



Supporting Information

Supplementary results

**This appendix was part of the submitted manuscript and has been peer reviewed.
It is posted as supplied by the authors.**

Appendix to: Hamarneh Z, Cock C, Young GP, et al. The influence of the surveillance time interval on the risk of advanced neoplasia after non-advanced adenoma removal. *Med J Aust* 2021; doi: 10.5694/mja2.51222.

Table 1. Likelihood of advanced neoplasia¹ at follow-up surveillance colonoscopy after removal of non-advanced adenoma: multivariable logistic regression analysis

Variable	Odds ratio (95% confidence interval)
Sex (men)	1.35 (0.94–1.93)
Age (per year)	1.03 (1.01–1.05)
Two tubular adenomas < 10 mm at baseline colonoscopy (v one)	1.74 (1.18–2.57)
Prior history of adenoma	1.48 (1.01–2.15)
Time until surveillance colonoscopy (per year)	1.21 (1.08–1.37)

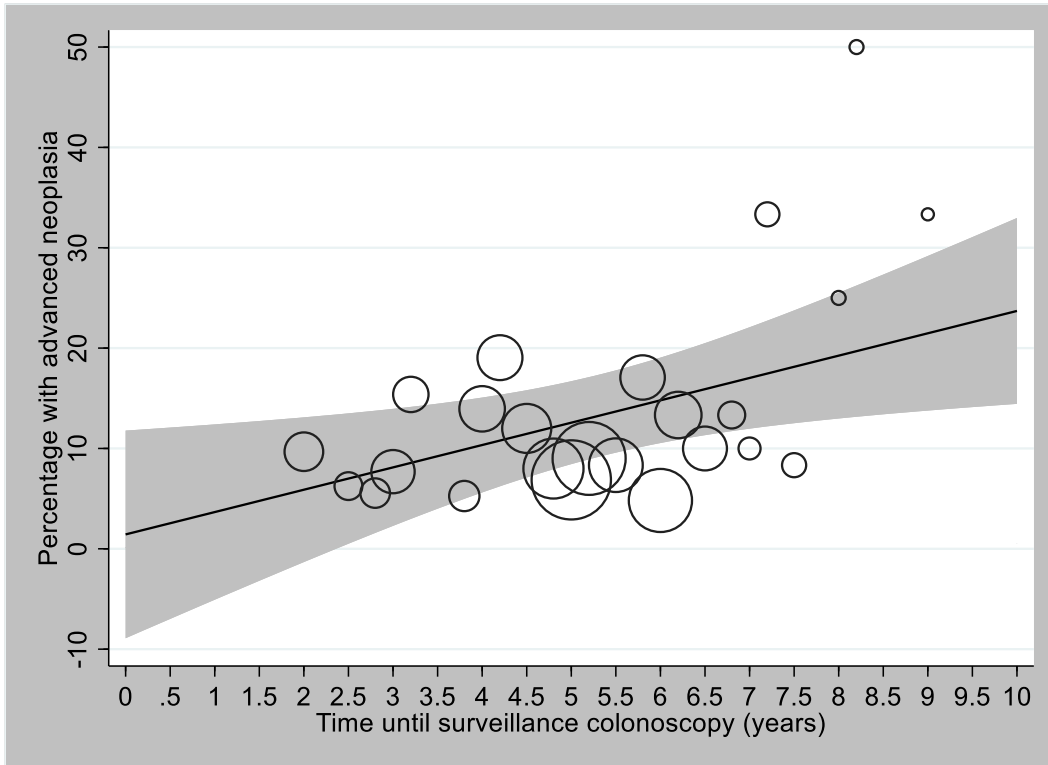
¹Colorectal cancer, adenomas with high grade dysplasia or villous change, adenomas or sessile serrated lesions with size ≥ 10 mm, sessile serrated lesions with dysplasia, or traditional serrated adenomas, or ≥ 3 adenomas or sessile serrated lesions.

Table 2. Likelihood of advanced neoplasia (excluding 3 or 4 small adenomas and low risk sessile serrated lesions)¹ at follow-up surveillance colonoscopy after removal of non-advanced adenoma: multivariable logistic regression analysis

Variable	Odds ratio (95% confidence interval)
Sex (men)	1.25 (0.80–1.94)
Age (per year)	1.03 (1.01–1.05)
Two tubular adenomas < 10 mm at baseline colonoscopy (v one)	1.52 (0.94–2.46)
Prior history of adenoma	1.81 (1.15–2.85)
Time until surveillance colonoscopy (per year)	1.24 (1.07–1.42)

¹Colorectal cancer, adenomas with high grade dysplasia or villous change, adenomas or sessile serrated lesions with size ≥ 10 mm, sessile serrated lesions with dysplasia, or traditional serrated adenomas.

Figure. Proportions of surveillance colonoscopy procedures in which advanced neoplasia¹ was identified after non-advanced adenoma removal,² by time to surveillance colonoscopy: regression analysis



The circles represent mean proportions at each time point; the size of the circle indicates the number of procedures at each time point. The shading envelope indicates the 95% confidence intervals

¹Colorectal cancer, adenomas with high grade dysplasia or villous change, adenomas or sessile serrated lesions with size ≥ 10 mm, sessile serrated lesions with dysplasia, or traditional serrated adenomas.

²Proportion of advanced neoplasia in time intervals:

2.0–3.9 years:	7.9%	(13 of 165)
4.0–5.9 years:	10%	(57 of 553)
6.0–7.9 years:	10%	(22 of 222)
≥ 8 years:	32%	(8 of 25)