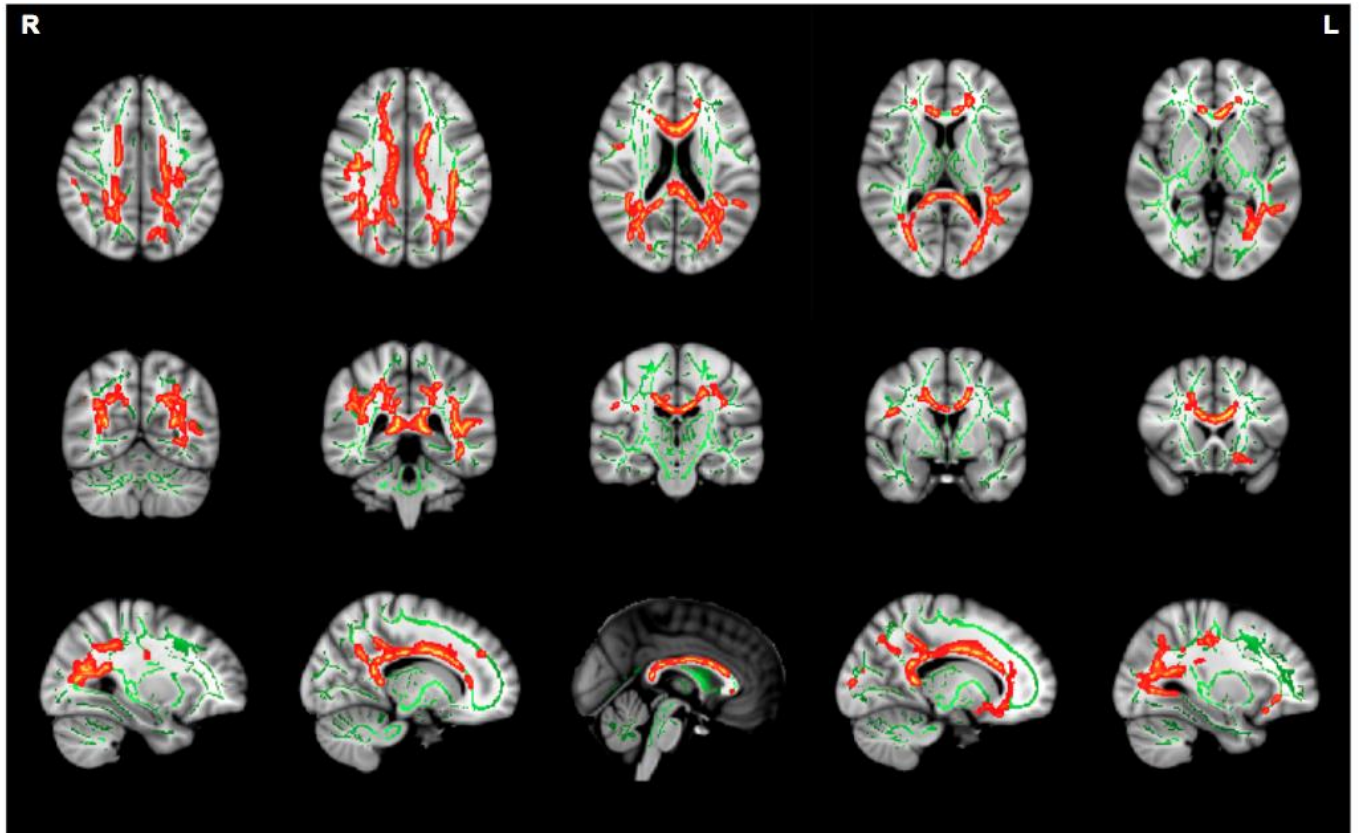


**TABLE S1. Demographic and clinical characteristics of medicated and unmedicated subjects at clinical high risk for psychosis (CHR), respectively**

	Medicated CHR	Unmedicated CHR	Statistical Significance
Cases	10	40	
Age range (years)	16-26	14-32	
Age (years)	19.3±3.7	19.8±4.8	t(48)=-0.32, p=0.75
Gender (male/female)	8/2	22/18	$\chi^2(50) = 2.08, p=0.15$
Education (years)	10.9±2.2	10.4±2.5	t(48)=0.55, p=0.59
Parental education- Father	10.1±2.8	10.2±4.2	t(45)=-0.07, p=0.95
Parental education- Mother	9.1±3.3	9.6±4.6	t(45)=-0.32, p=0.75
SOPS_positive	8.5±2.6	9.1±3.4	t(48)=-0.52, p=0.61
SOPS_negative	15.9±6.8	12.0±6.2	t(48)=1.78, p=0.08
SOPS_disorganization	7.6±3.2	6.4±2.9	t(48)=1.14, p=0.26
SOPS_general	8.8±3.3	9.2±3.2	t(48)=-0.33, p=0.74
Highest GAF	78.4±2.7	76.4±6.7	t(48)=0.91, p=0.37
Current GAF	48.9±7.3	51.9±6.9	t(48)=-1.20, p=0.24
Duration of symptoms (months)	5.5±3.4	6.8±6.7	t(48)=-0.59, p=0.56

Note: We had information about parental education from 9 medicated CHR and 38 unmedicated CHR.

**FIGURE S1.** Tract based spatial statistics analysis showed significantly lower FA values ( $p < 0.05$ , corrected for family wise error) in CHR subjects compared with healthy controls.



Note: The significant voxels covered 10.6% of the skeleton (14,267 voxels), and their location largely overlapped with the group differences in  $FA_T$  (See Main Text Figure 3).