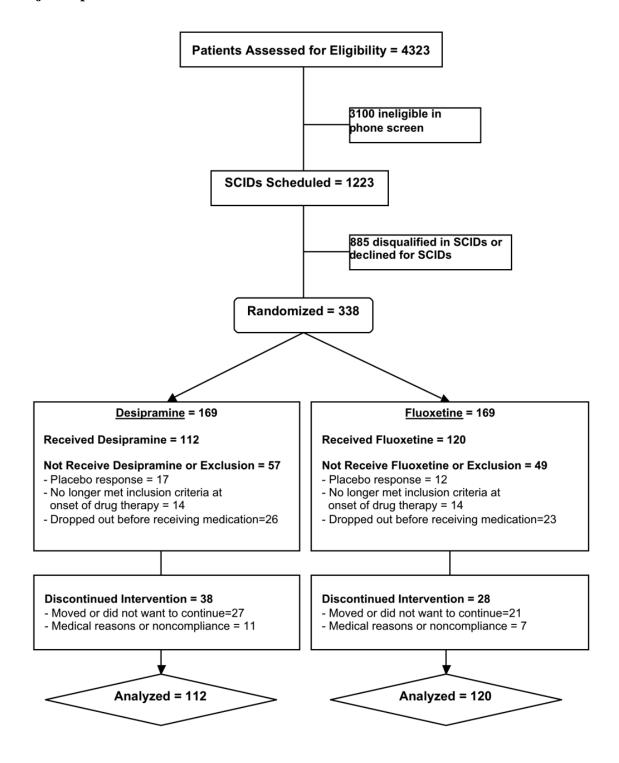
Data Supplement for Wong et al., Clinical Outcomes and Genome-Wide Association for a Brain Methylation Site in the Antidepressant Pharmacogenetics Study in Mexican Americans. Am J Psychiatry (doi: 10.1176/appi.ajp.2014.12091165)

## FIGURE S1. Flowchart of Study Participants, Random Assignment and Dropouts in a Clinical Trial of Desipramine and Fluoxetine Treatment for Mexican-Americans with Major Depressive Disorder



Characteristics <sup>a</sup>	Group				
	Desipran	Desipramine (N=112)		Fluoxetine (N=120)	
	Ν	%	Ν	%	
Gender					
Female	69	61.6	84	70.0	
Male	43	38.4	36	30.0	
Education (years)					
Unknown	5	4.5	7	5.8	
≤5	19	17.0	21	17.5	
6-8	31	27.7	41	34.2	
9-12	30	26.8	24	20.0	
1-2 college	12	10.7	15	12.5	
>2 college	15	13.4	12	10.0	
Generation					
Unknown	6	5.4	5	4.2	
1st generation	100	89.3	108	90.0	
2nd generation	5	4.5	7	5.8	
4th generation	1	0.9	0	0.0	
Language preference					
Unknown	2	1.8	2	1.7	
Spanish only	73	65.2	79	65.8	
Spanish better than English	29	25.9	20	16.7	
Spanish and English equally well	4	3.6	12	10.0	
English better than Spanish	4	3.6	7	5.8	
	Mean	SD	Mean	SD	
Acculturation score	30.9	9.4	32.5	11.2	
Age (years)	38.5	9.2	37.2	11.1	
HAM-D Score	22.1	3.8	22.3	3.6	
HAM-A Score	18.0	7.4	18.3	7.1	
BDI Score	23.9	10.3	24.8	9.6	
CESD Score	28.6	9.7	30.1	8.4	
GAS Score	56.1	5.7	55.9	5.7	

## TABLE S1. Baseline Demographic and Clinical Characteristics of Mexican-American Patients with Major Depression Who Received Desipramine or Fluoxetine

<sup>a</sup> No significant difference was found between treatment groups with all  $P \ge 0.156$ .

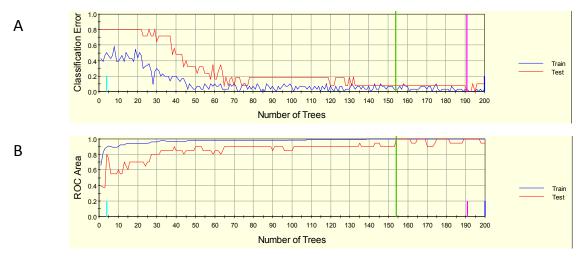
	Desipram	Desipramine (N=112)		ne (N=120)
Reaction	N	%	Ν	%
General	65	58.0	60	50.0
Chills	6	5.4	4	3.3
Weight gain	4	3.6	8	6.7
Weight loss	6	5.4	7	5.8
Perspiration <sup>a</sup>	24	21.4	14	11.7
Flushing	8	7.1	5	4.2
Nocturia	2	1.8	5	4.2
Drowsiness	20	17.9	25	20.8
Dizziness	41	36.6	32	26.7
Chest pain	13	11.6	8	6.7
Psychiatric	32	28.6	35	29.2
Disorientation	2	1.8	4	3.3
Delusions	3	2.7	0	0.0
Anxiety/irritability	15	13.4	21	17.5
Restlessness	10	8.9	9	7.5
Agitations	8	7.1	11	9.2
Sleep alterations	14	12.5	20	16.7
Bruxism	0	0.0	4	3.3
Neurologic	45	40.2	43	35.8
Numbness	5	4.5	2	1.7
Tingling/parasthesias <sup>a</sup>	15	13.4	6	5.0
Incoordination	1	0.9	2	1.7
Tremors	8	7.1	3	2.5
Seizures	1	0.9	0	0.0
Tinnitus	4	3.6	6	5.0
Headaches	28	25.0	35	29.2
Myalgia	10	8.9	9	7.5
Allergic	27	24.1	23	19.2
Skin rash	4	3.6	6	5.0
Urticaria	7	6.3	8	6.7
Itching (skin or eyes)	19	17.0	17	14.2
Photosensitization	1	0.9	2	1.7
Edema	1	0.9	0	0.0
Endocrine	8	7.1	8	6.7
Change in libido	5	4.5	6	5.0
Impotence	0	0.0	4	3.3
Change in sexual function	3	2.7	5	4.2
Cardiovascular <sup>a</sup>	32	28.6	17	14.2
Hypotension	4	3.6	1	0.8
Hypertension	6	5.4	4	3.3
Palpitations <sup>a</sup>	25	22.3	13	10.8
Heart block	1	0.9	0	0.0

## **TABLE S2.** Adverse Drug Reactions in Mexican American Patients With MajorDepression Treated With Desipramine or Fluoxetine

Anticholinogeric	74	66.1	62	51.7
Dry mouth	46	41.1	35	29.2
Blurred vision <sup>a</sup>	19	17.0	9	7.5
Disturbance of accommodation	1	0.9	1	0.8
Mydriasis	0	0.0	1	0.8
Pressure-like sensation in eyes	3	2.7	2	1.7
Constipation	30	26.8	20	16.7
Paralytic ileus	0	0.0	2	1.7
Urinary retention	1	0.9	1	0.8
Delayed micturation	1	0.9	1	0.8
Urinary frequency	9	8.0	7	5.8
Knot sensation in throat	9	8.0	6	5.0
Orthostatic hypotension (by pulse) <sup>a</sup>	21	18.8	11	9.2
Arrhythmias/bradycardia/tachycardia	9	8.0	6	5.0
Gastrointestinal	45	40.2	50	41.7
Change in appetite	15	13.4	18	15.0
Nausea	24	21.4	25	20.8
Vomiting	6	5.4	2	1.7
Epigastric distress/dyspepsia	19	17.0	16	13.3
Abdominal cramps/bloating	9	8.0	13	10.8
Diarrhea	3	2.7	5	4.2
Metallic taste in mouth	5	4.5	4	3.3
Sexual	8	7.1	12	10.0
Male (N=79)				
Lack of interest in sex	3	2.7	5	4.2
Impotence	5	4.5	7	5.8
Premature ejaculation	3	2.7	6	5.0
Difficulty achieving orgasm	0	0.0	5	4.2
Female (N=153)	5	4.5	9	7.5
Lack of interest in sex	4	3.6	6	5.0
Inability to achieve orgasm	0	0.0	4	3.3
Difficulty achieving orgasm	1	0.9	5	4.2
Any side effects	90	80.4	92	76.7

<sup>a</sup> Significant difference between treatment groups, p<0.05. <sup>b</sup> Significant difference between treatment groups, p<0.01.

**FIGURE S2. A.** Classification errors curves obtained by the TreeNet analyses for the training and the test samples. After 150 trees, classification error rates fell down than 10% and remain very stables in both samples. **B.** ROC curves obtained for 200 trees showing that ROC integrals for the training and the test samples are higher than 0.90 after the analysis of 150 trees, and they remain very stable, replicating what was found for the classification error rates and from the CART analyses. **C.** Importance of variables for prediction as defined by the random forest method. These variables replicate what was found by the Exome-Wide Association and CART analyses that found the variant exm-rs1321744 as the one with the highest importance in predicting remission of major depression symptoms.



С

Variable	Score	
EXM_RS1321744\$	100.00	
EXM_RS16867321\$	38.09	
EXM_RS8028182\$	33.65	
EXM2264428\$	31.54	
EXM433050\$	31.40	
EXM2258456\$	29.61	
EXM1127512\$	28.88	
EXM1125245\$	28.56	
EXM2266789\$	26.60	

## TABLE S3. Differences Between Completers Who Were Genotyped and Who Were Not Genotyped

Variable	Completer w/genotype (n=65)	Completer w/o genotype (n=101)	Р
Gender (%)			
Male/Female	31/69	36/64	0.5168
Medication (%)			
Fluoxetine/Desipramine	54/46	56/44	0.7432
Age (mean <u>+</u> SD)	40.8 <u>+</u> 10.9	37.4 <u>+</u> 9.6	0.0381 <sup>a</sup>
Week 8 HAM-D score (mean <u>+</u> SD)	8.2 <u>+</u> 5.3	8.5 <u>+</u> 5.5	0.6920

<sup>a</sup> Significant difference between completer groups (*P*<0.05 by Student-t test).