

Evaluating the clinical impact and feasibility of therapeutic drug monitoring of pazopanib in a real-world soft tissue sarcoma cohort

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Supplemental Material

Table S1. univariate and multivariate cox-regression on progression-free survival.

Variable	Univariate analysis		Multivariate analysis	
	HR (95%CI)	P-value	HR (95%CI)	P-value
Performance status ≥ 2 vs. 0-1	1.76 (0.80 – 3.85)	0.157	1.95 (0.85 – 4.46)	0.113
Subtype Soft-Tissue Sarcoma:				
Leiomyosarcoma vs. all other subtypes	1.16 (0.75 – 1.80)	0.497	1.17 (0.75 – 1.84)	0.478
Synovial sarcoma vs. all other subtypes	1.02 (0.52 – 2.00)	0.945	1.09 (0.55 – 2.15)	0.806
Previous lines of systemic treatment ≥ 2 vs. 0-1	1.17 (0.71 – 1.92)	0.546	1.00 (0.59 – 1.72)	0.988
TDM-guided dosing vs. no-TDM guided dosing	0.79 (0.50 – 1.26)	0.327	0.77 (0.47 – 1.25)	0.287

CI confidence interval, TDM therapeutic drug monitoring

Table S2. univariate and multivariate cox-regression on overall survival.

Variable	Univariate analysis		Multivariate analysis	
	HR (95%CI)	P-value	HR (95%CI)	P-value
Performance status ≥ 2 vs. 0-1	3.12 (1.48 – 6.57)	0.003*	2.99 (1.38 – 6.50)	0.005*
Subtype Soft-Tissue Sarcoma:				
Leiomyosarcoma vs. all other subtypes	0.58 (0.37 – 0.90)	0.016*	0.58 (0.37 – 0.91)	0.018*
Synovial sarcoma vs. all other subtypes	0.57 (0.27 – 1.22)	0.148	0.62 (0.29 – 1.32)	0.214
Previous lines of systemic treatment ≥ 2 vs. 0-1	1.12 (0.69 – 1.81)	0.641	1.08 (0.65 – 1.79)	0.780
TDM-guided dosing vs. no-TDM guided dosing	0.94 (0.58 – 1.51)	0.786	0.95 (0.57 – 1.60)	0.858

CI confidence interval, TDM therapeutic drug monitoring

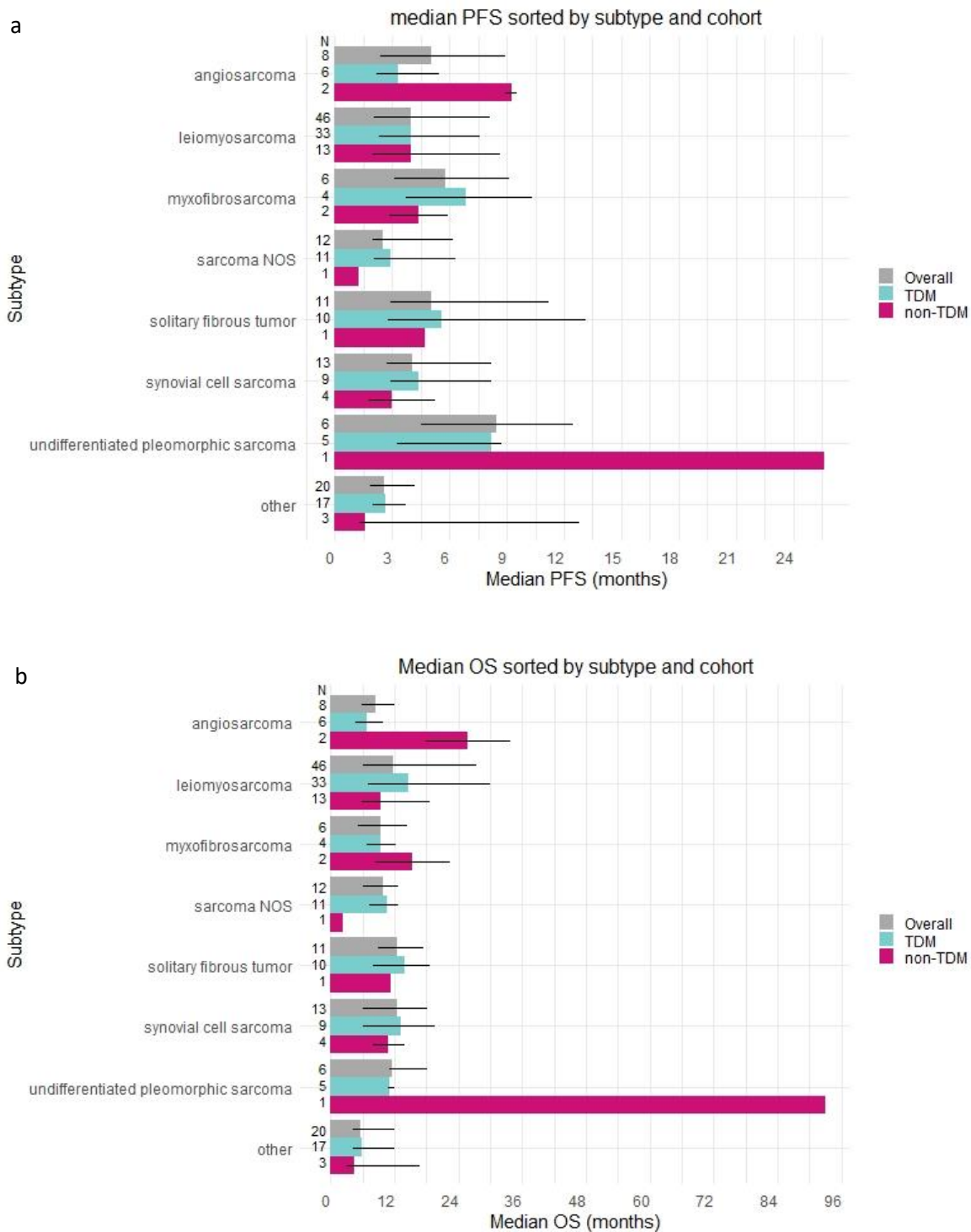
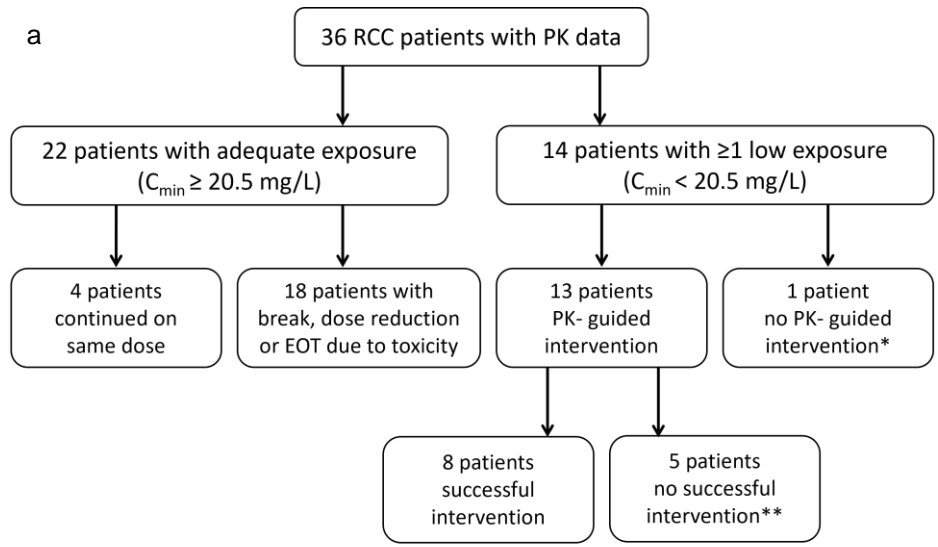
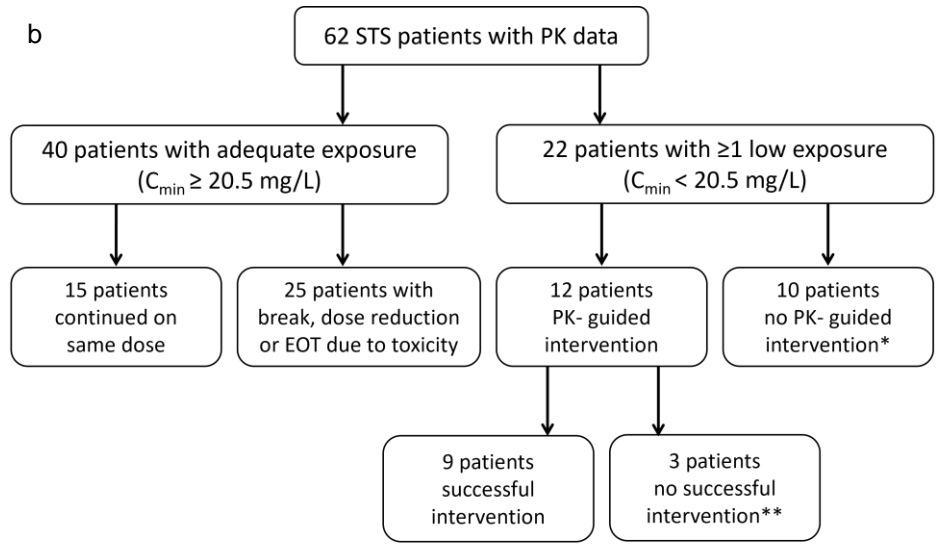


Fig. S1 Median progression-free survival (a) and median overall survival (b) sorted by subtype and cohort. N number, NOS not otherwise specified, OS overall survival, PFS progression-free survival, TDM therapeutic drug monitoring. Other is a sum of all patients with subtypes including <5 patients. These include among others malignant peripheral nerve sheath tumor (n=4), liposarcoma (n=3), epithelioid hemangioendothelioma (n=2), rhabdomyosarcoma (n=2) and intima sarcoma (n=2).



* Due to toxicity

** Due to: still low PK after intervention (1) and toxicity (4)



* Due to: toxicity (4), treatment discontinued (3), physician adherence (2), logistics (1)

** Intervention not evaluable (3)

Fig. S2 Feasibility analysis for metastatic renal cell cancer (a) and soft-tissue sarcoma (b). C_{min} trough concentration, EOT end of treatment, PK pharmacokinetic, RCC renal cell carcinoma