Nixon et al. Biological vulnerability to depression: linked structural and functional brain network findings. Br J Psychiatry – doi: 10.1192/bjp.bp.113.129965

	Non-recurrence patient group (<i>n</i> =11)		Recurrence patient group (<i>n</i> =7)		Lost to follow-up (<i>n</i> =2)	
	Number taking drug	Average dose (mg)	Number Taking Drug	Average Dose (mg)	Number Taking Drug	Average Dose (mg)
Venlafaxine	4	225	2	225	0	n/a
Mirtazapine	1	15	1	45	0	n/a
Fluoxetine	1	20	0	n/a	0	n/a
Sertraline	2	100	0	n/a	0	n/a
Citalopram	1	50	0	n/a	1	20
Trazodone	1	250	0	n/a	0	n/a
Dosulepin	1	225	0	n/a	0	n/a
Lithium	3 ^b	733	0	n/a	0	n/a
Lamotrigine	1^{b}	50	0	n/a	0	n/a

Table DS1 Maintenance-phase antidepressant medication taken within the patient group, grouped by non-recurrence, recurrence or loss to follow-up over 1 year

n/a, not applicable.

a. Overall, 14 patients took 19 medications (at a maximum of two medications each); and 6 patients were not on any antidepressant medication.

b. All psychiatric medication was prescribed for unipolar major depressive disorder, with lithium and lamotrigine prescribed as augmenting agents to relieve previous episodes of unipolar depression, and continued thereafter as maintenance-phase medication to reduce recurrence risk.

Data supplement

We conducted a functional connectivity analysis based in the hypergyric left anterior cingulate cortex cluster identified in the gyrification analysis using an 8 mm seed region (as in the main default mode network analysis) centred on the peak coordinate for hypergyrification (-5, 30, 9). Across-group (*n*=40) findings, thresholded as in the main functional connectivity analysis (*T*=5.23), showed positive connectivity with rostral and ventral extensions of the anterior cingulate cortex (BA 24 and BA 32), medial prefrontal cortex (BA 10) and with the posterior anterior cingulate cortex (BA 31). There was no significant hyperconnectivity in the patient group > controls, either at whole-brain level or within a mall volume correction of the 'dorsal nexus' sites. There was one significant area of hyperconnectivity for controls > patients at whole-brain cluster-level, within a left posterior temperoparietal area incorporating the supramarginal gyrus (cluster 33 voxels, cluster-level P_{FDR-corr}=0.005, peak *T*=4.24 at -45, -48, 27).