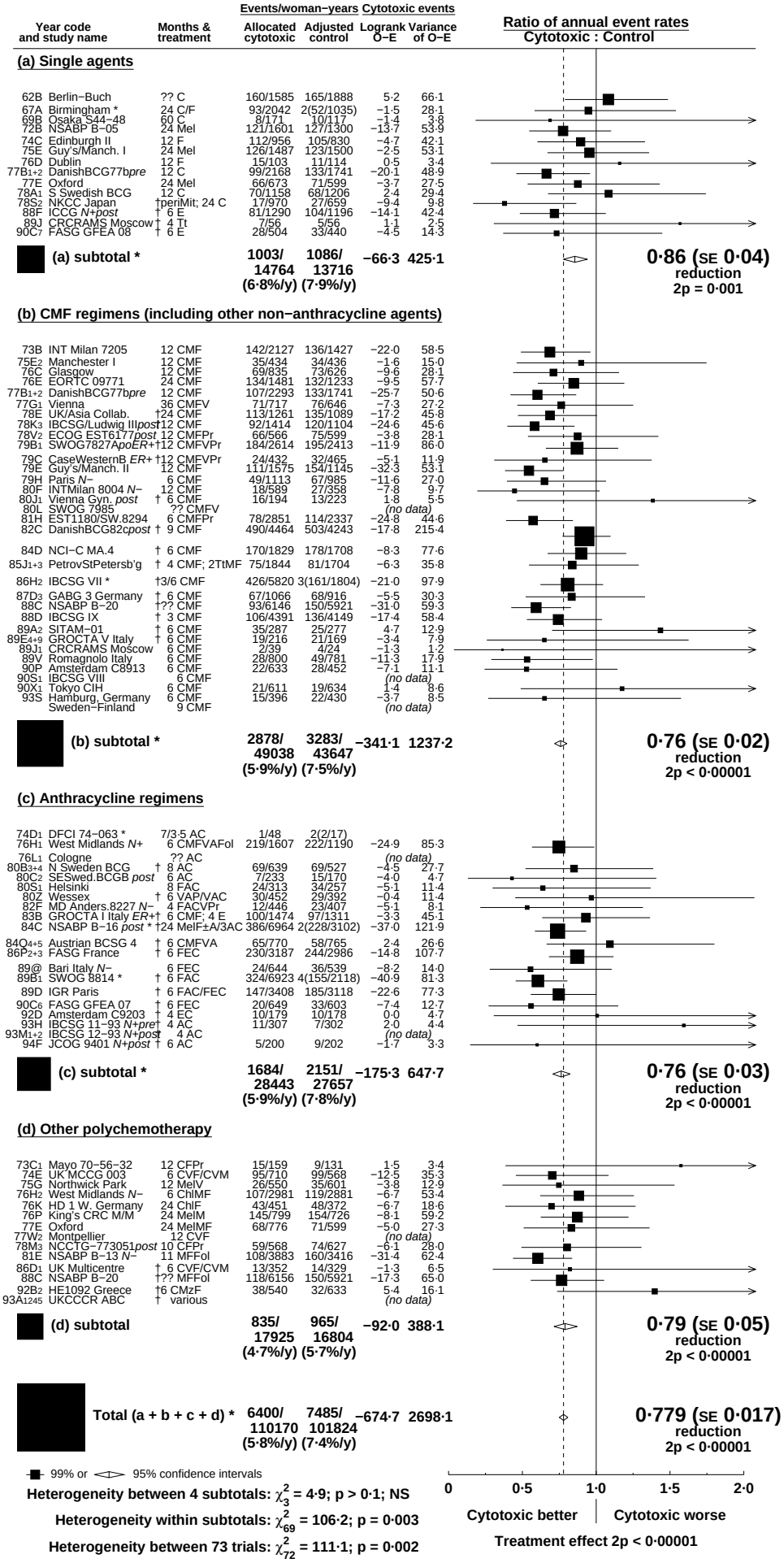
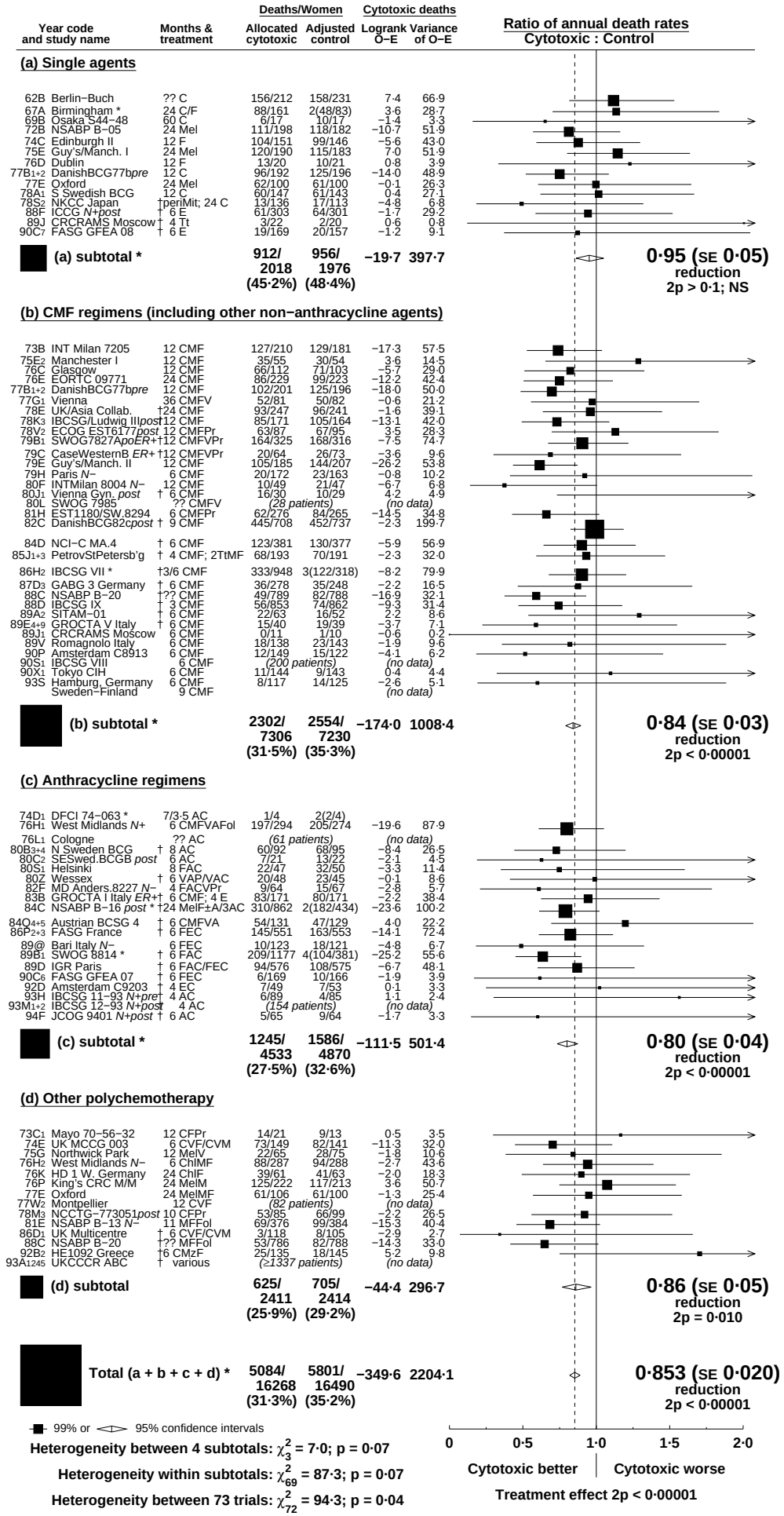


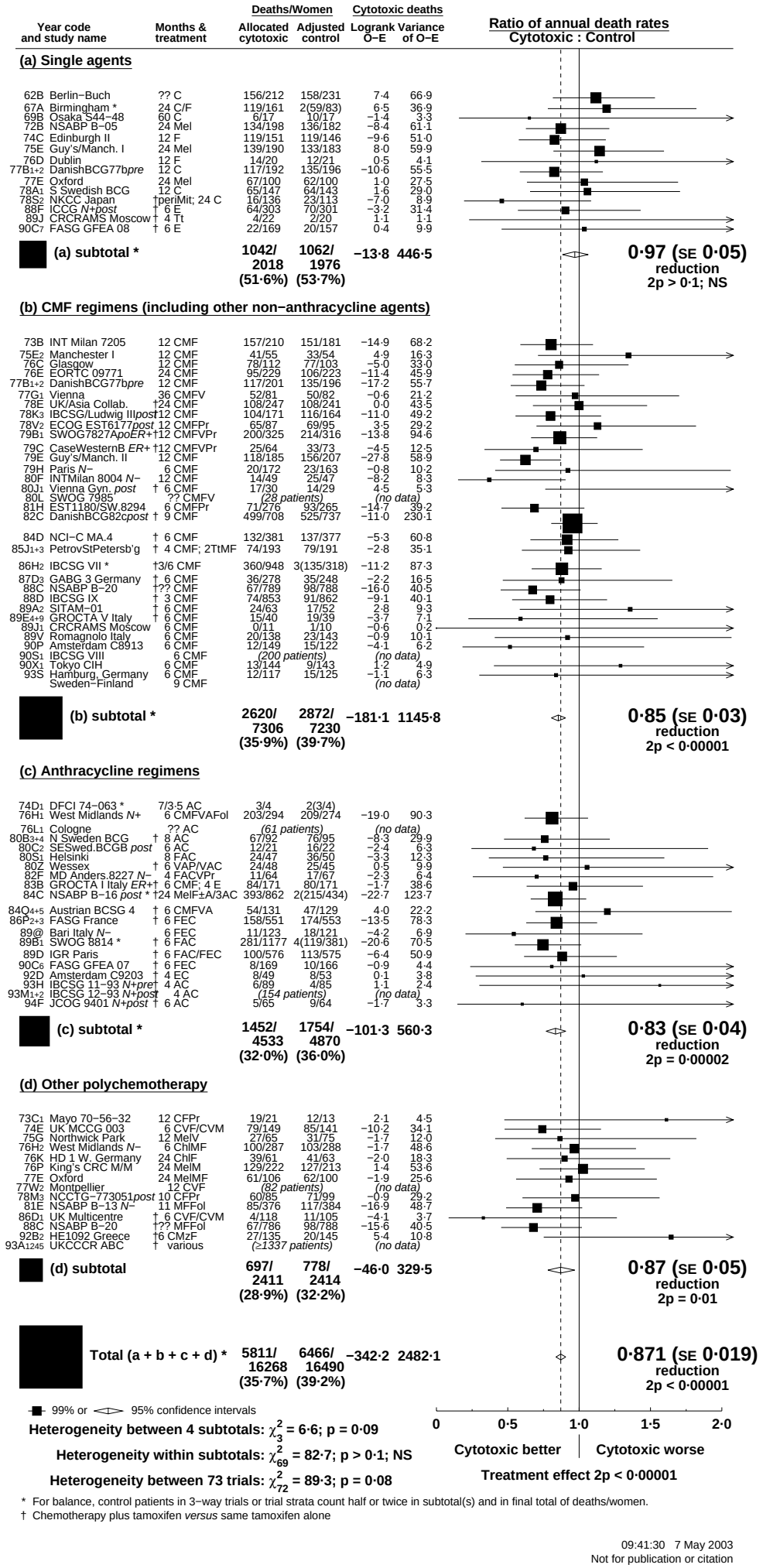
* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of events/women.

† Chemotherapy plus tamoxifen *versus* same tamoxifen alone



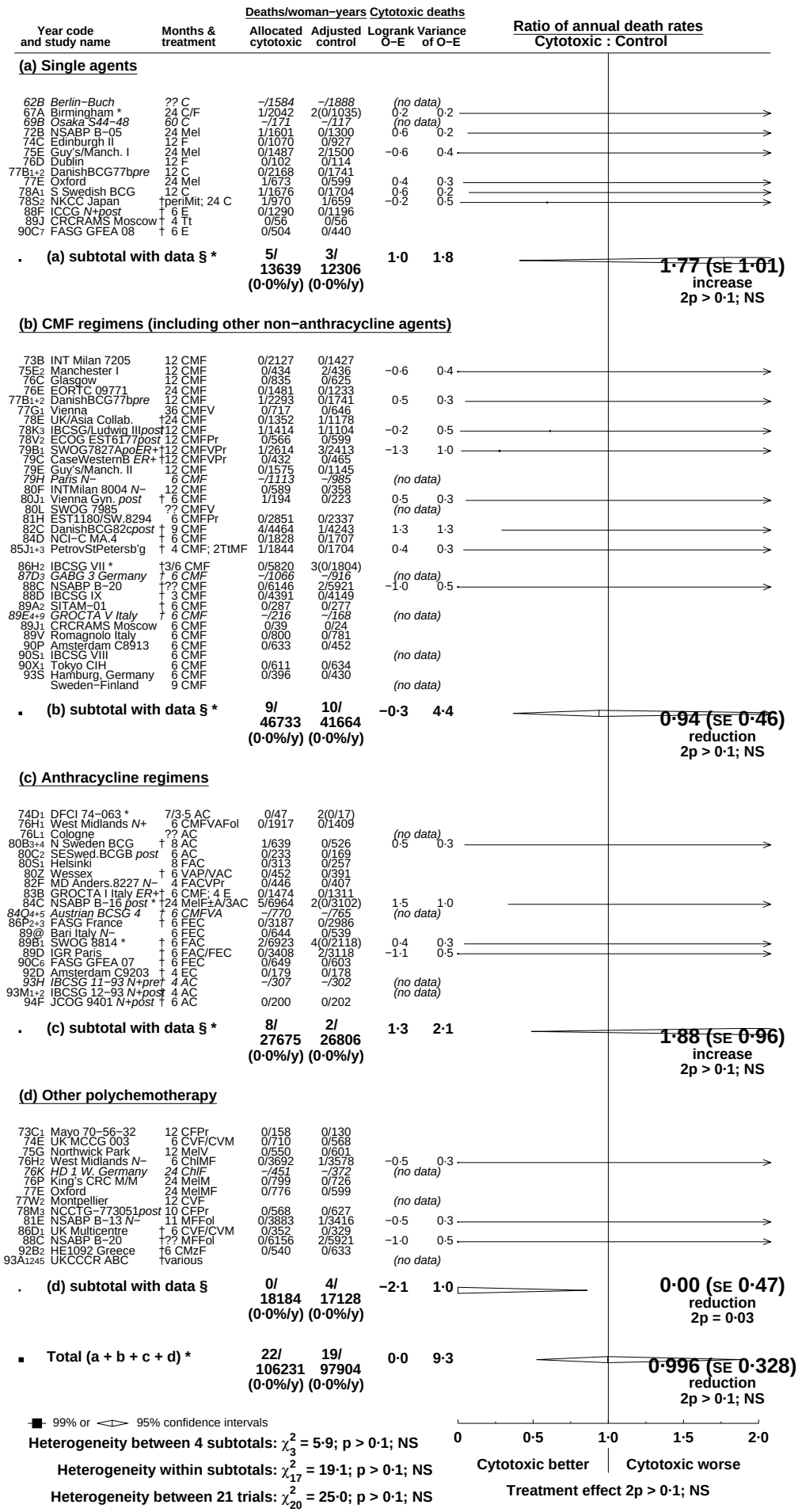
* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of deaths/women.

† Chemotherapy plus tamoxifen *versus* same tamoxifen alone



* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of deaths/women.

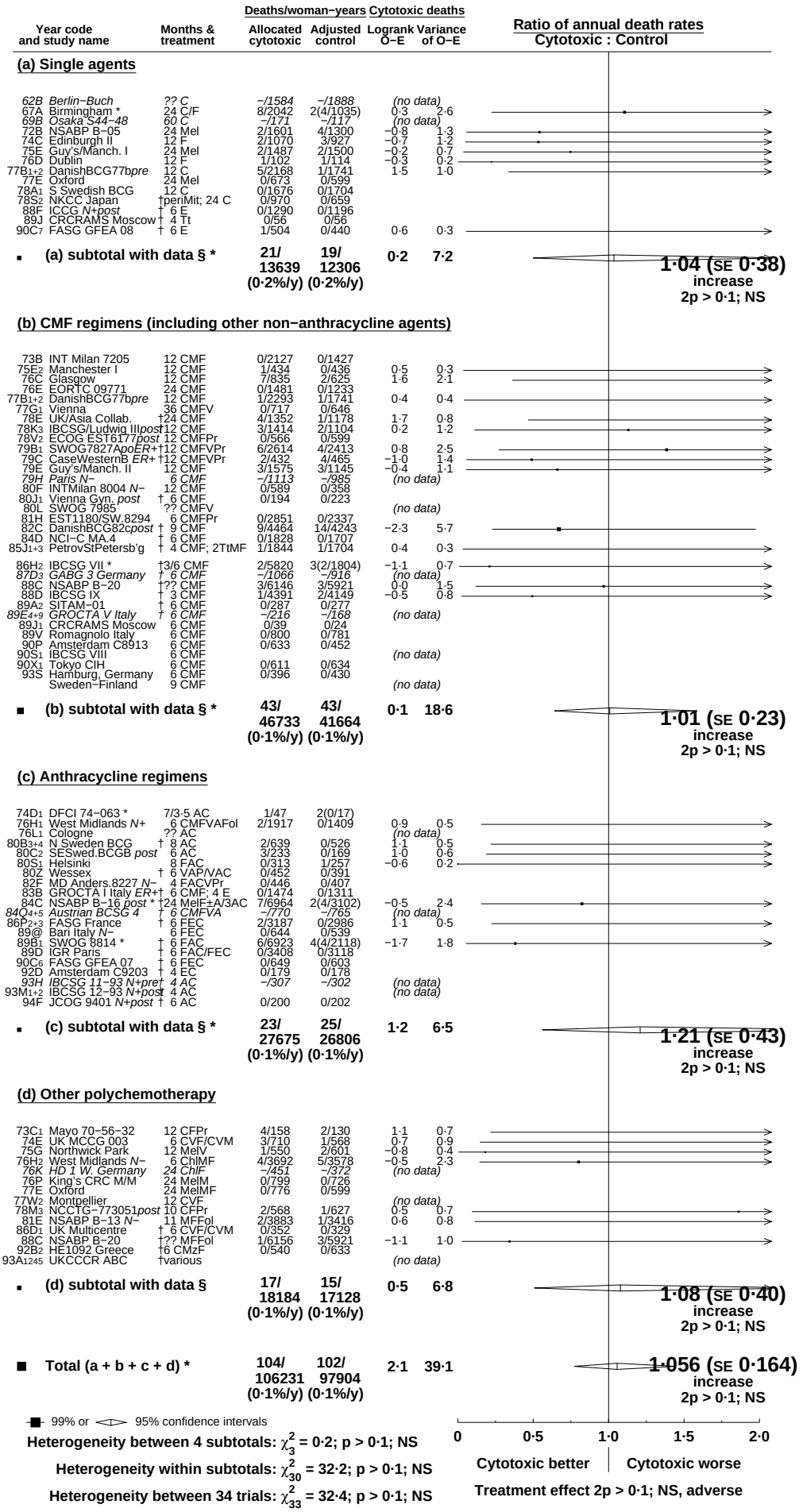
† Chemotherapy plus tamoxifen *versus* same tamoxifen alone



§ 8 trials with no data do not contribute to subtotals or to the overall total (allocated cytotoxic: 5678; allocated control: 5513)

* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of deaths/women.

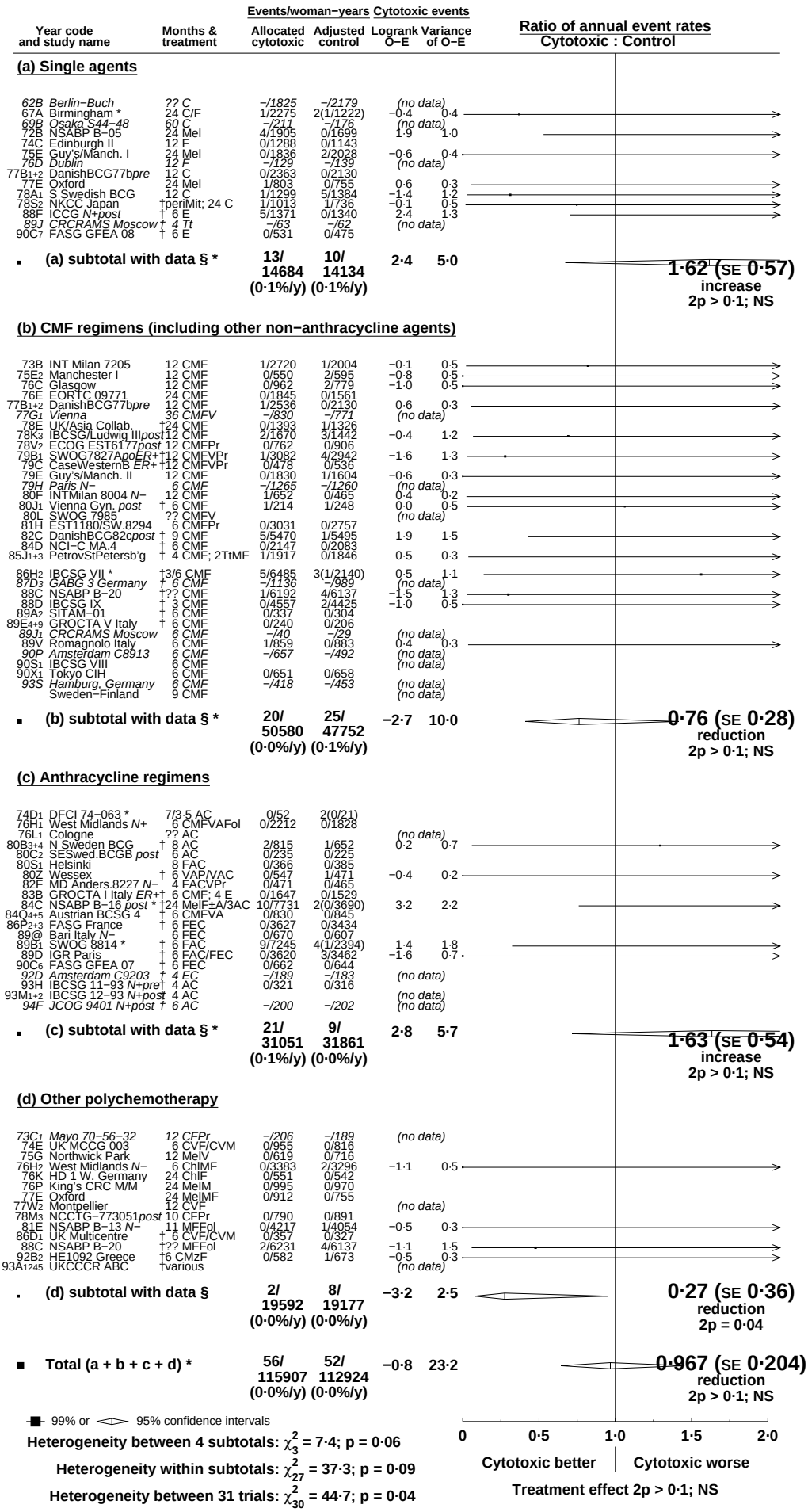
† Chemotherapy plus tamoxifen *versus* same tamoxifen alone



§ 8 trials with no data do not contribute to subtotals or to the overall total (allocated cytotoxic: 5678; allocated control: 5513)

* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of deaths/women.

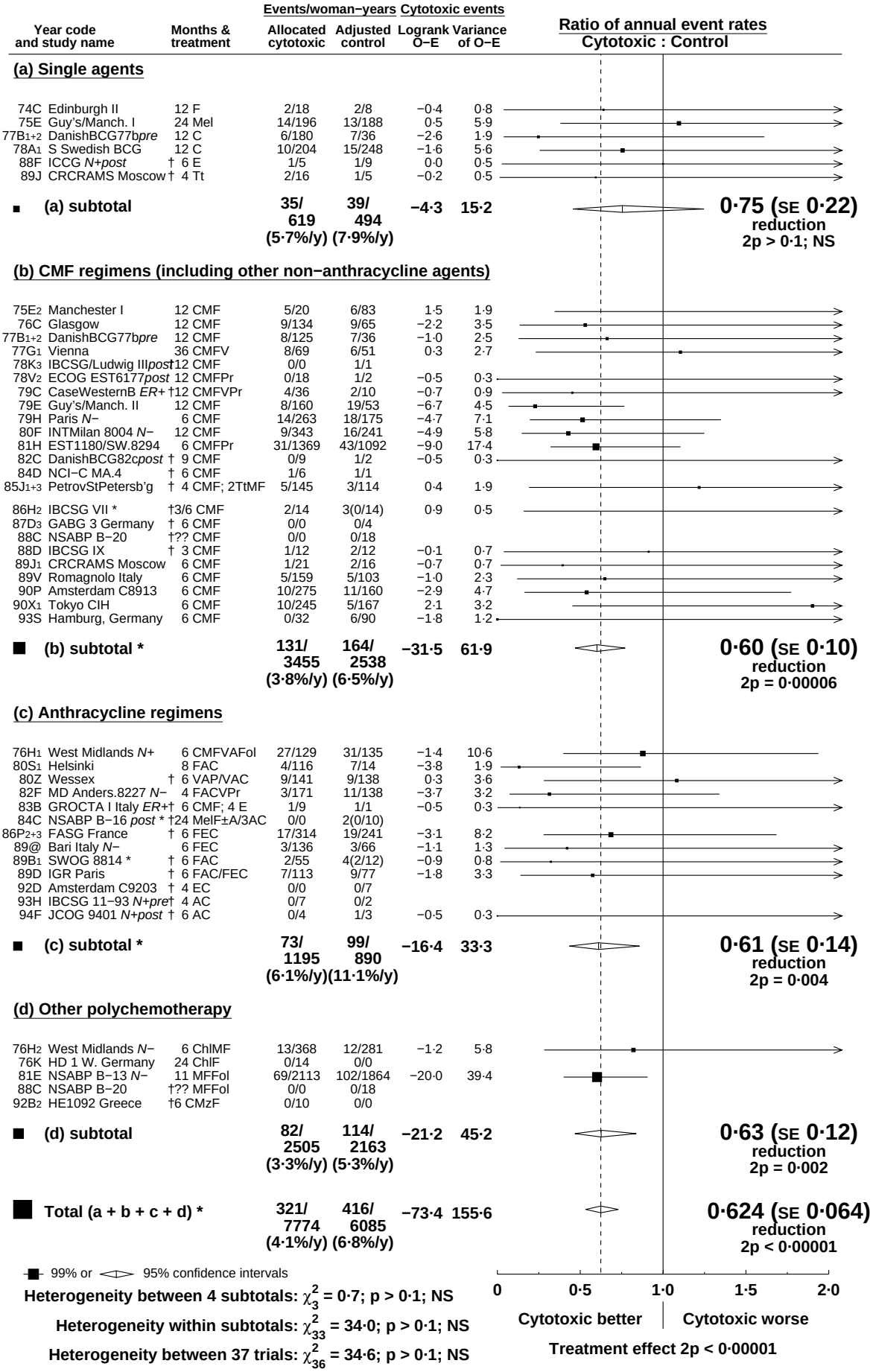
† Chemotherapy plus tamoxifen *versus* same tamoxifen alone



§ 13 trials with no data do not contribute to subtotals or to the overall total (allocated cytotoxic: 7169; allocated control: 7124)

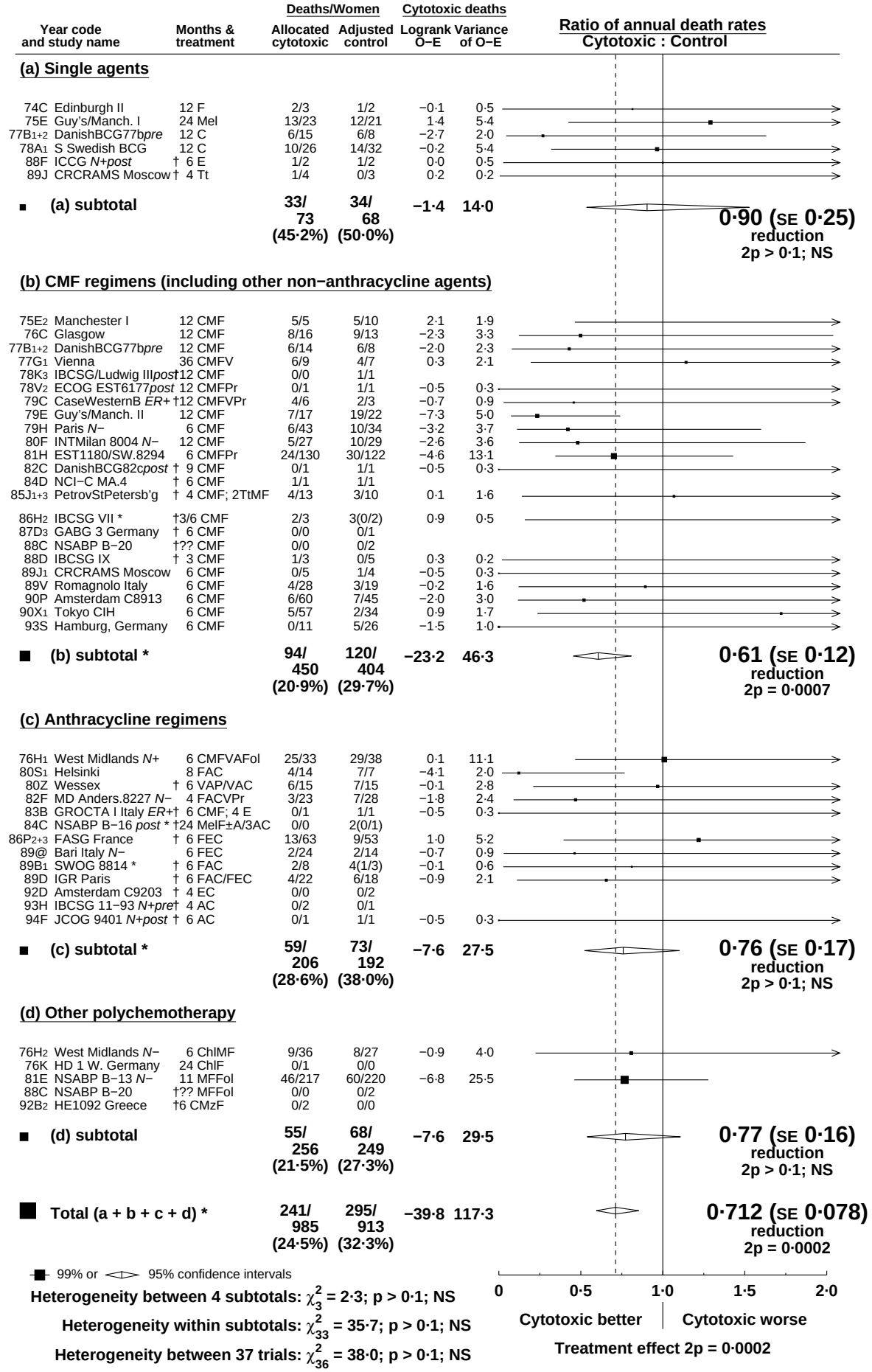
* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of events/women.

† Chemotherapy plus tamoxifen *versus* same tamoxifen alone



* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of events/women.

† Chemotherapy plus tamoxifen *versus* same tamoxifen alone



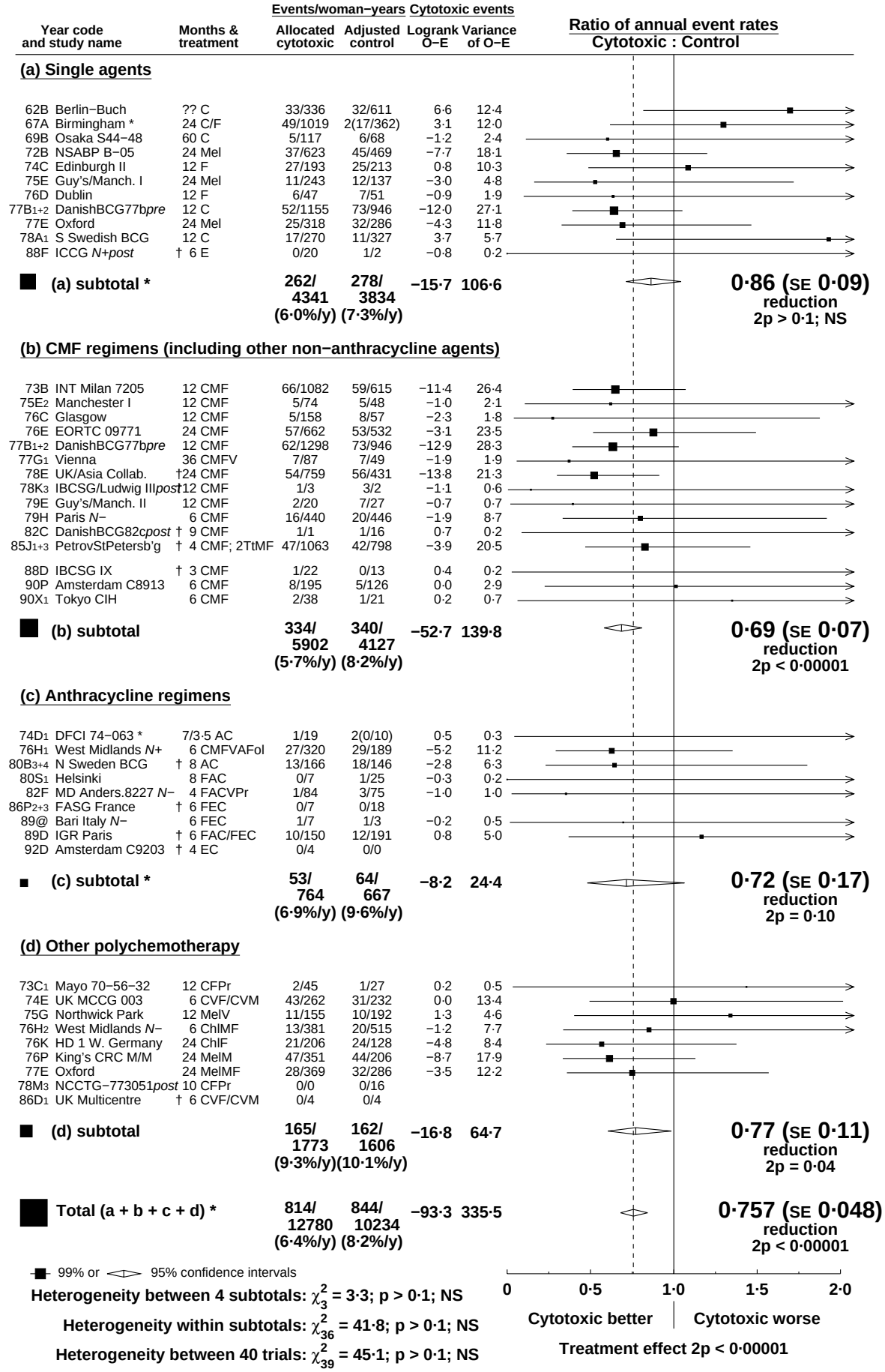
Heterogeneity between 4 subtotals: $\chi^2_3 = 2{\cdot}3$; p > 0·1; NS

Heterogeneity within subtotals: $\chi^2_{33} = 35{\cdot}7$; p > 0·1; NS

Heterogeneity between 37 trials: $\chi^2_{36} = 38{\cdot}0$; p > 0·1; NS

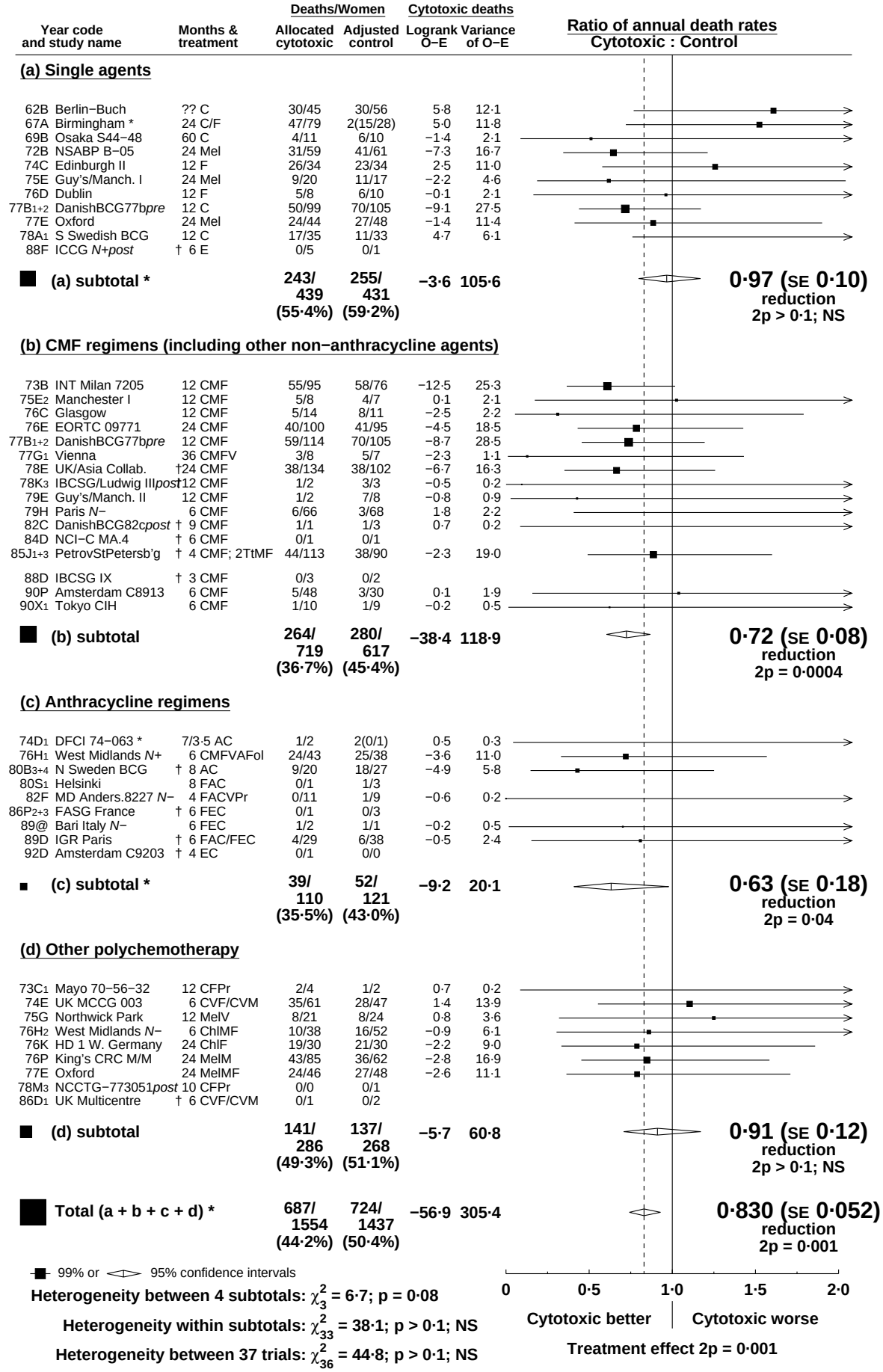
* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of deaths/women.

† Chemotherapy plus tamoxifen *versus* same tamoxifen alone



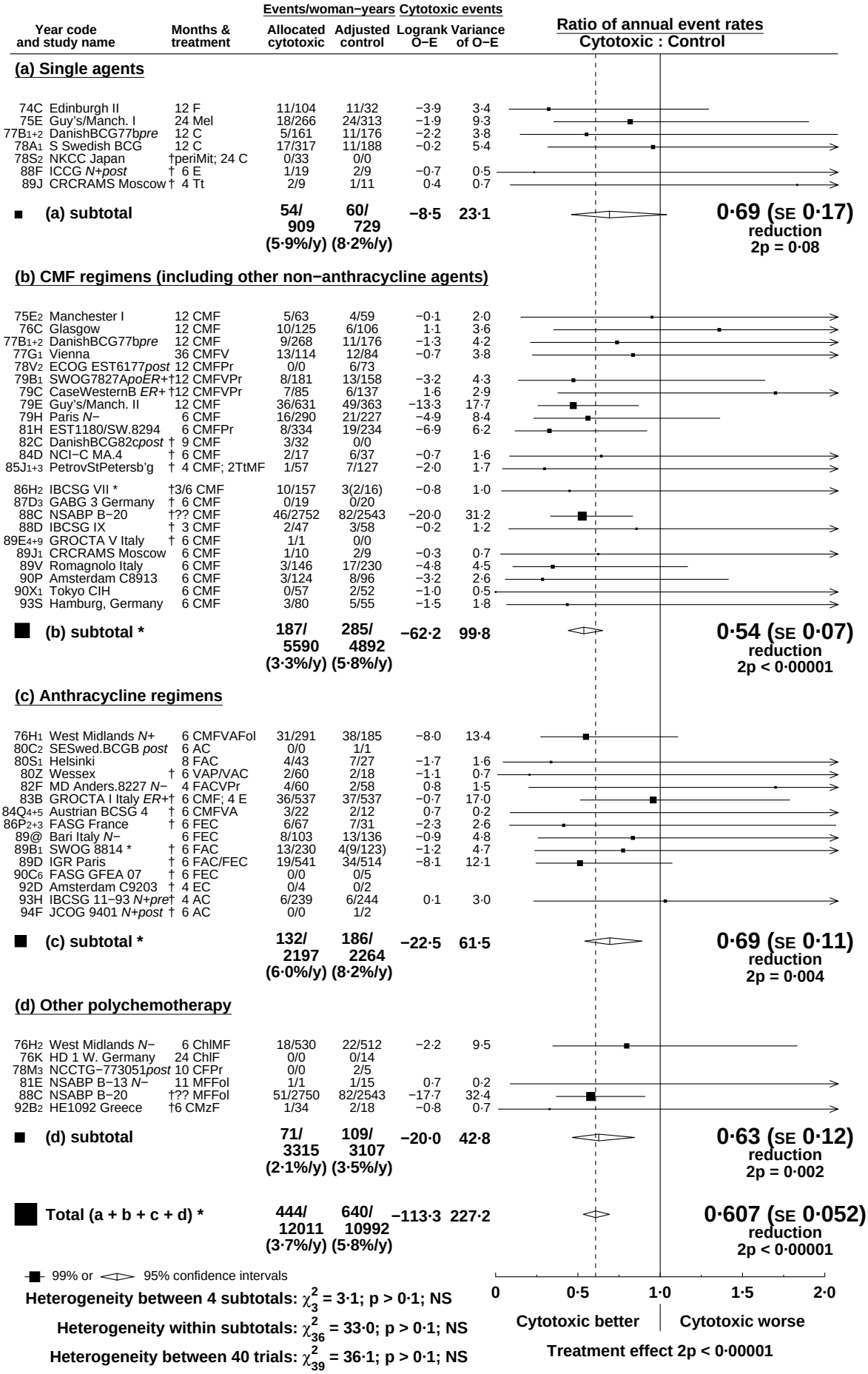
* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of events/women.

† Chemotherapy plus tamoxifen *versus* same tamoxifen alone



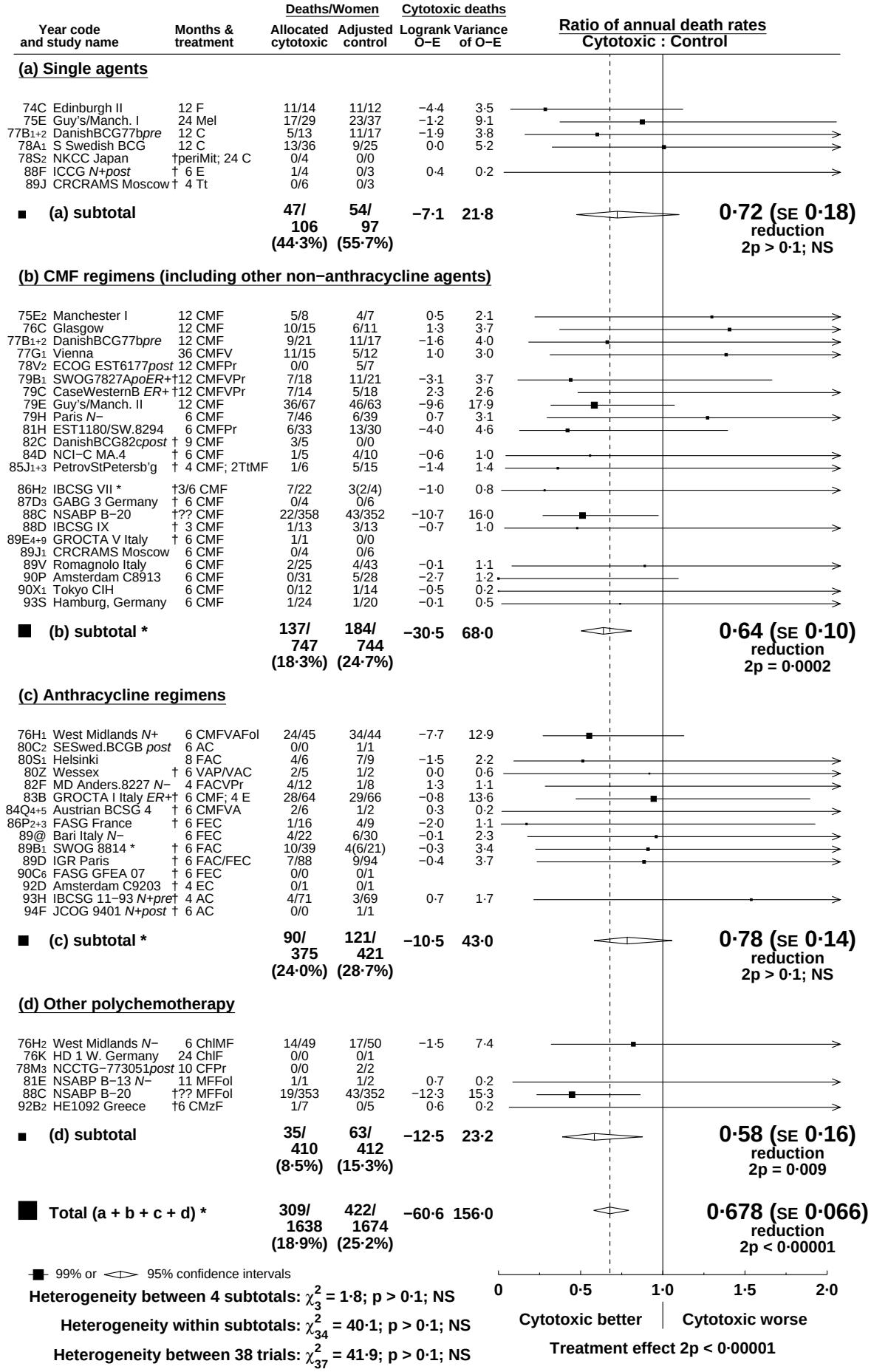
* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of deaths/women.

† Chemotherapy plus tamoxifen *versus* same tamoxifen alone



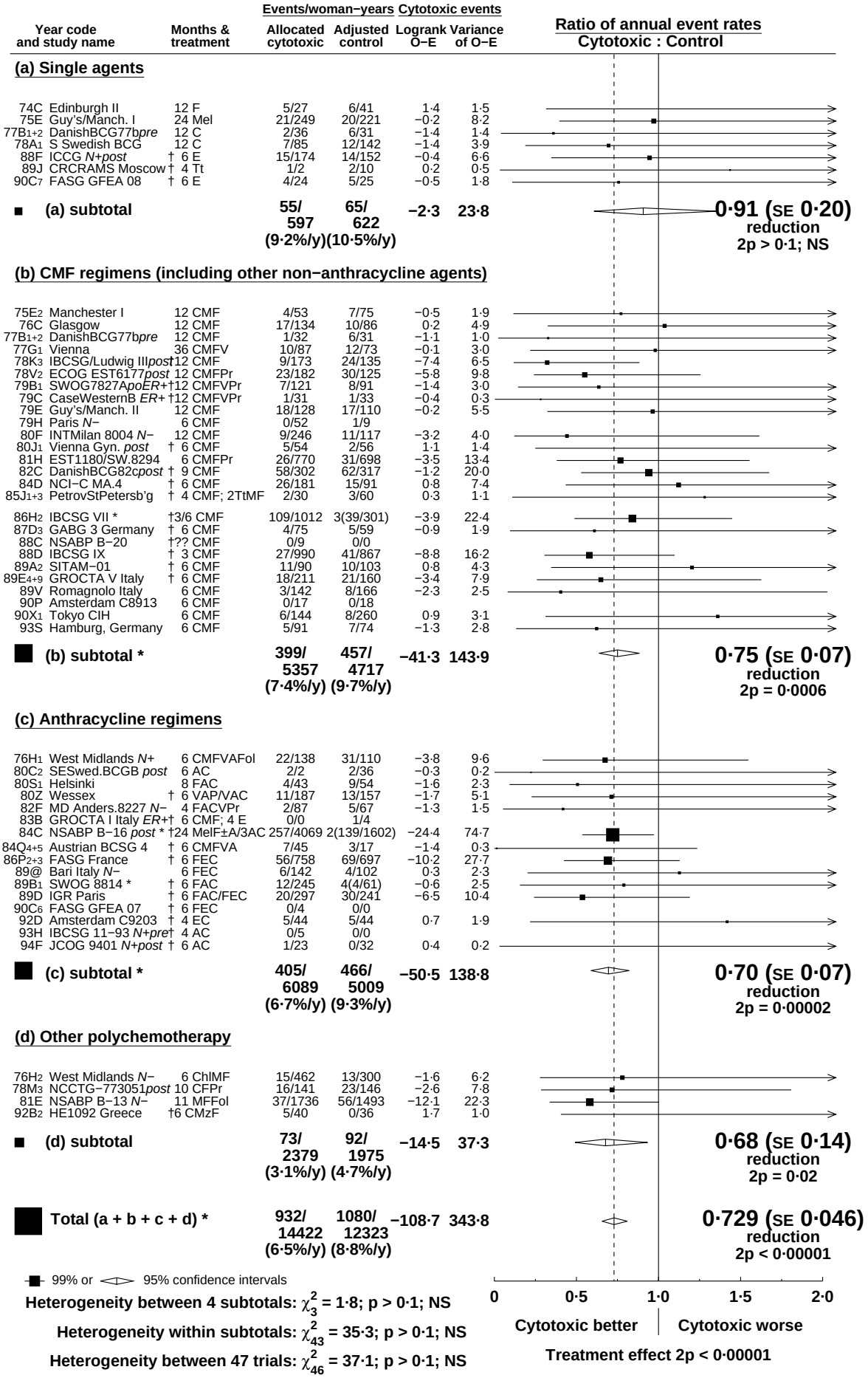
* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of events/women.

† Chemotherapy plus tamoxifen *versus* same tamoxifen alone



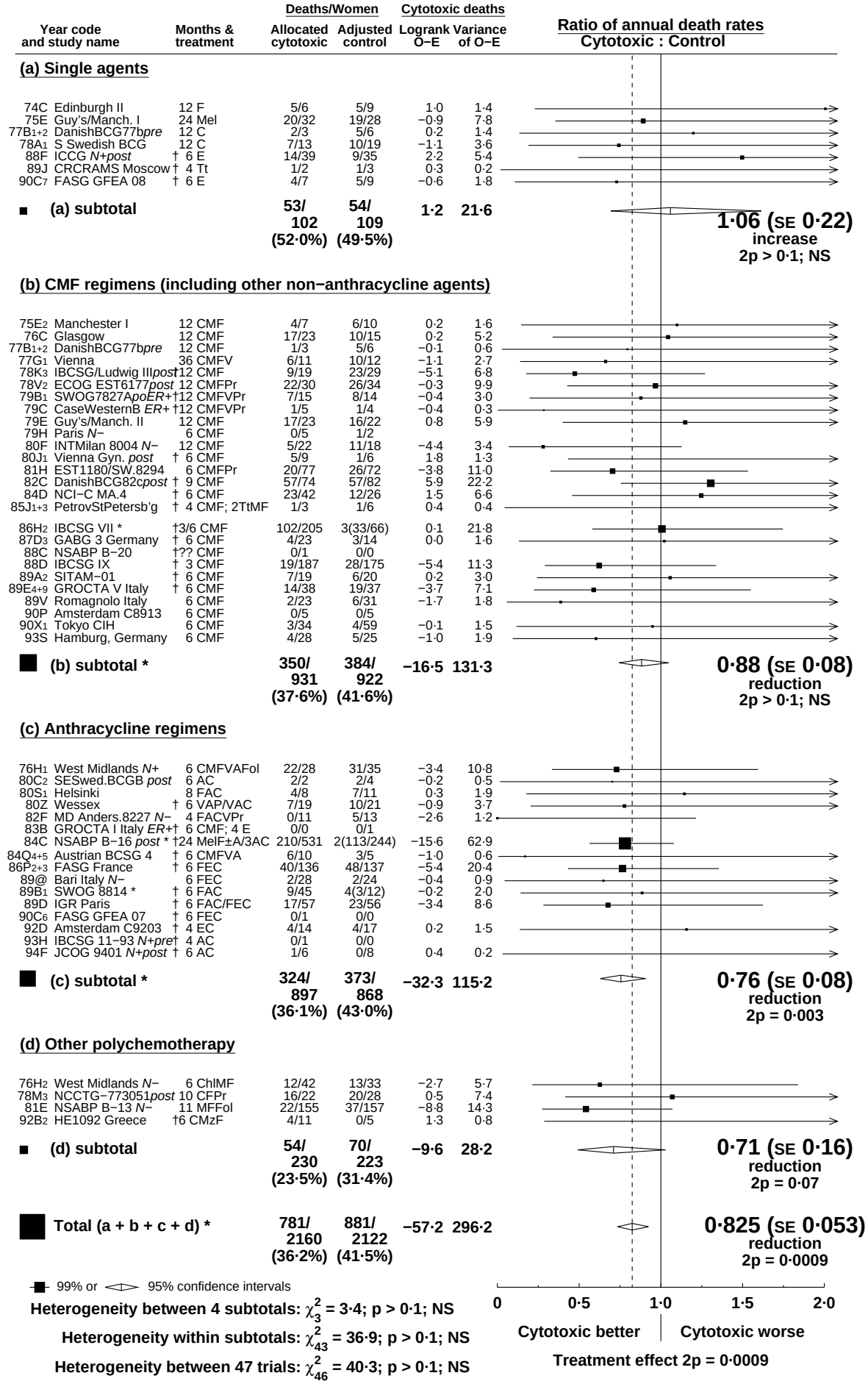
* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of deaths/women.

† Chemotherapy plus tamoxifen *versus* same tamoxifen alone



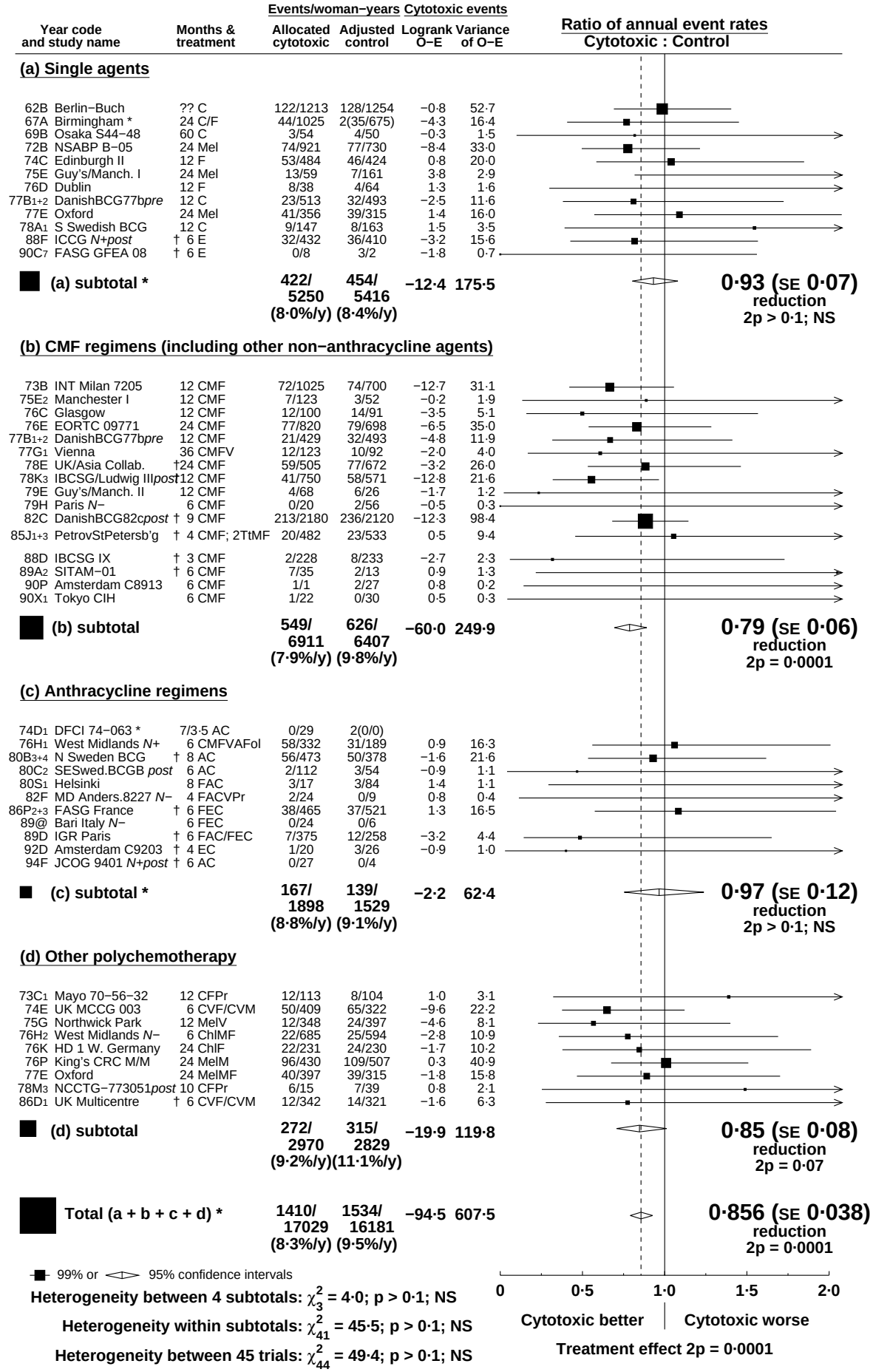
* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of events/women.

† Chemotherapy plus tamoxifen *versus* same tamoxifen alone



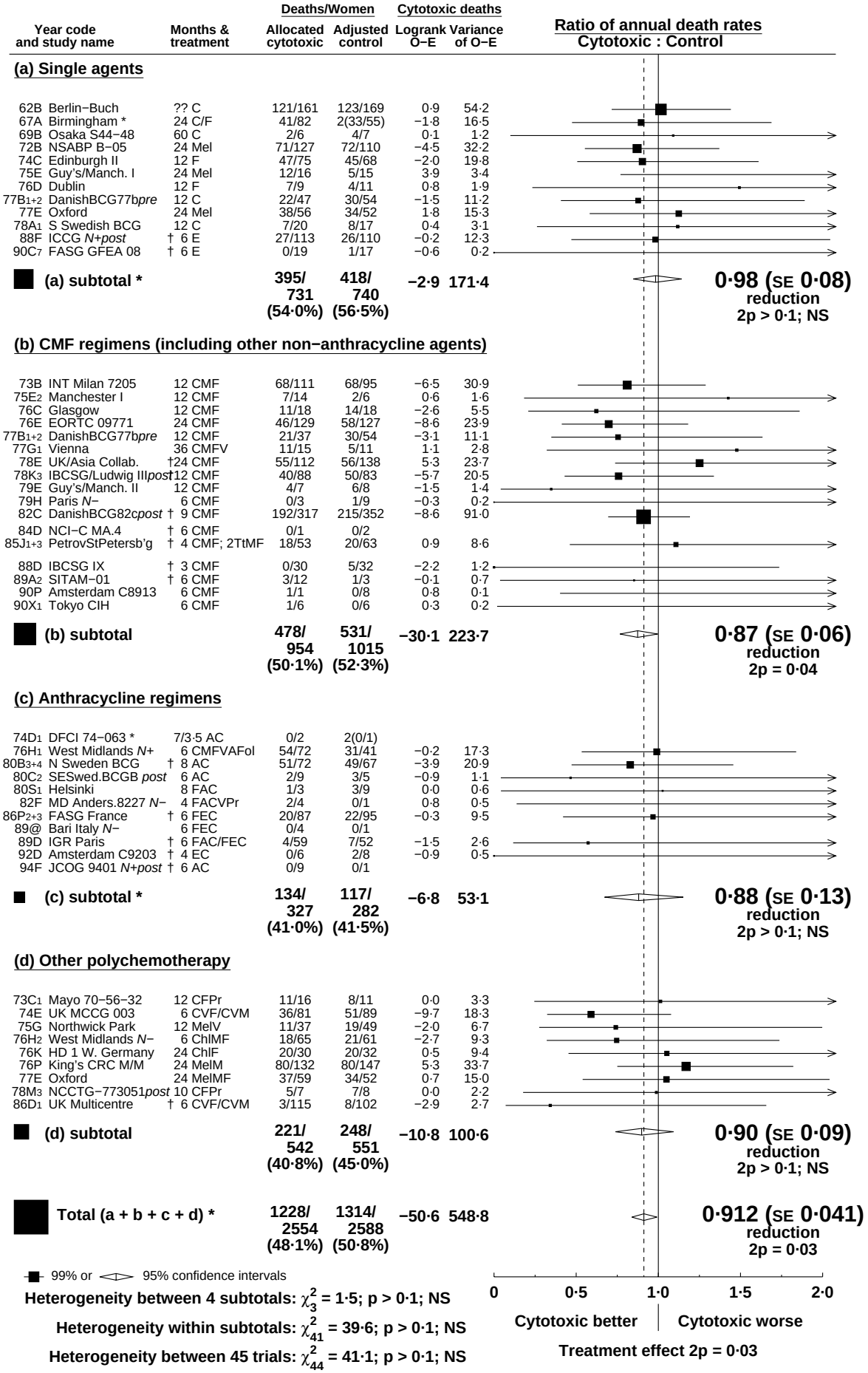
* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of deaths/women.

† Chemotherapy plus tamoxifen *versus* same tamoxifen alone



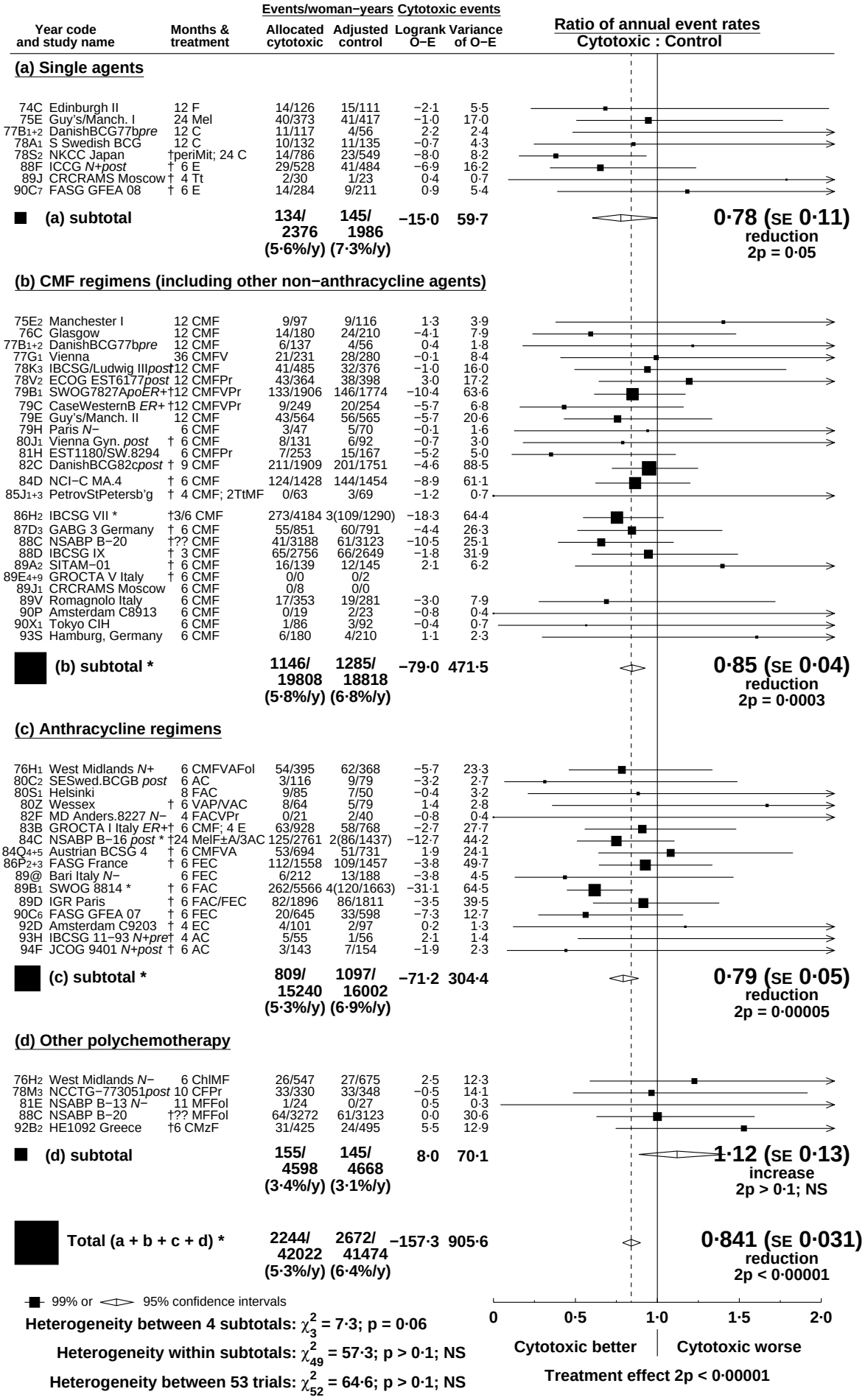
* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of events/women.

† Chemotherapy plus tamoxifen *versus* same tamoxifen alone



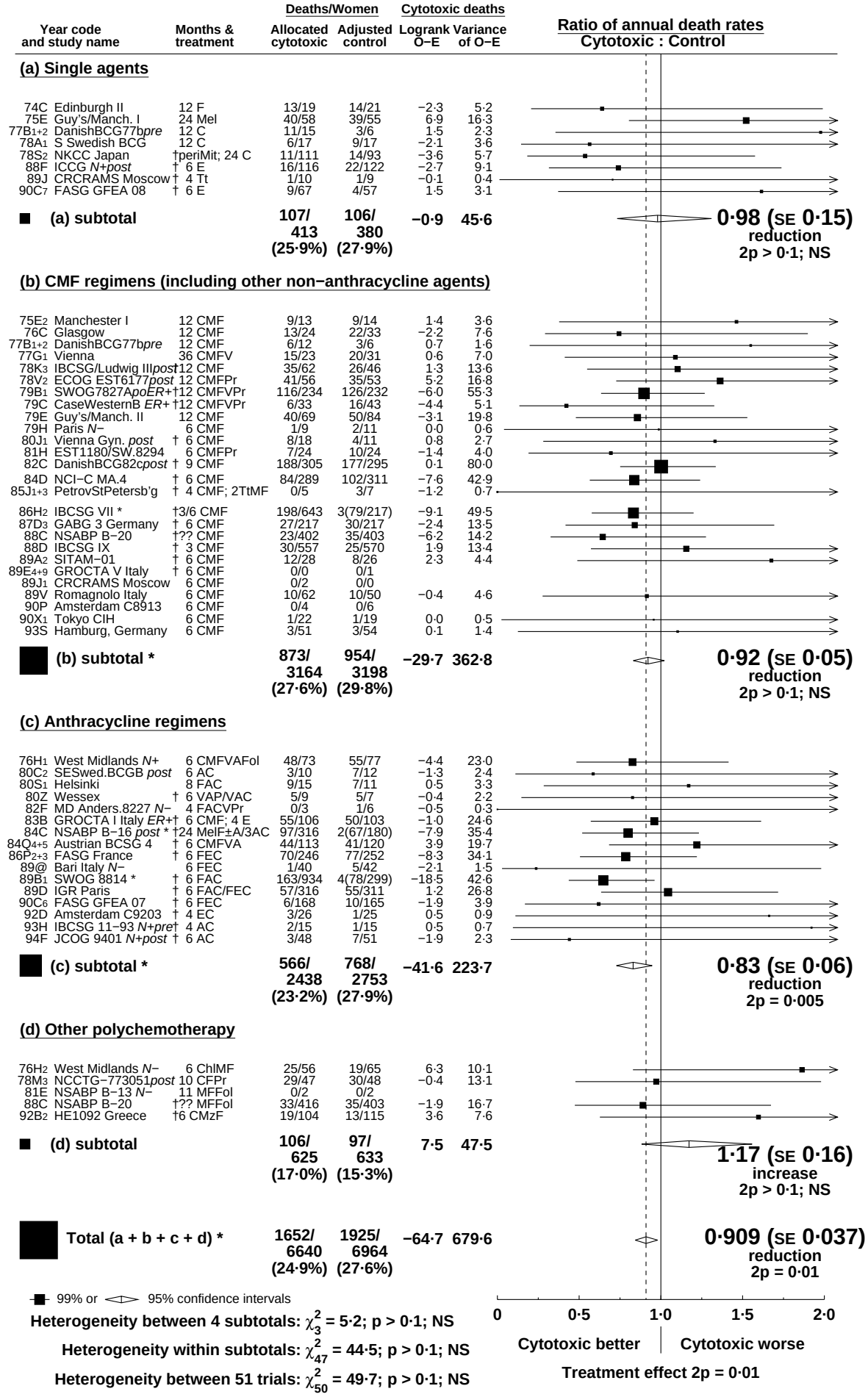
* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of deaths/women.

† Chemotherapy plus tamoxifen *versus* same tamoxifen alone



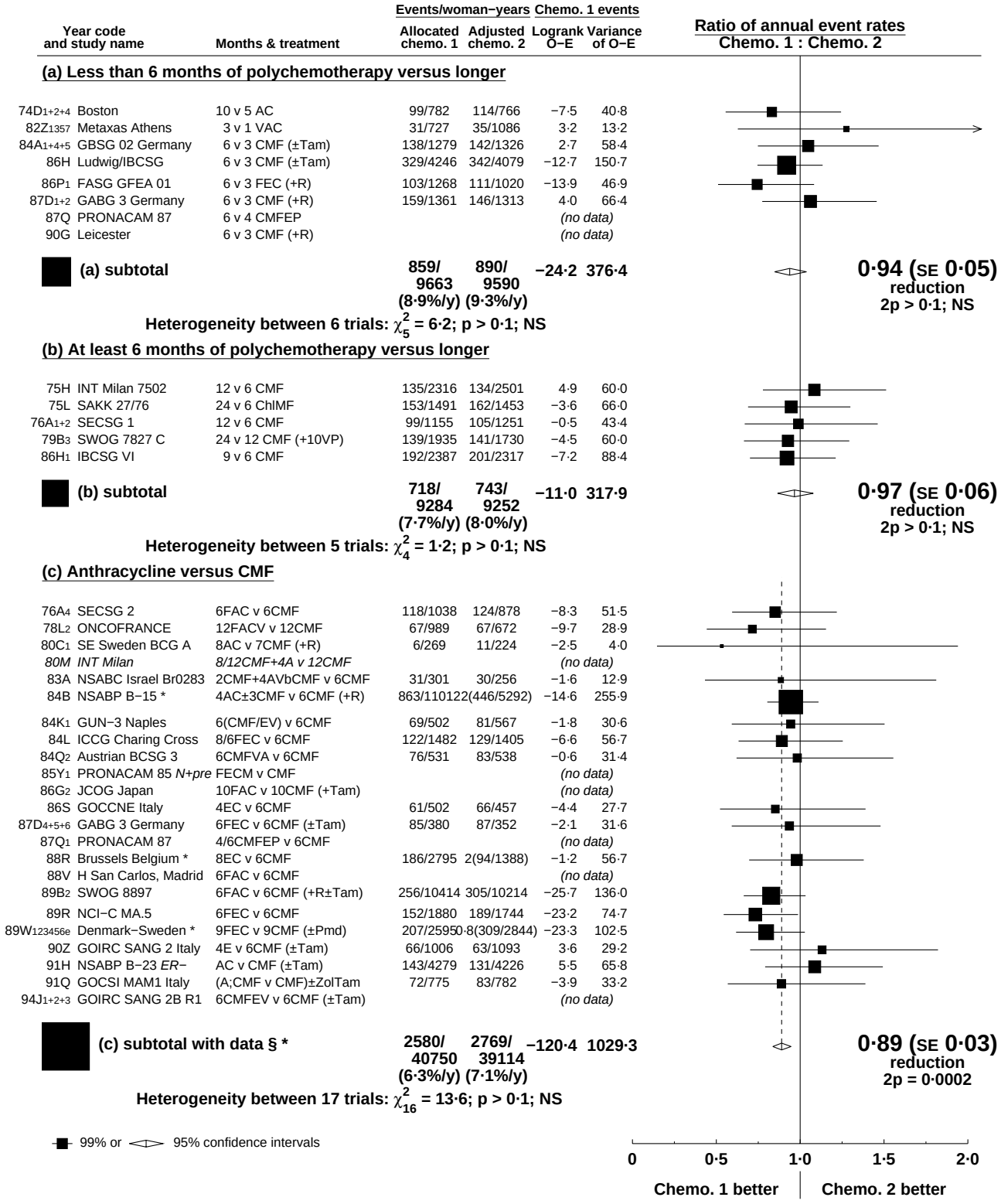
* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of events/women.

† Chemotherapy plus tamoxifen *versus* same tamoxifen alone



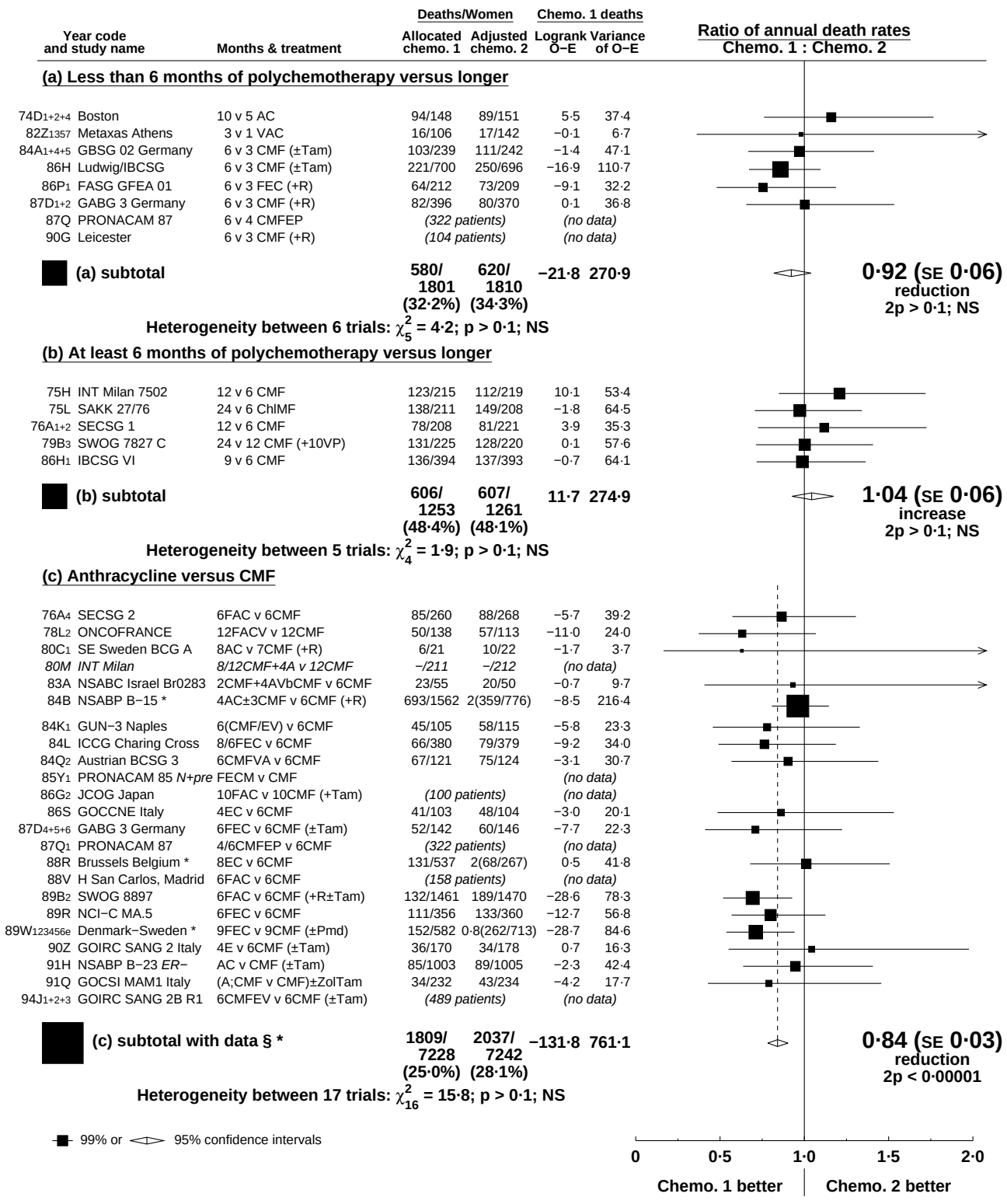
* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of deaths/women.

† Chemotherapy plus tamoxifen *versus* same tamoxifen alone



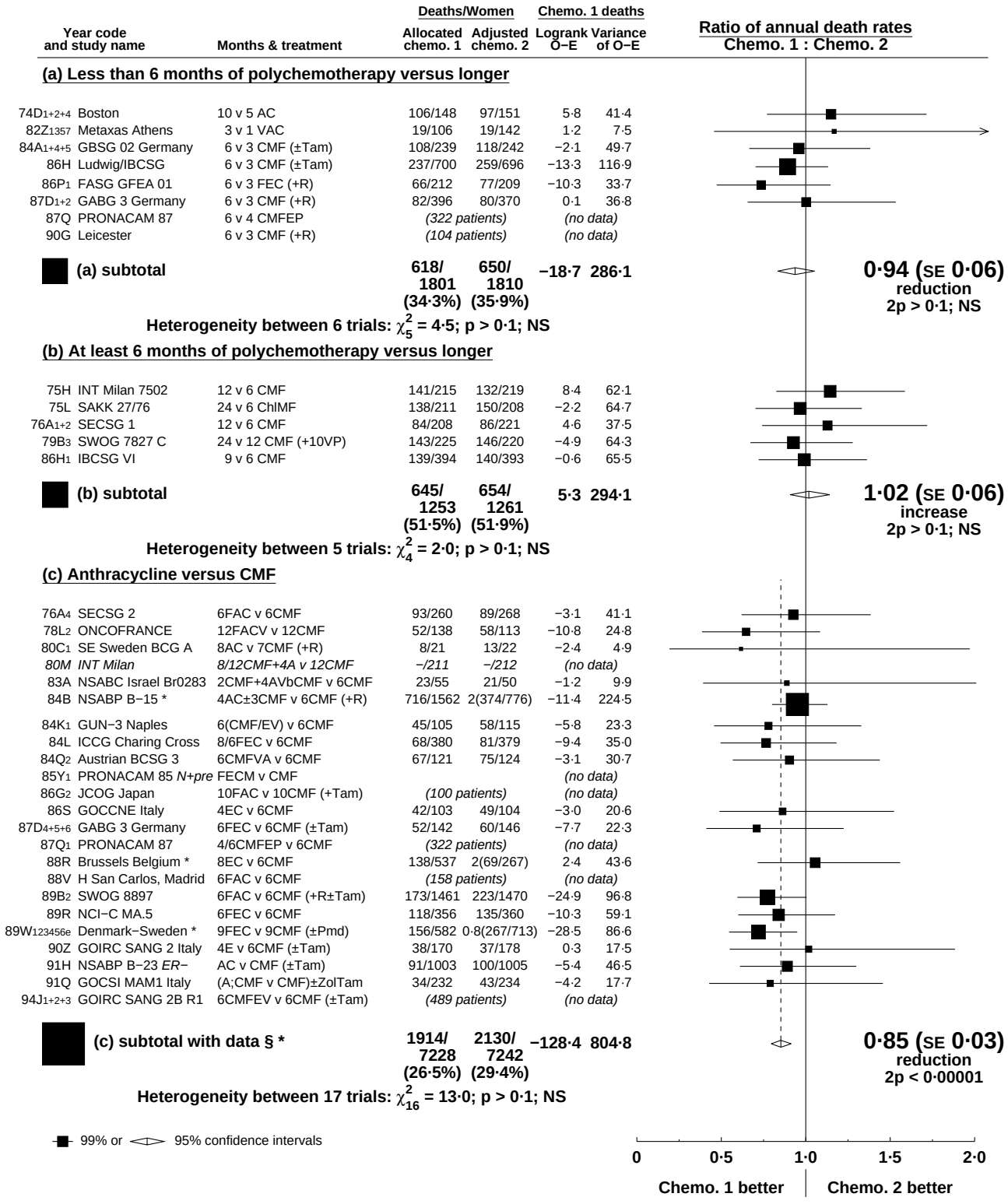
§ 1 trial with no data does not contribute to subtotals or to the overall total.

* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s).



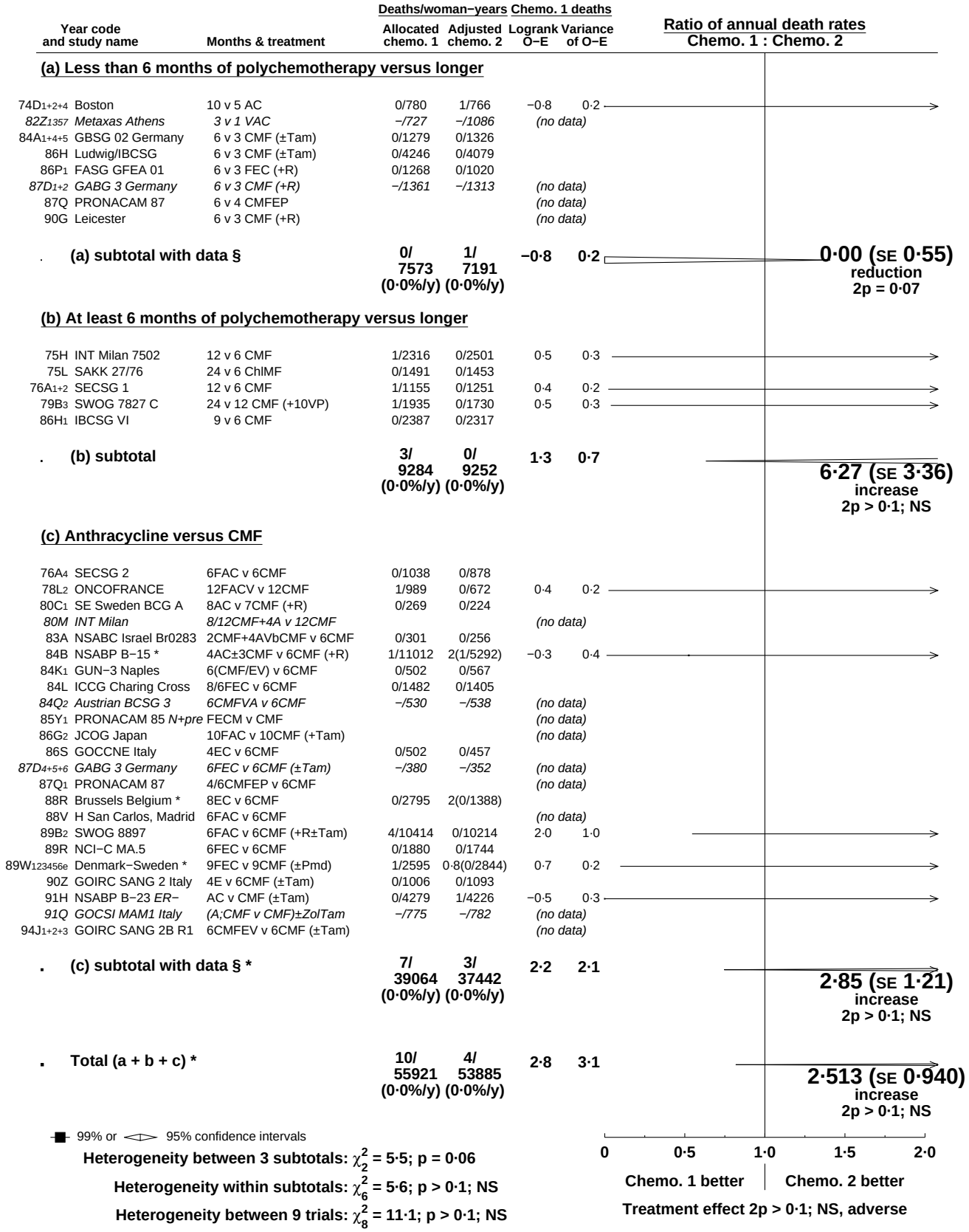
§ 1 trial with no data does not contribute to subtotals or to the overall total (allocated chemo. 1: 211; allocated chemo. 2: 212)

* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s).



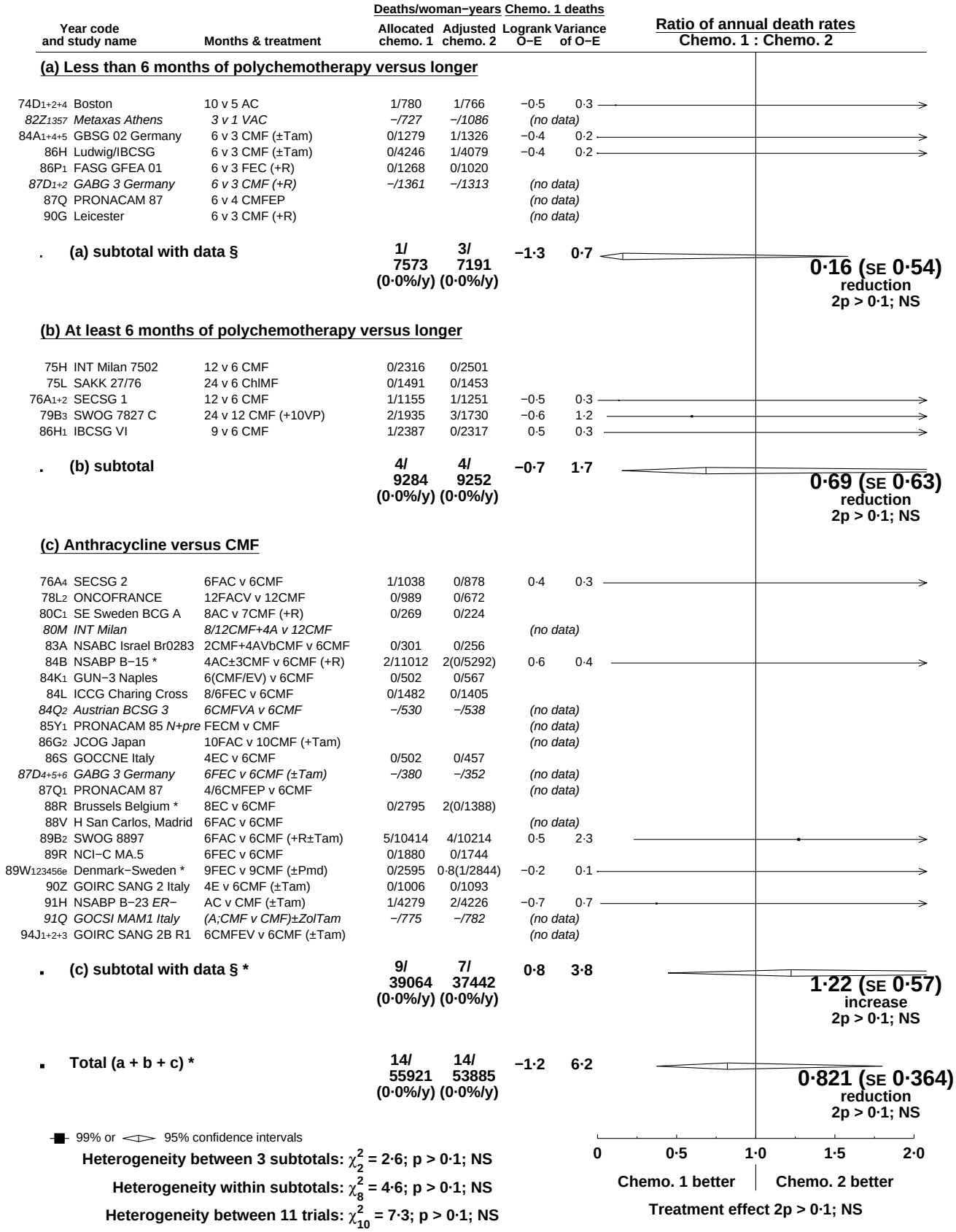
§ 1 trial with no data does not contribute to subtotals or to the overall total (allocated chemo. 1: 211; allocated chemo. 2: 212)

* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s).



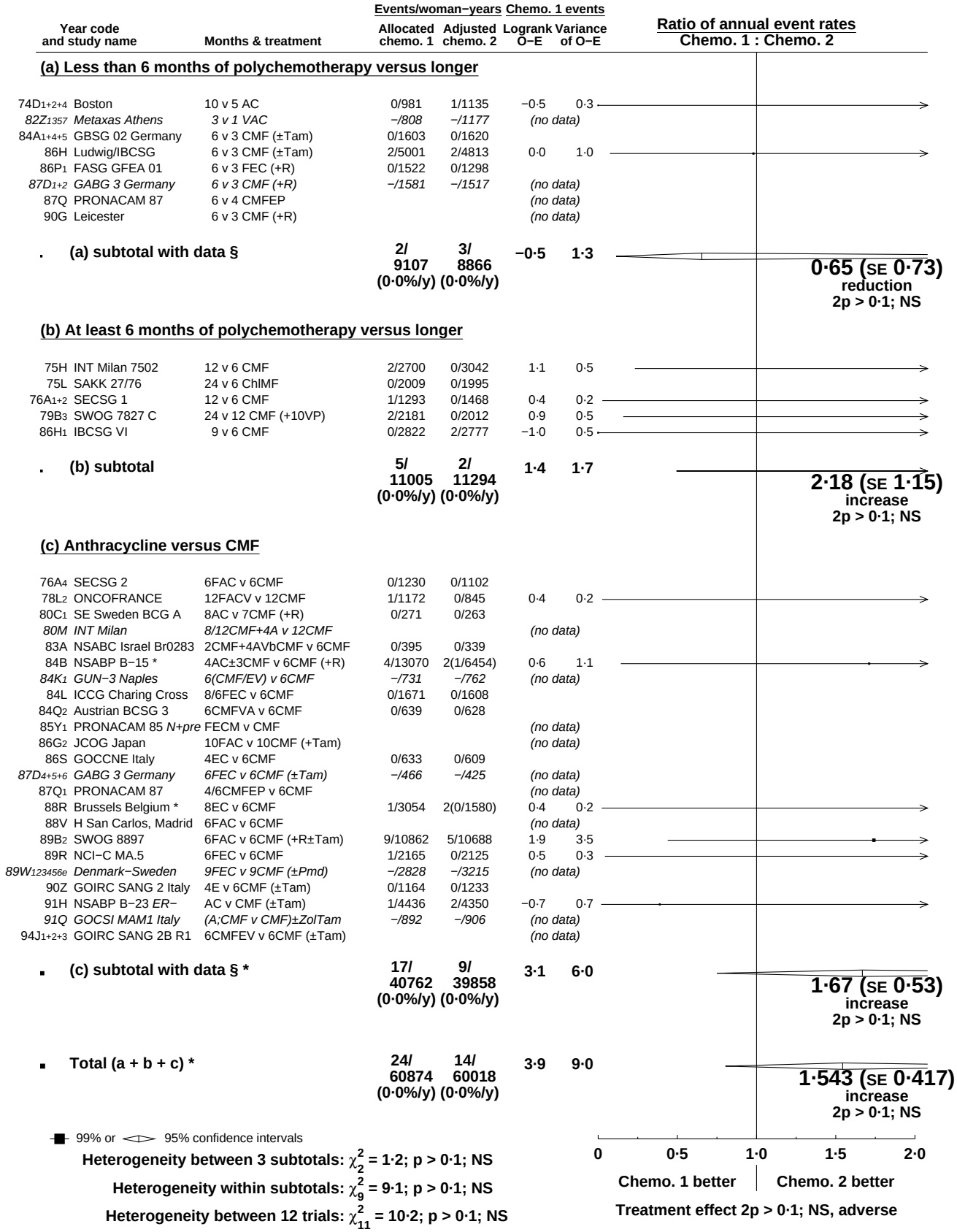
§ 6 trials with no data do not contribute to subtotals or to the overall total (allocated chemo. 1: 3773; allocated chemo. 2: 4071)

* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of deaths/women.



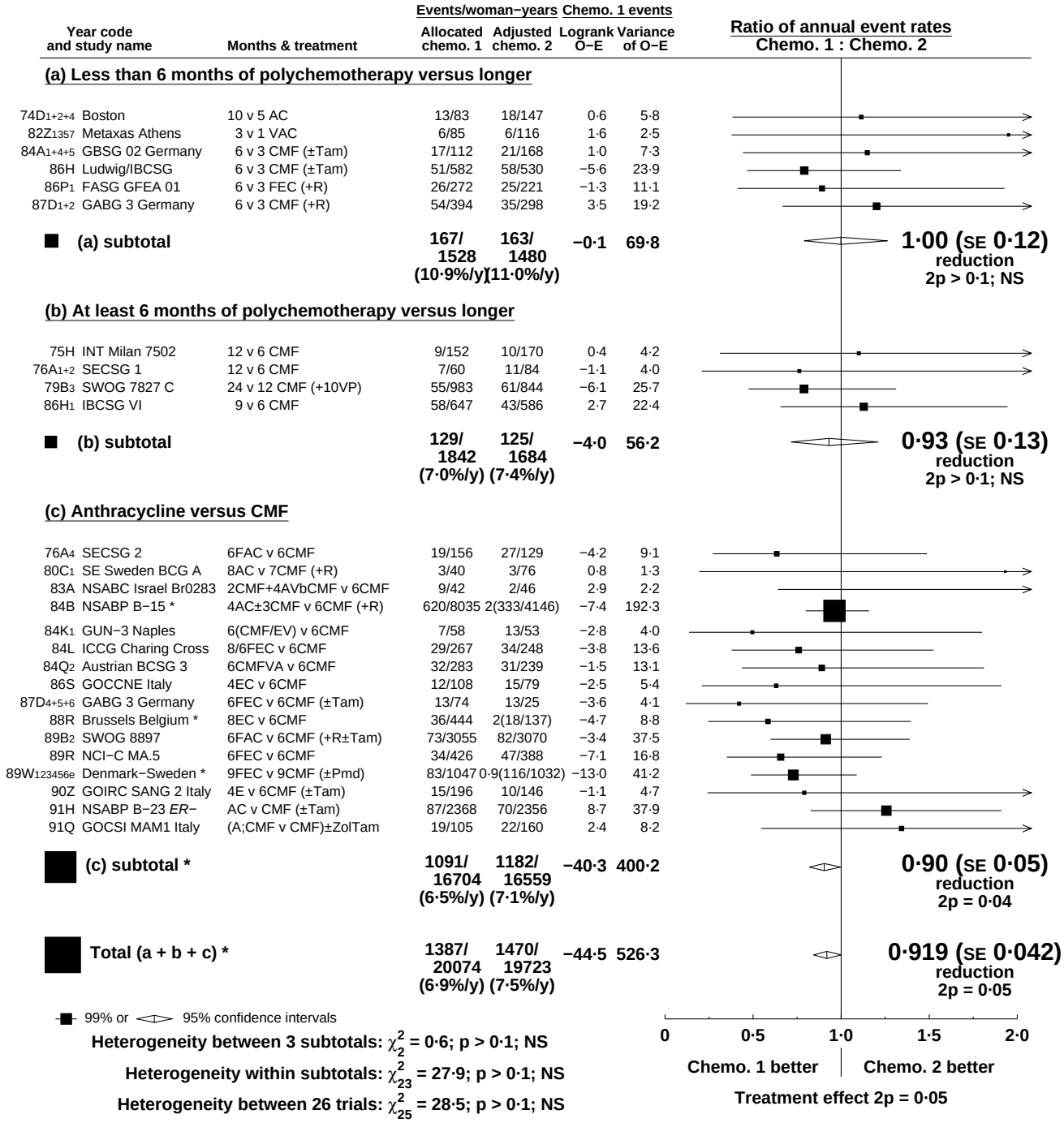
§ 6 trials with no data do not contribute to subtotals or to the overall total (allocated chemo. 1: 3773; allocated chemo. 2: 4071)

* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of deaths/women.

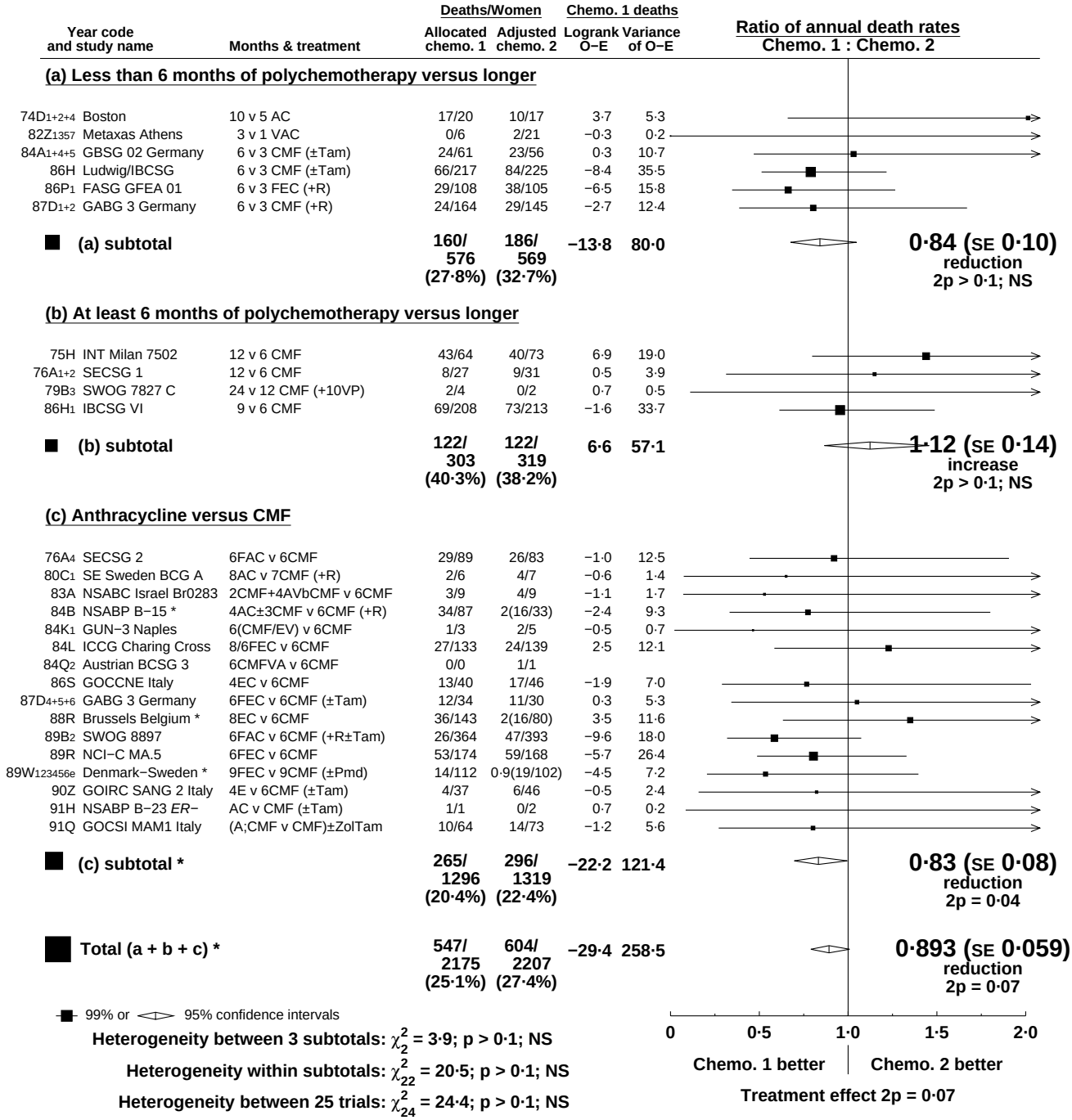


§ 7 trials with no data do not contribute to subtotals or to the overall total (allocated chemo. 1: 7306; allocated chemo. 2: 8002)

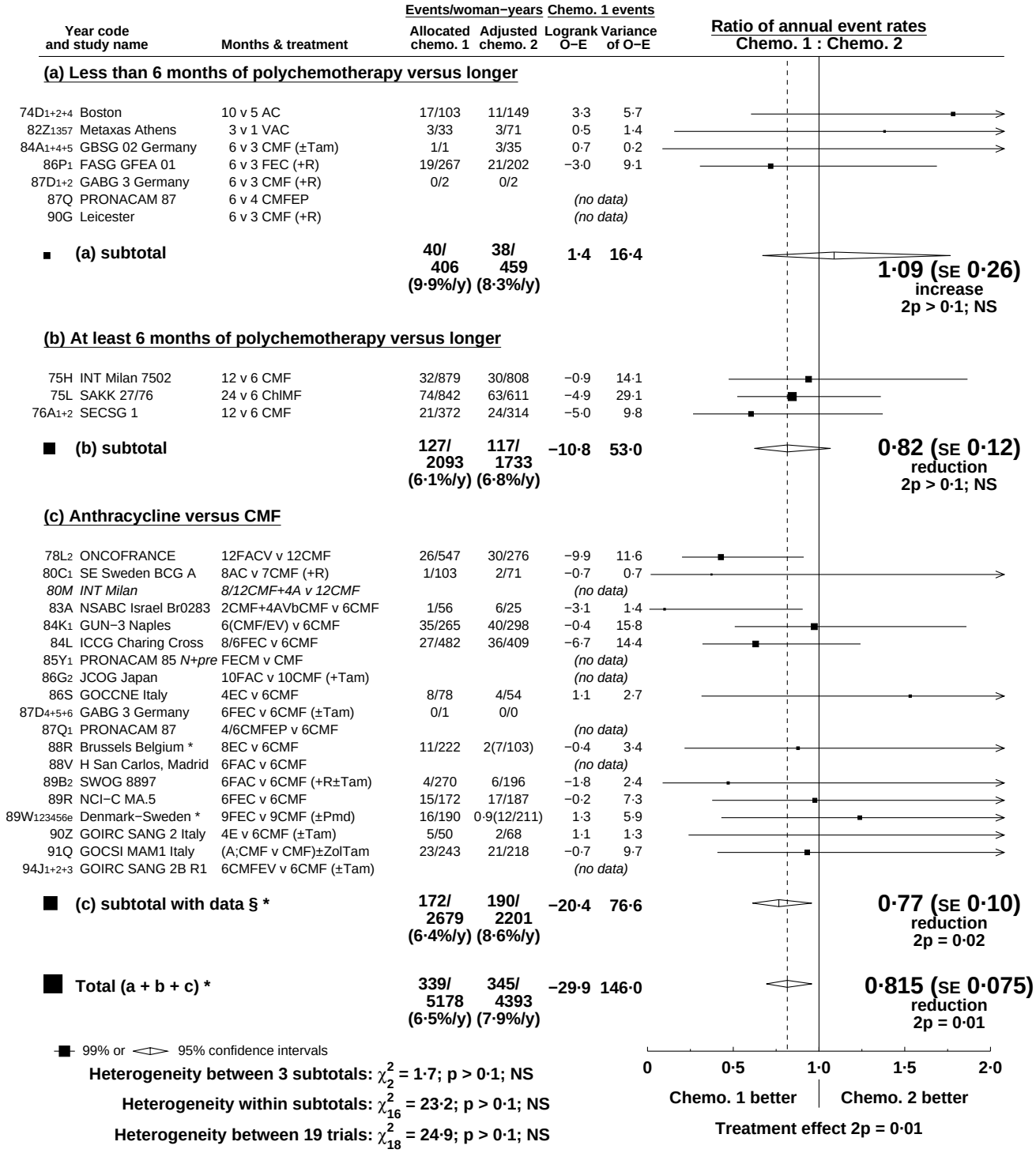
* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of events/women.



* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of events/women.



* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of deaths/women.



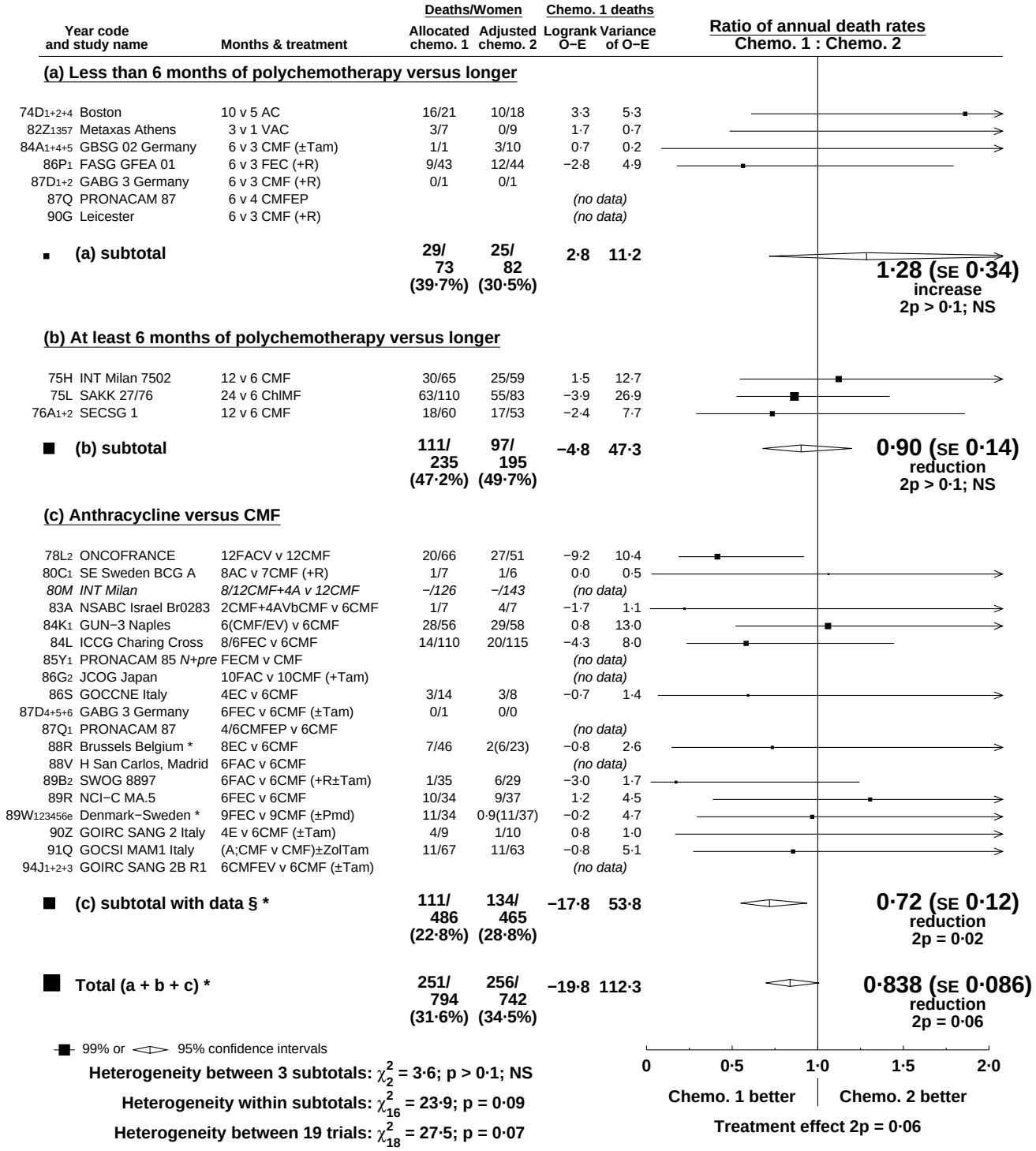
Heterogeneity between 3 subtotals: $\chi^2_2 = 1{\cdot}7$; p > 0·1; NS

Heterogeneity within subtotals: $\chi^2_{16} = 23{\cdot}2$; p > 0·1; NS

Heterogeneity between 19 trials: $\chi^2_{18} = 24{\cdot}9$; p > 0·1; NS

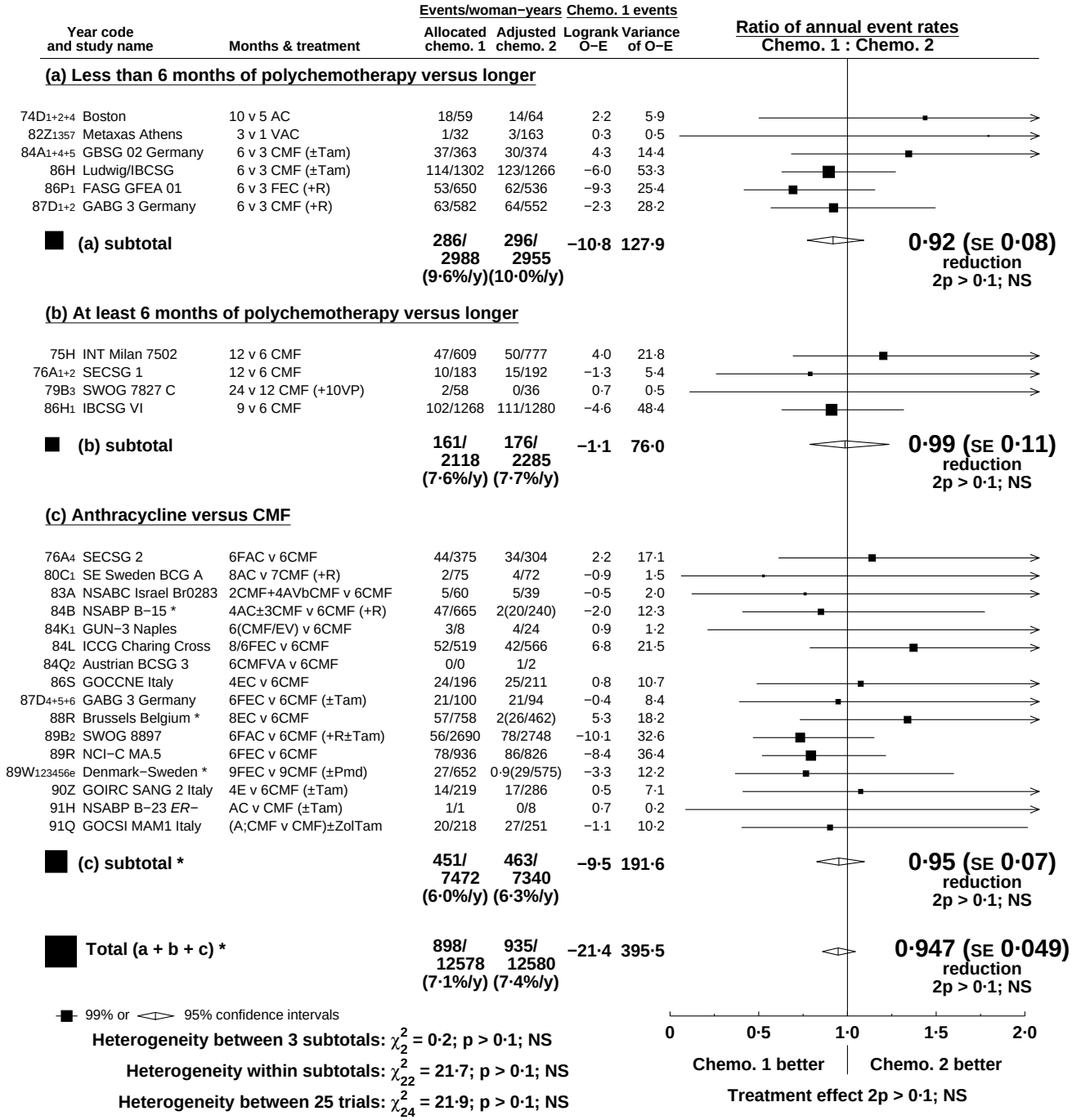
§ 1 trial with no data does not contribute to subtotals or to the overall total.

* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of events/women.

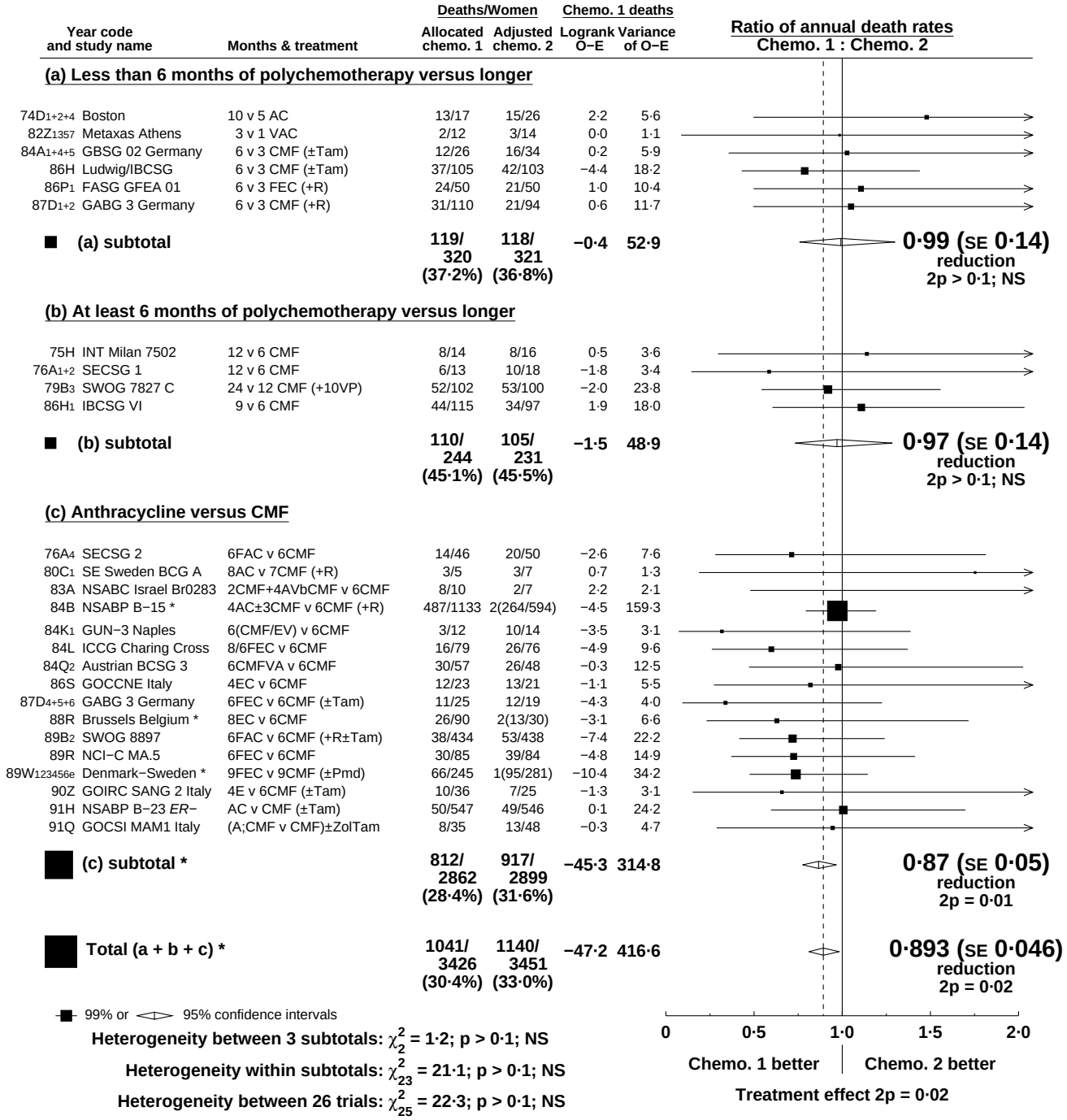


§ 1 trial with no data does not contribute to subtotals or to the overall total (allocated chemo. 1: 126; allocated chemo. 2: 143)

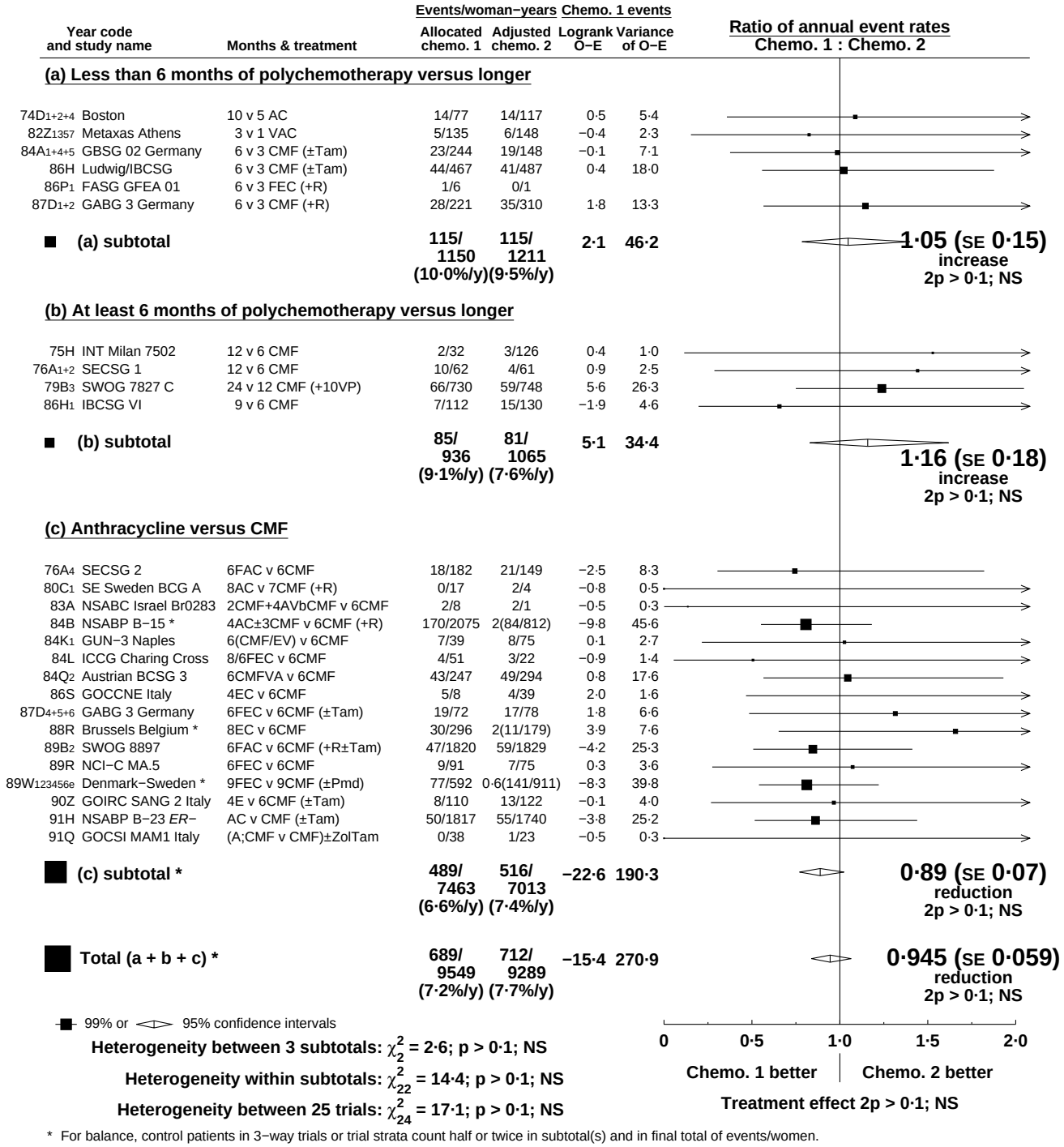
* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of deaths/women.



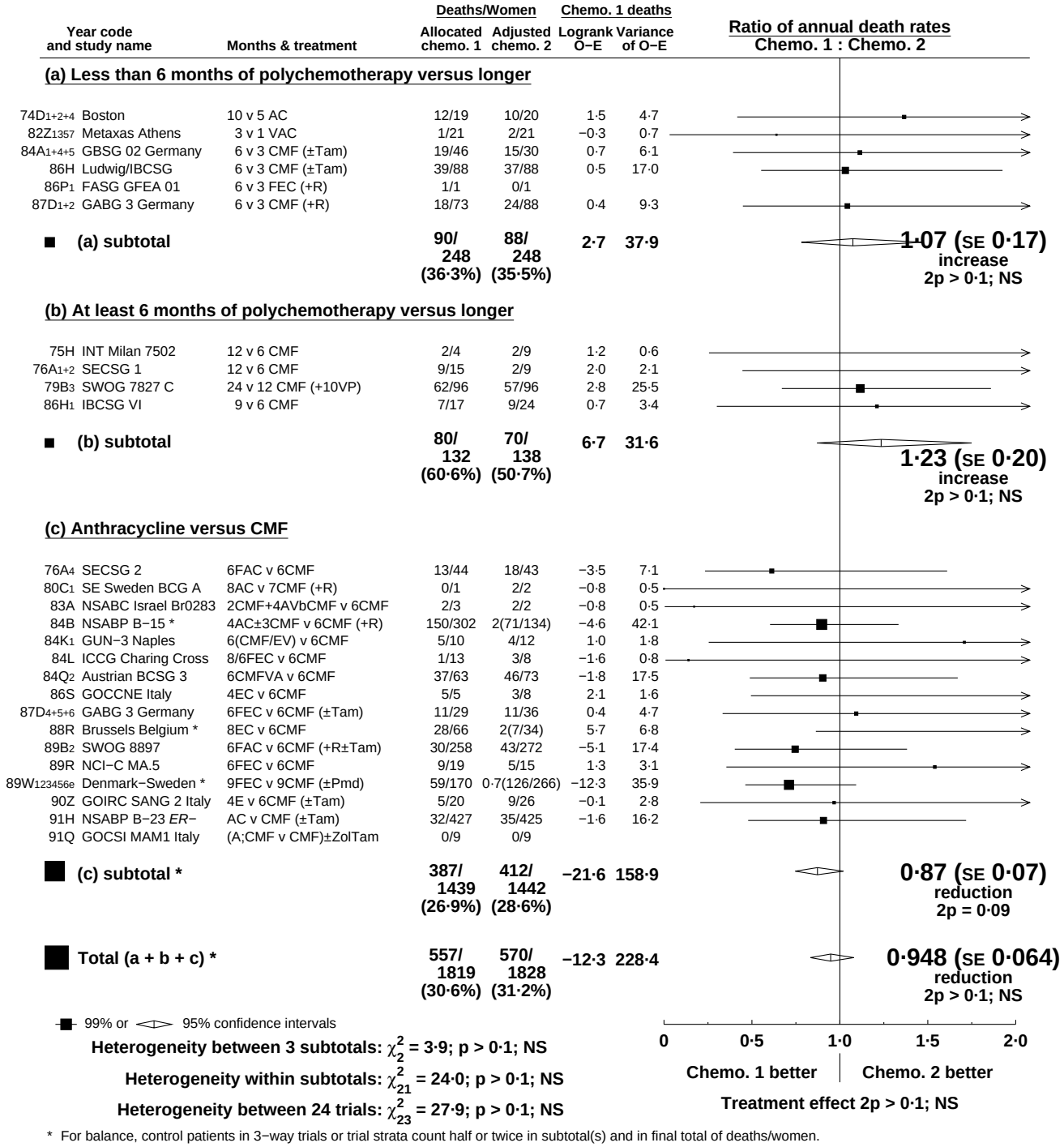
* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of events/women.



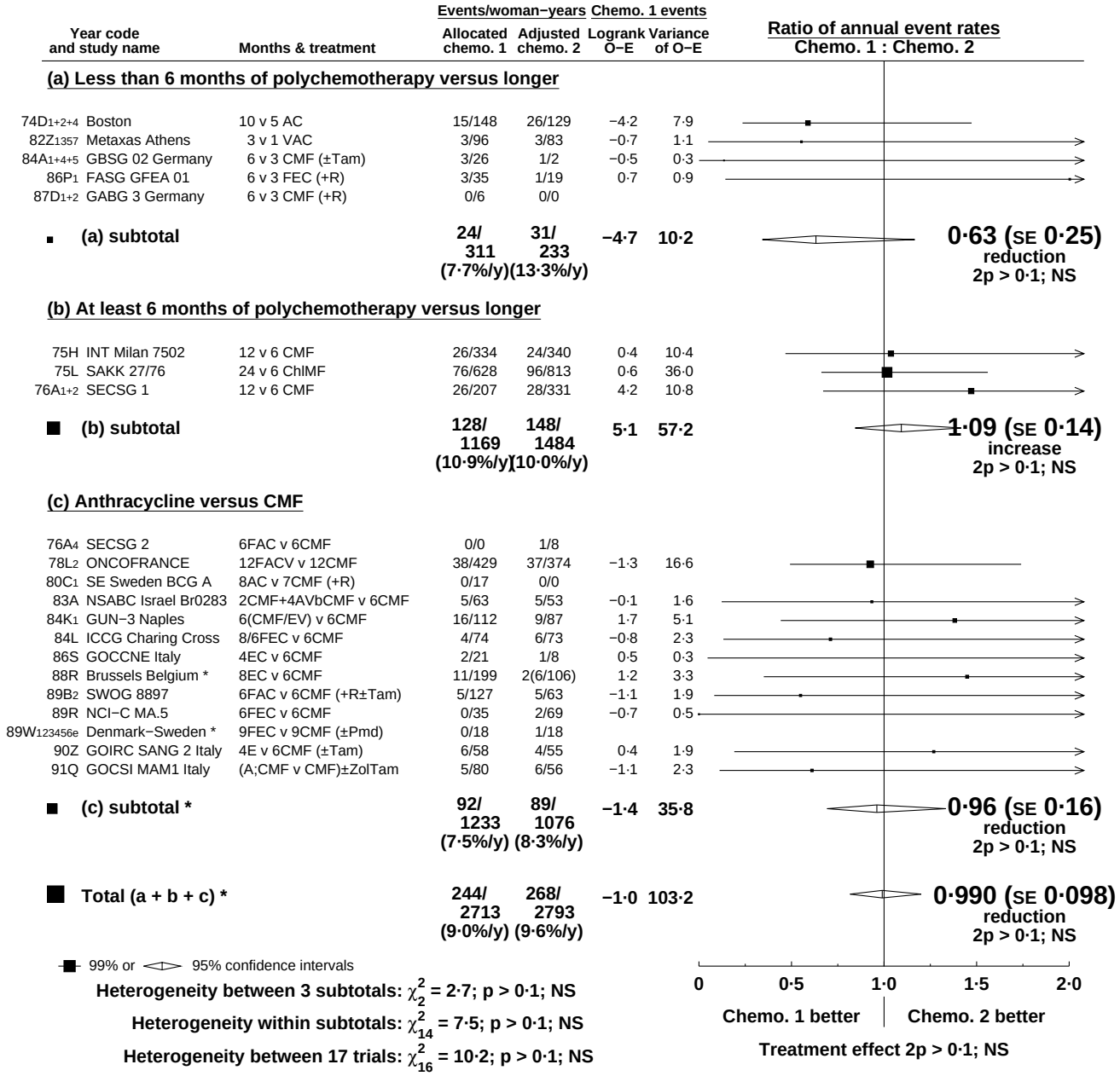
* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of deaths/women.



* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of events/women.



* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of deaths/women.



* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of events/women.

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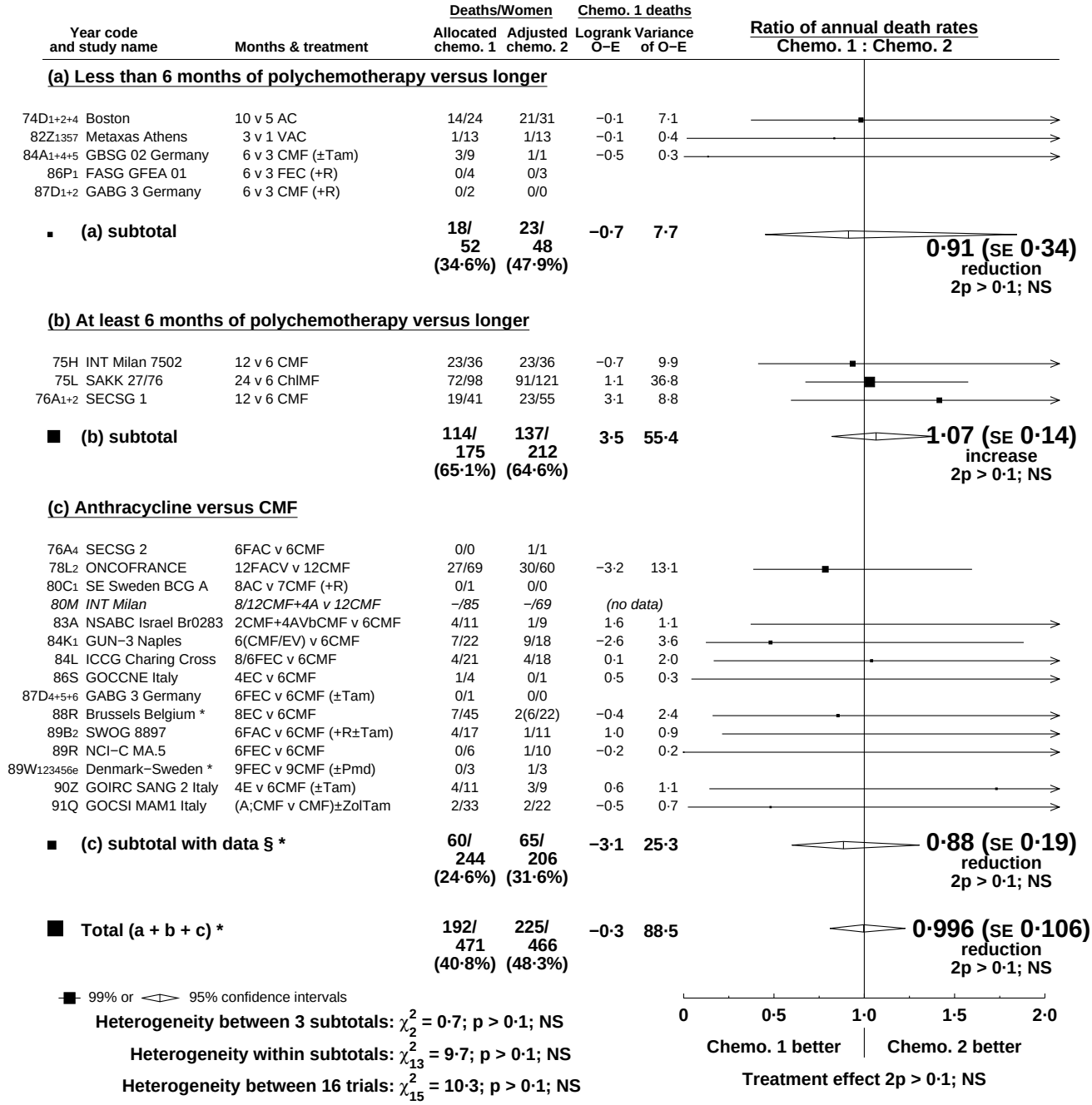
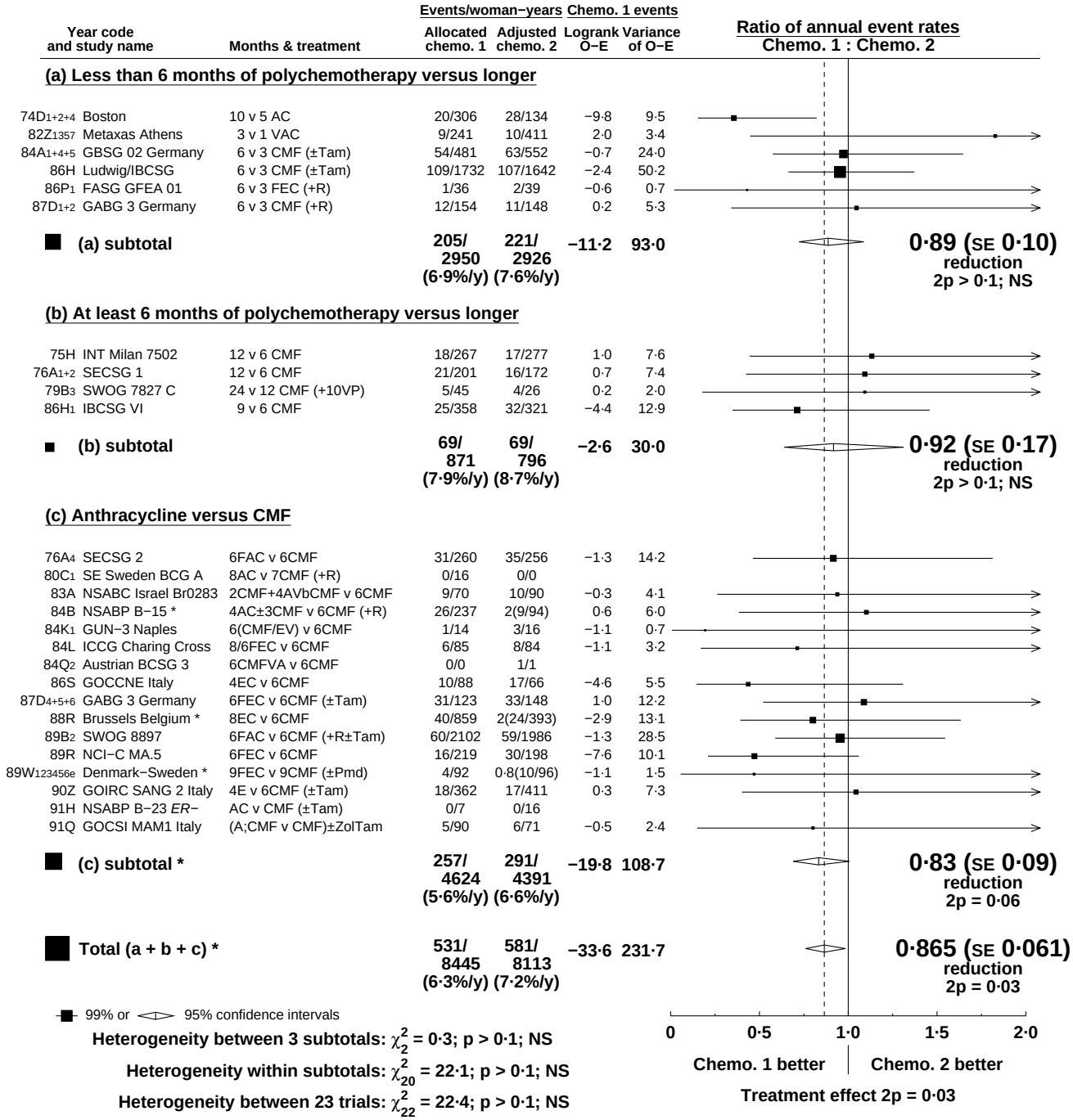
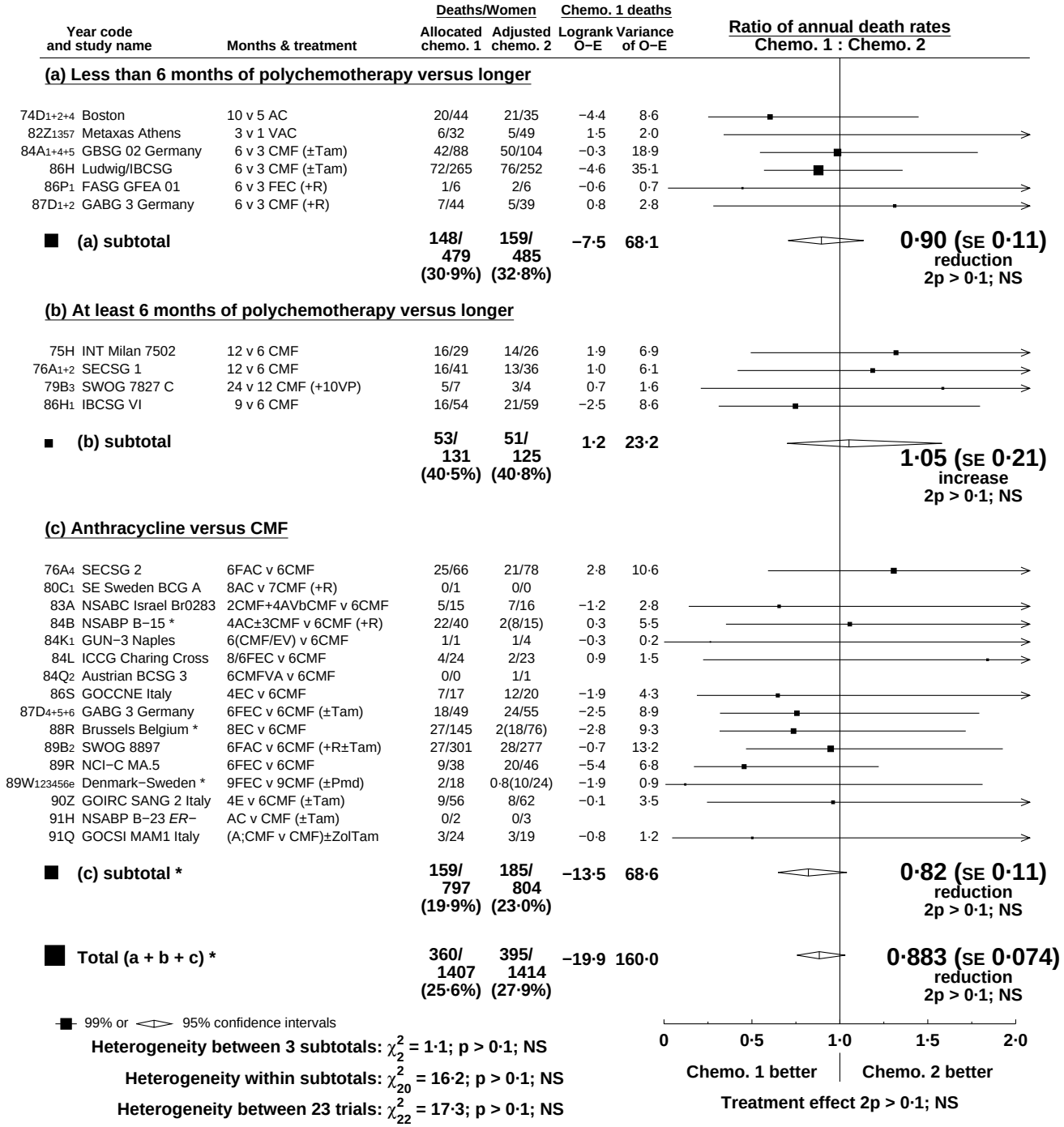


§ 1 trial with no data does not contribute to subtotals or to the overall total (allocated chemo. 1: 85; allocated chemo. 2: 69)

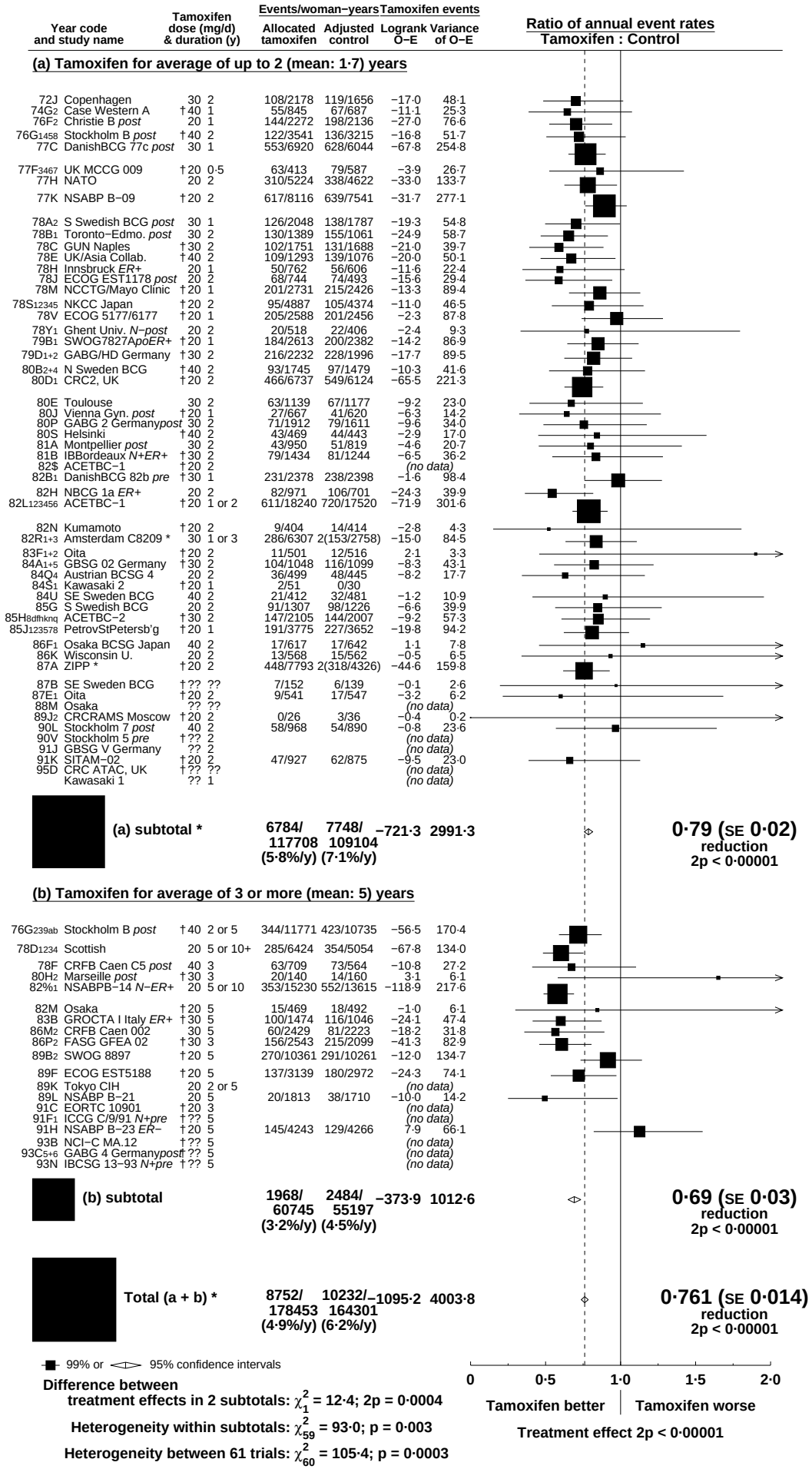
* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of deaths/women.



* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of events/women.

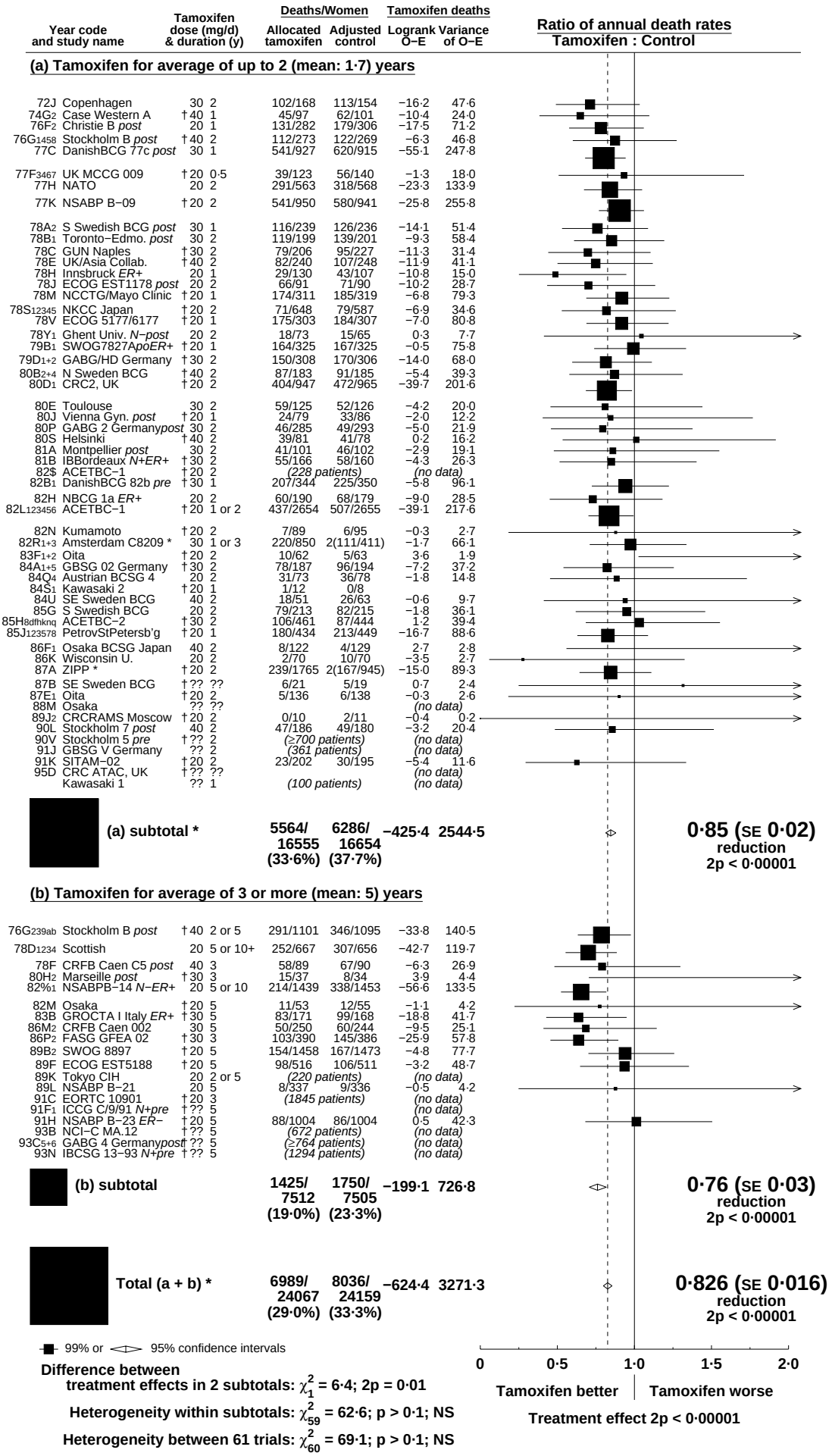


* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of deaths/women.



* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of events/women.

† Tamoxifen plus chemotherapy *versus* same chemotherapy alone



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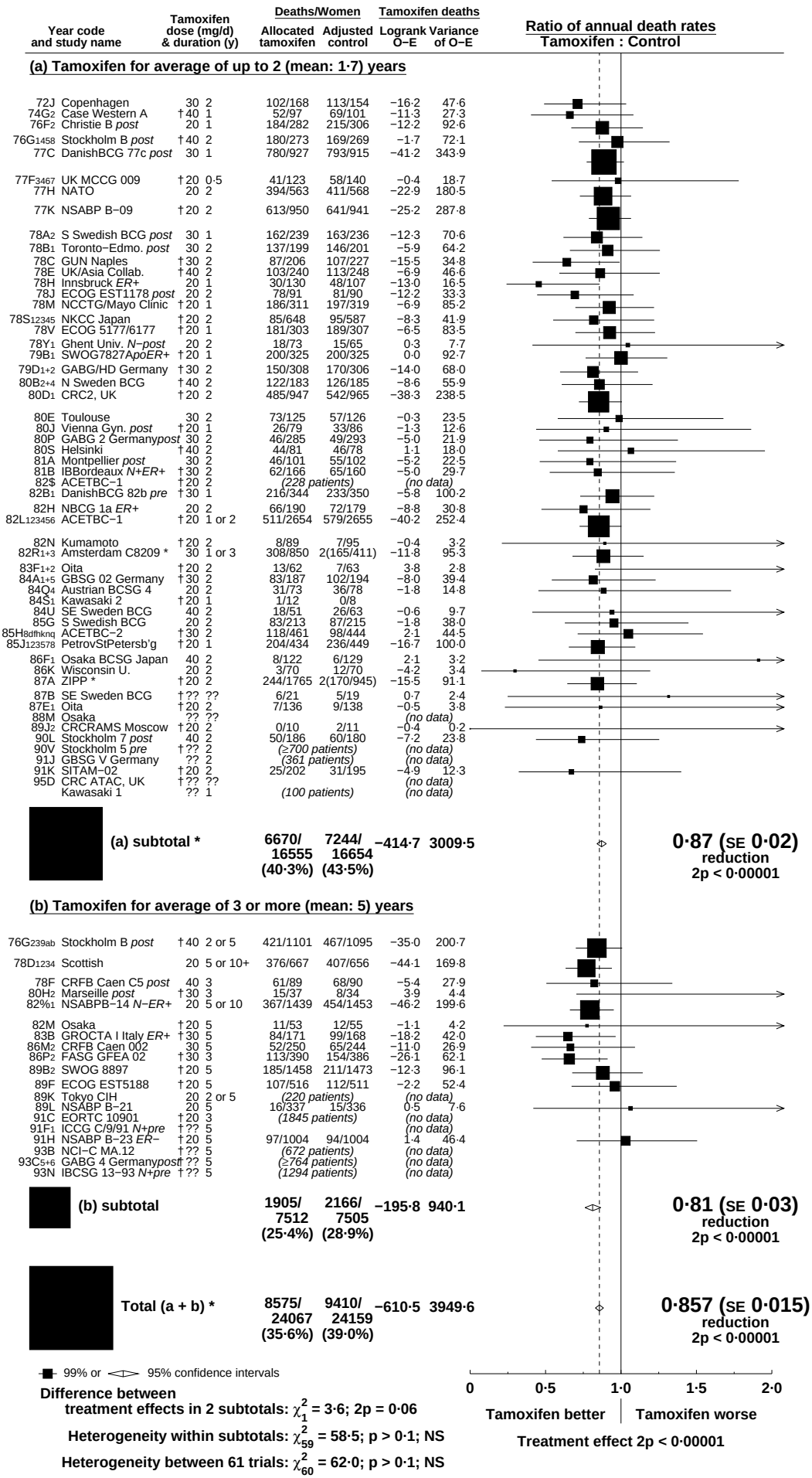
† Tamoxifen plus chemotherapy *versus* same chemotherapy alone



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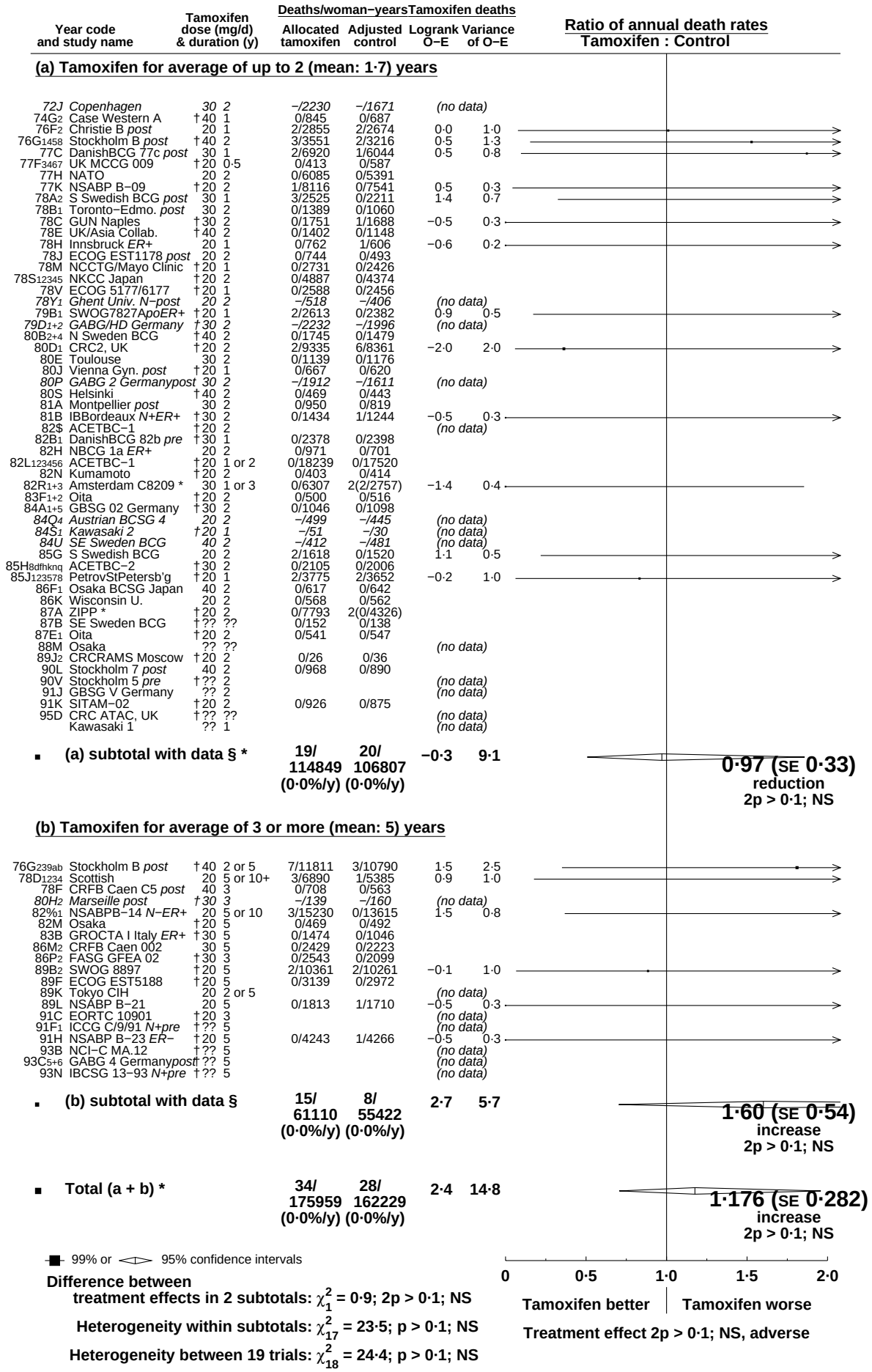
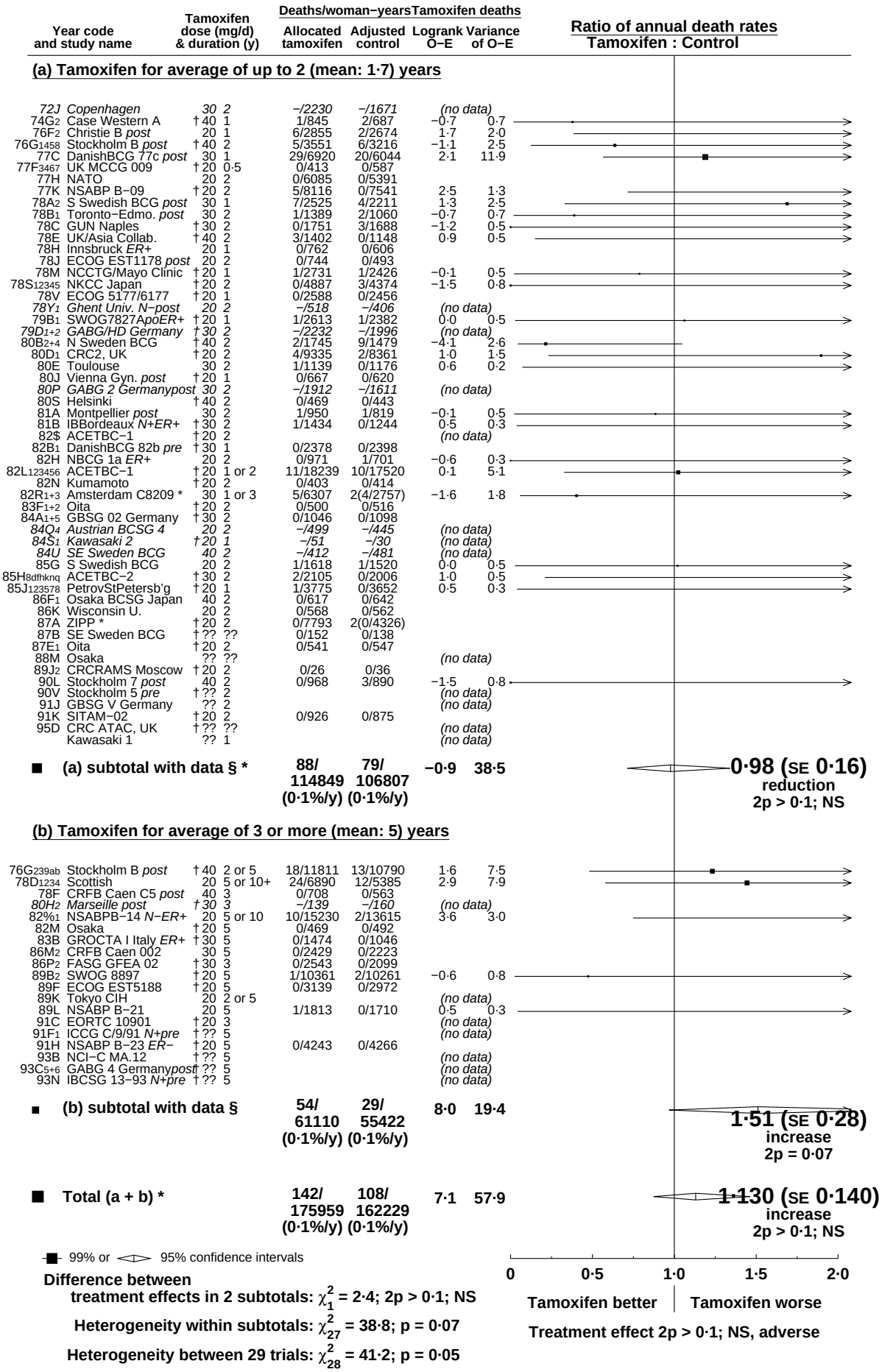
† Tamoxifen plus chemotherapy *versus* same chemotherapy alone



§ 8 trials with no data do not contribute to subtotals or to the overall total (allocated tamoxifen: 7993; allocated control: 6800)

* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of deaths/women.

† Tamoxifen plus chemotherapy *versus* same chemotherapy alone



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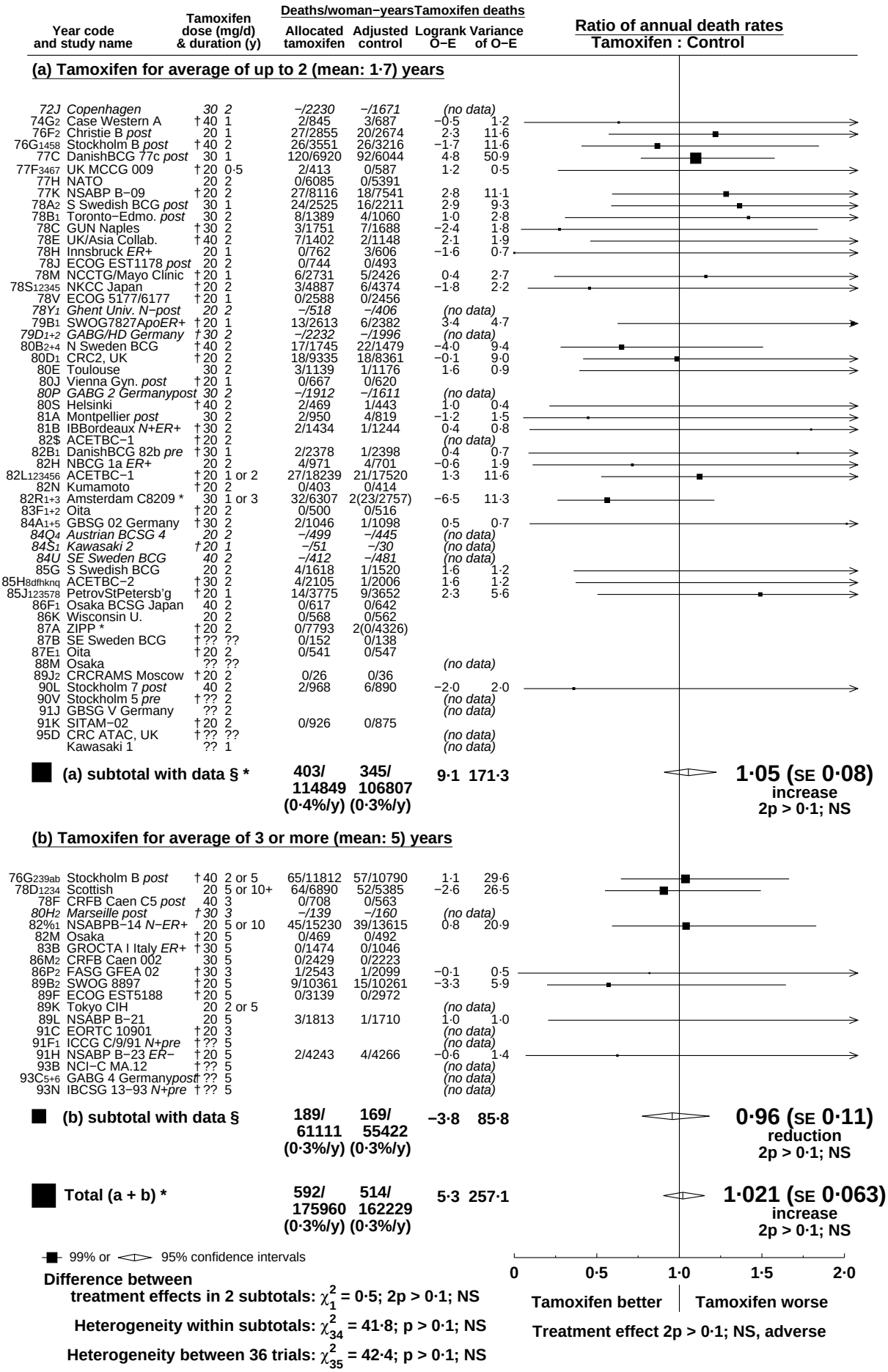

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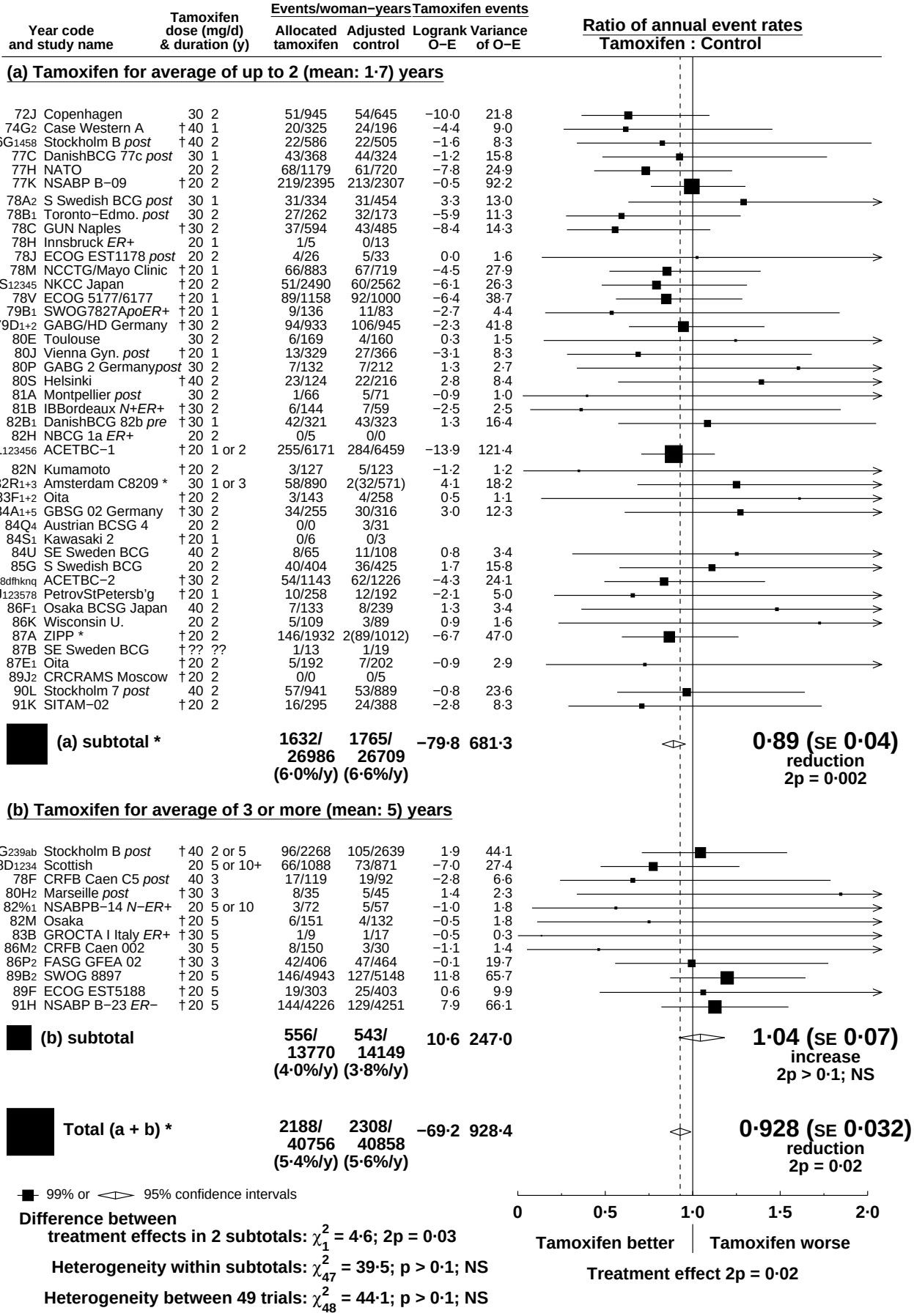
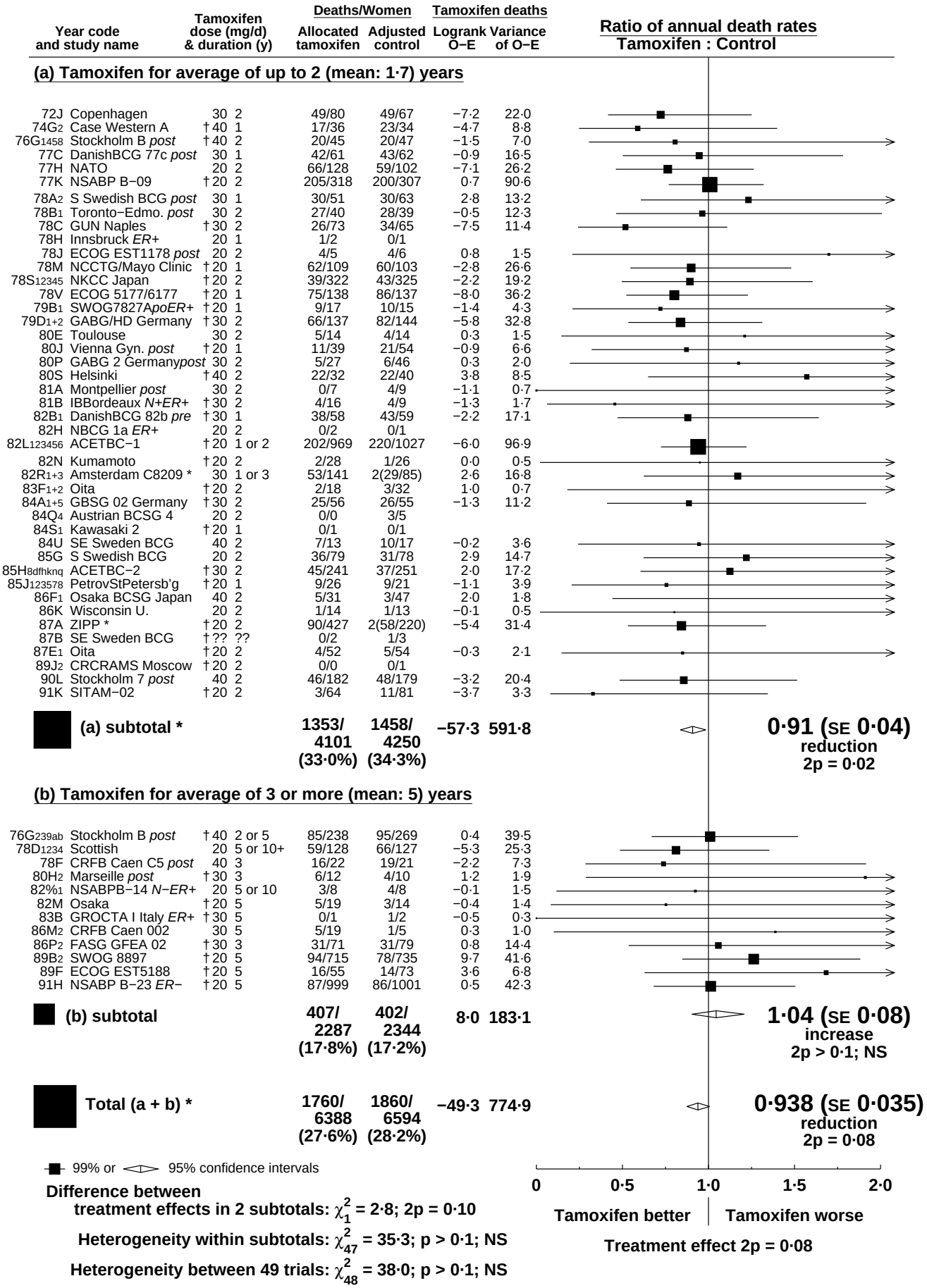
† Tamoxifen plus chemotherapy *versus* same chemotherapy alone



* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of events/women.

† Tamoxifen plus chemotherapy *versus* same chemotherapy alone



* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of deaths/women.

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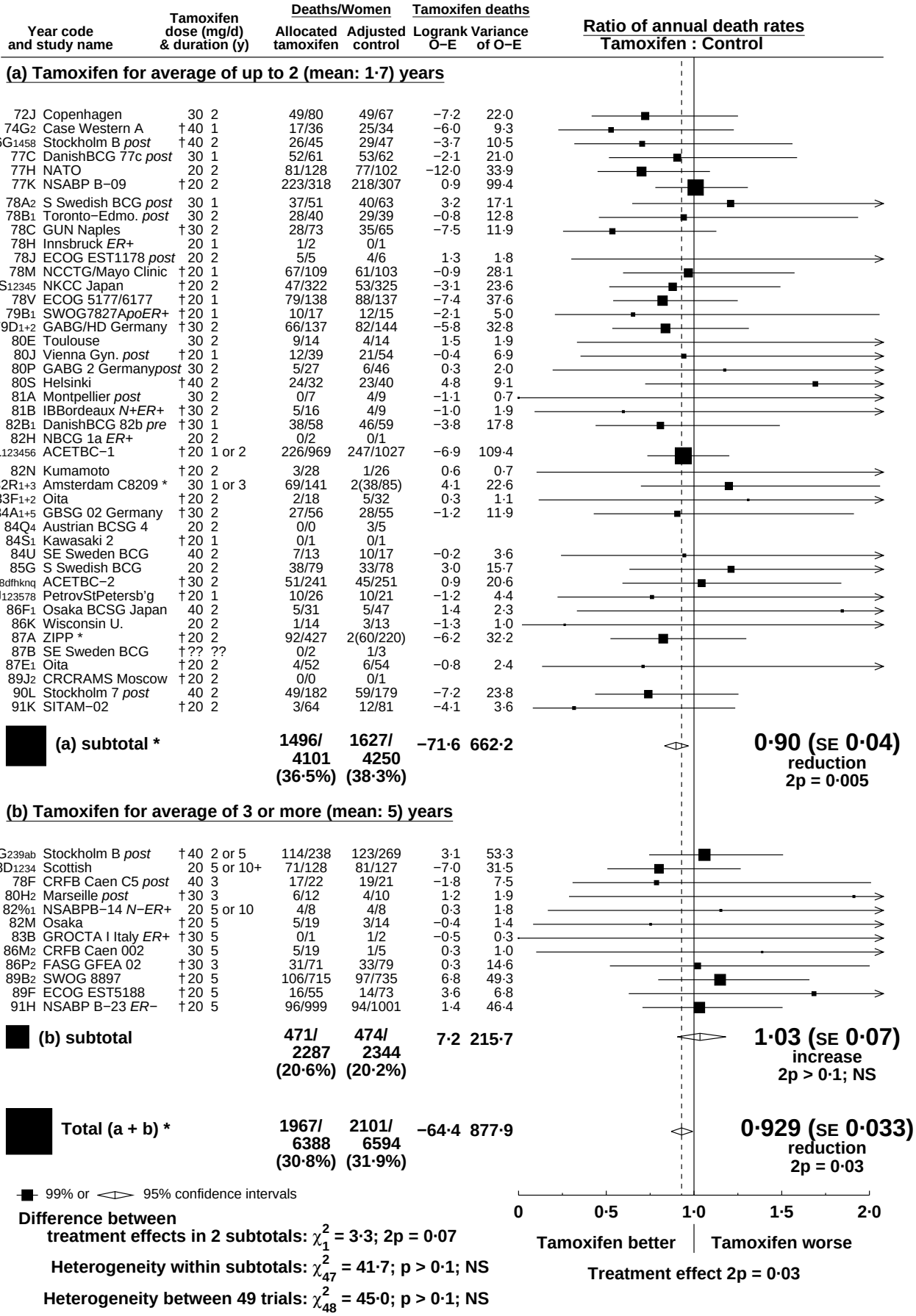

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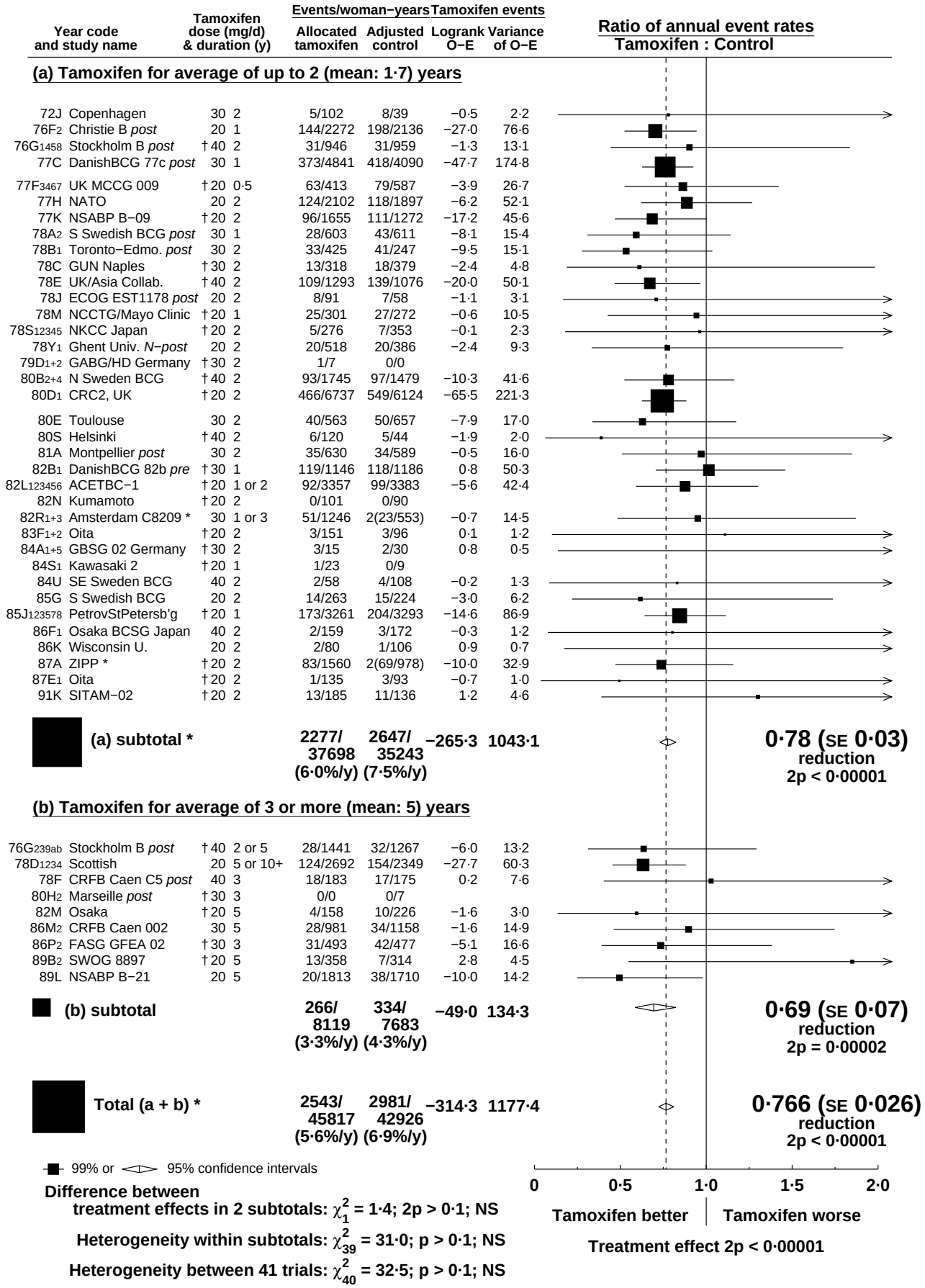

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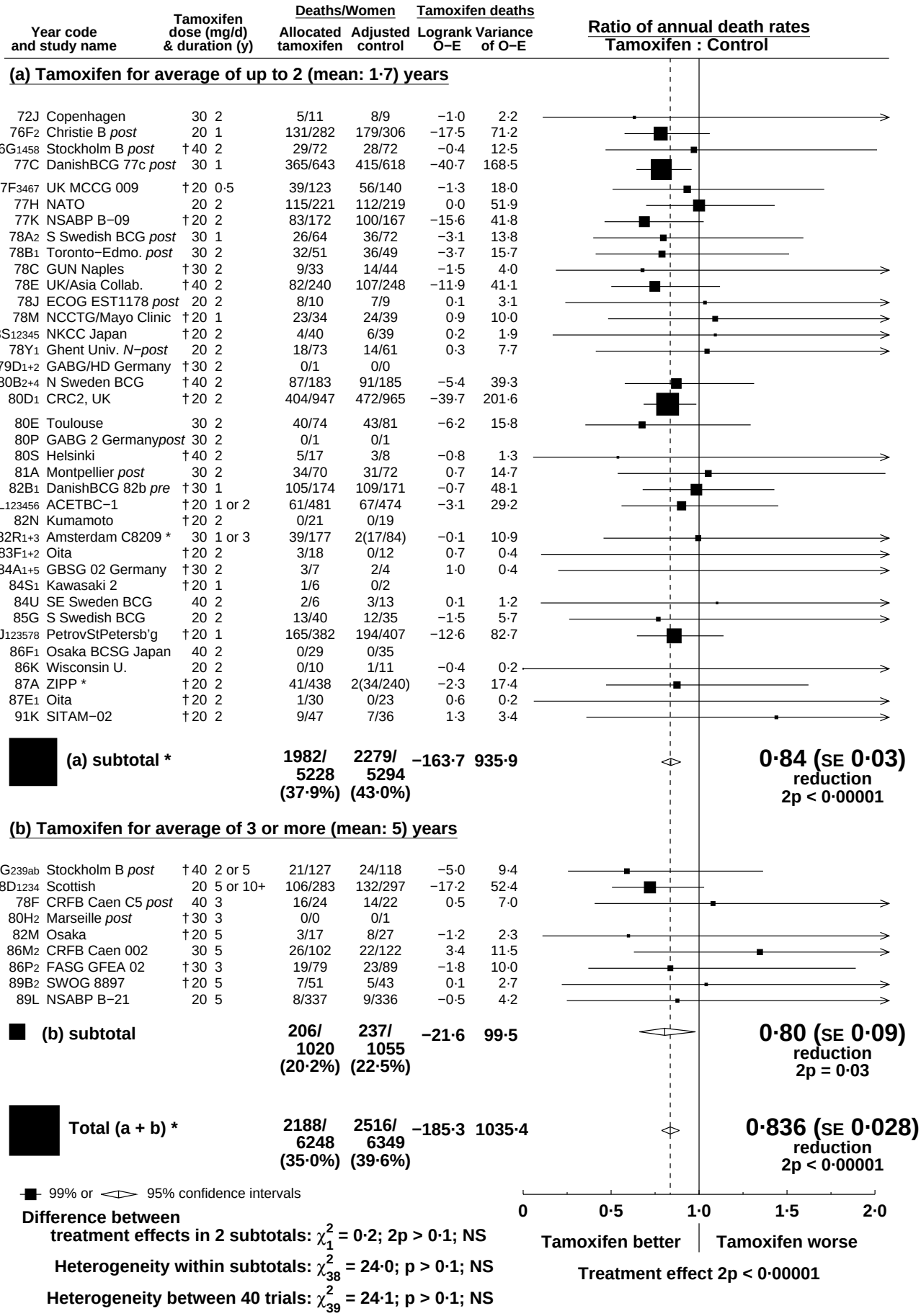

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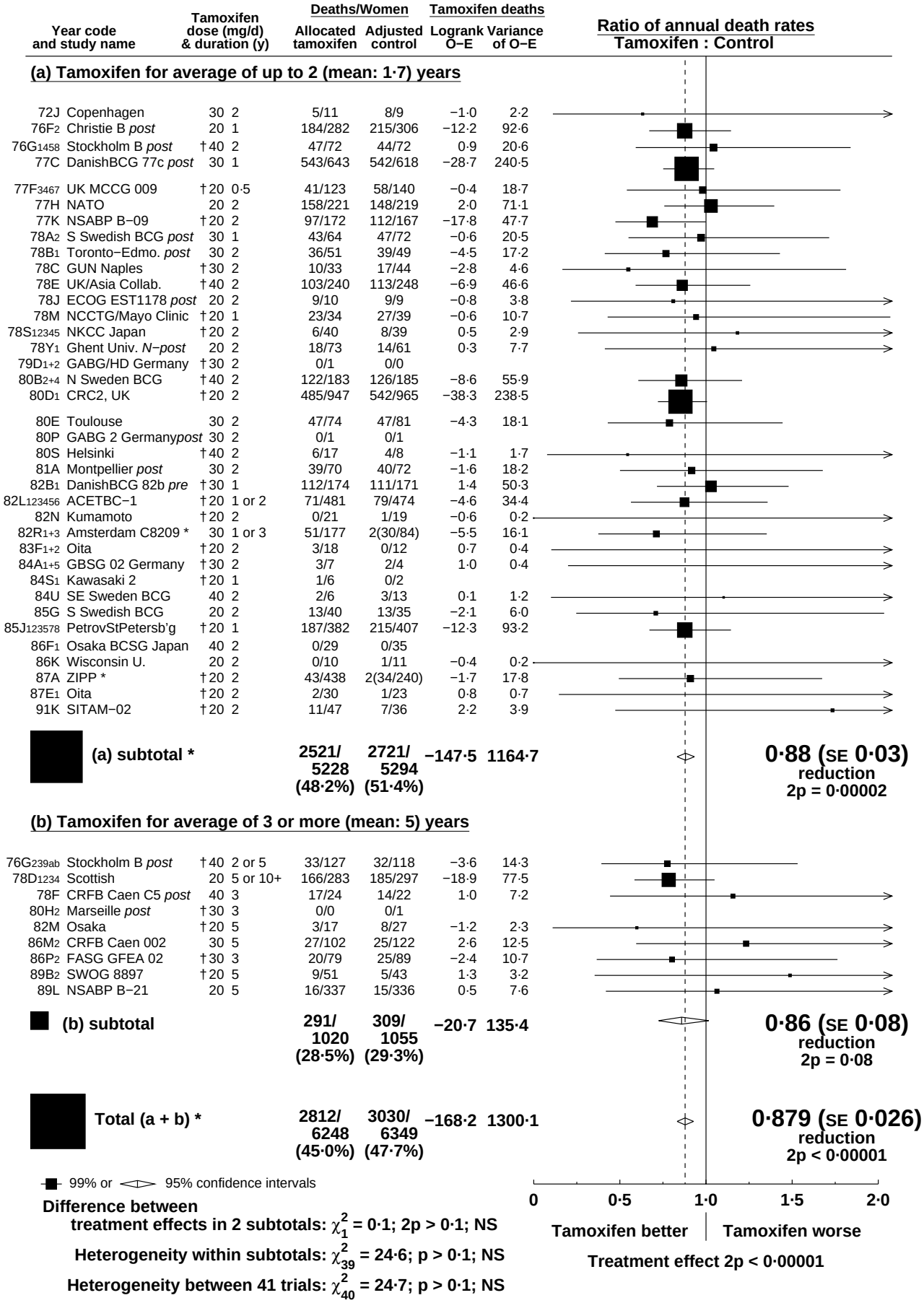

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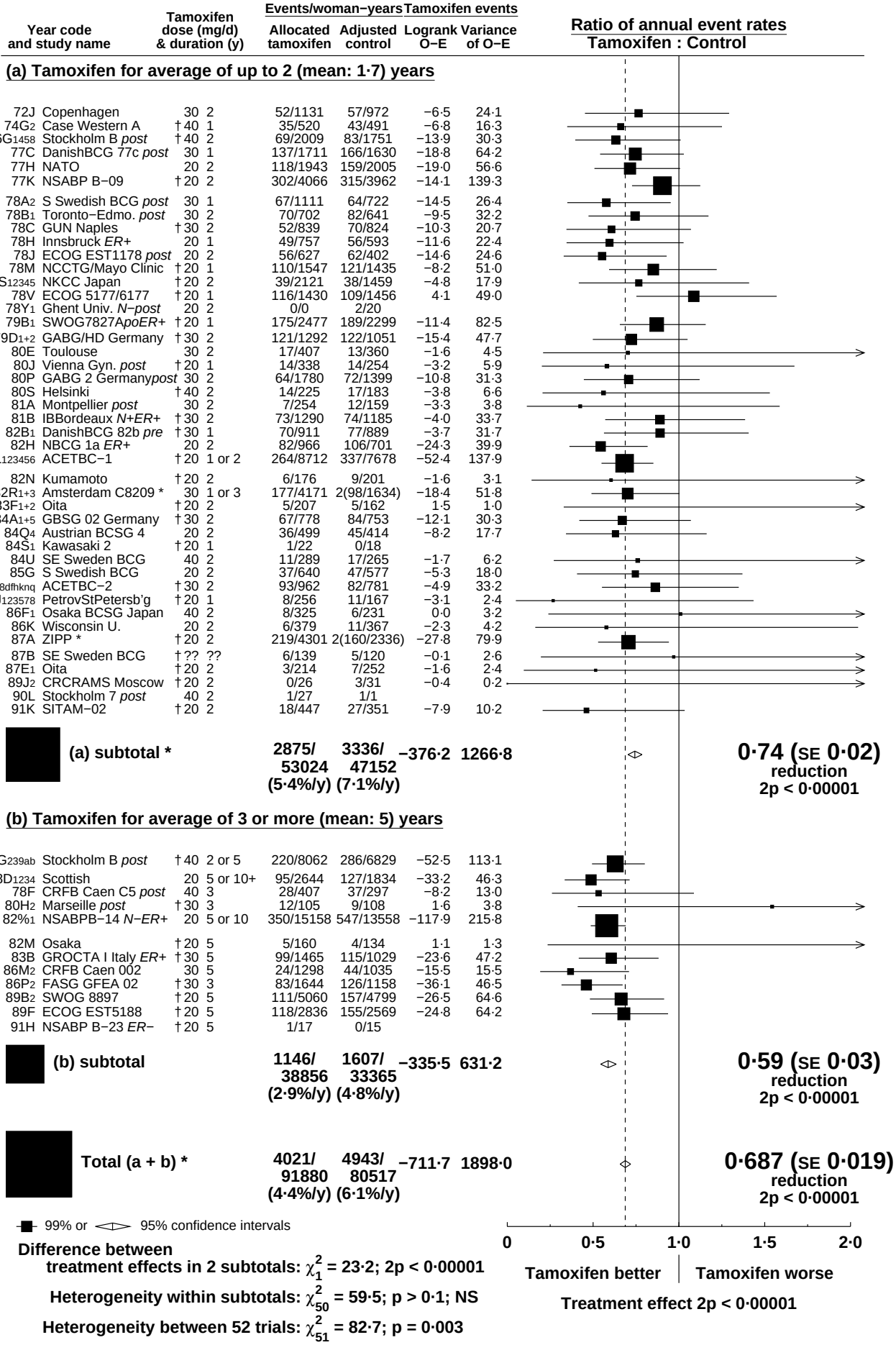

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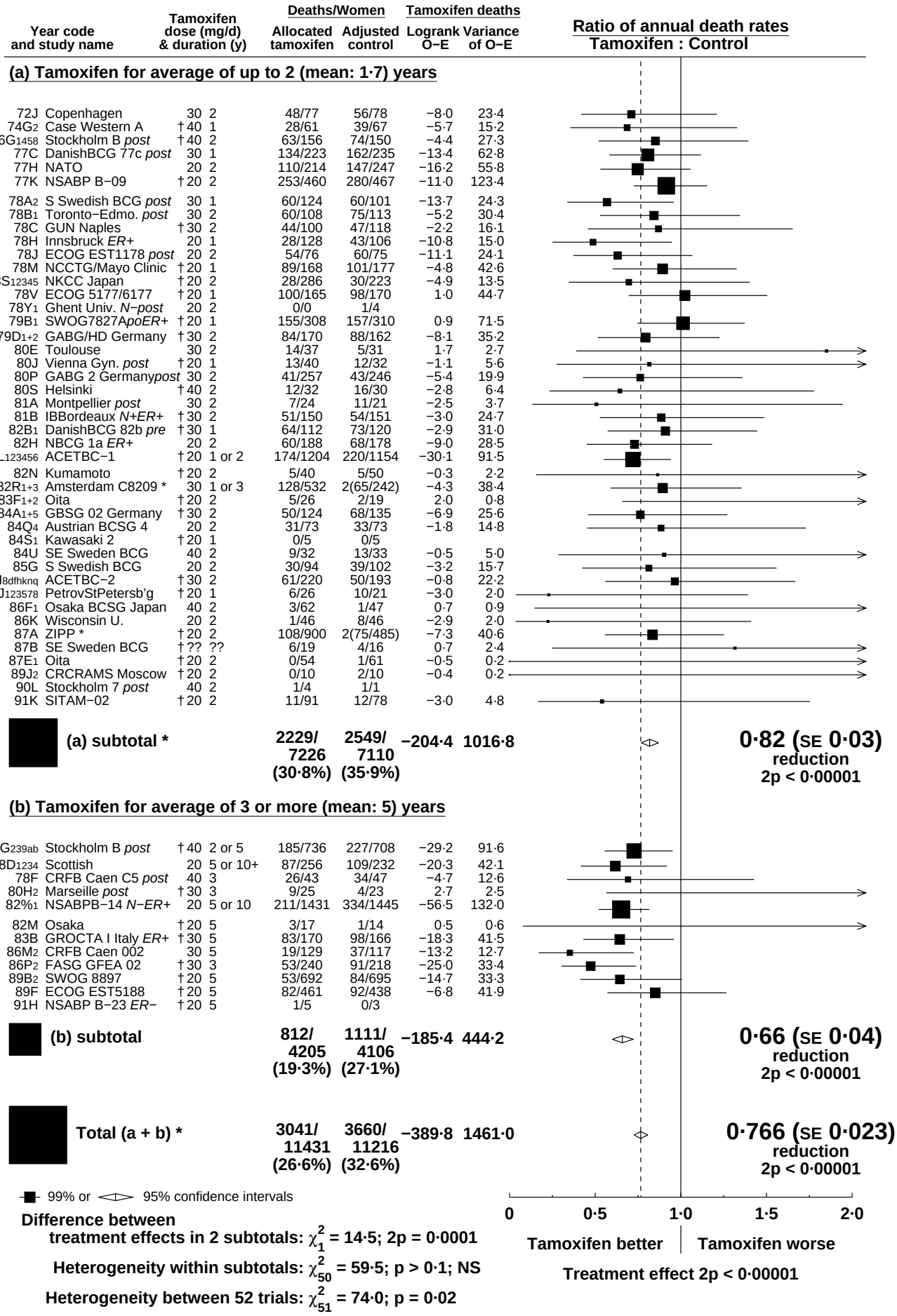

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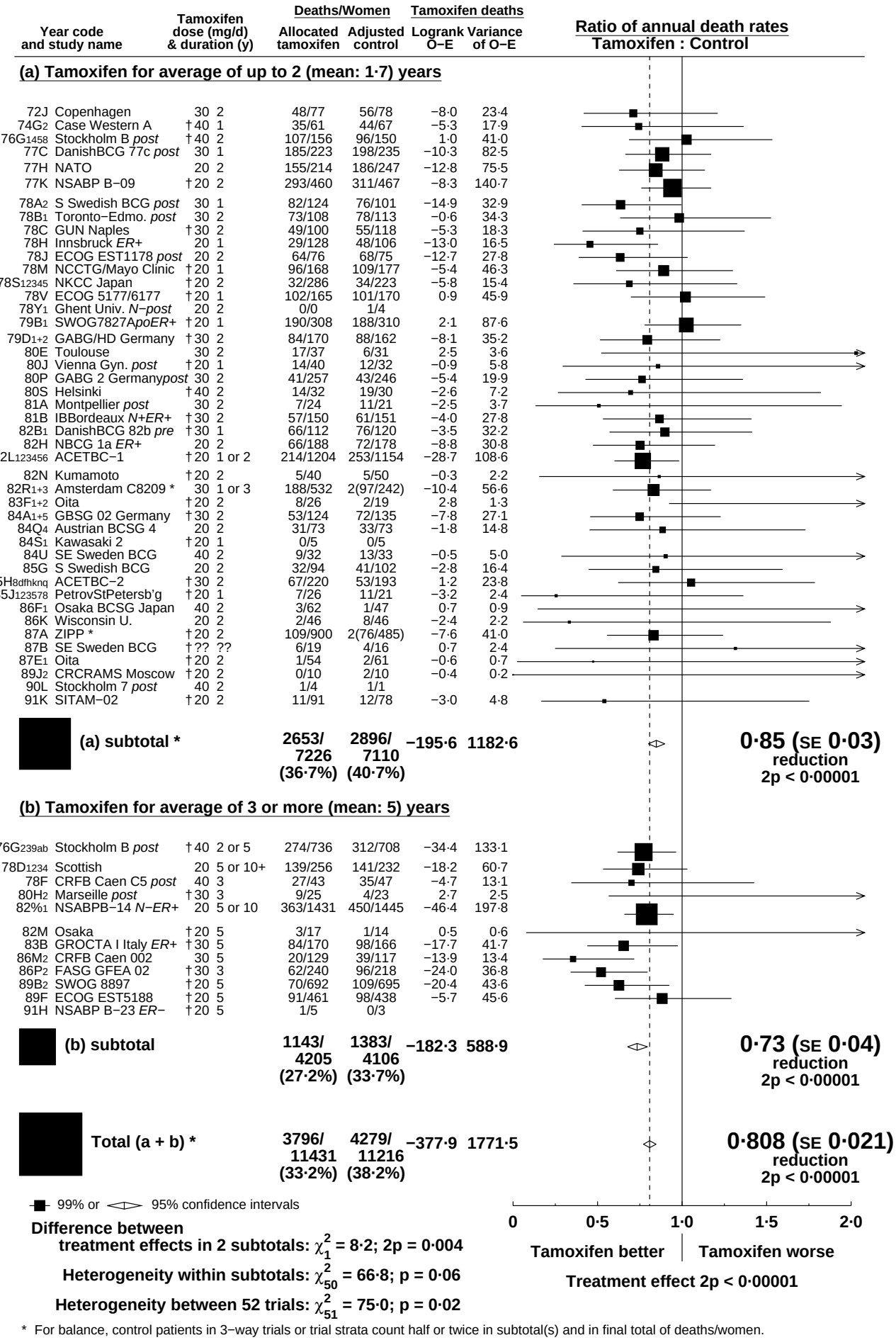

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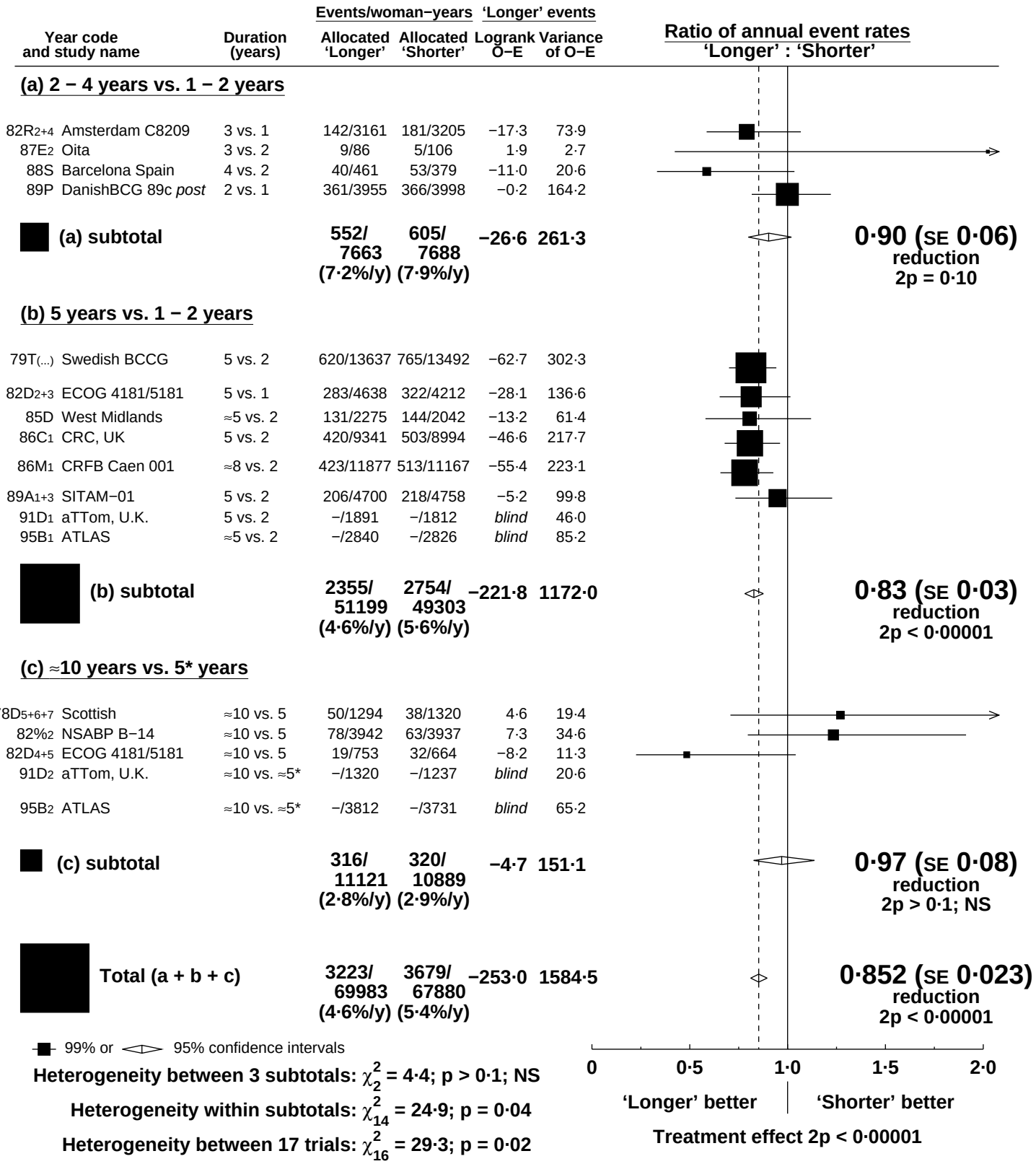
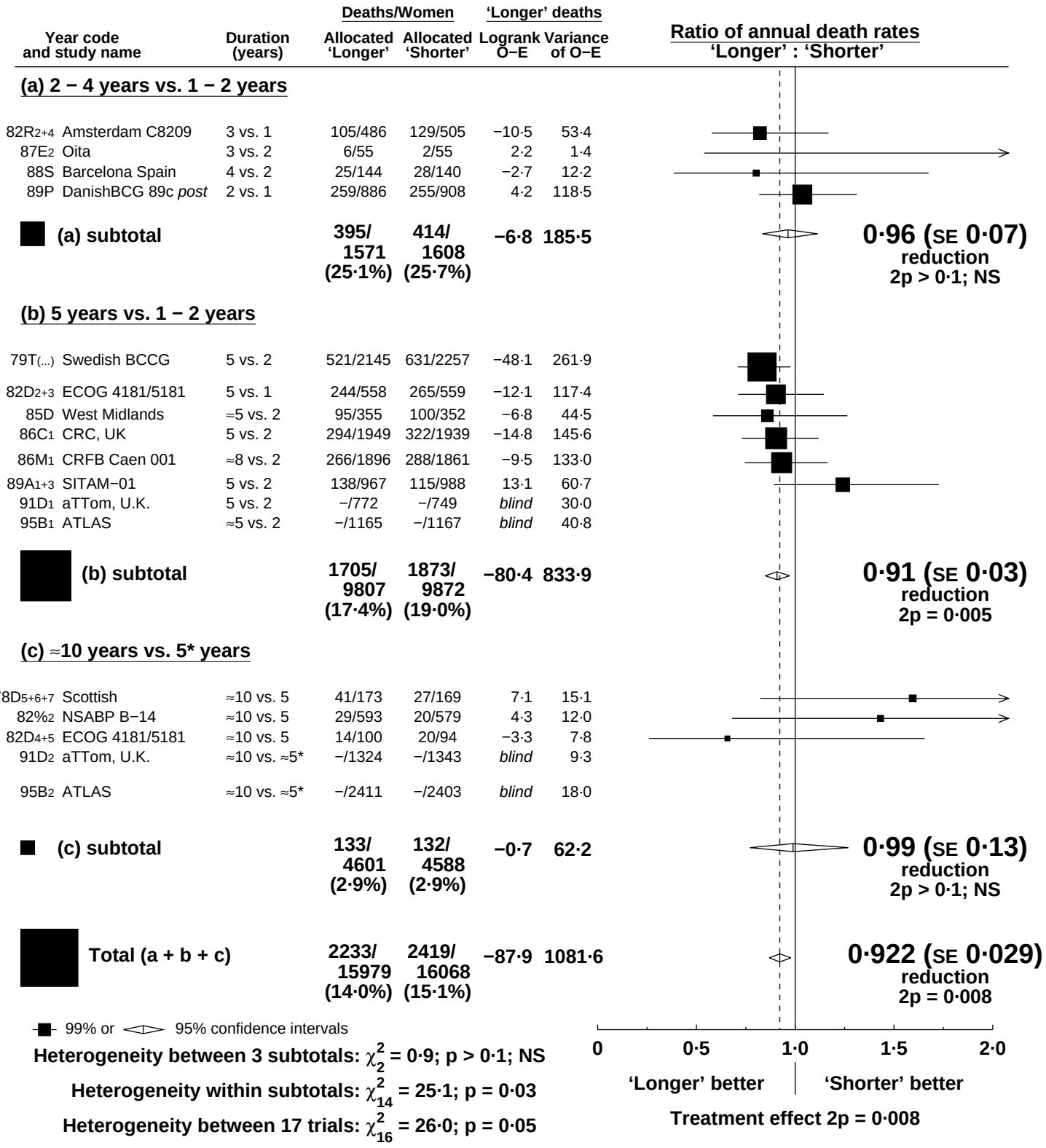


* More than 4 years of tamoxifen at randomisation.



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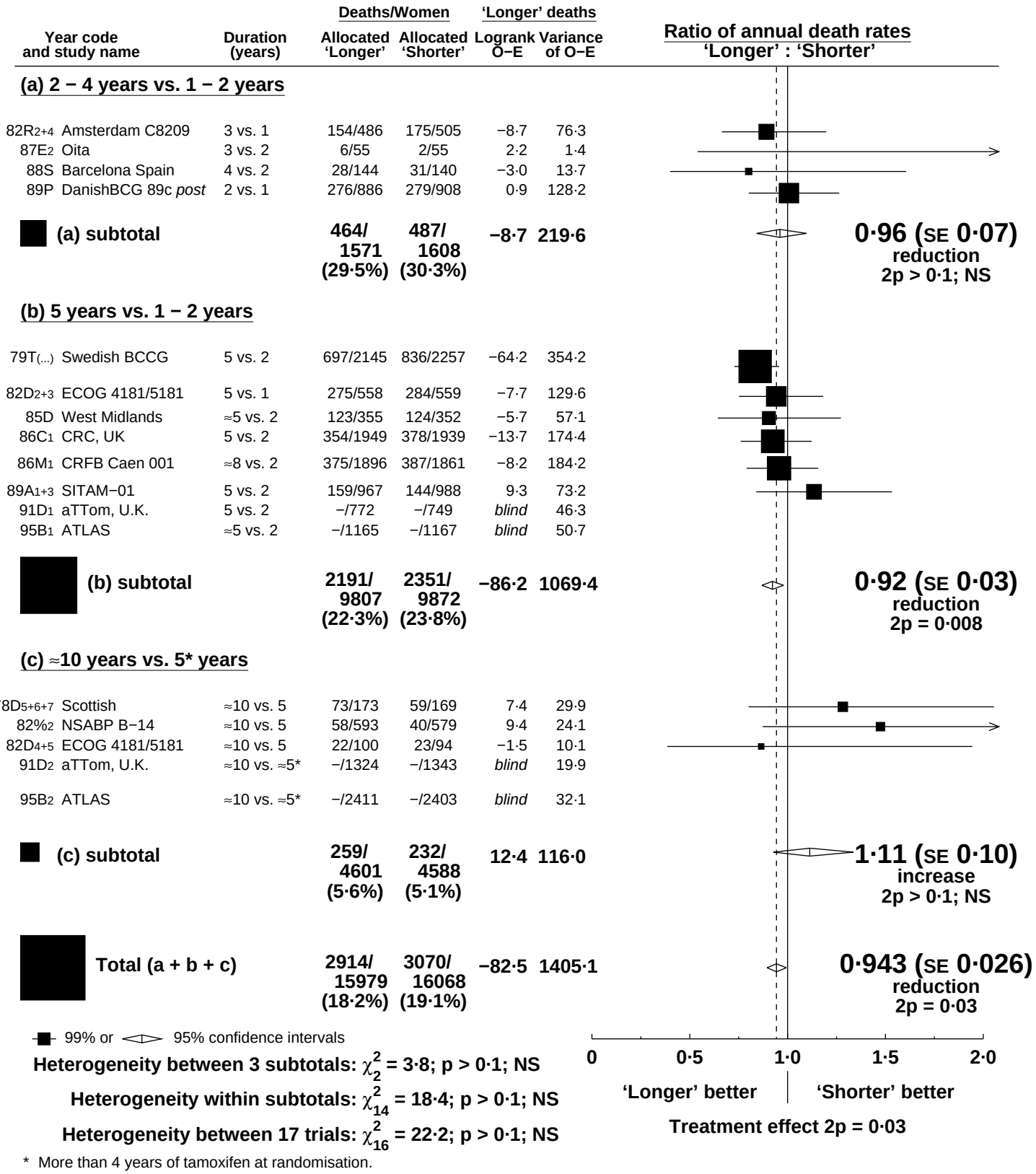

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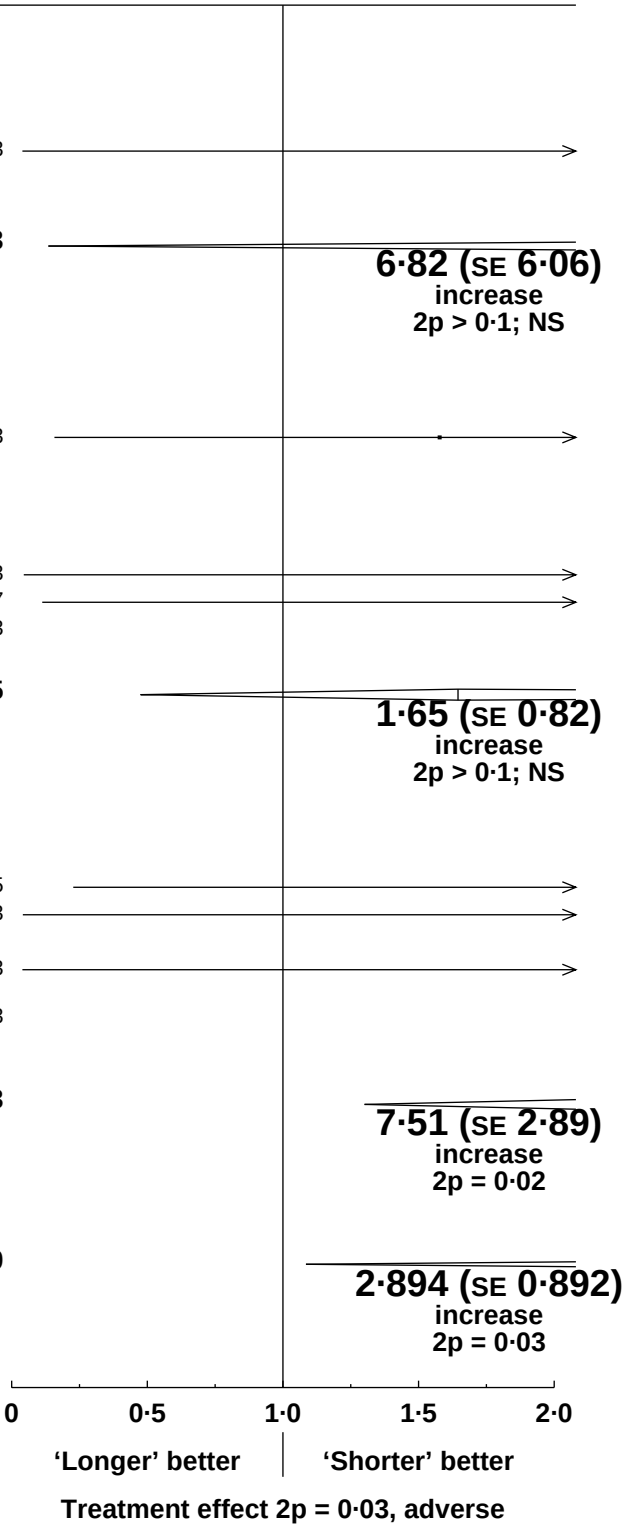
Year code and study name	Duration (years)	Deaths/woman−years Allocated 'Longer'	Deaths/woman−years Allocated 'Shorter'	'Longer' deaths Logrank O−E	'Longer' deaths Variance of O−E
(a) 2 − 4 years vs. 1 − 2 years					
82R2+4 Amsterdam C8209	3 vs. 1	0/3160	0/3205		
87E2 Oita	3 vs. 2	0/86	0/106		
88S Barcelona Spain	4 vs. 2	1/461	0/379	0·5	0·3
89P DanishBCG 89c *post*	2 vs. 1	0/3955	0/3998		
(a) subtotal		**1/ 7662 (0·0%/y)**	**0/ 7688 (0·0%/y)**	**0·5**	**0·3**
(b) 5 years vs. 1 − 2 years					
79T(...) Swedish BCCG	5 vs. 2	3/15376	3/15134	0·6	1·3
82D2+3 ECOG 4181/5181	5 vs. 1	0/4638	0/4212		
85D West Midlands	≈5 vs. 2	0/2275	0/2042		
86C1 CRC, UK	5 vs. 2	0/9341	0/8994		
86M1 CRFB Caen 001	≈8 vs. 2	0/11877	0/11167		
89A1+3 SITAM−01	5 vs. 2	1/4700	0/4758	0·5	0·3
91D1 aTTom, U.K.	5 vs. 2	2/1891	1/1812	0·6	0·7
95B1 ATLAS	≈5 vs. 2	−/2836	−/2824	*blind*	0·3
(b) subtotal		**6/ 52934 (0·0%/y)**	**5/ 50943 (0·0%/y)**	**1·2**	**2·5**
(c) ≈10 years vs. 5* years					
78D5+6+7 Scottish	≈10 vs. 5	2/1418	0/1510	1·1	0·5
82%2 NSABP B−14	≈10 vs. 5	1/3942	0/3937	0·5	0·3
82D4+5 ECOG 4181/5181	≈10 vs. 5	0/753	0/664		
91D2 aTTom, U.K.	≈10 vs. ≈5*	1/1320	0/1237	0·5	0·3
95B2 ATLAS	≈10 vs. ≈5*	−/3808	−/3732	*blind*	0·3
(c) subtotal		**5/ 11241 (0·0%/y)**	**0/ 11080 (0·0%/y)**	**2·5**	**1·3**
Total (a + b + c)		**12/ 71837 (0·0%/y)**	**5/ 69711 (0·0%/y)**	**4·2**	**4·0**



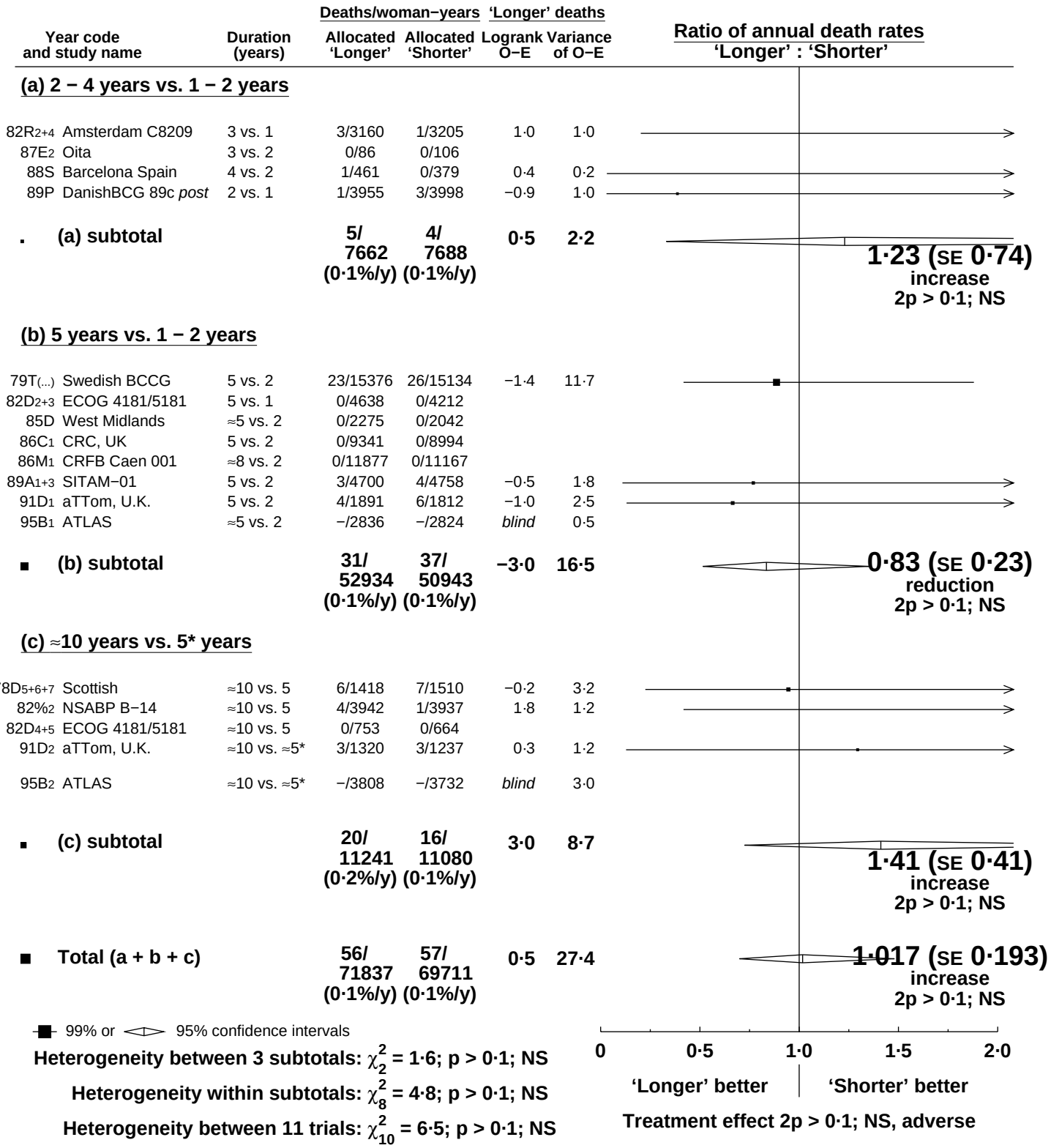
■ 99% or ◁▷ 95% confidence intervals

Heterogeneity between 3 subtotals: χ^2_2 = 2·1; p > 0·1; NS

Heterogeneity within subtotals: χ^2_6 = 2·0; p > 0·1; NS

Heterogeneity between 9 trials: χ^2_8 = 4·1; p > 0·1; NS

* More than 4 years of tamoxifen at randomisation.



Heterogeneity between 3 subtotals: $\chi^2_2 = 1{\cdot}6$; p > 0·1; NS

Heterogeneity within subtotals: $\chi^2_8 = 4{\cdot}8$; p > 0·1; NS

Heterogeneity between 11 trials: $\chi^2_{10} = 6{\cdot}5$; p > 0·1; NS

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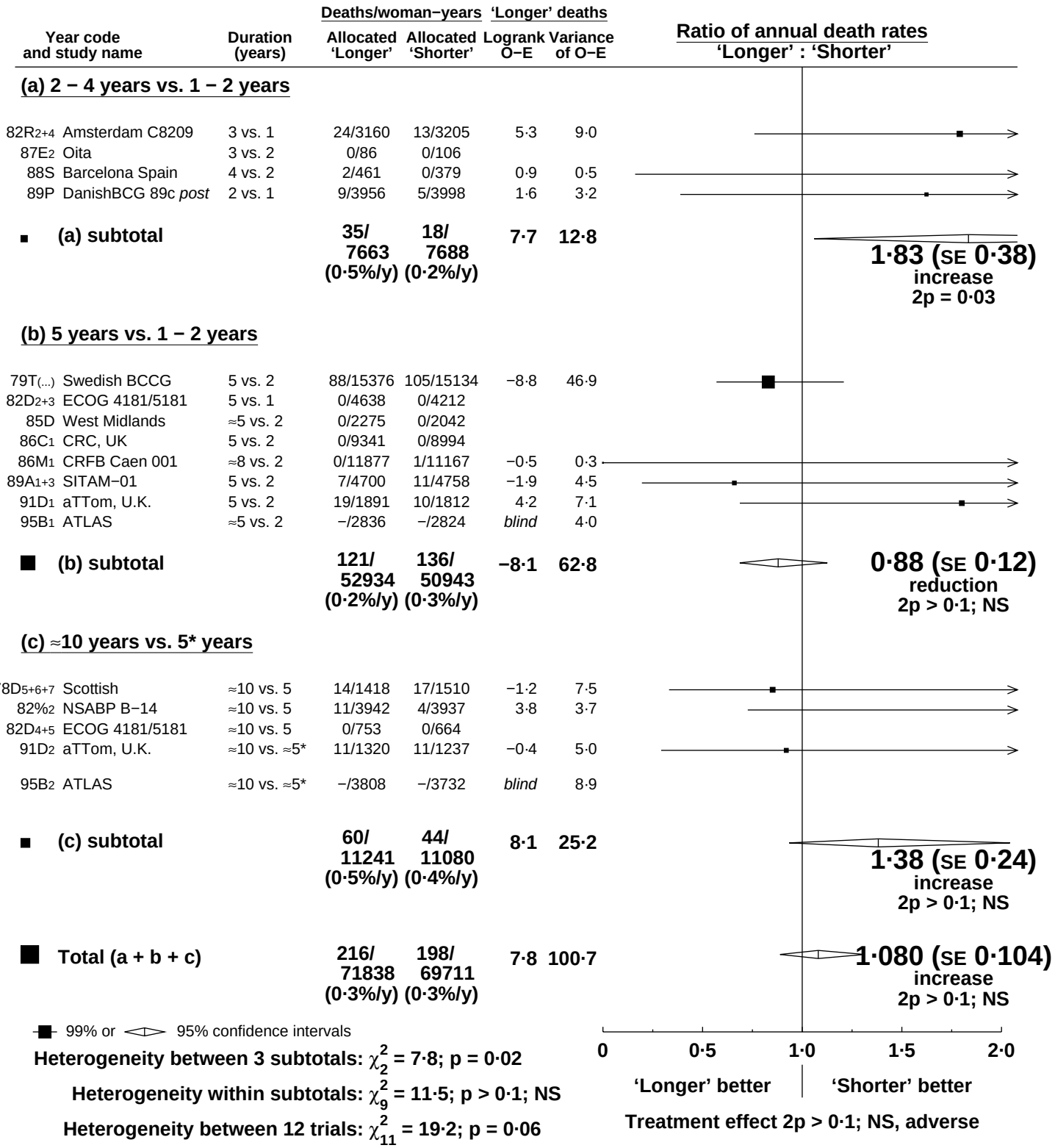

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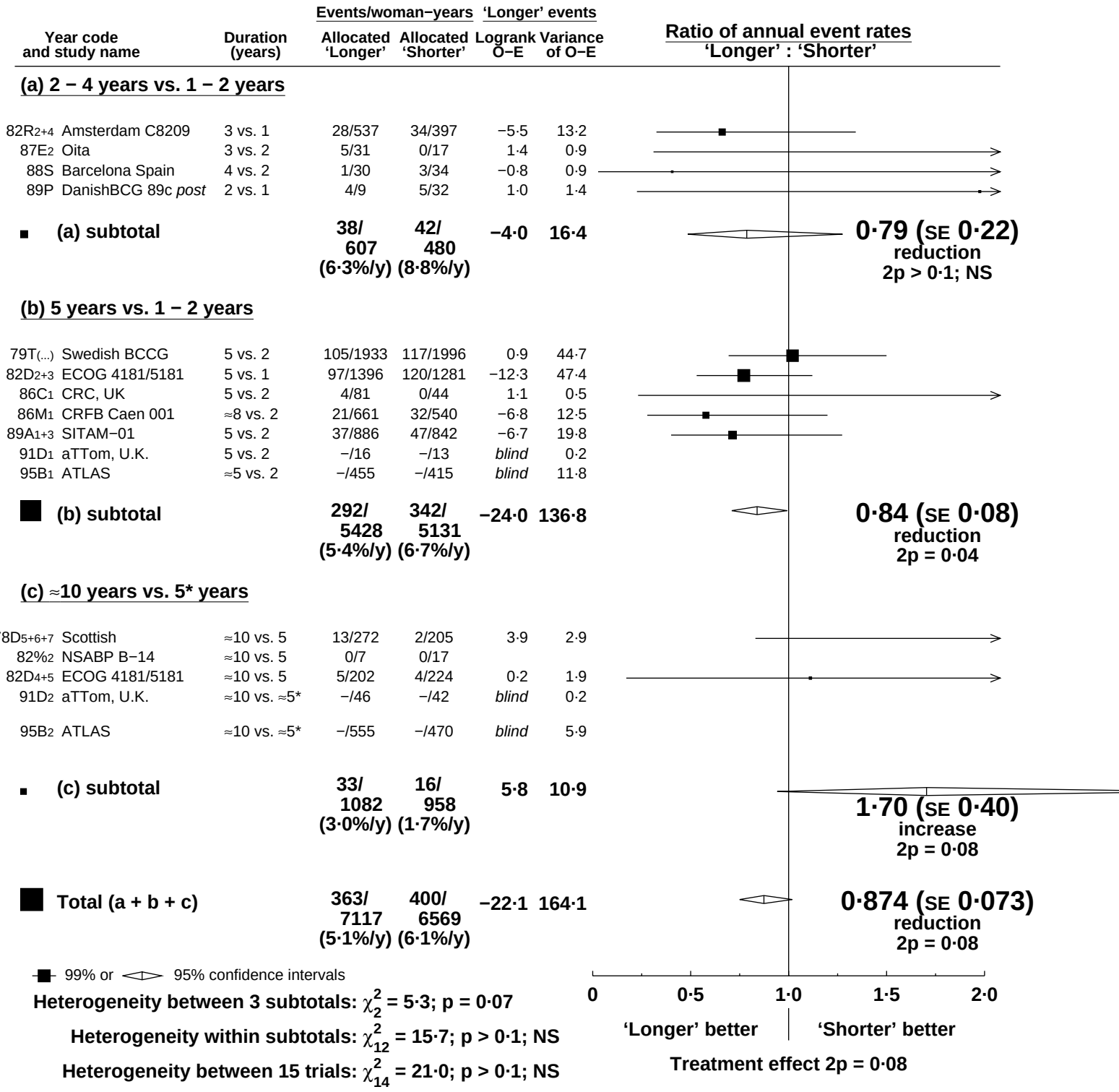

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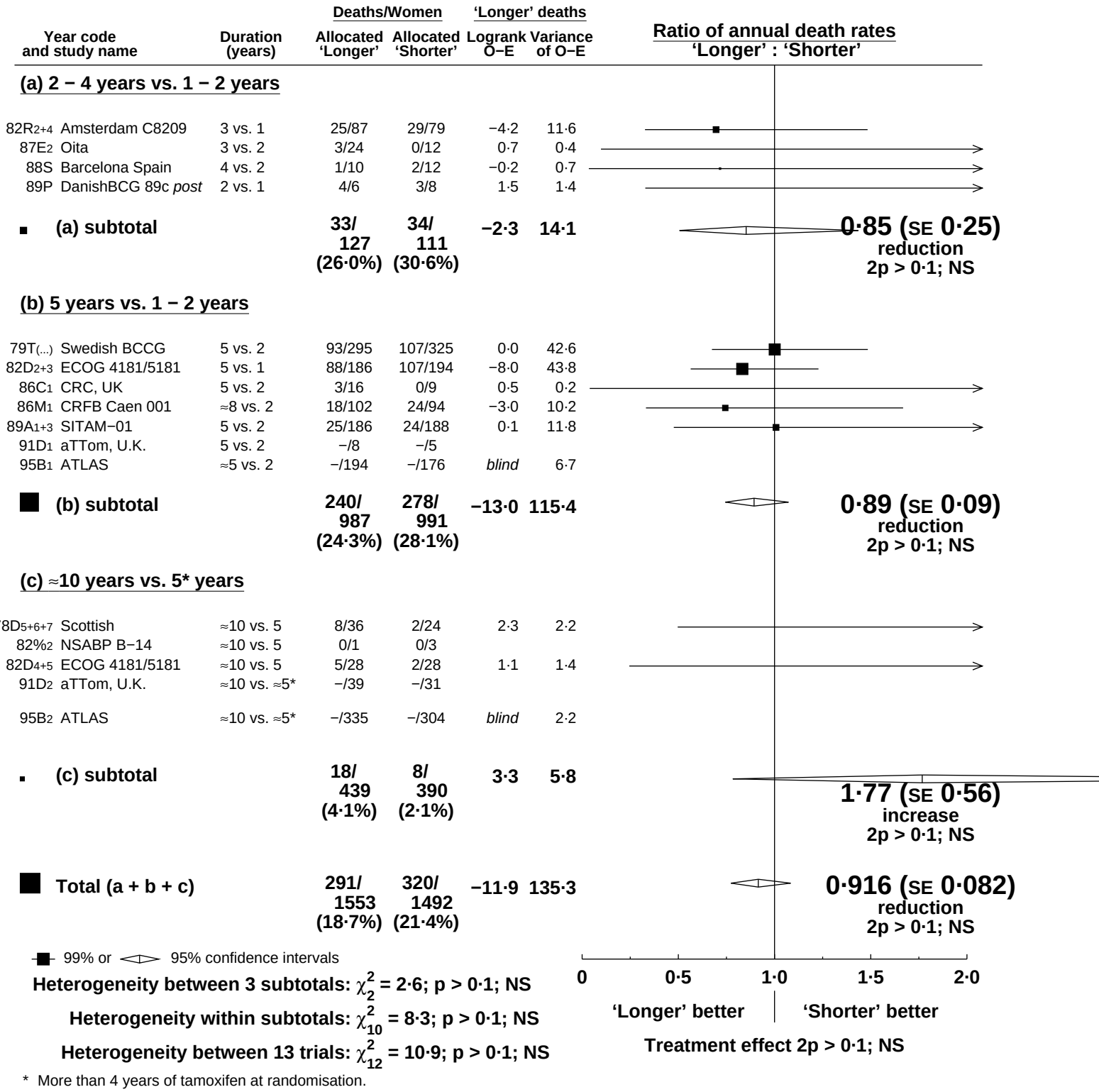

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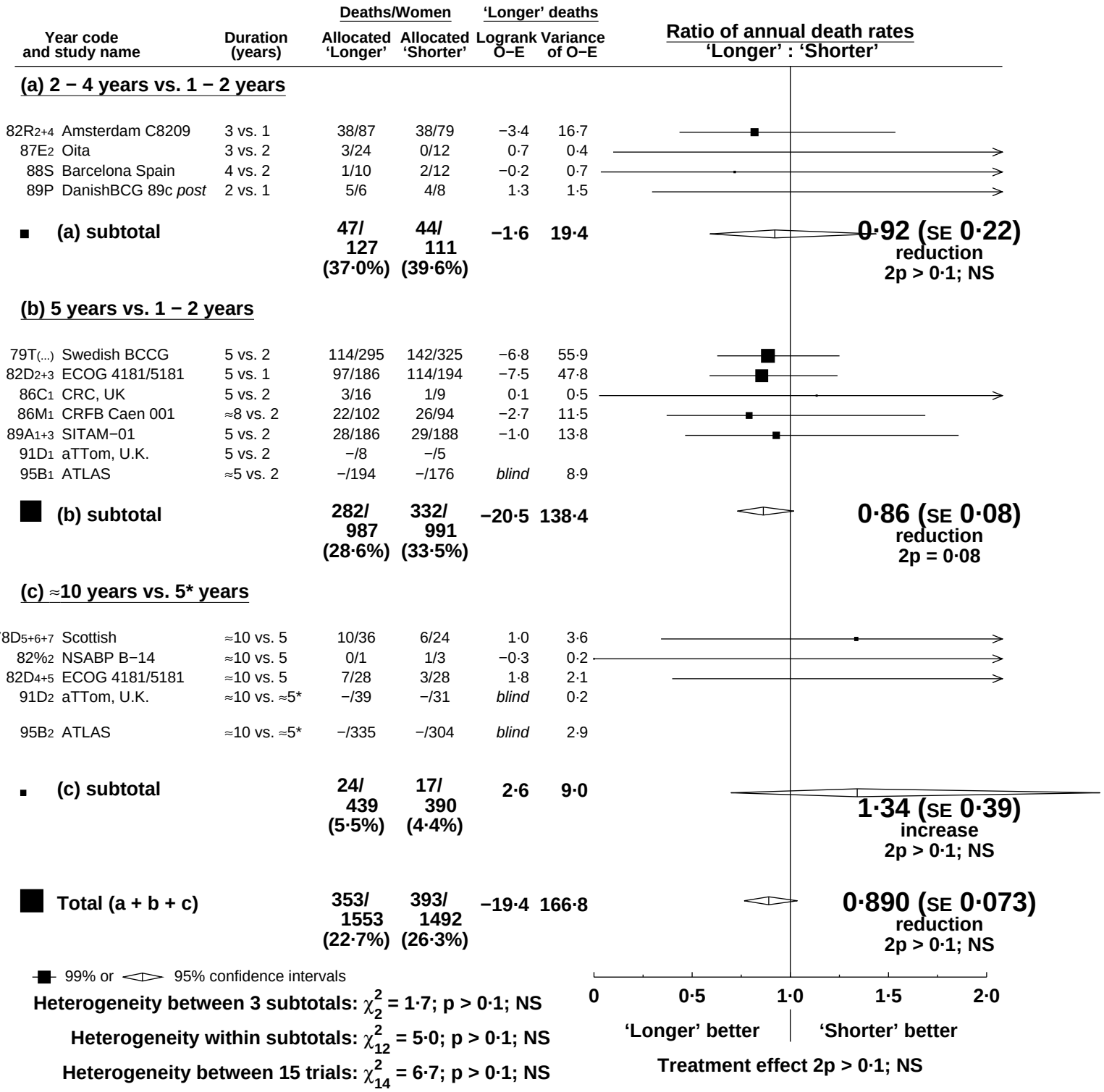

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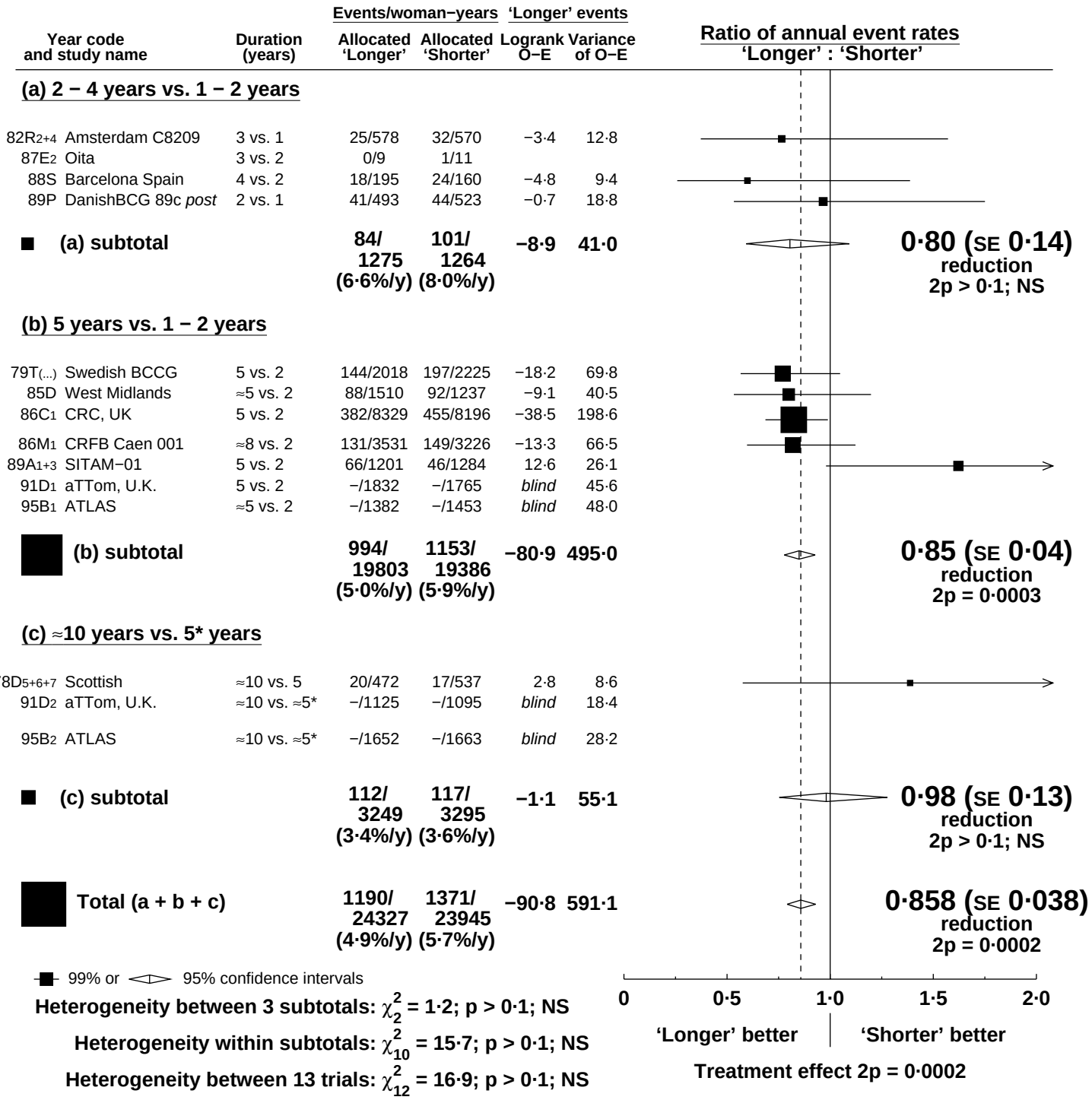

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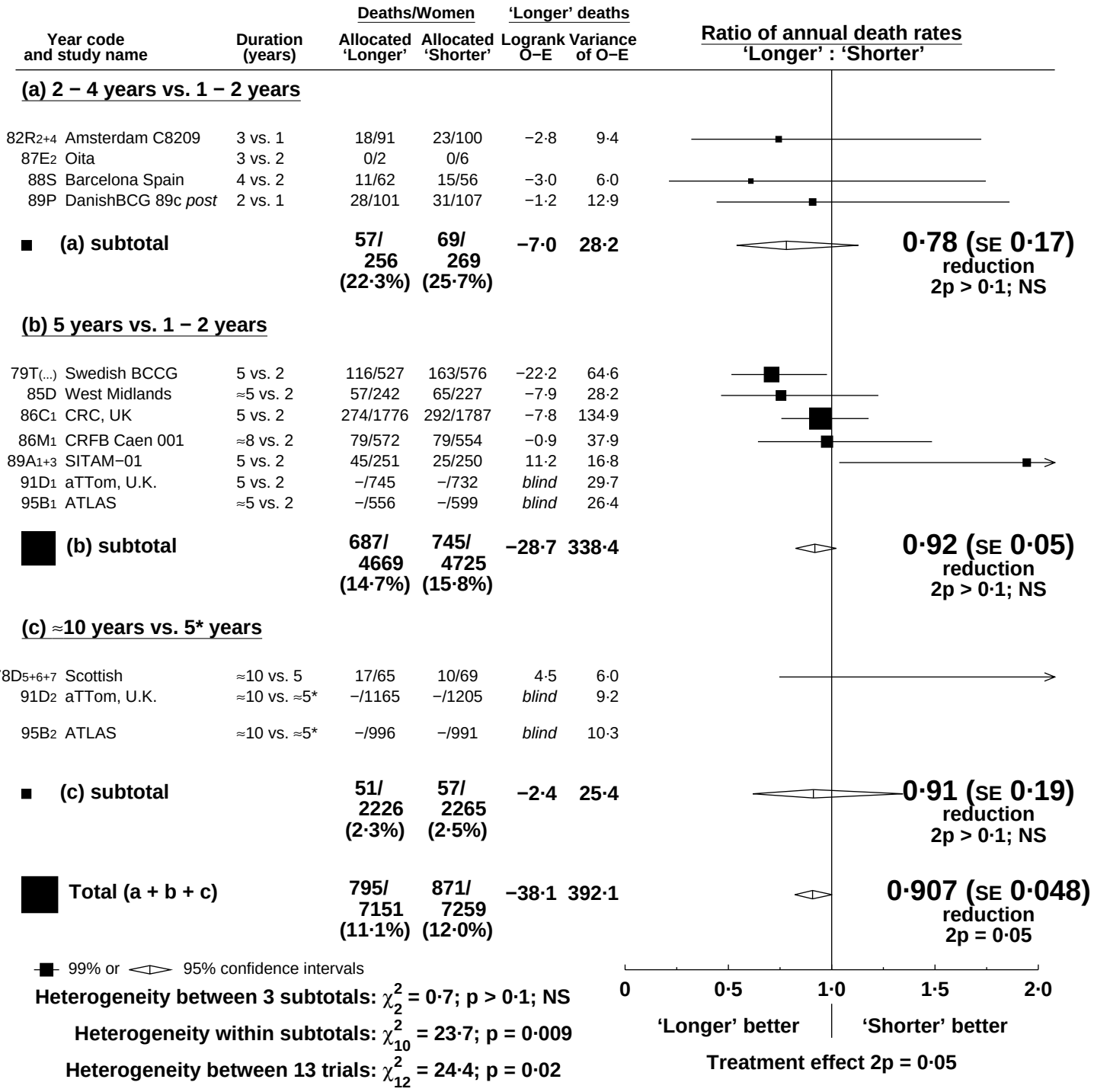

Heterogeneity between 3 subtotals: $\chi^2_2 = 0{\cdot}7$; p > 0·1; NS

Heterogeneity within subtotals: $\chi^2_{10} = 23{\cdot}7$; p = 0·009

Heterogeneity between 13 trials: $\chi^2_{12} = 24{\cdot}4$; p = 0·02

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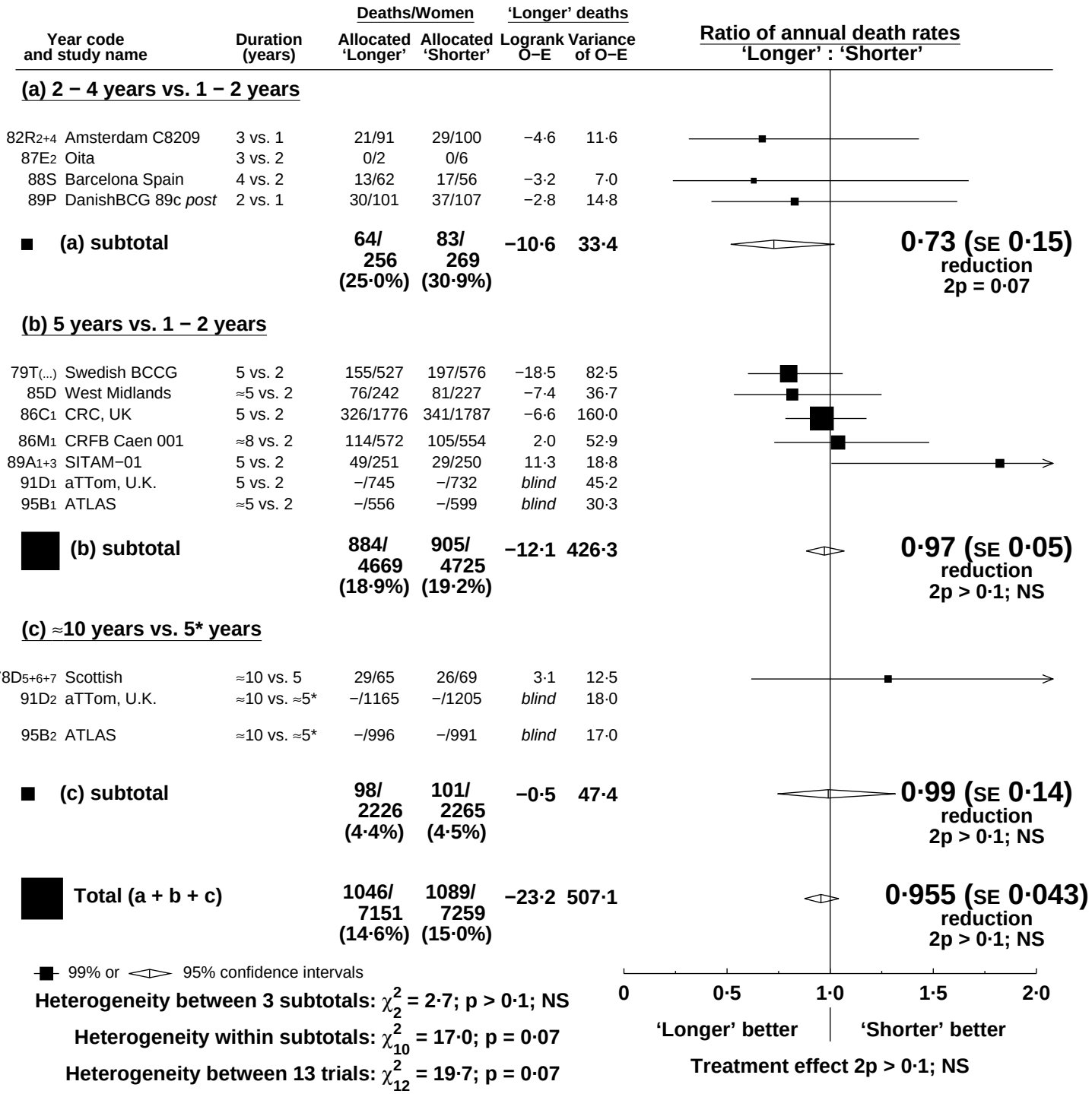

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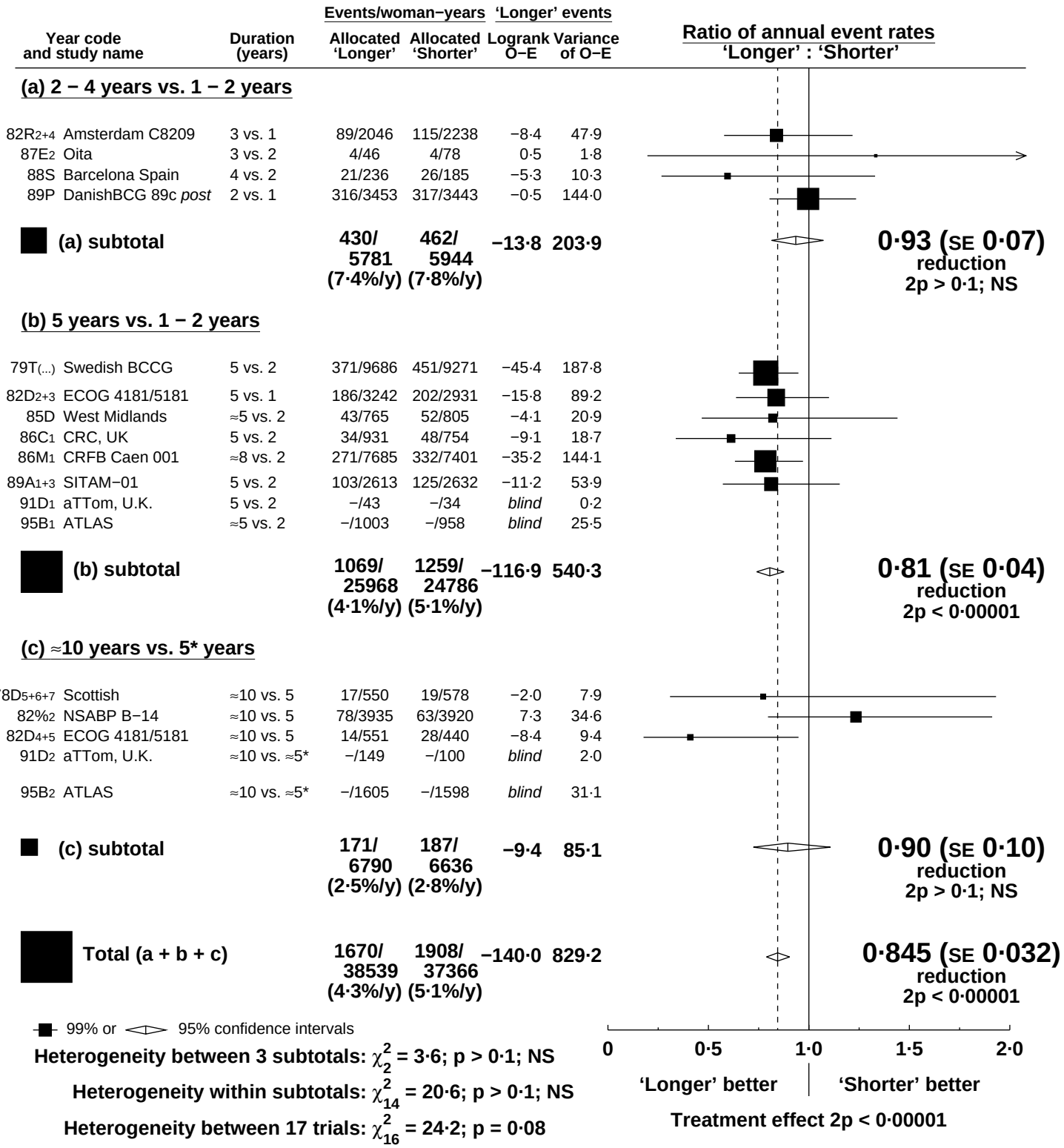

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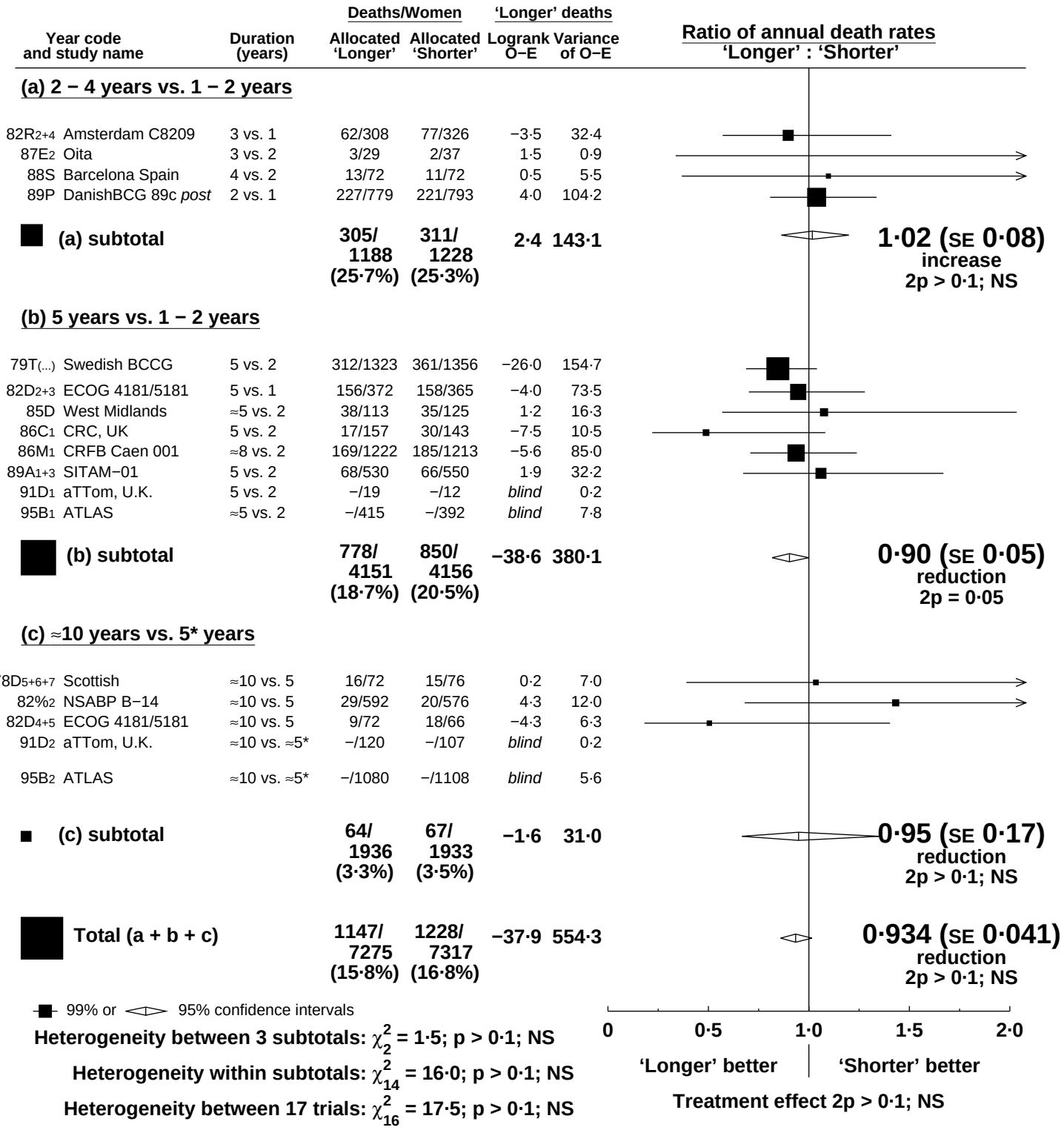

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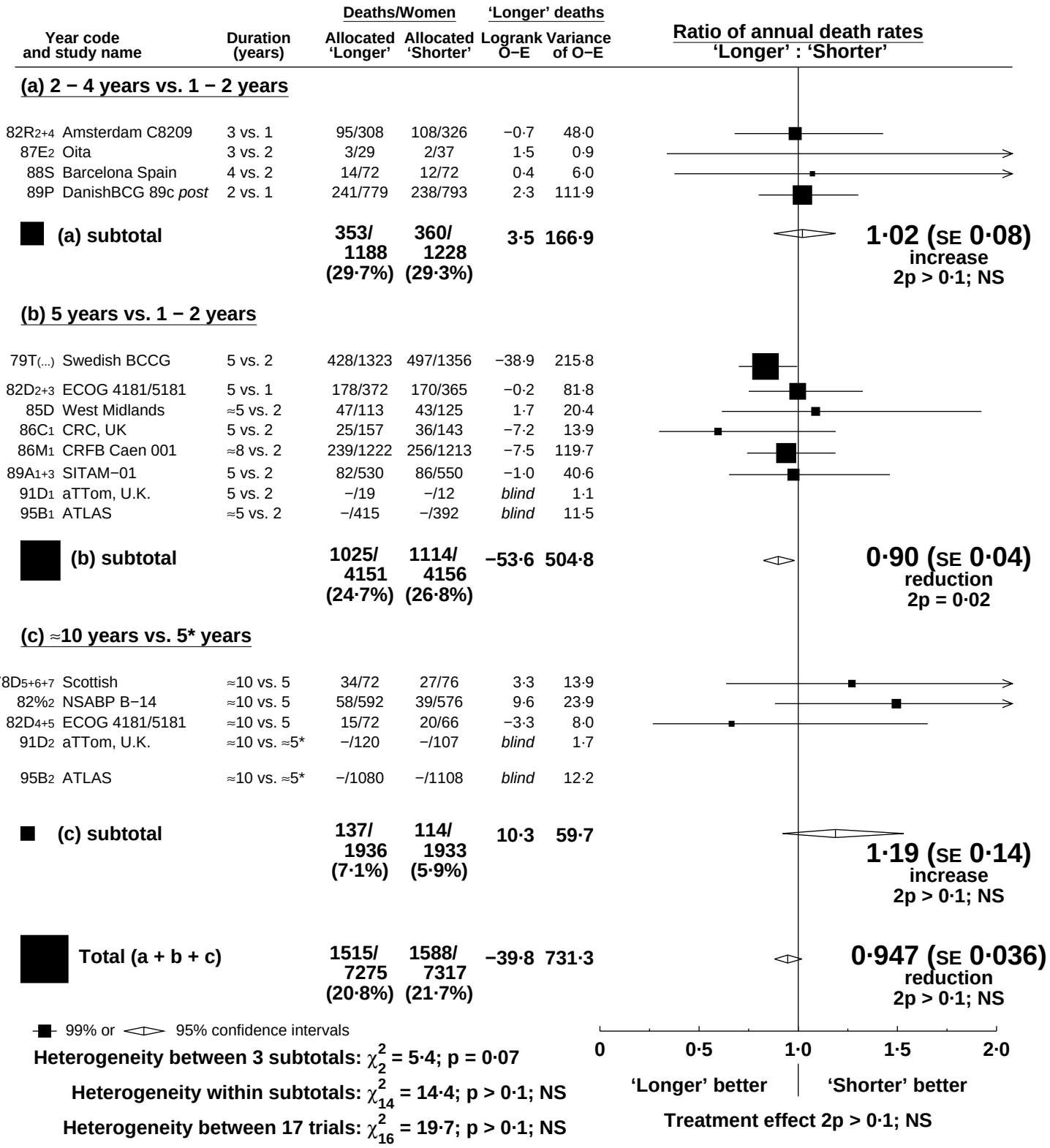

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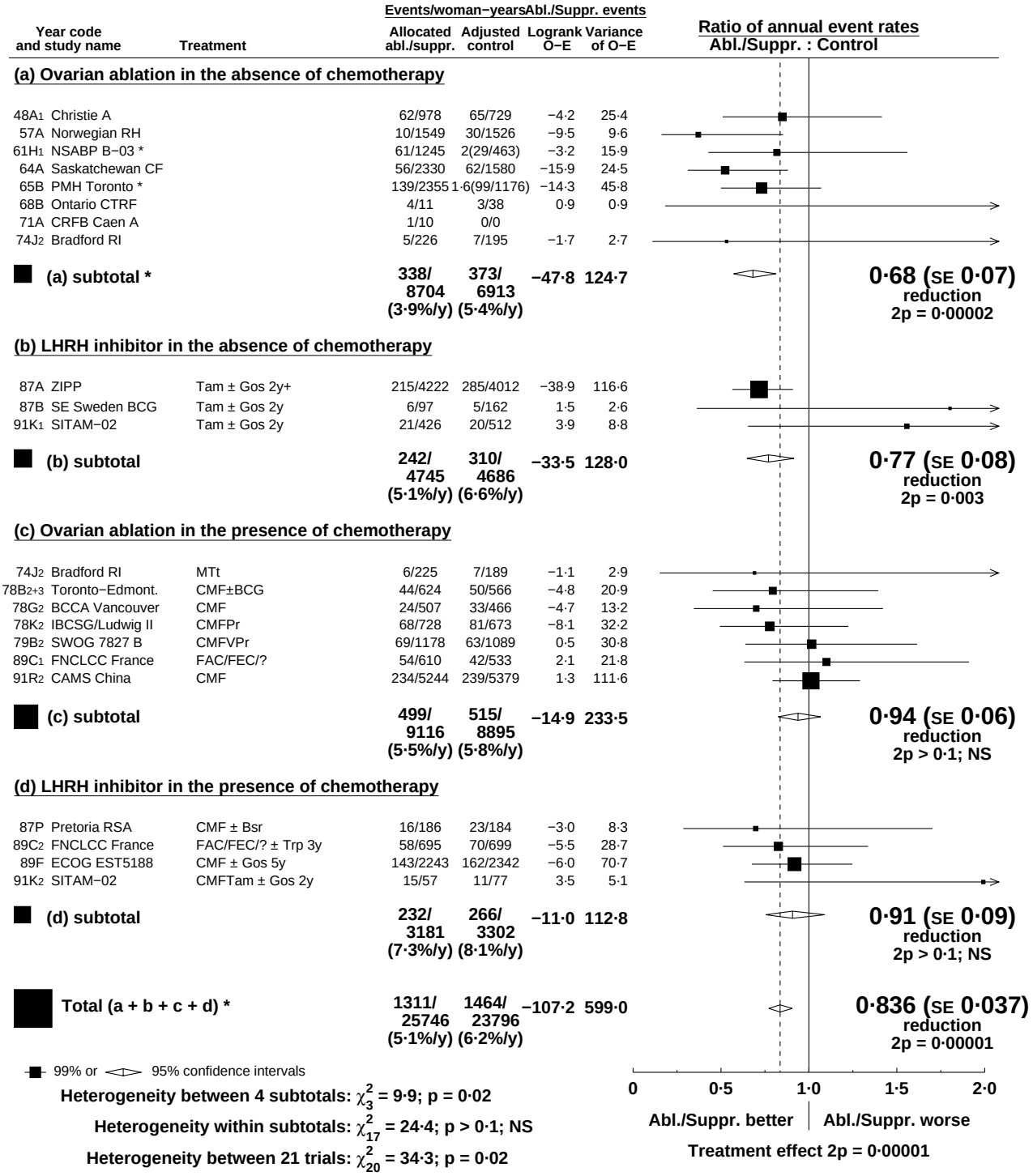

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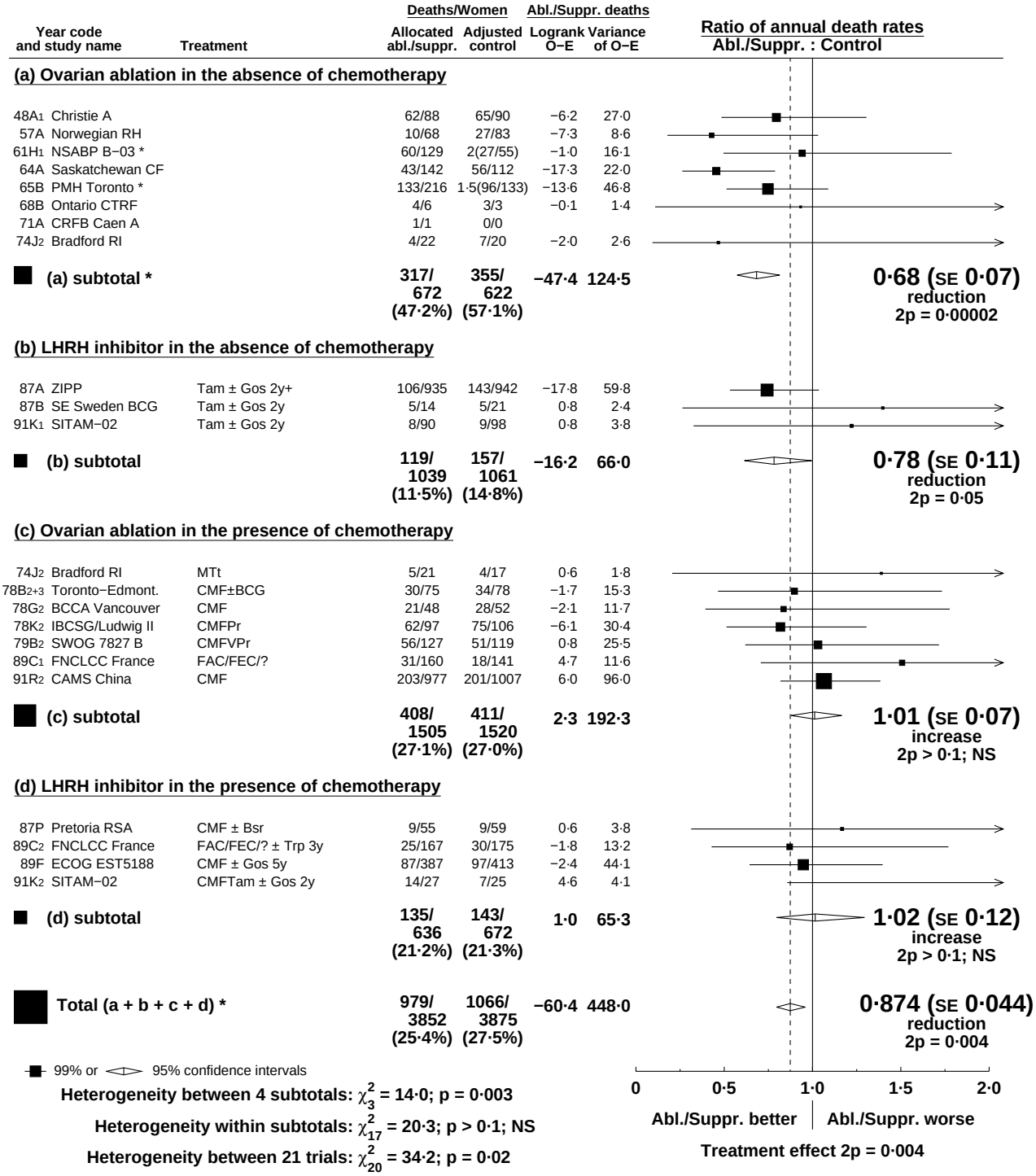

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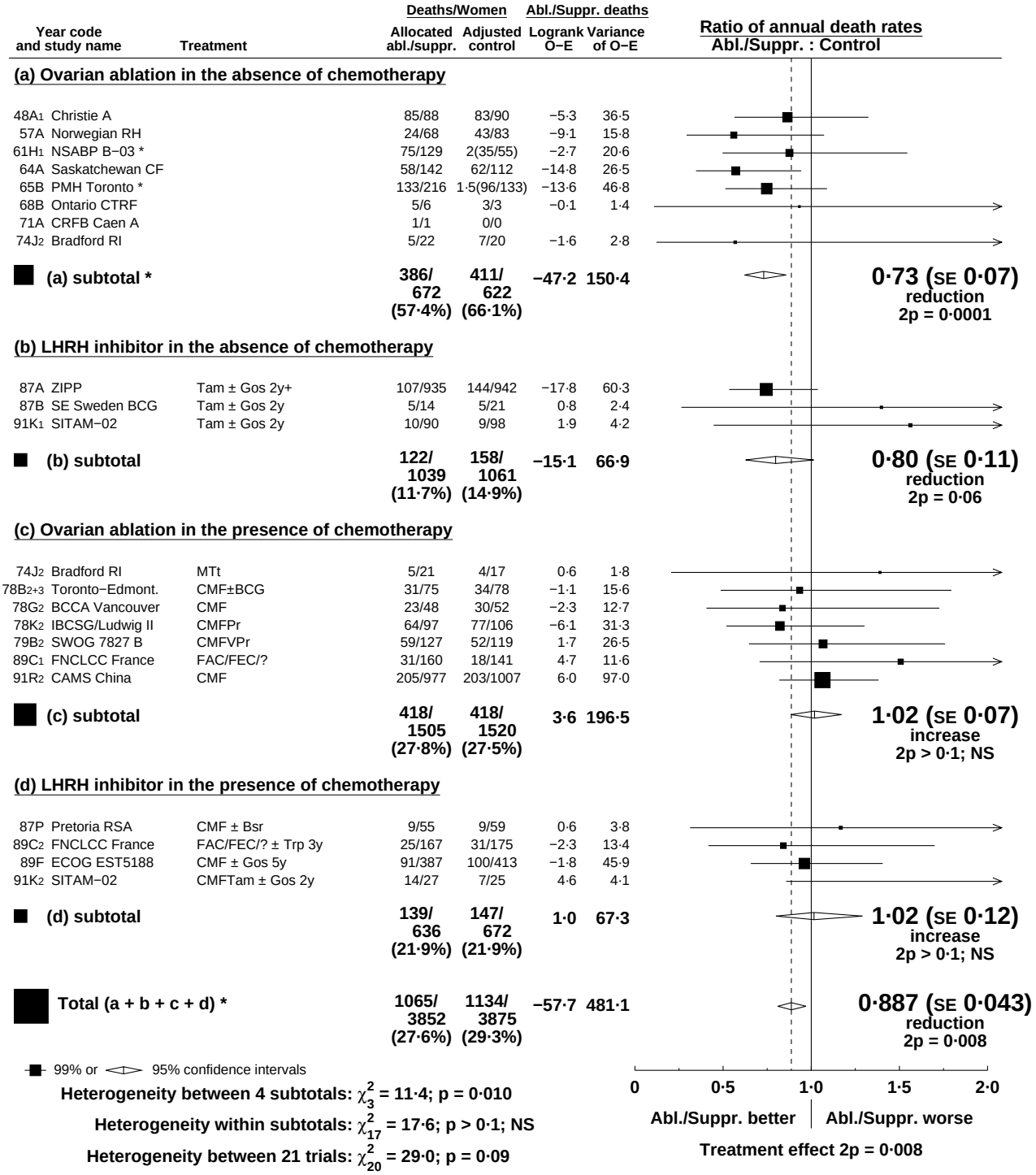

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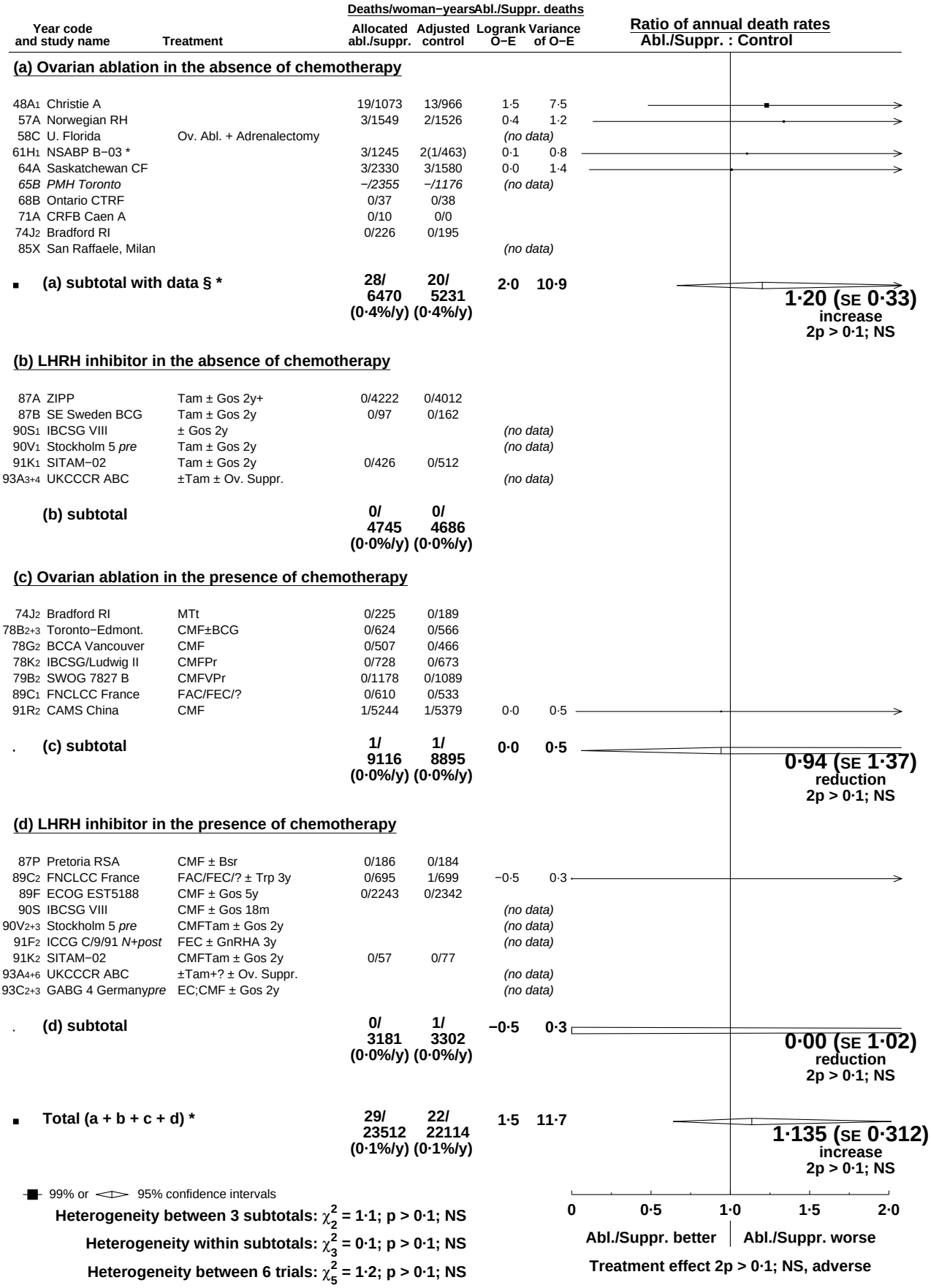

§ 1 trial with no data does not contribute to subtotals or to the overall total (allocated abl./suppr.: 2355; allocated control: 1176)

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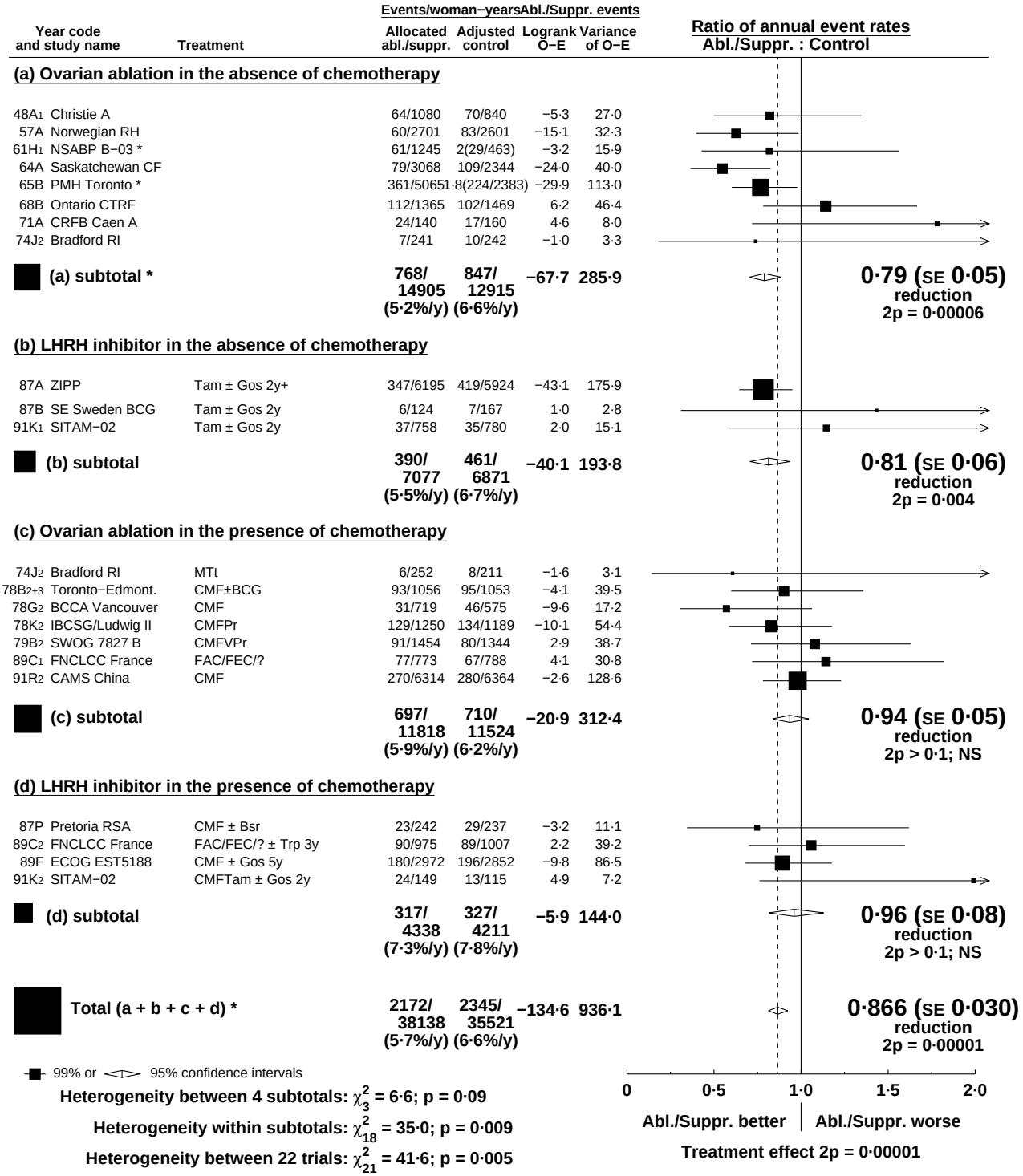

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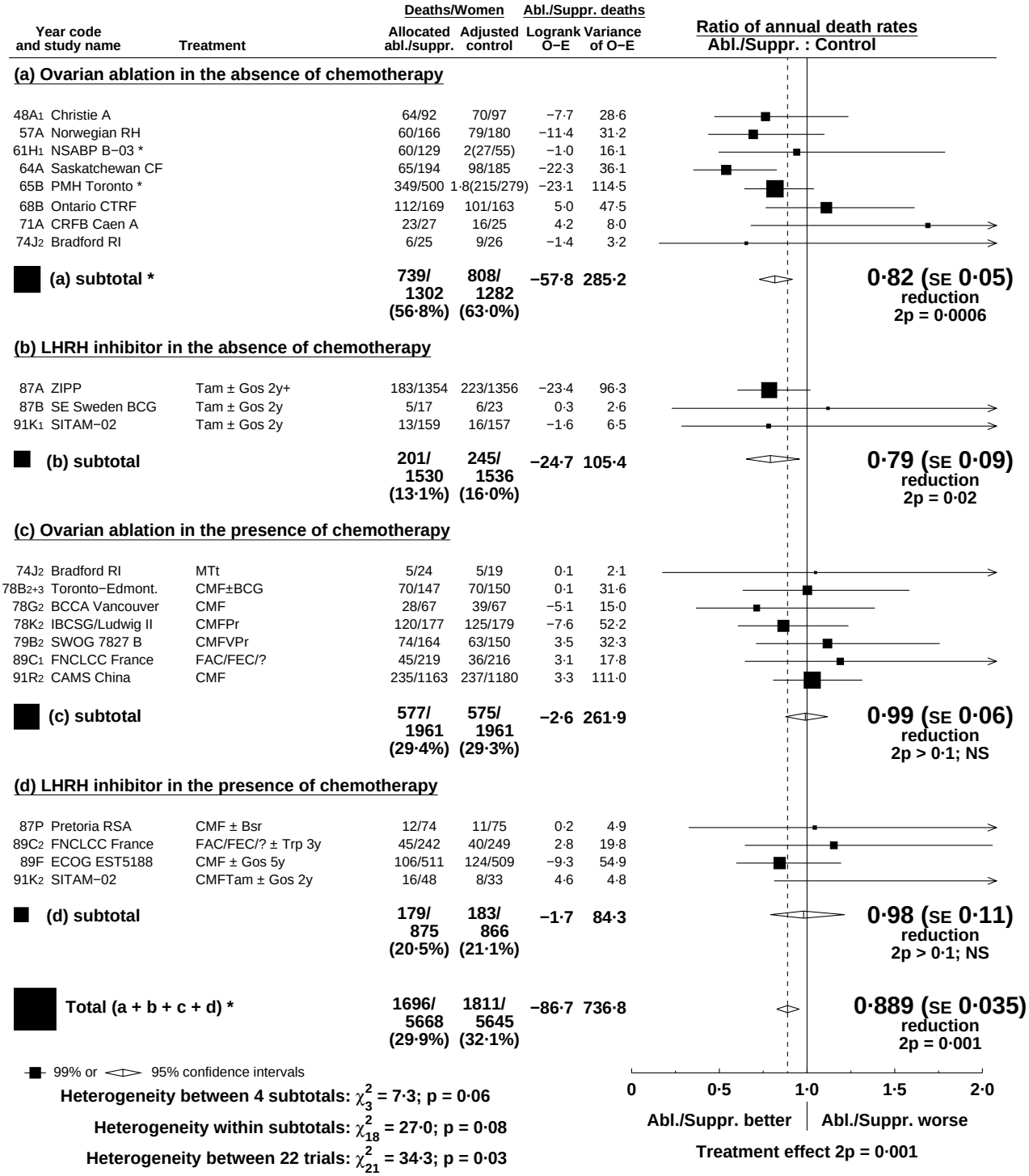

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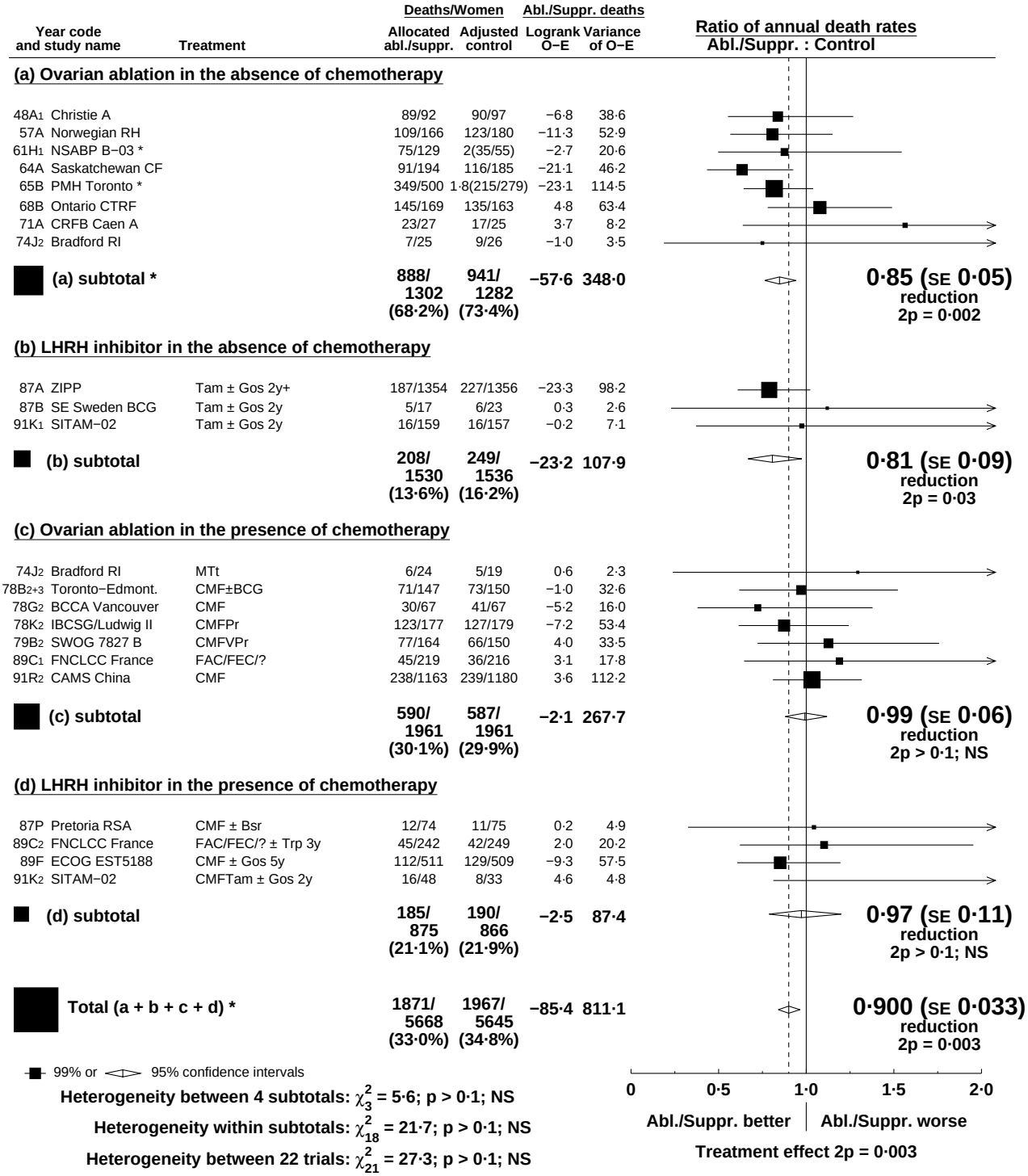

* For balance, control patients in 3−way trials or trial strata count half or twice in subtotal(s) and in final total of deaths/women.

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