

Increased survival disparities among children and adolescents & young adults with acute myeloid leukemia: a Dutch population-based study

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Supplementary Table S4 Five-year and 10-year relative survival of children (0-17 years) and AYAs (18-39 years) diagnosed with APL in the Netherlands between 1990-2015, overall and by subgroup

Supplementary Table S1 Age-specific 5-year relative survival^a of children and AYAs (0-39 years) diagnosed with AML (excl. APL and ML-DS) in the Netherlands between 1990-2015, overall and by period of diagnosis

	5-year relative survival											
	1990-1999	2000-2009	2010-2015	1990-2015		1990-1999		2000-2009		2010-2015		P _{trend}
	N	N	N	%	SE	%	SE	%	SE	%	SE	
Age (years)												
0	27	31	18	47.6	5.8	29.8	8.8	55.1	9.0	61.4	11.5	0.01
1-9	110	117	64	60.8	2.9	53.7	4.8	54.7	4.6	84.3	4.6	0.001
10-17	92	96	57	56.6	3.2	48.5	5.2	58.4	5.0	66.7	6.2	0.01
18-29	226	177	110	42.9	2.2	35.5	3.2	46.9	3.8	51.9	4.8	0.002
30-39	296	263	137	42.9	1.9	35.3	2.8	44.3	3.1	56.7	4.3	<0.001
Age (years)												
0-14	193	208	119	57.9	2.2	49.8	3.6	55.8	3.4	74.8	4.0	<0.001
15-19	69	64	36	50.1	3.9	38.4	5.9	57.9	6.2	58.4	8.2	0.01
20-29	193	149	94	42.7	2.4	35.8	3.5	45.0	4.1	53.3	5.2	0.003
30-39	296	263	137	42.9	1.9	35.3	2.8	44.3	3.1	56.7	4.3	<0.001

AYAs adolescents and young adults, AML acute myeloid leukemia, APL acute promyelocytic leukemia, ML-DS myeloid leukemia associated with Down Syndrome, SE standard error.

^a Expected probabilities of survival were estimated using the Ederer II method.

Supplementary Table S2 Multivariable associations^a of age with excess mortality due to AML (excl. APL and ML-DS) in children and AYAs (0-39 years) until 5 years of follow-up stratified by period of diagnosis, the Netherlands, 1990-2015

Variable	Until 5 years of follow-up (1990-2015)											
	1990-1999				2000-2009				2010-2015			
	N _{at risk}	Excess HR	95% CI	p-value	N _{at risk}	Excess HR	95% CI	p-value	N _{at risk}	Excess HR	95% CI	p-value
Age												
Children (0-17 years)	229	1.00 (ref)			244	1.00 (ref)			139	1.00 (ref)		
AYAs (18-39 years)	522	1.41	(1.14-1.75)	0.002	440	1.49	(1.16-1.91)	0.002	247	2.62	(1.66-4.14)	<0.001
Age (years)												
0	27	2.74	(1.61-4.66)	<0.001	31	1.11	(0.61-2.01)	0.73	18	3.01	(1.13-7.98)	0.03
1-9	110	1.00 (ref)			117	1.00 (ref)			64	1.00 (ref)		
10-17	92	1.40	(0.94-2.09)	0.10	96	0.89	(0.59-1.34)	0.58	57	2.44	(1.13-5.26)	0.02
18-29	226	1.78	(1.28-2.46)	0.001	177	1.32	(0.93-1.88)	0.12	110	5.03	(2.45-10.33)	<0.001
30-39	296	1.84	(1.34-2.52)	<0.001	263	1.53	(1.09-2.14)	0.01	137	4.42	(2.11-9.23)	<0.001

AML acute myeloid leukemia, APL acute promyelocytic leukemia, ML-DS myeloid leukemia associated with Down Syndrome, AYAs adolescents and young adults, excess HR excess hazard ratio, CI confidence interval, SCT stem cell transplantation.

^a Adjusted for follow-up time (years), sex (male, female), SCT (no, yes), and site of primary treatment (non-academic hospital, academic hospital).

Supplementary Table S3 Univariable and multivariable associations^a of alternative categories of age with excess mortality due to AML (excl. APL and ML-DS) in children and AYAs (0-39 years) until 5 years of follow-up, the Netherlands, 1990-2015

Variable	N _{at risk}	Until 5 years of follow-up (1990-2015)								
		Univariable			Adjusted 1 ^b			Adjusted 2 ^c		
		Excess HR	95% CI	p-value	Excess HR	95% CI	p-value	Excess HR	95% CI	p-value
Age (years)										
0-14	520	1.00 (ref)			1.00 (ref)			1.00 (ref)		
15-19	169	1.25	(0.97-1.60)	0.09	1.24	(0.97-1.60)	0.09	1.30	(1.01-1.68)	0.04
20-29	436	1.50	(1.25-1.80)	<0.001	1.47	(1.23-1.77)	<0.001	1.61	(1.33-1.94)	<0.001
30-39	696	1.53	(1.30-1.80)	<0.001	1.51	(1.28-1.78)	<0.001	1.68	(1.41-2.00)	<0.001

AML acute myeloid leukemia, APL acute promyelocytic leukemia, ML-DS myeloid leukemia associated with Down Syndrome, AYAs adolescents and young adults, excess HR excess hazard ratio, CI confidence interval, SCT stem cell transplantation.

^a All models were adjusted for follow-up time (years).

^b Additionally adjusted for sex (male, female) and period of diagnosis (1990-1999, 2000-2009, 2010-2015).

^c Additionally adjusted for sex (male, female), period of diagnosis (1990-1999, 2000-2009, 2010-2015), SCT (no, yes), and site of primary treatment (non-academic hospital, academic hospital).

Supplementary Table S4 Five-year and 10-year relative survival^a of children (0-17 years) and AYAs (18-39 years) diagnosed with APL in the Netherlands between 1990-2015, overall and by subgroup

	5-year relative survival (1990-2015)									10-year relative survival (1990-2009) ^b								
	Total			Children (0-17 years)			AYAs (18-39 years)			Total			Children (0-17 years)			AYAs (18-39 years)		
	N	%	SE	N	%	SE	N	%	SE	N	%	SE	N	%	SE	N	%	SE
Overall	202	80.8	2.8	34	76.6	7.3	168	81.7	3.0	146	73.7	3.7	28	64.5	9.1	118	75.9	4.0
Sex																		
Male	83	83.3	4.1	18	83.4	8.8	65	83.2	4.7	60	75.5	5.6	15	66.9	12.2	45	78.4	6.3
Female	119	79.1	3.8	16	68.8	11.6	103	80.7	3.9	86	72.5	4.9	13	61.6	13.5	73	74.4	5.2
Period of diagnosis																		
1990-1999	74	73.2	5.2	15	73.4	11.4	59	73.2	5.8	74	70.8	5.4	15	66.8	12.2	59	71.8	6.0
2000-2009	72	77.9	4.9	13	69.3	12.8	59	79.8	5.3	72	76.7	5.1	13	61.7	13.5	59	80.0	5.3
2010-2015	56	94.8	3.0	6	NA	NA	50	94.2	3.4	NA	NA	NA	NA	NA	NA	NA	NA	NA
P _{trend}		0.004			0.34			0.01			0.44			0.75			0.32	
Site of primary treatment																		
Non-academic hospital	54	70.2	6.3	5	NA	NA	49	71.3	6.6	40	65.2	7.7	4	NA	NA	36	66.9	8.0
Academic hospital	148	84.7	3.0	29	79.4	7.5	119	86.0	3.2	106	76.9	4.2	24	66.8	9.6	82	79.9	4.5
Therapy																		
Chemo	190	84.9	2.6	33	78.9	7.1	157	86.2	2.8	135	78.2	3.6	27	66.8	9.1	108	81.1	3.9
SCT	12	75.2	12.5	5	NA	NA	7	NA	NA	12	67.2	13.7	5	NA	NA	7	NA	NA

AYAs adolescents and young adults, APL acute promyelocytic leukemia, SE standard error, SCT stem cell transplantation.

NA: N at risk <10

^a Expected probabilities of survival were estimated using the Ederer II method.

^b 10-year relative survival could not be estimated for the most recent period 2010-2015 due to incomplete follow-up.