

Supplementary table 1: Summary of the treatment experience of BILI with novel therapeutic regimens

Reference	Type of cancer	Age	Sex	Chemo-therapy regimen	Cycles of chemo-therapy	Novel therapeutics used to ameliorate BILI	Preceding treatment with low dose of steroids	Concomitant use of corticosteroids	Outcome
[16]	Hodgkin's lymphoma	65	male	AVBD	6	300 mg of imatinib mesylate	methylprednisolone 2 mg/kg	?, possibly yes	resolution of BILI
[15]	Hodgkin's lymphoma	55	female	unknown	5	pirfenidone (400 mg tid) and NAC (600 mg tid)	-	yes, 40 mg per day	resolution of BILI
[15]	Hodgkin's lymphoma	45	male	AVBD	6	pirfenidone (600 mg tid) and NAC (600 mg tid)	prednisolone 1 mg/kg	yes, prednisolone 2 mg/kg per day	resolution of BILI
[17]	Hodgkin's lymphoma	65	female	AVBD	4	pulse corticosteroid (methylprednisolone, 1 g per day)	methylprednisolone 240 mg per day with NAC	-	marked improvement, some fibrosis remained
Current case	Seminoma	63	male	PEB	2	pirfenidone (600 mg tid)	prednisone, 10-30mg per day	yes, prednisone 10mg per day	resolution of BILI

abbreviations: AVBD = adriamycin, vincristine, bleomycin, doxorubicin; PEB = cisplatin, etoposide, bleomycin; NAC = N-acetylcysteine; BILI = bleomycin-induced lung injury; tid = three times a day

supplementary reference

17. Gupta R, Ettinger NA. Beyond conventional therapy: role of pulse steroids in bleomycin induced lung injury. *Respir Care*. 2014 Jan;59(1):e9-e12.