

Table SI. Distribution of paired subtype combinations between FBC and mCBC.

FBC subtype (n=73)	mCBC subtype	No. (% total)
HR ⁺ HER2 ⁻ (n=50)	HR ⁺ HER2 ⁻	37 (50.7)
	HR ⁺ HER2 ⁺	4 (5.5)
	HR ⁻ HER2 ⁺	1 (1.4)
	HR ⁻ HER2 ⁻	8 (11.0)
HR ⁺ HER2 ⁺ a (n=4)	HR ⁺ HER2 ⁻	1 (1.4)
	HR ⁺ HER2 ⁺	2 (2.7)
	HR ⁻ HER2 ⁺	1 (1.4)
	HR ⁻ HER2 ⁻	0
HR ⁻ HER2 ⁺ a (n=6)	HR ⁺ HER2 ⁻	2 (2.7)
	HR ⁺ HER2 ⁺	3 (4.1)
	HR ⁻ HER2 ⁺	0
	HR ⁻ HER2 ⁻	1 (1.4)
HR ⁻ HER2 ⁻ (n=13)	HR ⁺ HER2 ⁻	8 (11.0)
	HR ⁺ HER2 ⁺	1 (1.4)
	HR ⁻ HER2 ⁺	1 (1.4)
	HR ⁻ HER2 ⁻	3 (4.1)

^aFBC cases diagnosed before routine HER2 testing was introduced were classified as not available unless the HER2 status was available from retrospective testing performed at the time of mCBC diagnosis. HR, hormone receptor; FBC, first primary breast cancer; mCBC, metachronous contralateral breast cancer.

Table SII. Comparison of luminal vs. non-luminal subtypes in patients with metachronous contralateral breast cancer who either had or never had CTx and/or ETx for their first primary breast cancer.

Combined subtypes	Odds ratio (95% CI)		P-value
	HR ⁺ HER2 ⁻ and HR ⁺ HER2 ⁺	HR ⁻ HER2 ⁺ and HR ⁻ HER2 ⁻	
Prior vs. never ETx	1	1.25 (0.41, 3.83)	0.698
Prior vs. never CTx	1	2.02 (0.63, 6.63)	0.230

Patient numbers are not shown, but are the same as those shown in Table II. As an additional exploratory analysis, the four subtypes were combined into luminal (HR⁺/HER2⁻ and HR⁺/HER2⁺) and non-luminal (HR⁻/HER2⁺ and HR⁻/HER2⁻) categories, and stage-adjusted binary logistic regression analysis was performed with non-luminal subtype as the outcome. HR, hormone receptor; ETx, endocrine therapy; CTx, chemotherapy.