

# Do liberal thresholds for red cell transfusion result in improved quality of life for patients undergoing intensive chemotherapy for acute myeloid leukemia? A randomized crossover feasibility study

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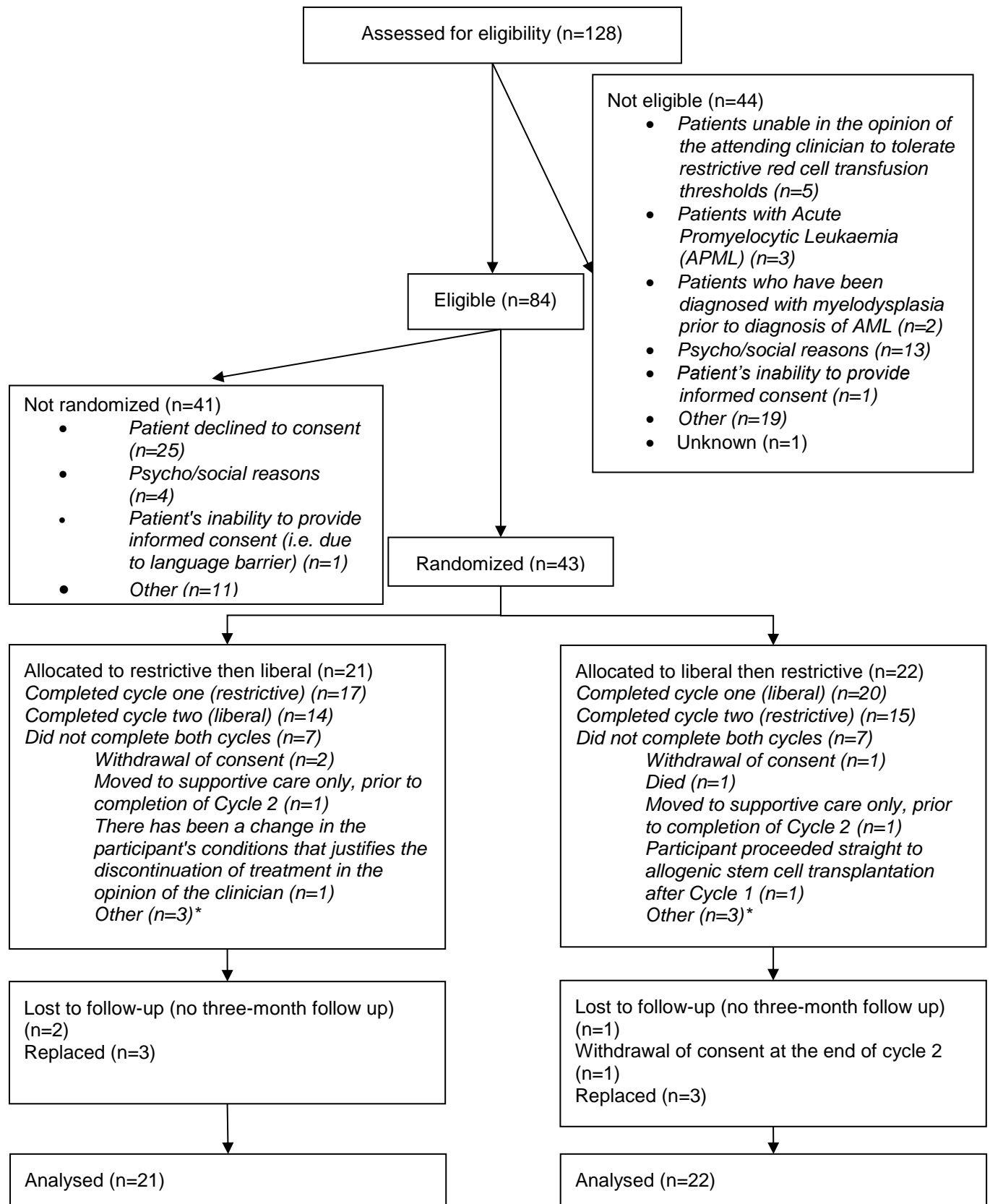
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<https://doi.org/10.3324/haematol.2021.279867>

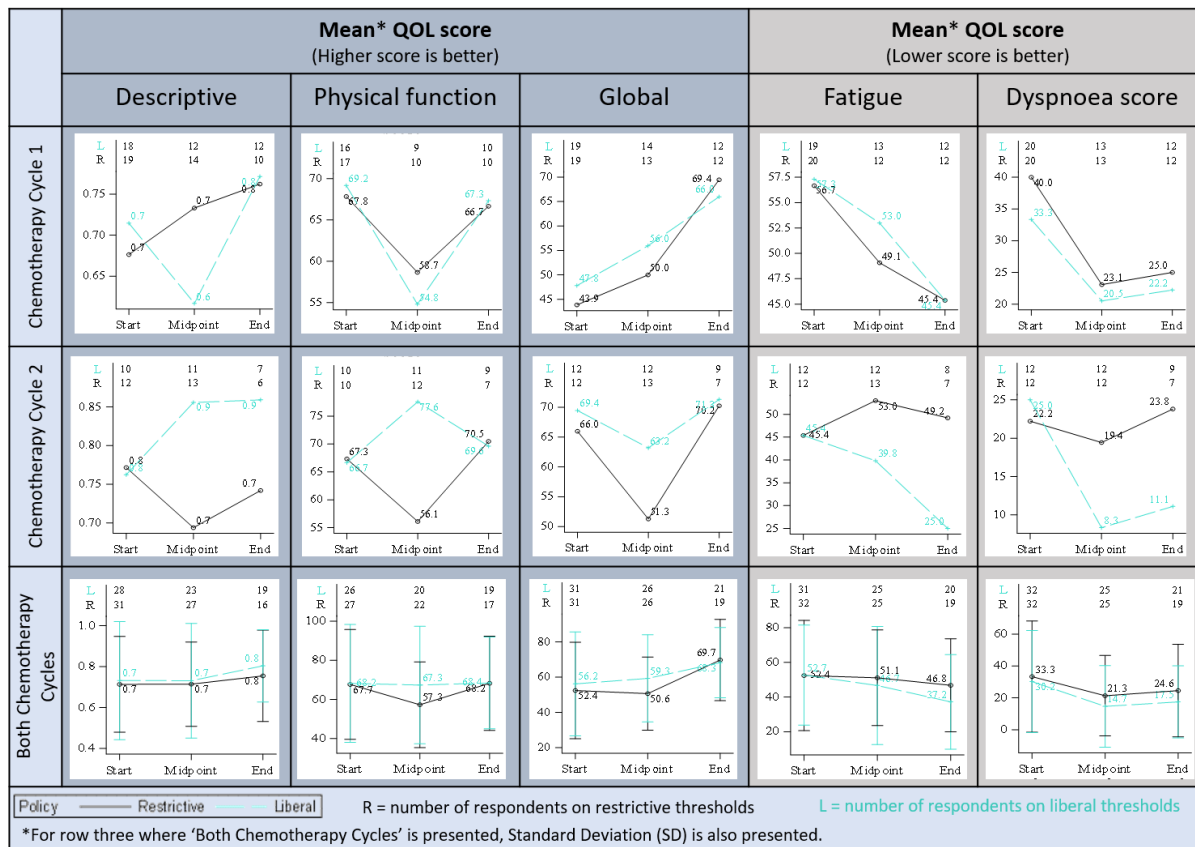
Supplementary information

Supplementary Figure 1: CONSORT diagram



\* Intermittent withdrawal of consent (2 in 'Restrictive then Liberal' and 1 in 'Liberal then Restrictive')

**Supplementary Figure 2: Quality of life score by time period and policy**



**Supplementary Table 1: Discontinuation of trial treatment**

Centre number	Arm	Stage of withdrawal	Reason given	Further information	Withdrew consent for data collection
1	L/R	After Cycle 1 (did not proceed to cycle 2)	Participant given poor prognosis Felt they were allocated to restrictive arm	Participant was allocated to liberal strategy for cycle 1	Yes
1	R/L	Cycle 1 Day 16	Participant had too much to think about		Yes
3	R/L	After Cycle 1 (did not proceed to cycle 2)	Participant felt they were allocated to restrictive threshold and that was too low		No
3	L/R	Cycle 2 Day 30 (Last day)	Participant felt they were allocated to restrictive threshold and that they were excessively tired due to that		No
<b>Additionally, the following participants agreed to restart the trial on the subsequent cycle</b>					
2	R/L	Cycle 1 Day 20	Participant felt very unwell	Participant re-consented to continue for Cycle 2.	No
2	R/L	Cycle 1 Day 7	Hemoglobin dropped to 50 g/L and Participant felt this would not have happened off trial Participant did not feel 90 g/L was appropriate for second cycle either Participant did not feel QoL was robust	Participant withdrew consent after Cycle 1 but re-consented to cycle 2.	No
2	L/R	Between Cycle 1 & Cycle 2	Participant did not feel they could tolerate lower threshold for cycle 2	Participant withdrew consent after first chemotherapy cycle as felt unwell. Later re-consented to continue with second chemotherapy cycle.	No

L= Liberal cycle; R= Restrictive cycle