Supplementary Figures

Figure S1. **Study Flow-chart according to reinterpreted Luminex EDTA-SAFB donor-specific anti-HLA antibody (r-DSA) classification**

DSA, donor-specific anti-human leukocyte antigen (HLA) antibody; LTx, lung transplantation; SAFB: single-antigen flow bead; rDSA, reinterpreted EDTA-SAFB donor-specific anti-HLA antibody.

n = 168 patients, 2009-2012 > 6 mo post LTx ≥1 SAFB 6-12 mo

Historical Luminex-SAFB

DSA- n = 100

- DSA- n = 100
- DSA+ n = 68

New Luminex EDTA-SAFB Re-interpreted

rDSA- n = 14

- rDSA- n = 14
- rDSA+ n = 53

rDSA+ n = 53

C1q SAFB

- DSA- n = 100
- DSA+C1q- n = 41
- DSA+C1q- n = 27
- rDSA- n = 114
- rDSA+C1q- n = 40
- rDSA+C1q+ n = 13

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*DSA historical Classification SAFB/C1q*

* rDSA Re-interpreted classification Re-EDTA-SAFB/C1q
Figure S2-A. **Freedom from CLAD according to reinterpreted Luminex EDTA-SAFB donor-specific anti-HLA antibody (r-DSA) status after transplantation.** Probability of freedom from CLAD by presence or absence of donor-specific anti-HLA antibody detected by reinterpreted Luminex EDTA-SAFB (r-DSA).
Figure S2-B. **Freedom from CLAD by presence of C1q-binding r-DSA**

Probability of freedom from CLAD by presence or absence of r-DSAs and their C1q-binding capacity.
Figure S3-A. **Kaplan–Meier Curves for graft survival according to reinterpreted Luminex EDTA-SAFB donor-specific anti-HLA antibody (r-DSA) status after transplantation.** Probability of graft survival by presence or absence of donor-specific anti-HLA antibody detected by reinterpreted Luminex EDTA-SAFB (r-DSA).
Figure S3-B. **Kaplan–Meier Curves for graft survival according to reinterpreted Luminex EDTA-SAFB donor-specific anti-HLA antibody (r-DSA) status after transplantation.** Probability of graft by presence or absence of r-DSAs and their C1q-binding capacity.
Figure S4-A, S4-B, S4-C. Freedom from chronic allograft dysfunction (CLAD) by donor-specific anti-HLA antibody status after transplantation for each lung transplant center: S1-A) Bichat hospital, S1-B) Foch hospital, S1-C) Marie-Lannelongue hospital.
Figure S5. **Comparison of the frequency of severe CLAD between patients without donor-specific antibody (DSA), patients with non-C1q-binding DSAs, and patients with C1q-binding DSAs.** Frequency of severe CLAD was higher with patients with C1q-binding DSA (n=14 [52%]), as compared to patients without DSA (n=17 [17%]; p=0.0006) or non-complement-binding DSA patients (n=10 [24%], p=0.03).

Figure S6. **Comparison of the mean of MFI values between DSAs with and without corresponding C1q-binding.** DSA, classical single-antigen flow bead (SAFB)-detected donor-specific antibodies. MFI, mean fluorescence intensity.
Figure S7. **Comparison of the mean (SEM) of MFI values between rDSAs with and without corresponding C1q-binding.** rDSA, reinterpreted EDTA-SAFB donor-specific antibodies. SAFB, single-antigen flow bead. MFI, mean fluorescence intensity.

Figure S8. **Comparison of the mean (SEM) of MFI values detected in C1q assay between DSAs and rDSAs.** Donor-specific antibodies (DSAs) are detected by classical single-antigen flow bead (SAFB), and rDSA by reinterpreted EDTA-SAFB assay.