

SUPPLEMENTARY DATA

Table 1: (A) PML risk estimates (per 1000 patients [99% confidence interval]) by index threshold and natalizumab treatment duration in anti-JCV antibody-positive patients with no prior immunosuppressant use; ³² and (B) Determination of risk of PML development in anti-JCV antibody-positive patients with no prior immunosuppressant use during treatment with natalizumab (per 1000 patients) without anti-JCV antibody index stratification. ¹⁶

A

Anti-JCV antibody index result	Natalizumab treatment duration		
	1–24 months (99% CI)	25–48 months (99% CI)	49–72 months (99% CI)
≤0.9	0.06/1000 (0-0.19) or 1/16667	0.51/1000 (0-1.57) or 1/1961	0.58/1000 (0-1.75) or 1/1724
≤1.1	0.11/1000 (0-0.26) or 1/9091	0.76/1000 (0-1.76) or 1/1316	0.98/1000 (0-2.00) or 1/1020
≤1.3	0.14/1000 (0-0.29) or 1/7143	1.06/1000 (0.19-2.15) or 1/943	1.30/1000 (0.21-2.45) or 1/769
≤1.5	0.17/1000 (0.04-0.30) or 1/5882	1.13/1000 (0.26-2.36) or 1/885	1.37/1000 (0.20-2.73) or 1/730
>1.5	1.17/1000 (1.04-1.29) or 1/855	8.83/1000 (7.75-9.62) or 1/113	10.12/1000 (8.90-11.11) or 1/99

PML risk estimates for anti-JCV antibody index thresholds were calculated based on the PML risk stratification algorithm from March 2014 and predicted probabilities for the

population at or below that particular index (0.9–1.5) and for the population above an index of 1.5. For index thresholds below 0.7, patient numbers were insufficient to allow for calculation of risk estimates. Data beyond 6 years of treatment are limited.

B

Natalizumab exposure	1–24 months (99% CI)	25–48 months (99% CI)	49–72 months (99% CI)
PML risk	0.6/1000 (0.42-0.88) or 1/1667	5.2/1000 (4.28-6.19) or 1/192	5.4/1000 (4.30-7.14) or 1/185