

Peer Review File

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Reviewer A

Comment 1: In particular, the heterogeneity of *Mycobacterium tuberculosis* has recently been revealed. For example, the function of neutrophils, macrophages, dendritic cells, lymphocytes, etc. is different in each granuloma, and the activity of *Mycobacterium tuberculosis* is determined by the balance of these factors. The ability to suppress *Mycobacterium tuberculosis* varies depending on the underlying disease of the host. The strains of *Mycobacterium tuberculosis* are also diverse. I would be grateful if you could resubmit the manuscript citing Nat Rev Immunol 2017;17(11):691-702. It seems better to limit this discussion to *Mycobacterium tuberculosis*.

Reply 1: We are grateful to Reviewer A for suggesting the incorporation of this reference in our manuscript. These authors' discussion on the heterogeneity of the different forms of TB correlating with heterogeneity of granulomas aligns with our discussion of how too little and too much inflammation – the latter exemplified by the ICIs – may be detrimental to the host in antagonizing a mycobacterial infection. We have incorporated a discussion of this reference in the context of ICIs on page 36 of the TRACKED version of the revised manuscript.

Reviewer B

I learned a lot from your excellently summarized and insightful review.

Comment 1: How did the treatment progress for cases of tuberculosis or nontuberculous mycobacterial infections listed in Table 4?

Reply 1: We like this comment. We re-reviewed the relevant papers in Table 4 and included in the last column on whether TB treatment was initiated. Very few case reports included the outcome of the patients but we included such information when available. It appears, not surprisingly, that a significant number died from progression their cancer.