

Table S2: Dose reduction criteria

| Cardiac toxicity criteria | | |
|---|--|--------------------------------------|
| CHF severe | Withdrawal | |
| CHF moderately symptomatic or Asymptomatic | LVEF < 45%: withdrawal | |
| | LVEF decrease 10-20 points and LVEF ≥45%: keep treatment | |
| | LVEF decrease > 20 points : withdrawal | |
| Hematology toxicity criteria | | |
| PLD+CPM | | |
| $0.5 \times 10^9 / l \geq N < 1.5 \times 10^9 / l$ and/or $25 \times 10^9 / l \geq \text{Plat} < 75 \times 10^9 / l$ | interrupted until $N < 1.5 \times 10^9 / l$ and $\text{Plat} < 75 \times 10^9 / l$ | No dose reduction |
| $N < 0.5 \times 10^9 / l$ and/or $\text{Plat} < 75 \times 10^9 / l$ | Interrupted until $N < 1.5 \times 10^9 / l$ and $\text{Plat} < 75 \times 10^9 / l$ | Dose reduction of 15% for both drugs |
| If a patient needs more than 2 weeks to recover normal levels of neutrophils or platelets, PLD plus CO was withdrawal and patient start PYX treatment or surgery was performed at investigator criteria | | |

| Paclitaxel | | | | |
|---|--|--------------------|---|-----------------------------|
| $N < 1.0 \times 10^9 / l$ and/or $Plat < 75 \times 10^9 / l$ | Interrupted until $N < 1.5 \times 10^9 / l$ and $Plat < 75 \times 10^9 / l$ | | Recovery ≤ 1 week: no dose reduction | |
| | | | Recovery ≤ 2 week: rechallenge at a 20 % dose reduction | |
| If a patient needs more than 2 weeks to recover normal levels , paclitaxel was withdrawal and surgery was performed | | | | |
| Non-hematology toxicity criteria | | | | |
| PLD+CPM | | | PTX | |
| Hand foot syndrome (HFS) | | | Adverse Events | |
| G1 | Treatment not interrupted | No dose reduction | G1 | Treatment not interrupted |
| G2 | interrupted until $\leq G1$ | No dose reduction | G2 | Treatment not interrupted |
| G3 | interrupted until $\leq G1$ | 15% dose reduction | G3 | interrupted until $\leq G1$ |
| G4 | interrupted until $\leq G1$ | 25% dose reduction | G4 | interrupted until $\leq G1$ |
| If a patient needs more than 2 weeks to G1, withdrawal PLD+CP treatment and start with PTX | | | If a patient more than 2 weeks to recover to G2, withdrawal PTX treatment and surgery performed | |
| Mucositis | | | Hypersensitivity | |

| | | | | | |
|--|-----------------------------|--------------------|---|--|---|
| G1 | Treatment not interrupted | No dose reduction | Immediately discontinued the infusion and appropriate symptomatic treatment. Treatment was restarted a lower speed. If tolerated, the infusion may then be completed over the next hour to a total of 90' | | |
| G2 | interrupted until \leq G1 | No dose reduction | | | |
| G3 | interrupted until \leq G1 | 15% dose reduction | PLD+CPM, paclitaxel | | |
| | | | Bilirubin > 2x normal lab value | | |
| G4 | interrupted until \leq G1 | 25% dose reduction | Treatment interrupted | recovery in 3 weeks to G1 | Treatment not interrupted |
| If patient needs more than 2 weeks to G1, withdrawal PLD+CP treatment and start with PTX | | | | no recovery in 3 weeks to G1 | Interrupted treatment and surgery performed |
| Anaphylactic reaction during infusion | | | Creatinine clearance 40-156 ml/min | Normal dose | |
| Immediately discontinued the infusion and appropriate symptomatic treatment. Treatment was restarted at a lower speed. If tolerated, the infusion may then be completed over the next hour to a total of 90' | | | | | |
| | | | Creatinine clearance \leq 40 ml/min | If \leq 3 weeks to normal, no interrupted treatment | |
| | | | | If \geq 3 weeks to normal, interrupted treatment and surgery performed | |

Abbreviations: CHF: Congestive Heart Failure, LVEF: Left ventricular ejection fraction, N: Neutrophils, Plat: Platelets, G: Grade, PLD: Pegylated liposomal doxorubicin, CPM: Cyclophosphamide, PTX: Paclitaxel,