Supplementary Materials: Non-Invasive Mapping for Effective Preoperative Guidance to Approach Highly Language-Eloquent Gliomas—A Large Scale Comparative Cohort Study Using a New Classification for Language Eloquence

Sebastian Ille, Axel Schroeder, Lucia Albers, Anna Kelm, Doris Droese, Bernhard Meyer and Sandro M. Krieg

nrTMS Awake p-Value Number of cases 100 47 55.8 49.2 0.0129 Age SD 15.6 14.1 20-84 25-75 range WHO I 2(2.0)1(2.1)WHO II 12 (12.0) 8 (17.0) 0.0929 WHO III 17 (17.0) 15 (31.9) 23 (48.9) WHO IV 69 (69.0) 24 (51.1) First 63 (63.0) 0.2084 Recurrent 37 /37.0) 23 (48.9) frontal 42 (42.0) 15 (31.9) 16 (34.0) insular 13 (13.0) Lobe 2(4.3)0.0016 temporal 21 (21.0) 14 (29.8) parietal 20 (20.0) right 4(4.0)74.5 69.0 % of base-line pictures 0.1442 20.5 17.3 SD 93 (93.0) 44 (93.6) Standard picture data set 1 7(7.0)3 (6.4) Alternative task

Table S1. Baseline characteristics.

The table shows the baseline characteristics of all included patients separated into the according groups.

		nrTMS	Awake	<i>p</i> -Value
0.4	no new	71 (71.0)	28 (59.6)	0.0642
	transient	17 (17.0)	15 (31.9)	
Outcome	permanent	3 (3.0)	3 (6.4)	
	complication	9 (9.0)	1 (2.1)	
EOR	GTR	87 (87.9)	34 (72.3)	0.0378
	STR	13 (13.1)	13 (27.7)	
Duration	mean	209.9	268.4	<0.0001
	SD	79.3	65.9	
iMRI		30/58 (51.7)	13/19 (68.4)	0.2881

Table S2. Comparison of outcome.

The table shows the clinical and radiological outcome as well as data on the course of surgeries of all included patients separated into the according groups. Transient language deficits were defined as new surgery-related aphasia as examined five days after surgery, but the new aphasia was not persistent three months after surgery. Permanent language deficits were defined as new surgery-related aphasia as examined five days after surgery and three months after surgery. The row complication describes cases in both groups, in which the examination of the language outcome was not feasible due to a persistently decreased vigilance. The threshold for the differentiation between GTR and STR was >95% of the initial tumor volume. The percentages of iMRIs were calculated based on the period in which an iMRI was available at the department (EOR = extent of resection, GTR = gross total resection, STR = subtotal resection, iMRI = intraoperative MRI).