

Supplemental Tables for:

Development and validation of a clinical score for cardiovascular risk stratification of long-term childhood cancer survivors Evangelos K. Oikonomou et al.

	ltem No	Recommendation	Included (yes/no)
Title and abstract	1	(a) Indicate the study's design with a commonly used term in the title or the abstract	yes
		(b) Provide in the abstract an informative and balanced summary of what	Ves
		was done and what was found	yes
Introduction			
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported	yes
Objectives	3	State specific objectives, including any prespecified hypotheses	yes
Methods			
Study design	4	Present key elements of study design early in the paper	yes
Setting	5	Describe the setting, locations, and relevant dates, including periods of	yes
		recruitment, exposure, follow-up, and data collection	
Participants	6	(a) Give the eligibility criteria, and the sources and methods of selection of	yes
		participants. Describe methods of follow-up	
		(b) For matched studies, give matching criteria and number of exposed and	no
		unexposed	
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders,	yes
		and effect modifiers. Give diagnostic criteria, if applicable	
Data sources/	8	For each variable of interest, give sources of data and details of methods	yes
measurement		of assessment (measurement). Describe comparability of assessment	
		methods if there is more than one group	
Bias	9	Describe any efforts to address potential sources of bias	no
Study size	10	Explain how the study size was arrived at	yes
Quantitative	11	Explain how quantitative variables were handled in the analyses. If	yes
variables		applicable, describe which groupings were chosen and why	
Statistical methods	12	(<i>a</i>) Describe all statistical methods, including those used to control for confounding	yes
		(b) Describe any methods used to examine subgroups and interactions	-
		(c) Explain how missing data were addressed	-
		(d) If applicable, explain how loss to follow-up was addressed	-
		(e) Describe any sensitivity analyses	-
Results			
Participants	13	(a) Report numbers of individuals at each stage of study—eg numbers	yes
·		potentially eligible, examined for eligibility, confirmed eligible, included in	•
		the study, completing follow-up, and analysed	
		(b) Give reasons for non-participation at each stage	yes
		(c) Consider use of a flow diagram	yes
Descriptive data	14	(a) Give characteristics of study participants (eg demographic, clinical,	yes
		social) and information on exposures and potential confounders	-
		(b) Indicate number of participants with missing data for each variable of	yes
		interest	-
		(c) Summarise follow-up time (eg, average and total amount)	yes
Outcome data	15	Report numbers of outcome events or summary measures over time	yes
Main results	16	(a) Give unadjusted estimates and, if applicable, confounder-adjusted	ves

Table S1. STROBE Statement—Checklist of items that should be included in reports of cohort studies

		estimates and their precision (eg, 95% confidence interval). Make clear	
		which confounders were adjusted for and why they were included	
		(b) Report category boundaries when continuous variables were	yes
		categorized	
		(c) If relevant, consider translating estimates of relative risk into absolute	yes
		risk for a meaningful time period	
Other analyses	17	Report other analyses done—eg analyses of subgroups and interactions,	no
		and sensitivity analyses	
Discussion			
Key results	18	Summarise key results with reference to study objectives	yes
Limitations	19	Discuss limitations of the study, taking into account sources of potential	yes
		bias or imprecision. Discuss both direction and magnitude of any potential	
		bias	
Interpretation	20	Give a cautious overall interpretation of results considering objectives,	yes
		limitations, multiplicity of analyses, results from similar studies, and other	
		relevant evidence	
Generalisability	21	Discuss the generalisability (external validity) of the study results	yes
Other information			
Funding	22	Give the source of funding and the role of the funders for the present	yes
		study and, if applicable, for the original study on which the present article is based	

Note: An Explanation and Elaboration article discusses each checklist item and gives methodological background and published examples of transparent reporting. The STROBE checklist is best used in conjunction with this article (freely available on the Web sites of PLoS Medicine at http://www.plosmedicine.org/, Annals of Internal Medicine at http://www.annals.org/, and Epidemiology at http://www.epidem.com/). Information on the STROBE Initiative is available at http://www.strobe-statement.org.

Table S2. Cancer classification according to the International Classification of Childhood Cancer (ICCC) siterecode ICD-O-3 (International Classification of Diseases for Oncology) /WHO (World Health Organization)2008

CLASSIFICATION	Total n	Overall
LIFUKEMIA		percentage (76)
I(a) Lymphoid leukemia	17 500	19.8
I(b) Acute myeloid leukemia	4 053	4.6
I(c) Chronic myelonroliferative disease	865	1.0
I(d) Myelodysplastic syndrome and other myeloproliferative	005	1.0
disease	416	0.5
I(e) Unspecified and other specified leukemia	776	0.9
II LYMPHOMA	-	
II(a) Hodgkin lymphoma	6,752	7.6
II(b) Non-Hodgkin lymphoma (except Burkitt lymphoma)	4,332	4.9
II(c) Burkitt lymphoma	1,205	1.3
II(d) Miscellaneous lymphoreticular neoplasm	790	0.9
II(e) Unspecified lymphoma	293	0.3
III CENTRAL NERVOUS SYSTEM		
III(a) Ependymoma and choroid plexus tumor	1,324	1.5
III(b) Astrocytoma	7,488	8.5
III(c) Intracranial and intraspinal embryonal tumor	3,171	3.6
III(d) Other glioma	2,608	3.0
III(e) Other specified intracranial/intraspinal neoplasm	255	0.3
III(f) Unspecified intracranial and intraspinal neoplasm	189	0.2
IV NEUROBLASTOMA AND PERIPHERAL NERVOUS CELL TUMOR		
IV(a) Neuroblastoma and ganglioneuroblastoma	4,189	4.7
IV(b) Other peripheral nervous cell tumor	124	0.1
V RETINOBLASTOMA	1,737	2.0
VI RENAL TUMOR		
VI(a) Nephroblastoma and other nonepithelial renal tumor	3,207	3.6
VI(b) Renal carcinoma	241	0.3
VI(c) Unspecified malignant renal tumor	8	0.0
VII LIVER TUMOR		
VII(a) Hepatoblastoma	812	0.9
VII(b) Hepatic carcinoma	302	0.3
VII(c) Unspecified malignant hepatic tumor	7	0.0
	2 5 6 2	2.0
VIII(a) Osteosarcoma	2,562	3.0
VIII(b) Chondrosarcoma	206	0.2
VIII(c) Ewilig tumor and related satcomas of bone	1,477	1.7
VIII(a) Unspecified malignant bone tumor	221	0.5
	//	0.1
IX SOFT TISSUE SARCOWA (INCLUDING HEART TOWOR)	2 455	28
IX(b) Fibrosarcoma, peripheral perve & other fibrous	677	0.8
IX(c) Kanosi sarcoma	24	0.0
IX(d) Other specified soft tissue sarcoma	2 390	2.7
IX(e) Unspecified soft tissue sarcoma	592	0.7
X GERM CELL TUMOR	001	
X(a) Intracranial & intraspinal germ cell tumor	883	1.0
X(b) Extracranial & extragonadal germ cell tumor	884	1.0
X(c) Malignant gonadal germ cell tumor	3916	4.4
X(d) Gonadal carcinoma	240	0.3
X(e) Other and unspecified malignant gonadal tumor	126	0.1
XI ENDOCRINE		

Total	88,418	100.0
XII(b) Other unspecified malignant tumor	161	0.2
XII(a) Other specified malignant tumor	153	0.2
XII OTHER SPECIFIED OR UNSPECIFIED MALIGNANT TUMOR		
XI(f) Other and unspecified carcinoma	2,133	2.4
XI(e) Skin carcinoma	34	0.0
XI(d) Malignant melanoma	2,574	2.9
XI(c) Nasopharyngeal carcinoma	299	0.3
XI(b) Thyroid carcinoma	3,449	3.9
XI(a) Adrenocortical carcinoma	116	0.1

	Mortality incidence rate (per 1000 person-years) [95% confidence interval]					
	First 5 years after cancer diagnosis			Long-term cancer survivors (≥5 years)		
Malignancy type	All-cause	Cancer-specific	CV	All-cause	Cancer-	CV
					specific	
Leukemias	64.9 [63.2-66.6]	57.3 [55.8-59.0]	0.5 [0.4-0.7]	7.2 [6.7-7.7]	5.1 [4.7-5.5]	0.2 [0.2-0.3]
Lymphomas	32.3 [30.7-33.8]	26.4 [25.1-27.9]	0.6 [0.4-0.8]	8.1 [7.6-8.8]	3.2 [2.8-3.5]	1.2 [1.0-1.4]
CNS	83.3 [80.8-85.9]	77.5 [75.1-80.0]	0.5 [0.3-0.7]	10.3 [9.6-11.1]	7.6 [7.0-8.3]	0.4 [0.3-0.6]
Peripheral nervous cell ^a	80.5 [76.0-85.2]	74.7 [70.5-79.3]	0.4 [0.2-0.9]	5.2 [4.4-6.3]	3.6 [2.9-4.5]	0.3 [0.1-0.7]
Retinoblastoma	9.8 [7.8-12.4]	7.7 [5.9-10.0]	0.1 [0.02-1.0]	1.6 [1.1-2.5]	0.5 [0.2-1.1]	0.1 [0.01-0.5]
Renal	29.0 [26.3-32.0]	25.9 [23.3-28.7]	0.3 [0.1-0.8]	2.9 [2.3-3.6]	1.5 [1.1-2.0]	0.2 [0.1-0.5]
Liver	126.9 [115.1-139.8]	116.5 [105.3-129.0]	0.6 [0.2-2.5]	5.9 [3.8-9.0]	4.5 [2.7-7.3]	0 [-]
Bone	90.8 [86.3-95.6]	85.8 [81.3-90.5]	0.4 [0.2-0.8]	11.7 [10.4-13.3]	7.7 [6.6-8.9]	0.5 [0.3-1.0]
Soft tissue (incl. heart)	75.0 [71.4-78.7]	70.0 [66.5-73.6]	0.4 [0.2-0.8]	6.8 [6.0-7.7]	4.5 [3.9-5.3]	0.4 [0.2-0.7]
Germ cell tumors	28.0 [26.0-30.3]	23.9 [22.0-26.0]	0.3 [0.1-0.6]	3.8 [3.3-4.5]	1.7 [1.3-2.1]	0.4 [0.2-0.6]
Endocrine	5.6 [4.5-7.0]	4.8 [3.8-6.1]	0.1 [0.03-0.6]	2.3 [1.8-3.0]	0.5 [0.3-0.9]	0.3 [0.2-0.6]
Skin & melanoma	15.2 [13.0-17.7]	13.8 [11.7-16.2]	0 [-]	4.4 [3.5-5.4]	2.8 [2.1-3.6]	0.2 [0.05-0.5]
Miscellaneous	60.2 [55.3-65.6]	55.2 [50.4-60.3]	0.8 [0.4-1.7]	5.5 [4.5-6.8]	2.9 [2.2-3.9]	0.2 [0.1-0.6]
Average	55.9 [55.0-56.7]	50.3 [49.6-51.1]	0.44 [0.38-0.52]	6.9 [6.6-7.1]	4.1 [4.0-4.3]	0.46 [0.41-0.53]

Table S3. Mortality incidence rates per type of malignancy.

CI: confidence interval; CNS: central nervous system tumors; CV: cardiovascular ^aIncludes neuroblastoma.

	N (%) or median [range]			
	Derivation set	Validation set		
Total n	22,374	6,437		
Age at diagnosis	11 [0-19]	10 [0-19]		
Male sex	11,607 (51.9)	3,384 (52.6)		
Year of diagnosis	1993 [1973-2008]	1994 [1973-2008]		
Race				
White	19,104 (85.0)	4,466 (69.4)		
Black	1,613 (7.2)	1,193 (18.5)		
Other	1,593 (7.1)	651 (10.1)		
Unknown	154 (0.7)	127 (2.0)		
History of radiation ^a	6,789 (30.8)	1,944 (30.5)		
Lymphoma diagnosis				
Leukemia	5,046 (22.6)	1,526 (23.7)		
Lymphoma	3,932 (17.6)	1,072 (16.7)		
CNS tumor	3,613 (16.2)	947 (14.7)		
Peripheral nervous cell tumor ^b	1,016 (4.5)	321 (5.0)		
Retinoblastoma	520 (2.3)	173 (2.7)		
Renal tumor	1,057 (4.7)	347 (5.4)		
Liver tumor	173 (0.8)	55 (0.9)		
Bone tumor	1,010 (4.5)	278 (4.3)		
Soft tissue sarcoma	1,538 (6.9)	441 (6.9)		
Germ cell tumor	1,717 (7.7)	491 (7.6)		
Endocrine tumor	1,104 (4.9)	313 (4.9)		
Skin and melanoma	899 (4.0)	240 (3.7)		
Miscellaneous	749 (3.4)	233 (3.6)		

Table S4. Basic demographics of the derivation and validation groups.

SEER: Surveillance, Epidemiology and End Results program ^aavailable in 22,065 individuals (98.6%) in the derivation and 6,367 individuals (98.9%) in the validation set

^bincludes neuroblastoma