**Supplementary Tables**

**Table S1. Summary of the immunosuppressant, antimalarial and corticosteroid use during the study**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | 3 monthsAZA EC-MPS  |  6 months AZA EC-MPS  | 12 monthsAZA EC-MPS  | 24 months AZA EC-MPS (  |
| Prednisone dose, mean (SD), mg/day Prednisone reduced by ≥50%, n (%)aPrednisone dose reduced from baselineto ≤ 7.5 mg/day, n (%)bPrednisone dose increased to >7.5 mg/day, n (%)cAzathioprine dose, mean (SD), mg/dayEC-MPS dose, mean (SD), g/dayAntimalarial use, n (%) |   9 (8) 7 (5)\*  76 (67) 87 (75) 60 (58) 76 (76) 16 (13) 5 (4)\* 126 (23)  1.3 (0.27) 105 (88) 93 (78) |   8 (11) 7 (8)  89 (78) 89 (77)  79 (77) 81 (83)  23 (19) 14 (12)  126 (23)  1.3 (0.27) 105 (88) 93 (78) |   6 (8) 5 (3)  89 (78) 100 (86)\* 82 (80) 90 (92)  9 (8) 16 (13)  116 (24)  1.12 (0.35) 104 (87) 91 (76) |   7 (9) 4 (2)\* 89 (78) 104 (90)\*  86 (83) 93 (95) 16 (13) 3 (3)\*  100 (22)  0.92 (0.47) 103 (87) 85 (72) |

\*p <0.05, enteric-coated mycophenolate sodium (EC-MPS) group compared with the azathioprine (AZA) group by Mann-Whitney U test.

a Patients with average dose reduced by 50% compared to baseline. The analysis was on patients taking prednisone at baseline. (Number of patients per treatment group: EC- MPS=116 and AZA=114).

b Patients with average dose reduced to ≤7.5 from baseline during the study. The analysis was on patients with baseline prednisone dose >7.5 mg/day. (Number of patients per treatment group: EC-MPS= 98 and AZA= 103).

 c Patients with average prednisone dose increased to >7.5 mg/day compared to previous visit.

**Table S2. Clinical response outcomes**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | 3 months AZA EC-MPSN N % (95% CI) N % (95% CI) |  6 months AZA EC-MPS N % (95% CI) N % (95% CI) | 12 months AZA EC-MPS N % (95% CI) N % (95% CI) | 24 monthsaAZA EC-MPS N % (95% CI) N % (95% CI) |
| Clinical RemissionPartial clinical Response Treatment FailurebSRI4 responseLLDAS response |  23 19 (12-26) 39 32 (24-41)\* 43 35 (27-45) 41 34 (26-43)  6 5 (1-9) 0 (0-2) 75 63 (54-71) 93 78 (70-85) 25 21 (13-28) 42 35 (26-44) | 41 34 (26-43) 64 53 (44-62)\* 35 29 (21-37) 28 23 (16-31) 19 16 (9-22) 9 8 (3-12)80 67 (58-75) 99 83 (76-89)\*53 44 (35-53) 76 65 (56-74)†  | 56 46 (38-56) 82 68 (60-77)† 37 30 (22-39) 24 20 (13-27)31 26 (18-34) 18 15 (9-22)82 68 (60-77) 108 90 (85-95)‡68 57 (48-66) 95 79 (72-87)‡  | 57 48 (39-57) 84 71 (63-79)‡25 22 (14-29) 14 24 (15-31)38 32 (23-40) 22 18 (11-25)85 72 (64-80) 109 92 (88-97)‡ 68 58 (49-67) 102 86 (80-93)‡  |

AZA = Azathioprine; EC-MPS = Enteric-coated mycophenolate sodium; SRI4: SLE responder index defined as a ≥ 4-point reduction in SLEDAI-2K score; no new BILAG 2004 A or >1 new BILAG 2004 B domain scores; and <0.3-point deterioration in physician’s global assessment (31); LLDAS: Lupus Low disease activity state defined as (1) SLE Disease Activity Index (SLEDAI)-2K ≤4, with no activity in major organ systems (renal, central nervous system (CNS), cardiopulmonary, vasculitis, fever) and no haemolytic anaemia or gastrointestinal activity; (2) no new lupus disease activity compared with the previous assessment; (3) a Safety of Estrogens in Lupus Erythematosus National Assessment (SELENA)-SLEDAI physician global assessment (scale 0-3) ≤1; (4) a current prednisolone (or equivalent) dose ≤7.5 mg daily; and (5) well tolerated standard maintenance doses of immunosuppressive drugs and approved biological agents (32)

a Two patients in each group were lost to follow-up.

b Values correspond to the cumulative number of patients over time.

\*p <0.05, †p<0.01, ‡p<0.0001, enteric-coated mycophenolate sodium (EC-MPS) group compared with the azathioprine (AZA) group.