Appendix 1

eMethods

Cardiac Computed Tomography Acquisition: The following scanning parameters were used: tube voltage, 120 kVp; automatic modulation, mAs; collimator width, 64×0.625 mm; pitch, 0.16; rotation time, 0.27 s; field of view, 220–250 mm²; matrix, 512×512; slice thickness, 0.67 mm; and slice interval, 0.67 mm. The total dose of contrast agent was 1.2 mL/kg (heart rate >80 plus an additional 10 mL), ranging from 50-90 mL, divided into two stages of injection. In the first phase, dosage1 =total dose –10 mL, flow rate =4.0–5.5 mL/s. In the second phase, dosage 2 =10 mL, flow rate =2.5 mL/s, followed by 30 mL of 0.9% saline chaser bolus. Automated bolus tracking was used by placing a region of interest (ROI) in the descending aorta at the level of the pulmonary artery with a 110 HU threshold level and the shortest delay.

Table S1 Cancer treatment regimens and doses used in the patients

Regimen	N (%)	Sequence	Doses per administration	Cardioprotective strategies
ddEC-wP	26 (65)	4 cycles of EC every 2 weeks, followed by 12 cycles of weekly paclitaxel	Epirubicin (90 mg/m²), cyclophosphamide (600 mg/m²), paclitaxel (80 mg/m²)	Dexrazoxane was administered intravenously 30 min before epirubicin administration in the 10:1 ratio dexrazoxane:epirubicin
ddEC-PC	8 (20)	4 cycles of EC every 2 weeks, followed by carboplatin and paclitaxel on days 1, 8, and 15 every 28 days for 4 cycles	Epirubicin (90 mg/m ²), cyclophosphamide (600 mg/m ²), paclitaxel (80 mg/m ²), carboplatin (AUC=2)	Dexrazoxane was administered intravenously 30 min before epirubicin administration in the 10:1 ratio dexrazoxane:epirubicin
EC-THP	2 (5)	4 cycles of EC every 3 weeks, followed by 4 cycles of docetaxel every 3 weeks, 17-18 cycles of trastuzumab and pertuzumab starting concurrent with docetaxel every 3 weeks then every 3 weeks after completion of chemotherapy	Epirubicin (90 mg/m ²), cyclophosphamide (600 mg/m ²), docetaxel (80 mg/m ²), trastuzumab (8 mg/kg loading dose, then 6 mg/kg maintenance), pertuzumab (840 mg loading dose, then 420 mg maintenance)	Dexrazoxane was administered intravenously 30 min before epirubicin administration in the 10:1 ratio dexrazoxane:epirubicin
ddEC-wABX	4 (10)	4 cycles of EC every 2 weeks, followed by 12 cycles of weekly nab-paclitaxel	Epirubicin (90 mg/m²), cyclophosphamide (600 mg/m²), nab-paclitaxel (100 mg/m²)	Dexrazoxane was administered intravenously 30 min before epirubicin administration in the 10:1 ratio dexrazoxane:epirubicin

E, Epirubicin; C, cyclophosphamide.

Parameters	Baseline	3 months	P value
HCT, %	39.8±3.4	35.0±3.2	<0.01
CK-MB, ng/mL	0.9 (0.6, 1.1)	0.7 (0.5, 1.0)±0.3	<0.01
NT-proBNP, pmol/L	7.0±4.9	5.2±6.3	0.06
hs-cTnT, ng/mL	0.004 (0.004, 0.004)	0.004 (0.004, 0.005)	0.38
MYO, ng/mL	21.0 (21.0, 21.0)	21.0 (21.0, 21.0)	0.28
CRP, mg/L	0.7 (0.5, 1.4)	1.3 (0.7, 2.7)	0.02
GLU, mmol/L	5.6 (5.3, 6.1)	5.8 (5.5, 6.6)	<0.01
CHOL, mmol/L	4.9 (4.4, 5.8)	4.8 (4.2, 5.9)	0.44
TG, mmol/L	1.2 (0.8, 1.6)	1.8 (1.3, 2.5)	<0.01
HDL-C, mmol/L	1.5±0.3	1.2±0.3	<0.01
LDL-C, mmol/L	3.0 (2.6, 4.0)	2.9 (2.5, 3.7)	0.19

Table S2 Serum biomarkers in the patients at baseline and the 3-month follow up

Data are presented as mean ± standard deviation or median (Q1, Q3). HCT, hematocrit; CK-MB, creatine kinase MB; NT-proBNP, N-terminal pro-B-type natriuretic peptide; hs-cTnT, high-sensitivity cardiac troponin T; MYO, myohemoglobin; CRP, C-reactive protein; GLU, glucose; CHOL, cholesterol; TG, triglycerides; HDL-C, high-density lipoprotein cholesterol; LDL-C, low-density lipoprotein cholesterol.