



**Figure S1** AFP levels throughout the disease course. Green diamond, indicates the points in the timeline in which AFP was measured. Length of one cycle is 21 days. AFP, alpha-fetoprotein.

**Table S1** HFA-ICOS cardio-oncology baseline risk stratification for VEGFi cardiotoxicity (13)

VEGFi cardiotoxicity	Risk factors	Risk score	ESC guidelines
Very high-risk factors	<ul style="list-style-type: none"> <li>• Heart failure* or cardiomyopathy</li> <li>• Arterial vascular disease*</li> </ul>	Presence of one or both puts the patient at very high risk ( $\geq 20\%$ )	Refer to cardio-oncology or cardiology assessment, to optimize risk factors and provide a personalized management plan
High-risk factors	<ul style="list-style-type: none"> <li>• Venous thrombosis*</li> <li>• Baseline LVEF <math>&lt; 50\%</math>*</li> <li>• QTc <math>\geq 480</math> ms</li> <li>• Age <math>\geq 75</math> years, hypertension*</li> <li>• Prior anthracycline exposure</li> </ul>	Presence of one or more puts the patient at high risk (10–19%)	Refer to cardio-oncology or cardiology assessment, to optimize risk factors and provide a personalized management plan
Medium risk factors	<p>Two points each:</p> <ul style="list-style-type: none"> <li>• Borderline LVEF of 50–54%</li> <li>• 450 ms <math>\leq</math>QTc <math>&lt; 480</math> ms (men) or 460 ms <math>\leq</math>QTc <math>&lt; 480</math> ms (women)</li> <li>• Arrhythmia</li> </ul> <p>One points each:</p> <ul style="list-style-type: none"> <li>• Elevated baseline troponin</li> <li>• Elevated baseline BNP or NT-proBNP*</li> <li>• Age 65–74 years*</li> <li>• Diabetes mellitus*</li> <li>• Chronic kidney disease</li> <li>• Proteinuria</li> <li>• Hyperlipidemia*</li> <li>• Prior radiotherapy to the left chest or mediastinum</li> <li>• Current smoker</li> <li>• Obesity*</li> </ul>	<p>If <math>\geq 5</math> points, the patient is at high risk (10–19%)</p> <p>If 2–4 points, the patient is at medium risk (2–9%)</p> <p>If <math>&lt; 2</math> points, the patient is at low risk (<math>&lt; 2\%</math>)</p>	<p>Refer to cardio-oncology or cardiology assessment, to optimize risk factors and provide a personalized management plan</p> <p>Closely monitor for cardiovascular health. Consider cardio-oncology or cardiology referral</p> <p>Continue treatment with appropriate cardiovascular surveillance</p>

\*, indicates the risk factors that were present in the patient discussed. HFA, Heart Failure Association of the ESC; ESC, European Society of Cardiology; ICOS, International Cardio-oncology Society; VEGFi, vascular endothelial growth factor inhibitor; LVEF, left ventricle ejection fraction; QTc, corrected QT interval; BNP, brain natriuretic peptide; NT-proBNP, N-terminal pro B-type natriuretic peptide.