Supplementary Material

# Supplementary Tables

# Supplementary Table 1: Comparison of umbilical blood cord derived products and haploidentical donor for aHSCT

Adapted from “Who is the best alternative allotransplant donor”, Gale *et al* (1) and “Alternative donor transplant of benign primary hematologic disorders”, Tolar *et al* (2)

DLI: donor lymphocytes infusion, LFS: leukemia free survival, TNC: total nucleated cells

|  |  |  |
| --- | --- | --- |
|  | **Logistics** | **Clinical outcomes with current protocols** |
| **aHSCT** | **Advantages** | **Disadvantages** | **GF** | **GVHD** | **Infection** | **Relapse** | **LFS** |
| **UBC** | No risk for donorLow risk of infectious disease transmission of latent virusesEasy to stock and deliver | TNC / CD34+ 10x lower than adult donorsSingle use, no available DLIHigh costsAutologous product as backup | ++++ | + | ++++ | ++++ | ++ |
| **Haplo-identical****donor** | Always quickly availableLow costsHigh TNC / CD34+ dosesPossible DLI | Less experienceHigh costs if *ex-vivo* T-cell depletion | ++ | ++++Reduced if T-cell depletion | +++ | ++ | ++ |

**REFERENCES**

1. Gale R, Eapen M. Who is the best alternative allotransplant donor? *Bone Marrow Transplant* (2015) **50**:S40–S42. doi: 10.1038/bmt.2015.94

2. Tolar J, Sodani P, Symons H. Alternative donor transplant of benign primary hematologic disorders. *Bone Marrow Transplant* (2015) **50**:619–627. doi: 10.1038/bmt.2015.1