in CD34⁺ cells pretreatment, BMMNCs pretreatment, and BMMNCs at 6 months after treatment of UPN10. Green, cells from UPN10; pink, cells from healthy donors. y-axis, frequency of cell number; x-axis, ratios of reads on chromosome 7 in individual cells relative to reads on all chromosomes in the same cells.