

Supplemental Table for:

Hepatitis B Surface Antigen Positivity is An Independent Unfavorable Prognostic Factor in Diffuse Large B-cell Lymphoma in The Rituximab Era

Chieh-Lung Cheng et al.

Figure. S1 Kaplan–Meier curves for (A) overall survival and (B) progression-free survival in patients with diffuse large B-cell lymphoma in the total cohort.

Figure. S2 Kaplan–Meier curves for (A) overall survival (OS) and (B) progression-free survival (PFS) in the patients with germinal center B-cell-like (GCB) diffuse large B-cell lymphoma (DLBCL) (n = 90), stratified by the presence of hepatitis B surface antigen (HBsAg) at diagnosis. Kaplan–Meier curves for (C) OS and (D) PFS in the patients with non-GCB DLBCL (n = 143), stratified by the presence of HBsAg at diagnosis.

Figure. S3 Kaplan–Meier curves for lymphoma-specific survival in patients with diffuse large B-cell lymphoma (DLBCL), stratified by the presence of hepatitis B surface antigen (HBsAg) at diagnosis.

Figure. S4 Kaplan–Meier curves for lymphoma-specific survival in patients with diffuse large B-cell lymphoma (DLBCL), stratified by the presence of

hepatitis B surface antigen (HBsAg) and hepatitis B core antibody (HBcAb) at diagnosis. Eighty-nine patients without data of HBcAb at diagnosis were excluded from the analysis. Patients in the HBsAg-negative/HBcAb-positive group had a trend toward poorer lymphoma-specific survival compared with those in the HBcAb-negative group.

Figure. S5 Kaplan–Meier curves for (A) overall survival and (B) progression-free survival in patients with diffuse large B-cell lymphoma, stratified by the presence of hepatitis C virus (HCV) antibody at diagnosis.

Figure. S6 Kaplan–Meier survival curves in patients with diffuse large B-cell lymphoma in the TSGH external validation cohort, according to the scoring system. The scoring system divided the patients into 5 groups with significant different clinical outcomes. (A) The 3-year overall survival rates of the patients in the group 1, group 2, group 3, group 4 and group 5 were 100%, 88.1%, 61.1%, 45.8%, and 36.4%, respectively. (B) The 3-year lymphoma-specific survival rates of the patients in the group 1, group 2, group 3, group 4 and group 5 were 100%, 94.4%, 69.8%, 64.5%, and 42.4%, respectively.

Figure. S7 Kaplan–Meier curves of overall survival in diffuse large B-cell lymphoma (DLBCL) patients with hepatitis B surface antigen (HBsAg) positivity, stratified by the presence of (A) hepatitis B e antigen (HBeAg) at diagnosis and (B) hepatitis B virus (HBV) DNA loads before treatment. Seventeen patients without data of HBeAg at diagnosis and 21 without data of HBV DNA loads before treatment were excluded from analyses.

Figure. S8 Kaplan–Meier curves for overall survival in patients with hepatitis B surface antigen positivity, stratified by the type of prophylactic antiviral therapy.

Figure. S1

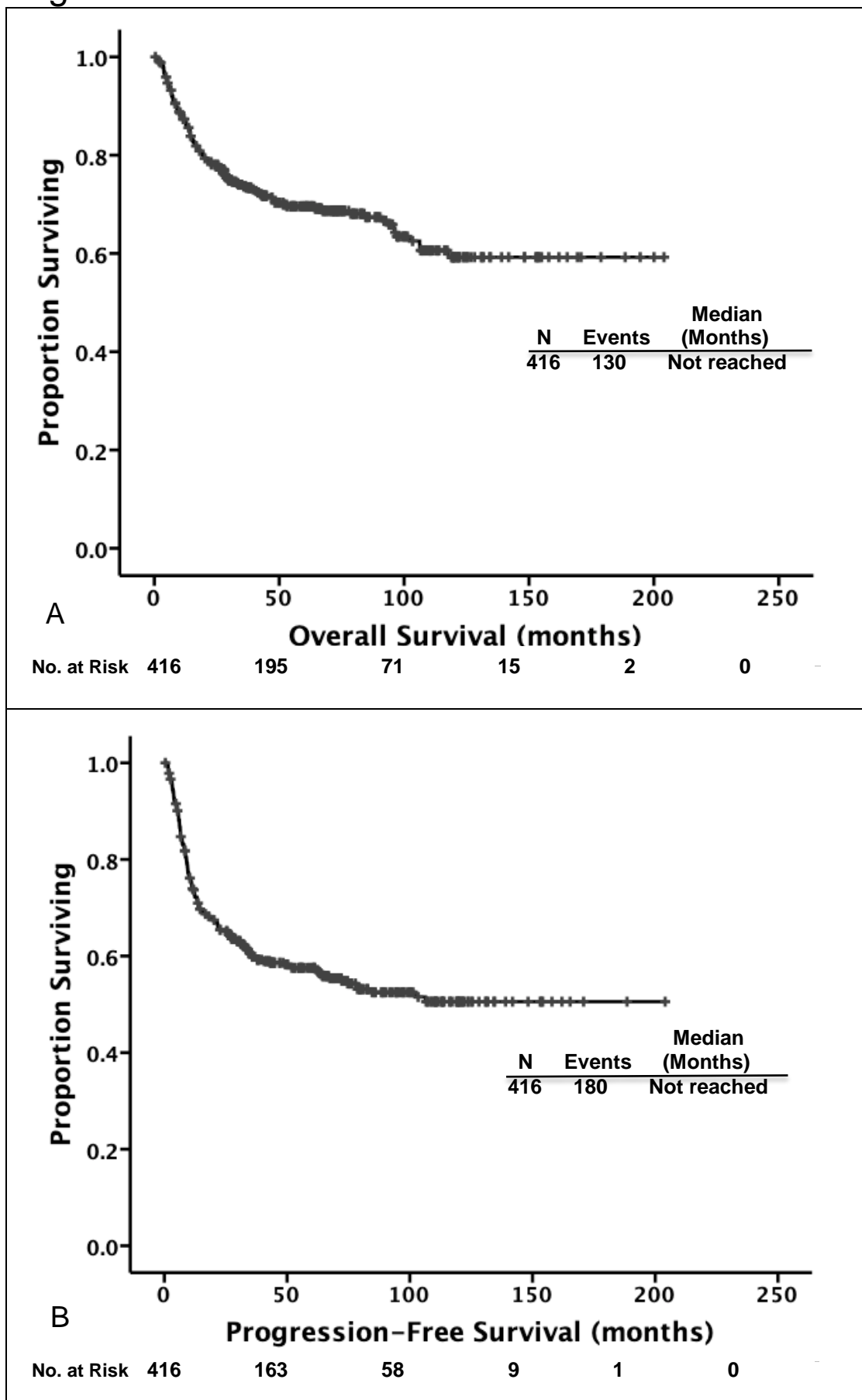


Figure. S2

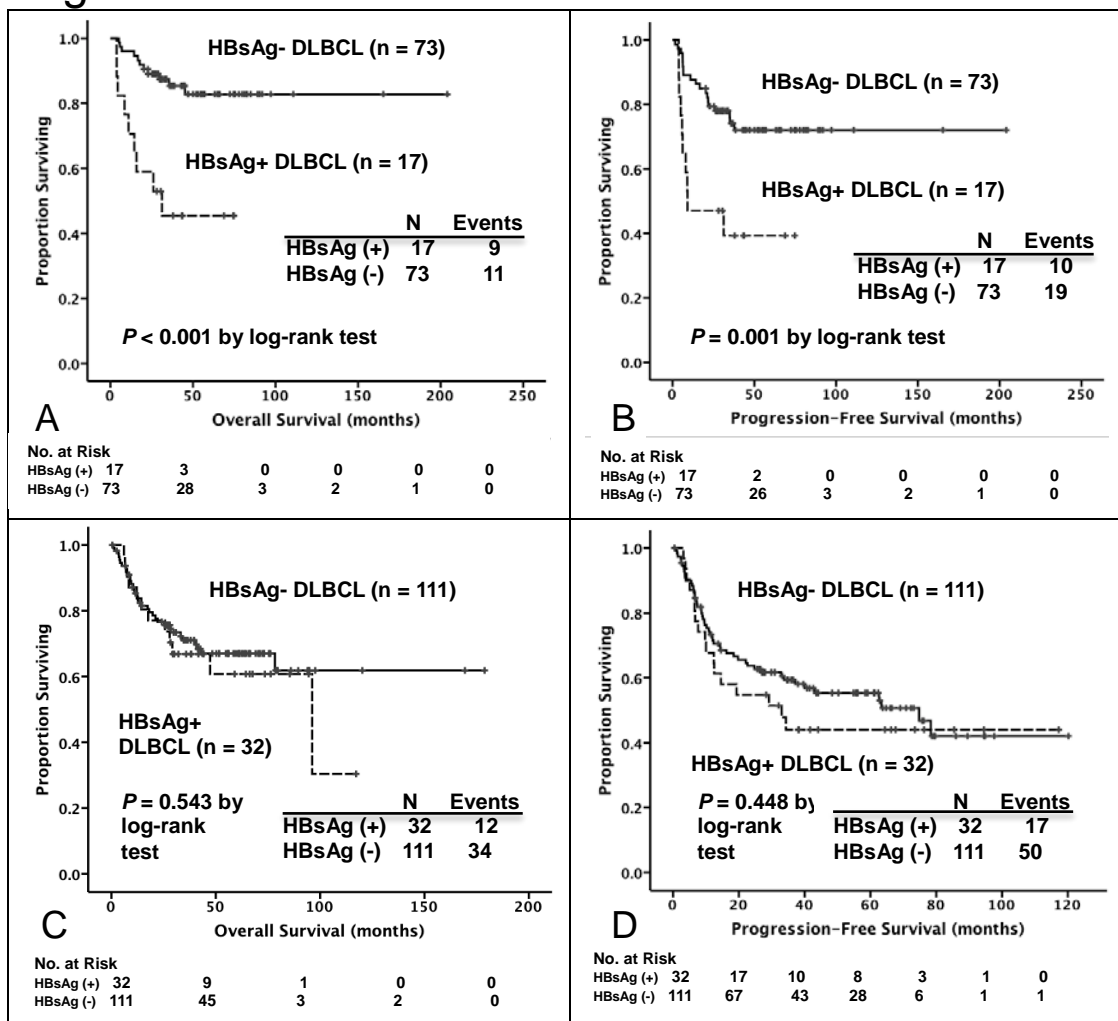


Figure. S3

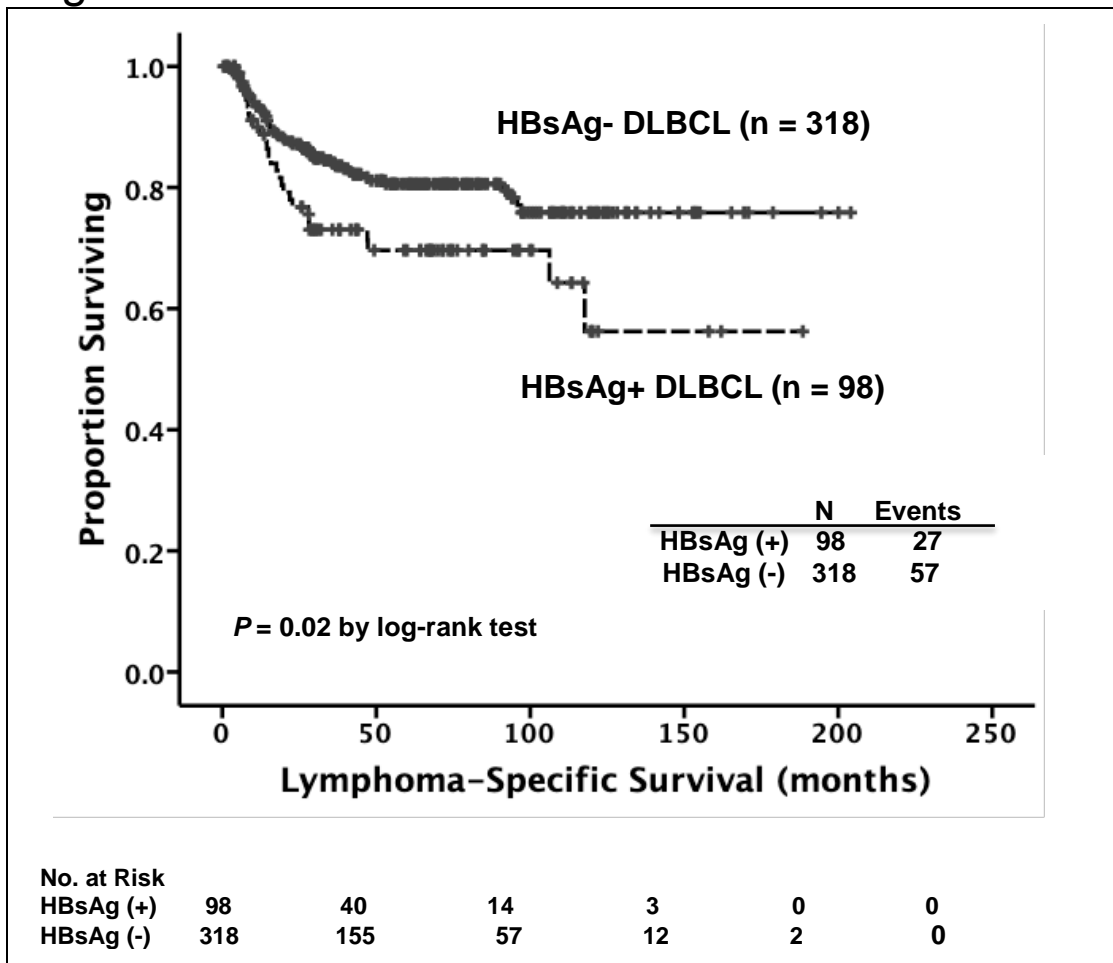


Figure. S4

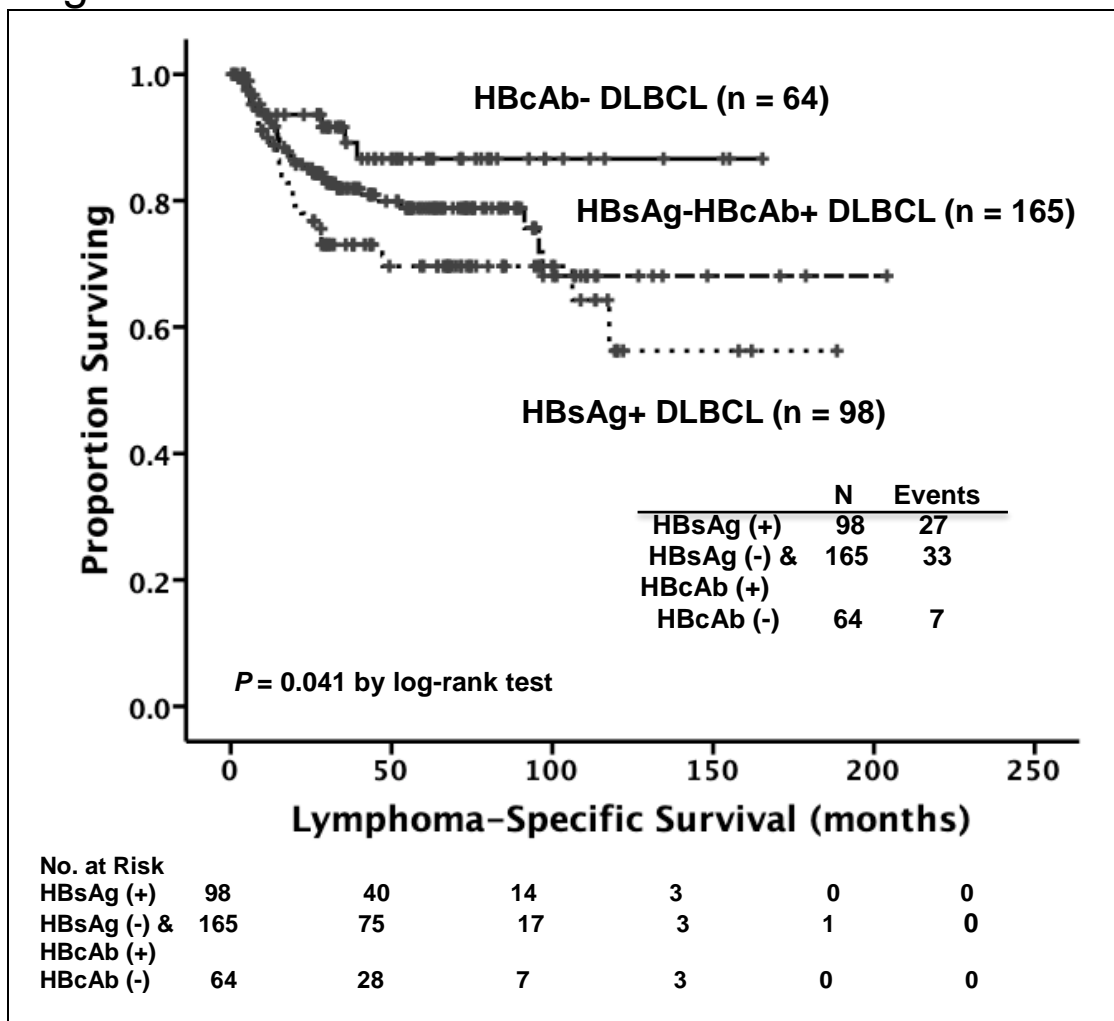


Figure. S5

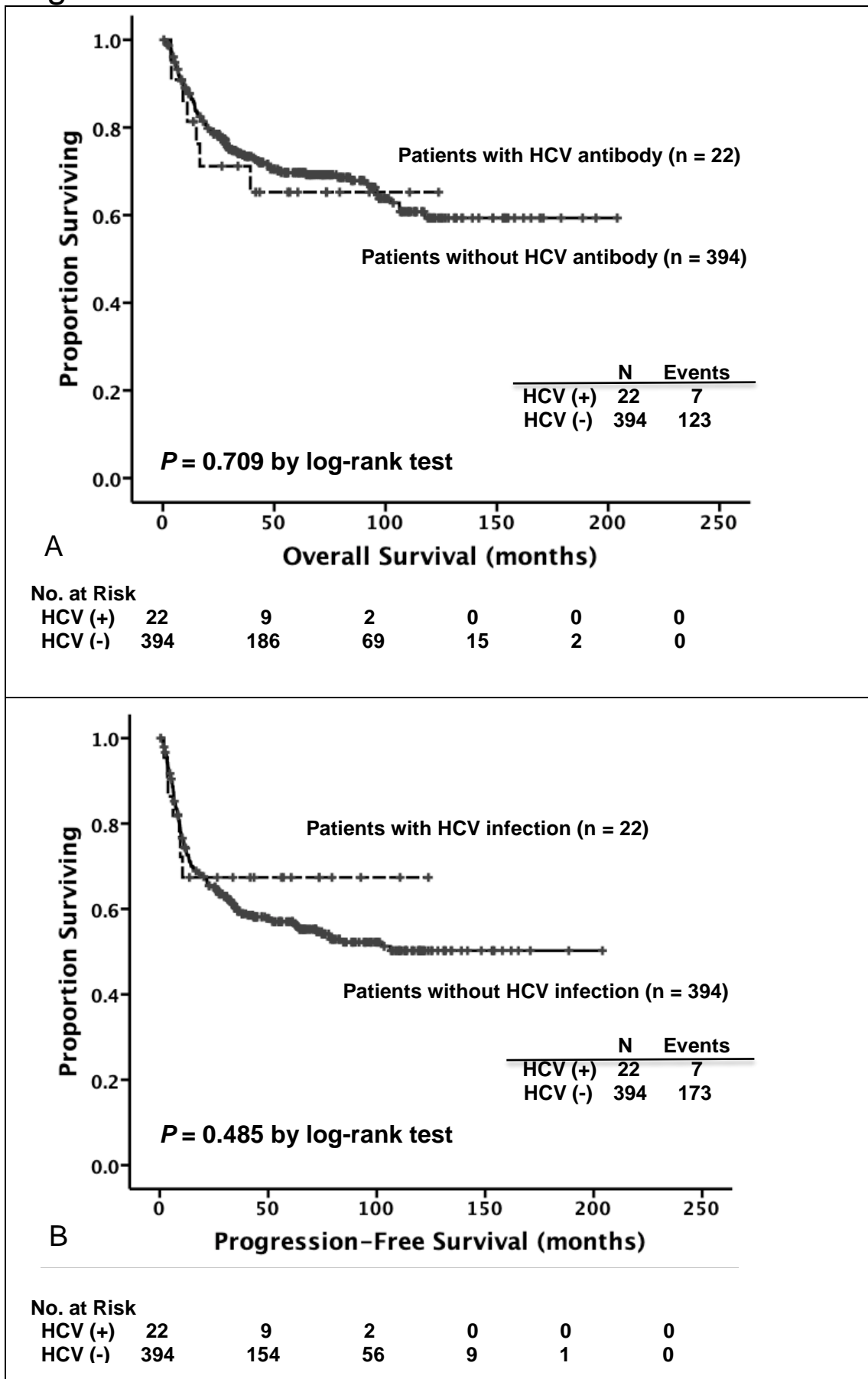




Figure. S6

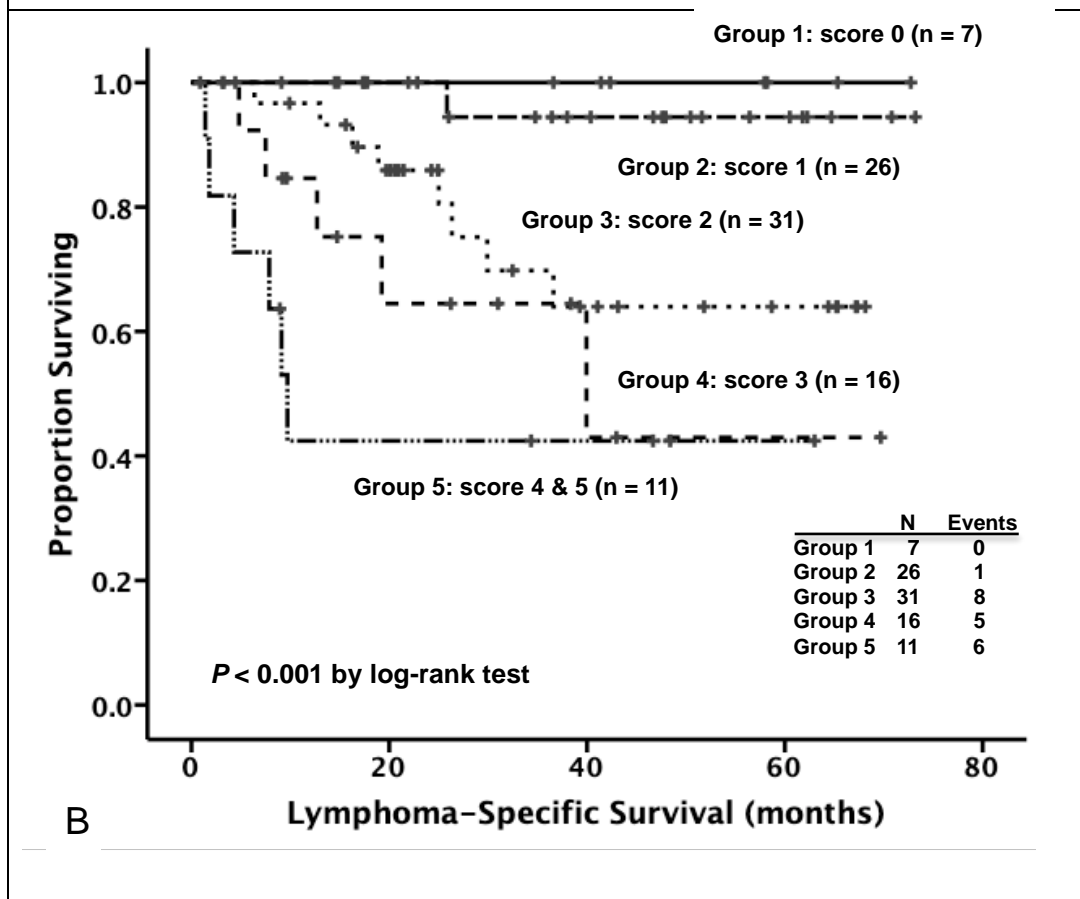
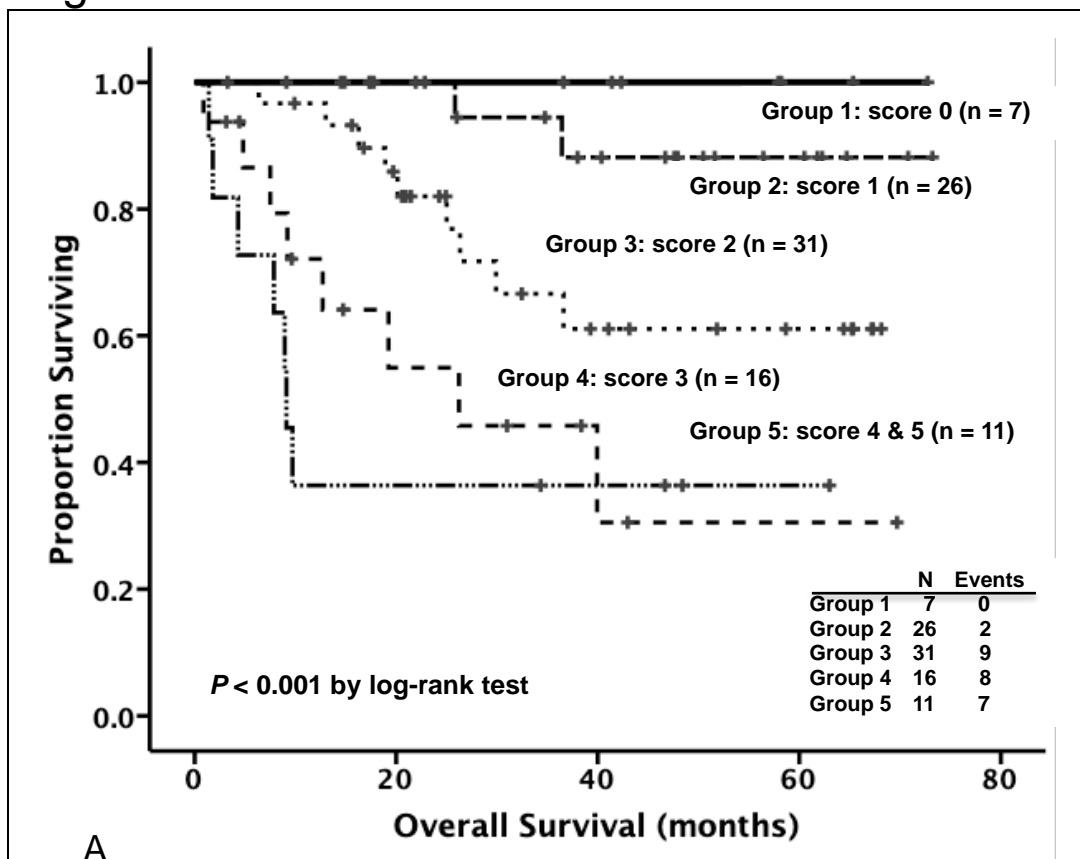


Figure. S7

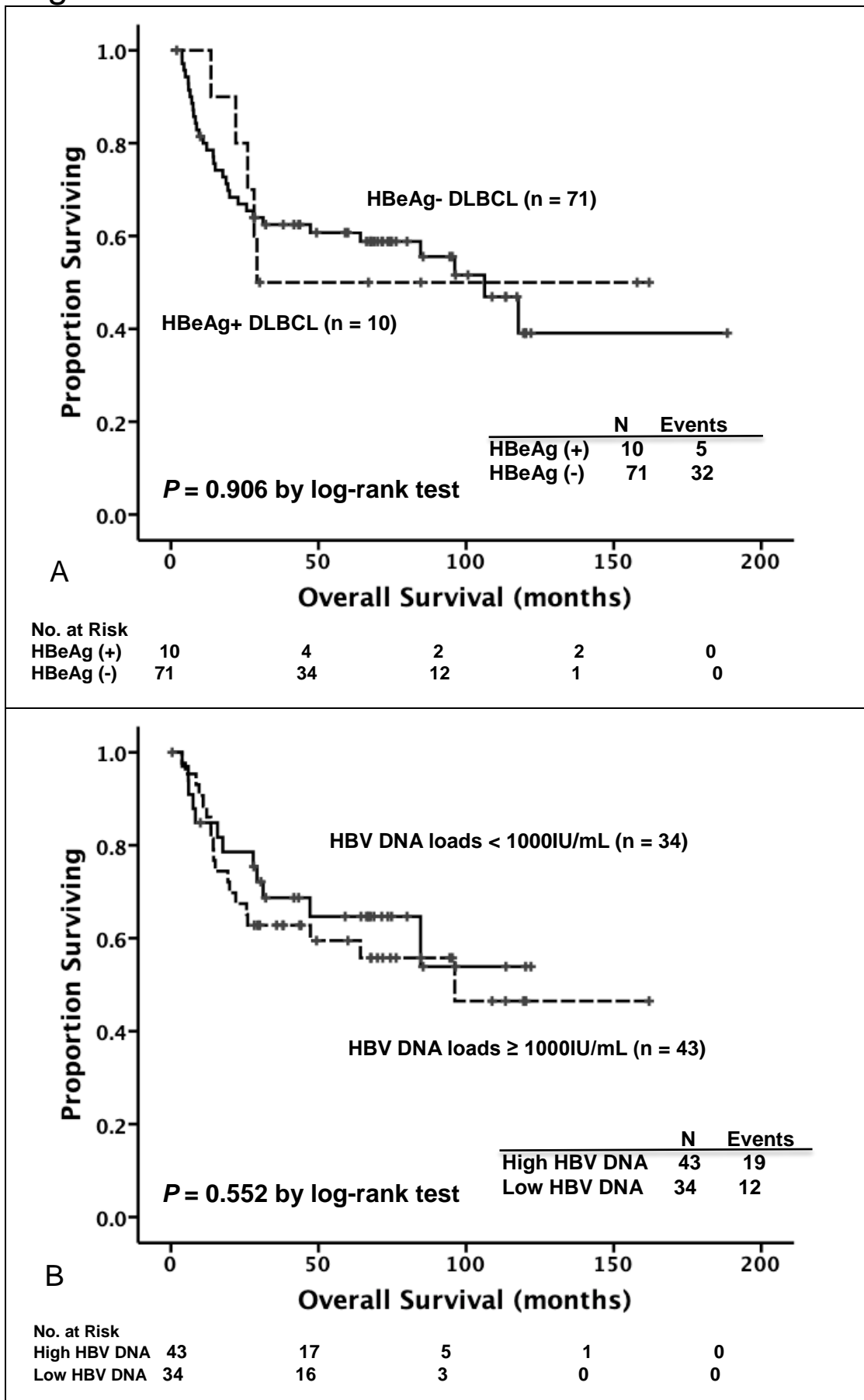


Figure. S8

