

## Supplementary Tables

<b>Table S1. CTC transcriptome gene panel</b>	
<b>Gene</b>	<b>Relevance to PCa</b>
<i>ADAMTS9</i>	ADAMTS9 is a potential biomarker for liquid biopsies in PCa.
<i>AGR2</i>	AGR2 promotes metastasis in PCa.
<i>AKR1C3</i>	AKR1C3 facilitates intratumoral androgen biosynthesis and androgen receptor activation.
<i>AMACR</i>	AMACR has been found upregulated in various PCa databases, including the PRAD TCGA database.
<i>AOX1</i>	AOX1 expression is correlated with biochemical recurrence.
<i>AR</i>	AR-signaling drivers both castration sensitive and insensitive PCa.
<i>ARv7</i>	AR splice variant 7 is insensitive to available ARSIs.
<i>BIRC5</i>	BIRC5 is upregulated in primary and metastatic PCa.
<i>BMP6</i>	BMP6 is overexpressed in PCa and associates with invasiveness.
<i>BRCA1</i>	Tumor suppressor, DNA damage response.
<i>BRCA2</i>	Tumor suppressor, DNA damage response.
<i>CCNE2</i>	CCNE2 promotes proliferation of PCa.
<i>DLX1</i>	DLX1 is a well-established biomarker for PCa.
<i>EN2</i>	EN2 is secreted in PCa but not normal prostate tissue.
<i>EPCAM</i>	EPCaM is an epithelial cell marker and a putative target in CTC technologies such as CellSearch.
<i>ERG</i>	ERG overexpression modulates transcription to drive PCa development.
<i>EYA4</i>	Deregulated EYA4 expression promotes progression in various cancers.
<i>FAM107A</i>	FAM107A expression is deregulated in PCa and is potential biomarker and therapeutic target.
<i>FANCA</i>	Germline FANCA alterations increase sensitivity to DNA damage repair agents.
<i>FAT1</i>	FAT1 regulates apoptosis in PCa.
<i>FOLH1</i>	FOLH1 is expressed in AR-positive, but not in AR-negative CRPC.
<i>FOXA1</i>	Facilitates AR-chromatin interactions and enables binding of AR to noncanonical sites.
<i>GHR</i>	GHR drives PCa progression.
<i>GLYATL1</i>	GLYATL1 is androgen regulated and upregulated in PCa.
<i>GNMT</i>	GNMT promotes PCa proliferation by regulating apoptosis.
<i>GRHL2</i>	GRHL2 is an AR coregulator with an essential role in the oncogenic AR signaling axis.
<i>HOXB13</i>	HOXB13 regulates AR expression as well as AR/ARv7 chromatin binding in mCRPC.
<i>HOXC6</i>	HOXC6 is an androgen-independent AR cofactor.
<i>ITGBL1</i>	ITGBL1 promotes EMT, invasion and migration in PCa.
<i>KIF11</i>	KIF11 is a prognostic marker for survival in mCRPC.
<i>KIF20A</i>	KIF20A promotes progression to mCRPC via autocrine activation of the AR.
<i>KLK2</i>	Canonical target of AR signaling.
<i>KLK3</i>	Canonical target of AR signaling.
<i>KRT14</i>	KRT14 expression is a marker for basal PCa cells.
<i>KRT5</i>	KRT5 positive and KRT14 negative PCa cells have a unique phenotype and are androgen independent.
<i>MYO6</i>	MYO6 promotes cellular motility and PCa cell invasiveness.
<i>NAALADL2</i>	NAALADL2 promotes metastatic phenotypes in PCa.
<i>NKX3-1</i>	Collaborates with the AR in androgen dependent PCa.
<i>PAX8</i>	Expression of fusion gene PAX8-GLIS3 dysregulates SHH signaling.

<i>PCDHB2</i>	PCDHB2 has been found upregulated in various PCa databases, including the PRAD TCGA database.
<i>PMEPA1</i>	PMEPA1 is potential biomarker and therapeutic target in PCa.
<i>PPFIA2</i>	PPFIA2 is a marker for aggressive PCa.
<i>PRR16</i>	PRR16 has been found upregulated in various PCa databases, including the PRAD TCGA database.
<i>PRSS8</i>	Is aberrantly expressed in PCa.
<i>RORC</i>	RORC is upregulated in mCRPC.
<i>RRM2</i>	RRM2 is involved with DNA damage repair and associates with poor clinical outcomes in PCa.
<i>SIM2</i>	SIM2 promotes the onset and progression of PCa.
<i>SLC25A33</i>	SLC25A33 promotes survival of malignant cells by preventing mitochondrial dysfunction.
<i>SOX2</i>	SOX2 promotes metastatic progression via metabolic reprogramming.
<i>SPOCK3</i>	SPOCK3 expression correlates with PFS in PCa.
<i>SRD5A1</i>	SRD5A1 facilitates intratumoral androgen biosynthesis and androgen receptor activation.
<i>STEAP1</i>	STEAP1 is overexpressed in PCa and the target of many emerging immunotherapies.
<i>TDRD1</i>	TDRD1 serves as a potential biomarker due to its overexpression in the majority of PCa cases.
<i>TERT</i>	High TERT expression associates with disease recurrence in PCa.
<i>TFF1</i>	Trefoil factors (TFFs) enhance proliferation, invasion, metastasis, and angiogenesis and inhibit apoptosis.
<i>TLCD1</i>	TLCD1 has been found upregulated in various PCa databases, including the PRAD TCGA database.
<i>TMPRSS2</i>	TMPRSS2 drives ERG overexpression in 55% of PCa cases.
<i>TMPRSS2-ERG</i>	Fusion of TMPRSS2 to ERG drives ERG overexpression.
<i>TOP2A</i>	TOP2A promotes PCa progression via collaboration with the AR.
<i>TRPM8</i>	TRPM8 is a potential therapeutic target in androgen dependent PCa.
<i>TUSC3</i>	A tumor suppressor gene.
<i>VSTM2L</i>	VSTM2L expression is prognostic in various cancers and correlates with immune cell infiltration.
<i>WNT5A</i>	WNT5A1 induces dormancy in PCa cells.
<i>WNT7B</i>	WNT7B is AR regulated and promotes androgen-independent growth in CRPC.

**Table S2. Baseline blood parameters of 'Group 1' and 'Group 2'**

<b>Characteristic, mean (range)</b>	<b>Group 1</b>	<b>Group 2</b>
Lymphocytes (10 <sup>9</sup> /L)	1.3 (0.6-2.2)	1.5 (0.7-2.6)
Leukocytes (10 <sup>9</sup> /L)	6.7 (3-11.5)	9.2 (5-11.5)
Neutrophils (10 <sup>9</sup> /L)	4.7 (2.1-9.6)	4.4 (2.5-9.6)
Thrombocytes (10 <sup>9</sup> /L)	234.6 (116-359)	250 (119-359)
Alkaline phosphatase (U/L)	334.5 (67-1866)	103.6 (54-229)
Hb (mmol/L)	8.0 (6.6-9.4)	8.3 (6.7-9.2)
LD (U/L)	283.5 (123-663)	202.2 (111-663)
PSA µg/L	215.8 (3.6-1600)	40.8 (1.2-130)
Testosterone nmol/L	<0.4	<0.4 (<0.4-0.7)

**Table S3. Baseline blood parameters of 'ARSI 1' and 'ARSI 2'**

<b>Characteristic, mean (range)</b>	<b>ARSI 1</b>	<b>ARSI 2</b>
Lymphocytes (10 <sup>9</sup> /L)	1.3 (0.6-2)	1.8 (0.9-3.1)
Leukocytes (10 <sup>9</sup> /L)	7 (4.9-9.5)	10.3 (4.8-68)
Neutrophils (10 <sup>9</sup> /L)	4.9 (2.7-8.1)	4 (2.5-6.1)
Thrombocytes (10 <sup>9</sup> /L)	251.7 (186-323)	257.2 (190-418)
Alkaline phosphatase (U/L)	255.3 (79-701)	99.9 (54-229)
Hb (mmol/L)	8.2 (7.3-9.4)	8.3 (6.7-9.2)
LD (U/L)	254.5 (188-317)	188.9 (111-257)
PSA µg/L	130.1 (6.7-470)	39.8 (1.2-180)
Testosterone nmol/L	<0.4	<0.4

**Table S4. Baseline alkaline phosphatase and PSA per therapy**

<b>Cohort</b>	<b>Alk Phos (U/L)</b>	<b>PSA (µg/L)</b>
Therapy agnostic, mean (range)	195.9 (54-1866)	110.8 (1.2-1600)
ARSI, mean (range)	142.3 (54-701)	64.4 (1.2-470)
Chemotherapy, mean (range)	208.1 (54-1016)	81.5 (4.8-450)
Immuno, mean (range)	120 (103-137)	82 (44-120)
Radioligand	110.3 (82-178)	81 (39-160)
PARPi, mean (range)	99 (94-104)	120 (110-130)
Active surveillance	715.7 (63-1866)	557.3 (24-1600)

**Table S5. Healthy volunteer demographics**

<b>Characteristics</b>	<b>Statistics</b>
Num. of samples	29
Age, median (range)	50 (22-71)
Sex, Num. (%)	
Male	19 (66%)
Female	10 (34%)
Men aged > 50, Num. (%)	9 (47%)
Men aged < 50, Num. (%)	10 (53%)

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**Table S6. TSO500 PCa gene panel**

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AKT1

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AKT2

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AKT3

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AR

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ATM

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ATR

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BARD1

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BRAF

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BRCA1

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BRCA2

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BRIP1

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CCND1

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CDK12

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CDK4

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CDK6

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CDKN2A

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CHEK1

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CHEK2

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ERCC2

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FANCL

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MAP2K1

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MAP2K2

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MAP2K4

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MAP3K1

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MLH1

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MSH2

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MSH6

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NBN

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PALB2

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PIK3CA

---

PIK3CB

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PIK3R1

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PMS2

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POLE

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PPP2R2A

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PTEN

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RAD51B

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RAD51C

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RAD51D

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RAD54L

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RAF1

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RB1

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SPOP

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TP53

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