**Table S1. Methodology: Definitions for ITT and PP analysis**

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|  | **Definitions of ITT and PP analysis** | |  |
|  | (non randomised trial, treatment allocation based on treatment guidelines) | |  |
|  |  |  |  |
|  | **ITT (intention to treat)** | |  |
|  |  | including all those who started on MIL treatment and discontinued treatment (default, switch) |  |
|  |  |  |  |
|  |  | exclusion of those lost to follow-up (at the considered time-point) |  |
|  |  | exclusion of those who died for VL-unrelated causes |  |
|  | **ITT worst case** | |  |
|  |  | including all those who started on MIL treatment regardless of treatment protocol completion |  |
|  |  | including those lost to follow-up, whereby these are considered as failures |  |
|  |  | (inclusion of those who died for VL-unrelated causes: they could have relapsed later but they are now "lost to follow up" because of their premature death) | |
|  | **PP (per protocol)** | |  |
|  |  | excluding those who did not complete treatment due to default, severe adverse events of transfer to another health facility (mainly because of complications) | |
|  |  | including those who died under treatment |  |
|  |  | excluding those who died for VL unrelated causes |  |