

SUPPLEMENT

TABLE 1. Cases in the literature reporting the co-occurrence of hematological disorders with Marfan syndrome

Author	Age	Disease	Characteristics	Treatment	Complications
Mitton 20151.	16	T-cell prolymphocytic leukemia	Mature TCRab+ CD8+ T-cells expressing various markers, positive for TCRg gene rearrangement by PCR.	Intrathecal cytarabine, alemtuzumab, pentostatin, stem cell transplant with conditioning including irradiation and cyclophosphamide.	Pneumothorax, acalculous cholecystitis, C. difficile colitis, HHV-6 viremia, GvHD.
Bell 20162.	70	DLBCL	CD20+, CD79A+, CD30+, EBV+ (Eber), Ki67+.	Surgical aortic arch replacement, postoperative chemotherapy.	Embolitic stroke, myocardial infarction, ventricular tachycardia, hematoma, infection, dysphasia, weakness, EBV viremia.
Ghosh 20073.	66	DLBCL	CD20+, BCL2+, BCL6+, high proliferation rate with almost all cells Ki67+.	Chemotherapy with rituximab CHOP.	Aortic regurgitation, possible aortic aneurysm, anterior mediastinal mass (resolved).
Ates 20074.	26	Hodgkin Lymphoma, nodular sclerotic	Lymphoid nodules with mature lymphocytes, eosinophils, histiocytes, and lacunar-type Reed-Sternberg cells.	Emergency ascending aorta and root replacement, chemotherapy for Hodgkin Lymphoma.	Ascending aortic aneurysm with severe aortic regurgitation.
Mehrvart 20185.	22	AML M3	Blast-like cells in peripheral blood smear, favoring AML M3.	Remission induction chemotherapy.	Pancytopenia, severe aortic regurgitation, aneurysmal dilatation of ascending aorta, DIC leading to death.
Lee 1998 6.	18	AML M5a	CD13+, CD33+, CD56+, HLA-DR+.	Recommended but not undertaken.	Mitral valve prolapse, mitral regurgitation, elevated LDH and uric acid levels, coagulation profile abnormalities.
Lachanas 2006 7.	18	DLBCL	CD19+, CD20+, Ki-67+ in 80% of cells.	Chemotherapy with vincristine, doxorubicin, prednisolone, cyclophosphamide, and rituximab.	Fainting, retrosternal pain, anterior mediastinum tumor, did not achieve complete remission, died 11 months after diagnosis.
Kraemer 2003 8.	21	Common ALL	Positive for CD19, CD10, CD34, CD20, CD79a, and TdT, with additional chromosomes.	Induction therapy, supportive treatments, defibrotide and ursodiol for VOD, furosemide, human albumin, chemotherapy excluding vincristine, central nervous radiation.	Veno-occlusive disease, GvHD post-bone marrow transplantation.
Dermir 2008 9.	23	AML FAB-M5	CD11+, CD13+, CD14+, CD33+, HLA-DR+.	3+7 day regimen of daunorubicin and cytarabine, platelet transfusion, antibiotic therapy for febrile neutropenia.	Pancytopenia, febrile neutropenia, recurrence of AML, death.
Sharief 199110.	Infant	Acute leukemia with mixed lineage	Blasts negative for periodic acid-Schiff staining but showing polar positivity with acid phosphatase, CD13 and CD33 positivity in marrow relapse.	Induction with vincristine, asparaginase, and prednisolone, consolidation therapy with methotrexate, maintenance therapy.	Intrathoracic stomach, poor weight gain, vomiting, meningeal and marrow relapse, died 4 months after diagnosis.
Unal 2004 11.	23	AML	Diagnosis based on bone marrow examination showing predominance of nucleated blast cells.	Packet red cells, platelet transfusion, chemotherapy.	Left hemiparesis, flexion contractures, muscular atrophy, non-responsive Babinski reflex, cranial MRI showing atrophy and an arachnoid cyst, mild hepatosplenomegaly.
Miyajima 201112. *	7	ALL	—	—	—

*Article in Chinese language, only abstract is available in English

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