Supplementary Online Content

Primrose JN, Perera R, Gray A, et al; FACS Trial Investigators. Effect of 3 to 5 years of scheduled CEA and CT follow-up to detect recurrence of colorectal cancer: the FACS randomized clinical trial. *JAMA*. doi:10.1001/jama.2013.285718

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

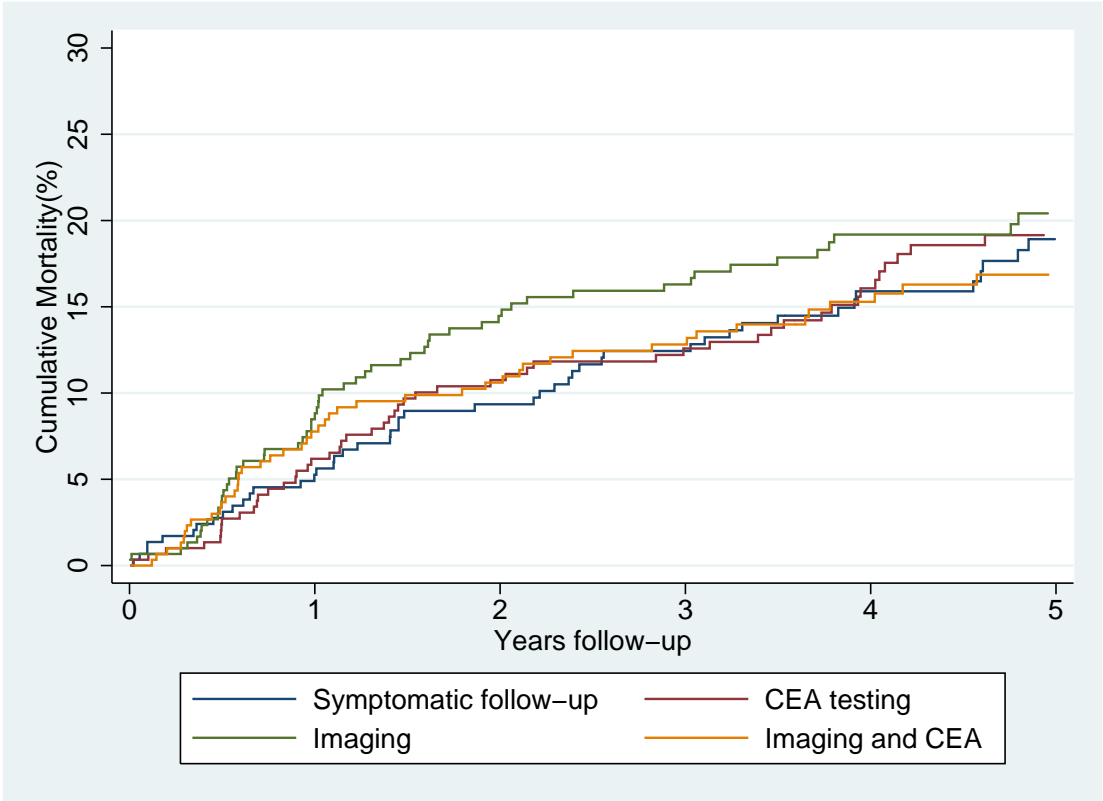**eTable 1.** Treatment of Recurrences Detected

	Individual randomisation arm				Factorial comparison group			
	CEA only *n = 57*	CT only *n = 57*	CEA + CT *n = 48*	Minimum *n = 37*	CEA *n = 105*	No CEA *n = 94*	CT *n = 105*	No CT *n = 94*
Surgery only	13 (22.8%)	16 (28.1%)	8 (16.7%)	10 (27.0%)	21 (20.0%)	26 (27.7%)	24 (22.9%)	23 (24.5%)
Chemotherapy only	18 (31.6%)	17 (29.8%)	15 (31.3%)	7 (18.9%)	33 (31.4%)	24 (25.5%)	32 (30.5%)	25 (26.6%)
Radiotherapy only	1 (1.8%)	2 (3.5%)	0	3 (8.1%)	1 (1.0%)	5 (5.3%)	2 (1.9%)	4 (4.3%)
Surgery and chemotherapy	11 (19.3%)	10 (17.5%)	10 (20.8%)	2 (5.4%)	21 (20.0%)	12 (12.8%)	20 (19.0%)	13 (13.8%)
Surgery and radiotherapy	0	1 (1.8%)	2 (4.2%)	0	2 (1.9%)	1 (1.1%)	3 (2.9%)	0
Chemotherapy and radiotherapy	2 (3.5%)	2 (3.5%)	5 (10.4%)	2 (5.4%)	7 (6.7%)	4 (4.3%)	7 (6.7%)	4 (4.3%)
Surgery, chemotherapy and radiotherapy	1 (1.8%)	2 (3.5%)	2 (4.2%)	2 (5.4%)	3 (2.9%)	4 (4.3%)	4 (3.8%)	3 (3.2%)
None of the above treatments	11 (19.3%)	7 (12.3%)	6 (12.5%)	11 (29.7%)	17 (16.2%)	18 (19.1%)	13 (12.4%)	22 (23.4%)

eTable 2. Adherence to Follow-up Protocol

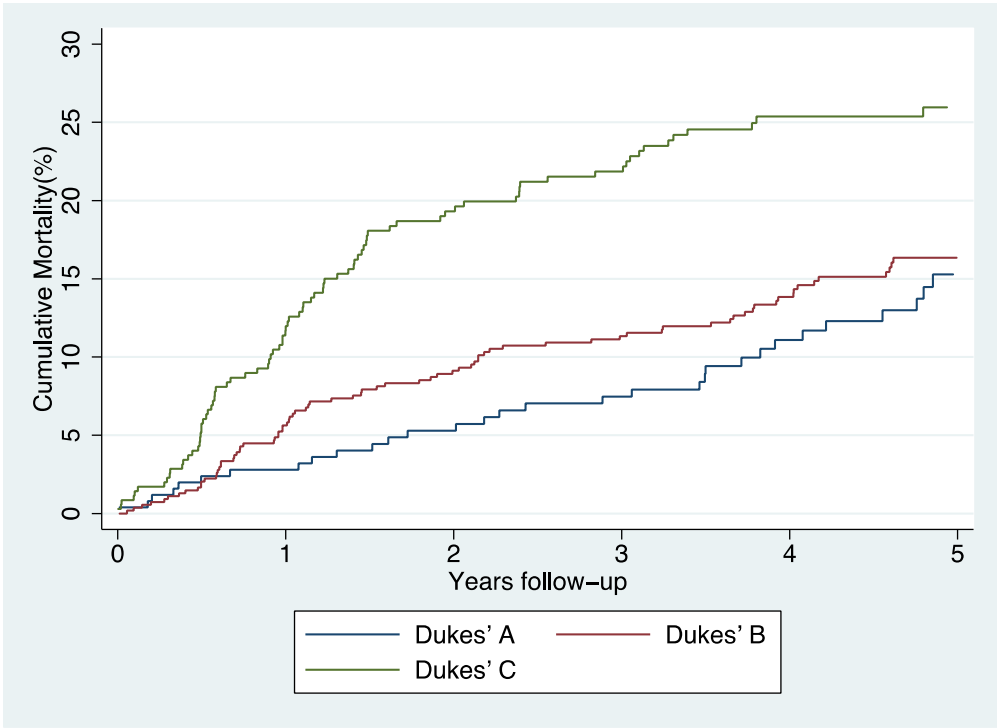|		Individual randomisation arms					Factorial comparison groups					
		CEA only	CT only	CEA + CT	Minimum		CEA	No CEA		CT	No CT	
	N	300	299	302	301	*p*	602	600	*p*	601	601	*p*
Patients receiving less than specified follow-up:												
Missed 1 scheduled CEA	n (%)	45 (15.0%)	n/a	48 (15.9%)	n/a	n/a	93 (15.4%)	n/a	n/a	48 (8.0%)	45 (7.5%)	.15
Missed >1 scheduled CEA	n (%)	12 (4.0%)	n/a	23 (7.6%)	n/a		35 (5.8%)	n/a		23 (3.8%)	12 (2.0%)	
Missed 1 scheduled CT	n (%)	6 (2.0%)*	41 (13.7%)	38 (12.6%)	2 (0.7%)*	n/a	44 (7.3%)	43 (7.2%)		79 (13.1%)	8 (1.3%)*	n/a
Missed >1 scheduled CT	n (%)	n/a	14 (4.7%)	16 (5.3%)	n/a		16 (2.7%)	14 (2.3%)	.93	30 (5.0%)	n/a	
Patients receiving more than specified follow-up:												
Received 1 unscheduled CEA	n (%)	18 (6.0%)	12 (4.0%)	5 (1.7%)	23 (7.6%)	.000	23 (3.8%)	35 (5.8%)	.038	17 (2.8%)	41 (6.8 %)	.000
Received >1 unscheduled CEA	n (%)	21 (7.0%)	5 (1.7%)	6 (2.0%)	37 (12.3%)		27 (4.5%)	42 (7.0%)		11 (1.8%)	58 (9.7%)	
Received 1 unscheduled CT	n (%)	47 (15.7%)	14 (4.7%)	6 (2.0%)	29 (9.6%)	.000	53 (8.8%)	43 (7.2%)	.084	20 (3.3%)	76 (12.6%)	.000
Received >1 unscheduled CT	n (%)	9 (3.0%)	0	1 (0.3%)	21 (7.0%)		10 (1.7%)	21 (3.5%)		1 (0.2%)	30 (5.0%)	
Received 1 unscheduled colonoscopy	n (%)	37 (12.3%)	13 (4.3%)	10 (3.3%)	36 (12.0%)	.000	47 (7.8%)	49 (8.2%)	.050	23 (3.8%)	73 (12.1%)	.000
Received >1 unscheduled colonoscopy	n (%)	5 (1.7%)	0	0	16 (5.3%)		5 (0.8%)	16 (2.7)%		0	21 (3.5%)	
Total excluded from per-protocol analysis as had missed >1 scheduled test or had received any unscheduled test	n (%)	103 (34.3%)	47 (15.7%)	57 (18.9%)	101 (33.6%)	<.001	160 (26.6%)	148 (24.7%)	.45	104 (17.3%)	204 (33.9%)	<.001

* Participants randomised to the CEA and minimum follow-up arms were scheduled to receive a single CT scan at 12-18 months

eFigure 1. Kaplan-Meier Plot of Cumulative Overall Mortality by Randomisation Arm

Log-rank p = 0.560

eFigure 2. Kaplan-Meier Plot of Cumulative Overall Mortality by Dukes' Stage

log rank p = <0.001