

Prognostic significance of pleural or pericardial effusion and the implication of optimal treatment in primary mediastinal large B-cell lymphoma: a multicenter retrospective study in Japan

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Supplementary Table S1. Patient characteristics according to time period.

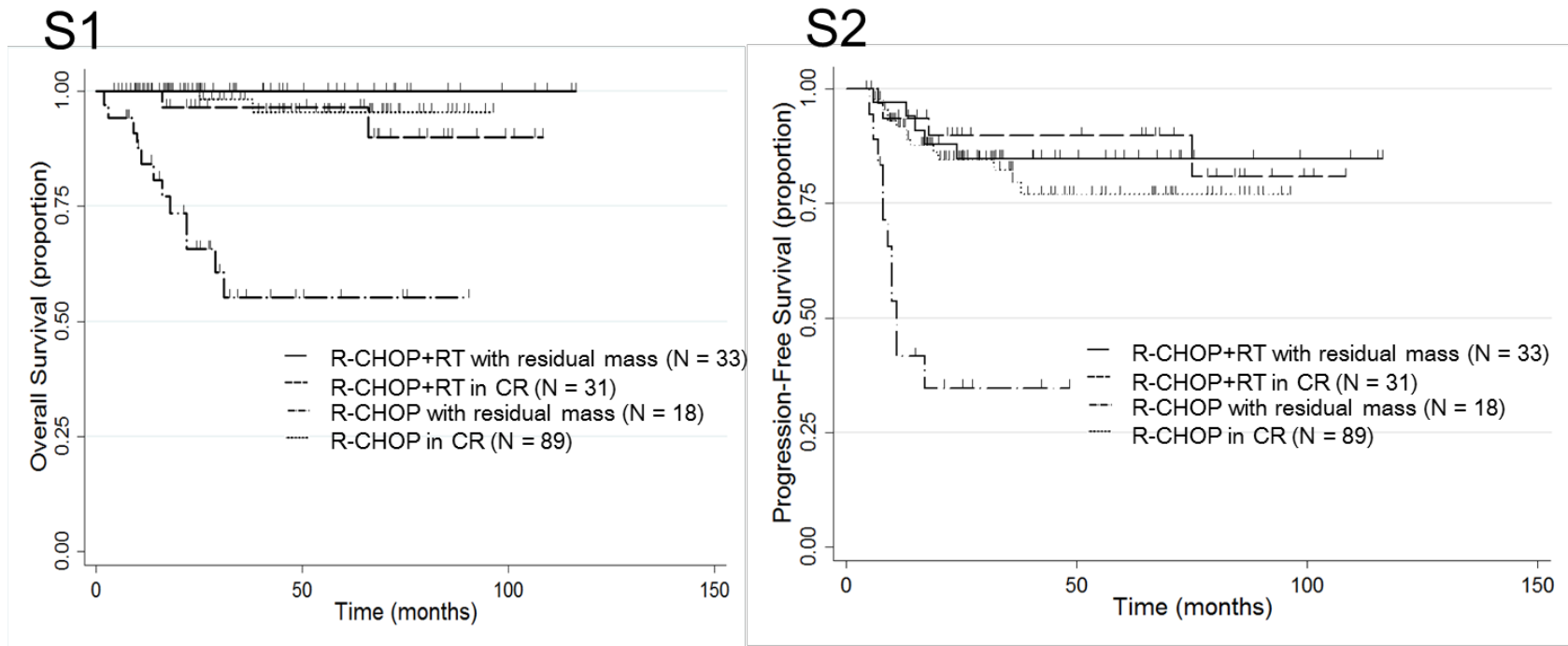
Diagnosis, Year	1986-2002		2003-2007		2008-2012	
	No.	%	No.	%	No.	%
Median follow-up, months	118		73		48	
Number of patients	60		159		126	
Age, median	28.5		31		33	
IPI						
Low	28	51	73	47	74	59
Low Intermediate	10	18	45	29	29	23
High Intermediate	8	15	22	14	13	10
High	9	16	14	9	9	7
Pleural or pericardial effusion						
present	28	47	76	48	55	44
absent	31	53	82	52	71	56
Treatment						
CHOP	36	60	7	4	1	1
R-CHOP	1	2	95	61	91	72
DA-EPOCH-R	0	0	1	1	8	6
The 2nd/3rd-generation regimen:	11	18	20	13	14	11
HDT/ ASCT	12	20	33	21	12	10
Radiotherapy						
Yes	34	57	75	47	36	29
No	26	43	84	53	90	71

Abbreviations: IPI, international prognostic index; CHOP, cyclophosphamide, adriamycin, vincristine and prednisone; R, rituximab; DA-EPOCH-R, dose-adjusted etoposide, cyclophosphamide, doxorubicin, vincristine, prednisolone and rituximab; HDT/ASCT, high-dose chemotherapy followed by autologous stem cell transplantation.

Supplemental Table S2. Characteristics of patients in the R-CHOP group

Characteristic	R-CHOP+RT with residual mass		R-CHOP+RT in CR		R-CHOP with residual mass		R-CHOP in CR	
	No.	%	No.	%	No.	%	No.	%
Number of patients	33		31		34		89	
Age at diagnosis (years)								
Median	30		33		36.5		36	
Range	19-65		17-80		18-83		17-83	
>60 years	2	6	3	10	6	18	19	21
Sex, Male	13	39	12	39	16	47	44	49
PS, ≥ 2	7	23	6	19	15	44	12	14
Extranodal sites, >1	3	9	3	10	13	38	11	13
Stage, III/IV	7	22	5	16	16	47	23	26
LDH at diagnosis, \geq ULN	28	81	25	83	28	82	55	63
B symptoms, present	10	31	6	19	7	21	17	20
IPI, ≥ 3	4	13	16	47	16	47	12	14
IPI								
Low	19	61	18	60	11	32	55	64
Low-intermediate	8	26	10	33	7	21	19	22
High-intermediate	2	6	2	7	9	26	8	9
High	2	6	0	0	7	21	4	5
Bulky tumor size, ≥ 10 cm	18	56	16	52	21	64	29	35
Serum albumin level, ≥ 3.5 g/dL	4	13	1	3	10	29	14	17
s-IL2R after first-line therapy, ≥ 1000 U/r	16	53	15	54	21	66	39	46
Presence of pleural or pericardial effusio	13	41	28	82	28	82	30	34
WBC, $\leq 10 \times 10^9$ /L	28	88	29	97	32	94	83	94
Hemoglobin, ≤ 12 g/dL	10	32	14	41	14	41	25	29
Platelet count, $< 15 \times 10^4$ / μ L	3	10	3	10	5	15	5	6
ALC at diagnosis, $< 0.5 \times 10^9$ /L	3	10	9	30	6	18	11	13

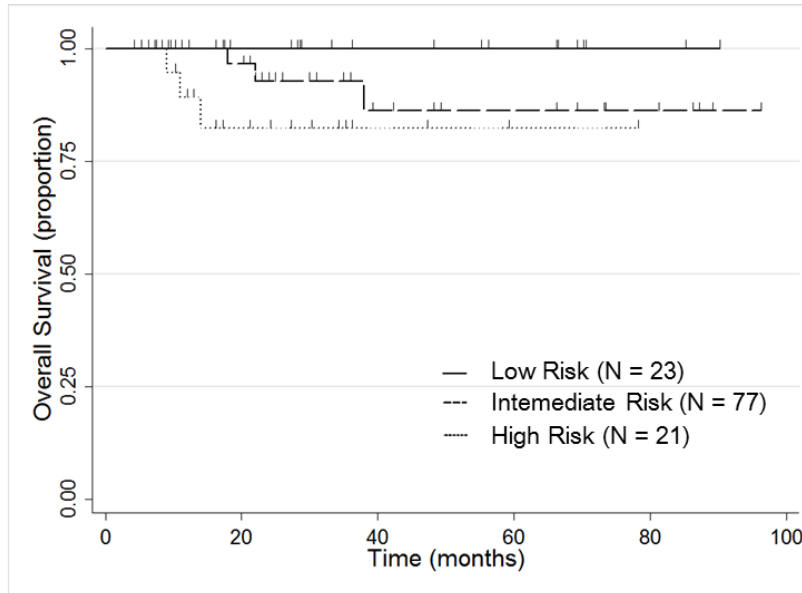
Abbreviation: R-CHOP, rituximab, cyclophosphamide, adriamycin, vincristine and prednisone; RT, radiation therapy; CR, complete remission; PS, performance status; LDH, lactate dehydrogenase; ULN, upper limit of normal; IPI, international prognostic index; s-IL2R, soluble interleukin-2 receptor; WBC, white blood cell count; ALC, absolute lymphocyte count.



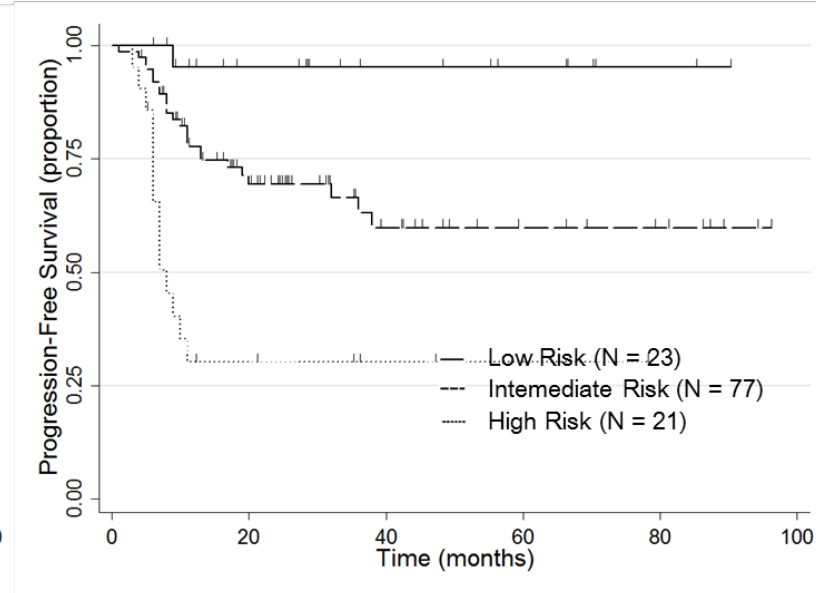
Supplemental Figure. Survival of patients with PMBL treated with R-CHOP according to the response status and RT. (S1) OS, (S2) PFS

Abbreviations: PMBL, primary mediastinal large B-cell lymphoma. R-CHOP, rituximab, cyclophosphamide, adriamycin, vincristine and prednisone. RT, radiation therapy. IPI, international prognostic index. OS, overall survival. PFS, progression free survival.

S3



S4



Supplemental Figure. Survival of patients with PMBL treated with R-CHOP according to the prognostic factors for PFS. (S3) OS, (S4) PFS

Abbreviations: PMBL, primary mediastinal large B-cell lymphoma. R-CHOP, rituximab, cyclophosphamide, adriamycin, vincristine and prednisone. RT, radiation therapy. IPI, international prognostic index. OS, overall survival.

PFS, progression free survival. Low Risk: PS 0-1, pleural or pericardial effusion -, LDH at diagnosis < ULN.

High Risk: PS 2-4, pleural or pericardial effusion +, LDH at diagnosis \geq ULN.

Intermediate Risk: other than Low risk or High risk