**Supplementary Figure legend**

**Supplementary Figure 1. Management of high non-chylous discharge**

A 62 year-old-male underwent pancreaticoduodenectomy for pancreatic head cancer invading to the SMV after neoadjuvant chemotherapy. On POD 2, 20 mg/day of furosemide and 50 mg/day of potassium canrenoate were started because the amount of discharge was more than 1,000 mL. The discharge level increased up to 2,500 mL/day on POD 7, and 400 μg/day of octreotide was used. Due to the uncontrollable non-chylous discharge, 7.5 mg/day of tolvaptan was used on POD 15, with increase of furosemide and potassium administered. After the treatment, the amount of discharge gradually decreased, and the patient was discharged on POD 37. The highest dairy amount of non-chylous discharge was 4,070 mL, and the total discharge amount was 61,642 mL. Serum albumin level remained to be low although the albumin preparation was repeatedly administered.

Abbreviation: POD, postoperative day.