

**Cell Reports Medicine, Volume 5**

**Supplemental information**

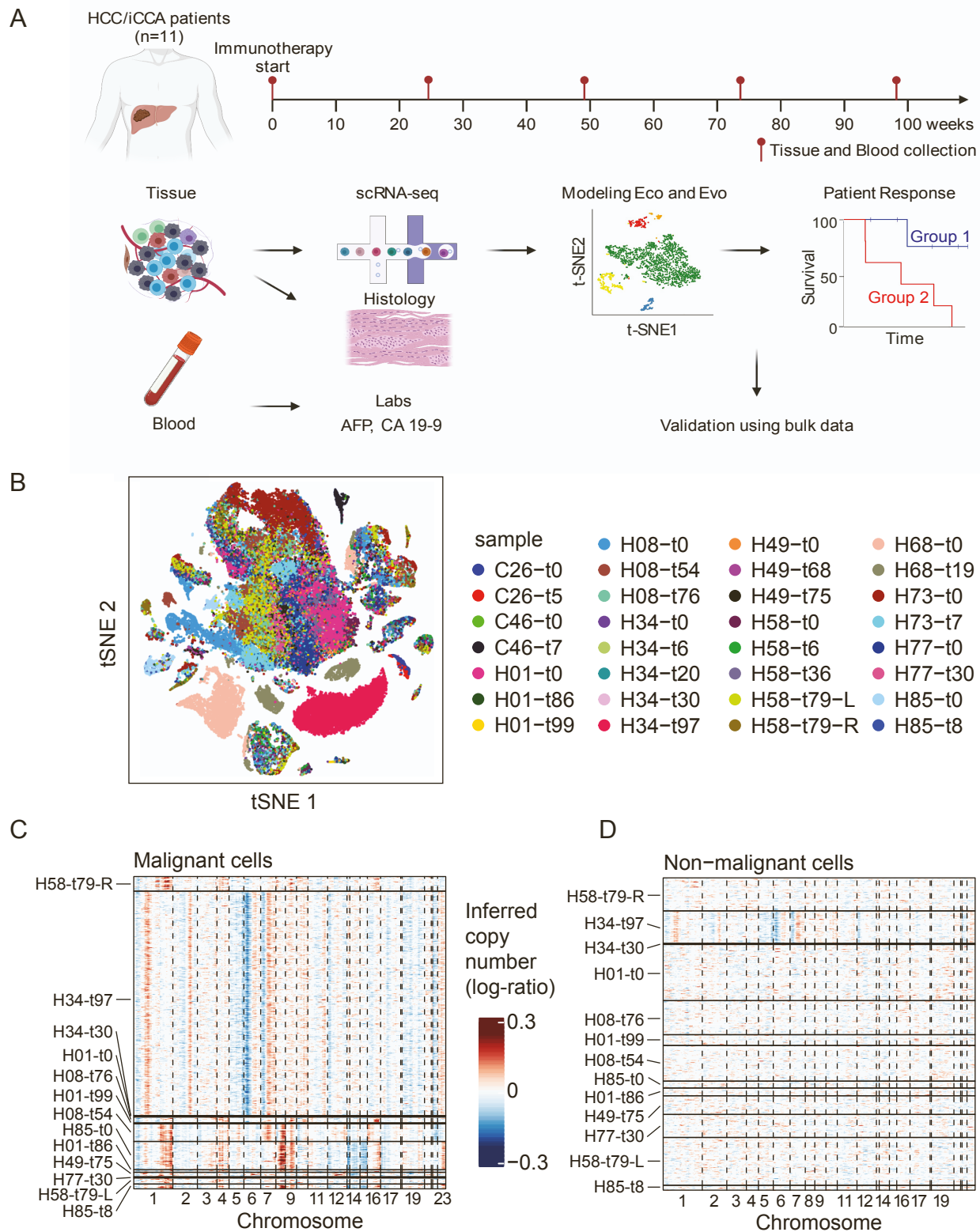
**Lineage and ecology define liver tumor  
evolution in response to treatment**

**Mahler Revsine, Limin Wang, Marshonna Forgues, Shay Behrens, Amanda J. Craig, Meng Liu, Bao Tran, Michael Kelly, Anuradha Budhu, Cecilia Monge, Changqing Xie, Jonathan M. Hernandez, Tim F. Greten, Xin Wei Wang, and Lichun Ma**

## **Supplemental Information**

### **Lineage and ecology define liver tumor evolution in response to treatment**

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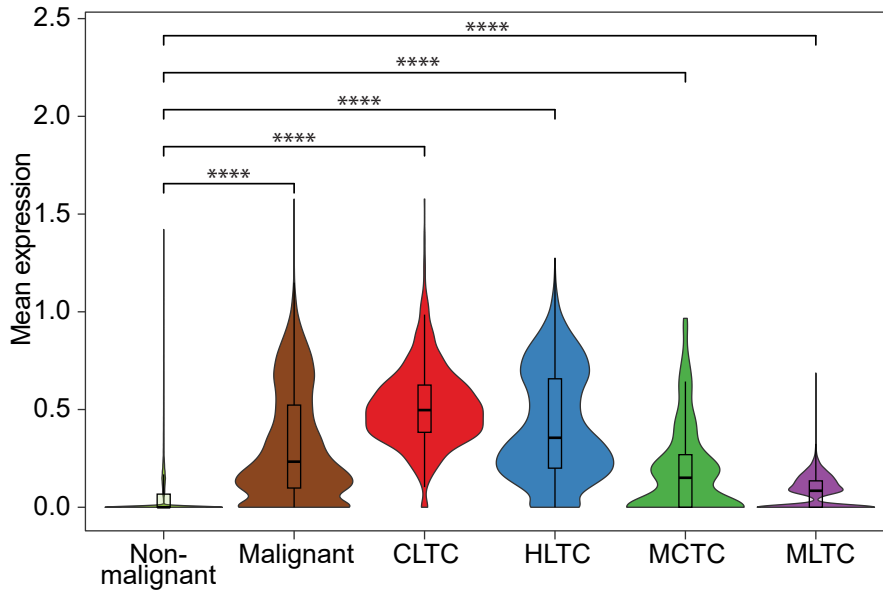
**Figure S1. Dissection of primary liver tumor using scRNA-seq. Related to Figure 1.**

(A) Workflow of this single-cell study of longitudinal samples from liver cancer patients.

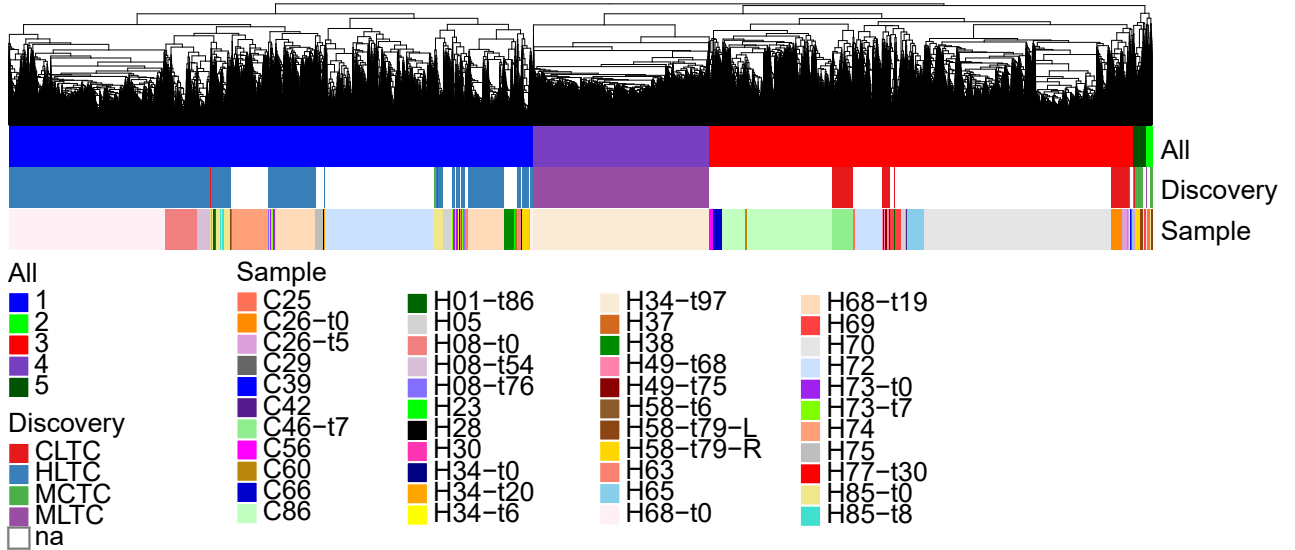
(B) t-SNE plot of all 57,591 single cells from 11 patients. Sample names starting with H and C denote the clinical diagnoses of HCC and iCCA, respectively. Sample names with t0 indicate baseline samples while others are post-treatment samples. Cells are colored by sample.

(C and D) Inferred CNVs of malignant cells (C) and non-malignant cells (D) for newly collected samples in this cohort. Red, amplifications; blue, deletions.

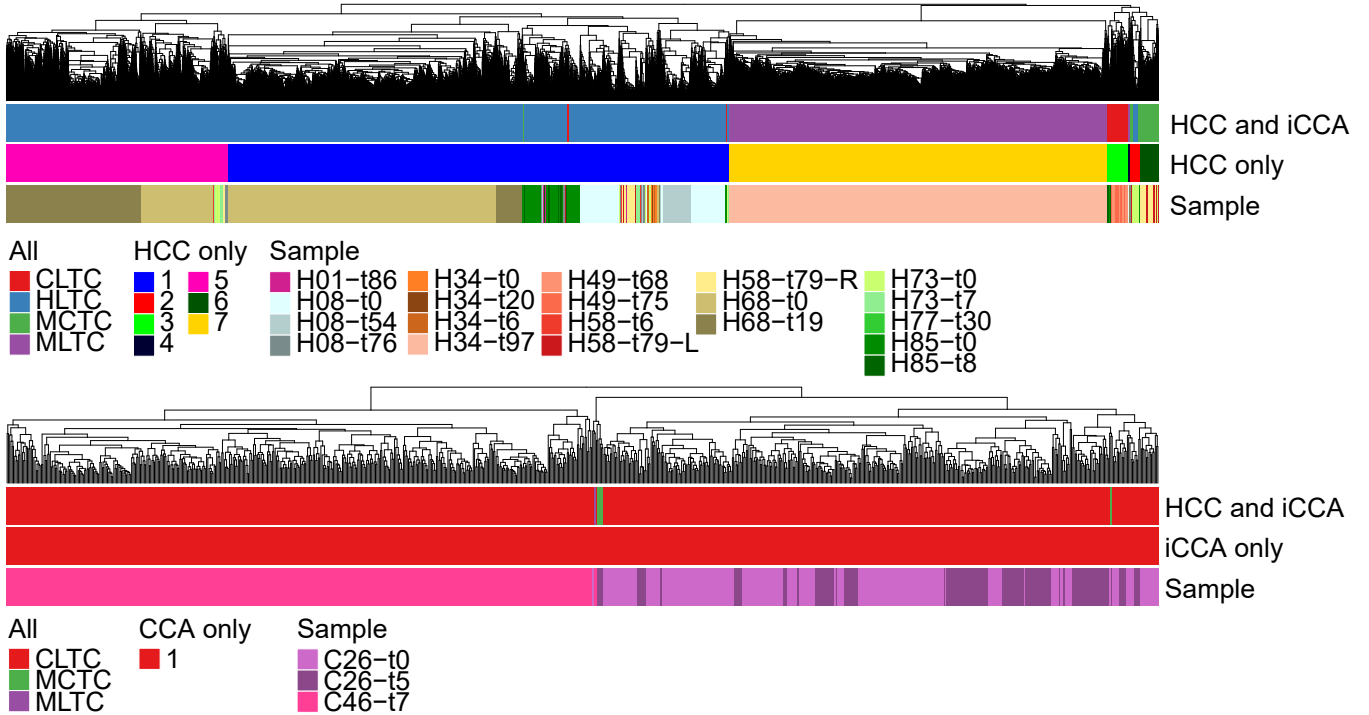
A



B



C



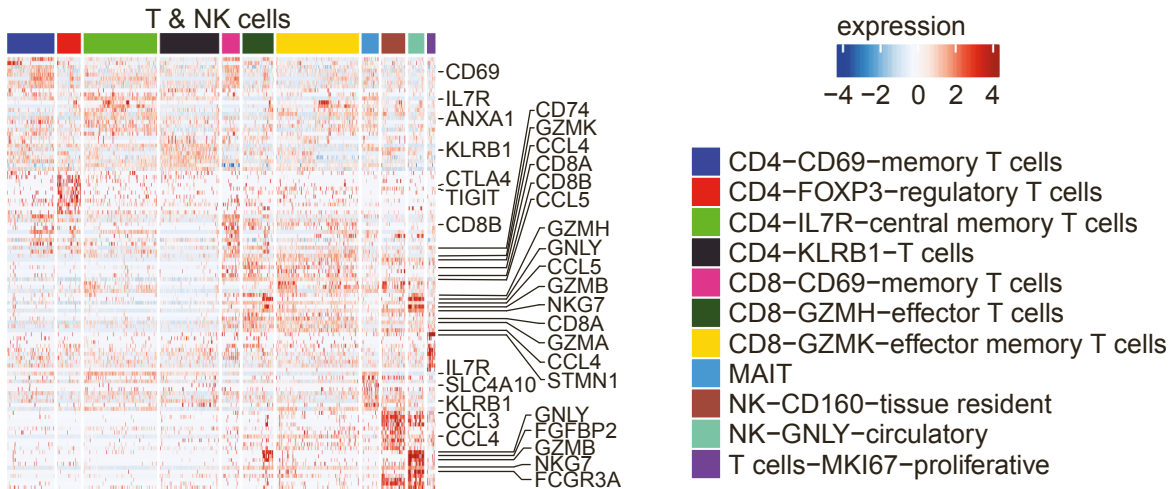
**Figure S2. Analysis of malignant cells. Related to Figure 1.**

(A) Violin plots with embedded boxplots showing mean expression of key tumor markers in non-malignant cells (n = 44,525), malignant cells (n = 13,042), CLTCs (n = 1,152), HLTCs (n = 7,622), MCTCs (n = 258), and MLTCs (n = 4,010) from the longitudinal single-cell cohort (n = 11 patients). The tumor marker signature comprises 10 genes: AFP, ALDH1A1, ANPEP, EPCAM, GPC3, HNF4A, ICAM1, KRT19, PROM1, and SPP1. All groups were compared to non-malignant cells as a reference using a one-sided Wilcoxon test. \*\*\*, p value < 0.0001.

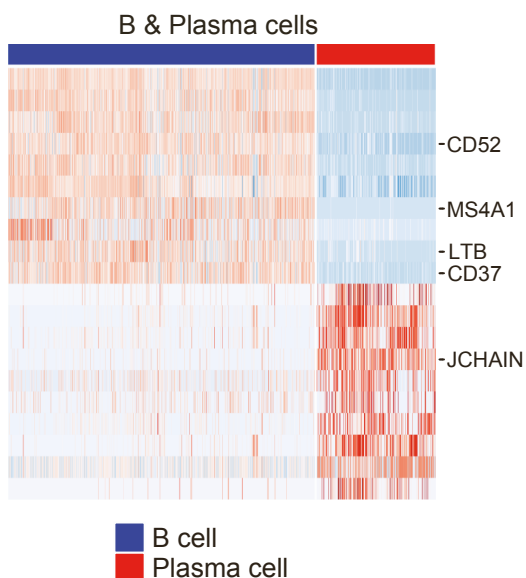
(B) Hierarchical cluster of malignant cells (n = 25,728 cells) from all available single-cell samples (n = 44 samples) across both the discovery and validation cohorts. Cells are grouped into the top 5 clades of the hierarchical tree, indicated by distinct colors on the top row. The lineage of cells from the longitudinal cohort are indicated by distinct colors on the second row, while those from the validation cohort are in white. The sample of origin for each cell is indicated on the bottom row. All clusters are comprised of multiple patients (cluster 1, n = 19 patients; cluster 2, n = 11; cluster 3, n = 25; cluster 4, n = 6; cluster 5, n = 10).

(C) Hierarchical clustering of HCC tumor cells (n = 12,135, top) and iCCA tumor cells (n = 907, bottom) from the longitudinal single-cell cohort (n = 11 patients). Cells are annotated using their lineage from the main analysis in the first row, their cluster from this analysis in the second row, and their sample in the third row. The tree was divided into the top 7 clades for HCC and only 1 clade for iCCA.

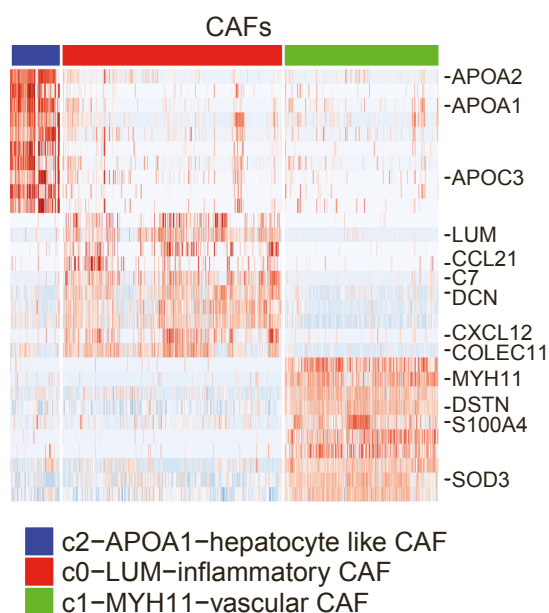
A



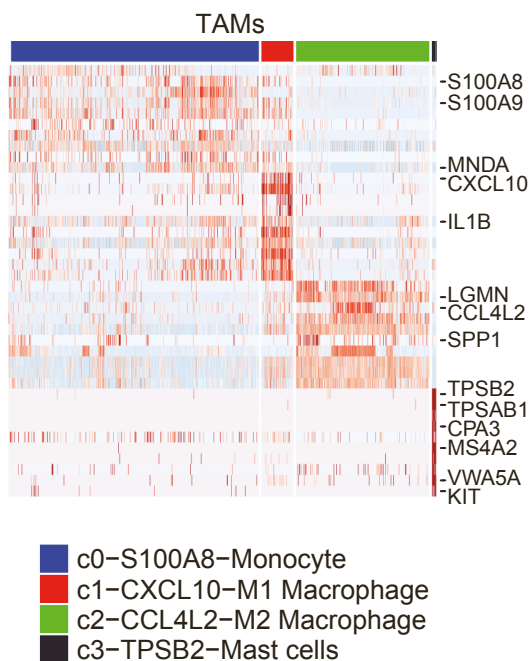
B



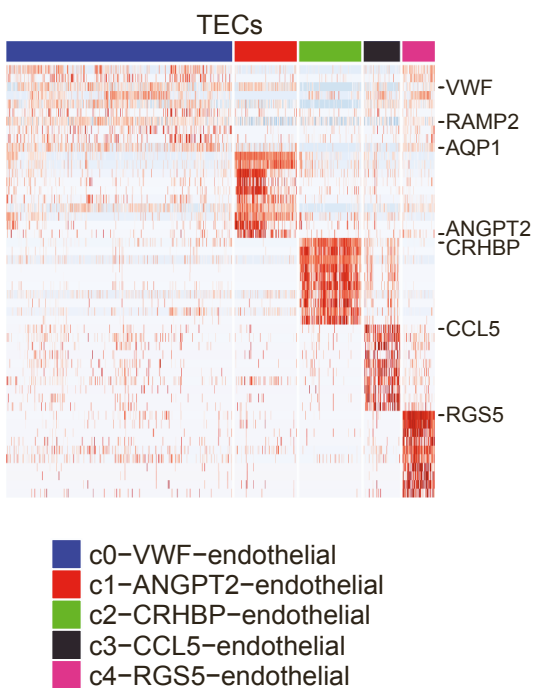
C



D

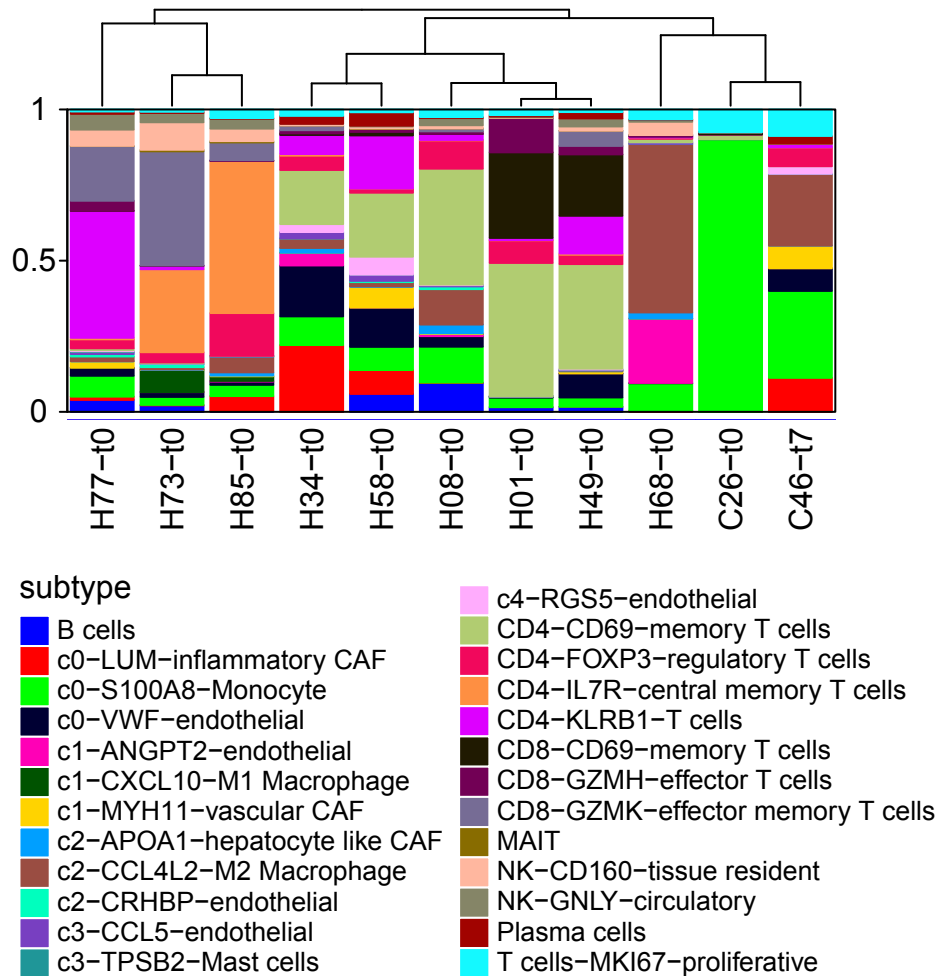


E



**Figure S3. Immune cell subtype determination. Related to Figure 2.**

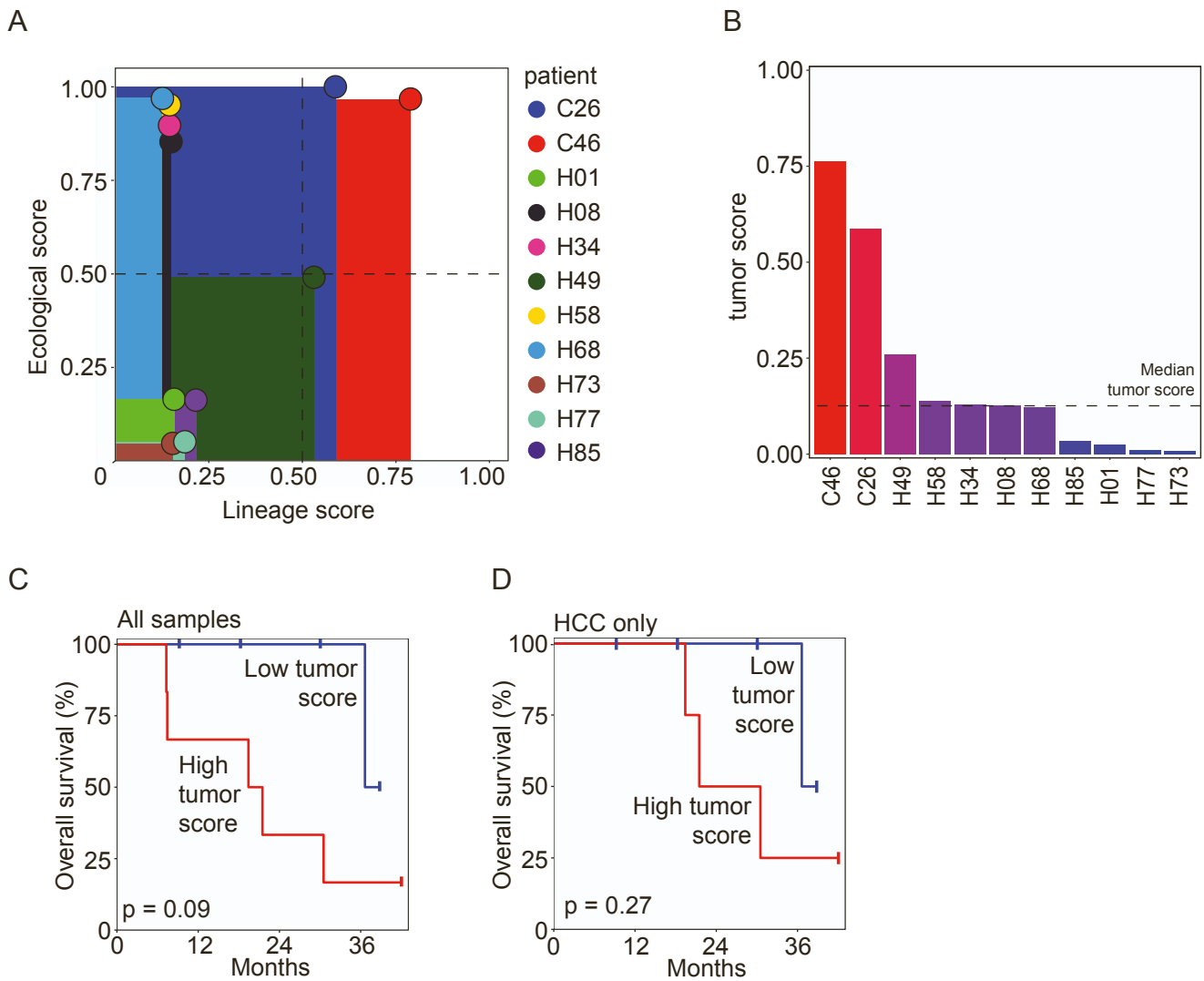
(A-E) Expression of top differentially expressed genes (rows) in T & NK cells (A), B & plasma cells (B), CAFs (C), TAMs (D), TECs (E). Cell subtypes are indicated at the top with colors corresponding to accompanying legends. Key genes are labelled.



**Figure S4. Hierarchical relationship of the TME composition. Related to Figure 2.**

Hierarchical relationship of the TME composition in each baseline or other earliest tumor sample with at least 15 non-malignant cells detected. Subtypes of immune/stromal cells are indicated by colors.



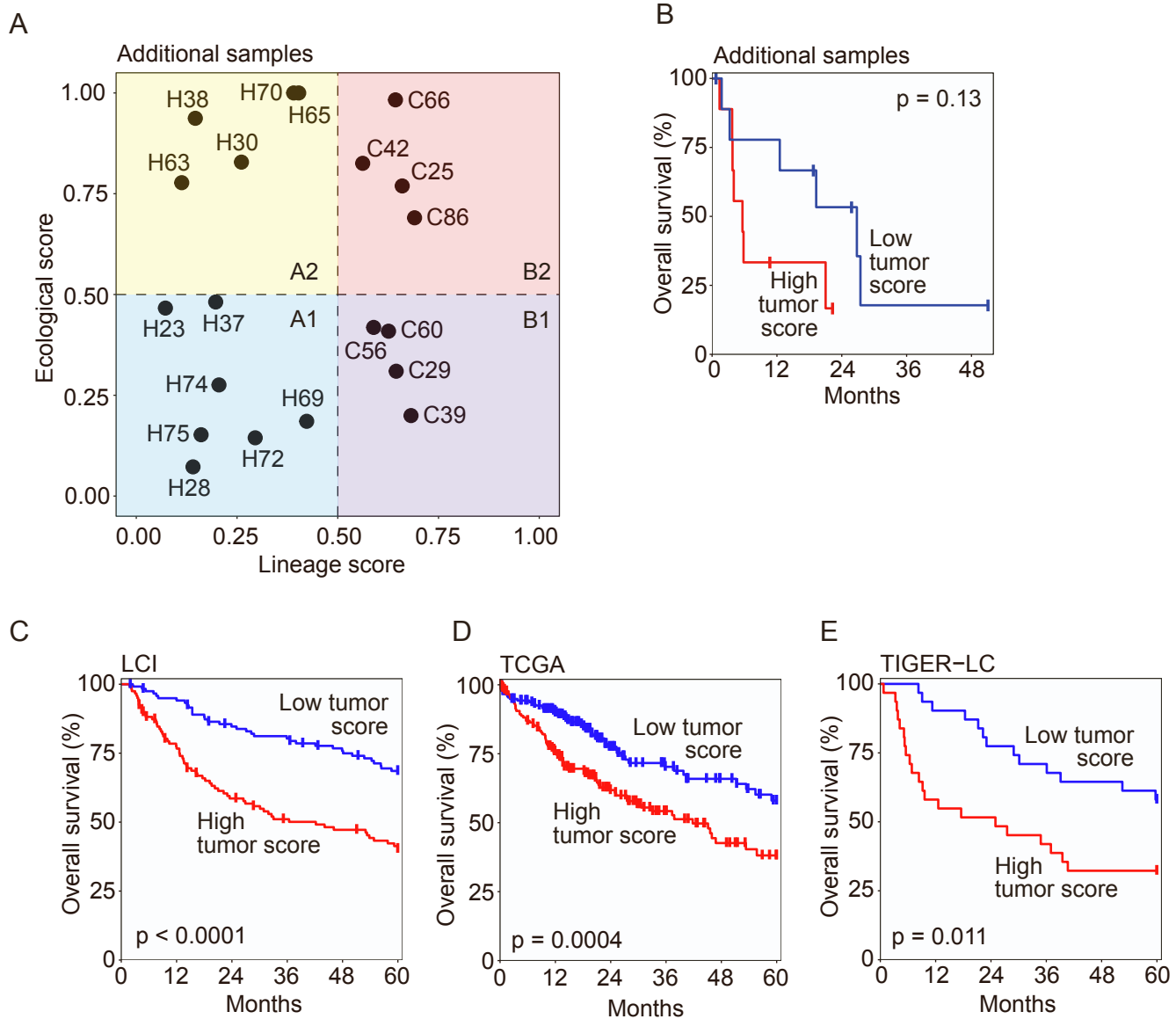


**Figure S5. Characterizing a tumor ecosystem using a tumor score. Related to Figure 3.**

(A) Projection of baseline samples from the 11 patients of our single-cell discovery cohort into the lineage-ecological space, with the area between each sample (points) and the origin shaded. These areas represent the tumor score for each sample. Samples and their accompanying areas are colored by patients.

(B) Tumor score for each baseline sample from the 11 patients, ordered from high to low. Median tumor score for the cohort is shown with a dashed line.

(C and D) Overall survival of the 11 HCC or iCCA patients (C) and HCC patients only (D). Samples were divided into high or low tumor score group by the median value as indicated in (B). The p value was calculated using the log-rank test.



**Figure S6. Validation of the tumor score in patient stratification. Related to Figure 3.**

(A) Projection of additional samples ( $n = 20$ ) from an independent single-cell cohort of HCC/iCCA patients into the lineage-ecological space. One of these samples does not have accompanying survival data and is therefore excluded from survival analyses in (B) and Fig. 3F.

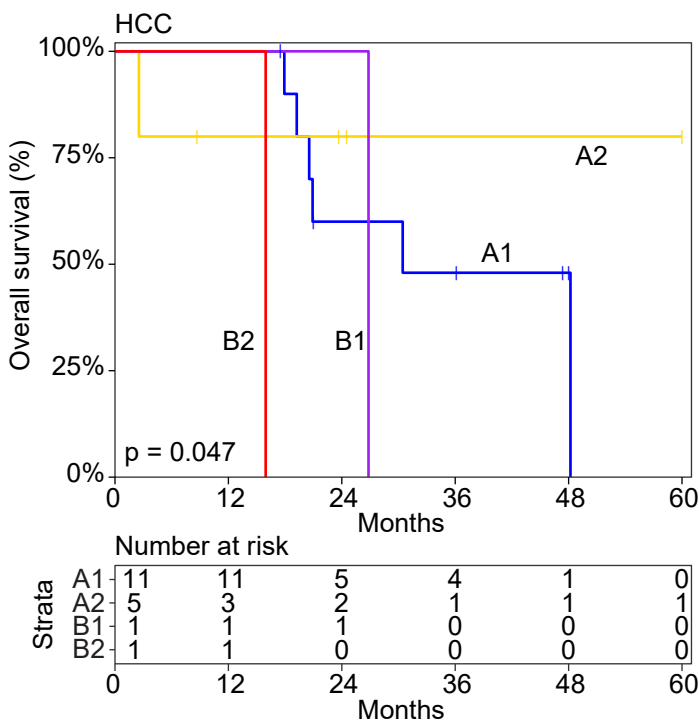
(B) Overall survival of the patients in (A). Samples were divided into high or low tumor score group by the median value in this cohort. The p value was calculated using the log-rank test.

(C-E) Kaplan-Meier plots of HCC patients from the LCI (C,  $n = 239$ ), TCGA (D,  $n = 363$ ), and the TIGER-LC (E,  $n = 62$ ) cohorts. Samples were divided into high or low tumor score group by the median value in each cohort. The p value was calculated using the log-rank test.

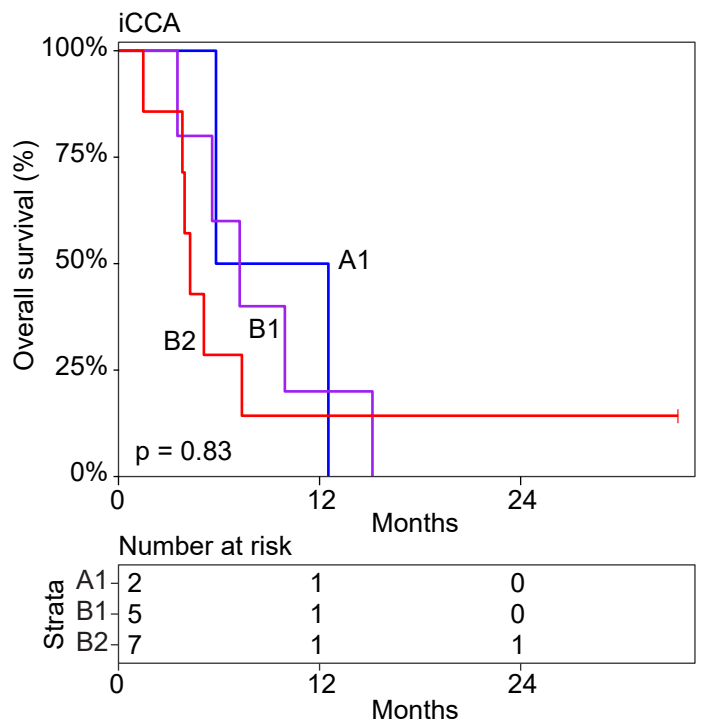
A

Variable	Multivariate		Univariate	
	Hazard ratio (95% CI)	p-value	Hazard ratio (95% CI)	p-value
<b>Quadrants</b>				
A1	Reference		Reference	
B2	4.78 (1.15—19.95)	0.03	4.34 (1.46—12.89)	0.008
<b>Gender</b>				
Male	Reference		Reference	
Female	3.86 (0.9—16.53)	0.07	2.57 (0.84—7.83)	0.1
Age (years)	1 (0.93—1.08)	0.95	0.96 (0.91—1.03)	0.26
<b>Race</b>				
Caucasian	Reference		Reference	
African American	0.65 (0.32—18.14)	0.63	0.28 (0.06—1.31)	0.11
Asian Race	2.41 (0.11—3.76)	0.39	1.11 (0.24—5.17)	0.89

B



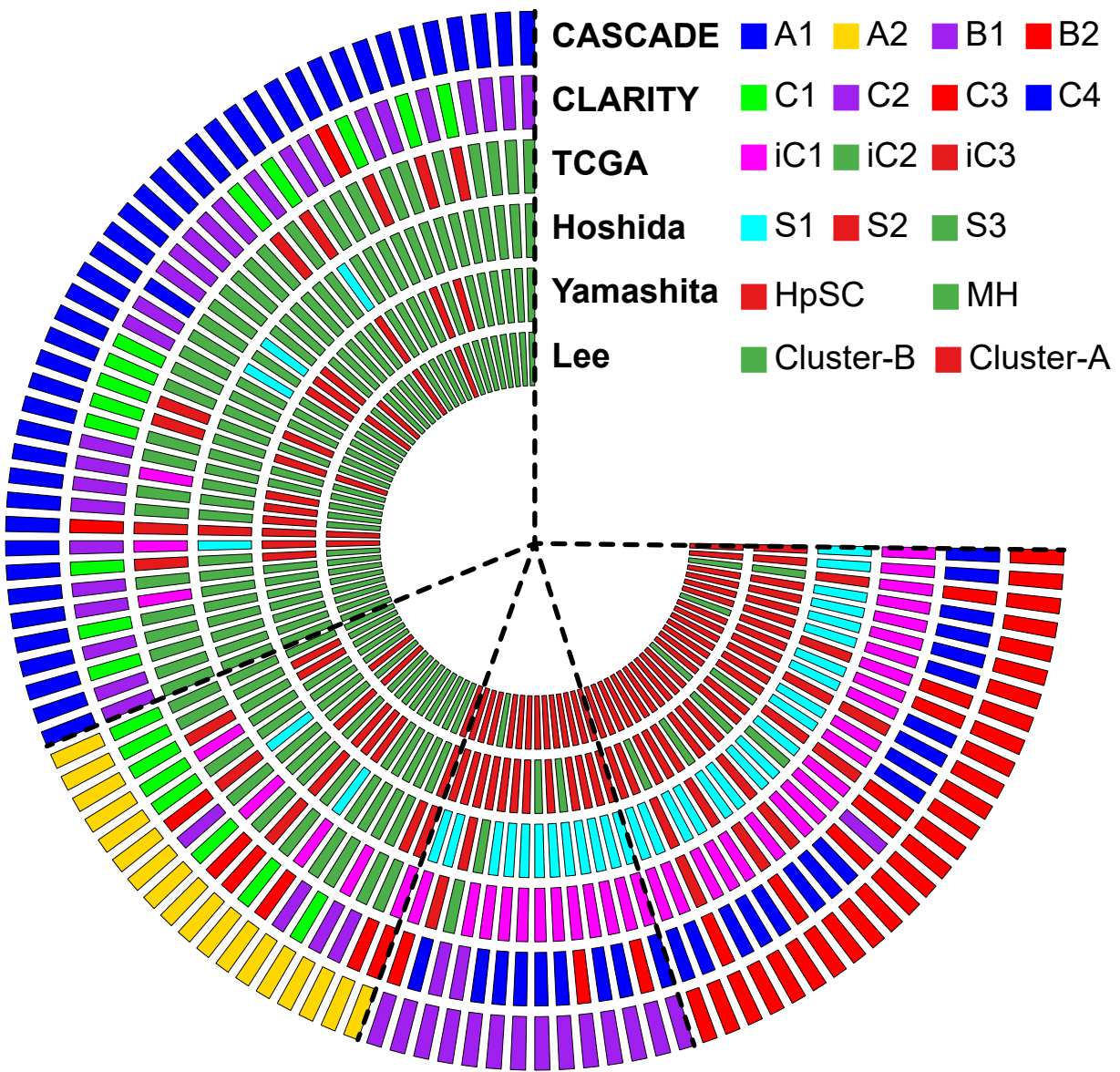
C



**Figure S7. Application of CASCADe to the NCI-CLARITY cohort. Related to Figure 5.**

(A) Hazard ratio with 95% confidence interval (CI) from multivariate and univariate analysis. Only quadrants A1 and B2 were used in the analysis since the two quadrants had the most number patients for modeling.

(B and C) Kaplan-Meier plots of baseline samples of HCC patients (B, n = 18) and iCCA patients (C, n=14) from the NCI-CLARITY cohort. Samples were divided into CASCADe quadrants using the global medians from the entire cohort in Figure 5C. The p value was calculated using log-rank test.



**Figure S8. Comparison of HCC signatures in prospective cohort. Related to Figure 5.**

Classification of NCI-CLARITY prospective cohort samples using CASCADE, CLARITY, TCGA, Hoshida, Yamashita, and Lee HCC signatures, respectively, from the outermost to innermost circles. Dashed lines segment the figure into samples of each CASCADE quadrant.