



S3 Fig. Management and clinical course of lacrimal drainage obstruction (LDO). Among the 53 patients with LDO, 18 patients who had symptoms for less than four weeks started topical tobramycin and dexamethasone eye drops. If the LDO was improved at a 4-week follow-up, as documented by the decreased tear meniscus height and enhanced FDDT results, then the patients continued the eye drops and were regularly followed up along with lacrimal probing and irrigation until the completion of S-1 chemotherapy. This resulted in successful management of the LDO in six patients (33%, 6/18). The remaining 12 patients, who did not improve with the eye drops, were counseled on the option of surgical management, and one of them underwent bicanalicular silicone intubation. The 35 patients who had symptoms of LDO for more than four weeks were primarily counseled on the surgical management and 22 of them underwent bicanalicular silicone intubation (plus concurrent punctoplasty in the cases of punctal occlusion). Among the 23 patients who underwent silicone intubation, the epiphora improved in 19. The other four patients, without symptom improvement after the silicone intubation, were recommended to undergo dacryocystorhinostomy. One of them underwent dacryocystorhinostomy, and the epiphora finally improved.