Variable	CHER Children with virological failure before 1year (n=7)	Children included in single genome study (n=10)
Median age (IQR) at treatment failure in weeks	46.3 (46.1-52.0)	54.6 (54.1-56.6)
CD4%	33.9 (29.5-40.7)	31.8 (30.8-33.7)
CD4 Count (cells/mm^3)	2084 (1455-2829)	2460.5 (1215-2695)
Log_{10} HIV RNA (copies/ml)	4.6 (4.2-5.9)	5.5 (4.8-5.9)
Median length of time on treatment in weeks (IQR)	41 (40-48)	48 (40-48)
CDC Stage B Disease (%)	0 (0)	0 (0)
Severe CDC Stage B Disease (%)	0 (0)	0 (0)

Table S1: Comparison of characteristics of SGS study participants with CHER participants with virologic failure of ART before 1 year.

Study ID	Therapy status			Comments
	Early ART	No ART	Re-started ART	
	Duration (weeks)			
A	0 - 273			-
B	0 - 96	97-164		-
C	0 - 40			d4T, 3TC, LPV/r from Week 40 – 313
D	0 - 316			-
E*	0 - 44			-
F	0 - 40			-
G*	0 - 99			RTV-superboost from week 96 – 106 of early ART
H	0 - 96	97 - 164		RTV-superboost from week 48 – 65 of early ART
I	0 - 96	97 - 164	165-272	-
J	0 – 96	97 - 164	165 - 298	RTV-superboost from Weeks 88 – 96 of early ART

Table S2: Antiretroviral history for each child participating in this study. Early ART was started within 1 week of birth for each child and consisted of AZT, 3TC and LPV/r. Three children received additional RTV to achieve mg:mg parity with LPV (RTV-superboost) and 1 child had AZT substituted for stavudine (d4T) at week 40 of ART as indicated in the comments section. "*" Indicated those children who died by the end of the CHER trial from non-AIDS related causes.