

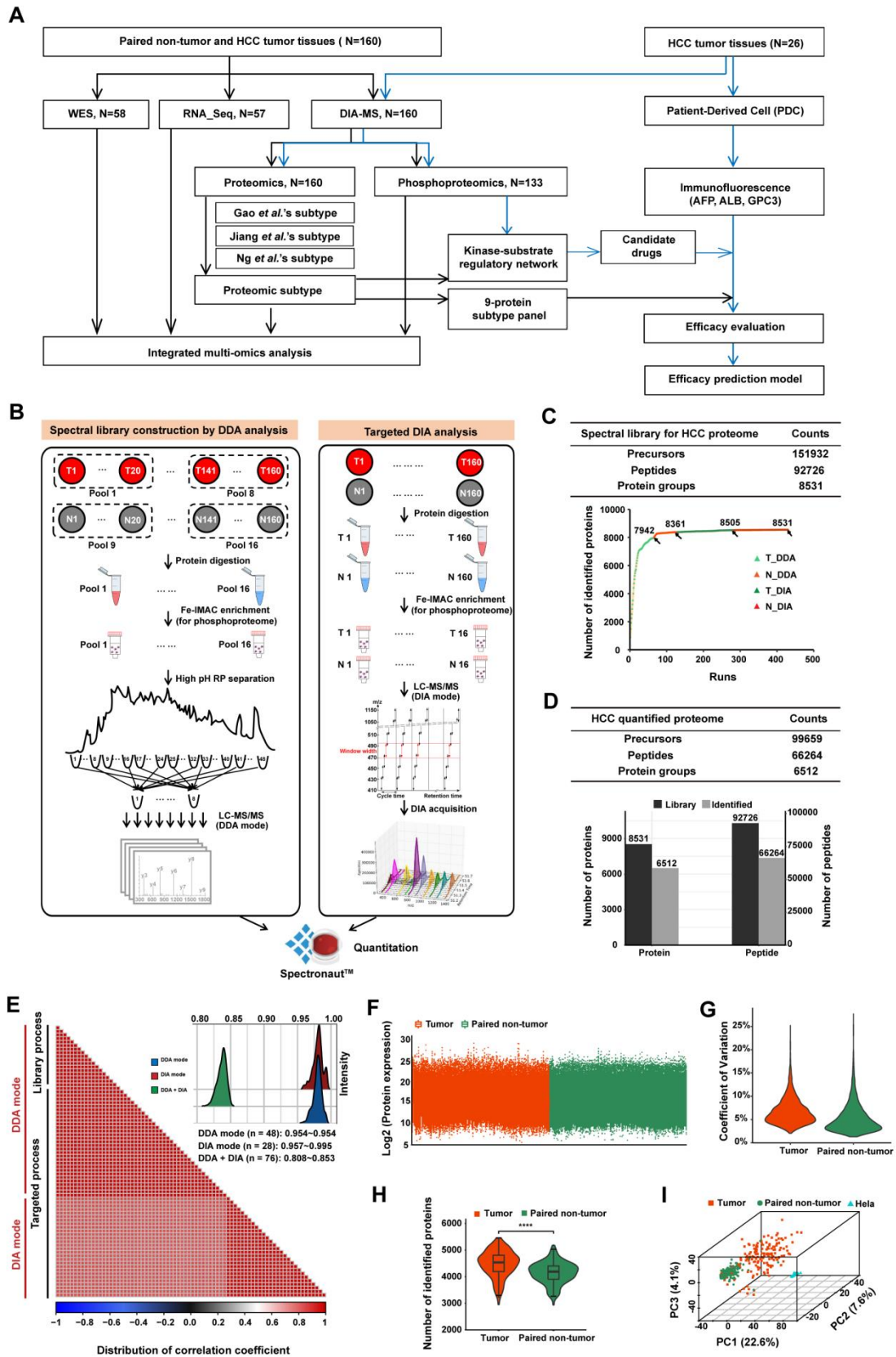
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**Supplemental information**

**Integrated omics landscape of hepatocellular  
carcinoma suggests proteomic subtypes  
for precision therapy**

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1 **SUPPLEMENTAL FIGURES**



3 **Figure S1. Study design and overview of proteomic landscape of HCC. Related to Figure 1.**

4 (A) Overview of multi-omics landscape of HCC. 160 paired tumor and non-tumor HCC tissues were  
5 subjected to multi-omics analysis. All tissues were performed with proteomic analysis to verify the  
6 proteomic subtypes of HCC and construct prediction model, of which 132 paired tissues were selected  
7 for phosphoproteomic analysis to further screen for drug targets, and of which 58 paired tissues were  
8 selected for whole-exome sequencing (WES), and of which 57 paired tissues were selected for total  
9 transcriptome sequencing (RNA\_Seq) for integrated multi-omics analysis. For constructing the  
10 subtype-based therapeutic effect prediction model for candidate drugs, we also performed proteome  
11 and phosphoproteome profiling on 26 paired tumor and non-tumor HCC tissues before PDC culture,  
12 respectively.

13 (B) Overview of the proteomics workflow. To construct the spectral library, the HCC tumor and paired  
14 non-tumor tissues were divided into 16 pool samples, and each pool sample created by pooling 20  
15 samples with equal contribution. The pool samples were then digested, fractionated and subjected to  
16 LC-MS/MS with DDA mode. For individual samples, the digestion and LC-MS/MS analysis with DIA  
17 mode were performed individually. The proteins were detected and quantified using software  
18 Spectronaut.

19 (C) Overview of the spectral library HCC tissues. The upper table shows the information of the spectral  
20 library, including precursors, peptides and protein groups, fractions and the addition of DIA data  
21 significantly increased the coverage of reference spectral library. The lower panel was the protein  
22 number accumulation curve distinguishing the sample type and the data acquisition mode.

23 (D) Summary of the DIA proteome of HCC tissues. The upper table shows the information of the DIA  
24 proteome, including precursors, peptides and protein groups. The lower figure shows the proportion of  
25 identified proteins and peptides in the reference library.

26 (E) Robust and precise proteomic platforms. The bottom-left half of the panel represents the pairwise  
27 Pearson's correlation coefficients of the Hela cell samples through library process and targeted process  
28 including DDA mode (technical replicate  $n = 48$ ) and DIA mode (technical replicate  $n = 28$ ), and the  
29 top-right half of the panel depicts the distribution of Pearson's correlation of Hela samples for DDA  
30 mode, DIA mode and DDA+DIA mode.

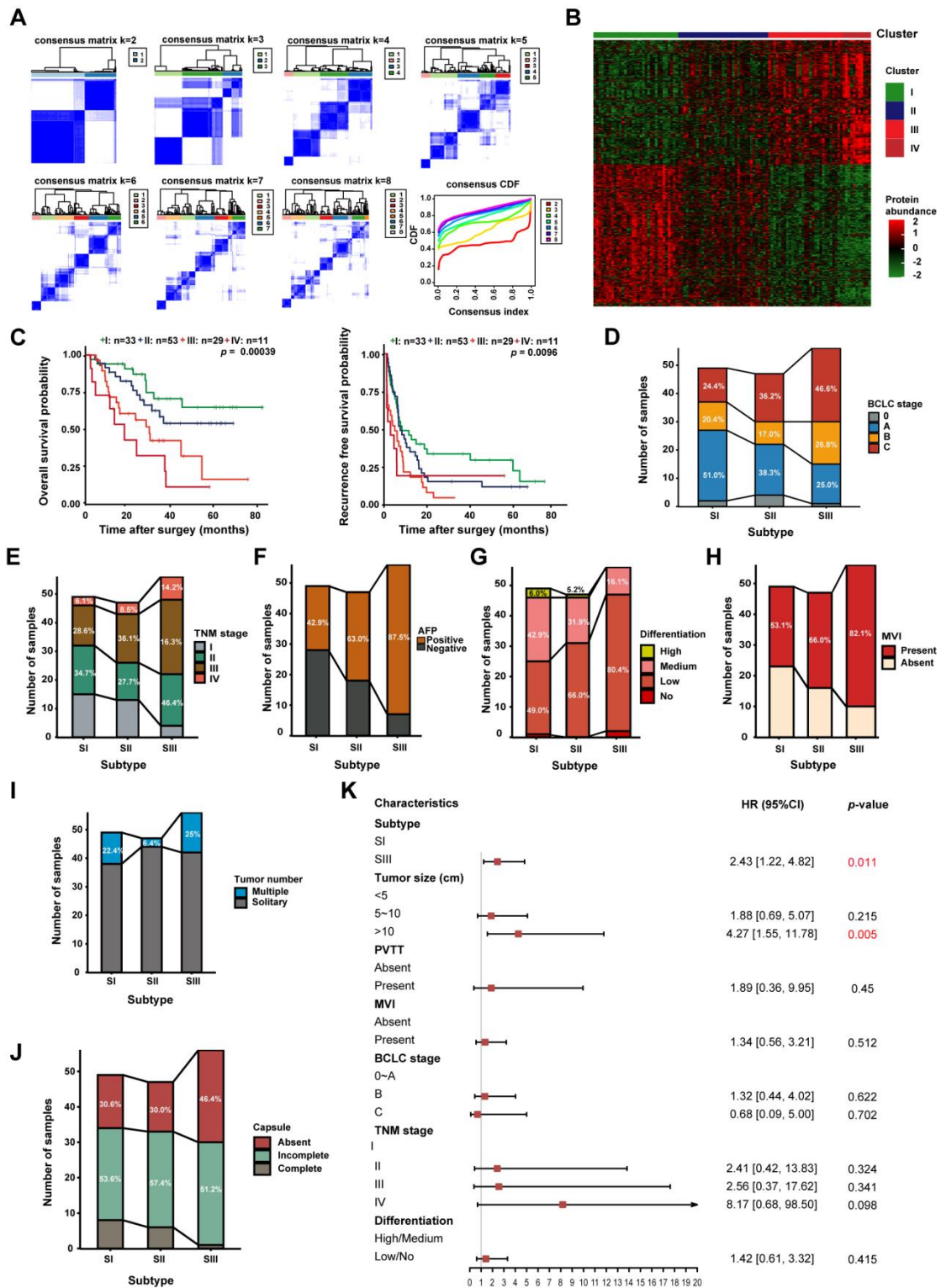
31 (F) Distribution of protein abundance identified in HCC tumor (biological replicate  $n = 152$ ) and paired  
32 non-tumor tissues (biological replicate  $n = 152$ ). Red presents tumor samples, Green denotes paired  
33 non-tumor samples. In the box plots, the middle bar represents the median, and the box represents the  
34 interquartile range; bars extend to  $2 \times$  the interquartile range.

35 (G) Distribution of coefficient of variation of HCC tumor and paired non-tumor samples.

36 (H) The protein number shows significant difference between HCC tumors and paired non-tumors  
37 (two-tailed Wilcoxon test). Boxplots show median (central line), upper and lower quartiles (box limits),  
38  $1.5 \times$  interquartile range (whiskers).

39 (I) Principal component analysis. The tumor samples exhibit higher heterogeneity than the paired non-  
40 tumor samples.

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42

43 **Figure S2. The proteomic subtypes of HCC. Related to Figure 1.**

44 (A) Consensus clustering of HCC tumors based on the relative abundance of most variant proteins.

45 (B) The heatmap of the relative abundance of signature proteins ( $\log_2$ -transformed) in four clusters (cluster I = 33, cluster II = 53, cluster III = 29, cluster IV = 11).

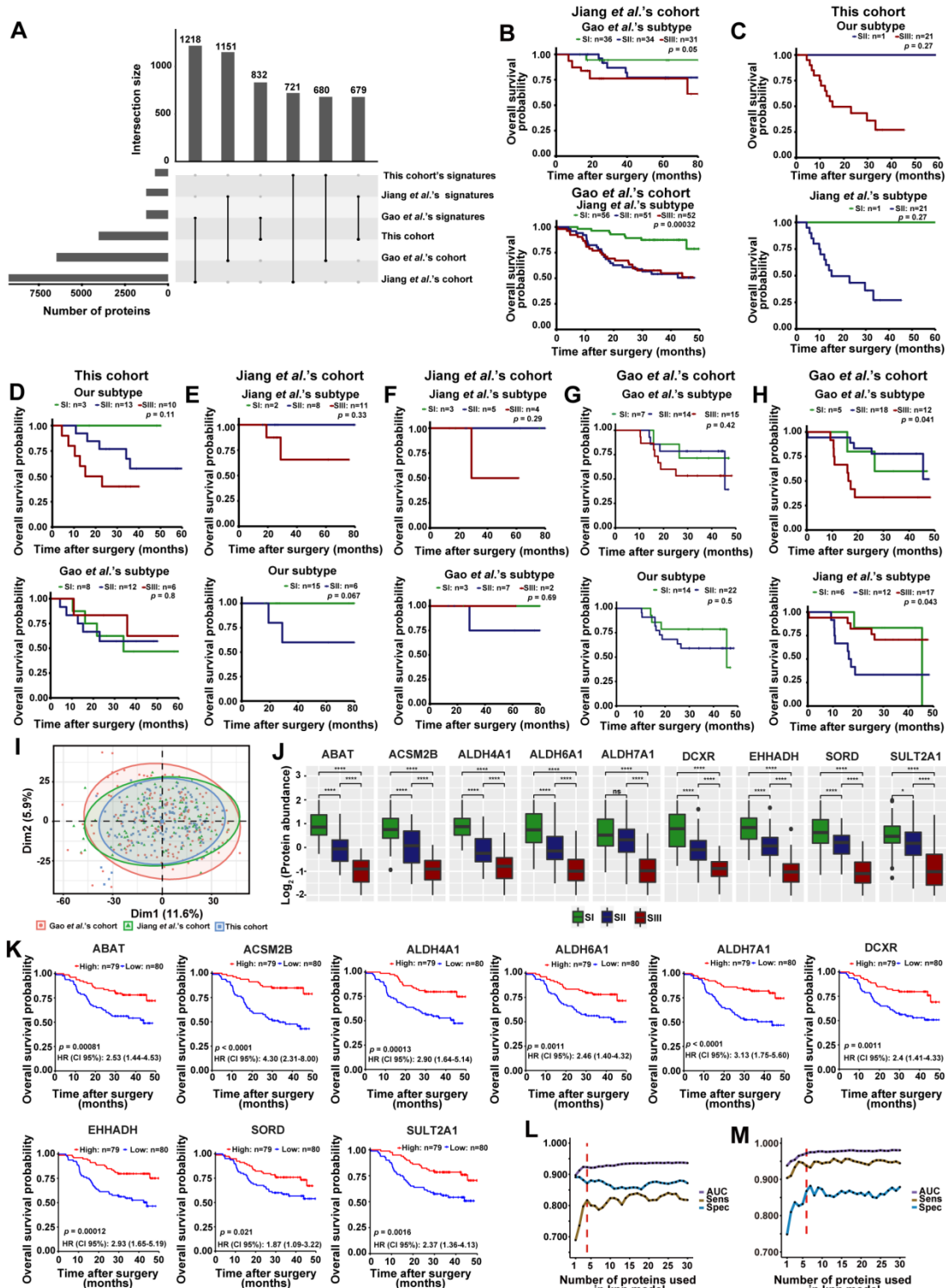
46 (C) Kaplan-Meier curves of OS and RFS for each cluster. The  $p$  values were calculated by log-rank

47 test. Due to the small sample size of the fourth cluster and its similar protein expression and prognosis

48 to the third cluster, it was merged with the third cluster as an integrated subtype.

49

50 (D-J) Association of BCLC stage (D), TNM stage (E), serum AFP levels (F), tumor differentiation (G),  
51 MVI (H), tumor number (I) tumor capsule (J) with proteomic subtypes.  
52 (K) Multivariable Cox analysis of the proteomic subtypes with known clinical and pathologic risk  
53 factors for progression of HCC (log-rank test).  
54



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56 **Figure S3. Cross validation of proteomic subtypes in 3 cohorts and the simplified panel for**  
 57 **distinguishing HCC proteomic subtypes. Related to Figure 2.**

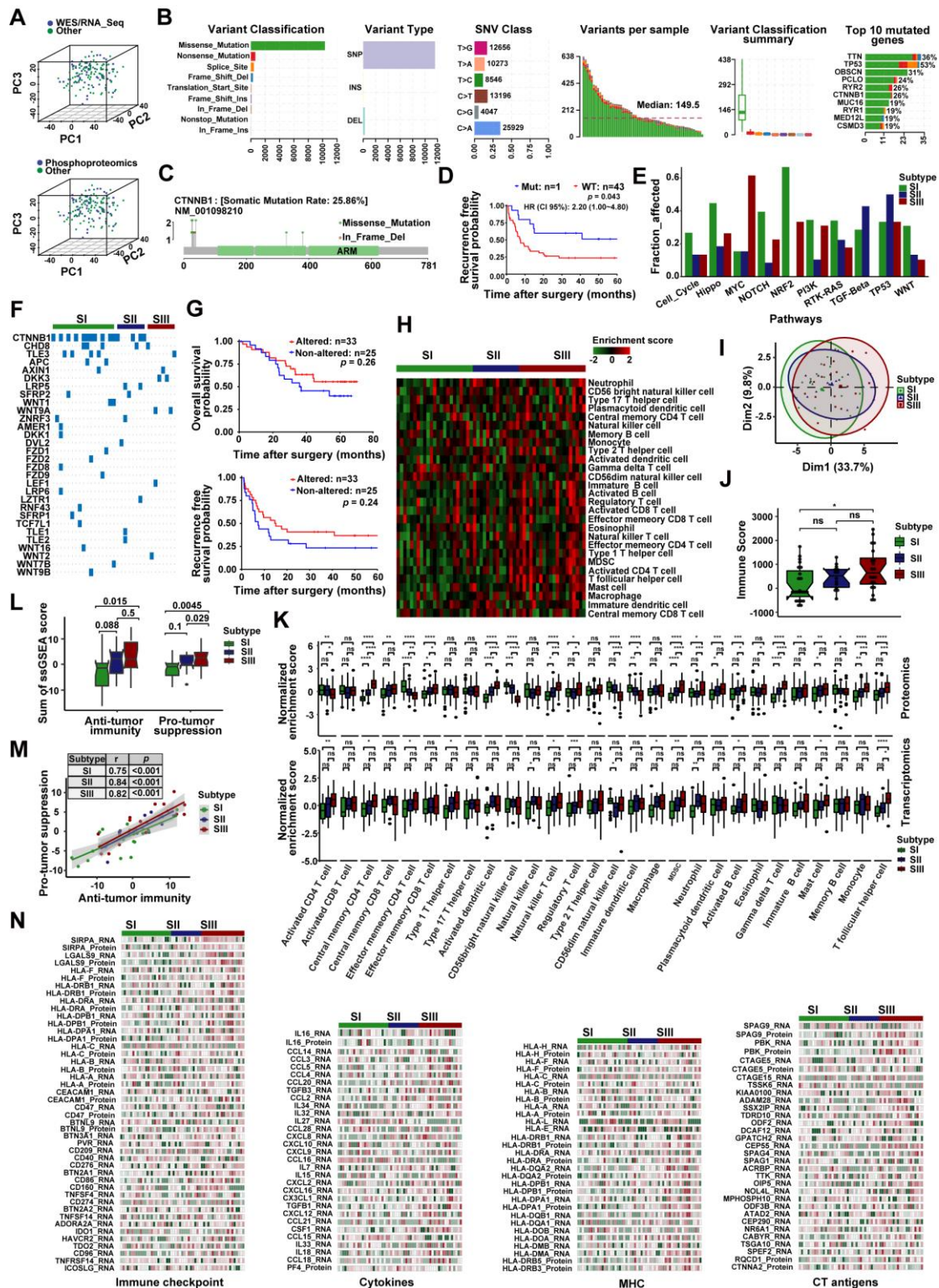
58 (A) The upset diagram shows three subtype-specific signatures in three cohorts (Gao *et al.*'s cohort: N = 159,  
 59 = 159, Jiang *et al.*'s cohort: N = 101, This cohort: N = 152).

60 (B) The validation of Jiang *et al.*'s and Gao *et al.*'s subtype-specific signatures in the cohort of each  
 61 other. The Kaplan-Meier curves of OS were shown. The  $p$  values were calculated by log-rank test.

62 (C-H) Prognostic difference of the discordant patients based on Jiang *et al.*'s subtypes in our cohort

63 (C), Gao *et al.*'s in our cohort (D), our subtypes in Jiang *et al.*'s cohort (E), Gao *et al.*'s subtypes in  
64 Jiang *et al.*'s cohort (F), our subtypes in Gao *et al.*'s cohort (G), Jiang *et al.*'s subtypes in Gao *et al.*'s  
65 cohort (H). The  $p$  values were calculated by log-rank test.  
66 (I) The PCA plot among 3 cohorts after removing the batch effect.  
67 (J) The abundance of 9 proteins altered among the 3 subtypes. The  $p$  values were calculated with two-  
68 tailed Wilcoxon test with \*,  $p < 0.05$ ; \*\*,  $p < 0.01$ ; \*\*\*,  $p < 0.001$ ; \*\*\*\*,  $p < 0.001$ . Boxplots show  
69 median (central line), upper and lower quartiles (box limits),  $1.5 \times$  interquartile range (whiskers).  
70 (K) The Kaplan-Meier curves of OS and RFS for 9 proteins.  $p$  values were calculated by log-rank test.  
71 (L-M) The ROC accuracy, sensitivity and specificity for SI (L) and SIII (M) distinguishing in the  
72 training data set.  
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75 **Figure S4. Mutation and immune landscape of 3 HCC proteomic subtypes. Related to Figure 3.**

76

77 (A) The PCA plot between individual omics cohort and proteomics cohort. The upper panel was

78 WES/RNA-Seq cohort, and lower panel was phosphoproteomics cohort.

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80 (B) Summary of the mutation landscape.

81

82 (C) Lollipop plot of CTNNB1 alterations with ARM domain annotation. Mutations was annotated with

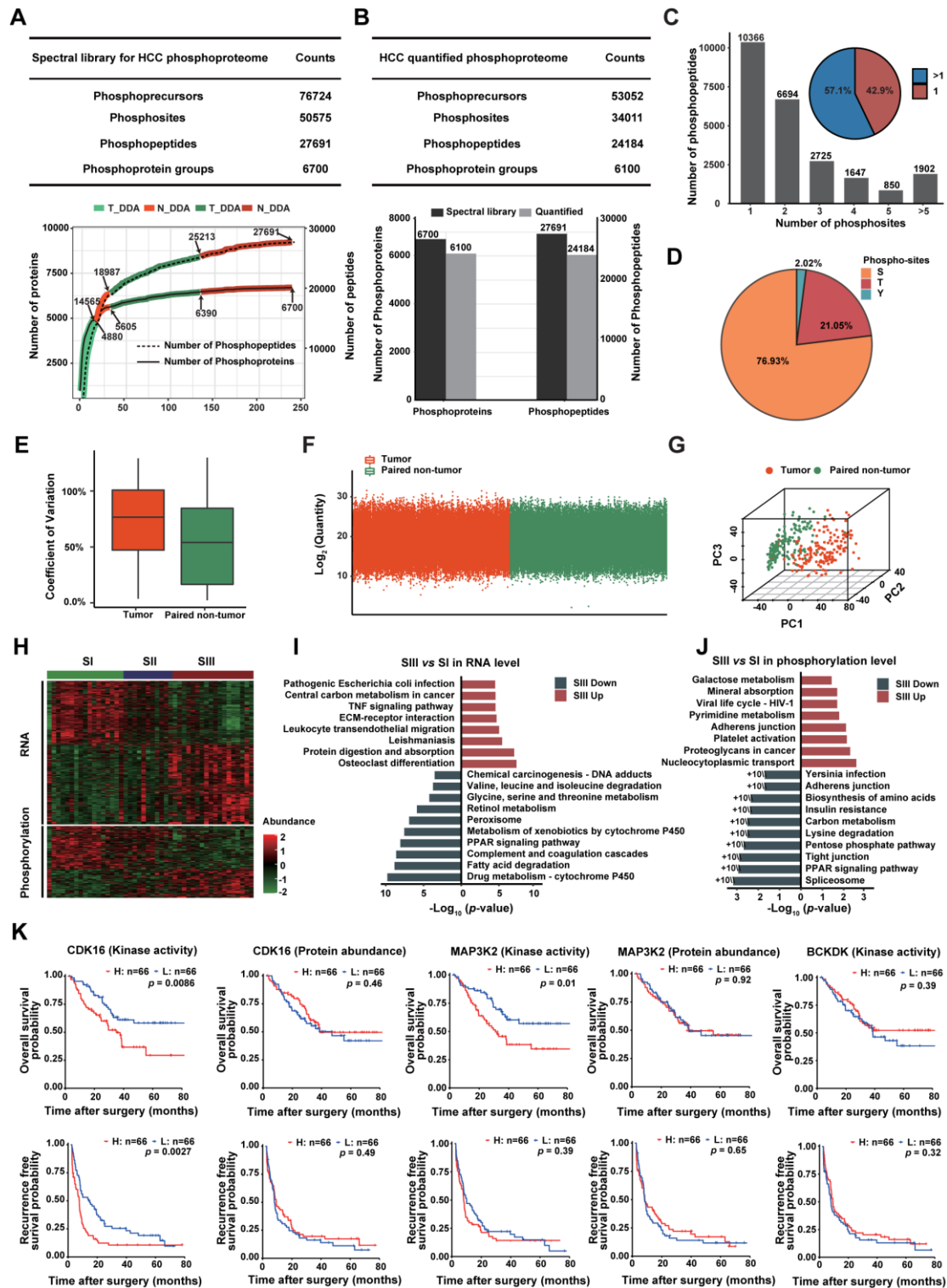
83 gray lines, green circles were missense mutation and red circles were in-frame deletion.

84

85 (D) Kaplan-Meier curves for RFS of patients with CTNNB1 mutation or wild-type (log-rank test).



82 (E) Mutations-based pathways enriched in 3 proteomic subtypes.  
83 (F) Mutation frequency of the genes involved in the Wnt pathway.  
84 (G) Kaplan-Meier curve of WNT pathway alterations and OS/RFS (log-rank test).  
85 (H) Heatmap shows the immune cell populations of 3 proteomic subtypes in transcriptome.  
86 (I) The principal component analysis plot of immune scores of immune cell populations based on  
87 transcriptomic data in 3 proteomic subtypes.  
88 (J) Boxplot showing proteomic- and transcriptomic-based immune cell abundance stratified by 3  
89 proteomic subtypes. Significance was evaluated by two-tailed Wilcoxon test with \*,  $p < 0.05$ ; \*\*,  $p <$   
90  $0.01$ ; \*\*\*,  $p < 0.001$ ; \*\*\*\*,  $p < 0.001$ . The box portion is defined by two lines at the 75th percentile and  
91 the 25th percentile of the values. The middle line indicates 50th percentile (median).  
92 (K) Transcriptome-based immune scores in 3 proteomic subtypes. Significance was evaluated by a two-  
93 tailed Wilcoxon test. Boxplots show median (central line), upper and lower quartiles (box limits),  $1.5 \times$   
94 interquartile range (whiskers).  
95 (L) Transcriptomic-based immune scores of immune activation and immunosuppression in 3 proteomic  
96 subtypes (two-tailed Wilcoxon test). Boxplots show median (central line), upper and lower quartiles (box  
97 limits),  $1.5 \times$  interquartile range (whiskers).  
98 (M) The correlation between immune activation (anti-tumor immunity) and immunosuppression (pro-  
99 tumor suppression) based on transcriptome in 3 proteomic subtypes. Pearson's correlation coefficient ( $r$ )  
100 and  $p$  values are present in the table. The  $p$  values were calculated using the Pearson's correlation method.  
101 (N) The expression of HLA molecule, checkpoints, CT antigens and cytokines in three proteomic  
102 subtypes.  
103



104

105 **Figure S5. Phosphoproteomic and kinase profile of 3 proteomic subtypes of HCC. Related to**  
 106 **Figure 4.**

107 (A) Overview of the spectral library of HCC tissues for phosphoproteomics. The upper table shows the  
 108 information of the spectral library, including phosphoprecursors, phosphosites, phosphopeptides and  
 109 phosphoprotein groups. The lower panel was the phosphoprotein number accumulation curve  
 110 distinguishing the sample type and the data acquisition mode.

111 (B) Summary of the DIA proteome of HCC tissues. The upper table shows the information of the DIA

112 phosphoproteome, including phosphoprecursors, phosphosites, phosphopeptides and phosphoprotein  
113 groups. The lower figure shows the proportion of identified phosphoproteins and phosphopeptides in  
114 the reference library.

115 (C) Distribution of phosphopeptides depending on their number of p-sites.

116 (D) Distribution of phosphorylation serine (S), phosphorylation threonine (T) and phosphorylation  
117 tyrosine (Y) sites.

118 (E) Distribution of coefficient of variation of HCC tumor and paired non-tumor samples. Boxplots  
119 show median (central line), upper and lower quartiles (box limits),  $1.5 \times$  interquartile range (whiskers).

120 (F) Distribution of proteins abundance identified in HCC tumor ( $n = 132$ ) and paired non-tumor tissues  
121 ( $n = 132$ ). Red presents tumor samples, Green denotes paired non-tumor samples. In the box plots, the  
122 middle bar represents the median, and the box represents the interquartile range; bars extend to  $2 \times$  the  
123 interquartile range.

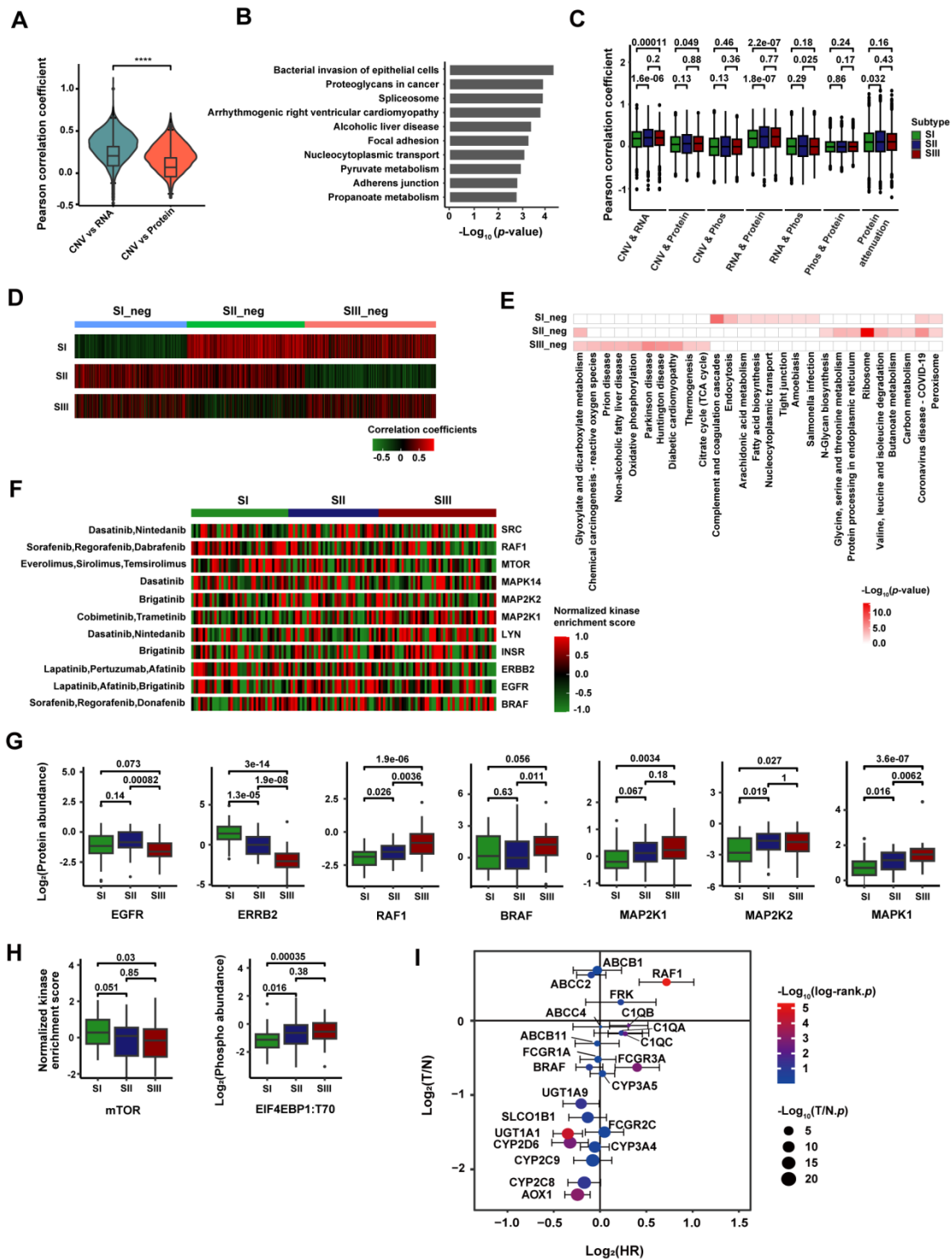
124 (G) Principal component analysis. The tumor samples exhibit higher heterogeneity than the paired non-  
125 tumor samples.

126 (H) The abundance of RNA and phosphopeptides with the highest variation among 3 proteomic  
127 subtypes (SI = 17, SII = 11, SIII = 18).

128 (I-J) Pathway alterations in SIII versus SI at RNA level (I) and phosphorylation level (J).

129 (K) Kaplan-Meier curves of OS and RFS for kinase activity and kinase abundance in HCC. *p* values  
130 were calculated by log-rank test.

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132

133 **Figure S6. Integrated multi-omics analysis and key drug target screening for 3 proteomic**  
 134 **subtypes of HCC. Related to Figure 5 and Figure 6.**

135 (A) Comparisons of correlations between CNV vs RNA and CNV vs protein (two-tailed Wilcoxon test  
 136 with \*,  $p < 0.05$ ; \*\*,  $p < 0.01$ ; \*\*\*,  $p < 0.001$ ; \*\*\*\*,  $p < 0.0001$ ).

137 (B) The pathways enriched using negatively correlated RNA-proteins.

138 (C) Comparisons of correlations between every two individual omics. The  $p$  values were calculated  
 139 with two-tailed Wilcoxon test.

140 (D) Hierarchical clustering analysis map of significantly changed RNA-protein correlations among 3

141 proteomic subtypes. Pearson's correlation coefficients of 3 proteomic subtypes between matched RNA  
142 abundances and protein abundances were calculated.

143 (E) Functional enrichment for significant RNA-protein correlations in each cluster.

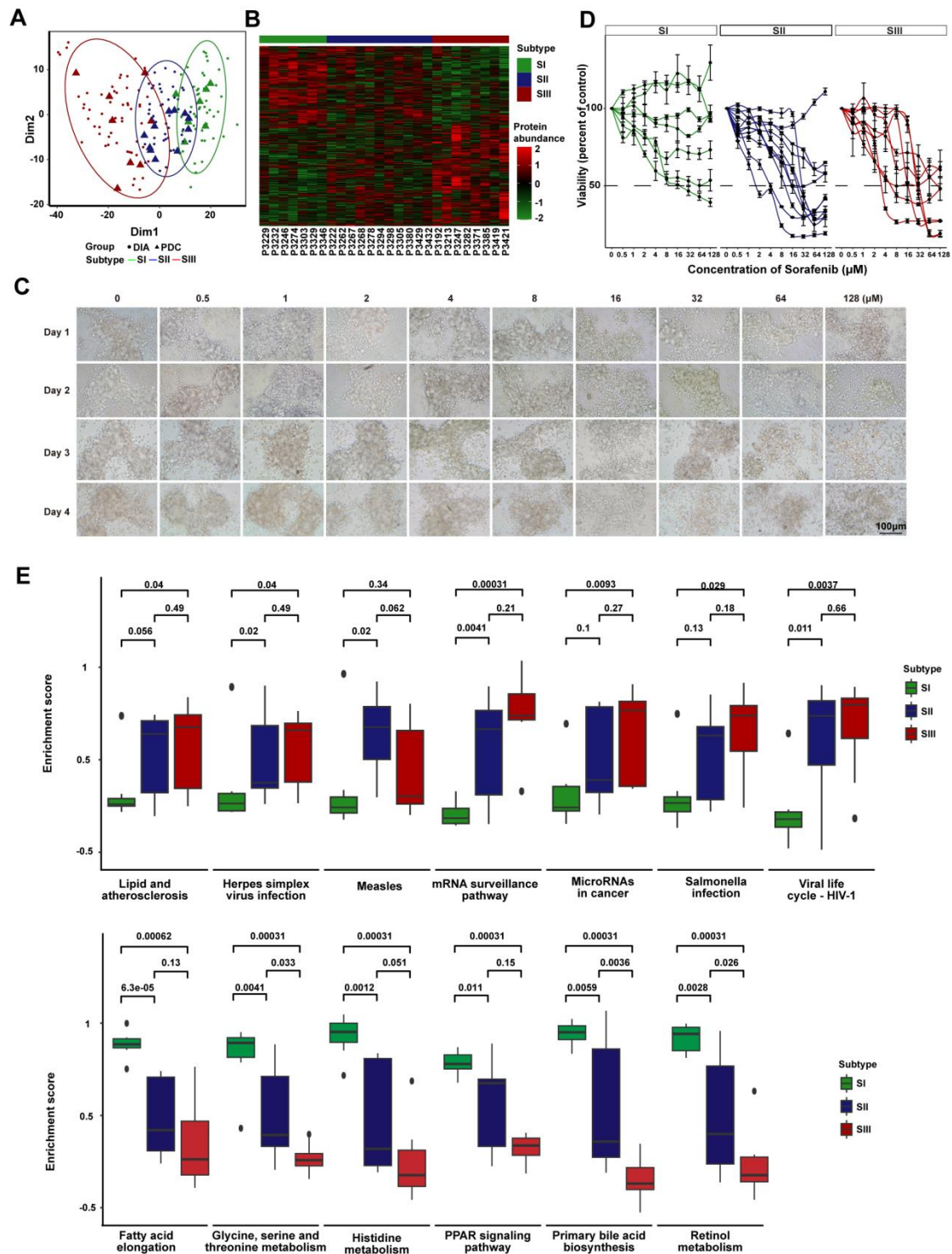
144 (F) The kinase activity of FDA-approved drug targets in 3 proteomic subtypes.

145 (G) The kinase abundance of RAF-MEK-ERK signaling pathway related proteins in 3 proteomic  
146 subtypes (two-tailed Wilcoxon test). Boxplots show median (central line), upper and lower quartiles  
147 (box limits),  $1.5 \times$  interquartile range (whiskers).

148 (H) The kinase activity of mTOR and its substrate EIF4EBP1 phosphorylation in 3 proteomic subtypes.  
149 The  $p$  values were calculated with two-tailed Wilcoxon test. Boxplots show median (central line),  
150 upper and lower quartiles (box limits),  $1.5 \times$  interquartile range (whiskers).

151 (I) The recurrence risk scores of each target from FDA-approved HCC clinical drugs. The x-axis  
152 indicates  $\log_2$ -transformed hazard ratio for each target (log-rank test); y-axis indicate  $\log_2$ -transformed  
153 T/N fold change for each target (two-tailed Wilcoxon test).





154

155 **Figure S7. Subtype-specific drug sensitivities based on PDC models. Related to Figure 7.**

156 (A) The principal component analysis plot of PDC samples and DIA samples from discovery cohort  
 157 based on proteomic data.

158 (B) The proteomic subtypes of HCC patients for PDCs. The heatmap was shown (SI = 7, SII = 11, SIII  
 159 = 8).

160 (C) A representative image of PDC cells at different treatment times and concentrations under  
 161 microscopic examination. Scale bar, 100  $\mu\text{m}$ .

162 (D) Dose-response curves of PDC cells to Sorafenib treatment for 3 proteomic subtypes, with an

163 endpoint measurement at 96 h (median  $\pm$  SD, n = 3 biological repeats).  
164 (E) The enrichment of pathways associated with Sorafenib sensitivity in 3 proteomic subtypes (two-  
165 tailed Wilcoxon test). Boxplots show median (central line), upper and lower quartiles (box limits), 1.5  
166  $\times$  interquartile range (whiskers).

Table S7. Prognosis of 22 drug targets related to HCC. Related to Figure 6.

Gene symbol	Log2 (FC)	T/N		OS		RFS
		<i>p</i> value	<i>p</i> value	HR [CI 95%]	<i>p</i> value	HR [CI 95%]
ABCB1	0.68	6.81E-10	4.32E-01	0.91 [0.71,1.16]	8.31E-01	0.98 [0.82,1.18]
ABCB11	-0.31	2.61E-03	7.12E-01	0.96 [0.78,1.19]	7.99E-01	0.98 [0.83,1.15]
ABCC2	0.61	1.07E-04	9.64E-01	1.00 [0.86,1.16]	2.43E-01	0.94 [0.84,1.05]
ABCC4	-0.08	3.46E-01	2.86E-01	1.17 [0.88,1.57]	9.65E-01	1.01 [0.82,1.24]
AOX1	-2.34	2.46E-23	1.80E-03	0.83 [0.74,0.93]	5.37E-04	0.85 [0.77,0.93]
BRAF	-0.63	1.67E-04	3.84E-01	0.94 [0.81,1.08]	1.21E-01	0.92 [0.84,1.02]
C1QA	-0.17	1.38E-02	4.00E-04	1.60 [1.23,2.07]	1.26E-01	1.17 [0.96,1.44]
C1QB	-0.07	2.89E-01	0.00E+0	1.50 [1.25,1.80]	3.38E-03	1.24 [1.07,1.43]
C1QC	-0.18	5.07E-02	4.00E-04	1.34 [1.14,1.57]	3.69E-03	1.21 [1.06,1.37]
CYP2C8	-2.18	2.46E-23	5.84E-01	0.96 [0.81,1.13]	5.85E-02	0.89 [0.79,1.00]
CYP2C9	-1.88	1.47E-23	8.78E-02	0.84 [0.69,1.03]	4.51E-01	0.95 [0.82,1.09]
CYP2D6	-1.64	5.53E-21	2.30E-03	0.77 [0.65,0.91]	1.32E-03	0.80 [0.70,0.92]

CYP3A4	-1.70	5.58E-19	1.84E-01	0.91 [0.78,1.05]	4.76E-01	0.96 [0.86,1.07]
CYP3A5	-0.71	4.45E-05	7.30E-01	0.98 [0.86,1.11]	7.05E-01	1.02 [0.93,1.12]
FCGR1A	-0.52	3.51E-05	1.96E-01	0.89 [0.76,1.06]	8.23E-01	0.99 [0.86,1.13]
FCGR2C	-1.50	4.72E-19	1.13E-01	0.85 [0.69,1.04]	6.47E-01	1.03 [0.90,1.19]
FCGR3A	-0.63	4.37E-10	3.20E-03	1.41 [1.12,1.78]	1.02E-03	1.32 [1.12,1.56]
FRK	0.25	1.30E-03	2.30E-02	1.53 [1.06,2.22]	2.46E-01	1.17 [0.90,1.52]
RAF1	0.52	4.25E-07	0.00E+0 0	1.87 [1.43,2.44]	1.97E-06	1.65 [1.34,2.02]
SLCO1B1	-1.30	2.57E-18	8.40E-02	0.86 [0.72,1.02]	1.99E-01	0.91 [0.79,1.05]
UGT1A1	-1.52	5.32E-18	5.00E-04	0.78 [0.67,0.90]	1.58E-05	0.79 [0.70,0.88]
UGT1A9	-1.12	1.00E-15	4.43E-02	0.84 [0.71,1.00]	4.08E-02	0.87 [0.76,0.99]

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