Supplementary Online Content

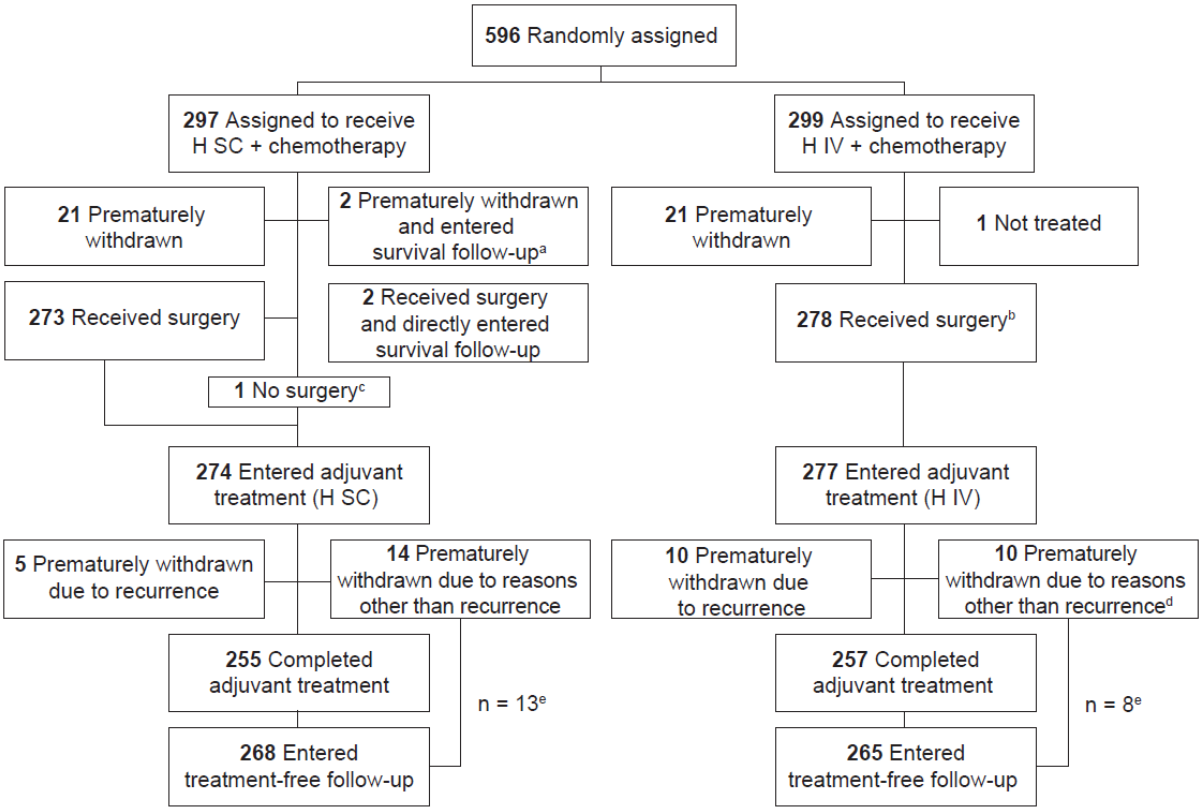
Jackisch C, Stroyakovskiy D, Pivot X, et al. Subcutaneous vs intravenous trastuzumab for patients with ERBB2-positive early breast cancer: final analysis of the HannaH phase 3 randomized clinical trial. *JAMA Oncol.* Published online April 18, 2019. doi:10.1001/jamaoncol.2019.0339

eFigure. CONSORT Diagram

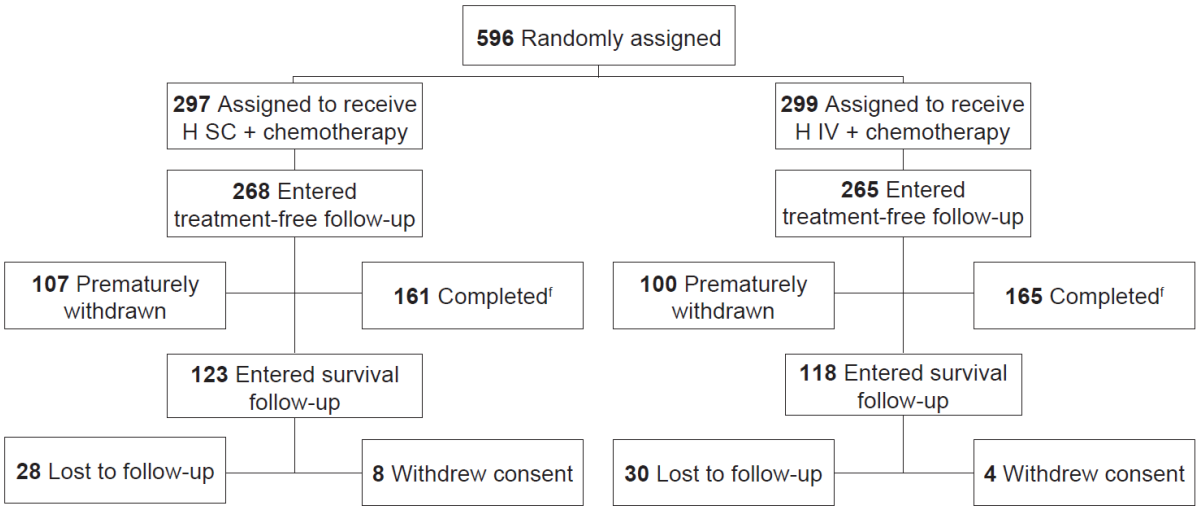
This supplementary material has been provided by the authors to give readers additional information about their work.

eFigure. CONSORT Diagram

A. Trial profile for the neoadjuvant-adjuvant treatment phase



B. Trial profile for the treatment-free follow-up phase



[a] Two patients were prematurely withdrawn due to disease progression after completion of 8 cycles of treatment but nevertheless underwent surgery and are included in the efficacy per-protocol population.
[b] Includes one patient who discontinued treatment at the end of the neoadjuvant phase, did not receive adjuvant treatment, and underwent surgery in the treatment-free follow-up phase.
[c] One patient did not undergo primary surgery after completion of the neoadjuvant phase.
[d] Includes one patient who withdrew due to insufficient therapeutic response.

[e] In the H IV arm, two patients withdrew consent. In the H SC arm, one patient withdrew consent. These patients did not enter treatment-free follow-up for event-free survival.
[f] Patients who consented to 5 years of follow-up under Protocol Amendment C only.
Abbreviations: H IV, intravenous trastuzumab; H SC, subcutaneous trastuzumab.
Reprinted from *Eur J Cancer*, Volume 62, Jackisch C, *et al.*, HannaH phase III randomised study: Association of total pathological complete response with event-free survival in HER2-positive early breast cancer treated with neoadjuvant–adjuvant trastuzumab after 2 years of treatment-free follow-up, Pages 62-75, © 2016, with permission from Elsevier.
https://doi.org/10.1016/j.ejca.2016.03.087