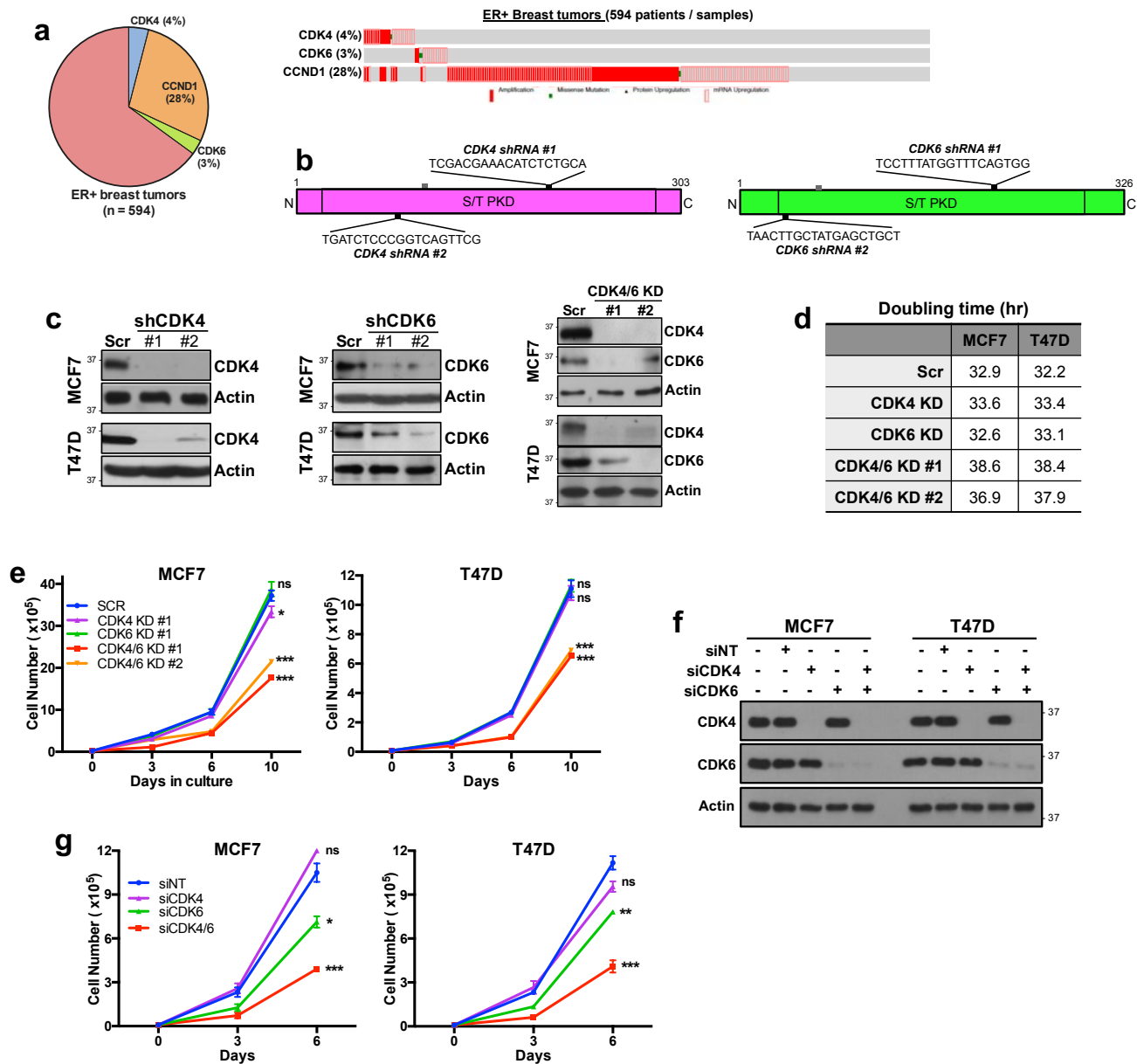


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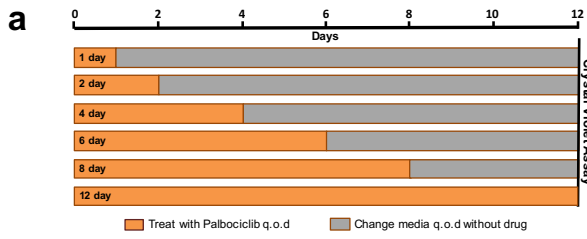
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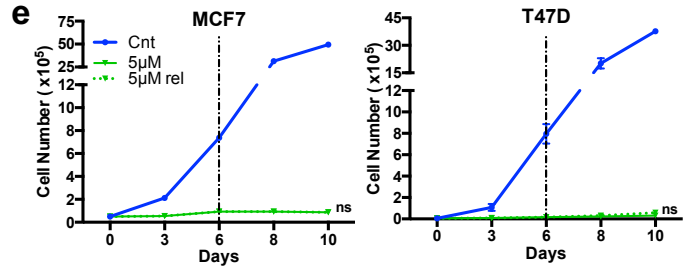
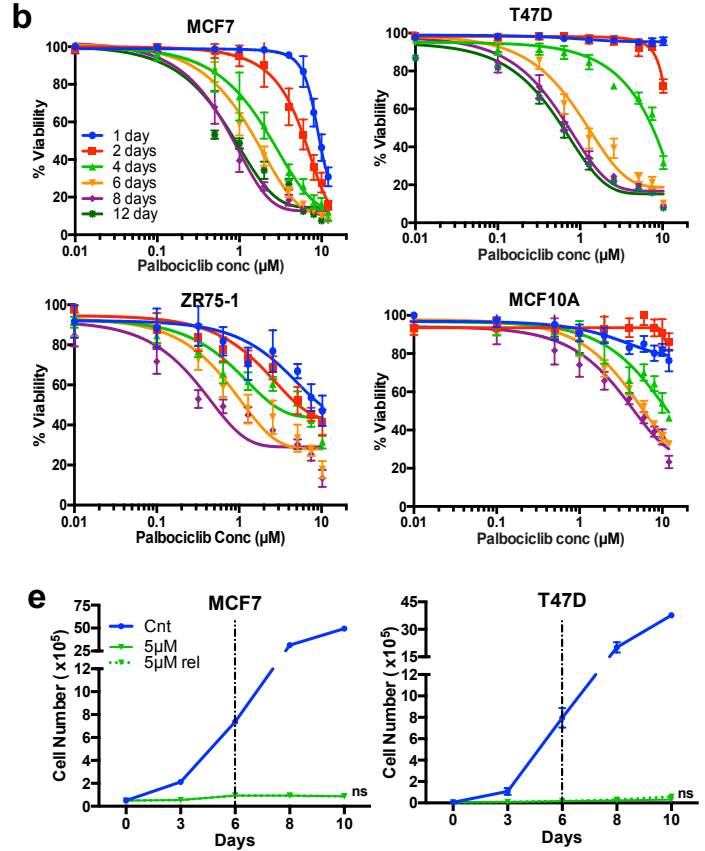
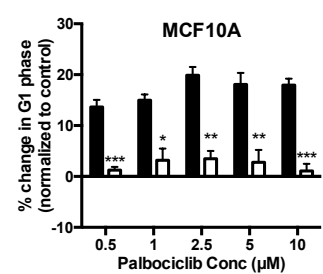
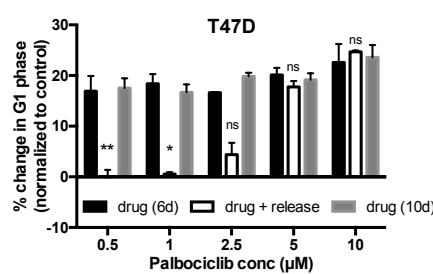
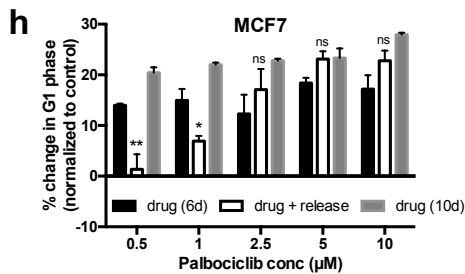
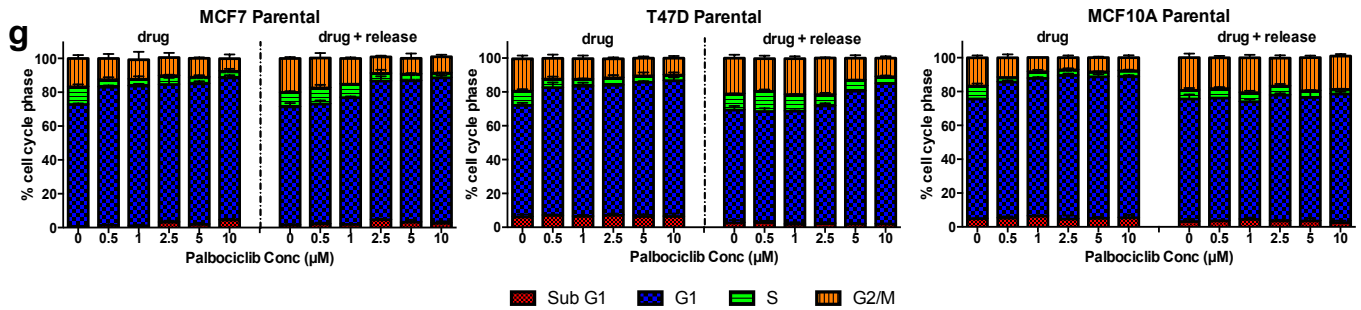
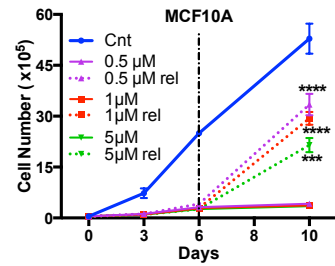
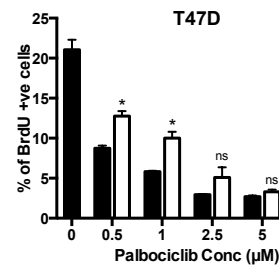
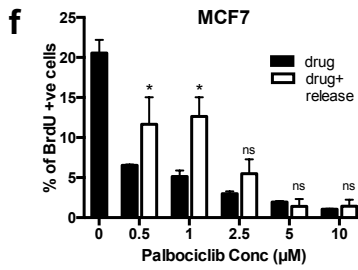
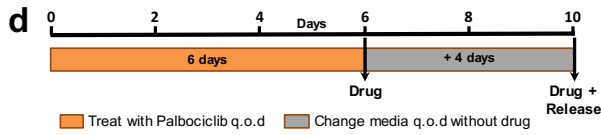
**Supplementary Figure 1. CDK4/6 downregulation has a growth inhibitory effect on ER+ve breast cancer cells:**

**a)** Alterations in the CDK4/CDK6/cyclin D pathway among 594 patients with ER+ breast cancer from the TCGA database. **b)** Schematic depicting the location of the shRNA sequences (#1 and 2) on the *CDK4* and *CDK6* genes. **c)** Western blot showing levels of CDK4 and CDK6 proteins in MCF7 and T47D cells after transfection with shRNA for Scrambled (SCR) or CDK4 and CDK6, separately or combined. **d,e)** Impact of knocking down (KD) CDK4 and/or CDK6 on the doubling time (d) and proliferation (e) of MCF7 and T47D cells when compared to control Scrambled shRNA-transfected cells. **f)** Western blot showing levels of CDK4 and CDK6 proteins in MCF7 and T47D cells after transfection with ON-TARGETplus SMARTpool siRNA non-targeting (siNT) or CDK4 and CDK6, separately or combined **g)** Impact of siRNA knocking down of CDK4 and/or CDK6 on the proliferation (g) and doubling time (h) of MCF7 and T47D cells compared to NT siRNA transfected cells. All data represent mean $\pm$ SD from three independent experiments; p-values were calculated in comparison to cells treated with SCR or siNT. ns: p>0.05; \*p<0.05; \*\*p<0.01; \*\*\*p<0.001; \*\*\*\*p<0.0001.



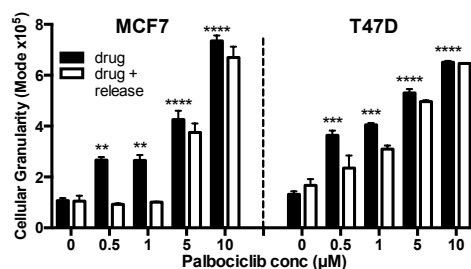
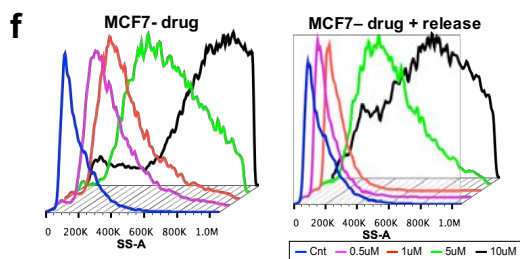
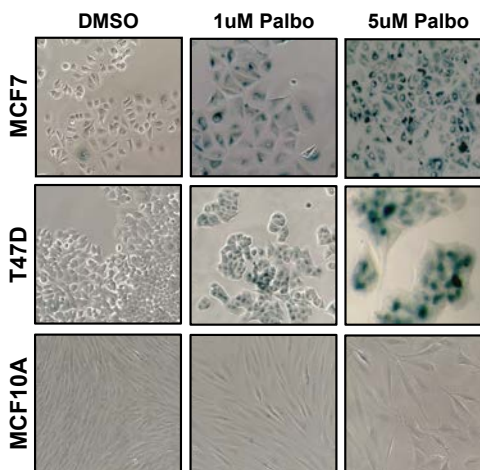
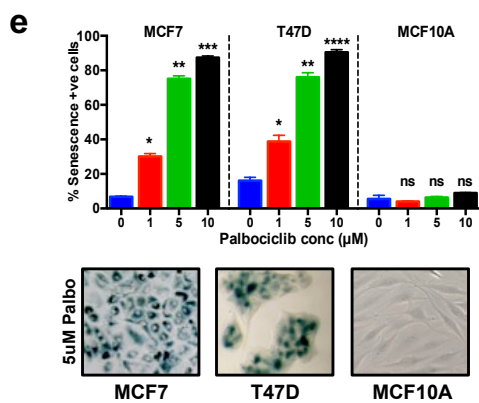
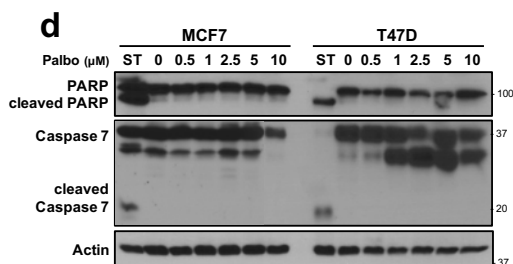
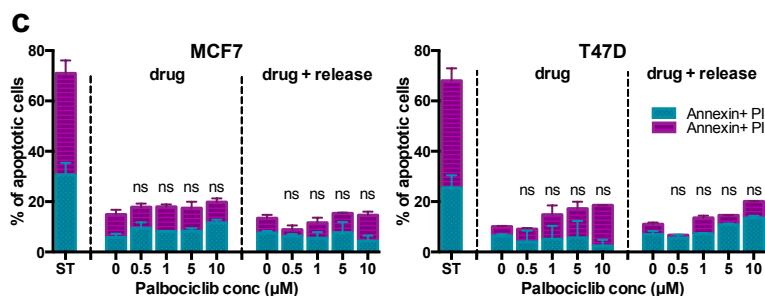
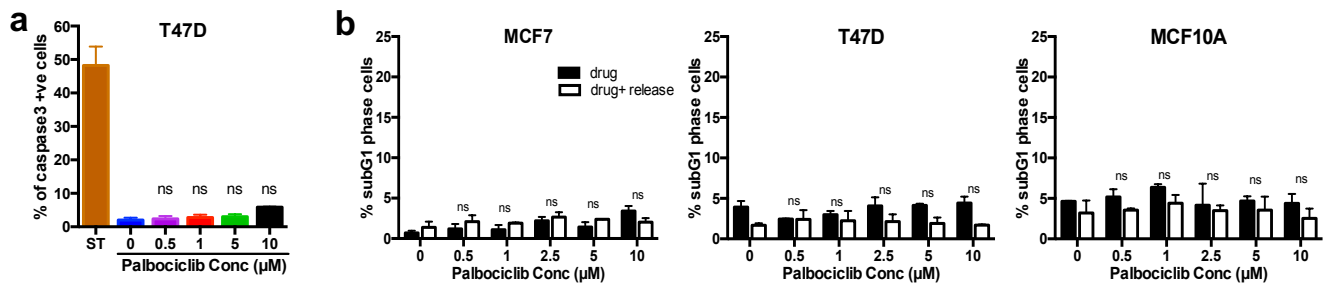
**c**

| IC50 (μM) | ZR75-1 | MCF7 | T47D  | MCF 10A |
|-----------|--------|------|-------|---------|
| 1 day     | 5.26   | 9.81 | >20   | >20     |
| 2 day     | 4.12   | 6.81 | 12.99 | >20     |
| 4 day     | 2.64   | 3.49 | 7.72  | 10.65   |
| 6 day     | 1.54   | 1.83 | 1.90  | 5.82    |
| 8 day     | 0.73   | 0.87 | 0.93  | 5.28    |

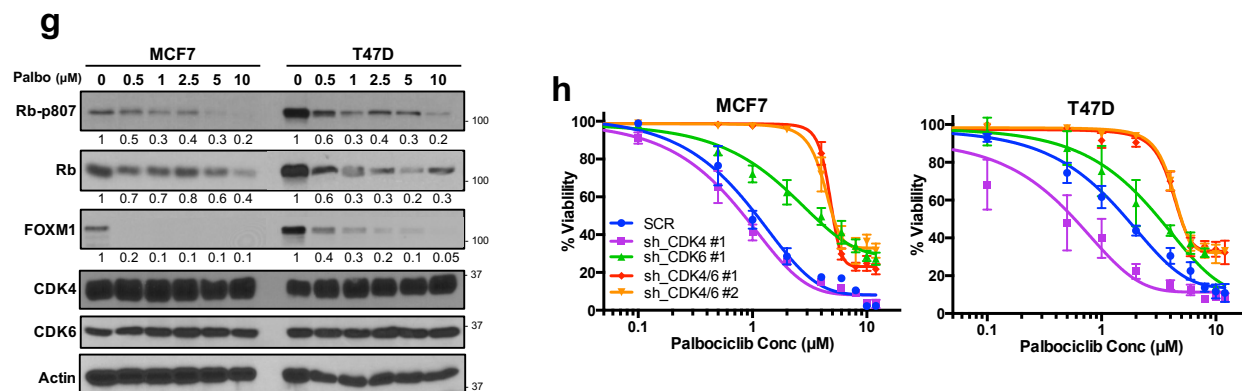


**Supplementary Figure 2. Palbociclib induces dose-dependent growth inhibition and G1 arrest in ER+ve breast cancer cells:** **a)** Schematic depicting the palbociclib treatment schedule for the dose-response experiments shown in Figs 1a and Supplementary Fig. 2b. Drug-containing medium or drug-free medium was replaced every other day (q.o.d). **b)** Dose-response curves for MCF7, T47D, MCF10A, and ZR75-1 cells treated with DMSO or increasing concentrations (conc) of CDK4/6 inhibitor palbociclib (0.01 to 12  $\mu$ M) for 1, 2, 4, 6, 8 or 12 days. **c)** Half-maximal inhibitory concentration ( $IC_{50}$ ) values of MCF7, T47D, ZR75-1, and MCF10A cells as calculated from dose-response experiments in Figs 1a and Supplementary Fig. 2b. **d)** Schematic depicting the palbociclib treatment schedule where cells were treated for 6 days and cultured in drug-free medium for 4 days to examine reversibility. Medium was replaced every other day (q.o.d). **e-h)** MCF7, T47D, and MCF10A cells were treated with DMSO (Cnt) or varying concentrations of palbociclib for 6 days and some cells were allowed to recover for 4 days after treatment (release) to examine reversibility. Cells were then subjected to e) cell counting to assess growth inhibition of MCF10A; f) flow cytometry analysis for BrdU-positive cells, a measure of S phase progression; g) cell cycle analysis via flow cytometry; and h) cell cycle analysis to determine percentage change in the G1 phase. All data represent mean $\pm$ SD from three independent experiments; p-values were calculated by comparing values at the end of 6 day drug treatment with those at the end of drug + release. ns:  $p>0.05$ ; \* $p<0.05$ ; \*\* $p<0.01$ ; \*\*\* $p<0.001$ ; \*\*\*\* $p<0.0001$ .

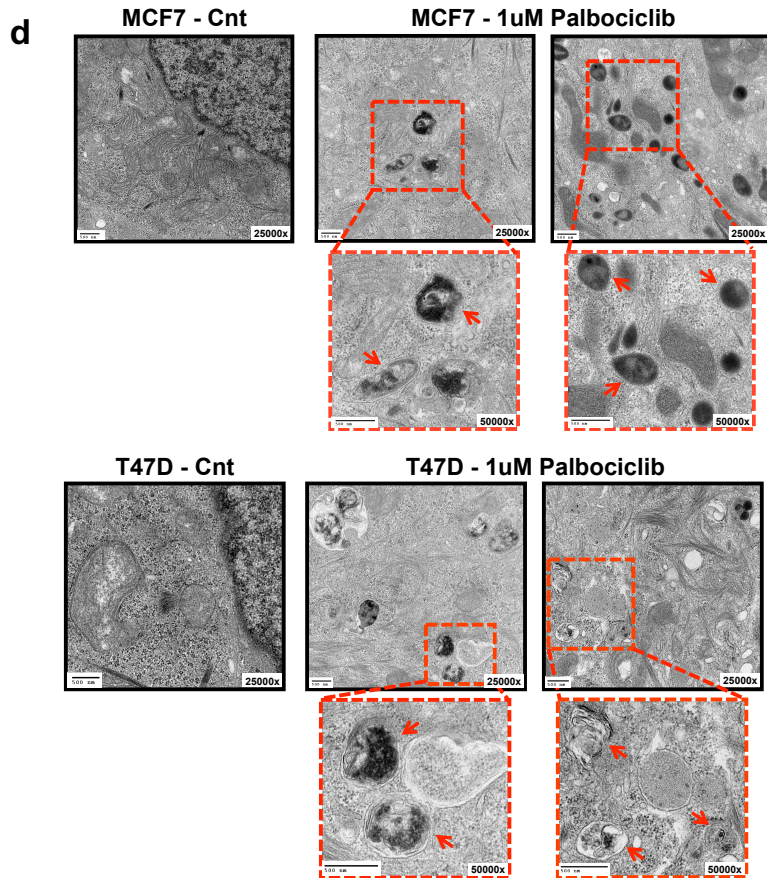
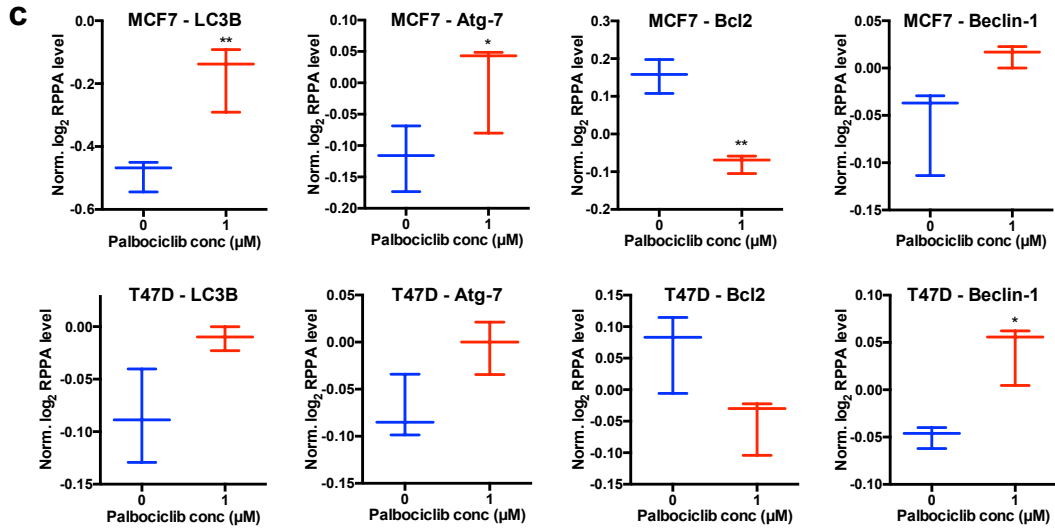
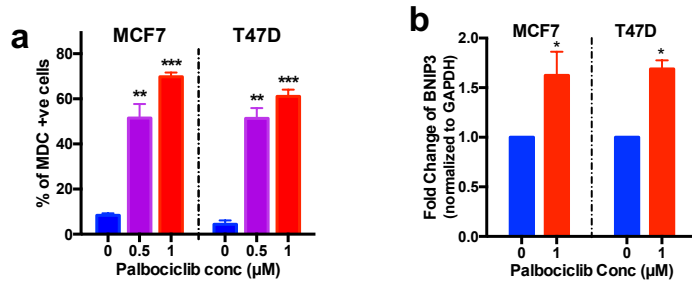




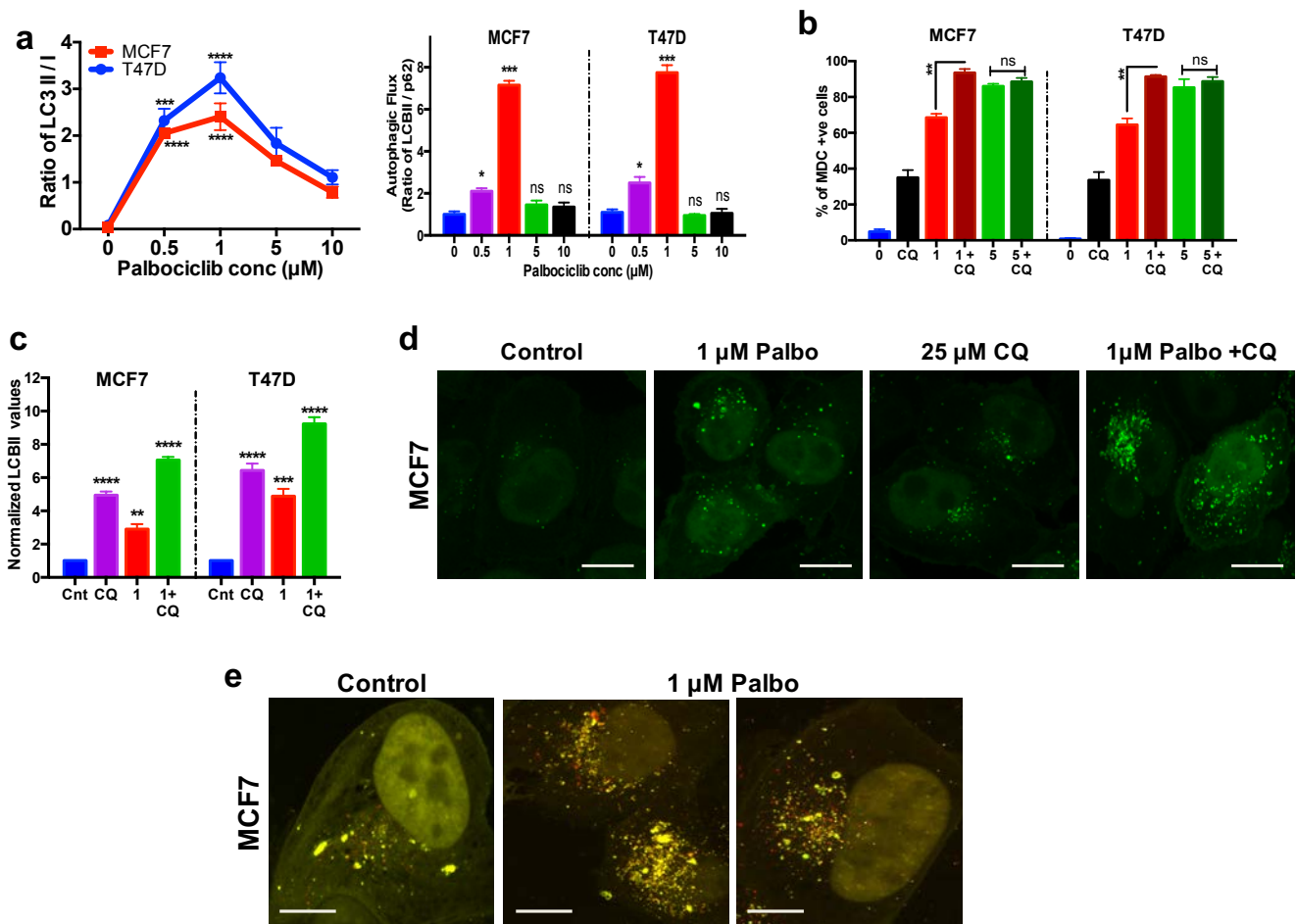
## Supplementary Figure 3 (contd.)



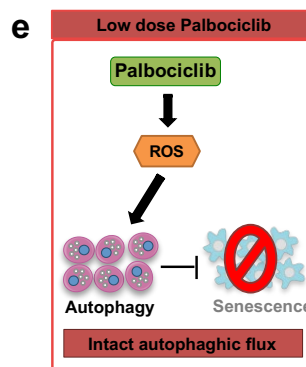
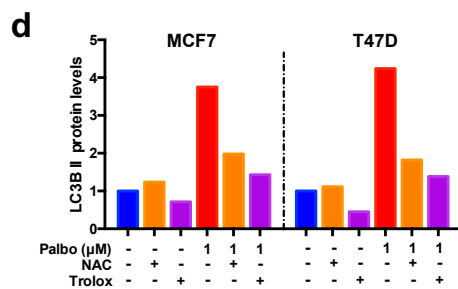
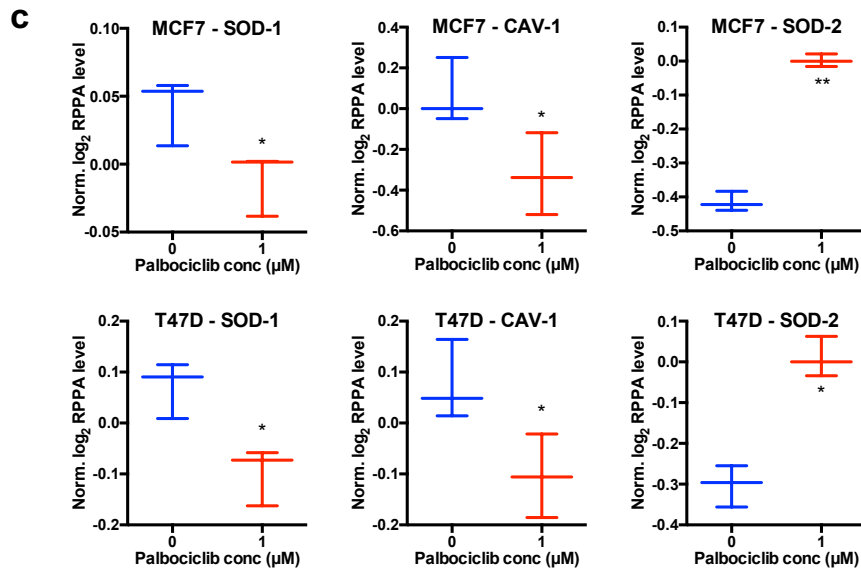
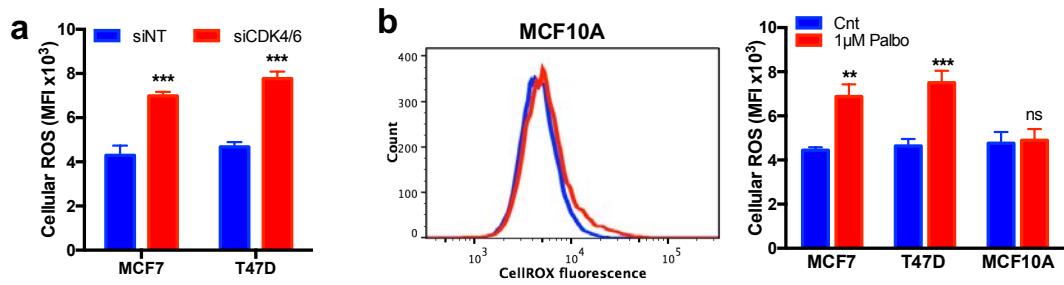
**Supplementary Figure 3. Palbociclib did not trigger apoptosis but induced senescence in a dose-dependent manner:** **a)** Percentage of caspase-3 positive cells determined by flow cytometry in T47D cells treated with DMSO, 3 μM staurosporine (positive control), or varying concentrations of palbociclib for 6 days. **b)** cell cycle analysis to determine percentage of cell in sub G1 phase, as a measure of apoptosis. **c)** Flow cytometry measurement of apoptotic cells (early apoptosis: Annexin V+/PI-; late apoptosis: Annexin V+/PI+) in cells treated as in (a). **d)** Western blot analysis of apoptotic proteins in MCF7 and T47D treated with DMSO or palbociclib (Palbo) for 6 days: PARP, cleaved PARP, caspase-7, and cleaved caspase-7, with actin as loading control. **e)** Senescence-associated SA-β gal staining with representative images in MCF7 and T47D cells upon treatment with DMSO or palbociclib for 6 days. **f)** Side scatter analysis and quantification to assess granularity of MCF7 and T47D cells treated as in (e). **g)** Western blot analysis of MCF7 and T47D cells treated with DMSO or palbociclib for levels of cell cycle proteins: Rb, p-Rb (S807), FOXM1, CDK4, and CDK6. Values show densitometry of the western blots as normalized to the loading control actin. **h)** Proliferation of MCF7 and T47D cells upon knockdown of CDK4 and/or CDK6 and treatment with DMSO or increasing concentrations of palbociclib (0.01 to 12 μM) for 6 days. All data represent mean ± SD from three independent experiments; p-values were calculated in comparison to cells treated with DMSO (Control) unless indicated. ns: p>0.05; \*p<0.05; \*\*p<0.01; \*\*\*p<0.001; \*\*\*\*p<0.0001.



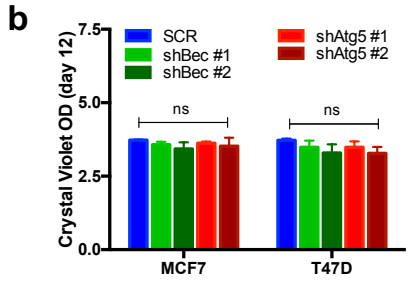
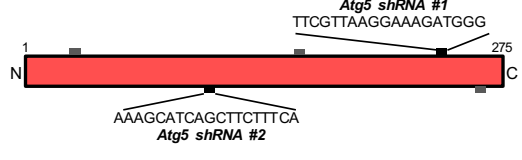
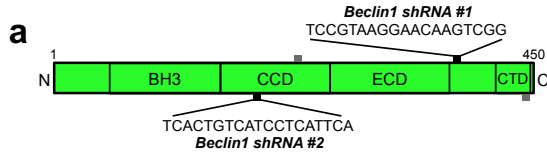
**Supplementary Figure 4. CDK4/6 inhibition induces autophagy at low concentrations in ER positive breast cancer:** **a)** Measurement of monodansylcadavarine (MDC)-positive acidic vesicles, including autophagosomes, by flow cytometry in MCF7 and T47D cells treated with varying concentrations of palbociclib for 6 days (b). **b)** mRNA level of BNIP3 (normalized to GAPDH) in MCF7 and T47D cells treated with 1  $\mu$ M palbociclib. **c)** Expression (normalized  $\log_2$  level) of LC3B, Atg-7, BCL2 and Beclin-1 determined by RPPA analysis of MCF7 and T47D cell lines treated with palbociclib for 6 days. **d)** Representative TEM microphotographs of MCF7 and T47D cells treated with DMSO (Cnt) or palbociclib (Palbo; 1  $\mu$ M or 5  $\mu$ M) for 6 days. Red arrows indicate double-membraned autophagosomes. Scale bars equal 500 nm. All data represent mean $\pm$ SD from three independent experiments; p-values were calculated in comparison to cells treated with DMSO (Control) or siNT. ns:  $p > 0.05$ ; \* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$ ; \*\*\*\* $p < 0.0001$ .



**Supplementary Figure 5. Palbociclib induces autophagy with an intact flux at low concentrations in ER+ breast cancer:** **a)** Autophagic flux, calculated as ratio of LC3B-II to LC3B-I and LC3B-II to p62 from densitometry values (normalized to corresponding levels of actin) of western blots from Fig. 1h. **b)** Measurement and quantification (Mean Fluorescence Intensity) of MDC-positive cells by flow cytometry in MCF7 and T47D cells treated with a combination of lysosomal blocker chloroquine (CQ; 10 μM) and DMSO or palbociclib (1 or 5 μM) for 6 days. **c)** Densitometry values for western blots in Fig. 1j to obtain LC3B-II protein levels (normalized to corresponding levels of actin). **d)** Representative confocal images of GFP-LC3 expressing MCF7 cells treated with 25 μM CQ (for 1 hour), 1 μM palbociclib or combination of palbociclib and CQ for 48 hours. Scale bars are 50 μm. **e)** Representative confocal images of RFP-GFP-LC3 expressing MCF7 cells treated with 1 μM palbociclib for 48 hours. Scale bars are 50 μm. All data represent mean±SD from three independent experiments; p-values were calculated in comparison to cells treated with DMSO (Control) unless indicated. ns: p>0.05; \*p<0.05; \*\*p<0.01; \*\*\*p<0.001; \*\*\*\*p<0.0001.

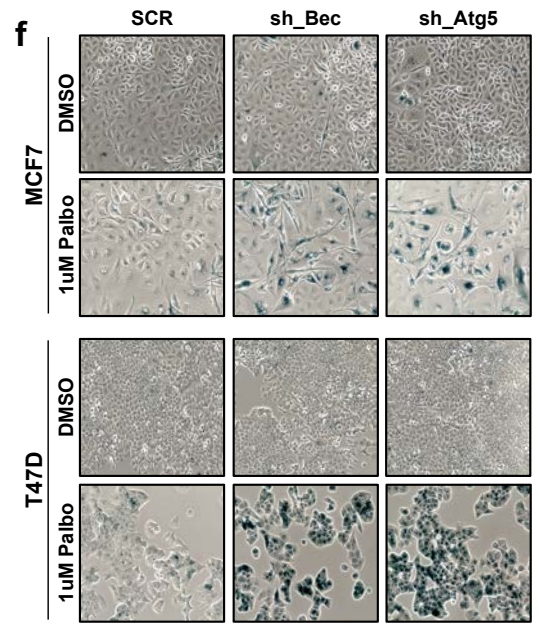
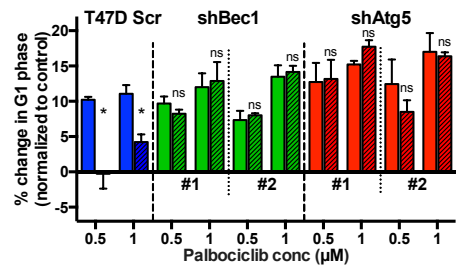
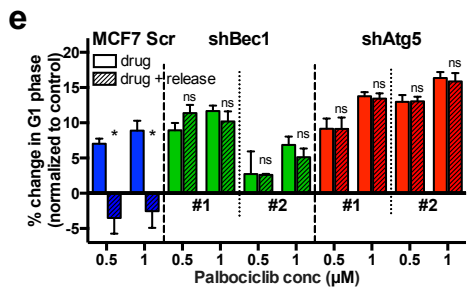
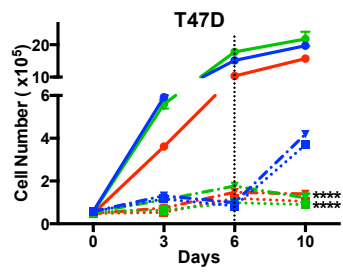
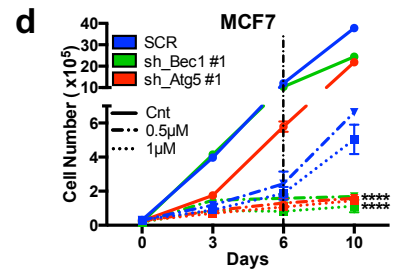


**Supplementary Figure 6. Low dose palbociclib induces ROS-mediated autophagy in ER+ breast cancer cells:** **a)** Cellular reactive oxygen species (ROS) measurement and quantification (mean fluorescence intensity [MFI]) of ROS levels in MCF7 and T47D cells upon transfection with NT siRNA or siRNA against CDK4 and CDK6. **b)** Cellular reactive oxygen species (ROS) measurement and quantification (mean fluorescence intensity [MFI]) of reactive oxygen species (ROS) levels in MCF7, T47D and MCF10A cells upon treatment with DMSO or palbociclib for 6 days. **c)** Expression (normalized  $\log_2$  level) of SOD-1, CAV-1 and SOD-2 determined by RPPA analysis of MCF7 and T47D cell lines treated with palbociclib for 6 days. **d)** LC3B II protein levels in MCF7 and T47D cells treated with combination of ROS scavenger (10 mM NAC or 0.1 mM trolox) with 1  $\mu$ M palbociclib for 6 days. **e)** Schematic showing the biphasic effect of palbociclib on ER+ breast cancer cells. All data represent mean  $\pm$ SD from three independent experiments; p-values were calculated in comparison to cells treated with DMSO (Control) or siNT unless indicated. ns:  $p > 0.05$ ; \* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$ ; \*\*\*\* $p < 0.0001$ .



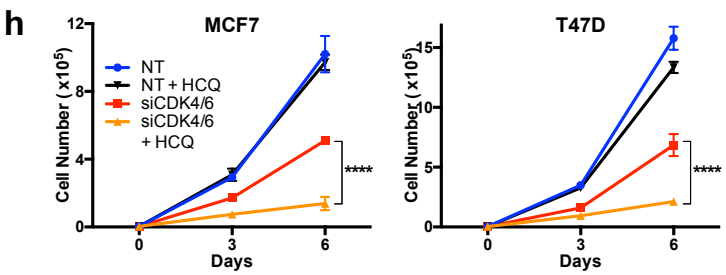
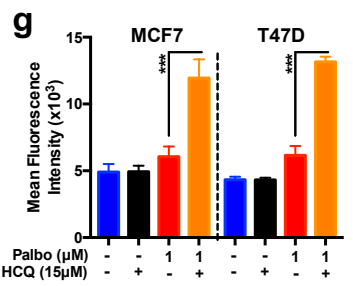
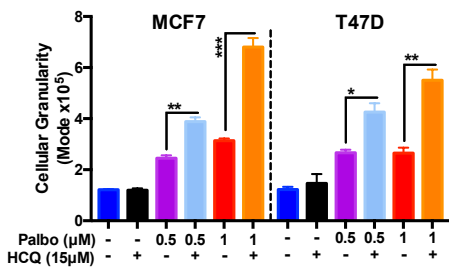
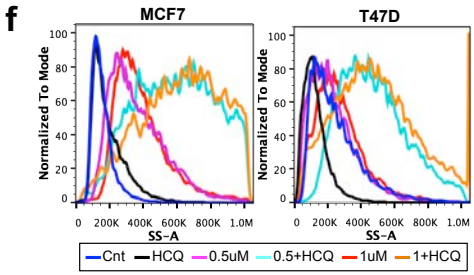
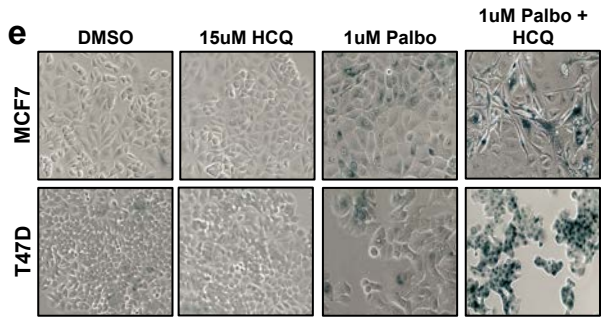
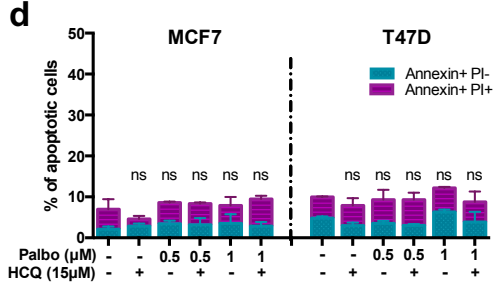
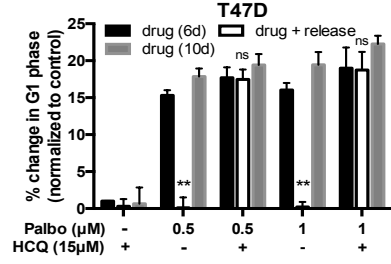
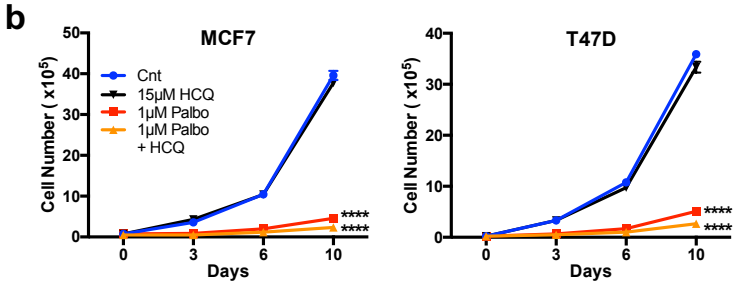
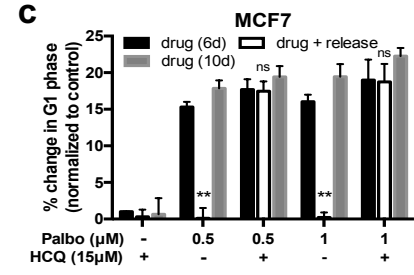
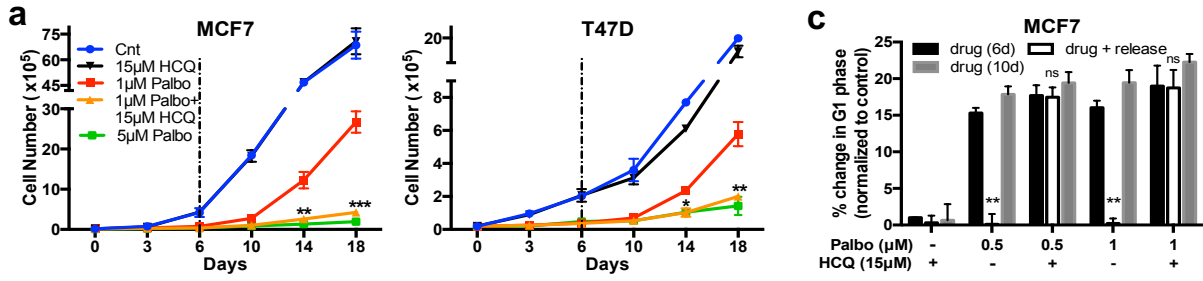
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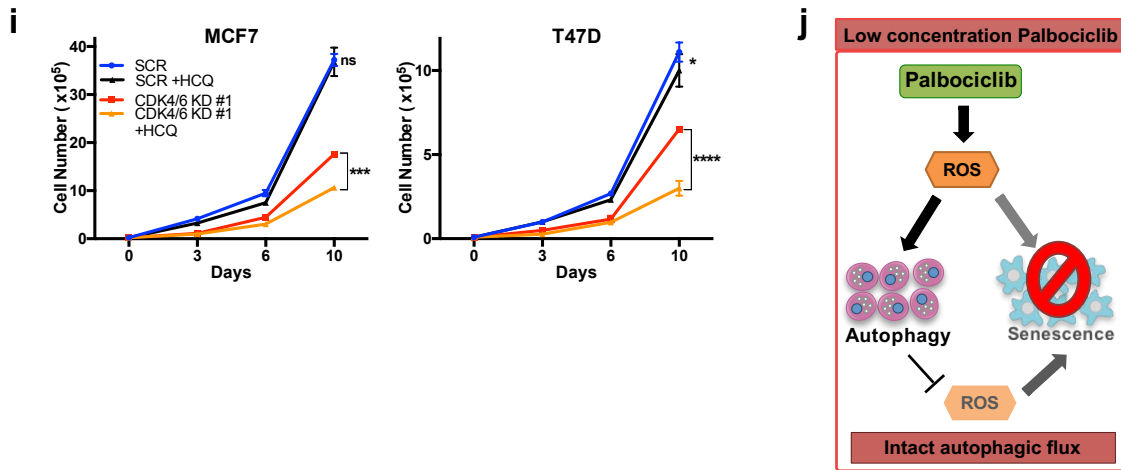
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|------------------|------|------|
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| sh_Bec1 #1       | 0.21 | 0.40 |
| sh_Bec1 #2       | 0.29 | 0.61 |
| sh_At5 #1        | 0.34 | 0.18 |
| sh_At5 #2        | 0.44 | 0.56 |



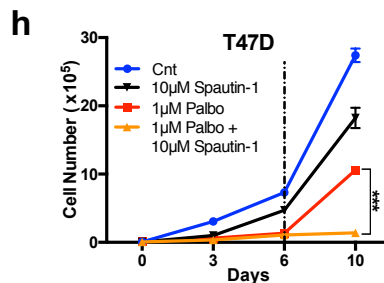
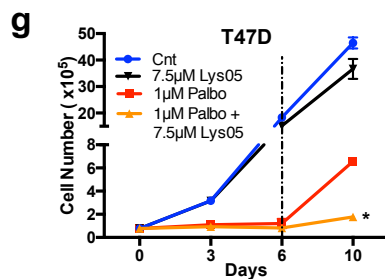
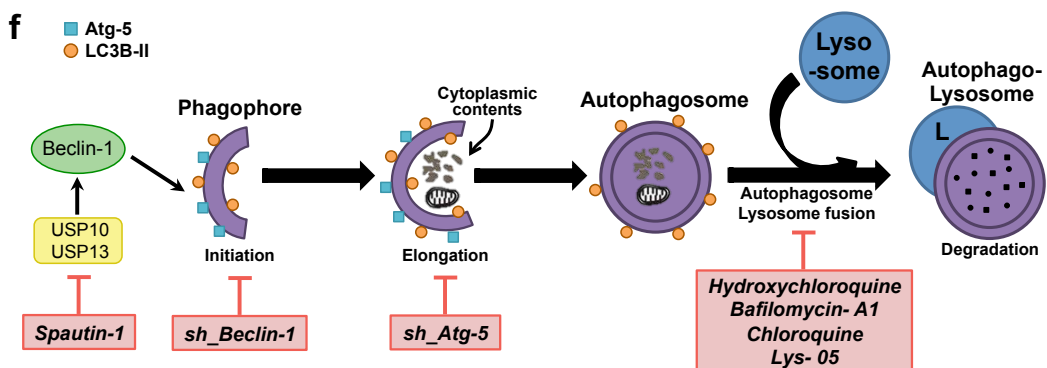
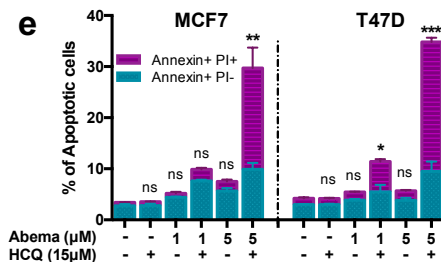
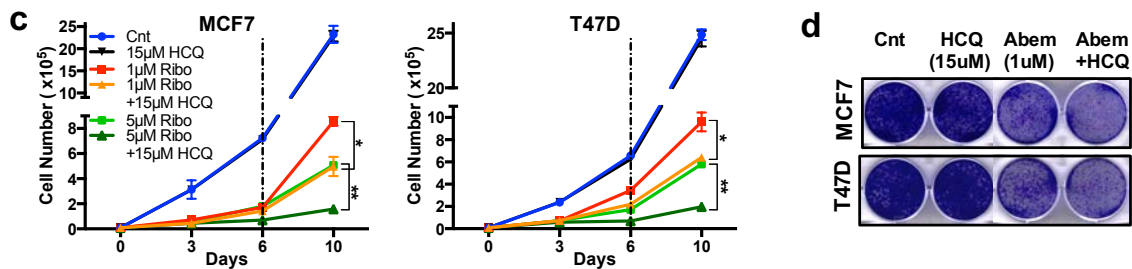
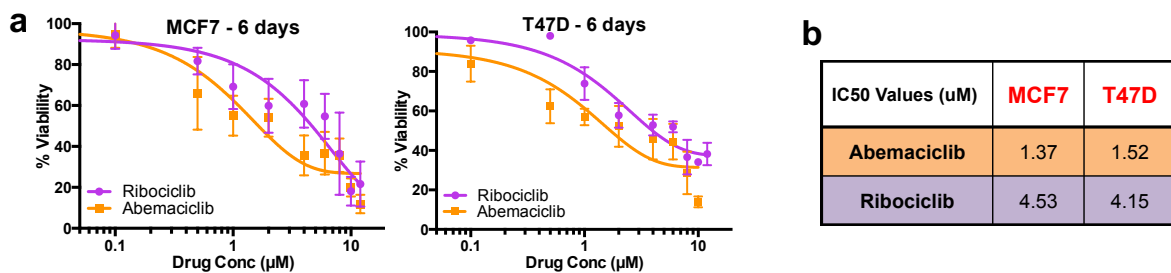


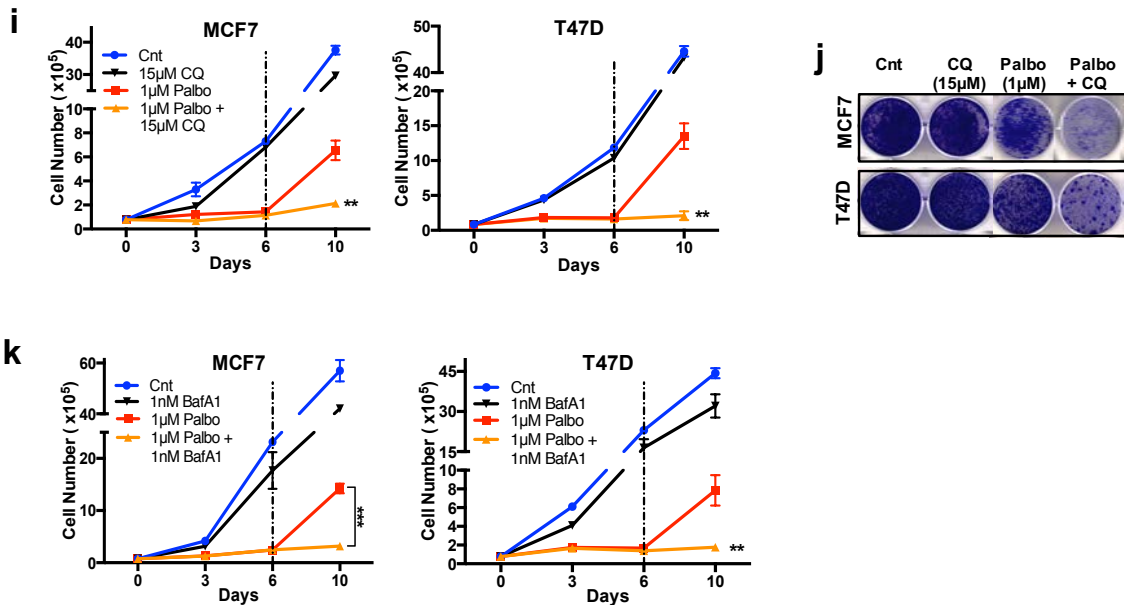
**Supplementary Figure 7. Ablation of autophagic genes sensitizes cells to palbociclib-induced senescence:** **a)** Schematic depicting locations of the shRNA sequences on the autophagy-associated *Beclin-1* and *Atg5* genes. **b)** Crystal violet OD measured on day 12 from drug response studies as shown in Fig 2b. **c)** Palbociclib Half-maximal inhibitory concentrations ( $IC_{50}$ ) values of MCF7 and T47D cells as calculated from the drug-response experiments shown in Fig. 2b. **d-f)** Beclin-1 or Atg5-knockdown MCF7 and T47D cells were treated with 0.5 or 1  $\mu$ M of palbociclib (Palbo) for 6 days. Some cells were allowed to recover for 4 days (release) to examine reversibility and subjected to d) cell counting to assess proliferation (p-values were calculated in comparison to cells treated with Scramble shRNA [SCR] and 1  $\mu$ M palbociclib), e) cell cycle analysis to determine the percentage change in G1 phase (p-values were calculated by comparing values at the end of drug treatment with those at the end of drug + release), and f) Representative images senescence-associated SA- $\beta$  gal-positive cells. All data represent mean  $\pm$  SD from three independent experiments; ns:  $p > 0.05$ ; \* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$ ; \*\*\*\* $p < 0.0001$ .



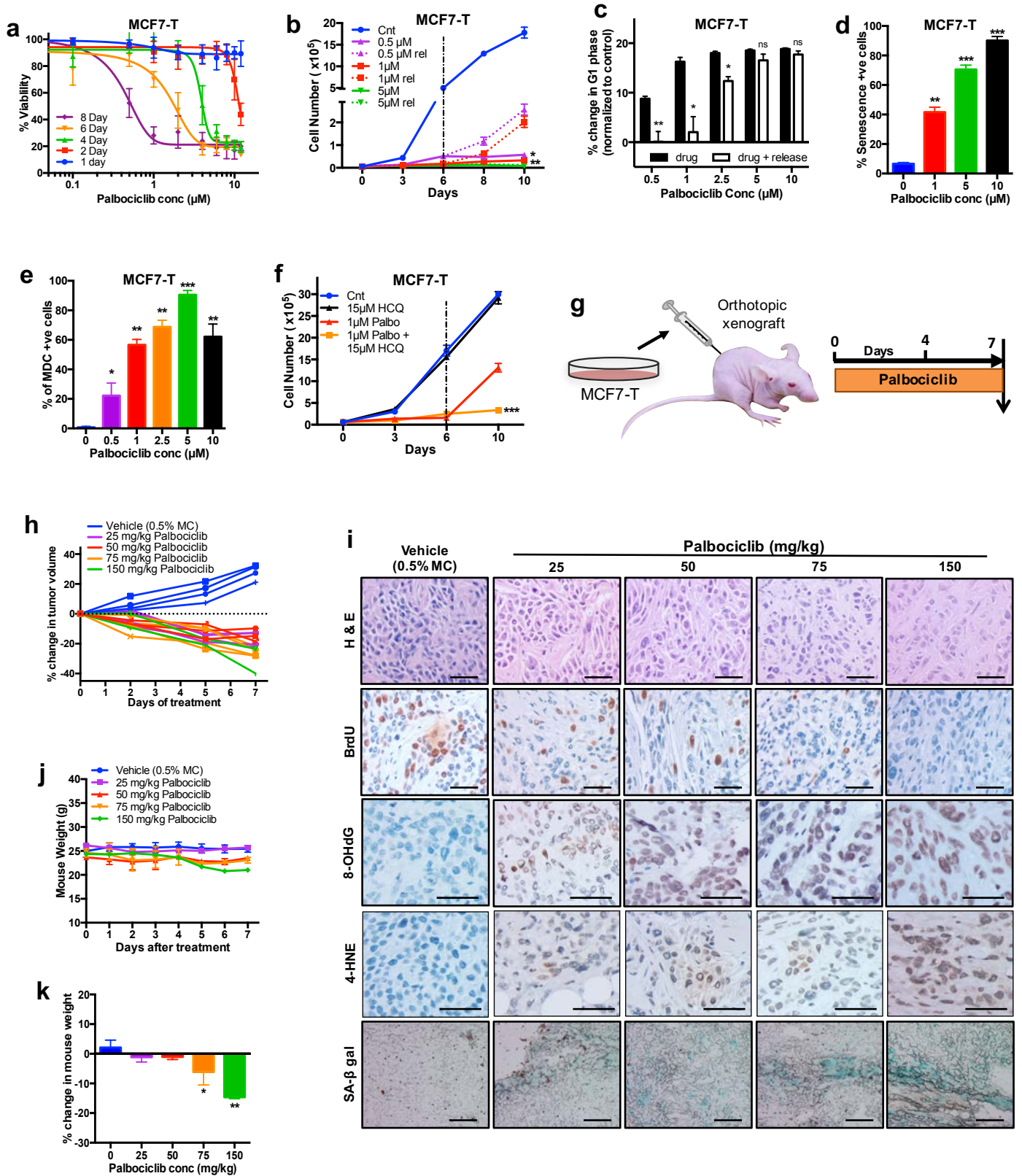


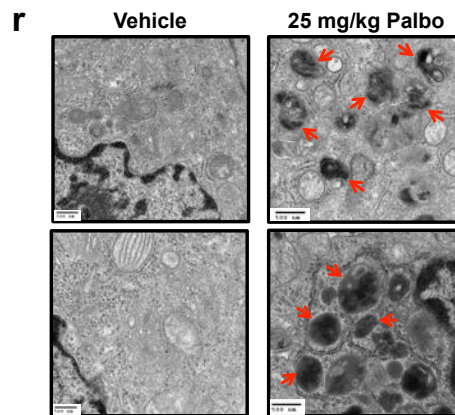
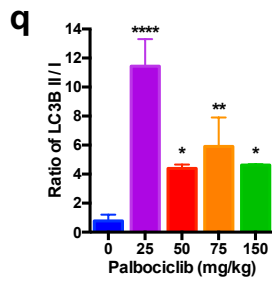
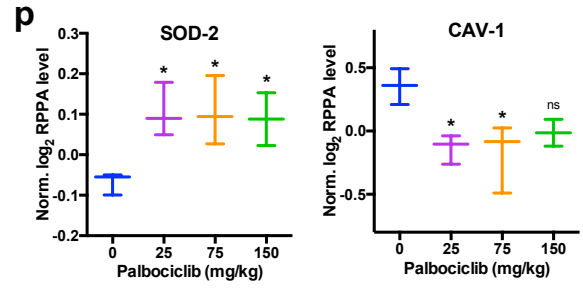
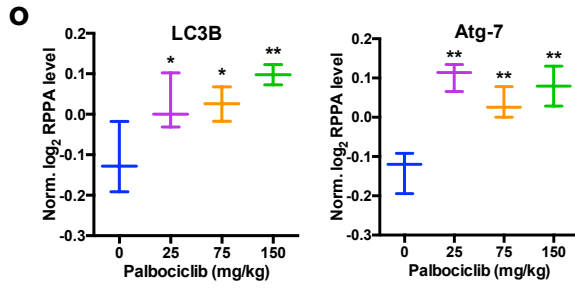
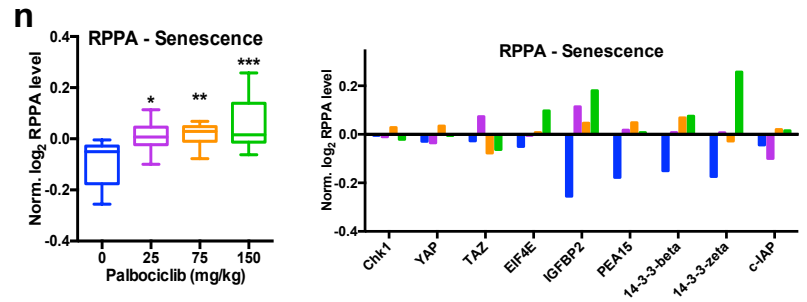
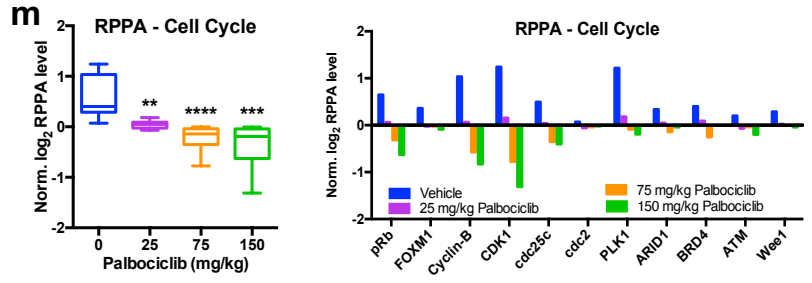
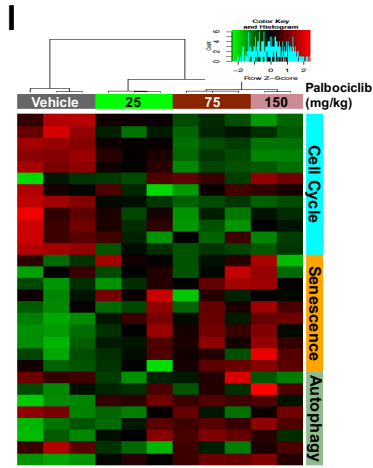
**Supplementary Figure 8. Autophagy inhibition via hydroxychloroquine sensitizes cells to palbociclib-induced senescence: a,b)** Effect on cell viability when treated with a combination of DMSO or palbociclib (Palbo - 0.5 or 1  $\mu\text{M}$ ) and autophagy inhibitor hydroxychloroquine (HCQ; 15  $\mu\text{M}$ ) for a) 6 days and allowed to recover for 12 days to examine long-term reversibility (p-values were calculated in comparison to cells treated with 1  $\mu\text{M}$  palbociclib) and b) 12 days without drug washout. **c-g)** MCF7 and T47D cells were treated with 15  $\mu\text{M}$  HCQ and/or palbociclib (0.5 or 1  $\mu\text{M}$ ) for 6 days and subjected to c) cell cycle analysis to determine the percentage change in G1 phase (p-values were calculated by comparing values at the end of 6 days drug treatment with those at the end of drug + release); d) flow cytometry measurement of apoptotic cells (early apoptosis: Annexin V+/PI-; late apoptosis: Annexin V+/PI+); e) representative images of SA- $\beta$  gal positive cells; f) measurement and quantification of side scatter analysis to assess cellular granularity; and g) quantification of cellular reactive oxygen species (ROS) levels. **h,i)** Proliferation of MCF7 and T47D cells with knockeddown of CDK4 and CDK6 via siRNA (h) or shRNA (i) and treatment with DMSO or 15  $\mu\text{M}$  HCQ. **j)** Schematic showing the regulation of ROS production, senescence, and autophagy by palbociclib at low concentrations. All data represent mean  $\pm$  SD from three independent experiments; ns:  $p > 0.05$ ; \* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$ ; \*\*\*\* $p < 0.0001$ .





**Supplementary Figure 9. Autophagy inhibition sensitizes cells to senescence induced by CDK4/6 inhibitors: a,b)** Proliferation of MCF7 and T47D cells treated with DMSO or increasing concentrations (conc) of ribociclib or abemaciclib (0.01 to 12  $\mu$ M) for 6 days (a) and their corresponding half-maximal inhibitory concentration ( $IC_{50}$ ) values (b). **c)** Cell counting was used to assess proliferation of MCF7 and T47D cells treated with a combination of DMSO (Cnt) or ribociclib (1 or 5  $\mu$ M) and 15  $\mu$ M hydroxychloroquine (HCQ) for 6 days. Cells were allowed to recover for 4 days to examine reversibility. **d)** Clonogenic assay to evaluate proliferation upon combined treatment with 5  $\mu$ M abemaciclib and HCQ for 6 days and recovery for 6 days. **e)** Flow cytometry measurement of apoptosis (early apoptosis: Annexin V+/PI-; late apoptosis: Annexin V+/PI+) in cells treated with 5 $\mu$ M abemaciclib combined with 15  $\mu$ M HCQ for 6 days. p-values were calculated in comparison to cells treated with DMSO (Control). **f)** Schematic of the autophagy pathway indicating the points of genetic and pharmacological interventions described in Fig. 2. **g,h)** Cell counting was used to assess proliferation of T47D cells treated with a combination of 1 $\mu$ M palbociclib and 7.5  $\mu$ M Lys-05 (g) or 10  $\mu$ M Spautin-1 (h) for 6 days and allowed to recover for 4 days. **i,j)** MCF7 and T47D cells were treated with 1 $\mu$ M palbociclib and 15 $\mu$ M chloroquine (CQ) for 6 days and allowed to recover for 4 or 6 days. The effects on growth were examined by i) cell counting and j) clonogenic assay. **k)** Cell counting to assess proliferation of MCF7 and T47D cells treated with the combination of 1  $\mu$ M palbociclib and the autophagy inhibitor Bafilomycin (BafA1- 1 nM) for 6 days. Cells were allowed to recover for 4 days to examine reversibility. All data represent mean  $\pm$  SD from three independent experiments; ns:  $p > 0.05$ ; \* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$ ; \*\*\*\* $p < 0.0001$ .

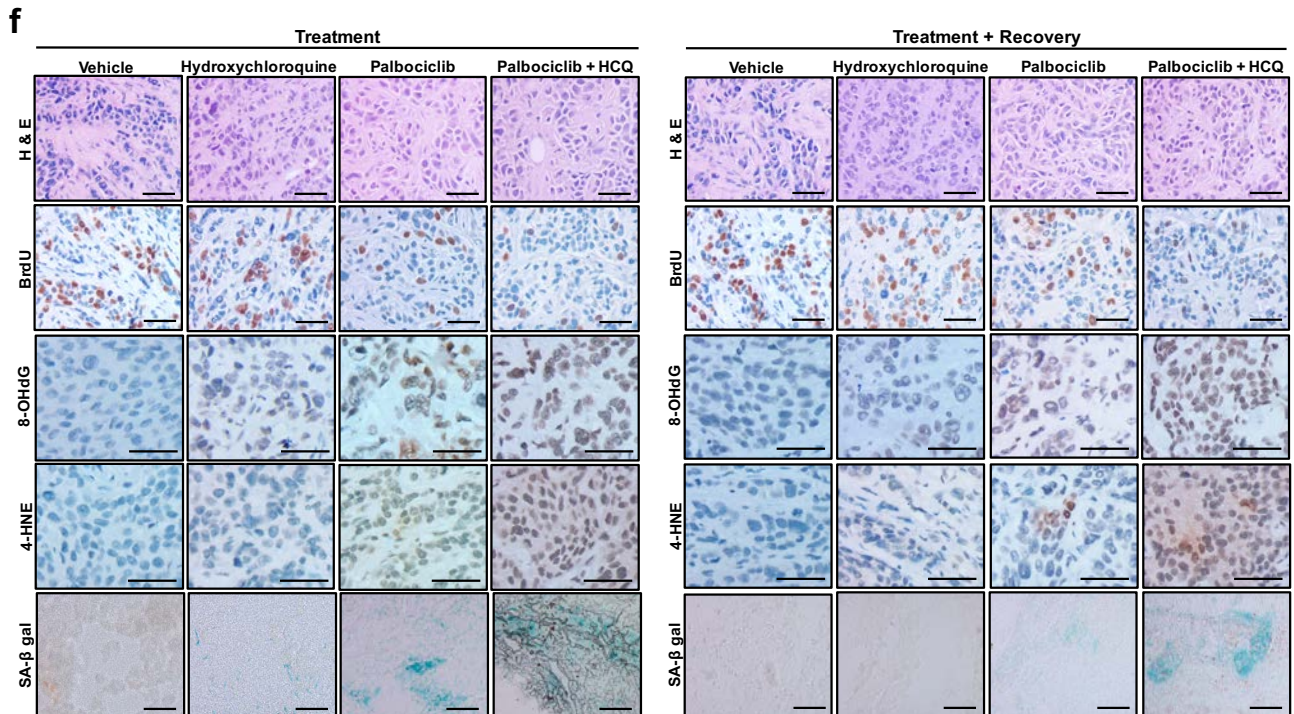
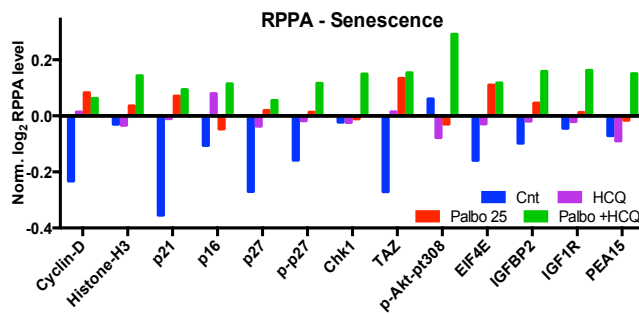
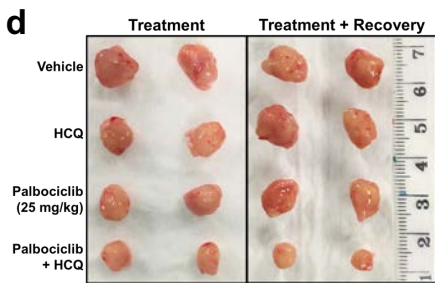
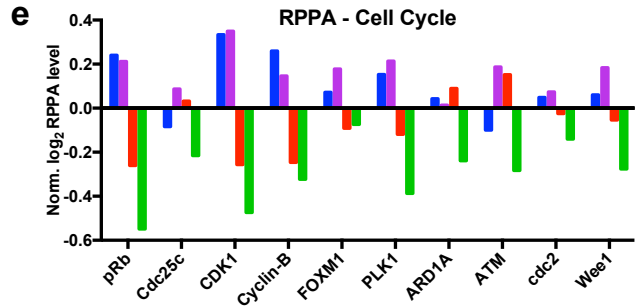
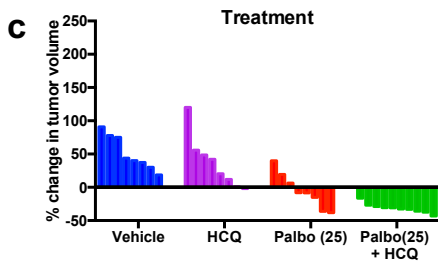
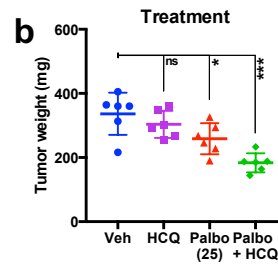
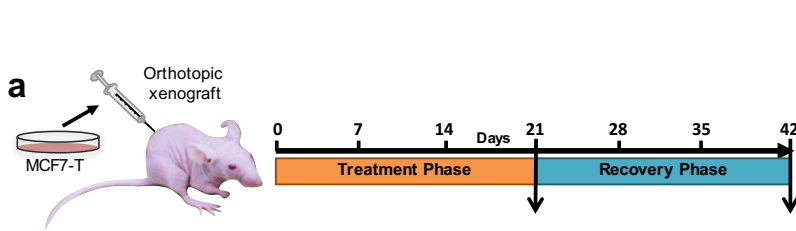


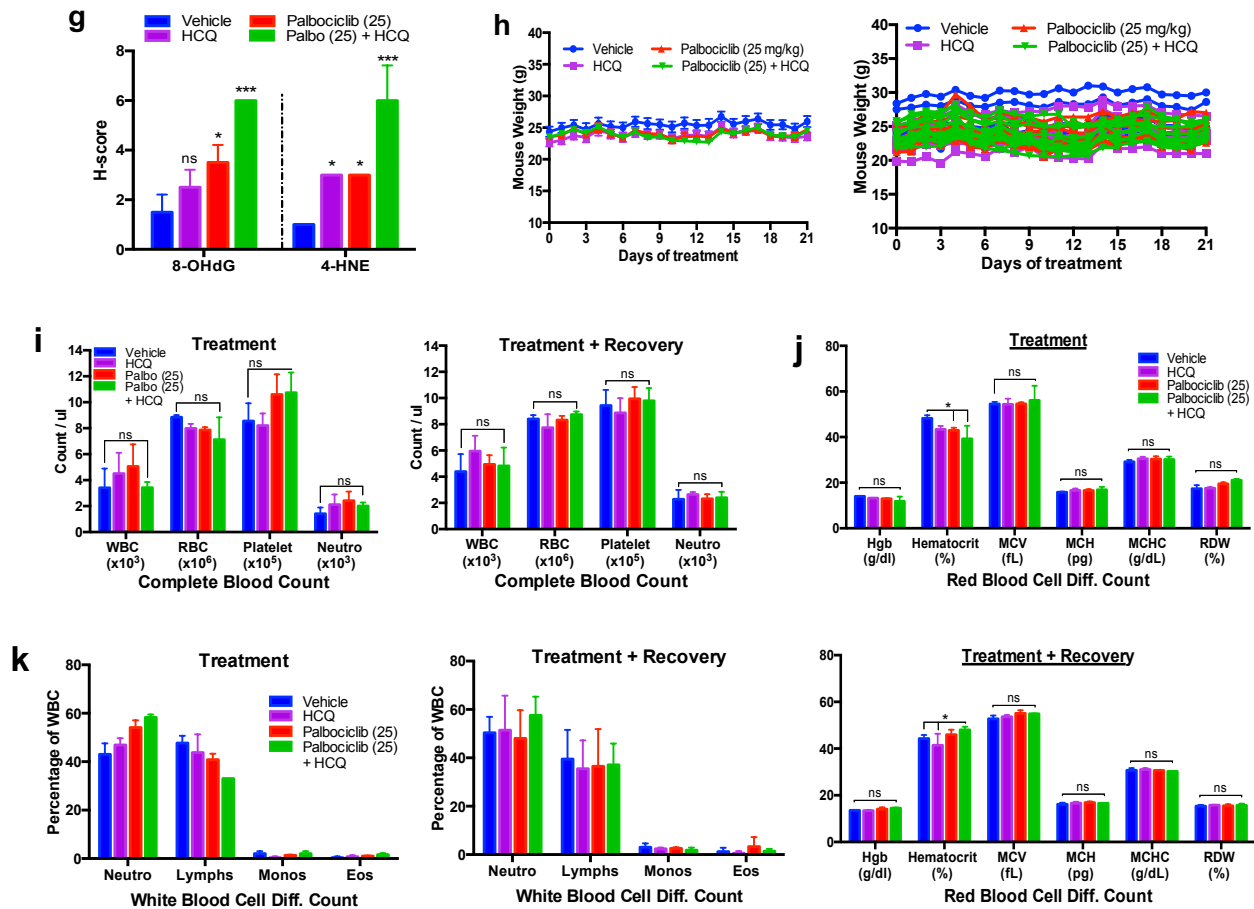




**Supplementary Figure 10. Palbociclib induces autophagy *in vivo*:** **a)** Proliferation of MCF7-T cells treated with DMSO or increasing concentrations (conc) of palbociclib (0.01 to 12  $\mu$ M) for 1, 2, 4, 6, or 8 days. **b-d)** MCF7-T cells were treated with DMSO (Cnt) or varying concentrations (0.5, 1, or 5  $\mu$ M) of palbociclib for 6 days and allowed to recover for 4 days (release, or rel) to examine reversibility. Cells were then subjected to b) cell counting to assess the effect on growth; c) cell cycle analysis to determine percentage change in G1 phase (p-values were calculated by comparing values at the end of drug treatment with those at the end of drug + release); and d) quantification of senescence-associated SA- $\beta$  gal positive cells. **e)** Monodansylcadavarine (MDC) positive MCF7-T cells were quantified with flow cytometry after treatment with DMSO or varying concentrations of palbociclib for 6 days. **f)** Cell counting was used to assess effect on growth of MCF7-T cells treated with a combination of DMSO or palbociclib (Palbo; 0.5 or 1  $\mu$ M) and autophagy inhibitor hydroxychloroquine (HCQ; 15  $\mu$ M) for 6 days. Cells were allowed to recover for 4 days to examine reversibility. **g)** Schematic showing treatment schedule of orthotopic MCF7-T xenograft mice with vehicle (0.5% methylcellulose [MC]) or varying concentrations of palbociclib for 7 days. Images of the mouse and the syringe were taken with permission from ScienceSlides by VisiScience Corp. **h)** Percentage change in tumor volume of orthotopic xenograft mice (normalized to volume on Day 0) of individual tumors treated with vehicle (0.5% methylcellulose) or varying concentrations of palbociclib daily for 7 days via oral gavage ( $n \geq 4$  mice tumors/treatment group). **i)** Representative images of hematoxylin and eosin (H&E), BrdU, 8-hydroxydeoxy-guanosine (8-OHdG), 4-hydroxynonenal (4-HNE) and SA- $\beta$  gal immunohistochemical staining of tumor tissues harvested after 7 days of treatment as described in (h). Scale bars equal 50 $\mu$ m. **j)** Mean mouse weights for each treatment group after 7 days of treatment as described in (h). **k)** Percentage change in mouse weights after 7 days treatment as described in (h). **l)** Heat map obtained from RPPA analysis of tumors harvested after treated as in (h) and ordered based on Cell cycle, senescence and autophagy pathways. **m,n)** Pathway scores and expression (normalized  $\log_2$  level) of individual proteins within the m) cell cycle ( $n=10$  proteins) and n) senescence pathways ( $n=13$  proteins) determined from RPPA analysis of tumors harvested after treatment as described in (h). **o)** Expression (normalized  $\log_2$  level) of LC3B and Atg-7 protein levels as determined from RPPA analysis of tumors harvested after treatment as described in (h). **p)** Expression (normalized  $\log_2$  level) of SOD-2 and Cav-1 protein levels as determined from RPPA analysis of tumors harvested after treatment as described in (h). **q)** Autophagic flux, calculated as ratio of LC3B-II to LC3B-I from densitometry values (normalized to the corresponding levels of actin) of western blots from Fig. 3c. **r)** Representative TEM microphotographs of tumors harvested from mice treated with vehicle (0.5% MC), 25 mg/kg or 150 mg/kg of palbociclib for 7 days. Red arrows indicate double-membraned autophagosomes. Scale bars equal 500 nm. All in vitro data represent mean $\pm$ SD from three independent experiments; p-values were calculated in comparison treatment with DMSO or vehicle (Control) unless indicated. ns:  $p > 0.05$ ; \* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$ ; \*\*\*\* $p < 0.0001$ .

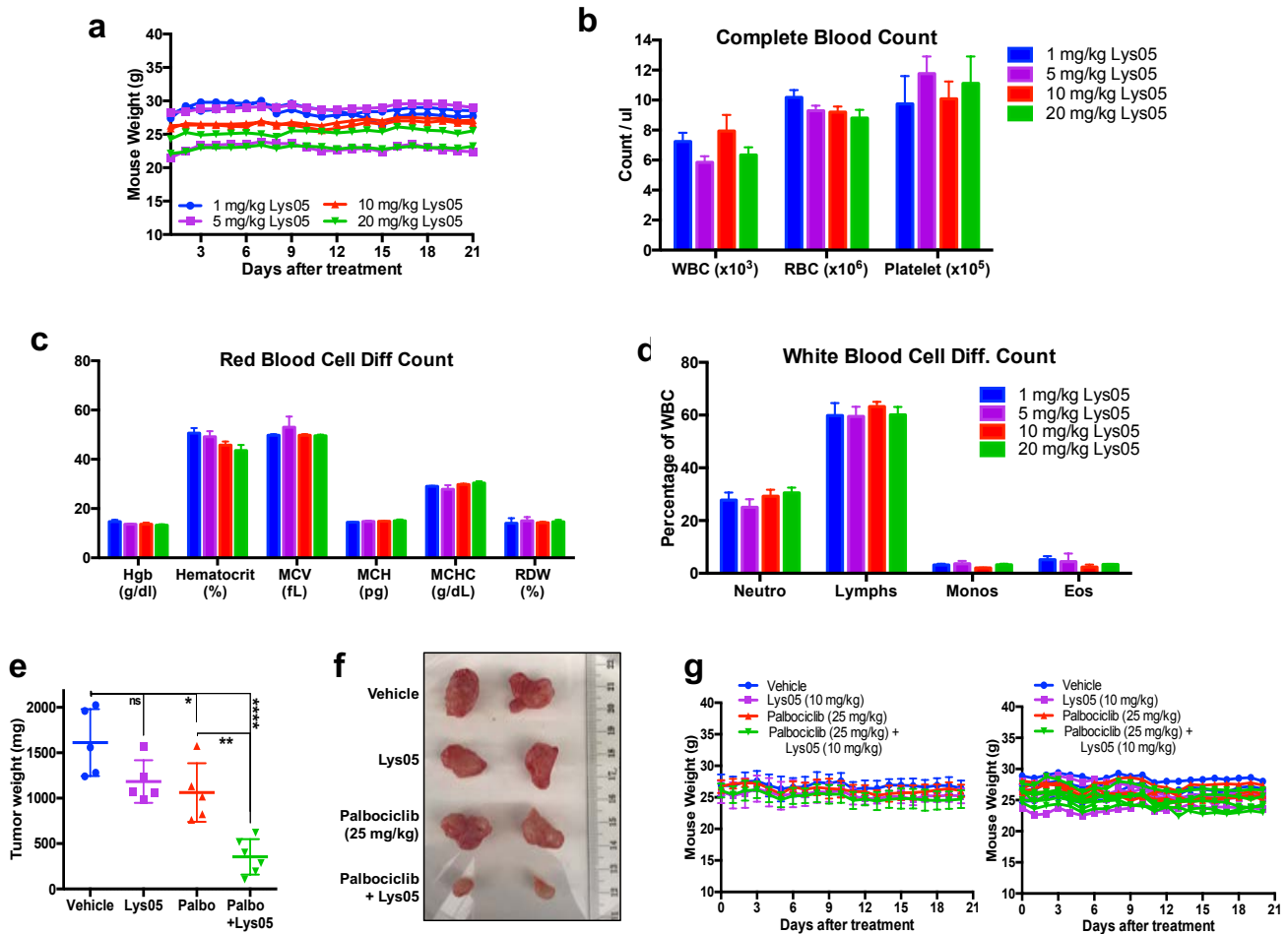




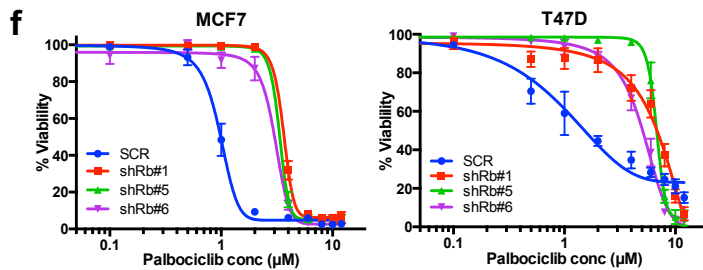
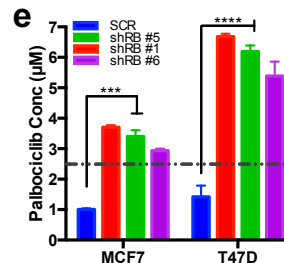
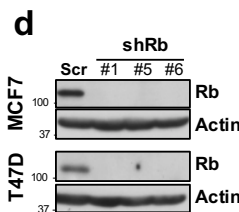
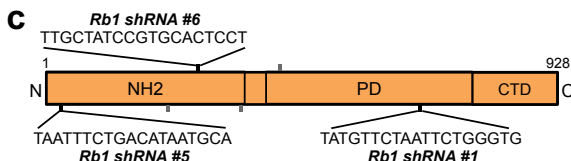
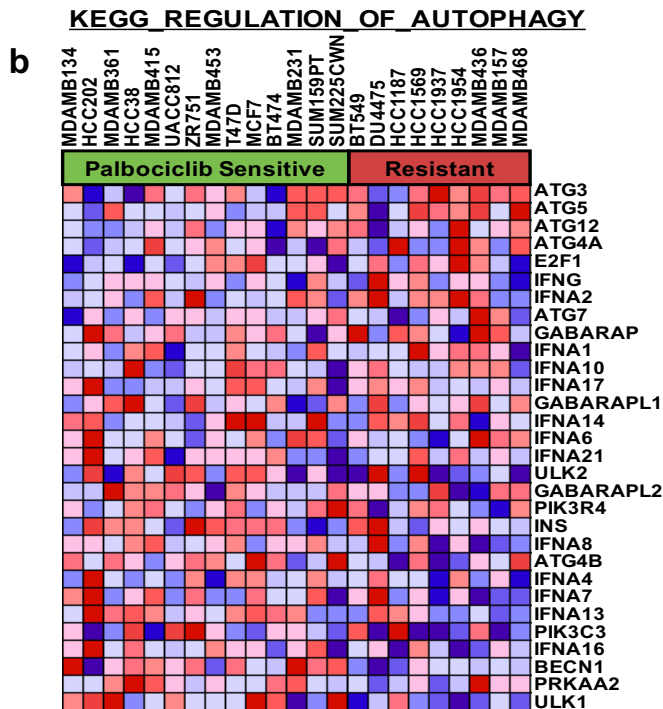
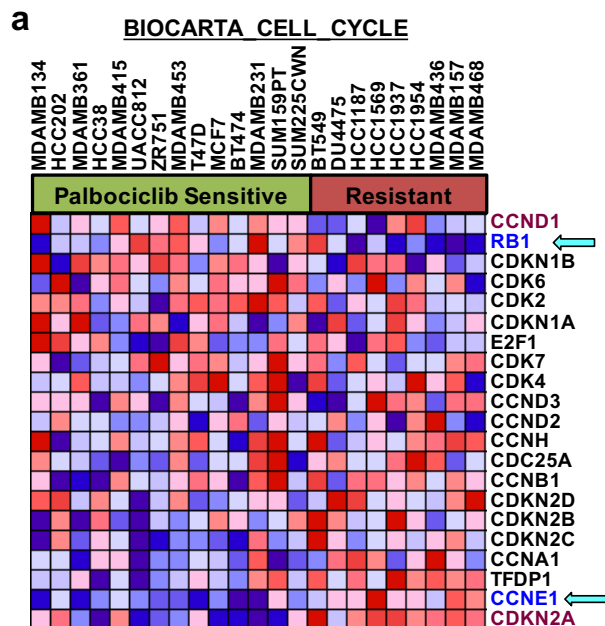


### Supplementary Figure 11. Palbociclib synergizes with hydroxychloroquine to inhibit tumor growth *in vivo*:

**a)** Schematic showing treatment schedule of orthotopic MCF7-T xenograft mice with vehicle (veh; 0.5% methylcellulose and PBS), 60 mg/kg hydroxychloroquine (HCQ), 25 mg/kg palbociclib (Palbo); or combination of palbociclib (25mg/kg) and hydroxychloroquine (60mg/kg) for 21 days (treatment phase), followed by a recovery phase of 21 days without treatment. Images of the mouse and the syringe were taken with permission from ScienceSlides by VisiScience Corp. **b)** Tumor weights at the end of treatment phase (21 days) as described in (a) (n=6 mice/treatment group). **c)** Percentage change in tumor volume of individual tumors at the end of the treatment phase as described in (a). **d)** Representative images of tumors harvested at the end of the treatment phase and at the end of the recovery phase as described in (a). **e)** Expression (normalized log<sub>2</sub> expression level) of individual proteins of the cell cycle (n=10 proteins) and senescence pathways (n=13 proteins) determined from RPPA analysis of tumors harvested after treatment as described in (a). **f)** Representative images of hematoxylin and eosin (H&E), BrdU, 8-hydroxydeoxyguanosine (8-OHdG), 4-hydroxynonenal (4-HNE) and senescence-associated SA-β gal immunohistochemical staining on tumor tissues harvested at the end of the treatment phase and at the end of the recovery phase as described in (a). Scale bars equal 50 μm. **g)** Quantification (H-score) of 8-OHdG and 4-HNE staining on tumors at the end of treatment + recovery phase. **h)** Mean mouse weight and Weight of individual mice after 21 days of treatment as described in (a). **i-k)** Mice were treated as described in (a). Blood samples collected at the end of treatment phase and at the end of the treatment + recovery phase were subjected to i) complete blood counts (red blood cells [RBC], white blood cells [WBC], platelets, and neutrophils [Neutro]); j) RBC differential counts; and k) WBC differential count. All data represent mean±SD; p-values were calculated in comparison to mice treated with vehicle (Control) unless indicated. ns:p>0.05; \*p<0.05; \*\*p<0.01; \*\*\*p<0.001; \*\*\*\*p<0.0001.

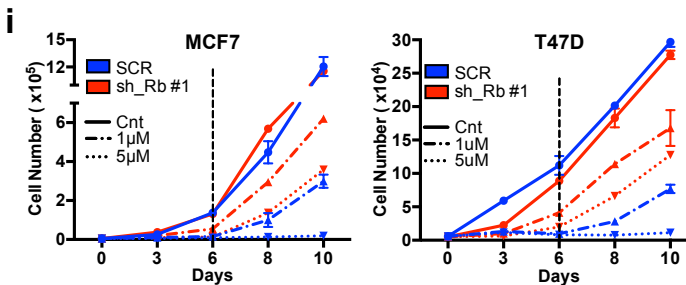
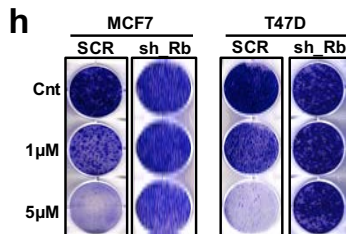


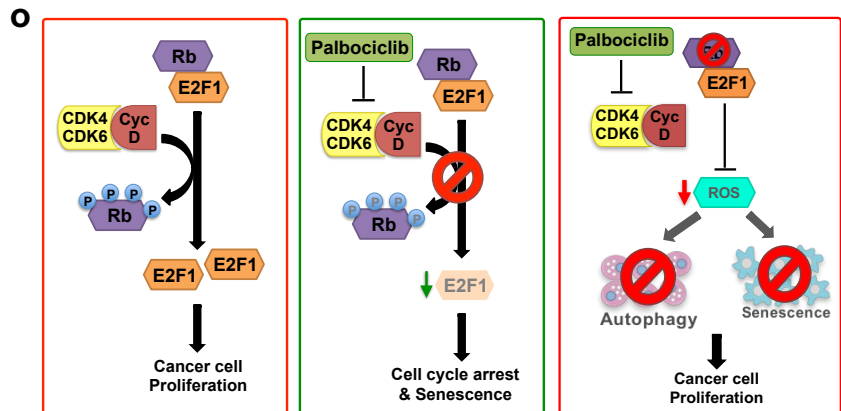
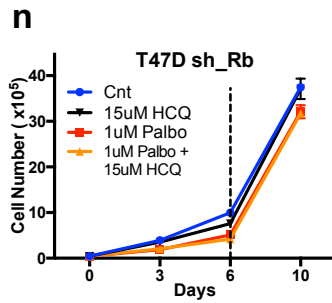
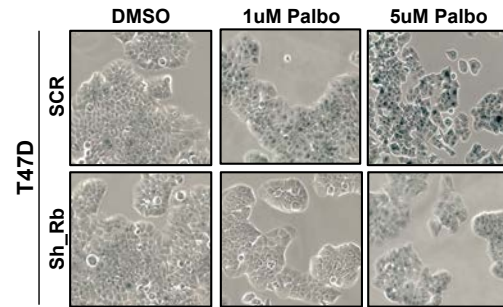
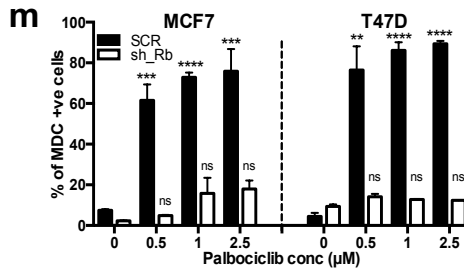
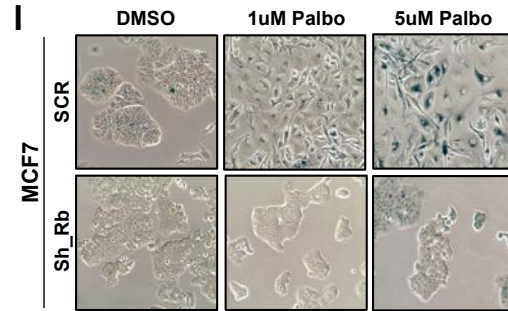
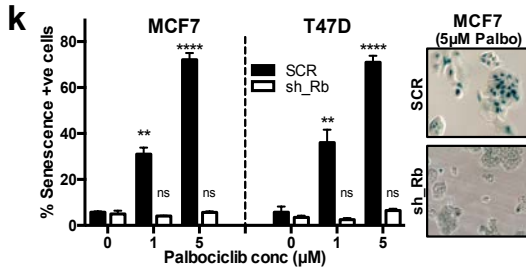
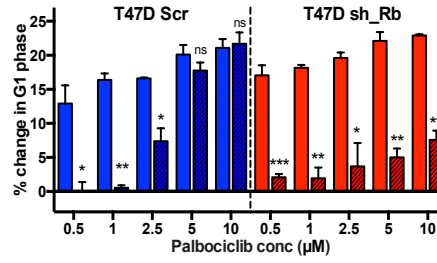
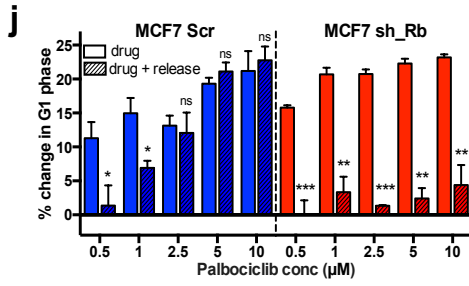
**Supplementary Figure 12. Palbociclib synergizes with the autophagy inhibitor, Lys-05 to inhibit tumor growth *in vivo*:** **a)** Weight of individual non-tumor bearing mice treated with varying concentrations of Lys-05 daily for 21 days via I.P (n=2 mice/treatment group). **b-d)** Mice were treated as described in (a). Blood samples collected at the end of treatment were subjected to b) complete blood counts (red blood cells [RBC], white blood cells [WBC], platelets; c) RBC differential counts; and d) WBC differential count. **e, f)** Tumor weights (e) and representative pictures (f) after treatment of orthotopic MCF7-T xenograft mice with vehicle (veh; 0.5% methylcellulose and PBS), 160 mg/kg Lys-05, 25 mg/kg palbociclib (Palbo); or combination of palbociclib (25mg/kg) and Lys-05 (10mg/kg) for 21 days (treatment phase), followed by a recovery phase of 14 days without treatment (n≥5 mice tumors/treatment group). **g)** Mean mouse weight and weight of individual mice after 21 days of treatment as described in (e). All data represent mean±SD; p-values were calculated in comparison to mice treated with vehicle (Control) unless indicated. ns:p>0.05; \*p<0.05; \*\*p<0.01; \*\*\*p<0.001; \*\*\*\*p<0.0001.



**g**

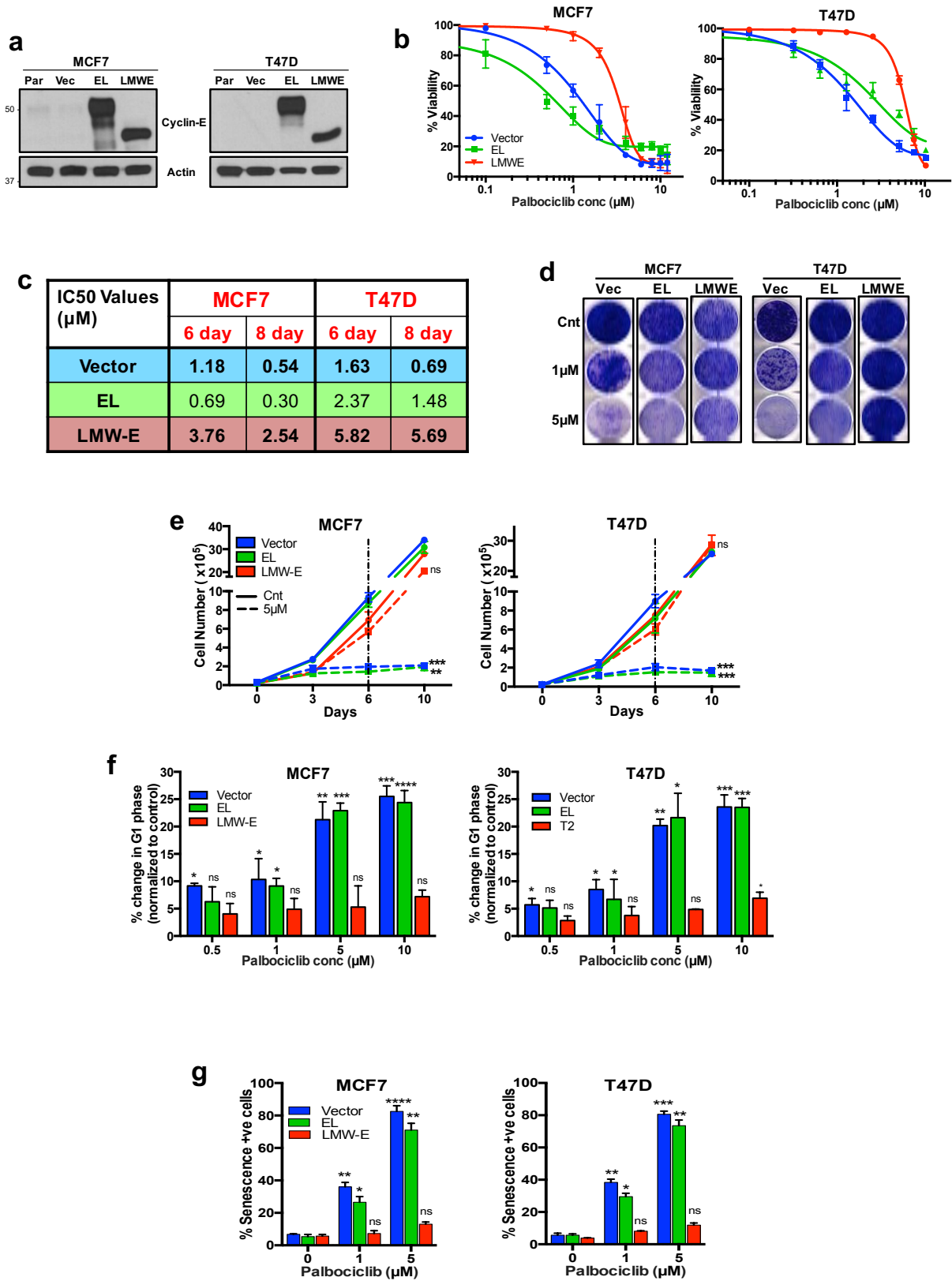
| IC50 Values (µM) | MCF7 | T47D |
|------------------|------|------|
| SCR              | 1.26 | 1.74 |
| Sh_Rb #1         | 3.69 | 6.73 |
| Sh_Rb #5         | 3.29 | 6.94 |
| sh_Rb #6         | 2.99 | 5.12 |

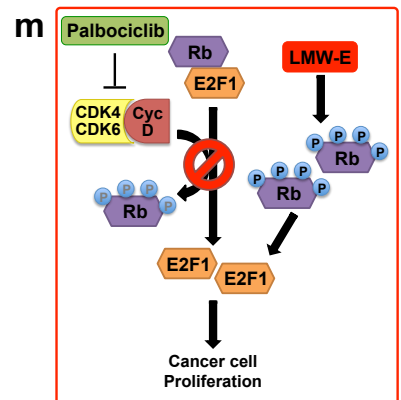
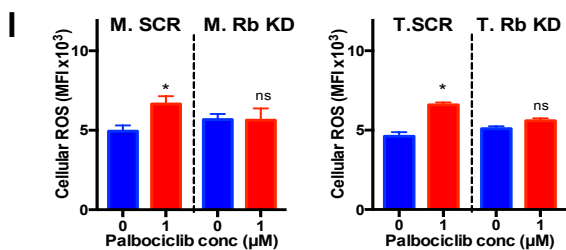
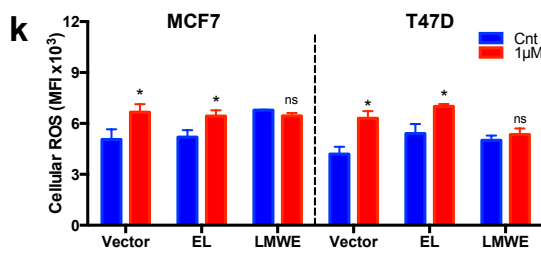
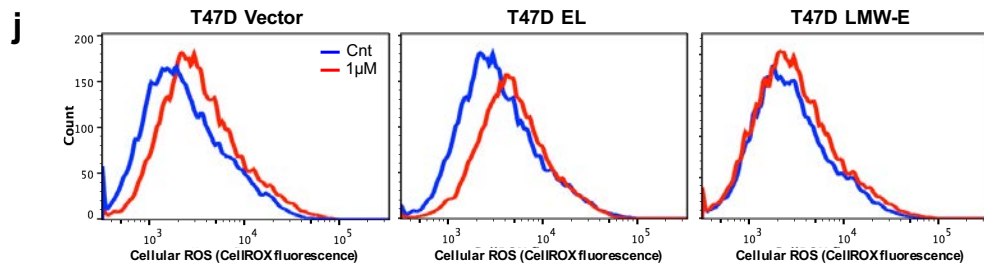
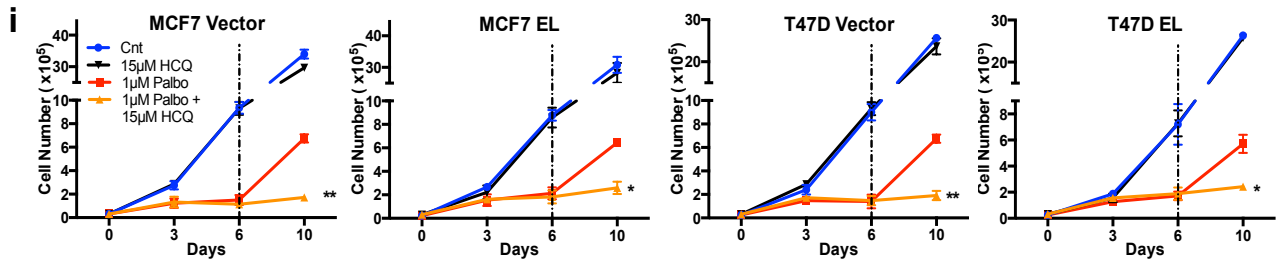
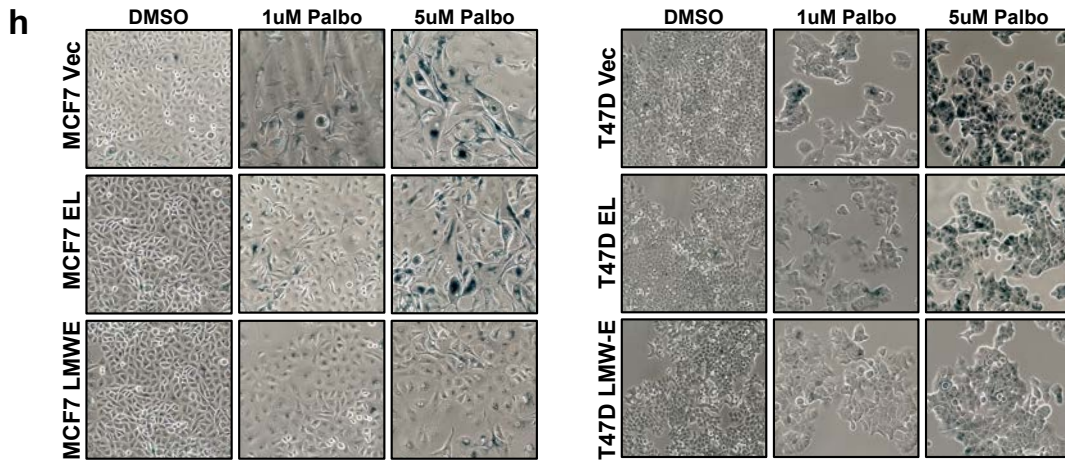






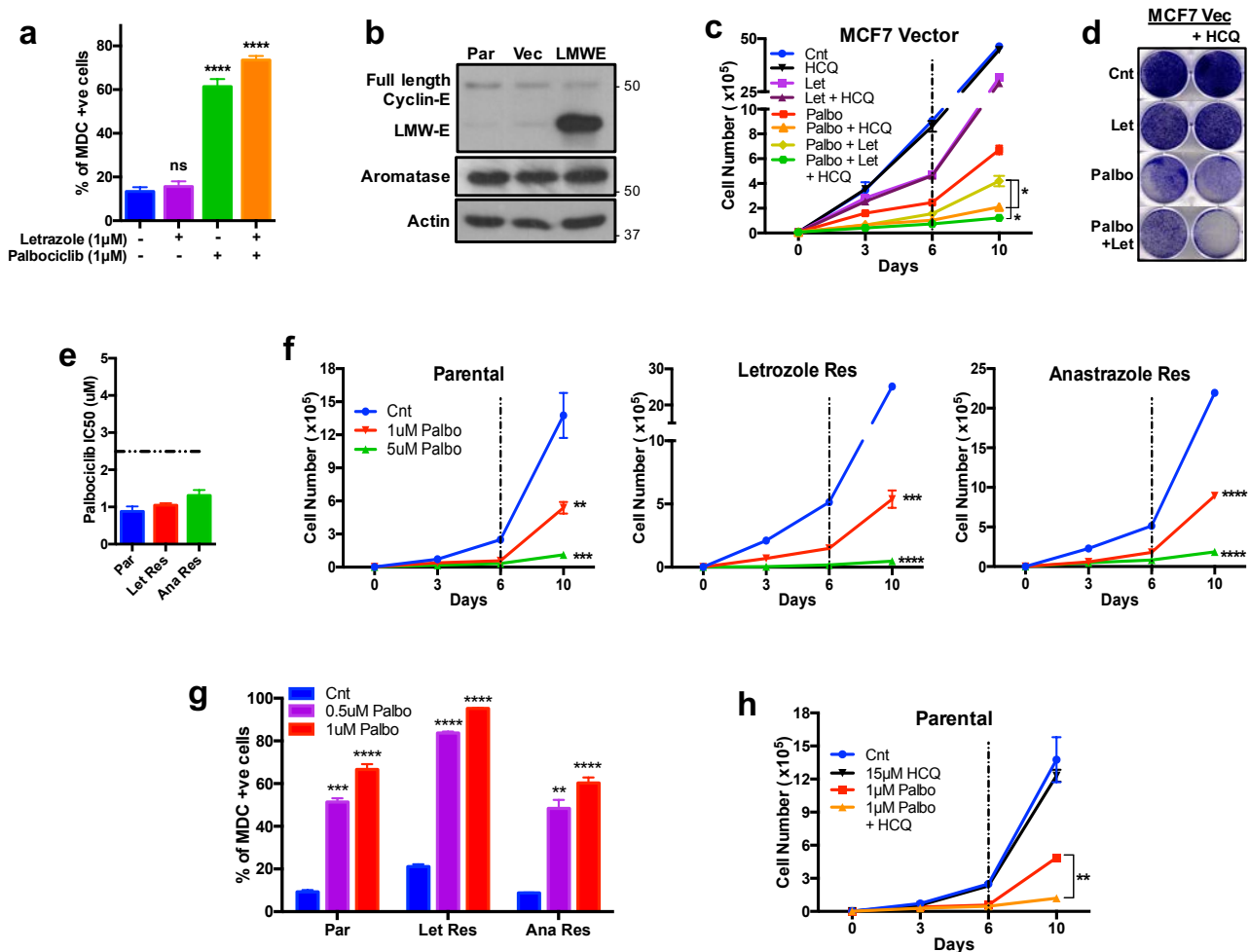
**Supplementary Figure 13. Deregulated Rb predicts resistance to combination of palbociclib and autophagy inhibition in ER positive breast cancer: a,b)** Heat map constructed using the Gene Set Enrichment Analysis (GSEA) program, denoting expression of genes from the Biocarta Cell Cycle (a) and KEGG Regulation of autophagy (b) gene sets in the indicated breast cancer cell lines, classified as being sensitive or resistant to palbociclib. **c)** Schematic depicting locations of the shRNA sequences on the *Rb1* gene. **d)** Western blot showing levels of Rb protein in MCF7 and T47D cells after transfection with shRNA for Scrambled (Scr) or Rb. **e-g)** Impact of knocking down Rb on the growth of MCF7 and T47D treated with DMSO or increasing concentrations (conc) of palbociclib (0.01 to 12  $\mu$ M) for 6 days (f) and their corresponding half-maximal inhibitory concentration ( $IC_{50}$ ) values (e,g). **h)** Clonogenic assay in Rb-knockdown MCF7 and T47D cells treated with DMSO (Cnt) or palbociclib (1 or 5  $\mu$ M) for 6 days and allowed to recover for 6 days. **i-m)** Rb-knockdown MCF7 and T47D cells were treated with varying concentrations of palbociclib (Palbo) for 6 days and allowed to recover for 4 days (release) to examine reversibility. Cells were then subjected to i) cell counting to assess proliferation; j) cell cycle analysis to determine the percentage change in G1 phase (p-values were calculated by comparing values at the end of drug treatment with those at the end of release); k,l) Senescence activity by SA- $\beta$ -gal assay (k) and representative images (l); and m) flow cytometry to quantify monodansylcadavarine (MDC) staining, a marker of autophagic vesicles. **n)** Cell counting to assess proliferation of Rb-knockdown T47D cells treated with the combination of 1 $\mu$ M palbociclib and 15 $\mu$ M hydroxychloroquine for 6 days and allowed to recover for 4 days. **o)** Schematic depicting the role of Rb in regulating the ability of palbociclib to induce reactive oxygen species (ROS), autophagy, and senescence. All data represent mean $\pm$ SD from three independent experiments; p-values were calculated in comparison to cells treated with DMSO (Control) unless indicated. ns:  $p>0.05$ ; \* $p<0.05$ ; \*\* $p<0.01$ ; \*\*\* $p<0.001$ ; \*\*\*\* $p<0.0001$ .



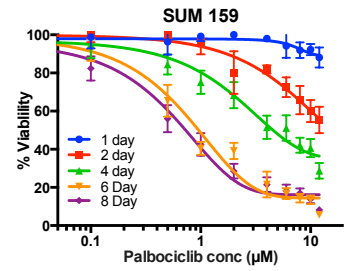
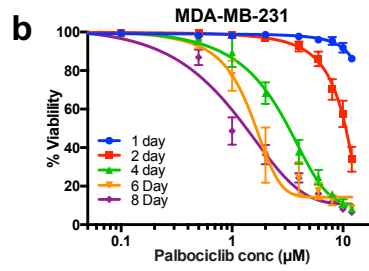
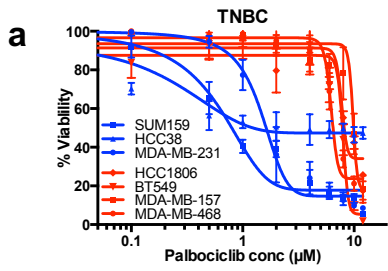




**Supplementary Figure 14. Low-molecular-weight isoforms of cyclin E predict resistance to the combination of palbociclib and autophagy inhibition in ER positive breast cancer:** **a)** Western blot showing levels of cyclin E protein in MCF7 and T47D cells stably overexpressing full-length cyclin E (EL) or low-molecular-weight isoforms of cyclin E (LMW-E). Par, parental cells; Vec, vector-transfected cells. **b,c)** Impact of overexpressing vector, EL, or LMW-E on the growth of MCF7 and T47D cells treated with DMSO or increasing concentrations (conc) of palbociclib (0.01 to 12  $\mu\text{M}$ ) for 6 days (b) and their corresponding half-maximal inhibitory concentration ( $\text{IC}_{50}$ ) values (c). **d-h)** MCF7 and T47D cells overexpressing vector, EL, or LMW-E were treated with DMSO (Cnt) or varying concentrations of palbociclib (Palbo) for 6 days. Cells were allowed to recover for 4 days to examine reversibility, at which point they were subjected to d) clonogenic assay; e) cell counting to assess cell proliferation; f) cell cycle analysis to examine the change in G1 phase; g,h) SA- $\beta$  gal staining to assess senescence (representative images are shown in h). **i)** Cell counting was used to assess growth of vector, EL, or LMW-E overexpressing MCF7 and T47D cells treated with DMSO or palbociclib +15 $\mu\text{M}$  hydroxychloroquine (HCQ) for 6 days and allowed to recover for 4 days. **j,k)** Cellular reactive oxygen species (ROS) levels and its quantification (mean fluorescence intensity – MFI) measured in vector, EL, or LMW-E overexpressing MCF7 or T47D cells treated with DMSO or palbociclib (1  $\mu\text{M}$  or 5  $\mu\text{M}$ ) for 6 days. **l)** Quantification of ROS levels by MFI in Scramble (Scr) or Rb-knockdown (KD) MCF7 and T47D cells treated with DMSO or palbociclib (1  $\mu\text{M}$  or 5  $\mu\text{M}$ ) for 6 days. **m)** Schematic depicting the mechanism by which LMW-E mediates resistance to palbociclib. All data represent mean $\pm$ SD from three independent experiments; p-values were calculated in comparison to cells treated with DMSO (Control) unless indicated. ns:p>0.05; \*p<0.05; \*\*p<0.01; \*\*\*p<0.001; \*\*\*\*p<0.0001.

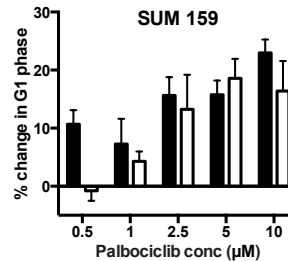
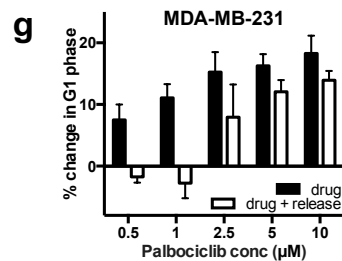
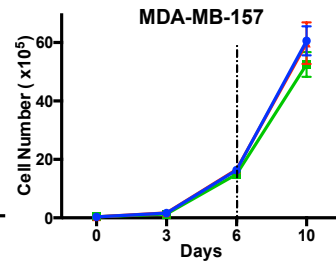
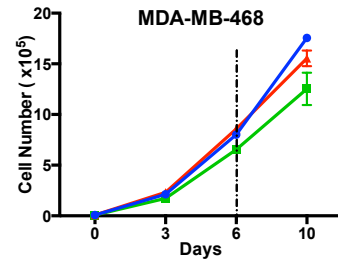
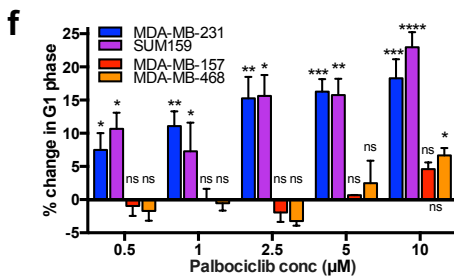
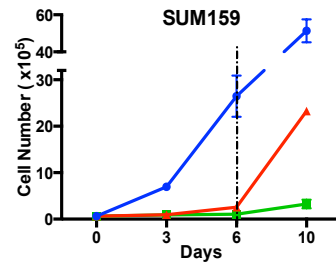
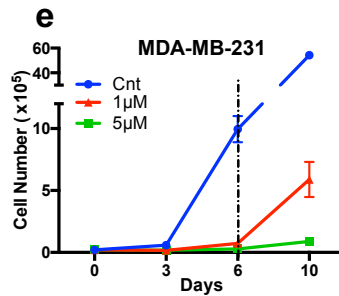
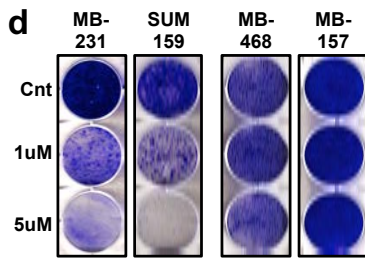
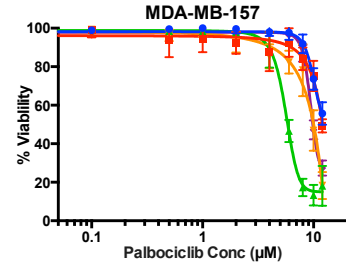
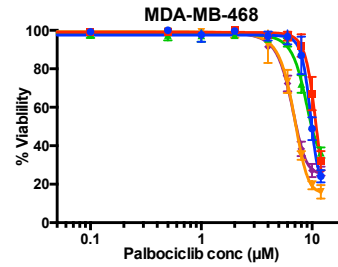


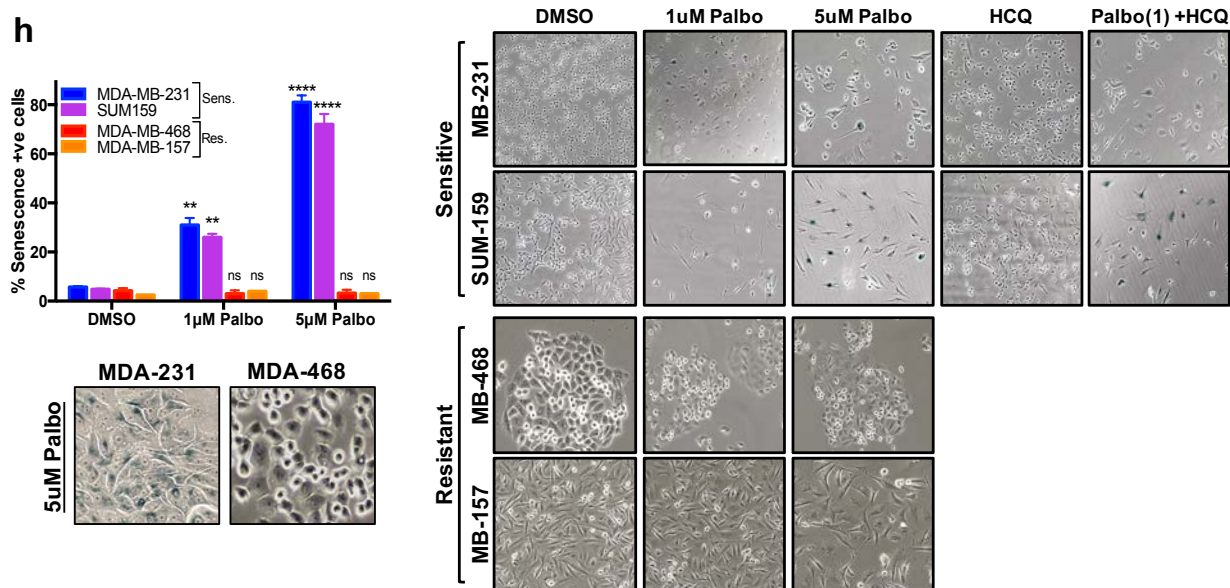
**Supplementary Figure 15. Combination of palbociclib and autophagy inhibition is synergistic in aromatase expressing and aromatase inhibitor resistant cells:** **a)** Measurement of monodansylcadavarine (MDC) positive acidic vesicles, including autophagosomes, by flow cytometry in MCF7 aromatase expressing cells treated with 1 µM palbociclib in combination with 1 µM letrozole for 6 days. **b)** Western blot showing levels of cyclin E and aromatase protein in MCF7 cells stably overexpressing aromatase (Par) and empty vector (Vec) or low-molecular-weight isoforms of cyclin E (LMW-E). **c,d)** Cell counting (c) and clonogenic assay (d) to measure impact of overexpressing empty vector in MCF7 aromatase expressing cells treated with 1 µM palbociclib (Palbo), 1 µM letrozole (Let) and 15 µM hydroxychloroquine (HCQ) in the indicated combinations for 6 days. **e)** Half-maximal inhibitory concentration (IC<sub>50</sub>) values of palbociclib in MCF7 parental, letrozole or anastrozole resistant cells treated with increasing concentrations (conc) of palbociclib (0.01 to 12 µM) for 6 days. **f-h)** MCF7 parental and letrozole or anastrozole resistant cells were treated with varying concentrations of palbociclib (Palbo) for 6 days with recovery for 4 days and subjected to f) cell counting to assess cell proliferation; g) flow cytometry to quantify monodansylcadavarine (MDC) staining, a marker of autophagic vesicles; and h) cell counting in combination with 15µM hydroxychloroquine (HCQ) for 6 days. All data represent mean±SD from three independent experiments; p-values were calculated in comparison to cells treated with DMSO (Control) unless indicated. ns:p>0.05; \*p<0.05; \*\*p<0.01; \*\*\*p<0.001; \*\*\*\*p<0.0001.



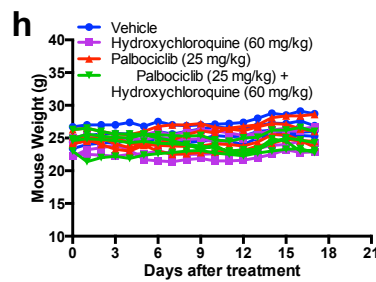
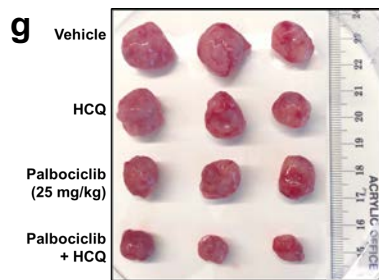
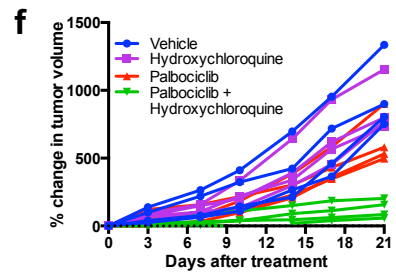
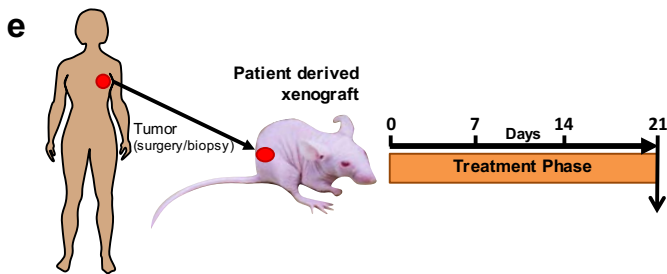
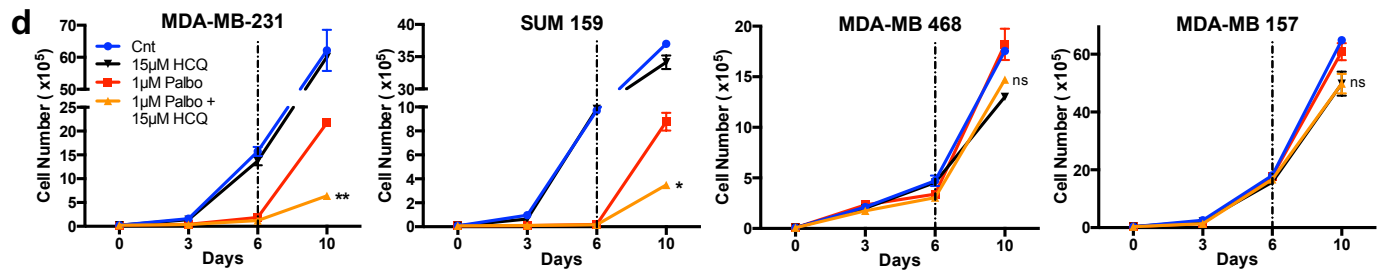
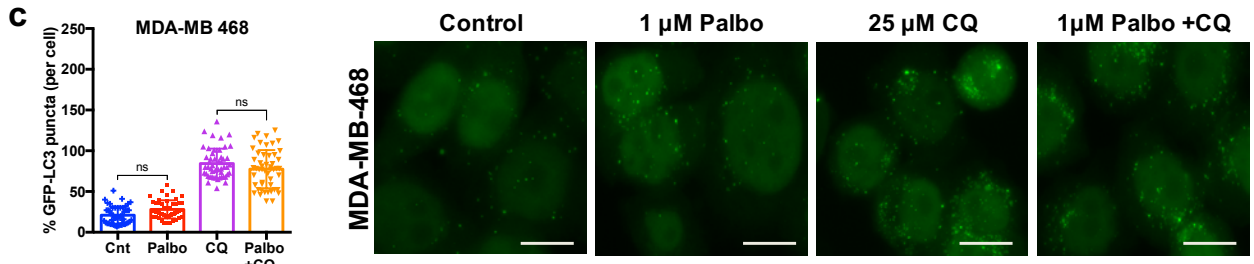
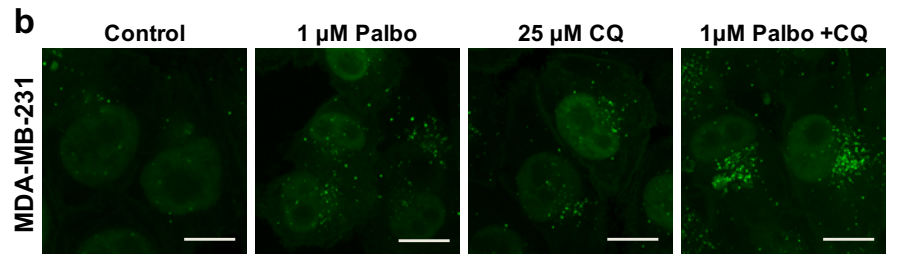
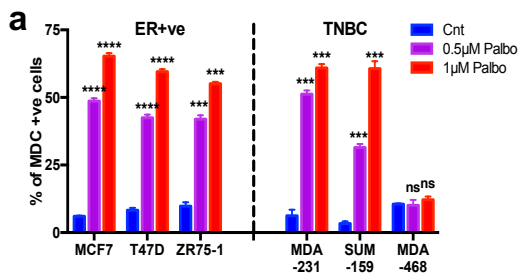
**c**

| IC50 ( $\mu\text{M}$ ) | MB-231 | SUM 159 | MB-468 | MB-157 |
|------------------------|--------|---------|--------|--------|
| 1 day                  | >15    | >15     | 11.26  | >15    |
| 2 day                  | 10.87  | >15     | 11     | 12.18  |
| 4 day                  | 3.27   | 4.37    | 9.74   | 9.95   |
| 6 day                  | 1.66   | 0.93    | 7.34   | 9.83   |
| 8 day                  | 1.34   | 0.72    | 6.97   | 5.98   |

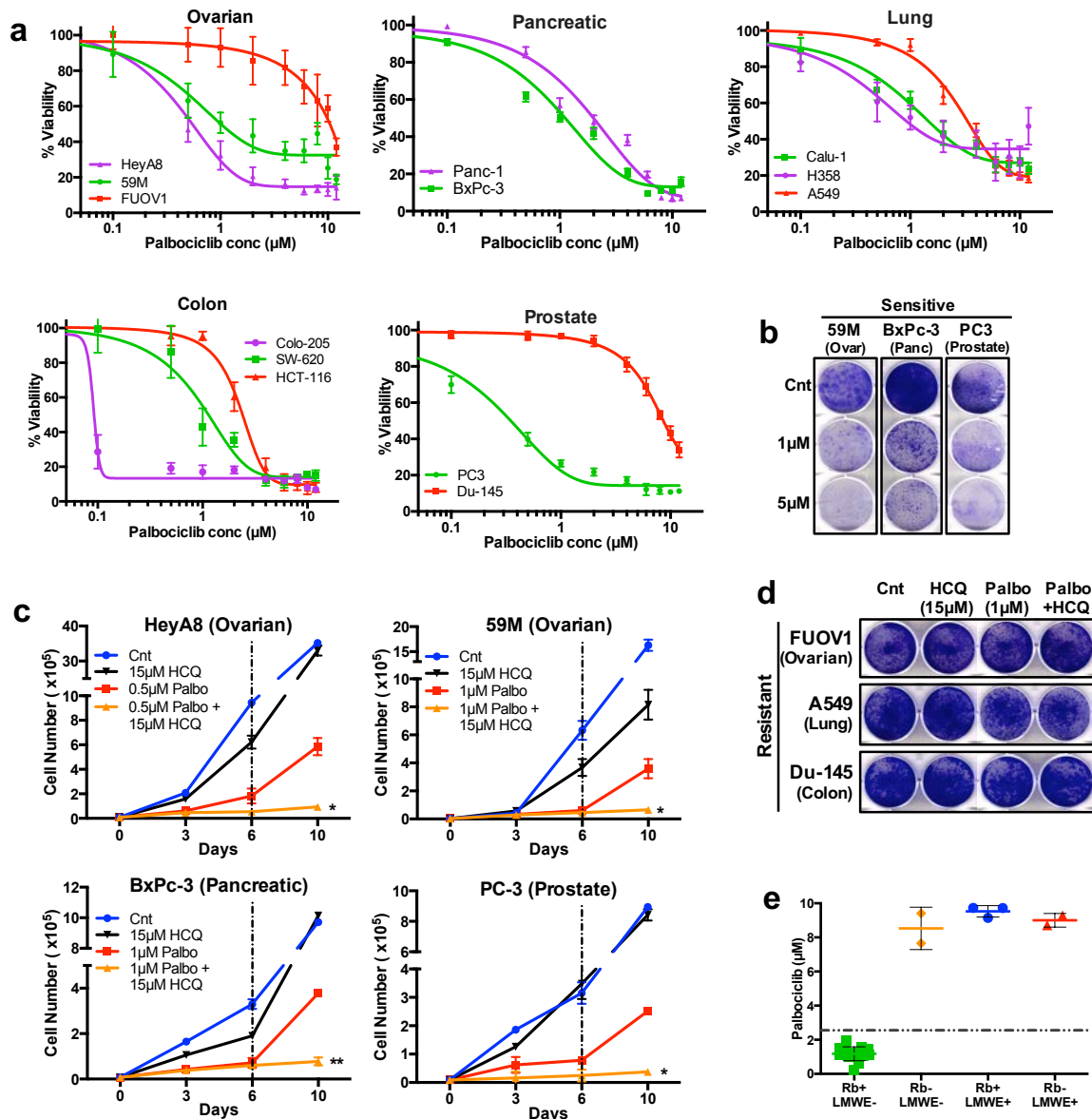




**Supplementary Figure 16. Rb+ve LMWE-ve triple-negative breast cancer cell lines are sensitive to palbociclib treatment: a-c)** Impact on the growth of the indicated triple-negative breast cancer (TNBC) cell lines of treatment with DMSO or increasing concentrations (conc) of palbociclib (0.01 to 12 µM) for 6 days. Crystal violet staining was performed on day 12 to assess viability and determine the half-maximal inhibitory concentration ( $IC_{50}$ ) values (c). **d)** Clonogenic assay in TNBC cell lines MDA-MB-231, SUM-159, MDA-MB-468, and MDA-MB-157 cells treated with DMSO (Cnt) or palbociclib (1µM, 5µM) for 6 days and allowed to recover for 6 days. **e-h)** MDA-MB-231, SUM-159, MDA-MB-468, and MDA-MB-157 cells were treated with DMSO or palbociclib (Palbo; 1µM, 5µM) and/or 15 µM autophagy inhibitor hydroxychloroquine (HCQ) for 6 days. Cells were allowed to recover for 4 days to examine reversibility. The cells were subjected to e) cell counting to assess proliferation; f) cell cycle analysis to assess change in G1 phase; g) cell cycle analysis to determine the effect of recovery (release) on change in the G1 phase; h) Senescence activity by SA-β gal staining and representative images. All data represent mean±SD from three independent experiments; p-values were calculated in comparison to DMSO (Control) unless indicated. ns:  $p > 0.05$ ; \* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$ ; \*\*\*\* $p < 0.0001$ .

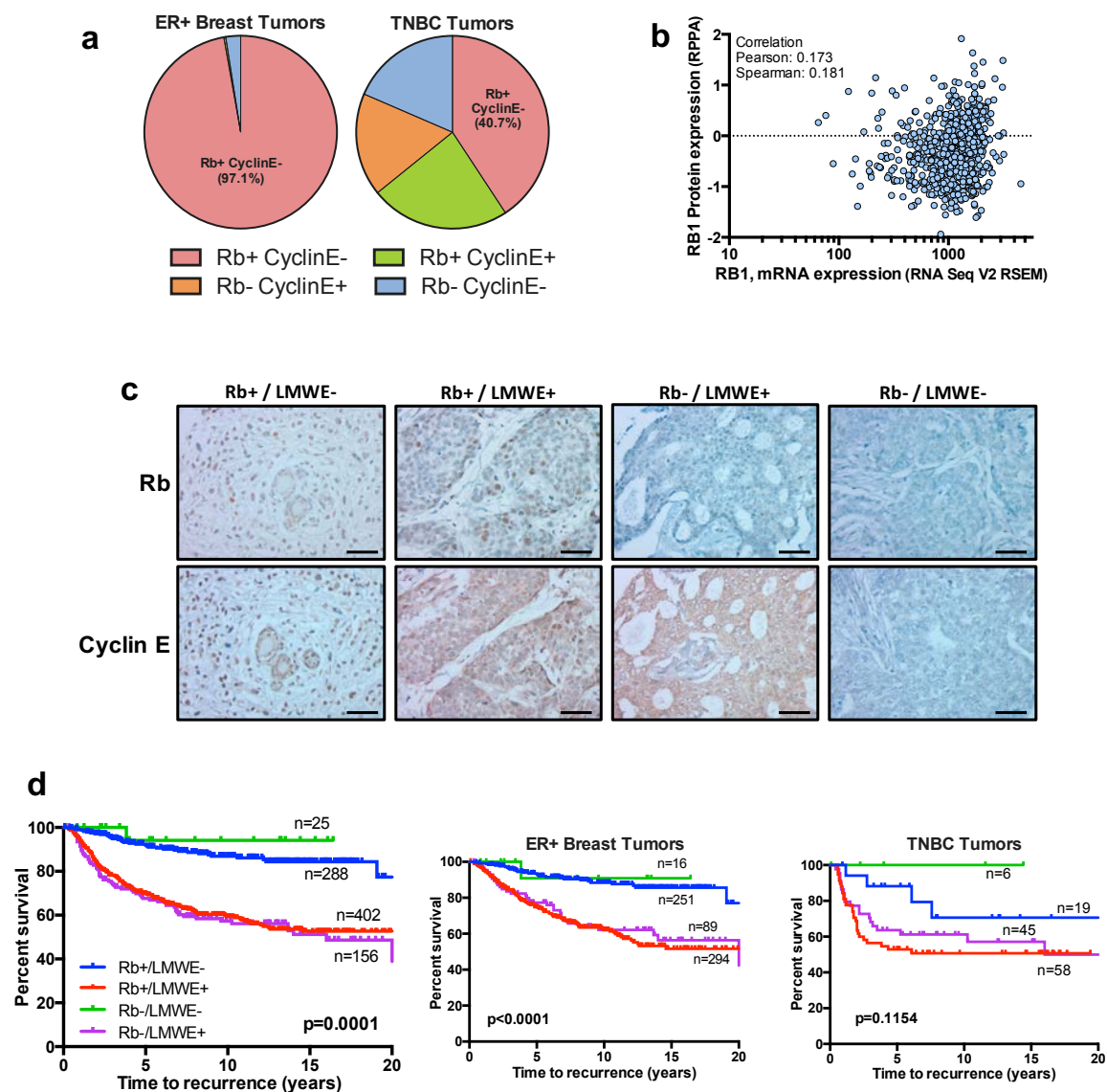


**Supplementary Figure 17. Synergism between autophagy inhibition and palbociclib in TNBC cell lines and PDX tumors with intact G1/S checkpoint:** **a)** Measurement of monodansyl-cadavarine (MDC) positive acidic vesicles, including autophagosomes, by flow cytometry in ER positive (MCF7, T47D, ZR75-1) and TNBC (MDA-MB-231, SUM-159, MDA-MB-468) cell lines treated with varying concentrations of palbociclib for 6 days. **b)** Representative confocal images of GFP-LC3 expressing MDA-MB-231 cells treated with 25  $\mu$ M CQ (for 1 hour), 1  $\mu$ M palbociclib or combination of palbociclib and CQ for 48 hours. Scale bars are 50  $\mu$ m. **c)** Representative confocal images and quantification of GFP-LC3 puncta in MDA-MB-468 cells treated with 25  $\mu$ M CQ (for 1 hour), 1  $\mu$ M palbociclib or combination of palbociclib and CQ for 48 hours. Scale bars are 50  $\mu$ m. **d)** Cell counting was used to assess proliferation of TNBC cell lines after combined treatment with DMSO or 1  $\mu$ M palbociclib and/or HCQ (15  $\mu$ M) for 6 days and allowed to recover for 4 days to examine reversibility (p-values calculated in comparison with 1  $\mu$ M palbociclib). **e)** Schematic showing establishment and treatment schedule of patient-derived xenograft (PDX) tumors with vehicle (0.5% methylcellulose and PBS), 60 mg/kg HCQ, 25 mg/kg palbociclib, or palbociclib+ HCQ for 21 days. Images of the mouse and the human body were taken with permission from ScienceSlides by VisiScience Corp. **f)** Percentage change in volume (normalized to volume on Day 0) of the individual PDX tumors after treatment as described in (e) for 21 days (n=4 mice/treatment group). **g)** Representative PDX tumor images from each treatment group harvested at end of 21 days treatment as described in (e). **h)** Individual mouse weights after 21 days of treatment as described in (e). All in vitro data represent mean $\pm$ SD from three independent experiments; p-values were calculated in comparison to DMSO (Control). ns: p>0.05; \*p<0.05; \*\*p<0.01; \*\*\*p<0.001; \*\*\*\*p<0.0001.



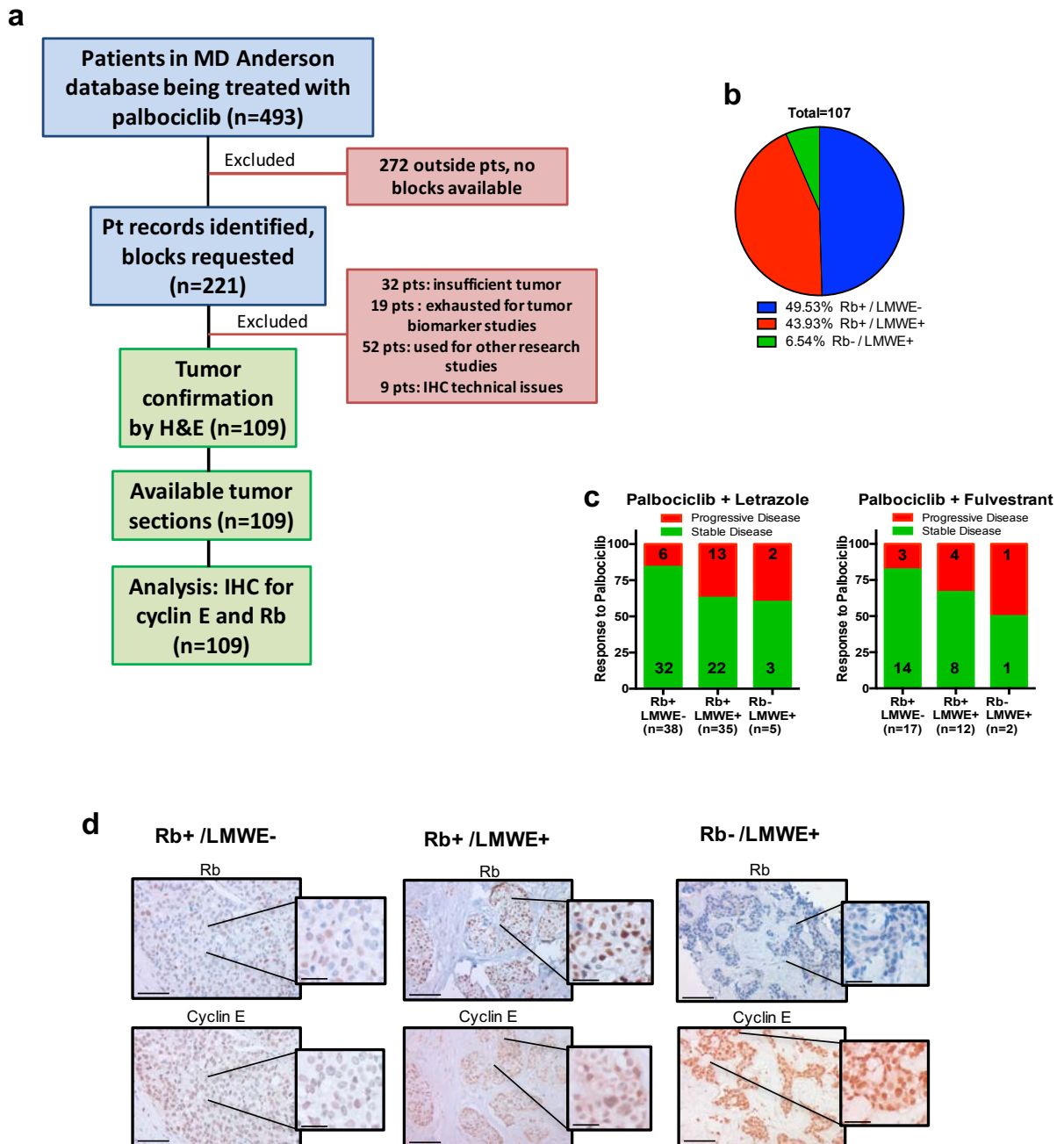
**Supplementary Figure 18. Synergism between autophagy inhibition and palbociclib in solid tumor cell lines with an intact G1/S checkpoint:** **a**) Impact on the growth of the indicated ovarian, lung, pancreatic, colon, and prostate cancer cell lines of treatment with increasing concentrations (conc) of palbociclib (0.01 to 12  $\mu\text{M}$ ) for 1, 2, 4, 6, or 8 days. **b**) Clonogenic assay in the indicated cell lines treated with DMSO (Cnt) or palbociclib (1  $\mu\text{M}$ , 5  $\mu\text{M}$ ) for 6 days and allowed to recover for 6 days. **c**) Cell counting was used to assess proliferation of Hey-A8, 59M, BxPc-3, and PC-3 cells treated with 1  $\mu\text{M}$  palbociclib and/or 15  $\mu\text{M}$  hydroxychloroquine (HCQ) for 6 days and allowed to recover for 4 days to examine reversibility. p-values were calculated in comparison to cells treated with 1  $\mu\text{M}$  palbociclib. **d**) Clonogenic assay in FUOV1, A549, and Du-145 cells treated with DMSO or 1  $\mu\text{M}$  palbociclib (Palbo) and/or HCQ (15  $\mu\text{M}$ ) for 6 days and allowed to recover for 6 days. **e**) Correlation between palbociclib half-maximal inhibitory concentration ( $\text{IC}_{50}$ ) values (obtained from dose-response studies in all cancer cell lines) and levels of Rb and low-molecular-weight cyclin E isoform (LMWE) proteins. All data represent mean  $\pm$  SD from three independent experiments; ns:  $p > 0.05$ ; \* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$ ; \*\*\*\* $p < 0.0001$ .





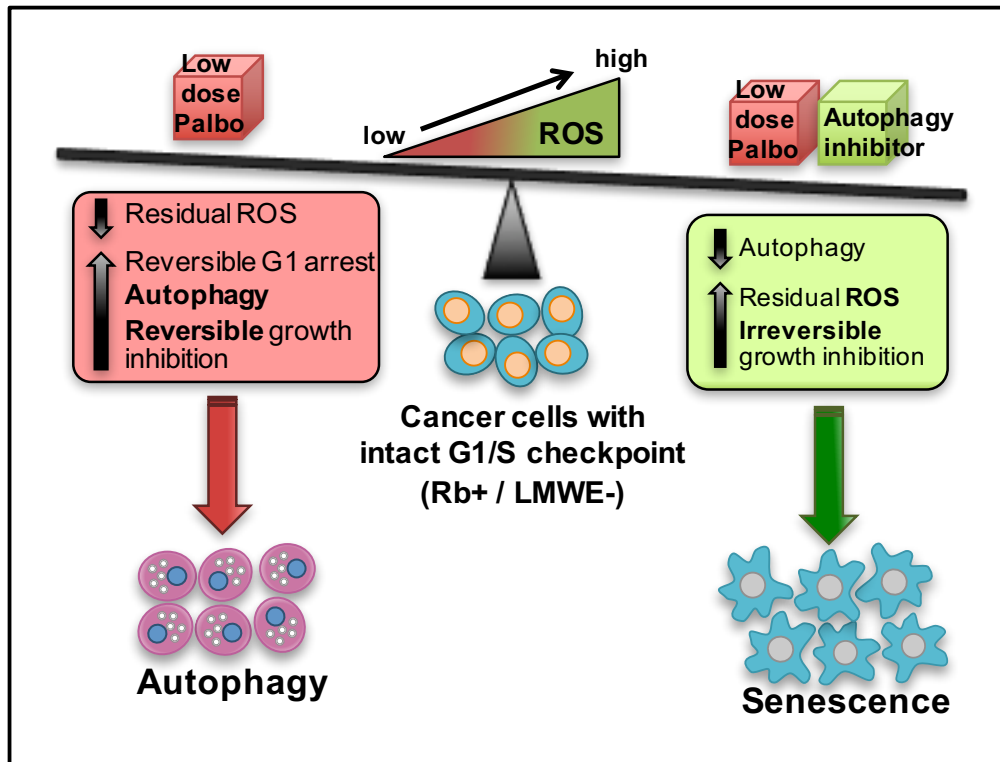
**Supplementary Figure 19. Expression of Rb and low-molecular-weight isoforms of cyclin E in breast cancer patients:** **a)** Alterations in Rb and cyclin E RNA levels in ER+/Luminal A and B (n=321) and TNBC/Basal (n=81) tumors from the TCGA database of breast cancer patients. **b)** Plot showing correlation between mRNA and protein levels of Rb among 817 tumors from the TCGA database of breast cancer patients. **c)** Representative images from immunohistochemical analysis of Rb and LMW-E in tumors from the NCI patient cohort (n=879). Scale bars equal 50  $\mu$ m. **d)** Kaplan Meier curves showing survival of breast cancer patients from the NCI patient cohort when classified based on Rb and LMW-E.





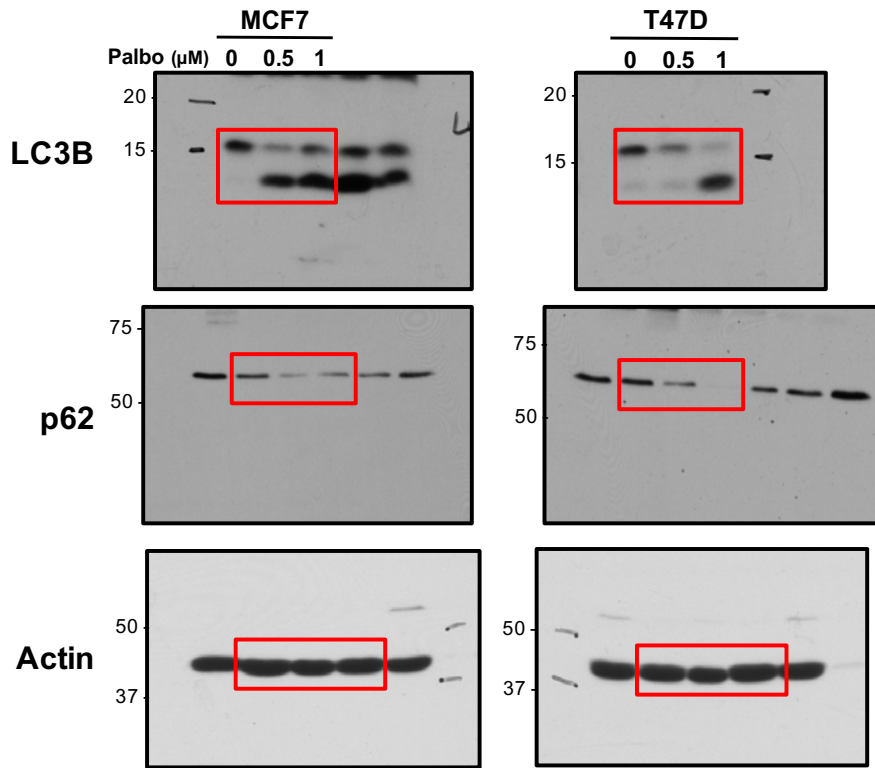
**Supplementary Figure 20. Rb and low-molecular-weight isoforms of cyclin E are prognostic biomarker in ER+ve breast cancer patients:**

**a)** Schematic showing the total number of palbociclib treated patient tissues obtained and stained for Rb and cyclin-E. **b)** Proportions of 54 breast cancer patients treated with palbociclib with Rb+/LMWE-, Rb+/LMWE+ or Rb-/LMWE+ status. **c)** Proportion of 109 breast patients classified based on treatment with letrozole or fulvestrant with Rb+/LMWE-, Rb+/LMWE+ or Rb-/LMWE+ status and their disease progression (response to palbociclib). **d)** Representative images from immunohistochemical analysis of Rb and LMW-E in tumors from patients with ER+ breast cancer treated with palbociclib, classified on the basis of response and Rb/LMW-E status. Scale bars equal 50  $\mu$ m and insert scale bars equal 20  $\mu$ m.

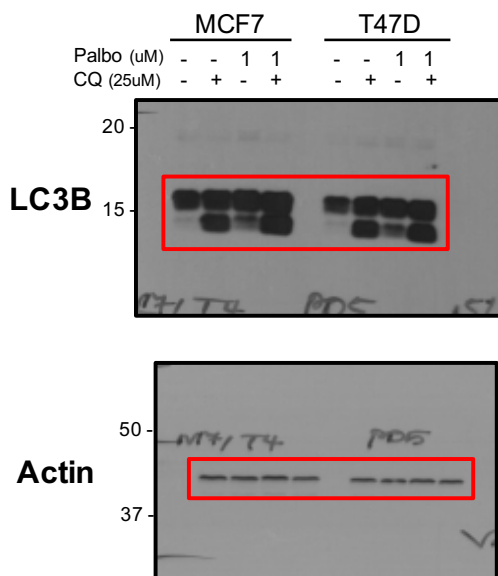


**Supplementary Figure 21. Graphical abstract:** Schematic depicting the role of CDK4/6 inhibition (i.e., palbociclib [Palbo]) and combined CDK4/6 and autophagy inhibition in regulating autophagy, reactive oxygen species (ROS), and senescence in cancer cells with intact G1/S transition.

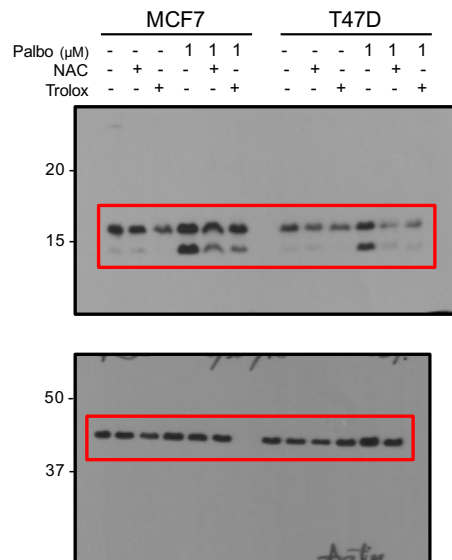
**Supplementary Figure 22: Uncropped blots for main figures**



**Uncropped blots corresponding to Fig. 1g**

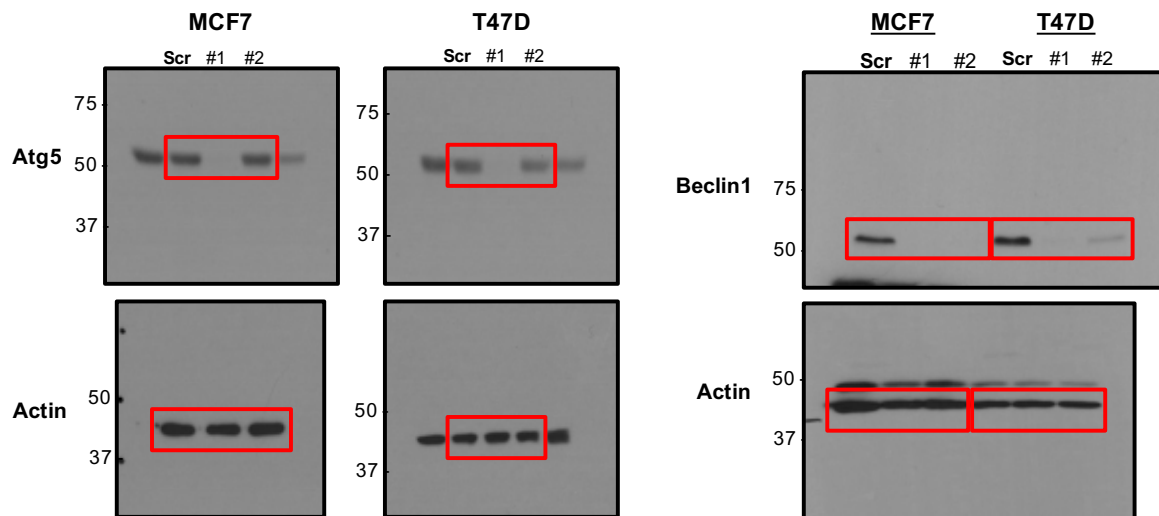


**Uncropped blots corresponding to Fig. 1i**

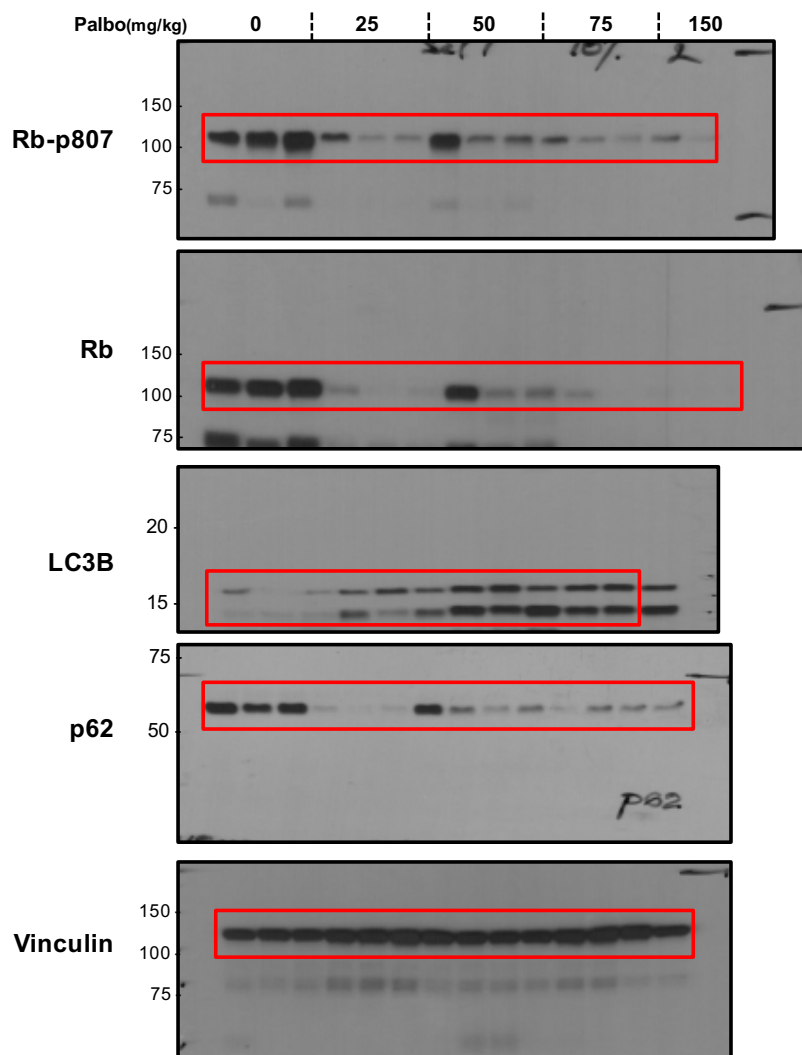


**Uncropped blots corresponding to Fig. 1n**

### Supplementary Figure 22 (contd.): Uncropped blots for main figures

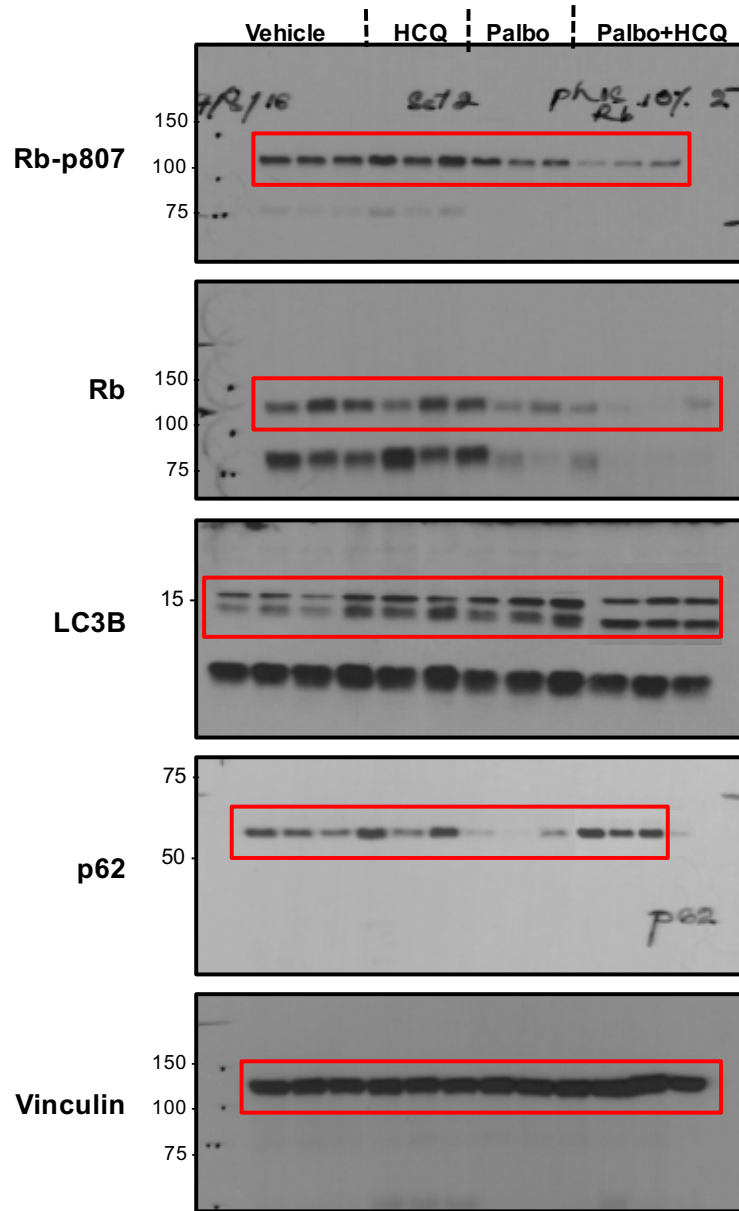


Uncropped blots corresponding to Fig. 2a



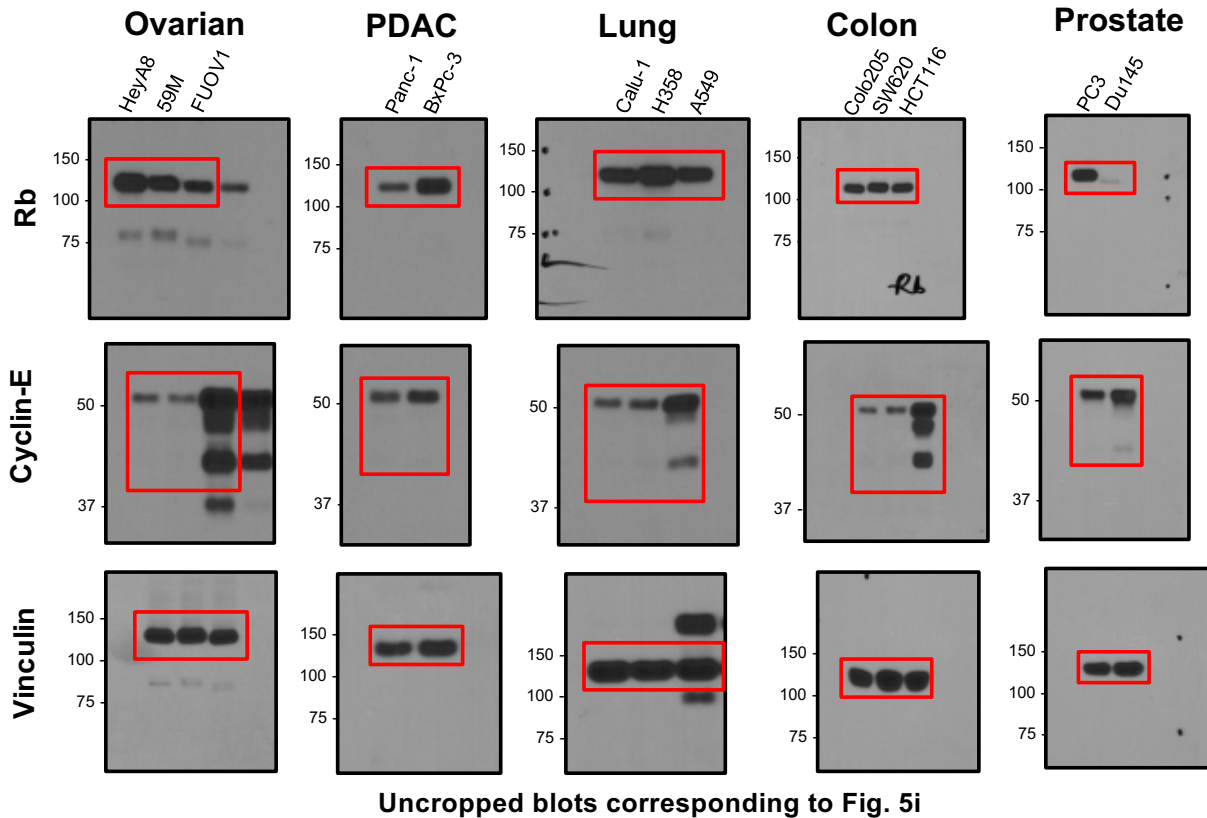
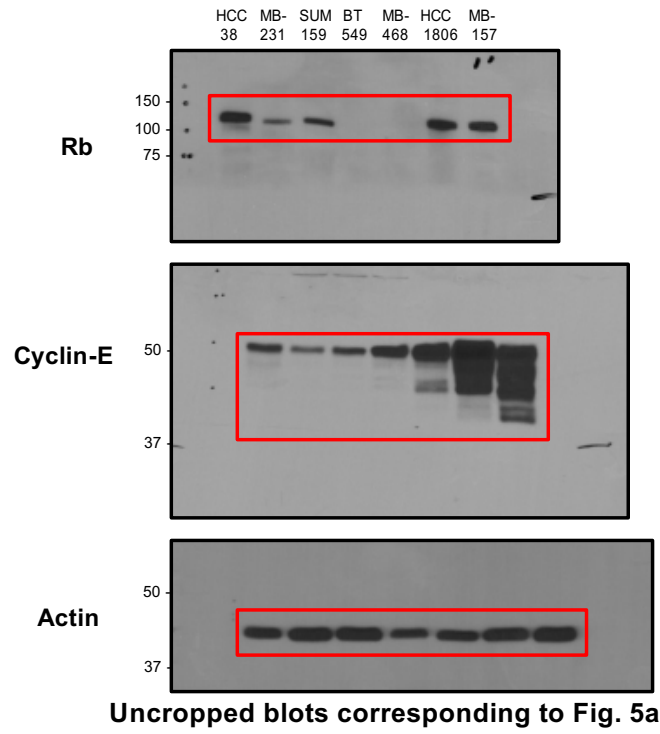
Uncropped blots corresponding to Fig. 3c

Supplementary Figure 22 (contd.): Uncropped blots for main figures

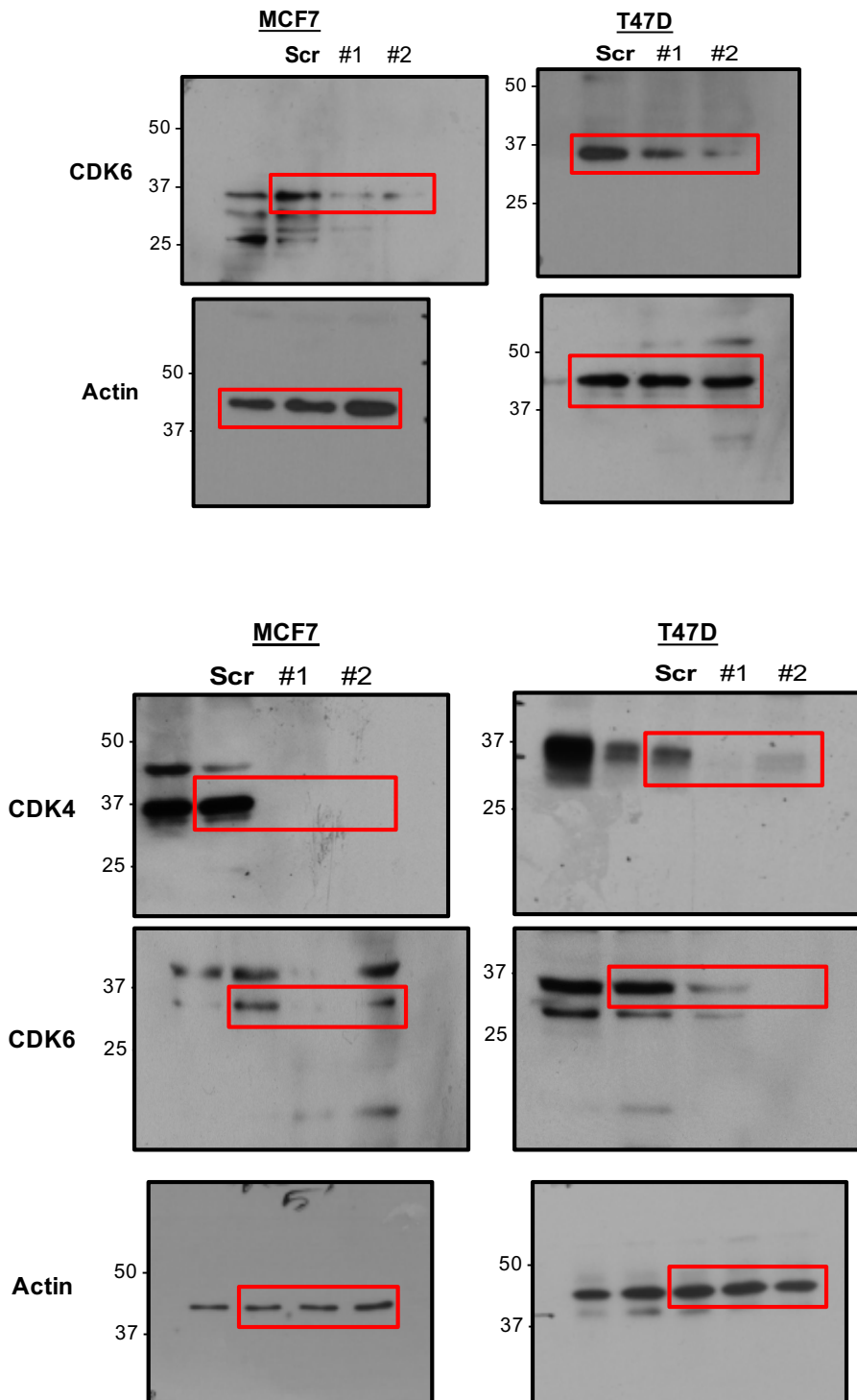


Uncropped blots corresponding to Fig. 3i

**Supplementary Figure 22 (contd.): Uncropped blots for main figures**

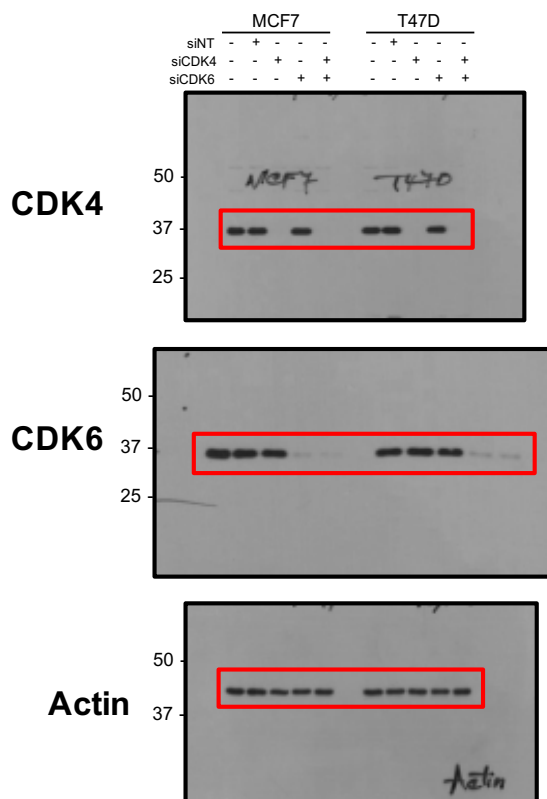


**Supplementary Figure 23: Uncropped blots for supplementary figures**

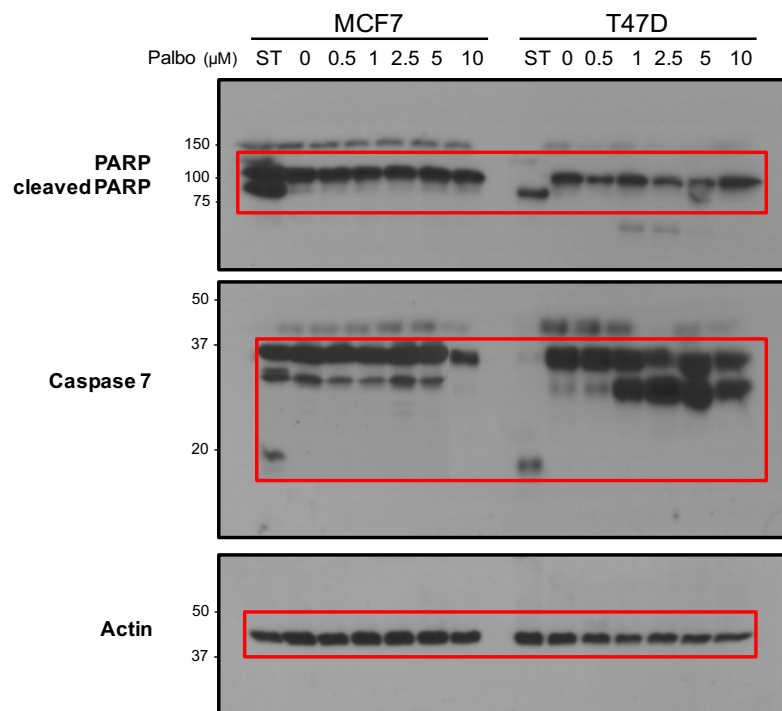


**Uncropped blots corresponding to Supp. Fig. 1c**

**Supplementary Figure 23 (contd.):** Uncropped blots for supplementary figures



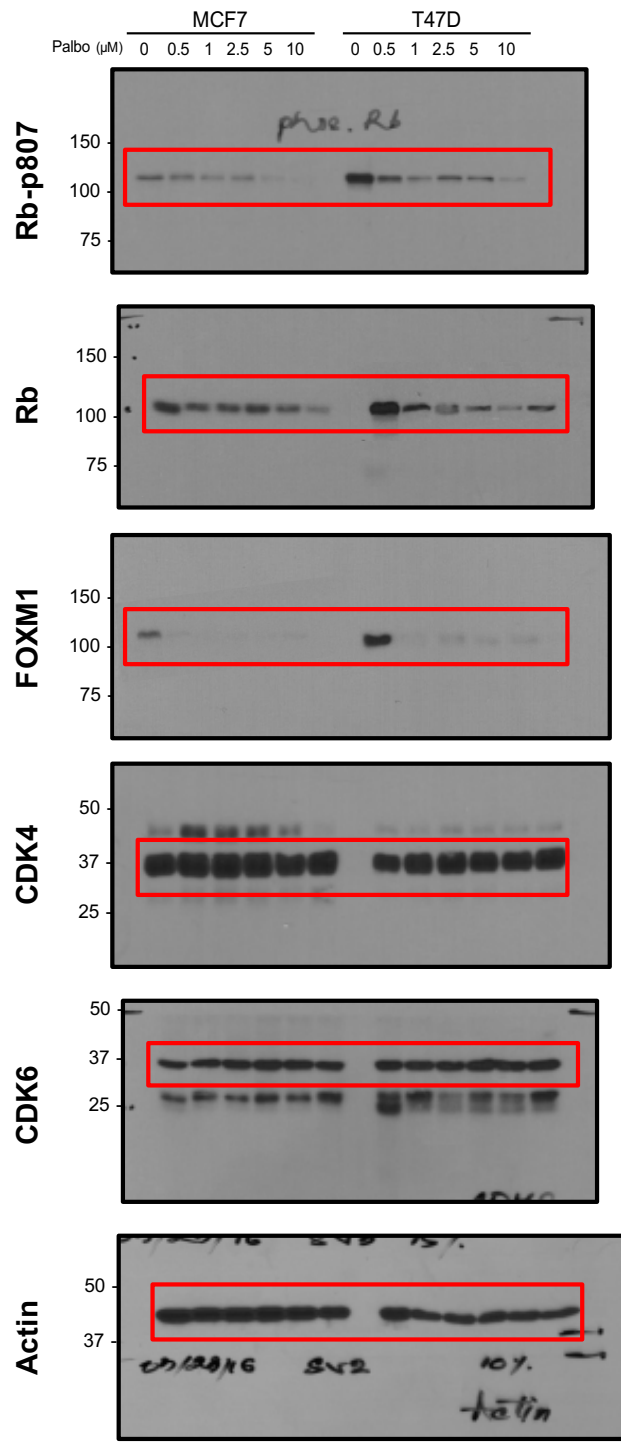
**Uncropped blots corresponding to Supp. Fig. 1f**



**Uncropped blots corresponding to Supp. Fig. 3d**

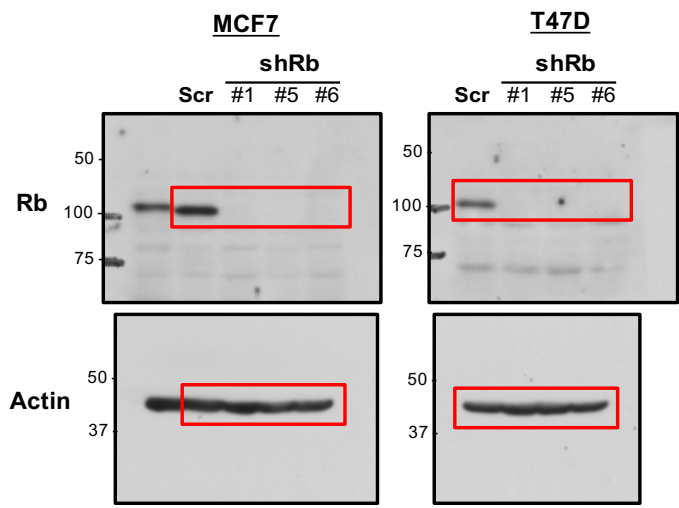


**Supplementary Figure 23 (contd.):** Uncropped blots for supplementary figures

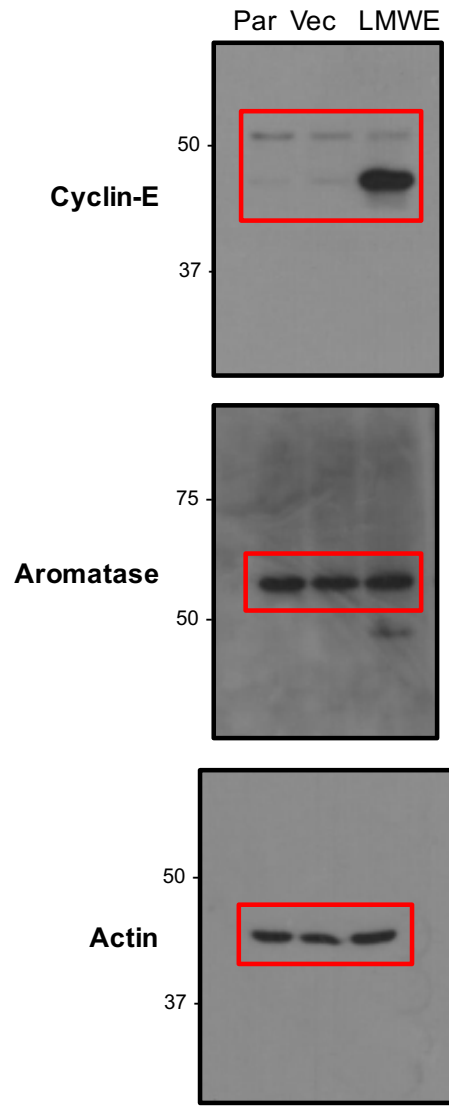


Uncropped blots corresponding to Supp. Fig. 3g

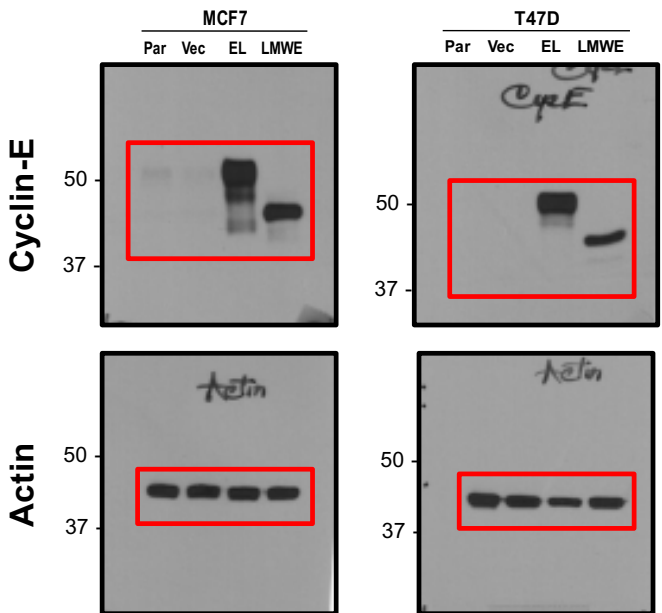
**Supplementary Figure 23 (contd.):** Uncropped blots for supplementary figures



Uncropped blots corresponding to Supp. Fig. 13d



Uncropped blots corresponding to Supp. Fig. 15b



Uncropped blots corresponding to Supp. Fig. 14a

**Supplementary Table 1. Clinical, pathologic, and treatment characteristics of patients treated with palbociclib + letrozole**

| Variable  | N  | 6-month progression rate (%) | 12-month progression rate (%) | P value (Univariate) |
|---|----|------------------------------|-------------------------------|----------------------|
| All patients  | 78 | 22.2                         | 31.0                          |                      |
| Race  |    |                              |                               | 0.3                  |
| White   | 55 | 25.1                         | 33.2                          |                      |
| Others  | 23 | 14.6                         | 24.1                          |                      |
| Clinical tumor stage at diagnosis                         |    |                              |                               | 0.004                |
| 0/I   | 12 | 28.7                         | 52.5                          |                      |
| II  | 20 | 26.3                         | 36.8                          |                      |
| III   | 19 | 38.1                         | 54.2                          |                      |
| IV  | 25 | 0                            | 0                             |                      |
| Unknown   | 1  | 0                            | 0                             |                      |
| Tumor Histology   |    |                              |                               | 0.9                  |
| Ductal  | 67 | 21.6                         | 31.2                          |                      |
| Others  | 11 | 27.1                         | 27.1                          |                      |
| Lymphatic/vascular invasion                               |    |                              |                               | 0.2                  |
| Yes   | 52 | 15.2                         | 24.5                          |                      |
| No  | 24 | 37.5                         | 45.3                          |                      |
| Adjuvant Chemotherapy                                     |    |                              |                               | 0.004                |
| No  | 64 | 16.1                         | 21.5                          |                      |
| Yes   | 14 | 48.7                         | 69.2                          |                      |
| Tumor grade   |    |                              |                               | 0.4                  |
| I/II  | 57 | 25.3                         | 38.9                          |                      |
| III   | 21 | 15.3                         | 15.3                          |                      |
| Progesterone receptor status                              |    |                              |                               | 0.02                 |
| Positive  | 69 | 16.2                         | 26.2                          |                      |
| Negative  | 9  | 70.8                         | 70.8                          |                      |
| Rb status   |    |                              |                               | <b>0.02</b>          |
| Negative  | 5  | 66.7                         | 0                             |                      |
| Positive  | 73 | 20.3                         | 29.2                          |                      |
| LMWE status   |    |                              |                               | <b>0.01</b>          |
| Negative  | 38 | 14.4                         | 18.0                          |                      |
| Positive  | 40 | 30.9                         | 44.2                          |                      |
| Rb/LMWE status  |    |                              |                               | <b>0.006</b>         |
| Rb+/LMWE-   | 38 | 14.4                         | 18.0                          |                      |
| Rb+/LMWE+   | 35 | 27.4                         | 41.4                          |                      |
| Rb-/LMWE+   | 5  | 66.7                         | 0                             |                      |
| Bone /soft tissue vs. any visceral                        |    |                              |                               | 0.03                 |
| Bone / soft tissue  | 51 | 13.7                         | 20.7                          |                      |
| Any visceral  | 27 | 37.1                         | 47.6                          |                      |
| Prior therapy for metastatic disease                      |    |                              |                               | 0.1                  |
| None  | 56 | 16.6                         | 25.8                          |                      |
| Hormonal  | 4  | 25.0                         | 25.0                          |                      |
| Chemotherapy and/or hormonal                              | 18 | 40.9                         | 50.7                          |                      |
| Time from completion of adjuvant hormonal therapy (years) |    |                              |                               | 0.2                  |
| None (de novo metastatic)                                 | 42 | 15.8                         | 23.5                          |                      |
| < 1 year  | 5  | 0                            | 0                             |                      |
| > 1 year  | 31 | 33.0                         | 42.9                          |                      |

\*p value calculated after excluding unknown.

**Supplementary Table 2. Clinical, pathologic, and treatment characteristics of patients treated with palbociclib + fulvestrant**

| Variable  | N  | 6-month progression rate (%) | 12-month progression rate (%) | P value Univariate |
|---|----|------------------------------|-------------------------------|--------------------|
| All patients  | 31 | 17.4                         | 58.0                          |                    |
| Race  |    |                              |                               | 0.9                |
| White   | 25 | 15.9                         | 63.8                          |                    |
| Others  | 6  | 20.0                         | 20.0                          |                    |
| Clinical tumor stage at diagnosis                         |    |                              |                               | 0.2                |
| 0/I   | 7  | 0                            | 33.3                          |                    |
| II  | 7  | 20.0                         | 40.0                          |                    |
| III   | 11 | 14.3                         | 31.4                          |                    |
| IV  | 6  | 46.7                         | -                             |                    |
| Tumor Histology   |    |                              |                               | 0.7                |
| Ductal  | 25 | 15.3                         | 54.4                          |                    |
| Others  | 6  | 25.0                         | -                             |                    |
| Lymphatic/vascular invasion                               |    |                              |                               | 0.8                |
| Yes   | 15 | 16.4                         | 61.0                          |                    |
| No  | 16 | 17.5                         | 45.0                          |                    |
| Adjuvant Chemotherapy                                     |    |                              |                               | <b>0.06</b>        |
| No  | 16 | 25.0                         | 80.3                          |                    |
| Yes   | 15 | 10.0                         | 25.0                          |                    |
| Tumor grade   |    |                              |                               | 0.6                |
| I/II  | 27 | 19.3                         | 55.3                          |                    |
| III   | 4  | 0                            | -                             |                    |
| Progesterone receptor status                              |    |                              |                               | 0.6                |
| Positive  | 28 | 18.4                         | 0                             |                    |
| Negative  | 3  | 58.6                         | -                             |                    |
| <b>Rb status</b>  |    |                              |                               | <b>0.03</b>        |
| Negative  | 2  | -                            | -                             |                    |
| Positive  | 29 | 13.7                         | 56.1                          |                    |
| <b>LMWE status</b>  |    |                              |                               | <b>0.009</b>       |
| Negative  | 17 | 0                            | 52.1                          |                    |
| Positive  | 14 | 58.4                         | 79.2                          |                    |
| <b>Rb/LMWE status</b>                                     |    |                              |                               | <b>0.009</b>       |
| Rb+/LMWE-   | 17 | 0                            | 52.2                          |                    |
| Rb+/LMWE+   | 12 | 52.6                         | 76.3                          |                    |
| Rb-/LMWE+   | 2  | -                            | -                             |                    |
| Bone /soft tissue vs. any visceral                        |    |                              |                               | 0.2                |
| Bone / soft tissue  | 20 | 13.2                         | 62.8                          |                    |
| Any visceral  | 1  | 23.8                         | 68.3                          |                    |
| Prior therapy for metastatic disease                      |    |                              |                               | 0.9                |
| None  | 9  | 16.7                         | -                             |                    |
| Hormonal  | 14 | 16.4                         | 68.7                          |                    |
| Chemotherapy and/or hormonal                              | 8  | 20.0                         | 46.7                          |                    |
| Time from completion of adjuvant hormonal therapy (years) |    |                              |                               | 0.5                |
| None  | 14 | 18.0                         | -                             |                    |
| < 1 year  | 7  | 25.0                         | -                             |                    |
| > 1 year  | 10 | 12.5                         | 41.7                          |                    |

\*p value calculated after excluding unknown.

**Supplementary Table 3. Cox model for univariate analyses for the factors associated with PFS**

| Factor  | Palbociclib + letrozole (n=78) |              |           | Palbociclib + fulvestrant (n=31) |             |           |
|---|--------------------------------|--------------|-----------|----------------------------------|-------------|-----------|
|   | HR                             | P value      | 95% CI    | HR                               | P value     | 95% CI    |
| Age at diagnosis, years                                   | 1.0                            | 0.06         | 0.9-1.0   | 1.0                              | 1.0         | 0.9-1.1   |
| Height (cm)   | 0.6                            | 0.3          | 0.2-1.7   | 1.2                              | 0.02        | 1.02-1.3  |
| Weight  | 1.0                            | 0.8          | 0.9-1.1   | 1.0                              | 0.6         | 0.96-1.02 |
| Race  |                                |              |           |                                  |             |           |
| White   | Referent                       |              |           | Referent                         |             |           |
| Others  | 0.99                           | 0.3          | 0.96-1.01 | 0.8                              | 0.9         | 0.1-6.8   |
| Clinical tumor stage at diagnosis                         |                                |              |           |                                  |             |           |
| 0/I   | Referent                       |              |           | Referent                         |             |           |
| II  | 0.7                            | 0.5          | 0.2-2.2   | 2.0                              | 0.6         | 0.2-21.9  |
| III   | 1.3                            | 0.7          | 0.4-3.9   | 1.7                              | 0.7         | 0.2-18.7  |
| IV  | 0.1                            | 0.02         | 0.01-0.6  | 6.1                              | 0.1         | 0.7-55.0  |
| Tumor Histology   |                                |              |           |                                  |             |           |
| Ductal  | Referent                       |              |           | Referent                         |             |           |
| Others  | 0.9                            | 0.9          | 0.2-3.8   | 1.4                              | 0.7         | 0.3-7.1   |
| Lymphatic/vascular invasion                               |                                |              |           |                                  |             |           |
| Yes   | Referent                       |              |           | Referent                         |             |           |
| No  | 1.8                            | 0.2          | 0.7-4.2   | 0.9                              | 0.8         | 0.2-3.3   |
| Adjuvant Chemotherapy                                     |                                |              |           |                                  |             |           |
| No  | Referent                       |              |           | Referent                         |             |           |
| Yes   | 3.4                            | 0.007        | 1.4-8.2   | 0.3                              | 0.09        | 0.1-1.2   |
| Tumor grade   |                                |              |           |                                  |             |           |
| I/II  | Referent                       |              |           | Referent                         |             |           |
| III   | 0.6                            | 0.4          | 0.2-1.8   | 1.7                              | 0.6         | 0.2-14.6  |
| Progesterone receptor status                              |                                |              |           |                                  |             |           |
| Positive  | Referent                       |              |           | Referent                         |             |           |
| Negative  | 3.2                            | 0.02         | 1.2-8.9   | -                                |             |           |
| <b>Rb status</b>  |                                |              |           |                                  |             |           |
| Negative  | Referent                       |              |           | Referent                         |             |           |
| Positive  | 0.2                            | <b>0.04</b>  | 0.04-0.9  | 0.09                             | <b>0.09</b> | 0.01-1.4  |
| <b>LMWE status</b>  |                                |              |           |                                  |             |           |
| Negative  | Referent                       |              |           | Referent                         |             |           |
| Positive  | 3.2                            | <b>0.02</b>  | 1.2-8.2   | 5.2                              | <b>0.02</b> | 1.3-20.3  |
| <b>Rb/LMWE status</b>                                     |                                |              |           |                                  |             |           |
| Rb+/LMWE-   | Referent                       |              |           | Referent                         |             |           |
| Rb+/LMWE+   | 2.9                            | <b>0.03</b>  | 1.01-7.6  | 4.7                              | <b>0.03</b> | 1.1-19.3  |
| Rb-/LMWE+   | 9.2                            | <b>0.008</b> | 1.8-47.4  | 23.8                             | <b>0.04</b> | 1.3-450.1 |
| Bone /soft tissue vs. any visceral                        |                                |              |           |                                  |             |           |
| Bone / soft tissue  | Referent                       |              |           | Referent                         |             |           |
| Any visceral  | 2.6                            | 0.03         | 1.1-6.2   | 2.2                              | 0.2         | 0.6-8.3   |
| Prior therapy for metastatic disease                      |                                |              |           |                                  |             |           |
| None  | Referent                       |              |           | Referent                         |             |           |
| Hormonal  | 0.9                            | 0.9          | 0.1-6.8   | 0.8                              | 0.8         | 0.1-4.6   |
| Chemotherapy and/or hormonal                              | 2.6                            | 0.04         | 1.03-6.7  | 0.6                              | 0.7         | 0.1-5.5   |
| Time from completion of adjuvant hormonal therapy (years) |                                |              |           |                                  |             |           |
| None  | Referent                       |              |           | Referent                         |             |           |
| < 1 year  | 7.32e-16                       | 1.0          | 0-        | 2.1                              | 0.4         | 0.3-13.0  |
| >= 1 year   | 1.9                            | 0.2          | 0.8-4.4   | 0.7                              | 0.7         | 0.2-3.4   |

**Supplementary Table 4. Cox model for multivariable analyses for the factors associated with PFS**

| Factor                               | Palbociclib + letrozole |             |           | Palbociclib + fulvestrant |             |          |
|--------------------------------------|-------------------------|-------------|-----------|---------------------------|-------------|----------|
|                                      | HR                      | P value     | 95% CI    | HR                        | P value     | 95% CI   |
| Progesterone receptor status         |                         |             |           |                           |             |          |
| Positive                             | Referent                |             |           | Referent                  |             |          |
| Negative                             | 4.5                     | 0.007       | 1.5-13.4  |                           | NS          |          |
| Prior therapy for metastatic disease |                         |             |           |                           |             |          |
| None                                 | Referent                |             |           | Referent                  |             |          |
| Hormonal                             | 2.4                     | 0.4         | 0.3-21.4  |                           | NS          |          |
| Chemotherapy and/or hormonal         | 4.1                     | 0.006       | 1.5-11.2  |                           | NS          |          |
| <b>Rb status</b>                     |                         |             |           |                           |             |          |
| Negative                             | Referent                |             |           | Referent                  |             |          |
| Positive                             | 0.2                     | <b>0.06</b> | 0.04-1.03 | 0.2                       | <b>0.3</b>  | 0.01-3.3 |
| <b>LMWE status</b>                   |                         |             |           |                           |             |          |
| Negative                             | Referent                |             |           | Referent                  |             |          |
| Positive                             | 3.2                     | <b>0.03</b> | 1.1-8.7   | 4.7                       | <b>0.03</b> | 1.1-19.3 |
| <b>C-index</b>                       |                         |             | 0.76      |                           |             |          |
| CPE                                  |                         |             | 0.73      |                           |             |          |
| AIC                                  |                         |             | 153.3     |                           |             |          |