miR-21 expression and clinical outcome in locally advanced pancreatic cancer: exploratory analysis of the pancreatic cancer Erbitux, radiotherapy and UFT (PERU) trial

Supplementary Material

Supplementary table 1. Radiotherapy administration details of all randomised patients. *Due to inability of patient to reach the Hospital

	RT + FLUO (n=7) **N (%)**	**RT + FLUO + CETUX (n=6)** **N (%)**	**ALL** **N (%)**
Number of fractions/ Gy of RT delivered			
0/0	1 (14.2)	0	1 (7.7)
28/50.4	1 (14.2)	1 (16.7)	2 (15.4)
30/54	5 (71.4)	5 (83.3)	10 (76.9)
Any delay in RT			
Yes	2 (33.3)	0	2 (16.7)
If delay Reasons			
Toxicity	1 (16.7)	-	1 (8.3)
Other*	1 (16.7)	-	1 (8.3)
Any gaps in RT			
Yes	1 (16.7)	0	1 (8.3)
GTV (cc)			
Mean	74.6	45.8	60.2
Min - Max	22.1 – 241.1	26.3 – 62.8	22.1 – 241.1
PTV (cc)			
Mean	398	300	349
Min - Max	204 – 875	231 - 394	204 - 875
Boost (cc)			
Mean (sd)	220	110	166
Min - Max	110 - 407	0 - 171	0 - 407

Supplementary table 2: All serious adverse reactions (SAEs) reported on the study. Others included grade III ALT rise, grade III AST rise and biliary stent blockade

TOXICITY	PHASE				
	Neo-adjuvant	Chemoradiotherapy		Adjuvant	
		Without Cetuximab	With Cetuximab	Without Cetuximab	With Cetuximab
Abdominal pain	1	0	0	0	1
Allergic reaction	1	0	0	0	0
Diarrhoea	2	0	1	0	0
Febrile Neutropenia	0	0	0	0	2
Nausea	1	1	0	0	0
Neutropenia	0	0	0	0	1
Non Neutropenic infection	6	0	0	0	0
Pneumonitis	1	0	0	0	0
Vomiting	2	1	0	0	0
Other	3	0	0	0	0

Supplementary table 3. miR-21 expression analysis and Disease Control Rate (DCR) in all randomised patients. (Response data were missing for one patient).

	Number of events	Number of subjects	DCR after NACT (%)	p-value (exact test)
Low miR-21	6	6	100	0.061
High miR-21	2	5	40.0	