

## SUPPLEMENTAL MATERIALS

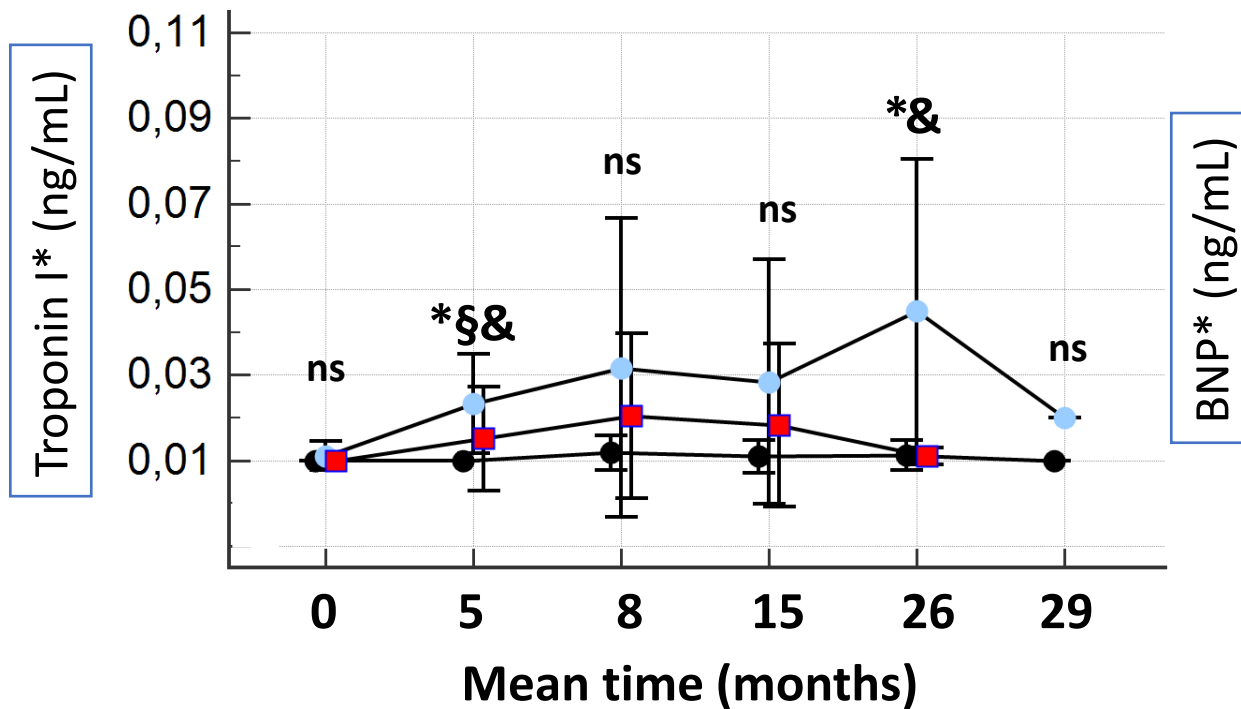
### **Multiparametric Early Detection and Prediction of Cardiotoxicity Using Myocardial Strain, T1 and T2 Mapping and Biochemical Markers. A Longitudinal Cardiac Resonance Imaging Study During Two Years of Follow-up.**

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\*The authors contributed equally to this study.

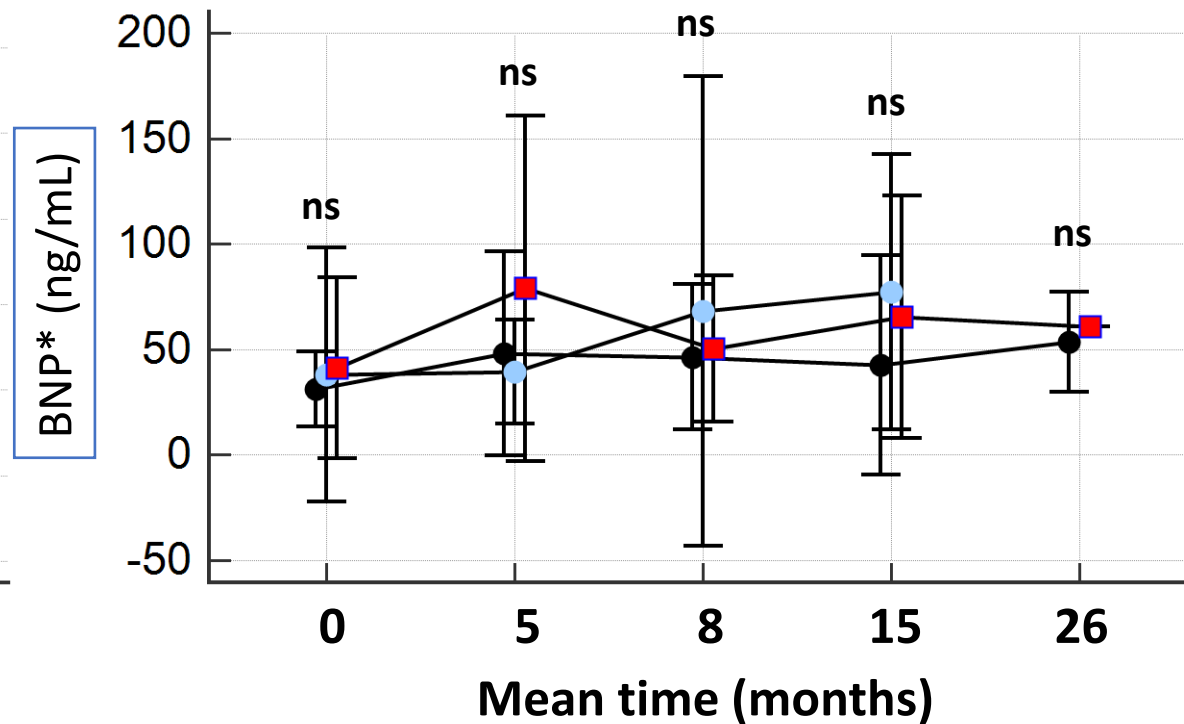
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**A.**



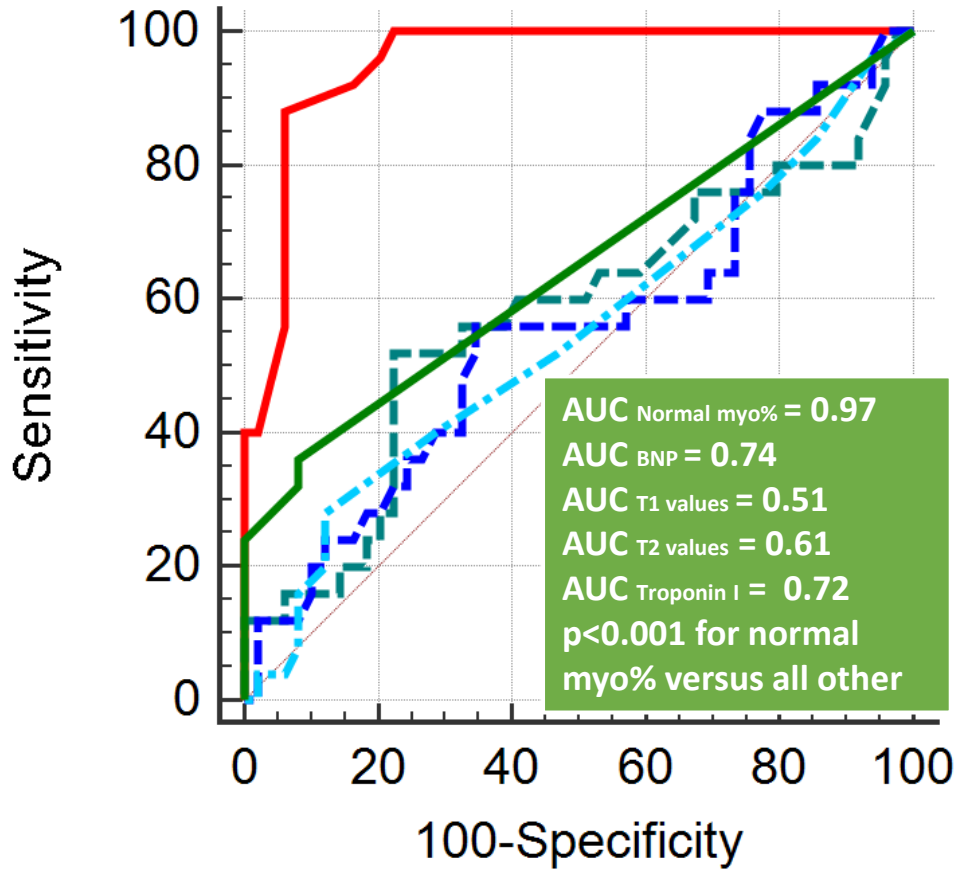
All timepoints were considered in patients with no CTX and REC. All timepoints after first occurrence of CTX were considered in patients with CTX.

**B.**



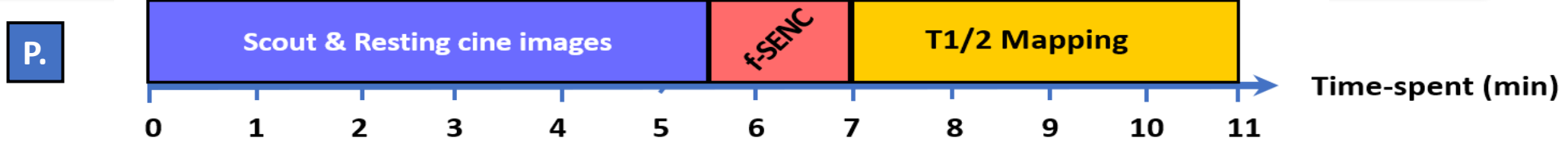
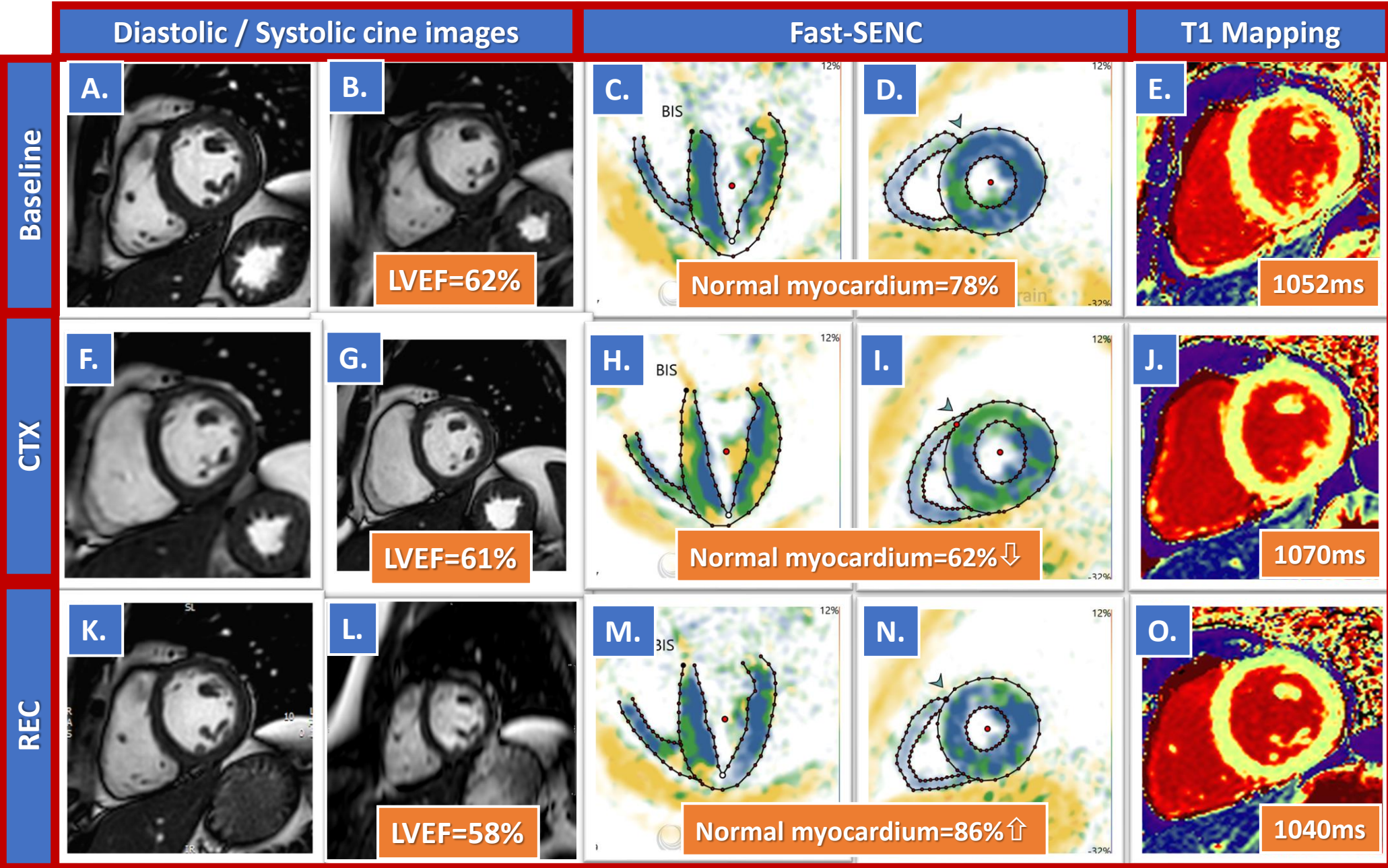
\*, p<0.05 for no CTX vs. CTX (wo REC)  
 §, p<0.05 for no CTX vs. REC  
 &, p<0.05 for CTX (wo REC) vs. REC  
 \*,§ and & by Conover's post hoc analysis  
 p values by Kruskal-Wallis tests (DF=2)

No CTX versus CTX and sub-CTX  
(Recovery excluded)



- Normal myocardium(%)
- BNP\*
- T1 values
- T2 values
- Troponin I\*

\* For n=196 timepoints with available biomarkers



Supplemental Figure III

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### Figure Captions

**Suppl. Figure I:** Time response for cardiac biomarkers troponin I (A) and BNP (B).

**Suppl. Figure II:** Normal myocardium (%) demonstrated superior diagnostic value over T1, T2, BNP and troponin I.

**Suppl. Figure III:** Representative cine, fast-SENC and T1 mapping images in the same patient at baseline (A-E), after occurrence of CTX (F-J) and during REC (K-O).