

Supplementary Material

The Challenges of Modeling Drug Resistance to Antiangiogenic Therapy

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SUPPLEMENTAL BOX 1: CRITICAL CONSIDERATIONS FOR THIS LITERATURE SEARCH

Several papers required additional considerations/criteria for characterization and grouping for literature analysis. These include:

1) Distinguishing Between Resistance that was ‘Derived’ vs. ‘Studied’

Of the 109 papers analyzed, we found that how resistance was *derived* was not always similar to how resistance was *studied*. For instance, some papers described resistant cells that were *derived in vitro* but then later used to *study* resistance mechanisms *in vivo*, or *vice versa*. For example, Zhai *et al.* treated hepatocellular carcinoma cells with increasing concentrations of sorafenib *in vitro* to derive cells, but then implanted these cells ectopically in mice to study the effects of Akt inhibition on resistance [88]. Conversely, Baker *et al.* derived sorafenib resistant cells from acute myeloid leukemia patients but then studied whether sorafenib-resistant FLT3 mutated cells were sensitive to sunitinib *in vitro* [37]. In such instances, we used such designations to separate studies as described in Fig. (3) and as outlined in Supplemental Table 1.

2) Distinguishing Between Acquired or Intrinsic Resistance

Out of the 109 papers, we identified 62 papers that derived resistance by treating cells *in vitro* or *in vivo* until they became non-responsive to treatment over time. These were designated as *acquired* resistance studies. In contrast, we found 50 papers that identified intrinsically resistant cells and used them for study. These included either an initial (failed) treatment effect or a phenotype induced by genetic modification that generated non-responsiveness to therapy. For example, Shojaei *et al.* identified cells with intrinsic sunitinib resistance in implanted tumors *in vivo* [10], whereas Liu *et al.* induced sorafenib resistance in hepatocellular carcinoma cells by overexpressing PROX1 [99]. For this reason, we grouped papers accordingly in our analysis (see Supplemental Table 1 for details).

3) Some Studies Fit into Multiple Categories

Of 109 papers identified in our literature search, we found several studies which could not be sub-grouped easily as they contained multiple classifications or categories (see Fig. 3; gray areas). For example, Bender *et al.* used sunitinib and sorafenib for their studies [24], Lo *et al.* derived resistance *in vitro* and *in vivo* [100], and Harada *et al.* studied resistance *in vivo* and *in vitro* [74]. Groupings for each study in our analysis are explained in Supplemental Table 1.

4) Search Criteria did not Identify all Papers

As mentioned in the manuscript, our search results identified 381 publications related to antiangiogenic drug resistance, which was reduced to include only those that met our criteria (detailed in Fig. 1). In instances where PubMed did not identify all key words, additional papers were added to the final list (total 30). While the final 109 papers identified may not represent a complete list, we feel excluded papers likely do not represent sufficient quantities to alter the general disparities noted in Figs. (2-4).

(Table S1) contd....

Ref	PMID	Breakdown of drugs used								Breakdown of Models Used to Derive Resistance							Breakdown of Models Used to Study Resistance																
		Sunitinib (37)	Bevacizumab (18)	Sorafenib (50)	Pazopanib (4)	Axitinib (0)	Cabozantinib (1)	Regorafenib (0)	DC101 (7)	Ziv-Aflibercept (1)	B20/GG-31 (3)	Tumor				Non-Tumor			All models					Implantation only		Metastatic only							
												Intrinsic		Acquired		Intrinsic	Acquired		in vitro		in vivo		In vitro (78)	in vivo		in vivo		Orthotopic implantation (14)	in vivo		Experimental (2)	in vivo	
												in vitro	in vivo	in vitro	in vivo	in vivo	in	in vivo	in vitro					Orthotopic implantation (59)	PDX (8)	Spontaneous-primary removed	Spontaneous-primary intact (16)						
Manipulated genetically (17)	Known (5)	Discovered (16)	Known (6)	Discovered (11)	Generated (29)	Primary tumor (34)	Metastatic lesions (2)	Discovered (1)	Generated (2)	Primary site (1)	Implanted Xenograft (56)	Implanted Syngeneic (11)	GEMM (6)	IV (2)	Other (1)																		
73	25319392		x										x				x																
74	24356934			x										x																			
75	25587220	x												x																			
76	24628546				x									x																			
77	24333721													x																			
78	24240114		x																														
79	25015210		x																														
80	25017961				x									x																			
81	24716227			x										x																			
82	24726537			x										x																			
83	24475095	x												x																			
84	25088418							x																									
85	25216638			x										x																			
86	25047655			x										x																			
87	25531114			x										x																			
88	24705351			x										x																			
89	24619500			x										x																			
90	24486412			x																													
91	25519701	x												x																			
92	25381264	x												x																			
93	25381153		x																														
94	25053293			x																													
95	25663899	x												x																			
96	25855496				x									x																			
97	25908587			x																													
98	26219898																																
99	25684142			x										x																			
100	25902734			x										x																			
101	25976987			x										x																			
102	26172295			x										x																			
103	25519148		x																														
104	25769726													x																			
105	26114873	x																															
106	25501128	x																															
107	25885470			x																													
108	25850433			x																													
109	25675297	x												x																			

Classification of 109 papers used for analysis based antiangiogenic drugs used and methods used to derive and study resistance. Notes: Studies involving intrinsic resistance were subdivided into those generated by genetic modification or those found non-responsive to treatment in previous ('known') or current ('discovered') studies. Studies involving acquired resistance included those derived *in vitro* or *in vivo* following chronic or escalating drug doses ('generated'). See Fig. (1) for complete list of drugs and drug names used in search. GEMM, Genetically Engineered Mouse Model; PDX, patient-derived xenograft; IV, intravenous.

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