

Fig. S1. Relative risk of sensory deficit after intercostobrachial nerve dissection (control surgery) or preservation (experimental surgery) in randomized (RCTs) and nonrandomized trials (nRCTs).

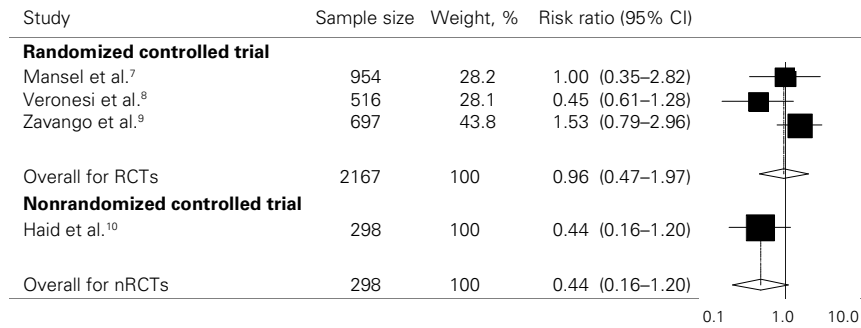


Fig. S2. Relative risk of death after axillary lymph node dissection (control surgery) or sentinel lymph node biopsy (experimental surgery) in randomized (RCTs) and nonrandomized trials (nRCTs).

Appendix 1 to Edwards JP, Kelly EJ, Lin Y, et al. Meta-analytic comparison of randomized and nonrandomized studies in breast cancer surgery. *Can J Surg* 2012.

DOI: 10.1503/cjs.023410

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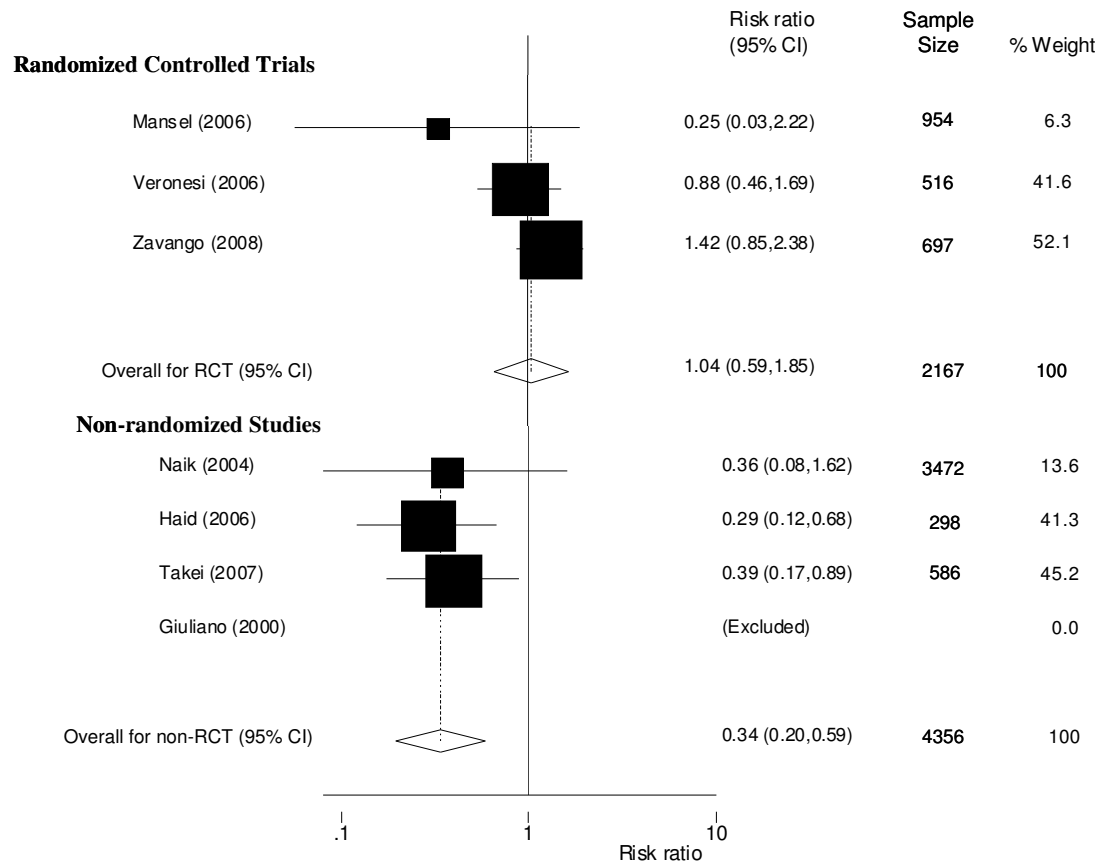


Fig. S3. Relative risk of recurrence after axillary lymph node dissection (control surgery) or sentinel lymph node biopsy (experimental surgery) in randomized (RCTs) and nonrandomized trials (nRCTs).

Appendix 1 to Edwards JP, Kelly EJ, Lin Y, et al. Meta-analytic comparison of randomized and nonrandomized studies in breast cancer surgery. *Can J Surg* 2012.

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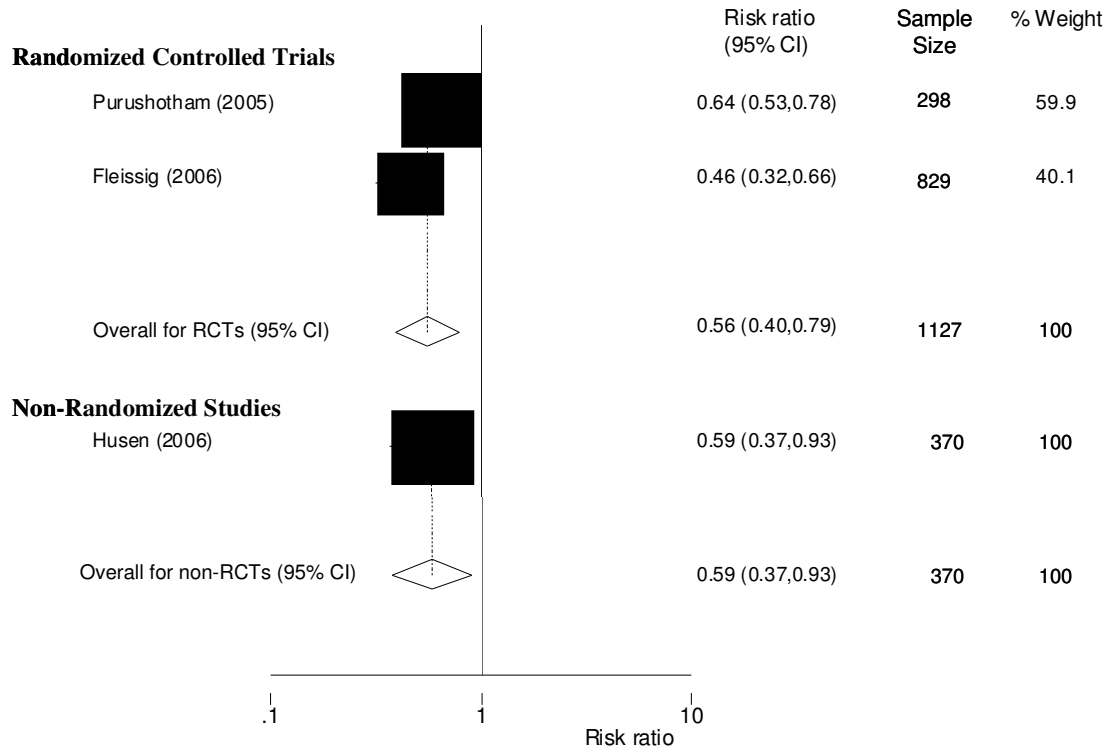


Fig. S4. Relative risk of axillary numbness after axillary lymph node dissection (control surgery) or sentinel lymph node biopsy (experimental surgery) in randomized (RCTs) and nonrandomized trials (nRCTs).

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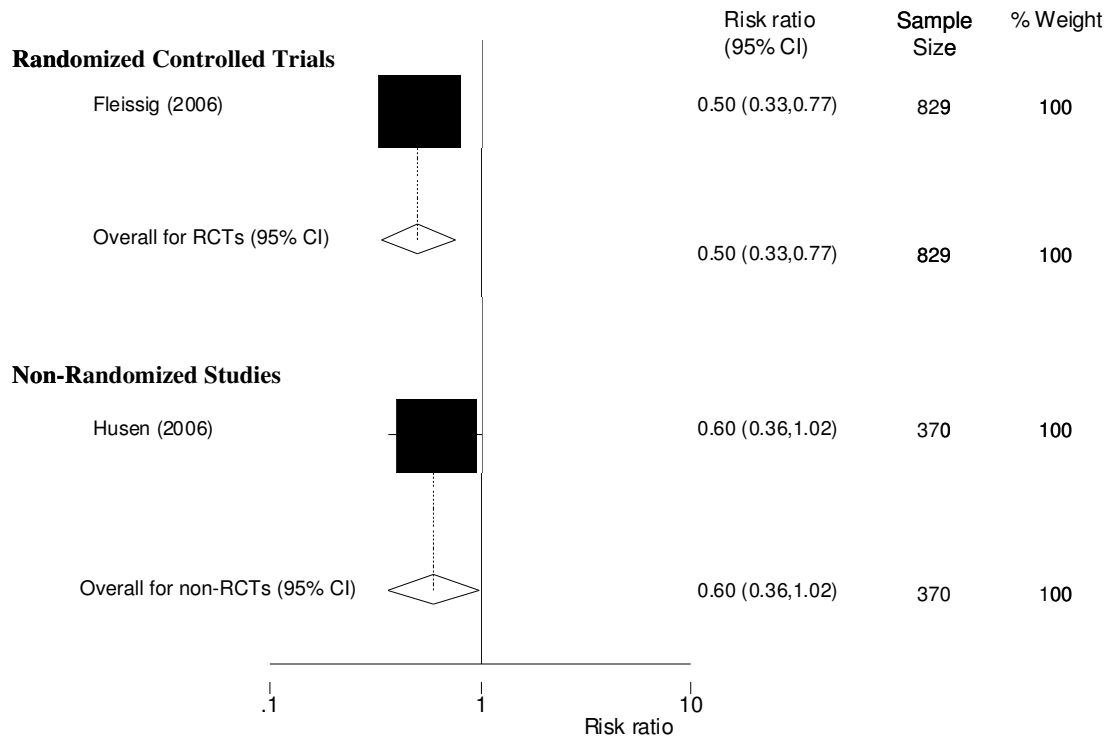


Fig. S5. Relative risk of arm swelling after axillary lymph node dissection (control surgery) or sentinel lymph node biopsy (experimental surgery) in randomized (RCTs) and nonrandomized trials (nRCTs).

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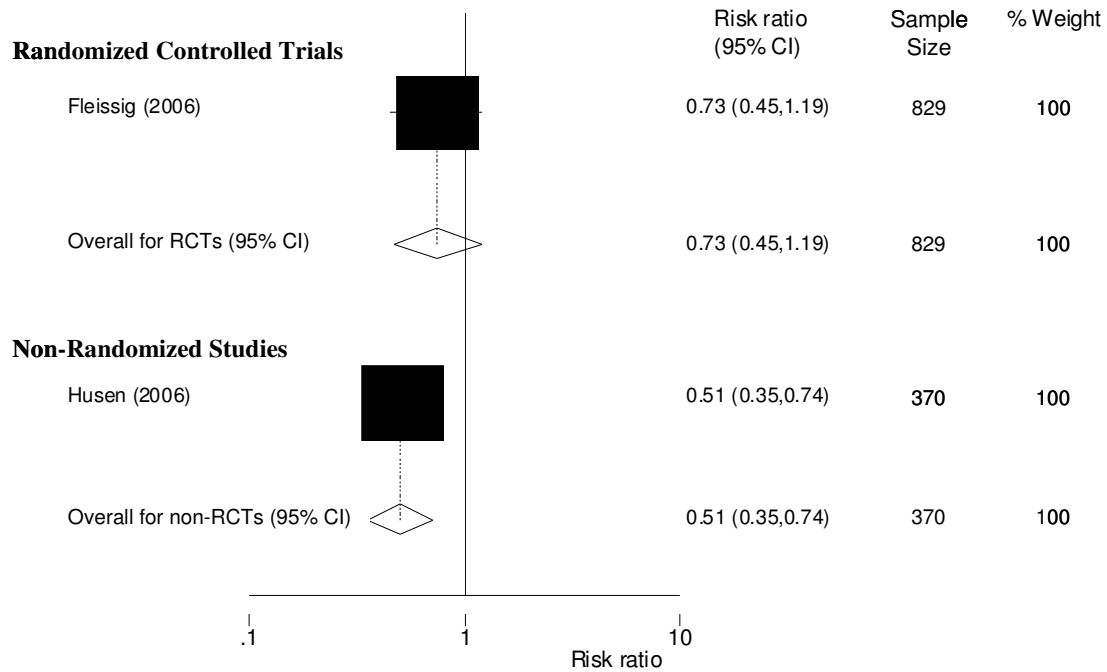


Fig. S6. Relative risk of reduced arm mobility after axillary lymph node dissection (control surgery) or sentinel lymph node biopsy (experimental surgery) in randomized (RCTs) and nonrandomized trials (nRCTs).

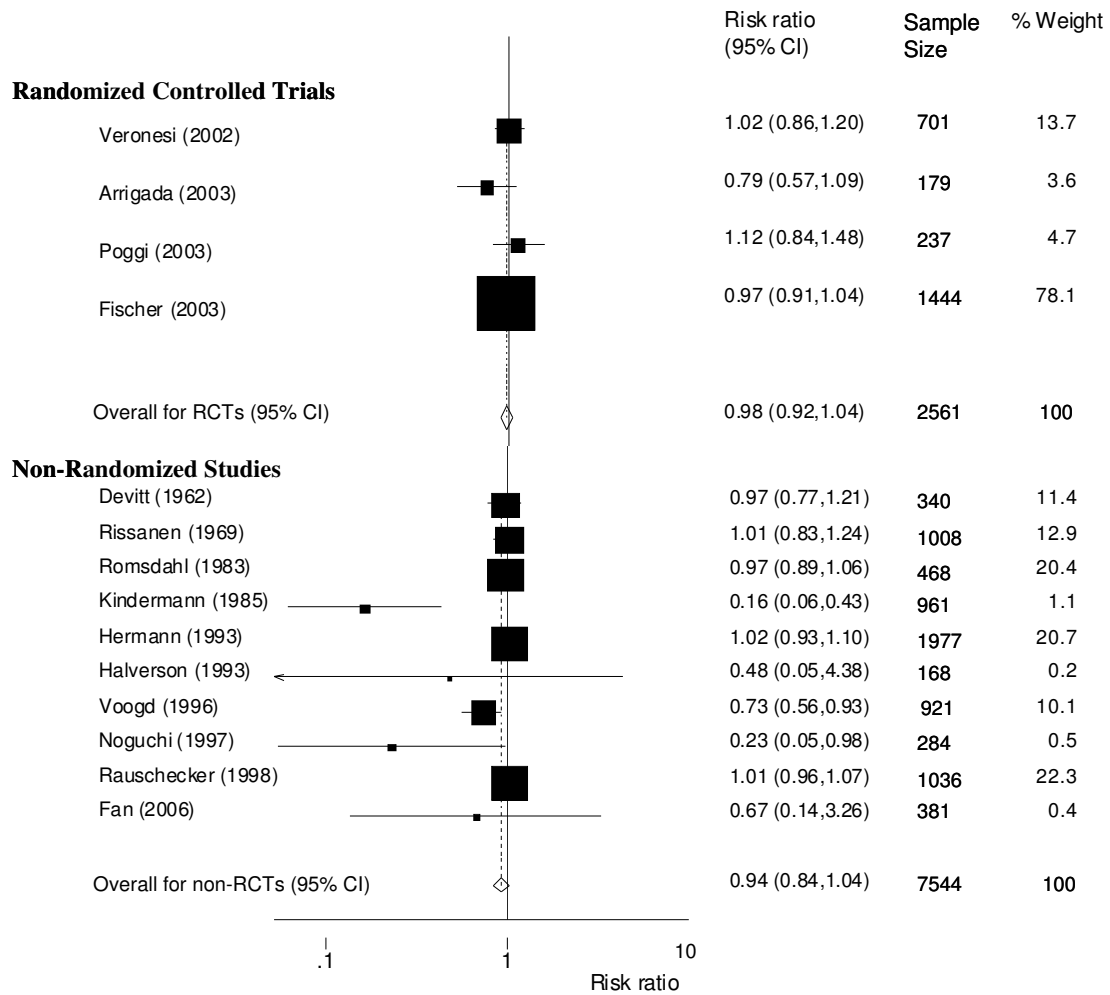


Fig. S7. Relative risk of death after mastectomy (control surgery) versus breast conserving therapy (experimental surgery) in randomized (RCTs) and nonrandomized trials (nRCTs).

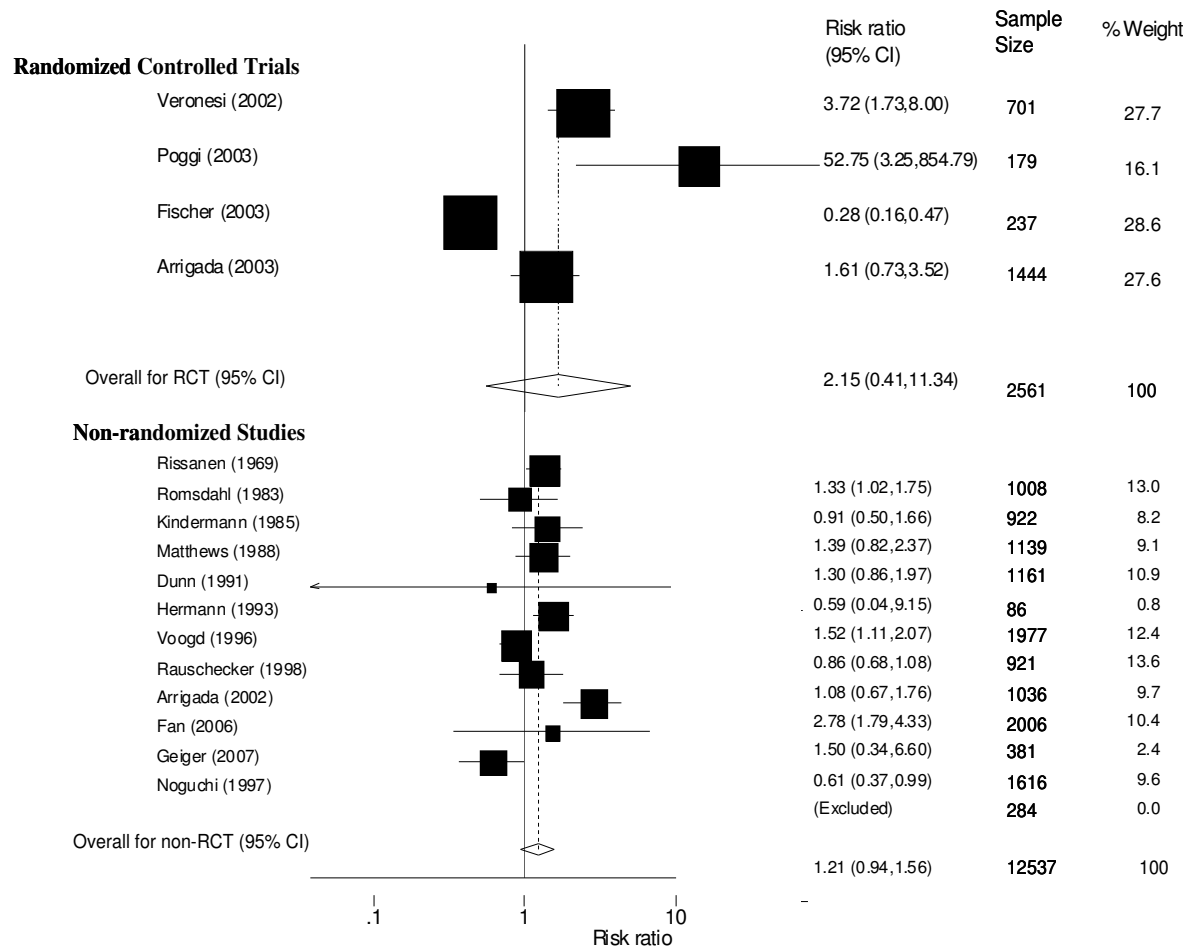


Fig. S8. Relative risk of recurrence after mastectomy (control surgery) versus breast conserving therapy (experimental surgery) in randomized (RCTs) and nonrandomized trials (nRCTs).

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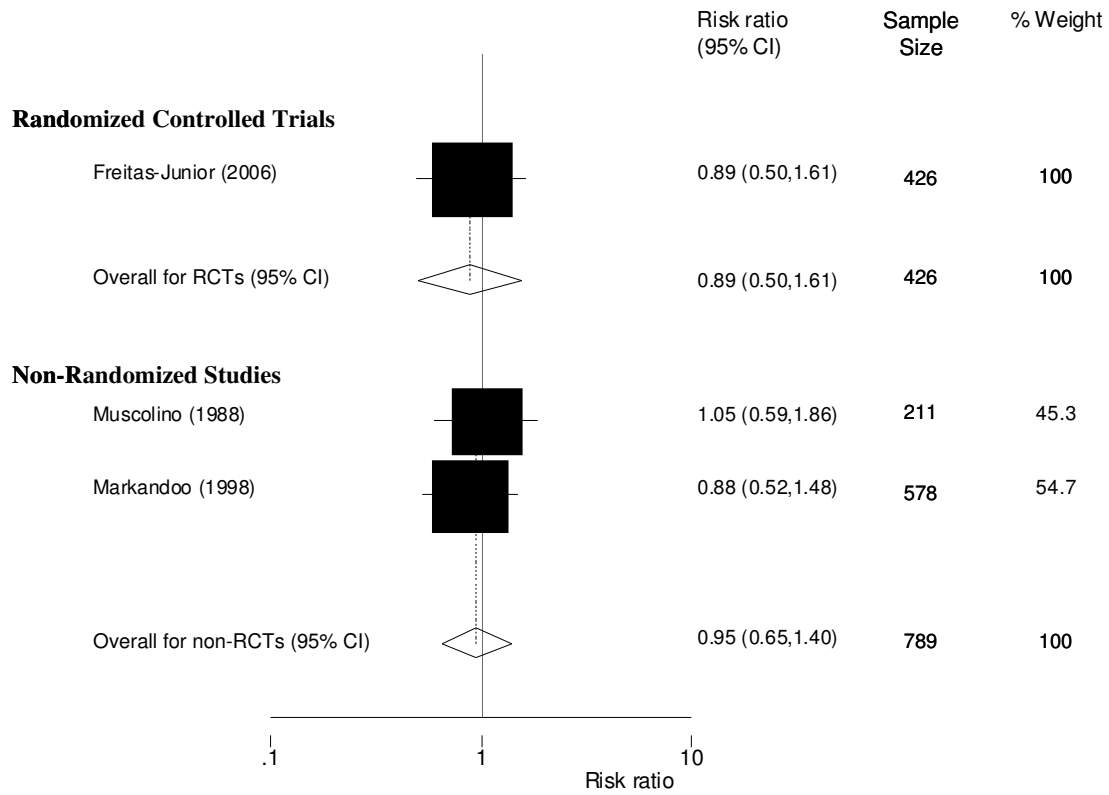


Fig. S9. Meta-analysis of total number of lymph nodes removed modified radical mastectomy with the pectoral muscle dissected (control surgery) versus preserved (experimental surgery) in randomized (RCTs) and nonrandomized trials (nRCTs).

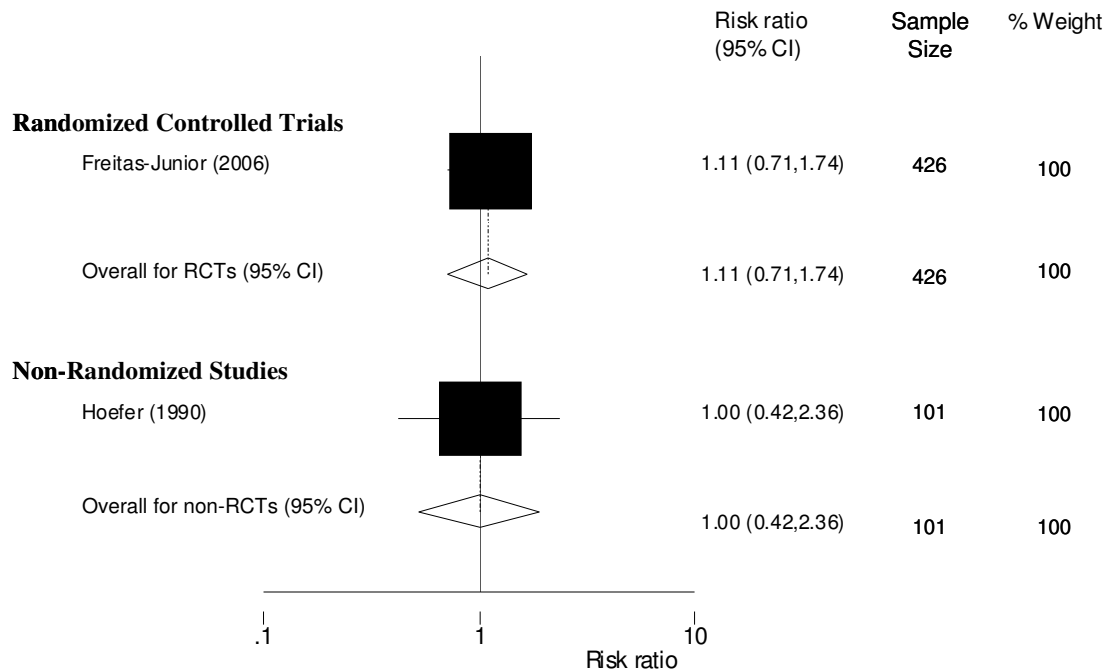


Fig. S10. Relative risk of complications after modified radical mastectomy with the pectoral muscle dissected (control surgery) versus preserved (experimental surgery) in randomized (RCTs) and nonrandomized trials (nRCTs).

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