

Table 6. Association of focal 14q13.3 amplification with disease progression.

Clinicopathological Characteristics	<i>n</i> = 91	14q13.3 amplification status			
		Focal high-level Amplifications (<i>n</i> = 17)		Wide low-level Gains (<i>n</i> = 12)	
		Correlation coefficient	<i>p</i> -value	Correlation coefficient	<i>p</i> -value
Stage					
III	18	0.257	0.013	-0.031	0.774
I and II	73				
Recurrence					
Present	40	0.200	0.056	-0.083	0.432
No	51				

Associations were tested using a dataset consisting of 91 lung adenocarcinomas (SI-Table 4). Of these 91 samples, seventeen were found by CGH to harbor focal (≤ 5 Mb) and high-level amplification (\log_2 ratio ≥ 0.8) at 14q13.3. Twelve samples were found to contain wide and low-level DNA copy number gain at 14q13.3. Of the seventeen clinical parameters of this dataset, tumor stage was found to be significantly associated with the occurrence of focal high-level amplifications at 14q13.3. The presence of disease recurrence also associates with the occurrence of focal high-level amplifications but with less significance. These correlations were not found with tumors harboring wide low-level gains at 14q13.3.