

Supplementary Table 1. Major milestones in therapeutic options for multiple myeloma

Japan		U.S.	
Year	Milestone	Year	Milestone
1980s	ASCT	1980s	ASCT
<sup>a</sup> 2006	Bortezomib	<sup>a</sup> 2003	Bortezomib
<sup>a</sup> 2008	Thalidomide	<sup>a</sup> 2005	Lenalidomide
<sup>a</sup> 2010	Lenalidomide	<sup>a</sup> 2006	Thalidomide
<sup>a</sup> 2016	Pomalidomide	<sup>a</sup> 2012	Carfilzomib
<sup>a</sup> 2016	Panobinostat	<sup>a</sup> 2013	Pomalidomide
<sup>a</sup> 2016	Elotuzumab	<sup>a</sup> 2015	Panobinostat
<sup>a</sup> 2017	Ixazomib	<sup>a</sup> 2015	Daratumumab
<sup>a</sup> 2017	Carfilzomib	<sup>a</sup> 2015	Ixazomib
<sup>a</sup> 2017	Daratumumab	<sup>a</sup> 2015	Elotuzumab

<sup>a</sup>Approval received for multiple myeloma

ASCT; autologous stem-cell transplantation

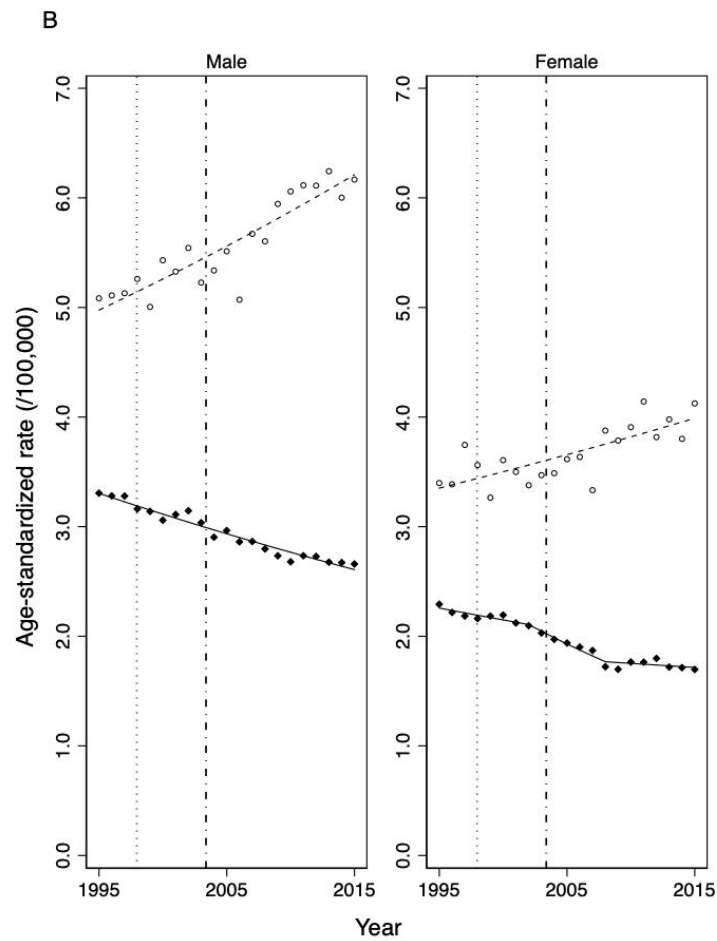
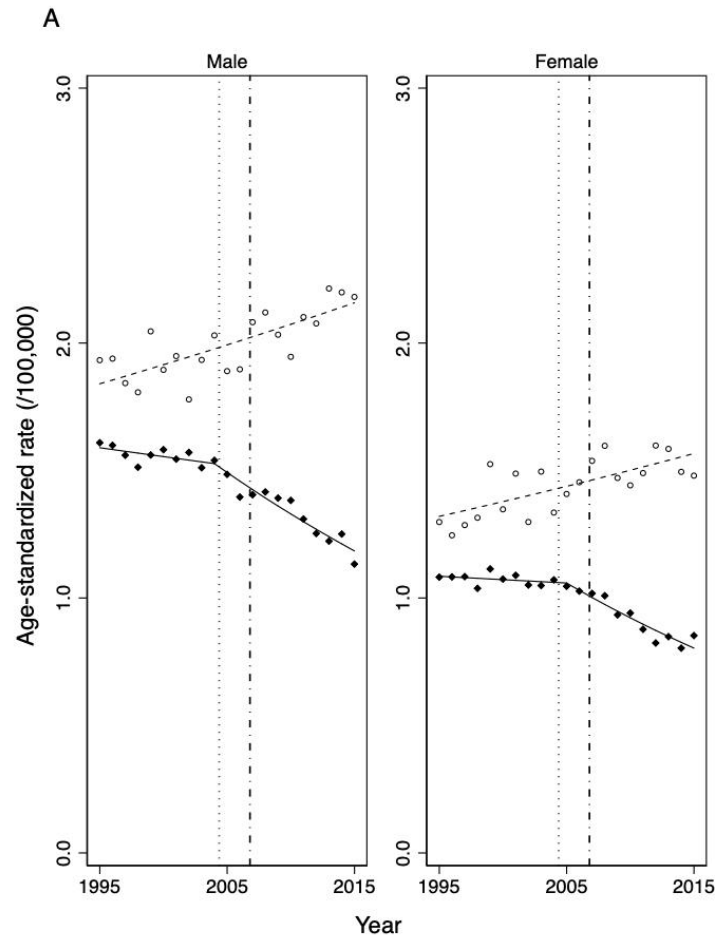
**Supplementary Table 2. Joinpoints, their 95% CI and ASR estimated by joinpoint regression analysis**

	Japan					U.S.					
	Incidence			Mortality		Incidence			Mortality		
	<sup>a</sup> Year (95% CI)	<sup>a</sup> Modeled ASR	<sup>a</sup> APC (95% CI)	<sup>a</sup> Year (95% CI)	<sup>a</sup> Modeled ASR	<sup>a</sup> Year (95% CI)	<sup>a</sup> Modeled ASR	<sup>a</sup> APC (95% CI)	<sup>a</sup> Year (95% CI)	<sup>a</sup> Modeled ASR	<sup>a</sup> APC (95% CI)
Trend 1			<b>0.9 (0.6 - 1.2)</b>		-0.4 (-0.8 - 0.0)			0.4 (-0.1 - 0.9)			<b>-0.9 (-1.4 - -0.5)</b>
Joinpoint 1				2005 (2003 - 2008)	1.24	2007 (2002 - 2009)	4.39		2002 (1999 - 2007)	2.52	
Trend 2					<b>-2.5 (-2.9 - -2.1)</b>			3.9 (-3.6 - 12.0)			<b>-2.0 (-2.6 - -1.5)</b>
Joinpoint 2						2010 (2008 - 2013)	4.93		2008 (2007 - 2011)	2.14	
Trend 3								0.1 (-1.4 - 1.6)			-0.3 (-0.8 - 0.3)

<sup>a</sup>Joinpoints, ASR and APC estimated by joinpoint regression analysis in males and females are shown. Statistically significant APCs are highlighted in bold.

95% CI; 95% confidence interval, ASR; age standardized rate, APC; annual percent change

# Supplementary Figure 1



## **Supplementary Figure legend**

### **Supplementary Figure 1. Trends in age-standardized mortality and incidence rate of multiple myeloma sorted by sex**

Age-standardized mortality and incidence rate sorted by sex of multiple myeloma in (A) Japan and (B) the U.S. World standard population was applied. White circles indicate the observed incidence rate, black diamonds indicate the observed mortality rate, and lines indicate modeled rates estimated by joinpoint regression analysis. Vertical lines at left show the first phase I/II study of a novel agent and those at right show the first approval of a novel agent.