

Appendix

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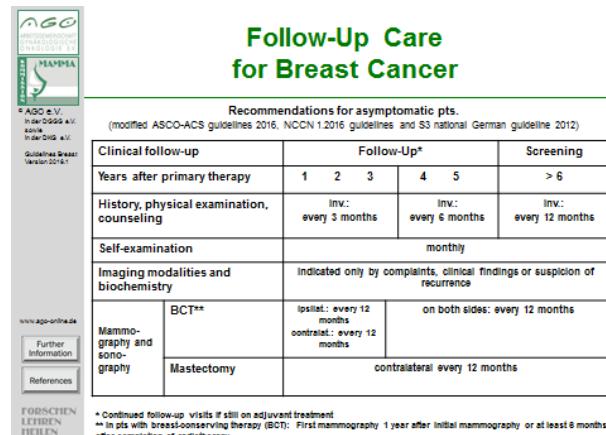
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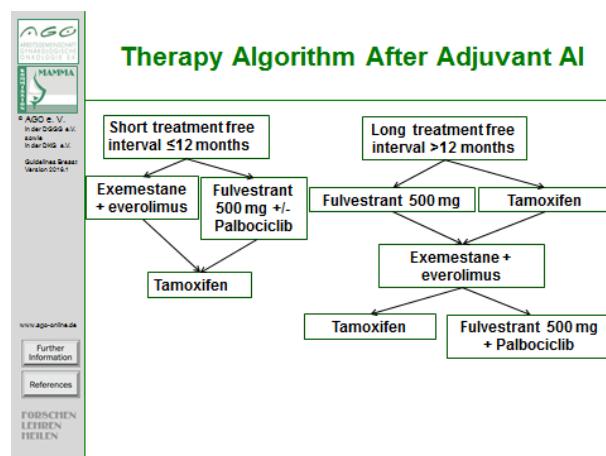
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Supplemental Figures



Supplemental fig. 1. Follow-up care for breast cancer.



Supplementary Material

Supplemental fig. 2. Treatment recommendations for postmenopausal patients with metastatic breast cancer after adjuvant AI.

MBC HER2-negative/HR-positive: Cytotoxic Therapy after adjuvant Taxane and Anthracycline Treatment		
 AGO ARbeitsgemeinschaft Onkologie MAMMA 		
Guideline Breast Version 2016.1		Oxford / AGO LoE / GR
> Experimental therapies within studies		++
> Capecitabine		2b B ++
> Eribulin		1b B ++
> Vinorelbine		2b B ++
> (Peg-)liposomal Doxorubicin		2b B +
> Taxane re-challenge		2b B +
> Anthracycline re-challenge		3b C +
> Metronomic therapy (e.g. cyclophos. + MTX)		2b B +
> Gemcitabine + Cisplatin / Carboplatin		2b B +/-
> Gemcitabine + Capecitabine		2b B +/-
> Gemcitabine + Vinorelbine*		1b B -

Supplemental fig. 3. Cytotoxic therapy after adjuvant taxane and anthracycline treatment in HER2-negative/HR-positive breast cancer.

Granulocyte Colony-stimulating Factors		
 AGO ARbeitsgemeinschaft Onkologie MAMMA 		
Guideline Breast Version 2016.1		Oxford / AGO LoE / GR
> Primary prophylaxis for expected febrile neutropenia (FNP)		
> If expected risk for FNP 10–20%		1b B +/-
> In case of individual risk factors		3b C +
> If expected risk for FNP >20% (e.g. DAC, dose-dense CT)		1a A ++
> Secondary prophylaxis during chemotherapy (previous FNP or neutropenia grade IV > 7 days)		1b A ++
> Therapeutic usage for FNP		1a A +/-
> Start related to chemotherapy and duration		
> Prolifilgrastim day 2		1b A ++
> Lipefilgrastim day 2		1b A ++
> Filgrastim/lenograstim from day 2–3 until ANC > 2–3 × 10 ⁹		1b A ++

Supplemental fig. 4. Use of granulocyte colony-stimulating factors.

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