



Study/Reference Quality Rating	Description of Treatment Arms	CONSORT Numbers Retention	Secondary Malignancies	Comments	Primary Abstractor Initials	Dual Abstractor Initials	sAntihracycline	sCyclophosphamide	sTaxane
<b>ENR1042</b> <b>Crump (2003)</b> National Cancer Institute of Canada Clinical Trials Group (NCIC-CT17) Adjuvant Chemotherapy Trial <b>Fair</b>	<b>Intervention description:</b> Women had been in trials with one of the following regimens... CEP: cyclophosphamide 700 mg/m <sup>2</sup> , 900 mg/m <sup>2</sup> or 1100 mg/m <sup>2</sup> + epirubicin 70 mg/m <sup>2</sup> + fluorouracil 500 mg/m <sup>2</sup> <b>CEP + G-CSF:</b> Cyclophosphamide 700 mg/m <sup>2</sup> , 900 mg/m <sup>2</sup> or 1100 mg/m <sup>2</sup> + <del>epirubicin</del> 70 mg/m <sup>2</sup> + <del>fluorouracil</del> 500 mg/m <sup>2</sup> + G-CSF every 2 weeks x 12 cycles <b>CEP + AD:</b> doxorubicin 60 mg/m <sup>2</sup> + cyclophosphamide 600 mg/m <sup>2</sup> every 3 weeks x 4 cycles <b>Control description:</b>	<b>N recruited or assessed for eligibility:</b> NR <b>N eligible:</b> 1,545 women CEP: 34.89% (530/1545) CEP+G-CSF: 6.28% (97/1545) CEP+AD: 43.88% (678/1545) AC: 14.89% (229/1545) <b>N excluded:</b> NR <b>N run-in:</b> NA <b>N randomized:</b> NR <b>N Analyzed:</b> 1451 (based on Table 2) CEP: 34.80% (202/491) CEP+G-CSF: 4.34% (63/1451) CEP+AD: 45.76% (664/1451) AC: 15.30% (222/1451) <b>Lost to Followup (XX mo), n (%):</b> NR <b>Withdrew consent (XX mo), n (%):</b> NR	<b>Incidence of Leukemia:</b> Overall: 0.65% (10/1545) CEP: 1.30% (7/539) CEP+G-CSF: 0.16% (1/678) AC: 0.43% (1/231) <b>Leukemia-Related Deaths</b> Overall: 69% (6/10) CEP: 66.67% (4/6) CEP+G-CSF: 16.67% (1/6) AC: 16.67% (1/6)	<b>Data not abstracted:</b> interval to diagnosis; cumulative risk, leukemia by RT therapy	MSW (4/2)		TRUE	TRUE	FALSE
<b>ENR1106</b> <b>Campane (2005)</b> French Adjuvant Study Group (FASG) <b>Fair</b>	<b>Intervention description:</b> Epirubicin-based treatment FEC 50: 50% of patients FEC 75: 7% FEC 100: 19% Epirubicin+vinorelbine: 9% Weekly single agent epirubicin: 6% <b>Control description:</b> Patients not receiving adjuvant epirubicin	<b>N recruited or assessed for eligibility:</b> NR <b>N eligible:</b> NR <b>N excluded:</b> NR <b>N run-in:</b> NA if no run-in period <b>N randomized:</b> NR <b>N Analyzed:</b> Total: 3653 IG: 2603 CG: 1050 <b>Lost to Followup (XX mo), n (%):</b> Total: IG: CG: <b>Withdrew consent (XX mo), n (%):</b> Total: IG: CG:	<b>Incidence of Leukemia:</b> 0.31% (9/2603) <b>Incidence of myelodysplastic syndrome:</b> 0% (0/2603) <b>Leukemia-related deaths:</b> 62.5% (5/8)	<b>Data not abstracted:</b> patient age of leukemia cases; onset period; cumulative dose; 3 year cumulative incidence of secondary leukemia; incidence rates of secondary leukemia by epirubicin dose	MSW (4/7)		TRUE	FALSE	FALSE
<b>ENR1131</b> <b>Praga (2005)</b> <b>Fair +</b> Analysis of multiple trials; we have already abstracted some - need to pull others and determine whether to use this pooled analysis	The trials contained 44 different treatment arms, and these arms were pooled into 5 groups. <b>Intervention description:</b> Epirubicin-containing chemotherapy regimens (epirubicin dose/cycle of $\geq 100$ mg/m <sup>2</sup> or epirubicin dose/cycle of $\geq 100$ mg/m <sup>2</sup> ) <b>Control description:</b> Non-epirubicin-containing treatment (chemotherapy not including epirubicin, hormone therapy without chemotherapy or no chemotherapy or hormone therapy)	<b>N recruited or assessed for eligibility:</b> <b>N eligible:</b> 10,111 patients (all those randomized across 19 trials) <b>N excluded:</b> Total: IG: CG: <b>N run-in:</b> NA if no run-in period <b>N randomized:</b> NA <b>N Analyzed:</b> 9,796 patients IG: 7,110 CG: 2,686 <b>Lost to Followup (XX mo), n (%):</b> NR <b>Withdrew consent (XX mo), n (%):</b> NR	<b>Incidence of AML/MDS:</b> Total: 0.31% (30/9796) IG (total): 0.30% (287/110) IG (epirubicin $\geq 100$ mg/m <sup>2</sup> per cycle): 11 cases IG (epirubicin $\geq 100$ mg/m <sup>2</sup> per cycle): 17 cases CG: 0.07% (2/2686) CG (chemo w/o epirubicin): 1 case CG (hormone therapy): 1 case CG (surgery w/out RT): 0 cases <b>Timing to AML/MDS diagnosis</b> IG: median 33 months (range: 8-126 months) IG: median 29.5 months (range: 8-126) CG: median 73 months (range: 72-74) <b>AML/MDS-related deaths</b> Deaths within 1 month of AML/MDS dx: Total: 16.7% (5 deaths/30 diagnoses) IG: 14.3% (4/28) CG: 50% (1/2)	<b>Data not abstracted:</b> age at first adjuvant tx for patients developing AML/MDS; epirubicin/cyclophosphamide dose; results to tamoxifen, RT, G-CSF; prior breast cancer recurrence; AML/MDS rate by risk factors (age, RT, tamox, G-CSF); cumulative probability of AML/MDS at 3, 5, 8 years We have already abstracted some of the original studies for this analysis (Piccart; Bernard-Marty; Levine; Crump) - <b>PULL OTHERS TO REVIEW</b>	MSW (4/8)		TRUE	FALSE	FALSE
<b>ENR1141</b> <b>Venturini (2005)</b> <b>Good</b>	<b>Intervention description:</b> IG: FEC14 ( <del>fluorouracil</del> 400 mg/m <sup>2</sup> + <del>epirubicin</del> 60 mg/m <sup>2</sup> + <del>carboplatin</del> 600 mg/m <sup>2</sup> every 14 days x 6 courses, with the addition to filgrastim <b>Control description:</b> CG: FEC21 ( <del>fluorouracil</del> 600 mg/m <sup>2</sup> + <del>epirubicin</del> 60 mg/m <sup>2</sup> + <del>carboplatin</del> 600 mg/m <sup>2</sup> every 21 days x 6 courses	<b>N recruited or assessed for eligibility:</b> <b>N eligible:</b> <b>N run-in:</b> NA if no run-in period <b>N randomized:</b> 1,214 patients IG: 604 patients CG: 610 patients <b>N ineligible:</b> 40 patients IG: 23 patients CG: 17 patients <b>N Analyzed:</b> 1,214 patients IG: 604 patients CG: 610 patients <b>Lost to Followup:</b> 10.8% (132/992 living patients) IG: CG: <b>Withdrew consent (XX mo), n (%):</b> Total: IG: CG:	<b>Incidence of Any Second Primary Cancer (after 10.4 years):</b> Total: 4.7% (57/1214) IG: 4.8% (29/604) CG: 4.6% (28/610) <b>Incidence of Second Primary Breast Cancer (after 10.4 years):</b> Total: 2.1% (26/1214) IG: 2.0% (12/604) CG: 2.3% (14/610) <b>Incidence of Second Primary Non-Breast Cancer (after 10.4 years):</b> Total: 2.6% (31/1214) IG: 2.8% (17/604) CG: 2.3% (14/610)		MSW (4/8)		TRUE	TRUE	FALSE
<b>ENR1214</b> <b>Ferguson (2007)</b> <b>Good</b> Systematic review - pull original articles	<b>Intervention description:</b> Any chemotherapy regimen containing taxane <b>Control description:</b> Any chemotherapy regimen that did not contain a taxane	<b>N recruited or assessed for eligibility:</b> NA <b>N eligible:</b> NA Total: IG: CG: <b>N excluded:</b> NA <b>N run-in:</b> NA if no run-in period <b>N randomized:</b> NA <b>N Analyzed:</b> NA <b>Lost to Followup (XX mo), n (%):</b> NA <b>Withdrew consent (XX mo), n (%):</b> NA	Based on Analysis 9.4 (page 53) <b>Incidence of Secondary Leukemia/MDS:</b> Total: 0.34% (48/14148) IG: 0.38% (25/7093) CG: 0.33% (23/7096)	Reports median tti for the different studies, but the analysis does not indicate when the secondary malignancies occurred. One of the 7 included studies is only an abstract; have pulled the other 6 studies for review	MSW (4/8)		FALSE	FALSE	TRUE
<b>ENR1263</b> <b>Francis (2008)</b> <b>Good</b>	<b>Intervention description:</b> <b>Control description:</b>	<b>N recruited or assessed for eligibility:</b> <b>N eligible:</b> Total: IG: CG: <b>N excluded:</b> Total: IG: CG: <b>N run-in:</b> NA if no run-in period Total: IG: CG: <b>N randomized:</b> Total: IG: CG: <b>N Analyzed:</b> Total: IG: CG: <b>Lost to Followup (XX mo), n (%):</b> Total: IG: CG: <b>Withdrew consent (XX mo), n (%):</b> Total: IG: CG:	<b>Number of patients:</b> <b>Number of cancers:</b> <b>Cancer types:</b> <b>Deaths related to SM:</b>				FALSE	FALSE	FALSE
<b>ENR1265</b> <b>Goldstein (2008)</b> <b>Good</b>							FALSE	FALSE	FALSE
<b>ENR1273</b> <b>Liu (2008)</b> <b>Fair</b>							FALSE	FALSE	FALSE
<b>ENR1399</b> <b>Martin (2010)</b> (Parent article ENR1874 Martin, 2006) <b>Good</b>							FALSE	FALSE	FALSE
<b>ENR1463</b> <b>Kaplan (2011)</b> <b>Fair</b>							FALSE	FALSE	FALSE

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