## **Supplementary Material**

These document contains supplementary tables with detailed survival data respective to molecular subgroups of trials analysed in this meta-

analysis.

## Online resource 1. PREDICTIVE RESULTS OF THERAPEUTIC ESCALATION ACCORDING TO RAS STATUS IN FIRST LINE THERAPY

		TRIBE				AVG2107g					FO	CUS				ML2	2011			AGITG	-MAX	
	RA	RAS WT RAS		RAS MUT		RAS WT		RAS MUT		RAS WT		RAS MUT		RAS WT		RAS MUT		RAS WT		RAS MUT		
Parameter	FOLFIRI + Bev	FOLFOXIRI + Bev	FOLFIRI + Bev	FOLFOXIRI +Bev	IFL	IFL + Bev	IFL	IFL + Bev	5-FU	IrFU	OxFU	5-FU	IrFU	OxFU	FP +Bev	FP +Bev	FP +Bev	FP +Bev	Cape	Cape+Bev/ Cape	Cape	Cape+Bev/ Cape
															+Iri	followed	+Iri	followed		+Bev		+Bev
																by Iri		by Iri		+Mito		+Mito
OS		<u> </u>					I				<u> </u>	<u> </u>					<u> </u>	<u> </u>				
Median, months	26.8	37.1	23.9	27.3	17.6	27.7	13.6	19.9		n/a			n/a		32.2	25.2	23.2	21.3	20.6	18.9	22.8	20.4
	0.78 (0	.51 – 1.20)	0.88 (0.	65 – 1.18)	0.58 (	0.30 –	0.69 (0	0.40 –	1.00	1.01	0.86	1.00	0.92	0.82	0.58 (0.	38 – 0.89)	0.92 (0	.65 – 1.29)	0.99 (0.	67 – 1.45)	0.91 (0.	58 – 1.44)
HR (95 % CI)					1.0	00)	1.3	80)		(0.77 – 1.32)	(0.66 – 1.12)		(0.69 – 1.21)	(0.61 – 1.11)								
P value		0.66			0.	04	0.2	0.26			0.87			(	0.01	(	0.62	(	).95	(	0.70	
PFS																						
Median, months	11.0	12.8	9.5	12.0	7.4	13.5	5.5	9.3		n/a			n/a		12.6	8.4	9.3	8.1	6.0	8.6	6.2	8.8
HR (95 % CI)	0.84 (0.	58 – 1.21)	0.78 (0.	60 – 1.02)	0.44 ( 0.7		0.41 (( 0.7		1.00	0.73 (0.57 – 0.94)	0.67 (0.52 – 0.86)	1.00	0.77 (0.58 – 1.02)	0.63 (0.48 – 0.86)	0.49 (0.	35 – 0.69)	0.87 (0	.65 – 1.17)	0.69 (0.	49 – 0.97)	0.56 (0.	37 – 0.86)
P value		0.	77		< 0.0	0001	0.00	008			0.	.92			< 0.001 0.34		(	0.03	0	.007		

Legend: RAS: rat sarcoma; WT: wildtype; MUT: mutated; FOLFIRI: 5-fluorouracil/folinic acid/irinotecan; FOLFOXIRI: 5-fluorouracil/folinic acid/oxaliplatin/irinotecan; IFL: irinotecan/5-fluorouracil/folinic acid; Bev: bevacizumab; 5-FU: 5-fluorouracil; IrFU: irinotecan/5-fluorouracil; OxFU: oxaliplatin/5-fluorouracil; FP: fluoropyrimidine, Cape: capecitabine; Mito: mitomycin; OS: overall survival; PFS: progression free survival; HR: hazard ratio; 95% CI: 95% confidence interval

2

		ML1	8147			R/	AISE			VI	ELOUR	
Parameter	RAS	WT	RAS	MUT	RA	S WT	RAS	MUT	RAS	WT	RAS MUT	
-	Chemotherapy	Chemotherapy	Chemotherapy	Chemotherapy	FOLFIRI	FOLFIRI	FOLFIRI	FOLFIRI	FOLFIRI	FOLFIRI	FOLFIRI	FOLFIRI
		+Bev		+Bev		+ramucirumab		+ramucirumab		+aflibercept		+aflibercept
OS												
Median,	11.1	15.4	10.0	10.4	11.9	14.4	11.3	12.7	11.7	16.0	11.2	12.6
months												
HR (95 % CI)	0.69 (0.53 – 0.90)		0.92 (0.71 – 1.18)		0.82 (0.67 – 1.00)		0.89 (0.73 – 1.09)		0.70 (0.50 – 0.97)		0.93 (0.70 – 1.23)	
P value	0.0	052	0.4969		0.049		0.263		n/a		n/a	
PFS											<u> </u>	
Median,	4.5	6.4	4.1	5.5	4.7	5.7	4.3	5.6	4.5	7.7	4.2	6.5
months												
HR (95 % CI)	0.61 (0.49 – 0.77)		0.70 (0.56 – 0.89)		0.77 (0.65 – 0.92)		0.84 (0.70 – 1.00)		0.67 (0.49 – 0.93)		0.80 (0.60 - 1.07)	
P value	< 0.0001		0.0027		0	.004	0.0	056	n/	а	n/a	

Legend: RAS: rat sarcoma; WT: wildtype; MUT: mutated; FOLFIRI: 5-fluorouracil/folinic acid/irinotecan; Bev: bevacizumab; OS: overall survival; PFS: progression free survival; HR: hazard ratio; 95% CI: 95% confidence interval

		COR	RECT			COM	ICUR		RECOURSE				
	R	AS WT	RAS MUT		RAS WT		RAS MUT		RAS WT		RAS MUT		
Parameter	Placebo	Regorafenib	Placebo	Regorafenib	Placebo	Regorafenib	Placebo	Regorafenib	Best supportive care	Best supportive care +TAS102	Best supportive care	Best supportive care +TAS102	
OS		1					1						
Median, months	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	5.7	8.0	4.9	6.5	
HR (95 % CI)	0.65 (0.4	8 – 0.90)	0.87 (0.67 – 1.12)		0.59 (0.34 – 1.01)		0.65 (0.36 – 1.15)		0.58 (0.45 – 0.74)		0.80 (0.63 – 1.02)		
P value	n/a		n/a		n/a		n/a		< 0.0001		0.0712		
PFS							1						
Median, months	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	1.7	2.1	1.8	1.9	
HR (95 % CI)	0.48 (0.36 – 0.62)		0.53 (0.43 – 0.65)		0.43 (0.26 – 0.71)		0.15 (0.08 – 0.30)		0.48 (0.38 – 0.60)		0.49 (0.39 – 0.61)		
P value	n/a		n/a		n/a		n/a		0.0001		< 0.0001		

Legend: RAS: rat sarcoma; WT: wildtype; MUT: mutated; TAS102: trifluridine/tipiracil; OS: overall survival; PFS: progression free survival; HR: hazard ratio; 95% CI: 95% confidence interval

Online res	source 4. P	REDICTIVE	RESULTS OF	THERAPE	UTIC ESCALAT	ION ACCORE	DING TO F	RAS STATUS	IN MAIN	ITENANCE T	HERAPY			
			AIO	KRK0207				CAI	RO3		PRODIGE9			
Parameter		RAS/BRAF W	Т	RAS/BRAF MUT			RAS WT		RAS MUT		RAS WT		RAS MUT	
	No treatment	Bevacizumab	Fluoropyrimidine Bevacizumab	No treatment	Bevacizumab	Fluoropyrimidine Bevacizumab	No treatment	Capecitabine +bevacizumab	No treatment	Capecitabine +bevacizumab	No treatment	Bevacizumab	No treatment	Bevacizumab
OS														
Median, months	27.8	28.6	27.0	20.0	18.8	19.4	19.0	25.7	18.7	20.9	n/a	n/a	n/a	n/a
HR (95 %	Control 1.01 (0.56 1.15 (0.64 –		Control 0.97 (0.64 –		1.05 (0.69 –	0.68 (0.46 – 1.00)		0.98 (0.73 – 1.30)		0.92 (0.72 – 1.31)		1.13 (0.82 – 1.55)		
CI)		- 1.81)	2.08)		1.44)	1.61)								
P value	n/a			n/a			0.047		0.867		0.499			
PFS														
Median, months	3.9	5.3	8.1	3.7	4.1	6.4	9.0	13.3	8.9	11.2	n/a	n/a	n/a	n/a
HR (95 %	Control	0.45 (0.28	0.33 (0.21 –	Control	0.84 (0.58 –	0.53 (0.36 –	0.57 (0.39	9 – 0.84)	0.74 (0.55	5 – 0.89)	0.72 (0.54	4 – 0.95)	1.07 (0.7	79 – 1.44)
CI)		- 0.72)	0.53		1.19)	0.78)								
P value	n/a	·		n/a			0.004 0.038				0.072			

Legend: RAS: rat sarcoma; WT: wildtype; MUT: mutated; OS: overall survival; PFS: progression free survival; HR: hazard ratio; 95% CI: 95% confidence interval

Online resource 5: PRISMA statement chee	cklist.		
Section/topic	#	Checklist item	Reported on page #
TITLE			
Title	1	Identify the report as a systematic review, meta-analysis, or both.	1
ABSTRACT			
Structured summary	2	Provide a structured summary including, as applicable: background; objectives; data sources; study eligibility criteria, participants, and interventions; study appraisal and synthesis methods; results; limitations; conclusions and implications of key findings; systematic review registration number.	2
INTRODUCTION	= =		
Rationale	3	Describe the rationale for the review in the context of what is already known.	3
Objectives	4	Provide an explicit statement of questions being addressed with reference to participants, interventions, comparisons, outcomes, and study design (PICOS).	3
METHODS	<b>I I</b>		
Protocol and registration	5	Indicate if a review protocol exists, if and where it can be accessed (e.g., Web address), and, if available, provide registration information including registration number.	n/a
Eligibility criteria	6	Specify study characteristics (e.g., PICOS, length of follow-up) and report characteristics (e.g., years considered, language, publication status) used as criteria for eligibility, giving rationale.	4
Information sources	7	Describe all information sources (e.g., databases with dates of coverage, contact with study authors to identify additional studies) in the search and date last searched.	4
Search	8	Present full electronic search strategy for at least one database, including any limits used, such that it could be repeated.	4
Study selection	9	State the process for selecting studies (i.e., screening, eligibility, included in systematic review, and, if applicable, included in the meta-analysis).	4
Data collection process	10	Describe method of data extraction from reports (e.g., piloted forms, independently, in duplicate) and any processes for obtaining and confirming data from investigators.	5
Data items	11	List and define all variables for which data were sought (e.g., PICOS, funding sources) and any assumptions and simplifications made.	5
Risk of bias in individual studies	12	Describe methods used for assessing risk of bias of individual studies (including specification of whether this was done at the study or outcome level), and how this information is to be used in any data synthesis.	5
Summary measures	13	State the principal summary measures (e.g., risk ratio, difference in means).	5
Synthesis of results	14	Describe the methods of handling data and combining results of studies, if done, including measures of consistency (e.g., I²) for each meta-analysis.	6-7
Risk of bias across studies	15	Specify any assessment of risk of bias that may affect the cumulative evidence (e.g., publication bias, selective reporting within studies).	5-6
Additional analyses	16	Describe methods of additional analyses (e.g., sensitivity or subgroup analyses, meta-regression), if done, indicating which were pre-specified.	6-7
RESULTS			
Study selection	17	Give numbers of studies screened, assessed for eligibility, and included in the review, with reasons for exclusions at each stage, ideally with a flow diagram.	8
Study characteristics	18	For each study, present characteristics for which data were extracted (e.g., study size, PICOS, follow-up period) and provide the citations.	See Methods
Risk of bias within studies	19	Present data on risk of bias of each study and, if available, any outcome level assessment (see item 12).	n/a
Results of individual studies	20	For all outcomes considered (benefits or harms), present, for each study: (a) simple summary data for each intervention group (b) effect estimates and confidence intervals, ideally with a forest plot.	SUPP
Synthesis of results	21	Present results of each meta-analysis done, including confidence intervals and measures of consistency.	8-9
Risk of bias across studies	22	Present results of any assessment of risk of bias across studies (see Item 15).	8-9
Additional analysis	23	Give results of additional analyses, if done (e.g., sensitivity or subgroup analyses, meta-regression [see Item 16]).	8-9
DISCUSSION			
Summary of evidence	24	Summarize the main findings including the strength of evidence for each main outcome; consider their relevance to key groups (e.g., healthcare providers, users, and policy makers).	10-13
Limitations	25	Discuss limitations at study and outcome level (e.g., risk of bias), and at review-level (e.g., incomplete retrieval of identified research, reporting bias).	10-13
Conclusions	26	Provide a general interpretation of the results in the context of other evidence, and implications for future research.	10-13
FUNDING			
Funding	27	Describe sources of funding for the systematic review and other support (e.g., supply of data); role of funders for the systematic review.	14