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| **Appendix Table 1**. Post-treatment surveillance strategies |
| **Patients characteristics** | **Strategy** |
| Recurrent BE-ND patient |  |
| After CE-IM (state=normal) | Surveillance every 1 year for two years then every 3 years |
| After non-CE-IM (state=NDBE) | Surveillance at 3, 6, 12 months and then every 1 year\* |
| BE-LGD patients |
| After CE-IM (state=normal) | Surveillance every 1 year for two years then every 3 years |
| After CE-D, non-CE-IM (state=NDBE) | Surveillance every 6 months for one year, every 1 year for two years and then every 3 years |
| After non-CE-D, non-CE-IM (state=LGD) | Surveillance every 6 months for one year, then every 1 year |
| BE-HGD/EAC T1a patients |
| After CE-IM (state=normal),After CE-D, non-CE-IM (state=NDBE),After non-CE-D, non-CE-IM (state=LGD) | Surveillance at 3, 6, 12 months and then every 1 year\* |
| After non-CE-D, non-CE-IM (state=HGD/EAC T1a) | Esophagectomy |
| BE: Barrett’s esophagus, NDBE: Non-dysplasia Barrett’s esophagus, LGD: low-grade dysplasia, HGD: high-grade dysplasia, CE: complete eradication, IM: intestinal metaplasia, D: dysplasia.\* If the state of no-dysplasia was persistent after five years, then surveillance continued every three years. |