

Supplement A

Table 4. Multivariate Cox proportional hazard analysis of prognostic factors for mortality in 1,480 patients with HCV-related HCC, including change in serum AFP level determined for patients with multiple tests during the period 2 years before to 30 days after HCC diagnosis

	Adjusted Hazard Ratio (95% CI)	P-value
Change in AFP (ng/ml)		
No increase	Reference	
<2-fold increase	1.38 (1.09-1.75)	0.0075
2-<10-fold increase	1.61 (1.29-2.02)	<0.0001
≥10-fold increase	2.64 (2.10-3.33)	<0.0001
Unknown	1.75 (1.45-2.11)	<0.0001
Age		
<50	Reference	
50-54	1.06 (0.88-1.27)	0.58
55-59	1.03 (0.86-1.25)	0.72
≥60	1.19 (0.99-1.43)	0.07
Sex		
Female	Reference	
Male	1.27 (0.65-2.45)	0.49
Race/Ethnicity		
White	Reference	
Black	1.13 (0.99-1.28)	0.08
Other	0.92 (0.77-1.10)	0.36
Missing	1.04 (0.82-1.33)	0.73
*Ascites	1.83 (1.60-2.10)	<0.0001
*Encephalopathy	1.32 (1.12-1.55)	0.0007
*CHF	1.26 (0.98-1.62)	0.08
MELD		
<15	Reference	
15-20	1.58 (1.32-1.90)	<0.0001
>20	2.42 (1.73-3.41)	<0.0001
Missing	0.97 (0.85-1.11)	0.65
HCC treatment		
Transplantation	0.17 (0.11-0.26)	<0.0001
Resection	0.57 (0.43-0.76)	0.0001
TACE	0.77 (0.67-0.89)	0.0003
RFA	0.60 (0.48-0.75)	<0.0001

*Within 1 year before HCC diagnosis

Figure Legends

Figure 1.

HCV cohort by serum AFP level at the time of HCC diagnosis

^No serum AFP level tested between 60 days before to 30 days after HCC diagnosis

*AFP in ng/ml

Figure 2.

Kaplan Meier curves of survival based on AFP category in 1,480 patients with HCV-related HCC; AFP levels are in ng/ml

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Figure 3.

The change in serum AFP level during 2 years before to 30 days after HCC diagnosis among 1,480 HCV-infected patients with HCC.

^Less than 2 recorded serum AFP levels

