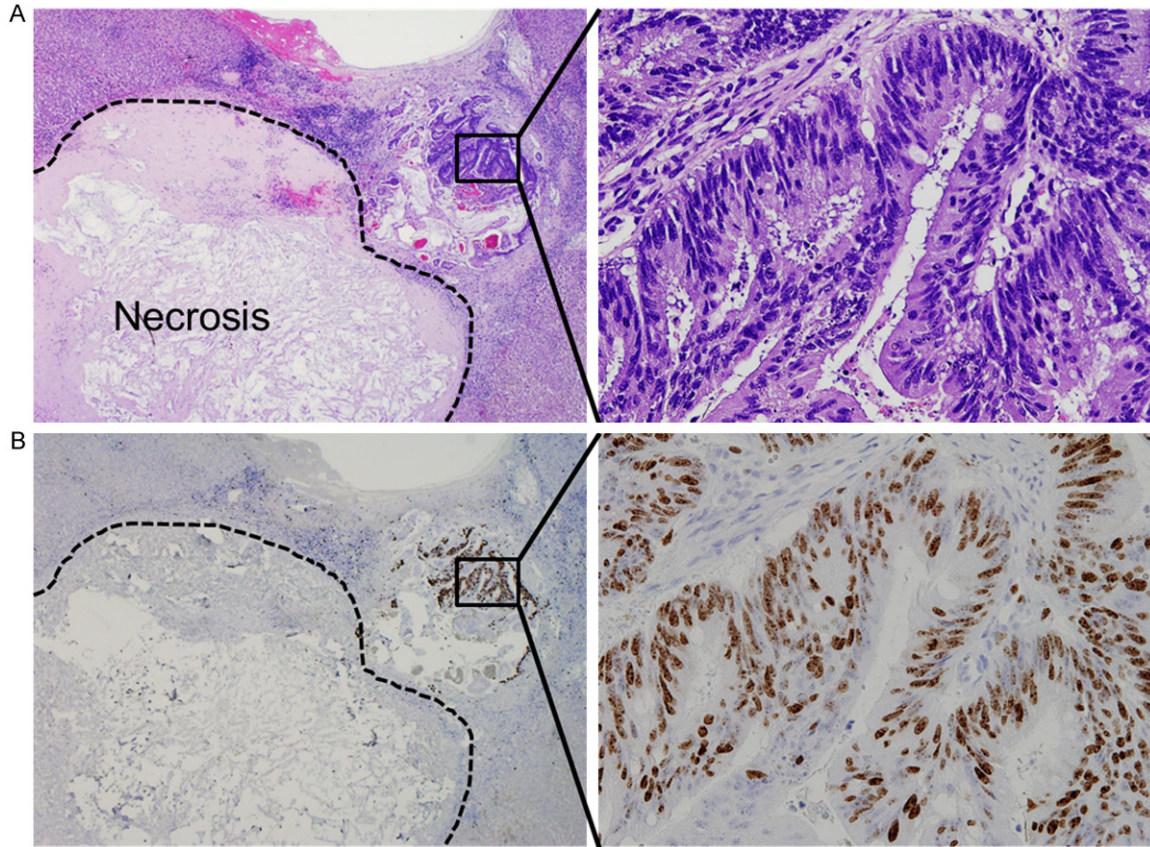
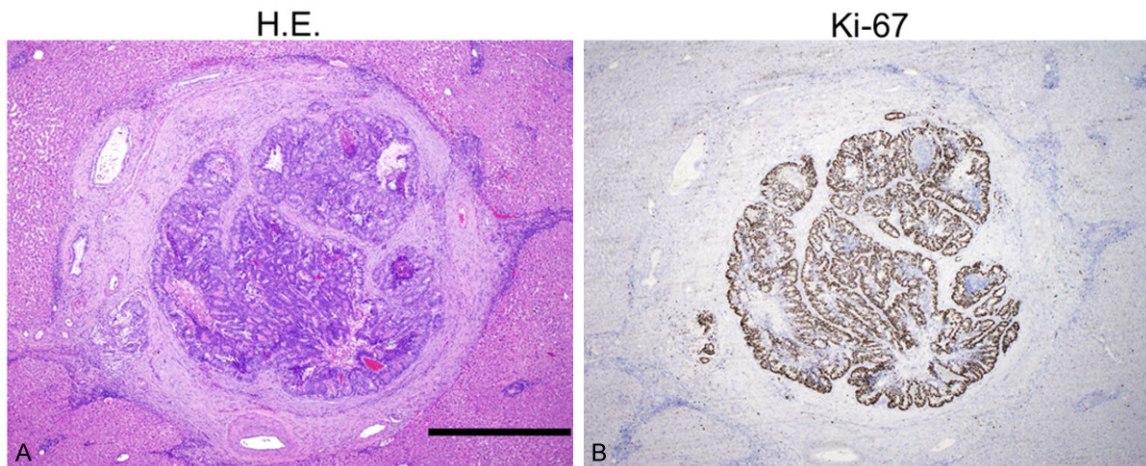


## Ki-67 in colorectal liver metastasis



**Supplemental Figure 1.** Residual colorectal liver metastasis containing aggressive cancer cells even post-effective systemic chemotherapy. A. Hematoxylin-eosin staining. B. Ki-67 stainin. Area within dot line reveals necrotic change due to chemotherapy.



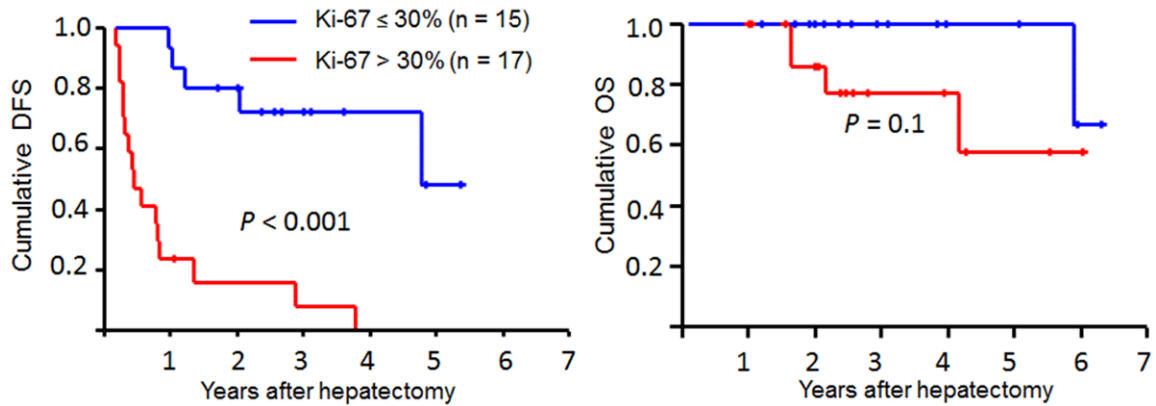
**Supplemental Figure 2.** Immunohistochemical staining of Ki-67 expression in the residual micro-metastasis after chemotherapy. A. Hematoxylin-eosin staining. B. High Ki-67 expression (Scale bar, 1 mm).

## Ki-67 in colorectal liver metastasis

**Supplemental Table 1.** Comparison of clinico-pathological factors between low and high Ki-67 expression in straight hepatectomy group (n = 42)

Variables	Low Ki-67 (n = 14)	High Ki-67 (n = 28)	P-value
Age	58 (34-71)	66 (25-85)	0.080
Sex (male/female)	8/6	21/7	0.238
Synchronous/Metachronous	7/7	9/19	0.261
Tumor size prior to hepatectomy (mm)	22.5 (6-130)	32.5 (5-90)	0.198
Tumor number prior to hepatectomy	1 (1-8)	2 (1-5)	0.535
CEA prior to hepatectomy (ng/mL)	6.4 (1.0-167)	8.9 (0.5-2061)	0.390

Variable data was expressed with median (range). CEA, carcinoembryonic antigen.



**Supplemental Figure 3.** A Kaplan-Meier survival analysis of disease-free survival (left panel) and overall survival (right panel) between high and low Ki-67 expression levels in patients with RECIST PR (n = 32). The log-rank test was used.