

Anti-tumor efficacy evaluation of anti-ASCT2 antibody using gastric cancer PDX

Supplementary Table 1. Clinical data of patients used for establishment of gastric cancer patient-derived xenograft mouse models

PDX line	Gross description of tumor	Microscopic description
GC119 (Female, 81 years old, Chinese)	<p>Location: Along lesser curve and involving posterior antrum and focally extending to anterior antrum</p> <p>Perforation: No</p> <p>Size (maximum diameter): 9.0 × 8.5 cm</p> <p>Depth of invasion: Muscularis propria</p> <p>Other Pathology:</p> <ul style="list-style-type: none"> ● Chronic gastritis with antral intestinal metaplasia ● High grade dysplasia is present at the edge of the tumor ● Lymph node metastasis are present (20/31) 	<p>Histological tumor type: Adenocarcinoma</p> <p>Histological pattern:</p> <ul style="list-style-type: none"> - WHO classification: Mixed mucinous (approximately 50%), tubular and papillary adenocarcinoma with focal solid areas. - Lauren Classification: Intestinal type <p>Histological grade: Moderately differentiated (There are areas ranging from well to moderately differentiated, with focal more solid, cribriformed areas suggestive of higher grade.) pT3</p>
GC117 (Female, 73 years old, Chinese, TS1 treated)	<p>Location: Antrum</p> <p>Perforation: No</p> <p>Size: 5.5 × 3.0 × 1.0 cm</p> <p>Depth of invasion: Subserosa</p> <p>Other Pathology:</p> <ul style="list-style-type: none"> ● Tumor invades subserosa, pT3 ● 3 out of 41 lymph nodes positive for metastatic carcinoma (pN2) 	<p>Histological tumor type: Adenocarcinoma,</p> <p>Histological pattern:</p> <ul style="list-style-type: none"> - WHO classification: Tubular - Lauren classification: Intestinal <p>Histological grade: (Only for WHO tubular carcinoma): Poorly differentiated (5-49% gland formation)</p>
GC127 (Male, 78 years old, other race)	<p>Location: gastro-oesophageal junction</p> <p>Perforation: No</p> <p>Size: 3.5 × 3.0 cm</p> <p>Depth of invasion: Muscularis propria</p> <p>Other Pathology:</p> <ul style="list-style-type: none"> ● Twelve lymph nodes with no evidence of metastatic carcinoma (0/12) 	<p>Histological tumor type: Adenocarcinoma.</p> <p>Histological pattern:</p> <ul style="list-style-type: none"> - WHO classification: tubular carcinoma - Lauren classification: Intestinal. <p>Histological grade: Moderately to poorly differentiated</p>
GC84 (Male, 93 years old, Chinese)	<p>Location: Incisura</p> <p>Perforation: No</p> <p>Size: 6.0 × 5.5 × 1.2 cm (depth)</p> <p>Depth of invasion: Beyond muscularis mucosa and less than 0.1 cm from serosa</p> <p>Other Pathology:</p> <ul style="list-style-type: none"> ● Background of H. pylori-associated chronic active gastritis with intestinal metaplasia ● Omentum negative for carcinoma ● 21 lymph nodes without metastatic carcinoma (0/21) 	<p>Histological tumor type: Adenocarcinoma</p> <p>Histological pattern:</p> <ul style="list-style-type: none"> - WHO classification: Tubular/solid type - Lauren classification: Intestinal type <p>Histological grade: Poorly differentiated</p>
GC113 (Female, 77 years old, Chinese)	<p>Location: Posterior wall of the antrum</p> <p>Perforation: No</p> <p>Size: 4.5 × 3.0 × 1.0 cm</p> <p>Depth of invasion: Submucosa</p> <p>Other Pathology:</p> <ul style="list-style-type: none"> ● Lymphovascular invasion is present ● Lymph nodes negative for metastatic carcinoma (0/40), pN0 	<p>Histological tumor type: Adenocarcinoma</p> <p>Histological pattern:</p> <ul style="list-style-type: none"> - WHO classification: Tubular - Lauren classification: Intestinal type <p>Histological grade: Moderately differentiated</p>