

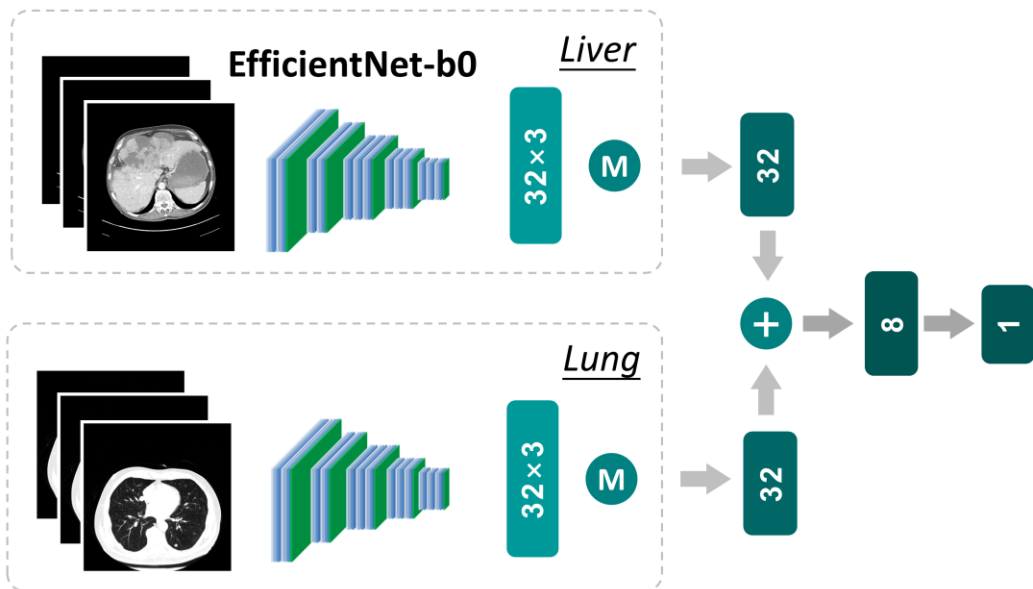
CT-based Multimodal Deep Learning for Non-invasive Overall Survival Prediction in Advanced Hepatocellular Carcinoma Patients Treated with Immunotherapy

ELECTRONIC SUPPLEMENTARY MATERIAL

**a** CLN



**b** Rad-S



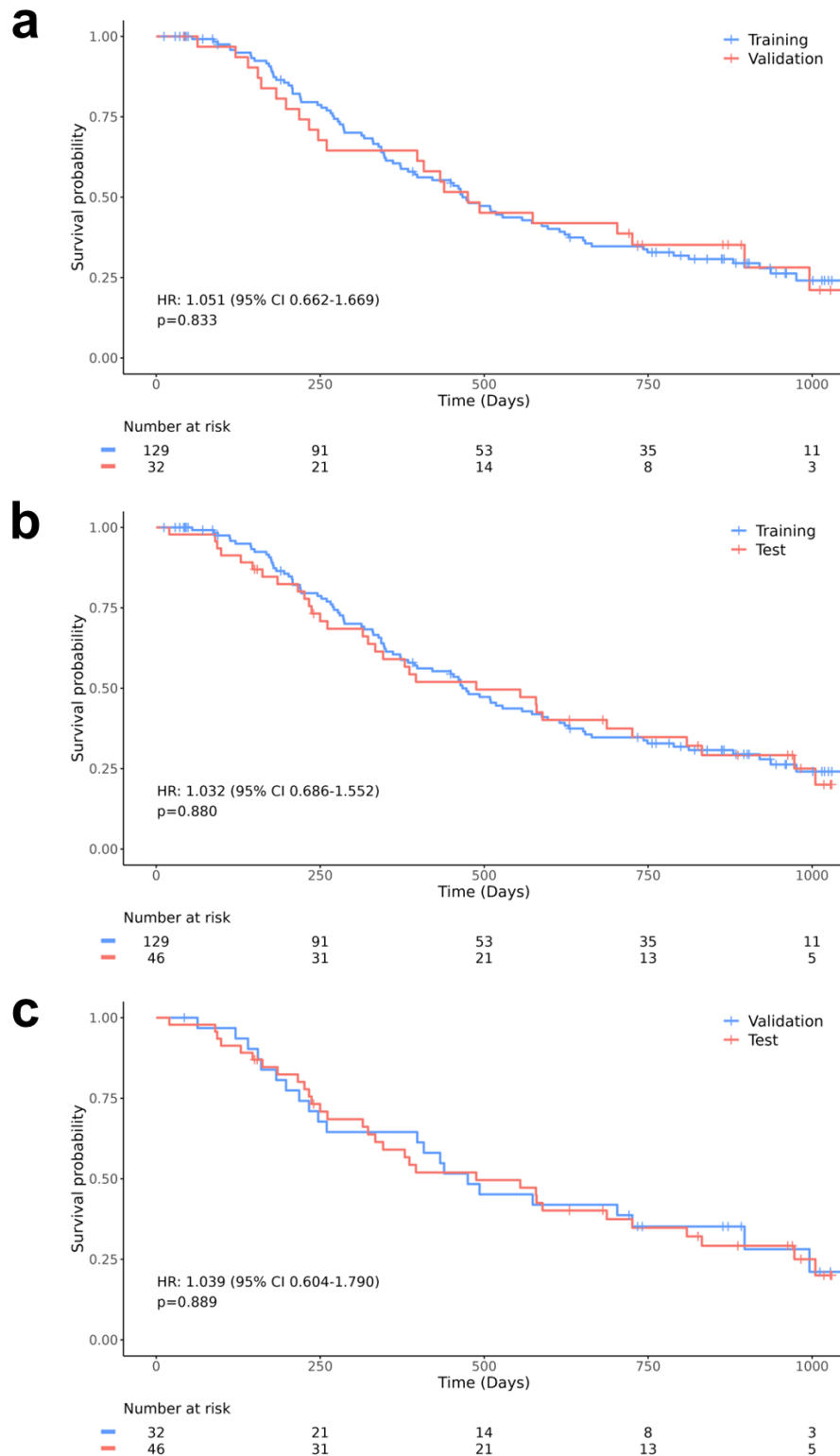
**c** RadCLN-S



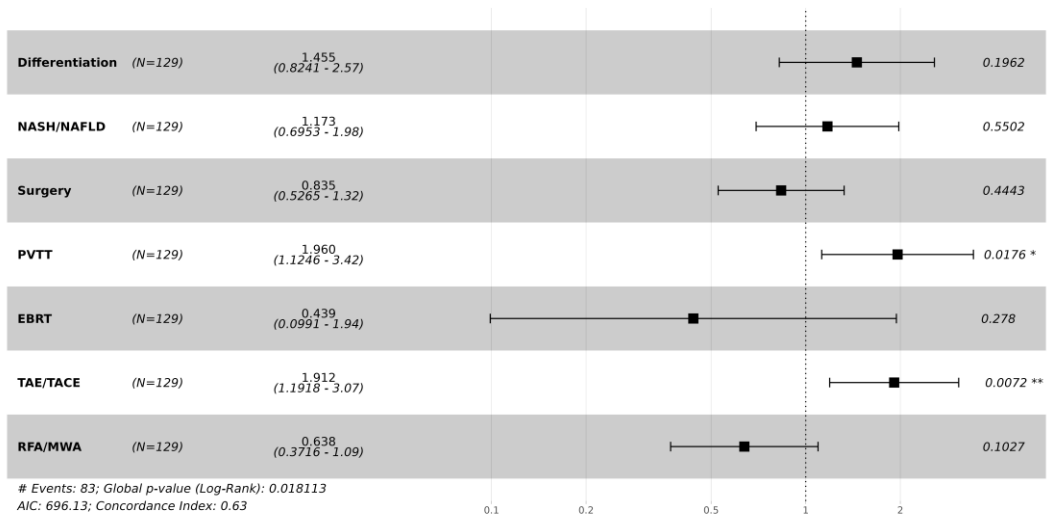
**d** RadCLN-D



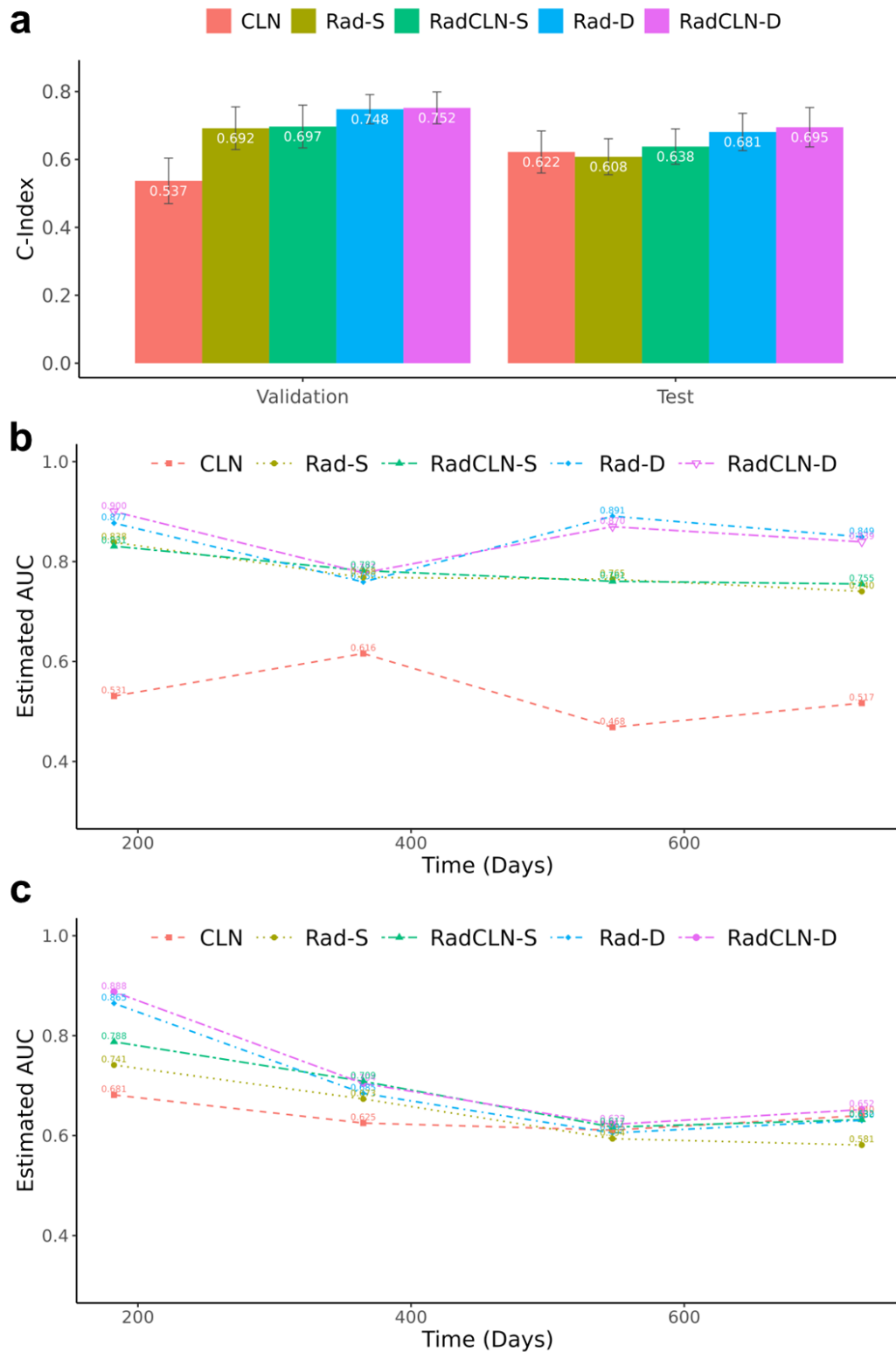
**Figure S1:** Model illustrations for CLN, Rad-S, RadCLN-S, and RadCLN-D. Insights Imaging (2024) Xia Y, Zhou J, Xun X, et al.



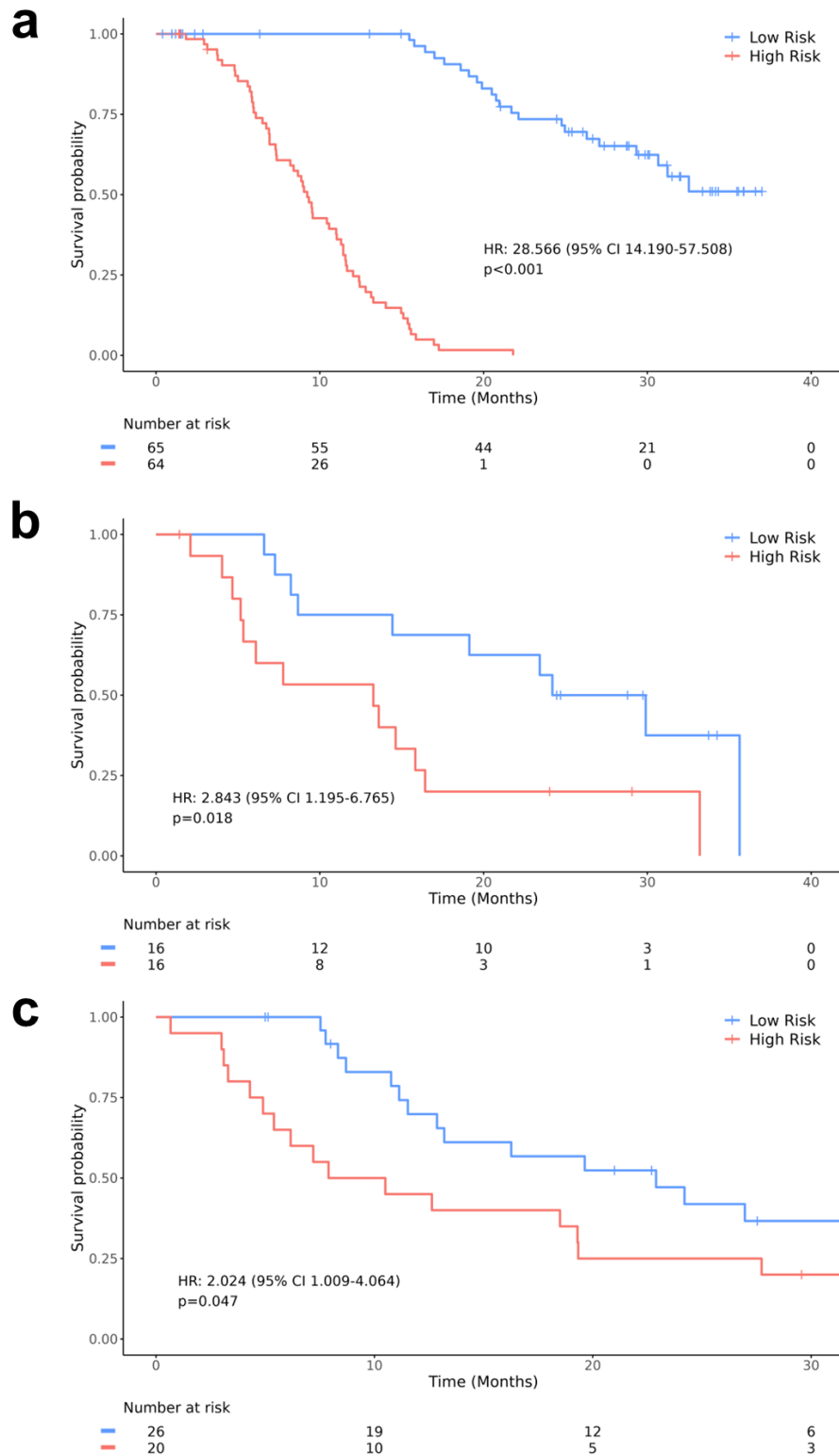
**Figure S2:** Comparisons of Kaplan-Meier curves on the training, validation, and test sets. There is no significant difference of the survival status among the three datasets.



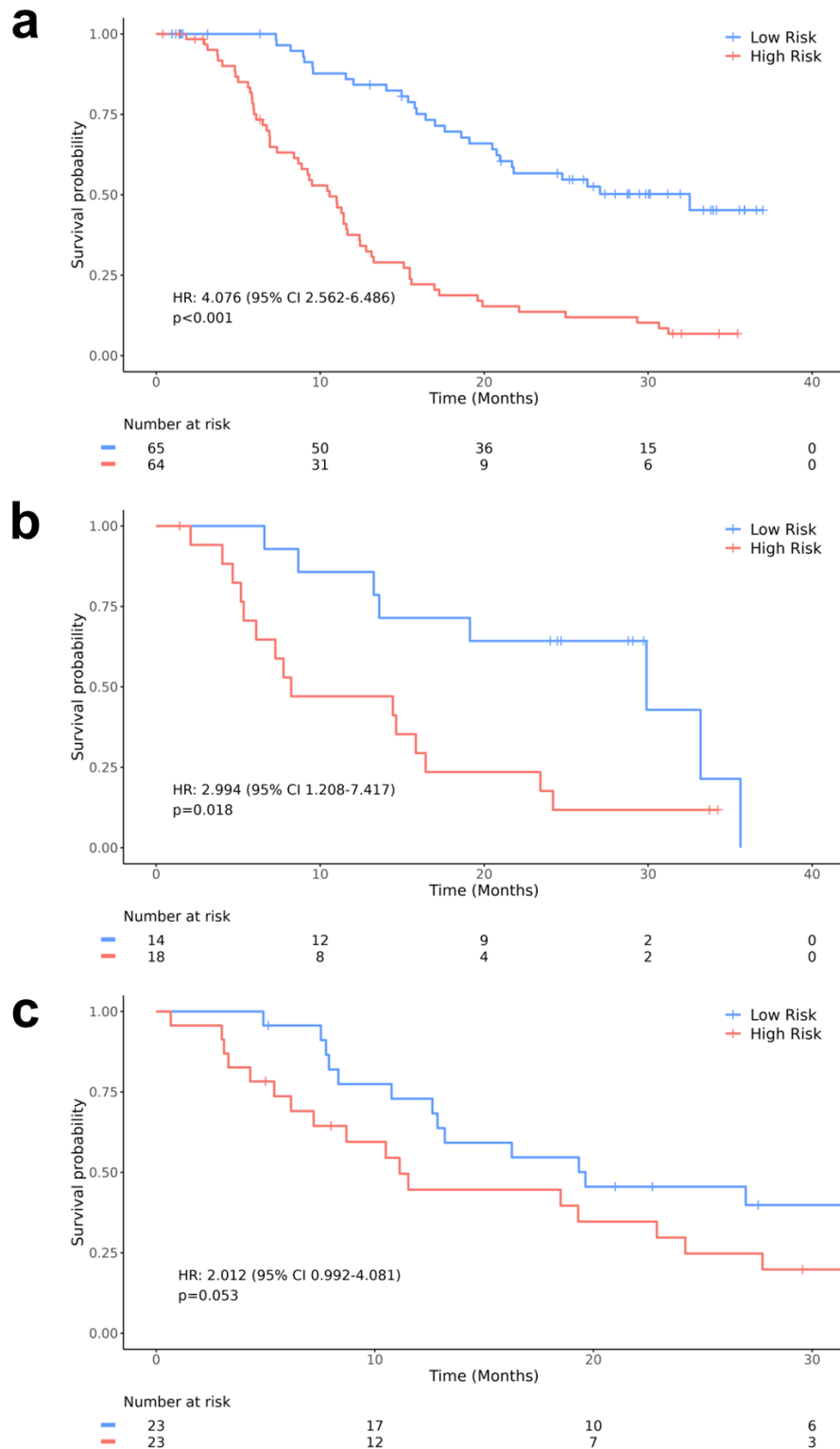
**Figure S3:** Forest plot for Cox model of the seven clinical variables. Differentiation, tumor histological differentiation type; NASH, non-alcoholic steatohepatitis; NAFLD, non-alcoholic fatty liver disease; PVTT, partial or complete portal vein tumor thrombosis; EBRT, external beam radiation therapy; TAE, transarterial embolization; TACE, transarterial chemoembolization, RFA, radiofrequency ablation; MWA, microwave ablation.



**Figure S4:** Overall survival prediction performances of the five models. Estimated c-index (a) (the error bar shows the 95% confidence interval), and estimated time-dependent AUCs of 0.5, 1, 1.5, and 2 years on the validation (b) and independent tests (c) were calculated.



**Figure S5:** Kaplan-Meier survival estimates for the overall survival of Rad-D, stratified into low-risk and high-risk groups according to the median risk score in the training set.



**Figure S6:** Kaplan-Meier survival estimates for the overall survival of RadCLN-S, stratified into low-risk and high-risk groups according to the median risk score in the training set.