

Supplementary material for Fuentes S, Frödin J-E. Why is intravenous chemotherapy cancelled and how often. Could it be prevented? A prospective analysis of all planned and given intravenous anti-tumor treatments at the Department of Oncology, Karolinska University Hospital, Stockholm during one month. Acta Oncol 2015; 54:1056–62.

Supplementary Table I. Distribution of diagnose-group and treatment lines in 1781 bookings for palliative treatments.

	Gastro-intestinal (n = 887)	Breast-sarcoma (n = 436)	Head, neck and chest (n = 190)	Urological (n = 132)	Gynecological (n = 136)
1st line	73.6% (n = 653)	57.1% (n = 249)	60.0% (n = 114)	82.6% (n = 109)	41.2% (n = 56)
2nd line	19.2% (n = 170)	28.4% (n = 47)	24.7% (n = 47)	14.4% (n = 19)	36.8% (n = 50)
3rd line	7.2% (n = 64)	14.4% (n = 63)	15.3% (n = 29)	3.0% (n = 4)	22.1% (n = 30)

Supplementary Table II. The five most common treatment regiments in bookings for gastrointestinal cancer used in the three hospitals.

	DH (n = 119)	RH (n = 249)	SH (n = 228)
FL-Iri ¹	12%	10%	18%
FL-Oxa ²	13%	14%	12%
Gemzar ³	8%	15%	11%
FLv ⁴	7%	10%	15%
Bev-FL-Iri ⁵	18%	8%	3%
Other regiments	42%	43%	41%
Total	100%	100%	100%

¹Irinotecan 180 mg/m² (d 1), 5Fu 500 mg/m² (d 1 + 2), Calciumfolinate 60 mg/m² (d 1 + 2) every 2 weeks; ²Oxaliplatin 85 mg/m² (d 1), 5Fu 500 mg/m² (d 1 + 2), Calciumfolinate 60 mg/m² (d 1 + 2) every 2 weeks; ³Gemcitabine 1000 mg/m² (d 1, 8, 15) every 4 weeks; ⁴5Fu 500 mg/m² (d 1 + 2), Calciumfolinate 60 mg/m² (d 1 + 2) every 2 weeks; ⁵Bevacizumab 5 mg/kg (d 1), Irinotecan 180 mg/m² (d 1), 5Fu 500 mg/m² (d 1 + 2), Calciumfolinate 60 mg/m² (d 1 + 2) every 2 weeks.

Supplementary Table III. The five most common treatment regiments in bookings for breast cancer used in the three hospitals.

	DH (n = 170)	RH (n = 337)	SH (n = 404)
Trast ¹	27%	25%	27%
Pac ²	9%	10%	14%
FEC-75 ³	12%	11%	11%
FEC-100 × 3, Doc × 3 ⁴	10%	8%	7%
Vinorelbine	0%	12%	2%
Other regiments	42%	34%	39%
Total	100%	100%	100%

¹Trastuzumab 6 mg/kg (d 1) every 3 weeks; ²Paclitaxel 80 mg/m² (d 1) every weeks; ³5Fu 600 mg/m² (d 1), Epirubicin 75 mg/m² (d 1), Cyclophosphamide 600 mg/m² (d 1) every 3 weeks; ⁴5Fu 500 mg/m² (d 1), Epirubicin 100 mg/m² (d 1), Cyclophosphamide 500 mg/m² (d 1) every 3 weeks × 3 followed by Docetaxel 100 mg/m² every 3 weeks × 3; ⁵Vinorelbine 30 mg/m² (d 1, 8) every 3 weeks.