Supplementary material to Bouwer NI, Steenbruggen TG, Rier HN, Kitzen JJEM, Smorenburg CH, Bekkum ML, de Jong PC, Drooger JC, Holterhues C, Kofflard MJM, Boersma E, Sonke G, Levin M-D, Jager A. The effect of trastuzumab on cardiac function in patients with HER2-positive metastatic breast cancer and reduced baseline left ventricular ejection fraction

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Supplementary Figure S1. Flowchart of included patients

Supplementary Figure S2. Swimmersplot of trastuzumab course in all patients with LVEF <50%
Supplementary Figure S1. Flowchart of included patients

Patients with HER2+ MBC, treated with trastuzumab-based therapy between 2000 - 2014 (n=745)

Excluded (n=708)
- No baseline LVEF 203
- Baseline LVEF
  - ≥50% 429
  - <40% 4
- No follow-up LVEF 56
- No additional data collection possible 16

Eligible for analyses (n=37)

Abbreviations HER2+, Human Epidermal growth factor Receptor 2 positive; LVEF, left ventricle ejection fraction; MBC, metastatic breast cancer
Supplementary Figure S2. Swimmersplot of trastuzumab course in all patients with LVEF <50%
Prior cardiotoxicity was defined as cardiotoxicity defined as LVEF >10%-points to a LVEF <50% during prior treatment with trastuzumab and/or anthracycline.

Reversibility of severe cardiotoxicity was defined as any LVEF increase to a value <5%-points below baseline value, partially reversibility as any LVEF increase ≥10-points from nadir and to a value >5%-points below baseline value and irreversibility as an absolute LVEF increase <10%-points from nadir and to a value >5%-points below baseline value.

For 3 patients who received cardio-protective medication during trastuzumab, the exact timing of prescription was unknown.

Whichever occurred last.