Appendix 2 (as submitted by authors): Supplementary table

Recommended Targets for Cardiovascular Disease Risk Factors and Screening for Secondary Malignancy in Recipients of Allogeneic Stem Cell Transplant

CVD Risk factor	Blood Pressure ¹	Diabetes ²	Dyslipidemia ³
Target	< 130/80mmHg	A1C = 6.5%</th <th>LDL-C < 2.0 mmol/L</th>	LDL-C < 2.0 mmol/L
Malignancy	Colorectal	Breast	Other
Recommended screening ⁴ *	From age 50y, annual stool testing, sigmoidoscopy every 5 years, colonoscopy every 10 years	Annual mammogram/MRI from age 40y or, if prior radiation therapy (RT), from 8y post-RT or from age 25, whichever is sooner	Females: annual PAP** Males: annual DRE +/- PSA from age 50 as guided by symptoms, family history and PSA level

^{*} More intensive screening may be warranted depending on additional risk factors such as positive family history or symptoms

References:

 Whelton PK, Carey RM, Aronow WS, et al. 2017 ACC/AHA/AAPA/ABC/ACPM/AGS/APhA/ ASH/ASPC/ NMA/PCNA Guideline for the Prevention, Detection, Evaluation, and Management of High Blood Pressure in Adults: Executive Summary: A Report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines. *Hypertension*. 2018;71(6):1269-1324.

^{**} After the age of 30 years if there have been three consecutive normal results, assess if patients can change to every 3 years

- 2. Diabetes Canada Clinical Practice Guidelines Expert Committee. Diabetes Canada 2018 Clinical Practice Guidelines for the Prevention and Management of Diabetes in Canada. *Can J Diabetes*. 2018;42(Suppl 1):S1-S325.
- 3. Anderson TJ, Gregoire J, Pearson GJ et al. 2016 Canadian Cardiovascular Society Guidelines for the Management of Dyslipidemia for the Prevention of Cardiovascular Disease in the Adult. *Canadian Journal of Cardiology*. 2016; 32:1263-1282.
- 4. Inamoto Y, Shah NN, Savani BN, et al. Secondary solid cancer screening following hematopoietic cell transplantation. *Bone Marrow Transplant*. 2015;50(8):1013-1023.