# Supplemental Tables

**Supplemental Table 1.** Baseline Demographic, Endoscopic, and Histologic Characteristics of Included and Excluded Subjects in the United States Radiofrequency Ablation Cohort.

		Subjects with		Cochran-
		Complete		Mantel-
		Eradication of		Haenszel/
		Intestinal	Included	Wilcoxon p for
	Full Cohort	Metaplasia	Subjects	association
N	5,521	4,087	3,105	
Baseline age in years - mean (SD)	61.6 (11.4)	61.2 (11.2)	61.5 (10.9)	0.32
Male sex - N (percent)	4,052 (73.4)	2,951 (72.2)	2,258 (72.7)	0.43
Non-dysplastic Barrett's esophagus - N (percent)	2,674 (48.3)	2,050 (50.2)	1,467 (47.3)	< 0.0001
Indeterminate for dysplasia - N (percent)	406 (7.4)	314 (7.7)	242 (7.8)	
Low-grade dysplasia - N (percent)	1,113 (20.2)	829 (20.3)	643 (20.7)	
High-grade dysplasia - N (percent)	1,054 (19.1)	749 (18.3)	628 (20.2)	
Intramucosal adenocarcinoma - N (percent)	209 (3.8)	145 (3.6)	125 (4.0)	
Invasive esophageal adenocarcinoma – N (percent)	65 (1.2)	0 (0.0)	0 (0.0)	
Baseline segment length in CM - mean (SD)	4.1 (3.3)	3.7 (3.0)	3.7 (3.0)	< 0.0001
Endoscopic resection before treatment - N (percent)	495 (9.0)	327 (8.0)	289 (9.3)	0.11

SD, standard deviation; N, number; CM, centimeters.

**Supplemental Table 2.** Discrimination Statistics and Model Fit Statistics of the Candidate Models in the Full United States Radiofrequency Ablation Registry, in a Limited Subset of the United States Radiofrequency Ablation Registry with Low-grade Dysplasia or Worse, and in the United Kingdom National Halo Registry in the Forward Selection Model Building Process.

									Exter	nal valid	lation in
			_	patients							n National
		without (	• •			low-gra	•	-	Н	alo Reg	-
-	AIC	С	NRI	IDI	AIC	С	NRI	IDI	C	NRI	IDI
				One vai	riable mod	lels					
Histologic grade*	1564.7	0.892	1.15	0.0668	1413.0	0.746	0.64	0.0357	0.728	0.36	0.0062
Age	1693.2	0.672	-0.15	-0.0196	1430.3	0.604	0.08	-0.0154	0.470	0.14	0.0026
Endoscopic mucosal resection	1700.3	0.779	0.33	-0.0204	1437.6	0.592	0.09	-0.0063	0.524	0.18	0.0065
Sex	1714.1	0.729	-0.62	-0.0342	1438.4	0.594	†	-0.0272	0.386	†	0.0000
Segment length	1721.6	0.618	-0.25	-0.0384	1440.3	0.487	†	-0.0273	0.448	†	-0.0001
				Two var	riable mod	lels					
Histologic grade + Age <sup>§</sup>	1537.2	0.837	0.20	0.0075	1409.4	0.685	0.20	0.0083	0.581	0.05	0.0007
Histologic grade + Endoscopic mucosal resection	1543.0	0.874	-0.49	0.0020	1413.8	0.718	-0.09	0.0022	0.570	-0.21	0.0031
Histologic grade + Sex	1542.0	0.878	0.15	0.0017	1414.2	0.719	-0.07	0.0018	0.589	-0.50	0.0003
Histologic grade + Segment length	1544.2	0.857	-0.33	0.0002	1415.0	0.691	-0.55	0.0002	0.581	-0.44	-0.0004
	Thi	ree vario	able mo	dels (did	not reach	signific	ance th	reshold)			
Histologic grade + Age + Endoscopic mucosal resection	1537.7	0.839	0.34	0.0096	1409.9	0.691	0.36	0.0105	0.566	-0.18	0.0037
Histologic grade + Age + Sex	1536.8	0.841	0.24	0.0088	1410.4	0.685	0.16	0.0096	0.547	-0.71	0.0017
Histologic grade + Age + Segment length	1539.2	0.837	0.17	0.0075	1411.3	0.684	0.18	0.0082	0.579	0.07	0.0007

AIC, Akaike information criterion; C, C statistic; NRI, net reclassification improvement; IDI, integrated discrimination improvement. \* Model used for surveillance risk categories. † Not estimable. § Model resulting from forward selection process.

**Supplemental Table 3.** Discrimination Statistics Comparing Models Predicting Any Recurrence, Recurrence with Dysplasia as in the Primary Analysis, Recurrence with High-grade Dysplasia or Worse, and Recurrence with Intramucosal Adenocarcinoma.

	Non-dysplasti	С				
Minimum recurrence histologic grade	Barrett's	Low-grade	High-grade			
defining the outcome:	esophagus	dysplasia	dysplasia	Adenocarcinoma		
Discrimination statistics for r	Discrimination statistics for recurrence with a given histologic grade or worse.					
C statistic of forward selected model	0.623	0.837	0.870	*		
C of model with histologic grade alone	0.639	0.892	0.917	0.895		
Net reclassification improvement	-0.14	0.20	0.38	*		
Integrated discrimination improvement	0.0317	0.0072	0.0065	*		
Estimated hazard ratio among included parameters in the forward selected model						
Age in years	1.016	1.025	1.027	†		
Non-dysplastic intestinal metaplasia	1.	1.	1.	1.		
Low-grade or indefinite for dysplasia	1.348	9.372	10.170	8.391		
High-grade dysplasia	1.421	24.983	46.936	21.790		
Intramucosal adenocarcinoma	1.857	33.596	81.440	78.604		
Long segment Barrett's esophagus	1.582	†	†	Ť		

<sup>\*</sup> The selected model included only histologic grade. † Term was not included in the selected model

**Supplemental Table 4.** Alternative Recommended Time after Complete Eradication Intestinal Metaplasia of Surveillance Visits to Yield 5.7% Neoplastic Recurrence per Visit or 0.2% Invasive Adenocarcinoma for Patients at Higher Risk of Endoscopic Complications.

Risk Category:	Visit 1	Visit 2	Visit 3	Visit 4
Non-dysplastic Barrett's esophagus or indefinite for dysplasia	> 7 years*	*	*	*
Low-grade dysplasia	3 years	> 5 years*	*	*
High-grade dysplasia or adenocarcinoma in situ	1 year	2 years	3 years	> 5 years*

<sup>\*</sup>Surveillance times were estimated to a limit of five years for the higher two risk categories and seven years for the lower to avoid extrapolation beyond the data.

**Supplemental Table 5.** Estimated Proportion of Subjects with Recurrence of Neoplasia Applying the Proposed Surveillance Intervals\* in the United Kingdom National Halo Registry.

registry.			
Years after complete	Total proportion	Interval proportion	Mean interval
eradication of	with recurrence	with recurrence of	proportion per
intestinal metaplasia	of neoplasia	neoplasia	visit
Risk group 2: low-grad	le dysplasia		
1	1.3%	1.3%	4.7%
3	9.3%	8.0%	4.7%
Risk group 3: high-gra	de dysplasia and intra	amucosal adenocarcino	ma
0.25	0%	0%	
0.5	3.6%	3.6%	
1	6.9%	3.4%	
2	13.9%	6.9%	3.7%
3	21.8%	7.9%	47
4	21.8%	0.0%	
5	25.9%	4.1%	

<sup>\*</sup> Intervals were chosen to yield an estimated 3.6% neoplastic recurrence per visit.

# Supplemental Figure Legend

Figure #	Title
Supplemental	Kaplan-Meier Estimates of the Proportion of Subjects in the US RFA Registry without
	Recurrence of Neoplasia in Five Years after Complete Eradication of Intestinal
1	Metaplasia by Subject Age at First Treatment.
	Kaplan-Meier Estimates of the Proportion of Subjects in the US RFA Registry without
Supplemental	Recurrence of Neoplasia in Five Years after Complete Eradication of Intestinal
2	Metaplasia by whether Endoscopic Mucosal Resection was Performed Before Entry into Surveillance.
Cumplemental	Kaplan-Meier Estimates of the Proportion of Subjects in the US RFA Registry without
Supplemental	Recurrence of Neoplasia in Five Years after Complete Eradication of Intestinal
3	Metaplasia by Subject Sex.
Supplemental	Kaplan-Meier Estimates of the Proportion of Subjects in the US RFA Registry without
Supplemental	Recurrence of Neoplasia in Five Years after Complete Eradication of Intestinal
4	Metaplasia by Baseline Barrett's Segment Length.
	Spline Estimate of the Baseline Hazard with Four Degrees of Freedom of the
Supplemental	Proportion of Subjects in the US RFA Registry without Recurrence of Neoplasia in
5	Five Years after Complete Eradication of Intestinal Metaplasia by Simplified
	Categories of Surveillance Risk.
	Various Parameterizations of the Baseline Hazard Function Produce Similar Estimates
Supplemental	of the Proportion of Subjects in the US RFA Registry without Recurrence of Neoplasia
6	in Five Years after Complete Eradication of Intestinal Metaplasia among the Highest
	Category of Surveillance Risk.
Supplemental	Sensitivity Analysis with Random Imputation of Neoplastic Recurrence Events at One,
7	Two, and Four Times the Modeled Rate of Recurrence of Neoplasia After Subjects are
,	Censored for Recurrence and Retreatment of Non-dysplastic Barrett's Esophagus.













