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SUPPLEMENTARY DATA

Predictors of early or delayed diastolic dysfunction after anthracycline-based or nonanthracycline chemotherapy: A pharmacological appraisal

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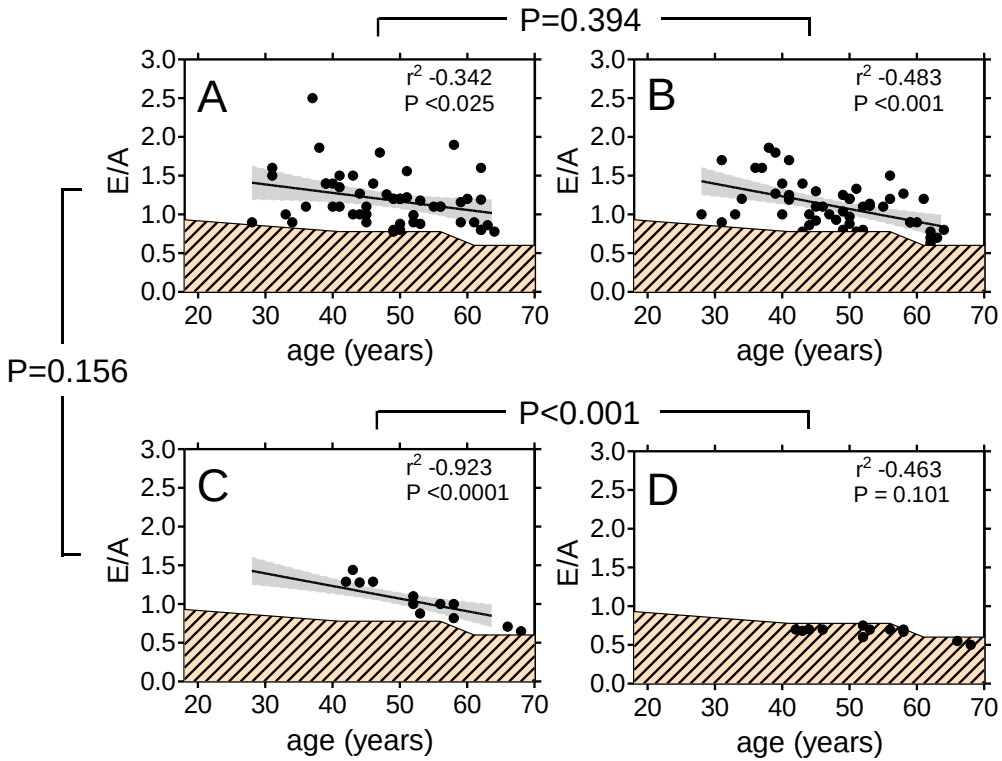
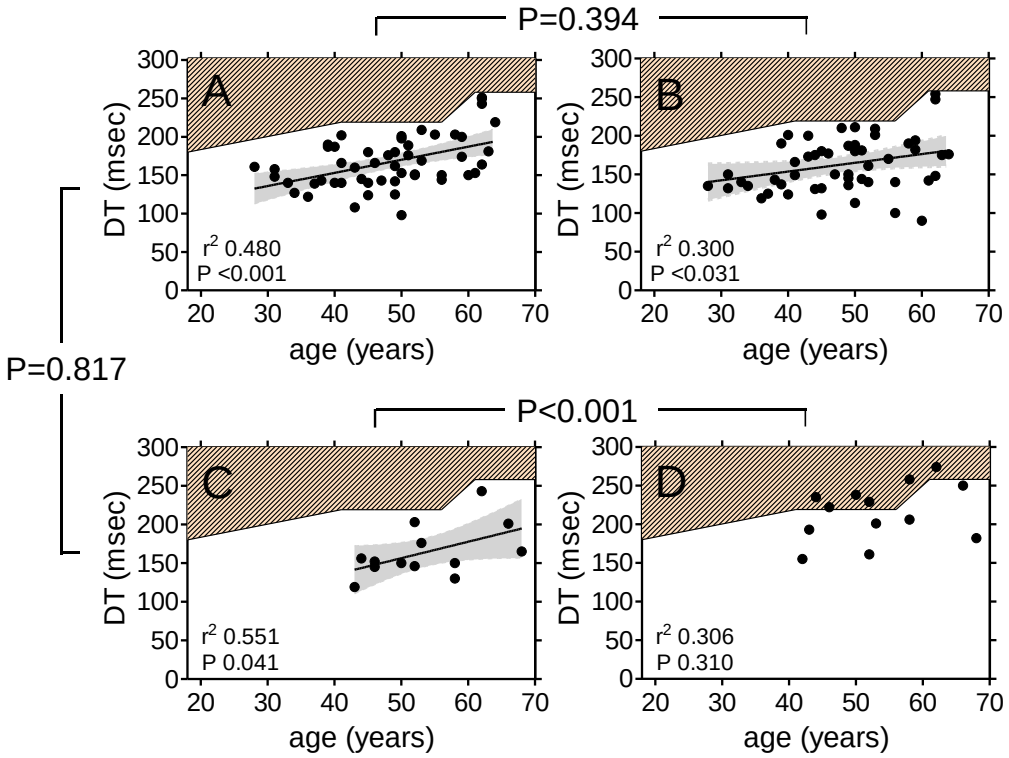


Supplementary Figure 1

Panels A and B show absolute age-related E/A values in 54 patients with normal echocardiographic findings at baseline (panel A) and 1 week after chemotherapy (panel B). The bottom coloured area denotes the age-related range within which diastolic dysfunction should be diagnosed. Baseline and post-chemotherapy E/A values showed comparable slopes of age-related decrements (linear regressions with 95% confidence intervals). Panel C shows baseline E/A values in other 13 patients, and panel D shows that in these patients E/A decreased below the lower limit of normal at 1 week after chemotherapy, without significant correlations with age. Baseline and post-chemotherapy E/A therefore showed significantly different age-related slopes in these patients. Of note, the baseline slopes of age-related E/A decrements were similar in the two patient groups (see panel A versus panel C). Correlative analyses could not be performed at six months after chemotherapy due to the small number of patients with echocardiographic abnormalities at that time point (see Figure 1 in main text).



Supplementary Figure 2

Panels A and B show absolute age-related DT values in 54 patients with normal echocardiographic findings at baseline (panel A) and 1 week after chemotherapy (panel B). The upper coloured area denotes the age-related range within which diastolic dysfunction should be diagnosed. Baseline and post-chemotherapy DT values showed comparable slopes of age-related increases (linear regressions with 95% confidence intervals). Panel C shows baseline DT values in other 13 patients, and panel D shows that in these patients DT increased toward and above the upper limit of normal at 1 week after chemotherapy, without significant correlations with age. Baseline and post-chemotherapy DT therefore showed significantly different age-related slopes in these patients. Of note, the baseline slopes of age-related DT increases were similar in the two patient groups (see panel A versus panel C). Correlative analyses could not be performed at six months after chemotherapy due to the small number of patients with echocardiographic abnormalities at that time point (see Figure 1 in main text).