Supplemental Online Content

Kerlikowske K, Su Y-R, Sprague BL, et al. Association of screening with digital breast tomosynthesis vs digital mammography with risk of interval invasive and advanced breast cancer. *JAMA*. doi:10.1001/jama.2022.7672

eMethods

Absolute difference in screening outcome

Evaluation of propensity model

eFigure. Propensity scores for digital mammography and digital breast tomosynthesis examinations

Multiple imputation of tumor characteristics for calculation of advanced cancer as defined by Tomosynthesis Mammographic Imaging Screening Trial (TMIST)

eTable 1. Summary of variables used to impute tumor characteristics used to calculate TMIST

eReferences

eTable 2. Outcomes from screening with digital breast tomosynthesis vs. digital mammography

eTable 3. Rate of screening benefits and failures by breast density for digital breast tomosynthesis vs digital mammography

eTable 4. Rate of screening false-alarms by breast density for digital breast tomosynthesis vs. digital mammography

eTable 5. Rate of screening benefits and failures by breast density for digital mammography and digital breast tomosynthesis

eTable 6. Rate of screening harms by breast density and BCSC 5-year risk for digital breast tomosynthesis vs. digital mammography

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

eMethods

Absolute difference in screening outcome

The absolute difference (AD) in each screening outcome is defined as the absolute difference in their rate per 1000 exams by modality, R_{DBT} for digital breast tomosynthesis (DBT) and R_{DM} for digital mammography, respectively. Under a log-binomial regression,

log(outcome rate | modality) = $\alpha + \beta I$ (modality=DBT),

the absolute difference can be expressed as following:

$$AD = R_{DBT} - R_{DM} = e^{\alpha + \beta} - e^{\alpha}.$$

Using SAS PROC GENMOD with an independent working correlation, we obtained $\hat{\alpha}$ and $\hat{\beta}$, the estimates of α and β , and their estimated variance-covariance matrix. We then estimated AD by $\widehat{AD} = e^{\hat{\alpha}+\hat{\beta}} - e^{\hat{\alpha}}$. Denote the true value of α and β as α_0 and β_0 . The variance of \widehat{AD} was approximated using delta method as shown below:

$$\operatorname{var}(\widehat{AD}) \approx \operatorname{var}[(e^{\alpha_0 + \beta_0} - e^{\alpha_0})(\widehat{\alpha} - \alpha_0) + e^{\alpha_0 + \beta_0}(\widehat{\beta} - \beta_0)]$$

$$= \left(e^{\alpha_0+\beta_0} - e^{\alpha_0}\right)^2 \operatorname{var}(\hat{\alpha}) + \left(e^{\alpha_0+\beta_0}\right)^2 \operatorname{var}(\hat{\beta}) + 2e^{\alpha_0+\beta_0}(e^{\alpha_0+\beta_0} - e^{\alpha_0})\operatorname{cov}(\hat{\alpha},\hat{\beta})$$
$$= \left[e^{\alpha_0+\beta_0} - e^{\alpha_0} \quad e^{\alpha_0+\beta_0}\right] \operatorname{var}\left(\hat{\alpha}\right) \left[\frac{e^{\alpha_0+\beta_0} - e^{\alpha_0}}{e^{\alpha_0+\beta_0}}\right].$$

We estimated the variance of \widehat{AD} by

$$s^{2} = \begin{bmatrix} e^{\hat{\alpha} + \hat{\beta}} - e^{\hat{\alpha}} & e^{\hat{\alpha} + \hat{\beta}} \end{bmatrix} \widehat{\text{var}} \begin{pmatrix} \hat{\alpha} \\ \hat{\beta} \end{pmatrix} \begin{bmatrix} e^{\hat{\alpha} + \hat{\beta}} - e^{\hat{\alpha}} \\ e^{\hat{\alpha} + \hat{\beta}} \end{bmatrix}.$$

The 95% confidence interval of \widehat{AD} was obtained by $\widehat{AD} \pm 1.96 \times s$.

Evaluation of propensity model

We first visually examined the density of propensity scores for DBT vs. digital mammography examinations (eFigure 1). The density curves of propensity scores in DBT and digital mammography exams overlapped across a wide range, suggesting a common support of propensity scores in the two treatment groups. We also examined the standardized mean differences of covariates in the propensity model between the two treatment groups before and after weighting with the inverse probability (Table 1). Using a maximum of 25% standardized mean difference,³ the distributions of these covariates were balanced between DBT and digital mammography exams after weighting.



eFigure 1. Propensity scores for digital mammography and digital breast tomosynthesis examinations.

Multiple imputation of tumor characteristics for calculation of advanced cancer as defined by Tomosynthesis Mammographic Imaging Screening Trial (TMIST)

We used multiple imputation by chained equation (MICE)¹ to impute missing values in components needed for deriving TMIST outcome, including 4.4% missing for primary tumor size, 2.2% for lymph nodes status, 3.7% for tumor grade, 7.8% for human epidermal growth factor receptor 2 (HER2), 2.0% for estrogen receptor (ER) and 2.1% for progesterone receptor (PR). These variables were multiply imputed simultaneously by SAS PROC MI using fully conditional specification (FCS). A detailed description of variables used in the multiple imputation are shown in eTable 2. We computed the rate of TMIST outcomes for DBT and digital mammography exams and the absolute risk differences between DBT vs. digital mammography using each imputed dataset. Estimates and 95% confidence intervals were combined and derived using Rubin's rule.²

eTable 1: Summary of variables used to impute tumor characteristics used to calculate TMIST

Description	Turne	Variable lavale	ECS	Total N = 5,735		
Description	гуре	variable levels	FCS	N Missing	% Missing	
Age at mammogram	Continuous	N/A	N/A	0	0	
Exam year	Continuous	N/A	N/A	0	0	
BCSC Registry	Nominal	5	N/A	0	0	
Mammogram modality	Binary	2	N/A	0	0	
BI-RADS initial assessment	Binary	2	N/A	0	0	
BI-RADS final assessment	Binary	2	N/A	0	0	
Most severe benign biopsy result	Ordinal	6	N/A	0	0	
U		5 + missing				
Race/ethnicity	Nominal	value category	N/A	0	0	
		4 + missing				
BI-RADS breast density category	Ordinal	value category	N/A	0	0	
First-degree family history of breast		2 + missing				
cancer	Binary	value category	N/A	0	0	
Time since previous screening		4 + missing				
mammogram	Ordinal	value category	N/A	0	0	
Estrogen receptor status	Binary	2	logistic	108	1.88	
Progesterone receptor status	Binary	2	logistic	162	2.82	
Positive lymph nodes	Binary	2	logistic	168	2.93	
AJCC anatomic stage, 8 th edition	Ordinal	9	logistic	193	3.7	
Tumor grade	Ordinal	3	logistic	232	4.05	
Natural log of tumor size	Continuous	N/A	regression	244	4.25	
HER2 receptor status	Binary	2	logistic	452	7.88	
Abbreviations: FCS, type of fully conditionally specimation (BI-RADS);	cified statement used Tomosynthesis Man	l in SAS PROC MI; Amer	rican Joint Commi eening Trial (TMIS	ttee on Cancer (A	JCC); Breast	

eReferences

1. White IR, Royston P. Imputing missing covariate values for the Cox model. Stat Med 2009;28:1982–98.

2. Little, R. & Rubin, D. Statistical Analysis with Missing Data (John Wiley, New York, 2002).

eTable 2. Outcomes from screening with digital breast tomosynthesis vs. digital mammography

	Digital breast tomosynthesis	Digital mammography	
	N=374002	N=1003900	
Screening outcomes	Rate per 1,000	Rate per 1,000	Difference
	exams (95% CI)ª	exams (95% Cl)ª	(95% Cl)ª
Screening benefit			
Stage I screen-detected	3.45	2.99	0.46
invasive cancer	(3.06, 3.90)	(2.78, 3.23)	(-0.01, 0.93)
Screening failures			
Interval invasive cancer	0.57	0.61	-0.04
	(0.50, 0.65)	(0.54, 0.68)	(-0.14, 0.06)
Stage II or higher invasive cancer ^b	0.36	0.45	-0.09
	(0.29, 0.44)	(0.38, 0.53)	(-0.18, -0.01)
TMIST advanced cancer ^c	1.80	1.89	-0.09
	(1.19, 2.70)	(1.66, 2.18)	(-0.80, 0.62)
Screening false-alarms			
False-positive recall	66.2	83.4	-17.2
	(62.0, 70.7)	(75.5, 92.2)	(-25.2, -9.2)
False-positive short interval	11.2	17.9	-6.7
follow-up	(8.9, 14.1)	(14.1, 22.7)	(-11.2, -2.2)
False-positive biopsy	10.9	11.7	-0.84
recommendation	(10.1, 11.7)	(9.8, 14.0)	(-2.6, 0.87)
Screening consequences			
Screen-detected DCIS ^d	1.24 (1.07, 1.44)	1.24 (1.03, 1.48)	0.00 (-0.27, 0.27)

^aBased on log-binomial model fit via generalized estimating equations with inverse probability weighting ^bAmerican Joint Committee on Cancer (AJCC) 8th edition, prognostic stage II or higher ^cTomosynthesis Mammographic Imaging Screening Trial (TMIST) defined as 1) tumor ≥20 mm, or 2) tumor >10mm and either HER2-positive or triple-negative, or 3) cancer that spread from the breast to at least one nearby lymph node or 4) cancer that spread from the breast to a distant organ

^dDuctal carcinoma in situ

eTable 3. Rate of screening benefits and failures by breast density for digital breast tomosynthesis vs digital mammography (DM)^a

	SCRE	EENING BEI	NEFIT	SCREENING FAILURES										
	Screen-de	Stage I tected invas	sive cancer	Interval invasive cancer			Prognos	stic Stage II vasive cano	or higher cer ^b	TMIST advanced breast cance definition [°]				
	р 1,000	er exams	Difference	ро 1,000 о	per Difference 1.000 exams			per 1,000 exams Differen ce		per 1,000 exams		Difference		
Breast density (DBT N /DM N)	(95% CI)			(95% CI)			(95% CI)			(95% CI)				
	DBT	DM	DBT vs. DM	DBT	DM	DBT vs. DM	DBT	DM	DBT vs. DM	DBT	DM	DBT vs. DM		
Almost entirely fatty (39059/101842)	2.39 (2.10,2.73)	2.09 (1.71,2.55)	0.30 (-0.22,0.82)	0.12 (0.04,0.40)	0.24 (0.13,0.43)	-0.12 (-0.31,0.07)	0.07 (0.02,0.29)	0.21 (0.13,0.33)	-0.14 (-0.28,0.00)	1.14 (0.08,1.57)	0.98 (0.70,1.31)	0.16 (-0.25,0.57)		
Scattered fibroglandular densities (173534/428513)	3.74 (3.54,3.94)	3.30 (2.98,3.65)	0.44 (0.07,0.81)	0.31 (0.20,0.48)	0.39 (0.33,0.47)	-0.08 (-0.24,0.07)	0.46 (0.26,0.80)	0.41 (0.33,0.50)	0.05 (-0.21,0.31)	1.54 (1.11,2.15)	1.75 (1.50,2.05)	-0.20 (-0.76,0.34)		
Heterogeneously dense (127740/357811)	3.54 (2.70,4.64)	2.80 (2.41,3.26)	0.74 (-0.22,1.71)	0.99 (0.80,1.22)	0.87 (0.76,1.01)	0.11 (-0.11,0.34)	0.33 (0.14,0.74)	0.51 (0.40,0.65)	-0.19 (-0.46,0.09)	2.21 (1.26,3.88)	2.23 (1.86,2.68)	-0.02 (-1.21,1.16)		
Extremely dense (24361/70519)	2.73 (2.37,3.14)	2.37 (1.94,2.90)	0.36 (-0.17,0.89)	0.87 (0.59,1.27)	1.21 (0.93,1.58)	-0.34 (-0.76, 0.07)	0.42 (0.34,0.51)	0.59 (0.42,0.83)	-0.17 (-0.39,0.04)	2.34 (1.94,2.83)	1.87 (1.52,2.31)	0.47 (-0.05,0.99)		

^aBased on log-binomial model fit via generalized estimating equations with inverse probability weighting

^bAmerican Joint Committee on Cancer (AJCC) 8th ed. prognostic pathologic stage II or higher

^cTomosynthesis Mammographic Imaging Screening Trial (TMIST) defined as 1) tumor >20 mm, or 2) tumor >10mm and either HER2-positive or triple-negative, or 3) cancer that spread from the breast to at least one nearby lymph node or 4) cancer that spread from the breast to a distant organ

		SCREENING FALSE-ALARMS											
	Fa	lse-positive re	call	False-pos	itive short-inte recommenda	erval follow-up tion	False-positive biopsy recommendation						
Proper 1,000 exams			Difference	per ex	1,000 ams	Difference	per 1,000 exams		Difference				
(DBT N /DM N)		(95% CI)			(95% CI)								
	DBT	DM	DBT vs. DM	DBT	DM	DBT vs. DM	DBT	DM	DBT vs. DM				
Almost entirely fatty (39059/101842)	36.2 (33.6,38.0)	46.1 (38.7,54.0)	-9.9 (-17.1,-2.6)	6.5 (4.7,9.1)	10.4 (8.3,13.0)	-3.9 (-6.9,-0.84)	5.9 (5.3,6.6)	8.0 (6.4,10.1)	-2.1 (-3.9,-0.34)				
Scattered fibroglandular densities (173534/428513)	56.8 (50.4,64.0)	79.6 (71.6,88.0)	-22.8 (-31.0,-14.6)	9.8 (6.7,14.5)	17.8 (14.1,22.0)	-8.0 (-13.1,-2.9)	8.4 (7.5,9.4)	10.7 (9.0,12.5)	-2.2 (-4.0,-0.82)				
Heterogeneously dense (127740/357811)	83.0 (75.3,91.0)	96.9 (83.7,112)	-13.9 (-29.1, 1.3)	13.4 (10.4,16.0)	20.8 (16.4,26.0)	-7.4 (-12.5,-2.4)	14.2 (12.8,15.0)	12.7 (10.2,15.0)	1.5 (-1.3,4.2)				
Extremely dense (24361/70519)	89.2 (83.1,95)	86.6 (78.5,95)	2.6 (-7.9,13)	16.5 (14.5,18.0)	16.5 (12.8,21.0)	0.05 (-4.0,4.1)	16.7 (14.6,19.0)	14.6 (12.3,17.0)	2.1 (-5.5,5.6)				

eTable 4. Rate of screening false-alarms by breast density for digital breast tomosynthesis vs. digital mammography (DM)^a

^aBased on log-binomial model fit via generalized estimating equations with inverse probability weighting

eTable 5. Rate of screening benefits and failures by breast density for digital mammography (DM) and digital breast tomosynthesis^a

		SCREENIN BENEFIT	EENING NEFIT SCREENING FAILURES									
	Stage I Screen-detected invasive cancer			Interval invasive cancer			Prognostic Stage II or higher invasive cancer ^b			TMIST advanced breast cancer definition ^c		
Breast density/BCSC 5-	ې 1,000	er exams	Difference	р 1,000	er exams	Difference	per 1,000 exams		Difference	per 1,000 exams		Difference
(DBT N /DM N)	(95% CI)			(95% CI)			(95% CI)			(95% CI)		
Almost entirely fatty	DBT	DM	DBT vs. DM	DBT	DM	DBT vs. DM	DBT	DM	DBT vs. DM	DBT	DM	DBT vs. DM
0-<1.67% (33692/88143)	1.66 (1.25, 2.19)	1.84 (1.48, 2.30)	-0.19 (-0.77,0.40)	0.08 (0.02,0.30)	0.23 (0.12,0.46)	-0.15 (-0.31,0.01)	0.08 (0.02,0.33)	0.22 (0.14,0.36)	-0.14 (-0.30,0.01)	0.44 (0.11,1.70)	0.98 (0.72,1.34)	-0.54 (-1.18, 0.09)
≥1.67% (2710/5427)	2.65 (1.03,6.83)	3.87 (2.07, 7.25)	-1.22 (-4.60,2.16)	0.95 (0.27,3.37)	0.42 (0.14,1.29)	0.53 (-0.78,1.85)	NA	NA	NA	1.78 (0.51,6.25)	0.95 (0.39,2.32)	0.82 (-1.53, 3.19)
Scattered fibroglandular densities											I	1
0-<1.67% (117322/306387)	2.78 (2.49, 3.09)	2.69 (2.43, 2.97)	0.09 (-0.30,0.48)	0.24 (0.12,0.46)	0.28 (0.23, 0.34)	-0.04 (-0.21,0.13)	0.35 (0.23, 0.51)	0.33 (0.25,0.45)	0.02 (-0.13,0.16)	0.98 (0.66,1.45)	1.41 (1.18,1.67)	-0.42 (-0.86, 0.01)
≥1.67% (45985/91383)	6.96 (6.15, 7.88)	4.72 (4.07, 5.48)	2.24 (1.17,3.32)	0.56 (0.41,0.78)	0.69 (0.51, 0.92)	-0.12 (-0.40,0.15)	0.70 (0.28,1.73)	0.54 (0.39,0.75)	0.16 (-0.51,0.83)	3.28 (2.26,4.76)	2.56 (2.08,3.15)	0.72 (-0.52, 1.96)
Heterogeneously dense												
0-<1.67% (56810/185489)	1.54 (0.97, 2.43)	1.73 (1.46, 2.05)	-0.19 (-0.94,0.55)	1.12 (0.69,1.82)	0.70 (0.58, 0.85)	0.42 (-0.17,1.01)	0.27 (0.10,0.74)	0.39 (0.29,0.54)	-0.12 (-0.39,0.15)	1.39 (0.78,2.49)	1.50 (1.25,1.81)	-0.10 (-0.90, 0.69)
≥1.67% (66180/156785)	5.50 (4.50, 6.72)	3.78 (3.11, 4.60)	1.72 (0.56,2.87)	0.86 (0.55,1.35)	1.03 (0.85, 1.24)	-0.17 (-0.62,0.28)	0.41 (0.21,0.81)	0.61 (0.49,0.77)	-0.20 (-0.50,0.10)	3.29 (1.90,5.67)	2.88 (2.38,3.47)	0.41 (-1.27, 2.09)
Extremely dense												
0-<1.67% (10611/37796)	1.99 (1.43, 2.77)	1.69 (1.25, 2.29)	0.30 (-0.48,1.08)	0.93 (0.74,1.17)	1.07 (0.78, 1.46)	-0.13 (-0.49,0.22)	0.54 (0.30.68)	0.42 (0.29,0.62)	0.12 (-0.09,0.32)	2.55 (1.94,3.36)	1.66 (1.30,2.11)	0.90 (0.14, 1.7)
≥1.67% (13291/31300)	3.28 (2.41, 4.45)	2.98 (2.29, 3.87)	0.30 (-0.87,1.47)	0.81 (0.37,1.76)	1.39 (1.01, 1.92)	-0.59 (-1.27,0.09)	0.27 (0.14,0.52)	0.80 (0.49,1.31)	-0.53 (-0.97,-0.10)	1.70 (0.98,2.95)	2.12 (1.55,2.91)	-0.42 (-1.43, 0.58)

^aBased on log-binomial model fit via generalized estimating equations with inverse probability weighting

^bAmerican Joint Committee on Cancer (AJCC) 8th ed. prognostic pathologic stage II or higher

^cTomosynthesis Mammographic Imaging Screening Trial (TMIST) defined as 1) tumor >20 mm, or 2) tumor >10mm and either HER2-positive or triple-negative, or 3) cancer that spread from the breast to at least one nearby lymph node or 4) cancer that spread from the breast to a distant organ

^dBreast Cancer Surveillance Consortium (BCSC) 5-year risk calculated using age, race, first degree family history of breast cancer, history of breast biopsy, BI-RADS density

eTable 6. Rate of screening harms by breast density and BCSC 5-year risk for digital breast tomosynthesis vs. digital mammography (DM)^a

	SCREENING FALSE-ALARMS										
	F	alse-positive	recall	False-pos	itive short-inte	erval follow-up tion	False-positive biopsy recommendation				
Breast density/BCSC 5-	exams Difference (95% CI)			exams Difference			exa	Difference			
(DBT N /DM N)					(95% CI)		(95% CI)				
Almost entirely fatty	DBT	DM	DBT vs. DM	DBT	DM	DBT vs. DM	DBT	DM	DBT vs. DM		
0-<1.67%	35.9	46.2	-10.3	6.5	10.4	-3.9	6.2	7.9	-1.8		
(33692/88143)	(33.5,38.4)	(38.6,55.3)	(-17.9, -2.7)	(5.0,8.4)	(8.2,13.1)	(-6.6,-1.1)	(5.5,6.9)	(6.3,10.0)	(-3.5, -0.10)		
≥1.67%	59.0	53.3	5.7	7.6	11.7	-4.2	5.2	10.4	-5.2		
(2710/5427)	(45.8,76.0)	(46.1,61.6)	(-10.9, 22.3)	(2.6,22.1)	(8.6,16.1)	(-13.5,5.1)	(1.6,16.4)	(7.4,14.6)	(-11.8, 1.4)		
Scattered fibroglandular densities											
0-<1.67%	57.2	81.8	-24.6	9.8	18.2	-8.4	7.8	10.3	-2.4		
(117322/306387)	(50.3,65.0)	(73.6,90.8)	(-33.4,-15.8)	(6.6,14.6)	(14.5,22.8)	(-13.6,-3.2)	(6.9,8.9)	(8.7,12.1)	(-4.2, -0.69)		
≥1.67%	58.9	77.0	-18.1	10.4	17.8	-7.4	10.8	12.0	-1.2		
(45985/91383)	(53.5,64.8)	(68.6,86.4)	(-25.2,-11.0)	(7.4,14.5)	(13.5,23.3)	(-12.8,-2.0)	(7.9,14.8)	(9.9,14.5)	(-4.8, 2.5)		
Heterogeneously dense											
0-<1.67%	96.3	107.7	-11.4	15.7	22.8	-7.1	16.3	13.3	3.0		
(56810/185489)	(87.0,107)	(93.7,124)	(-27.9, 5.1)	(12.9,19.1)	(17.8,29.3)	(-12.9,-1.3)	(14.0,19.1)	(10.7,16.5)	(-0.56, 6.6)		
≥1.67%	68.1	87.1	-19.0	10.7	18.9	-8.2	11.8	12.4	-0.60		
(66180/156785)	(62.1,74.7)	(73.9,103)	(-33.5,-4.5)	(7.8,14.5)	(14.8,24.2)	(-13.2,-3.2)	(9.9,14.0)	(9.8,15.7)	(-3.6, 2.4)		
Extremely dense											
0-<1.67%	96.5	97.1	-0.63	19.2	18.8	0.34	17.7	15.8	1.9		
(10611/37796)	(92.2,101)	(84.5,112)	(-14.5,13.2)	(16.9, 21.8)	(14.2, 24.9)	(-4.8,5.5)	(16.3,19.2)	(13.4,18.6)	(-0.87, 4.7)		
≥1.67%	81.8	76.0	5.8	13.6	14.2	-0.65	15.7	13.6	2.1		
(13291/31300)	(70.6,94.8)	(69.1,83.6)	(-8.3,19.9)	(11.7,15.7)	(11.0,18.4)	(-4.5,3.2)	(12.2,20.3)	(11.0,16.9)	(-2.7, 6.9)		

^aBased on log-binomial model fit via generalized estimating equations with inverse probability weighting

^bBreast Cancer Surveillance Consortium (BCSC) 5-year risk calculated using age, race, first degree family history of breast cancer, history of breast biopsy, BI-RADS density