Supplementary Online Content

Sandini M, Patiňo M, Ferrone CR, et al. Association between changes in body composition and neoadjuvant treatment for pancreatic cancer. *JAMA Surg.* Published online May 9, 2018. doi:10.1001/jamasurg.2018.0979

eTable. Changes in Body Compartments, Radiologic Response and Resection Rate According to the Neoadjuvant Regimen

eFigure. Likelihood of Resection According to the Presence of Sarcopenia

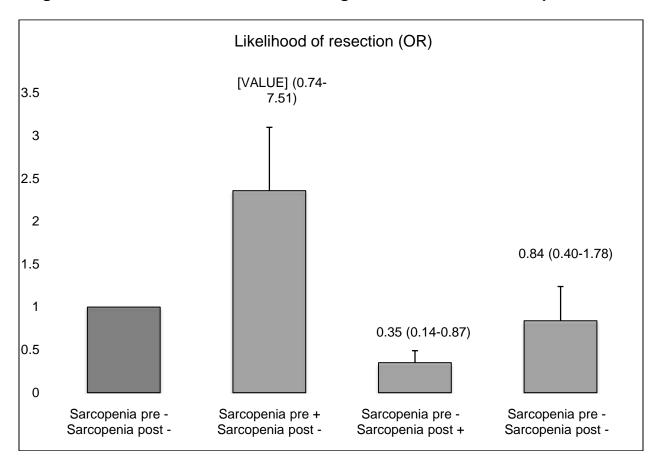
This supplementary material has been provided by the authors to give readers additional information about their work.

eTable. Changes in Body Compartments, Radiologic Response and Resection Rate According to the Neoadjuvant Regimen

	FOLFIRINOX	PAXG/PEXG	GEM-based	p value
delta TAT (cm²)	-48.0 (-120.0-21.0)	-24.6 (-58.9-42.7)	-18.0 (-99.0-37.0)	0.035
delta VAT (cm²)	-24.0 (-61.0-7.0)	-4.6 (-24.8-14.7)	-14.7 (-78.0-26.8)	0.123
delta SM (cm²)	6.80 (-3.9-19.0)	-0.1 (-10.0-5.1)	-5.9 (-3.5-19.6)	0.096
Response to CT				0.028
Stable disease	77 (62.1)	34 (63.0)	12 (80.0)	
Partial response	24 (19.4)	19 (3.2)	2 (13.3)	
Progressive disease	20 (16.1)	1 (1.9)	1 (6.7)	
Complete response	3 (2.4)	0 (0.0)	0 (0.0)	
Resection	91 (73.4)	33 (61.1)	12 (80.0)	0.180

TAT: total adipose tissue area; VAT: visceral adipose tissue area; SM: skeletal muscle area. PAXG/PEXG: cisplatin + epirubicin/nab-paclitaxel + capecitabine + gemcitabine; GEM: gemcitabine.

eFigure. Likelihood of Resection According to the Presence of Sarcopenia



Non-sarcopenic patients at both pre-NT and post-NT CT-scans were considered as the reference group. Data are reported as ORs and 95%CI.