Supplemental material

Early-Onset Cardiac Dysfunction Following Allogeneic Haematopoietic Stem Cell Transplantation

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Supplemental Table 1. Baseline echocardi	ographic parameters		
	CTRCD	Non-CTRCD	D 1 *
	(n=23)	(n=113)	P-value*
Dimension			
LVEF (%)	65.8 (64.4-70.0)	69.1 (63.3-74.0)	0.158
LV end-diastolic diameter (mm)	47.0 (43.0-51.0)	47.0 (44.0-51.0)	0.914
LV end-systolic diameter (mm)	31.0 (27.0-32.0)	29.0 (25.0-32.0)	0.249
Left atrial diameter (mm)	32.5 (27.8-36.0)	34.0 (29.5-38.0)	0.245
Transmitral flow			
Peak E wave velocity (cm/s)	73 (57.4-82.8)	71.1 (59.0-88.8)	0.967
Peak A wave velocity (cm/s)	65.8 (51.1-81.3)	66.2 (53.2-77.9)	0.776
E/A ratio	1.2 (0.9-1.5)	1.1 (0.9-1.4)	0.401
Deceleration time (ms)	183.5 (134.0-214.0)	190.0 (158.0-227.3)	0.412
Tissue doppler			
e' velocity (cm/s)	8.8 (6.6-11.1)	8.0 (6.5-9.6)	0.508
a' velocity (cm/s)	9.2 (7.8-11.3)	9.3 (7.9-10.5)	0.897
s' velocity (cm/s)	8.2 (6.9-9.9)	8.5 (7.3-9.5)	0.870
E/e' ratio	8.0 (6.3-11.7)	8.6 (7.4-10.9)	0.569

Values are median (25^{th} to 75^{th} percentile). *: CTRCD vs. Non-CTRCD.

CTRCD, cancer therapy-related cardiac dysfunction; EF, ejection fraction; LV, left ventricular.

	Model 1		Model 2		Model 3		Model 4		Model 5	
	Odds ratio [95% CI]	Р	Odds ratio [95% CI]	P						
CCr, /10 ml/min	0.87 [0.74-1.03]	0.089	0.87 [0.73-1.02]	0.086	0.89 [0.74-1.03]	0.106	0.89 [0.71-0.99]	0.030	-	-
Cumulative DXR dose, /10 mg/m ²	1.03 [1.00-1.07]	0.082	-	-	-	-	-	-	1.03 [1.00-1.07]	0.045
Conditioning regimen with MAC	-	-	0.46 [0.15-1.43]	0.179	-	-	-	-	0.41 [0.13-1.28]	0.109
HCT-CI, /point	-	-	-	-	0.89 [0.87-2.10]	0.179	-	-	-	-
Acute GVHD, /grade	-	-	-	_	-	_	0.89 [1.19-2.92]	0.004	-	_

	Model 6		Model 7		Model 8		Model 9		Model 10	
	Odds ratio [95% CI]	P	Odds ratio [95% CI]	P						
CCr, /10 ml/min	-	-	-	-	-	-	-	-	-	-
Cumulative DXR dose, /10 mg/m ²	0.89 [1.00-1.07]	0.046	0.89 [1.01-1.08]	0.013	-	-	-	-	-	-
Conditioning regimen with MAC	-	-	-	-	0.46 [0.15-1.45]	0.172	0.43 [0.14-1.38]	0.141	-	-
HCT-CI, /point	0.89 [0.94-2.30]	0.095	-	-	0.89 [0.89-2.14]	0.147	-	-	0.89 [0.91-2.19]	0.125
Acute GVHD, /grade	-	-	0.89 [1.25-3.14]	0.002	-	-	0.89 [1.14-2.70]	0.008	0.89 [1.14-2.72]	0.008

CI, confidence interval; CR, complete remission; CTRCD, cancer therapy-related cardiac dysfunction; DXR, doxorubicin; GVHD, graft-versus-host disease; HCT-CI, haematopoietic cell transplantation-specific comorbidity index; HSCT, haematopoietic stem cell transplantation; LVEF, left ventricular ejection fraction; P, P value.

Supplemental Table 3. Unadjusted analysis for time from HSCT to overall death				
	HR [95% CI]	P-value		
Age	1.01 [0.99-1.03]	0.313		
Male	0.95 [0.61-1.47]	0.815		
CCr, /10 ml/min	0.92 [0.86-0.98]	0.018		
Cardiac risk factors ≥ 2	0.71 [0.34-1.47]	0.354		
Leukaemia	0.61 [0.38-0.97]	0.038		
History of HSCT	1.53 [0.96-2.43]	0.072		
Non-CR status at HSCT	2.33 [1.39-3.90]	0.001		
Haploidentical PBSCT	2.65 [1.36-5.16]	0.004		
HLA mismatch ≥ one locus	1.21 [0.77-1.90]	0.412		
GVHD prophylaxis including tacrolimus	1.23 [0.70-2.15]	0.475		
HCT-CI, /point	1.59 [1.28-1.97]	< 0.001		
Acute GVHD, /grade	1.37 [1.09-1.71]	0.006		
Early-onset CTRCD	3.30 [2.01-5.41]	< 0.001		

Number of overall deaths: 81.

CCr, creatinine clearance; CI, confidence interval; CR, complete remission; CTRCD, cancer therapy-related cardiac dysfunction; GVHD, graft-versus-host disease; HCT-CI, haematopoietic cell transplantation-specific comorbidity index; HLA, human leukocyte antigen; HR, hazard ratio; HSCT, haematopoietic stem cell transplantation; PBSCT, peripheral blood stem cell transplantation.

Supplemental Table 4. Cause of death in patients with early-onset CTRCD				
	All (n=136)	CTRCD (n=23)	Non-CTRCD (n=113)	
All cause death, n (%)	81 (60)	22 (96)	59 (52)	
Primary disease death, n (%)	39 (29)	12 (52)	27 (24)	
Treatment-related death	42 (31)	10 (43)	32 (28)	
GVHD, n (%)	7 (5)	3 (13)	4 (4)	
Infection, n (%)	30 (22)	7 (30)	23 (2)	
Others*, n (%)	5 (4)	0 (0)	5 (4)	

CTRCD, cancer therapy-related cardiac dysfunction; GVHD, graft-versus-host disease.

^{*}Others: other type cancer, thrombotic microangiopathy, sinusoidal obstruction syndrome/venoocclusive disease, non-infectious pulmonary complications, cerebral and/or gastrointestinal haemorrhage.

Supplemental Table 5. Unadjusted analysis for time from HSCT to primary disease death				
	HR [95% CI]	P-value		
Age	1.00 [0.98-1.03]	0.767		
Male	0.85 [0.45-1.59]	0.601		
CCr, /10 ml/min	0.91 [0.82-1.00]	0.070		
Cardiac risk factors ≥ 2	0.53 [0.16-1.73]	0.296		
Leukaemia	0.48 [0.25-0.91]	0.026		
History of HSCT	1.38 [0.70-2.73]	0.351		
Non-CR status at HSCT	6.26 [2.22-17.68]	< 0.001		
Haploidentical PBSCT	4.32 [1.89-9.86]	< 0.001		
HLA mismatch ≥ one locus	1.62 [0.82-3.19]	0.167		
GVHD prophylaxis including tacrolimus	0.82 [0.40-1.69]	0.600		
HCT-CI, /point	1.59 [1.15-2.16]	0.004		
Acute GVHD, /grade	0.93 [0.68-1.27]	0.635		
Early-onset CTRCD	3.91 [1.97-7.77]	< 0.001		

Number of primary disease death: 39.

CCr, creatinine clearance; CI, confidence interval; CR, complete remission; CTRCD, cancer therapy-related cardiac dysfunction; GVHD, graft-versus-host disease; HCT-CI, haematopoietic cell transplantation-specific comorbidity index; HLA, human leukocyte antigen; HR, hazard ratio; HSCT, haematopoietic stem cell transplantation; PBSCT, peripheral blood stem cell transplantation.

Supplemental Table 6. Adjusted analyses of the association between early-onset CTRCD and time from HSCT to primary disease death

	HR [95% CI]	P-value
Model 1	3.50 [1.66-7.34]	0.001
Model 2	3.77 [1.85-7.70]	< 0.001
Model 3	3.77 [1.84-7.71]	< 0.001
Model 4	3.20 [1.50-6.82]	0.003
Model 5	3.09 [1.48-6.47]	0.003
Model 6	3.43 [1.60-7.36]	0.002
Model 7	2.84 [1.33-6.06]	0.007
Model 8	3.26 [1.60-6.64]	0.001

Model 1: adjusting age, sex, CCr, and disease type*.

Model 2: adjusting age, sex, disease status†, and source of HSCT‡.

Model 3: adjusting age, sex, source of HSCT‡, and HCT-CI.

Model 4: adjusting CCr, disease type*, disease status†, source of HSCT‡.

Model 5: adjusting CCr, disease type*, disease status†, and HCT-CI.

Model 6: adjusting CCr, disease type*, source of HSCT‡, and HCT-CI.

Model 7: adjusting CCr, disease status†, source of HSCT‡, and HCT-CI.

Model 8: adjusting disease type*, disease status†, source of HSCT‡, and HCT-CI.

*, leukaemia or not; † CR or not; ‡, haploidentical PBSCT or not.

CCr, creatinine clearance; CI, confidence interval; CR, complete remission; CTRCD, cancer therapy-related cardiac dysfunction; GVHD, graft-versus-host disease; HCT-CI, haematopoietic cell transplantation-specific comorbidity index; HR, hazard ratio; PBSCT, peripheral blood stem cell transplantation.

Supplemental Table 7. Unadjusted analysis for time from HSCT to treatment related death				
	HR [95% CI]	P-value		
Age	1.01 [0.99-1.04]	0.266		
Male	1.06 [0.57-1.95]	0.857		
CCr, /10 ml/min	0.93 [0.84-1.02]	0.122		
Cardiac risk factors ≥ 2	0.88 [0.35-2.24]	0.788		
Leukaemia	0.78 [0.40-1.53]	0.468		
History of HSCT	1.67 [0.89-3.14]	0.111		
Non-CR status at HSCT	1.28 [0.67-2.41]	0.453		
Haploidentical PBSCT	1.38 [0.42-4.48]	0.597		
HLA mismatch ≥ one locus	0.94 [0.51-1.73]	0.838		
GVHD prophylaxis including tacrolimus	2.02 [0.80-5.15]	0.139		
HCT-CI, /point	1.60 [1.17-2.14]	0.002		
Acute GVHD, /grade	2.00 [1.45-2.79]	< 0.001		
Early-onset CTRCD	2.77 [1.35-5.69]	0.005		

Number of primary disease death: 42.

CCr, creatinine clearance; CI, confidence interval; CR, complete remission; CTRCD, cancer therapy-related cardiac dysfunction; GVHD, graft-versus-host disease; HCT-CI, haematopoietic cell transplantation-specific comorbidity index; HLA, human leukocyte antigen; HR, hazard ratio; HSCT, haematopoietic stem cell transplantation; PBSCT, peripheral blood stem cell transplantation.

Supplemental Figure 1. LVEF change in CTRCD and non-CTRCD group

LVEF decreased from 66% (64%-70%) to 41% (26%-50%) in the early-onset CTRCD group (p<0.001) and from 69% (63%-74%) to 66% (60%-73%) in the non-early-onset CTRCD group (p<0.001) after HSCT (interaction-p<0.001).

CTRCD, cancer therapy-related cardiac dysfunction; HSCT, haematopoietic stem cell transplantation; LVEF, left ventricular ejection fraction

Supplemental Figure 2. Difference in LVEF reduction between patients with low-grade and high-grade acute GVHD

The reduction in LVEF was significantly higher in patients with high-grade acute GVHD than in patients with low-grade GVHD (p=0.045).

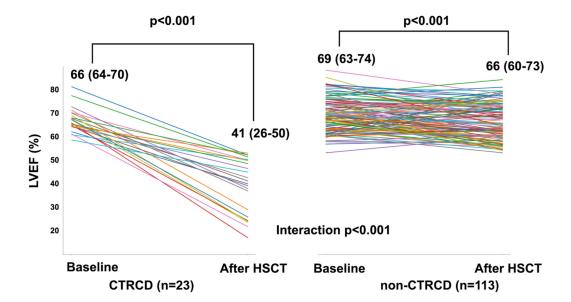
IQR, interquartile range; LVEF, left ventricular ejection fraction; GVHD, graft-versus-host disease

Supplemental Figure 3. OS with respect to the presence of heart failure symptoms in patients with CTRCD

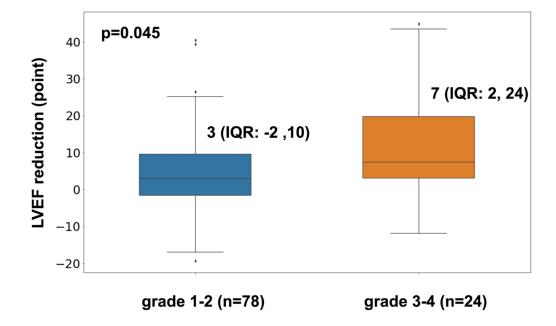
In patients with CTRCD, the median OS was significantly shorter in patients with heart failure symptoms than in those without heart failure symptoms (p=0.006).

CI, confidence interval; CTRCD, cancer therapy-related cardiac dysfunction; HSCT, haematopoietic stem cell transplantation; OS, overall survival

Supplemental Figure 1



Supplemental Figure 2



Supplemental Figure 3

