

## Supplemental Online Content

Ai D, Ye J, Wei S, et al. Comparison of 3 paclitaxel-based chemoradiotherapy regimens for patients with locally advanced esophageal squamous cell cancer: a randomized clinical trial. *JAMA Netw Open*. 2022;5(2):e220120. doi:10.1001/jamanetworkopen.2022.0120

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

**eTable 1. Recruitment by center**

Center	Principle Investigator	No. patients
Fudan University Shanghai Cancer Center	Kuaile Zhao	232
Jiangsu Province Cancer Hospital	Jinjun Ye	57
Gansu Province Cancer Hospital	Shihong Wei	12
Fudan University Shanghai Cancer Center Minhang Branch	Yunhai Li	6
Jiangxi Province Cancer Hospital	Hui Luo	5
Shanxi Province Cancer Hospital	Jianzhong Cao	4
The First Affiliated Hospital of Xiamen University	Qin Lin	2
Huadong Hospital Affiliated to Fudan University	Xiangpeng Zheng	1
Affiliated Hospital of Jiangnan University	Jialiang Zhou	1
Hainan Province People's Hospital	Guang Huang	1
Fujian Province Cancer Hospital	Jiancheng Li	0

**eTable 2. Inclusion and exclusion criteria**

Inclusion Criteria	Exclusion Criteria
Histologically confirmed esophageal squamous cell carcinoma.	Esophageal perforation or hematemesis
Clinical stages II, III or IVa based on the sixth American Joint Committee on Cancer tumor, node, metastasis classification	Received thoracic, abdominal or craniocerebral surgery within 30 days
No prior treatments of chemotherapy, radiotherapy or surgery against esophageal cancer, except for non-curative resection by endoscopic mucosal resection/endoscopic sub mucosal dissection	Synchronous or metachronous malignancies (except for cutaneous [non-melanoma] carcinoma, thyroid papillary carcinoma, phase I seminoma or cervical carcinoma in situ curatively treated and disease free for a minimum of 3 months)
Aged 18–75 years	Enrolled in other clinical trials within 30 days
Adequate organ functions for chemoradiation therapy:  (1) White blood cell count $\geq 3 \times 10^9/L$ ; (2) Absolute neutrophil counts $\geq 1.5 \times 10^9/L$ ; (3) Hemoglobin $\geq 10 g/dL$ ; (4) Platelet $\geq 100 \times 10^9/L$ ; (5) Total bilirubin $< 1.5$ upper limit of normal (ULN); (6) Aspartate transaminase $\leq 2.5$ ULN; (7) Alanine aminotransferase $\leq 2.5$ ULN; (8) Creatinine $\leq 1.5$ ULN	Unstable angina and/or congestive heart failure requiring hospitalization within 6 months

Eastern Cooperative Oncology Group performance status of 0–2 Life expectancy $\geq 3$ months, based on the judgment of doctors	Severe psychiatric disease
Written informed consent	Pregnancy, lactation or unwillingness to adopt contraception
	Drug addiction
	AIDS based on current Centers for Disease Control and Prevention definition
	History of radiotherapy in the planning area
	Other ineligible conditions according to researchers

**eTable 3. Chemotherapy compliance in randomly assigned patients**

Chemotherapy Compliance	Paclitaxel Plus Fluorouracil Group No. (%) (n=107)	Paclitaxel Plus Cisplatin Group No. (%) (n=107)	Paclitaxel Plus Carboplatin Group No. (%) (n=107)
Concurrent cycles			
1	2 (1.9)	13 (12.1)	1 (0.9)
2	8 (7.5)	94 (87.9)	2 (1.9)
3	2 (1.9)	-	9 (8.4)
4	14 (13.1)	-	10 (9.3)
5	22 (20.6)	-	17 (15.9)
6	59 (55.1)	-	68 (63.6)
Completed over 80%	81 (75.7)	94 (87.9)	85 (79.4)
Consolidation cycles			
0	35 (32.7)	35 (32.7)	32 (29.9)
1	11 (10.3)	17 (15.9)	12 (11.2)
2	61 (57.0)	55 (51.4)	63 (58.9)
Deduction in dose			
Yes	6 (5.6)	38 (35.5)	9 (8.4)
No	101 (94.4)	69 (64.5)	98 (91.6)
Delay in cycles			
Yes	65 (60.7)	51 (47.7)	67 (62.6)
No	42 (39.3)	56 (52.3)	40 (37.4)

**eTable 4 Radiotherapy parameters and compliance in randomly assigned patients**

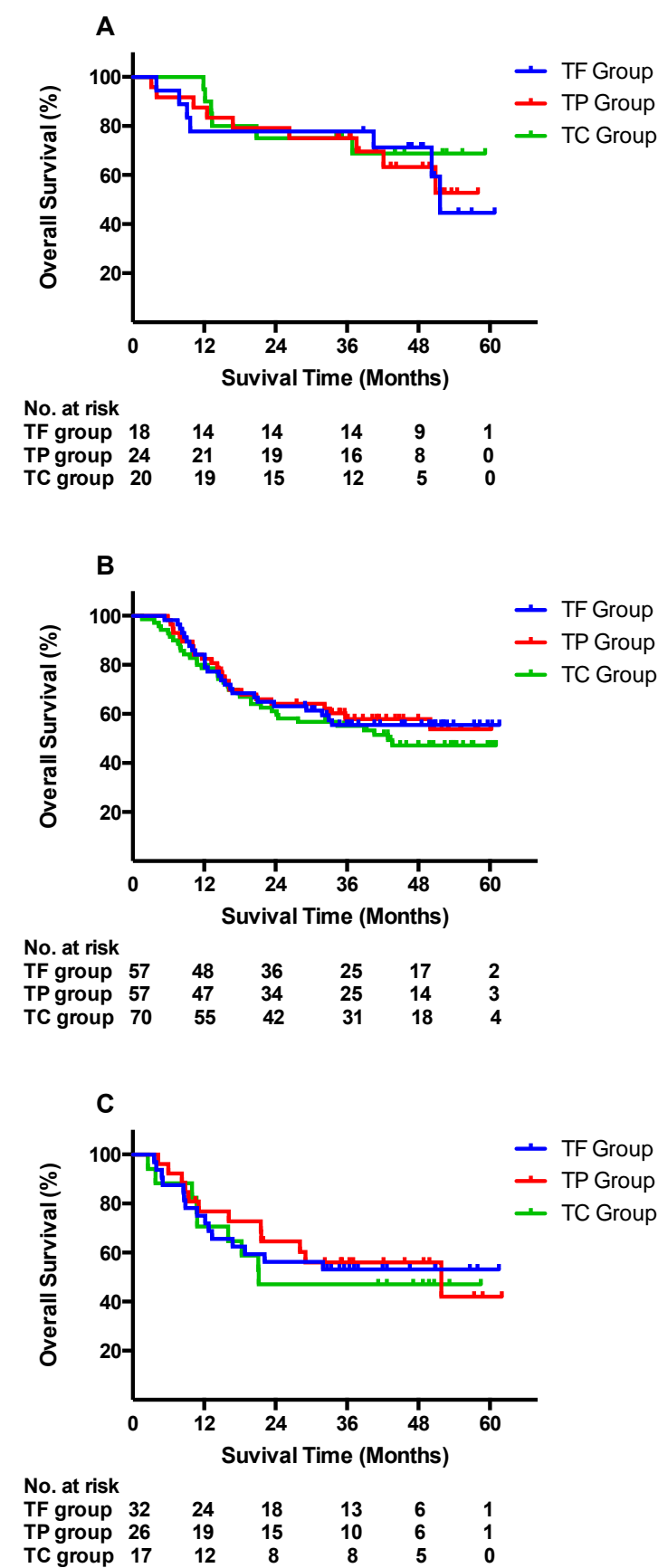
Radiotherapy Parameters and Compliance	Paclitaxel Plus Fluorouracil Group No. (%) (n=107)	Paclitaxel Plus Cisplatin Group No. (%) (n=107)	Paclitaxel Plus Carboplatin Group No. (%) (n=107)
Finished 61.2Gy	100 (93.5)	102 (95.3)	96 (89.7)
Median dose for unfinished, Gy (Range)	50.4 (10.8-59.4)	55.8 (41.4-59.4)	57.6 (7.2-59.4)
Interruption in radiotherapy			
No Interruption	82 (76.6)	66 (61.7)	79 (73.8)
Interruption during radiotherapy	25 (23.4)	41 (38.3)	28 (26.2)

**eTable 5. Pattern of treatment failure**

Type of Event	Paclitaxel Plus Fluorouracil Group No. (%) (n=107)	Paclitaxel Plus Cisplatin Group No. (%) (n=107)	Paclitaxel Plus Carboplatin Group No. (%) (n=107)
Live without treatment failure	51 (47.6)	48 (44.9)	47 (43.9)
Failure	56 (52.3)	59 (55.1)	60 (56.1)
Locoregional only	26 (24.3)	27 (25.2)	24 (22.4)
Distant only	11 (10.3)	17 (15.9)	22 (20.6)
Locoregional and distant	5 (4.7)	7 (6.5)	8 (7.5)
Second primary cancer	8 (7.5)	5 (4.7)	3 (2.8)
Toxicity-induced death	2 (1.9)	0	1 (3.7)
Death of other course <sup>a</sup>	4 (3.7)	3 (2.8)	2 (1.9)

<sup>a</sup> One patient in each of the TF, TP and TC group died as a result of pneumonia, one patient in the TP group died of pulmonary embolism, one patient in the TF group died of postoperative complications, one patient in the TC group died of myocardial infarction, and two patients in the TF group and one patient in the TP group died of unknown causes.

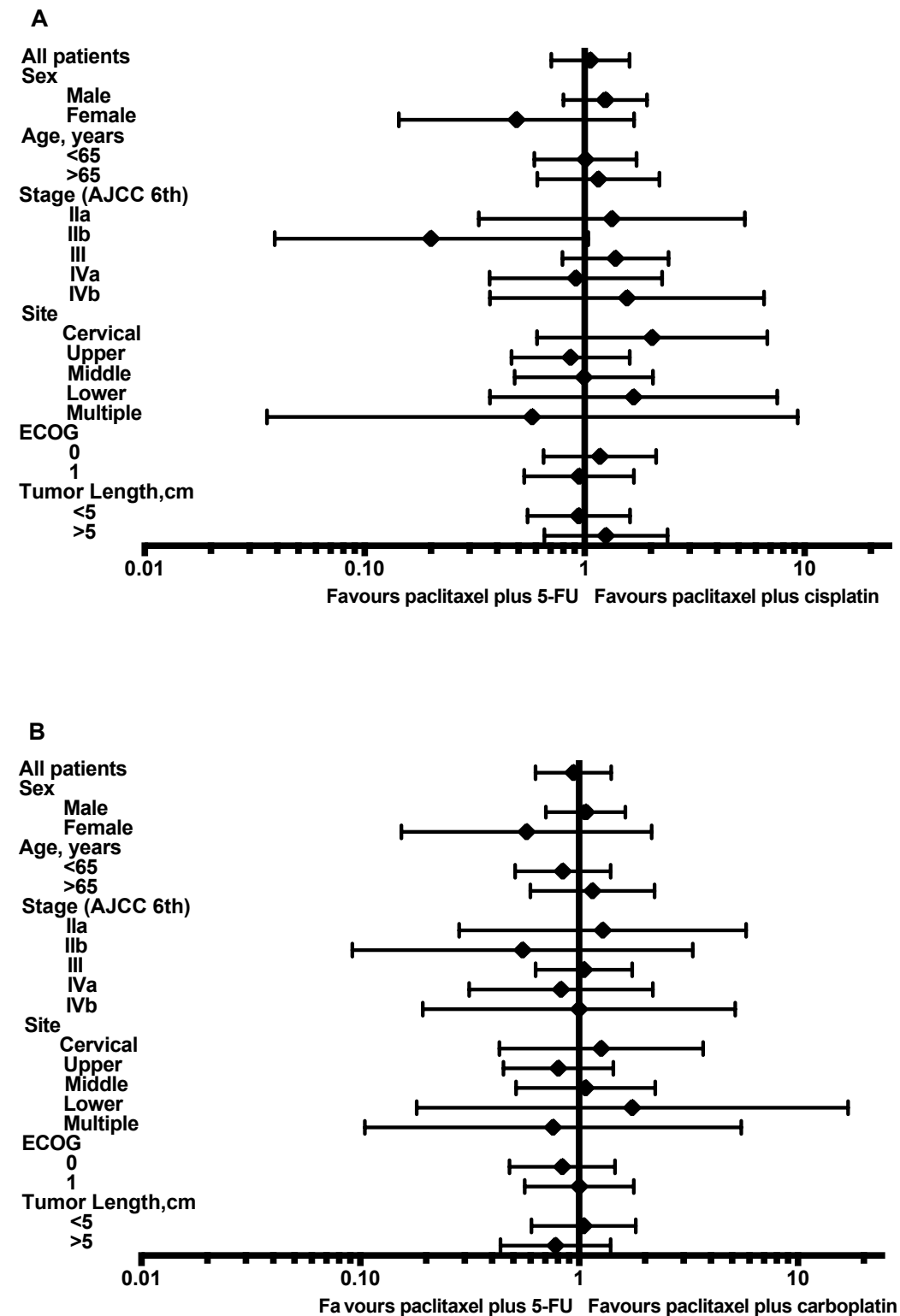
**eFigure 1. Overall survival in N0 (A), N1 (B), and M1 (C) patients**



Paclitaxel/fluorouracil did not show superiority over paclitaxel/cisplatin or paclitaxel/carboplatin regimen in terms of overall survival within different stage subgroups.

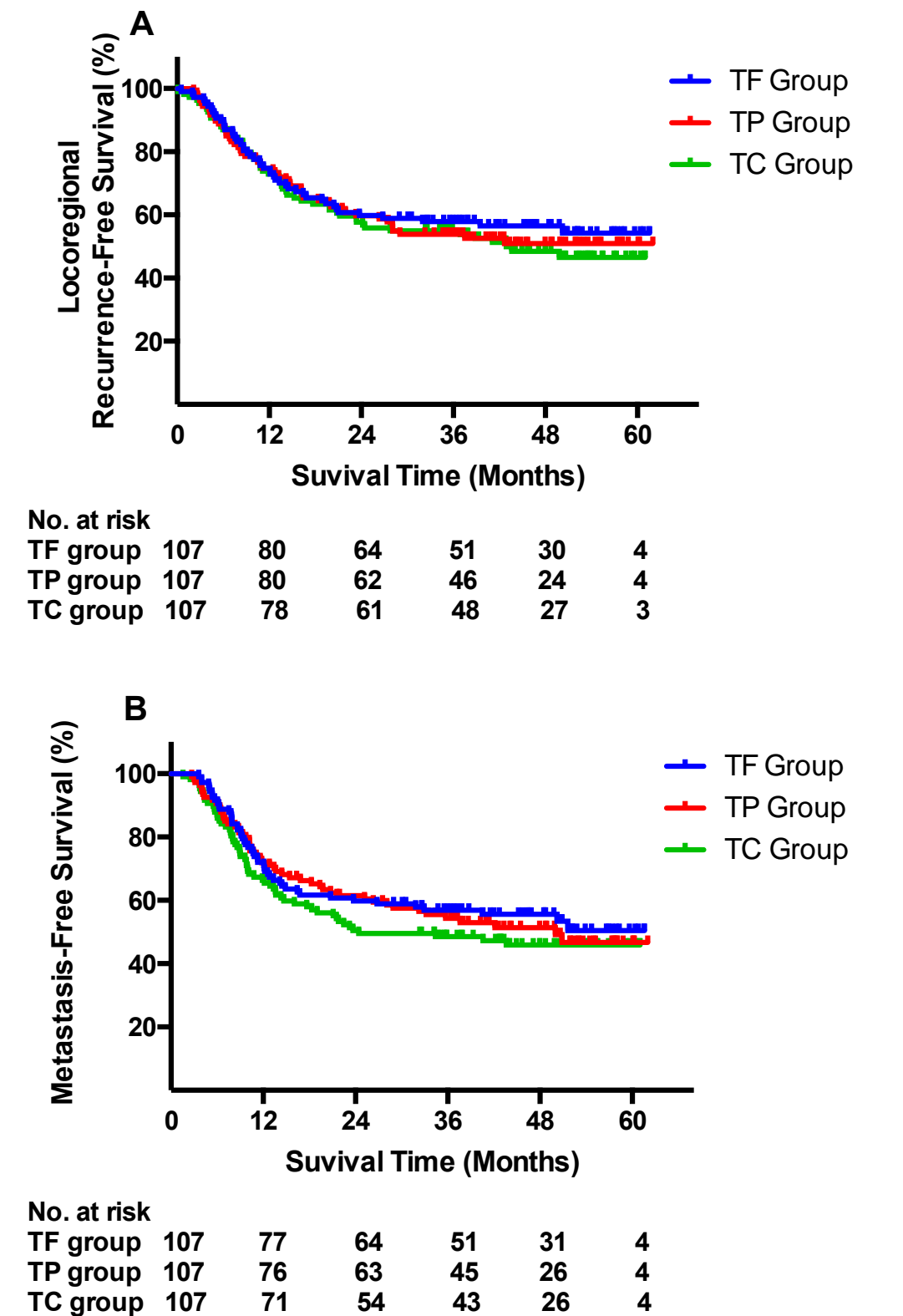


**eFigure 2. Subgroup analyses of the overall survival between the paclitaxel plus fluorouracil group and the paclitaxel plus cisplatin group (A) or the paclitaxel plus carboplatin group (B)**



The effects of different regimens on the overall survival according to the predictive and prognostic factors (sex, age, smoking history, stage, tumor site, ECOG, and tumor length) were not significantly different between the two groups. Abbreviations: AJCC, American Joint Committee on Cancer; ECOG, Eastern Cooperative Oncology Group.

**eFigure 3. Locoregional recurrence-free survival (A) and distant metastasis-free survival (B) in enrolled patients**



Paclitaxel/fluorouracil did not show superiority over paclitaxel/cisplatin or paclitaxel/carboplatin regimen in terms of locoregional recurrence-free survival or distant metastasis-free survival.