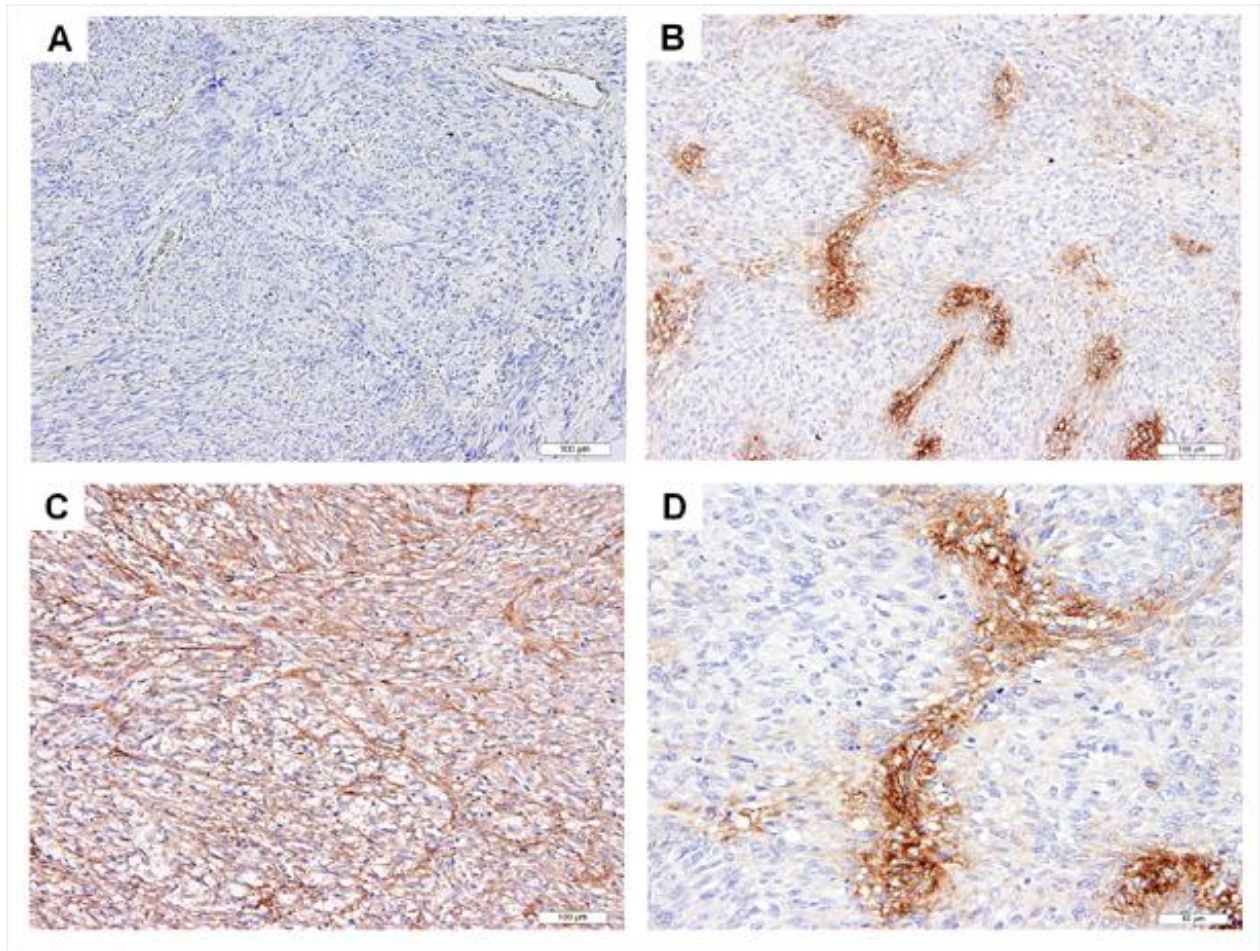
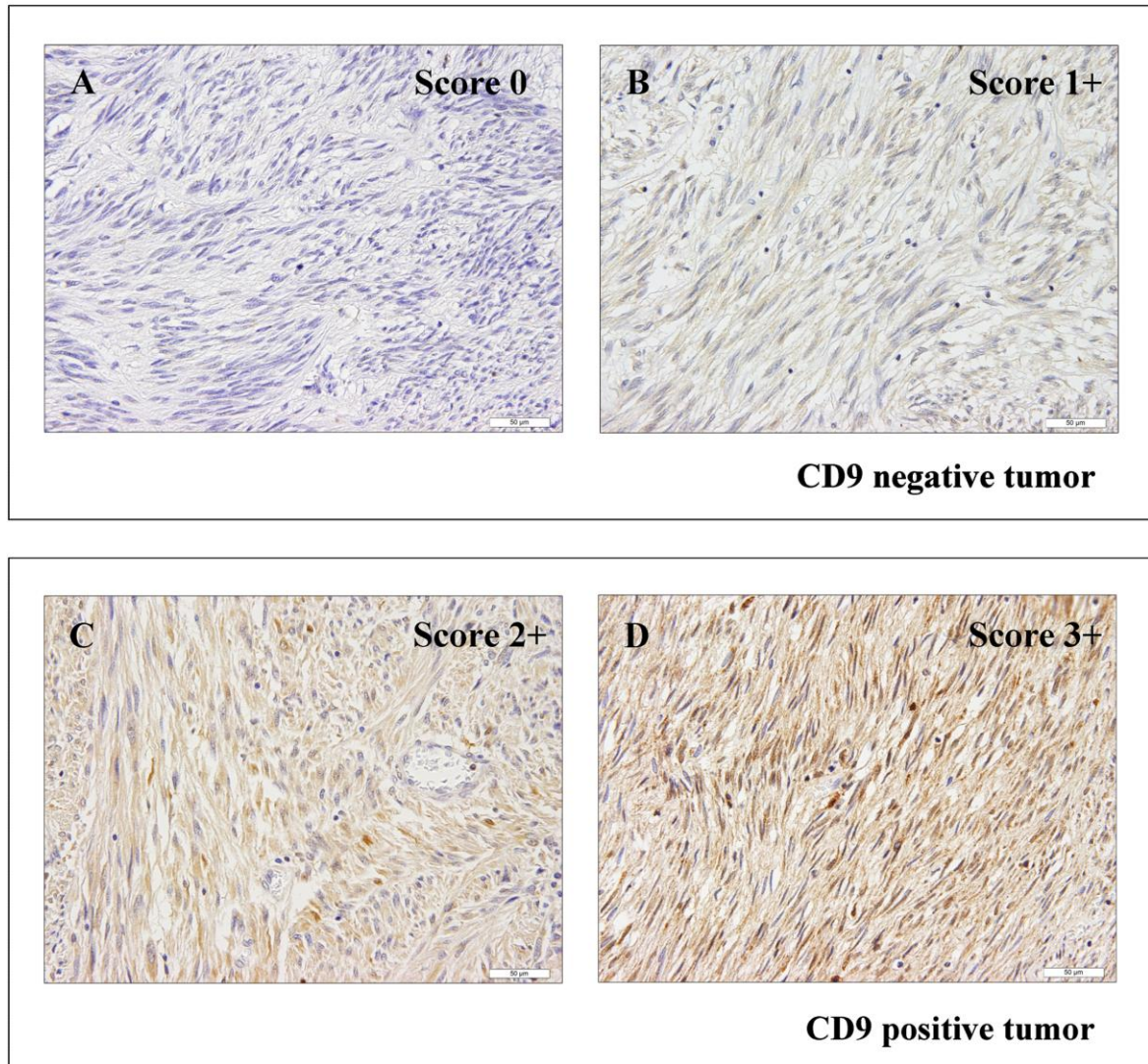


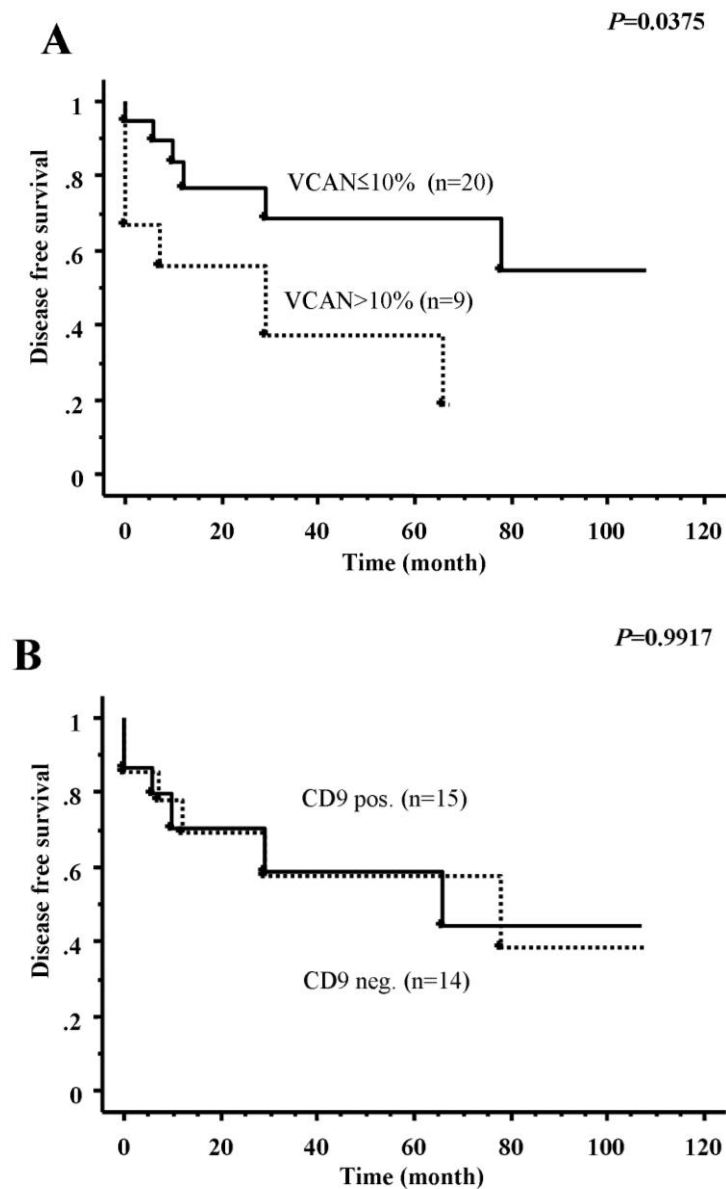
**Supplementary Figures**

**Figure S1.** Representative immunohistochemical staining for versican in gastric GISTs.

(A) No staining. (B) Sparsely positive. (C) Thickly positive. (D) High magnification of (B).



**Figure S2.** Representative immunohistochemical staining for CD9 in gastric GISTs. Staining intensity of CD9 was scored as 0 (none), 1+ (weak), 2+ (moderate) or 3+ (strong). Score 0 and 1+ tumors were defined as CD9-negative and score 2+ and 3+ tumors as CD9-positive.



**Figure S3.** Versican and CD9 expressions in primary intestinal GISTs and in patients' prognosis. (A) DFS by versican positivity in primary intestinal GIST. Patients with a versican-positive dimension  $>10\%$  had significantly shorter DFS than those with  $\leq 10\%$  GIST ( $P=0.0375$ ). (B) DFS by CD9 positivity in primary intestinal GIST. Patients with CD9-positive and CD9-negative intestinal GISTs had comparable DFS.