

# Impact on survival through consolidation radiotherapy for diffuse large B-cell lymphoma: a comprehensive meta-analysis

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**“Impact on survival through consolidation radiotherapy for diffuse large B-cell lymphoma: a comprehensive meta-analysis” by Berger et al.**

*Supplemental material*

**SUPPLEMENTAL INFORMATION ON THE STATISTICAL ANALYSIS**

All meta-analyses were done using a random-effects model. Between-trial heterogeneity  $\tau^2$  was estimated using the method proposed by Paule and Mandel<sup>1</sup> and as implemented by the empirical Bayes option of the metareg command in Stata.<sup>2</sup> Confidence intervals were calculated as suggested by Knapp and Hartung<sup>3</sup> and prediction intervals as suggested by Higgins et al.<sup>4</sup> Timetrend and stratified analyses were done using the same methods. Bivariate meta-analysis was done using the mvmeta command in Stata (White 2009 and 2011).<sup>5,6</sup> If HR and a measure of precision (standard error, variance, or confidence interval) was not available, we digitized Kaplan-Meier curves, reconstructed the underlying time-to-event data, and calculated (log) HRs and standard errors using a Cox regression model.<sup>7</sup> Correlation between progression-free and overall survival within the two trials included in the meta-analysis<sup>8,9</sup> that provided sufficient data was calculated by Spearman's rank correlation coefficient. A between-outcome correlation of 0.8 was finally used. Sensitivity analyses showed robustness of the analysis.

**Table S1: Current ESMO and NCCN guidelines on consolidation radiotherapy for DLBCL**

Compilation of the current guidelines of ESMO (Tilly, 2015)<sup>10</sup> and NCCN (National Comprehensive Cancer Network. NCCN Clinical Practice Guidelines in Oncology: B-cell lymphomas, version 6.2019: [https://www.nccn.org/professionals/physician\\_gls/pdf/b-cell.pdf](https://www.nccn.org/professionals/physician_gls/pdf/b-cell.pdf) (Accessed Nov 28, 2019)) on the use of the consolidation radiotherapy for patients with DLBCL.

Society	Indication	No indication	Unclear
ESMO	Young, low risk, aaIPI 0, bulky disease (R-CHOP)	Young, low risk, aaIPI 0, non-bulky disease	Young intermediate to high risk (aa-IPI $\geq$ 2)
NCCN	Consider in stage I&II, (non)bulky, partial response or EoT PET+	When a complete response is achieved	no firm indication

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