

Supplementary Materials:

Expression of Phosphorylated BRD4 is Markedly Associated with the Activation Status of the PP2A Pathway and Shows a Strong Prognostic Value in Triple Negative Breast Cancer Patients

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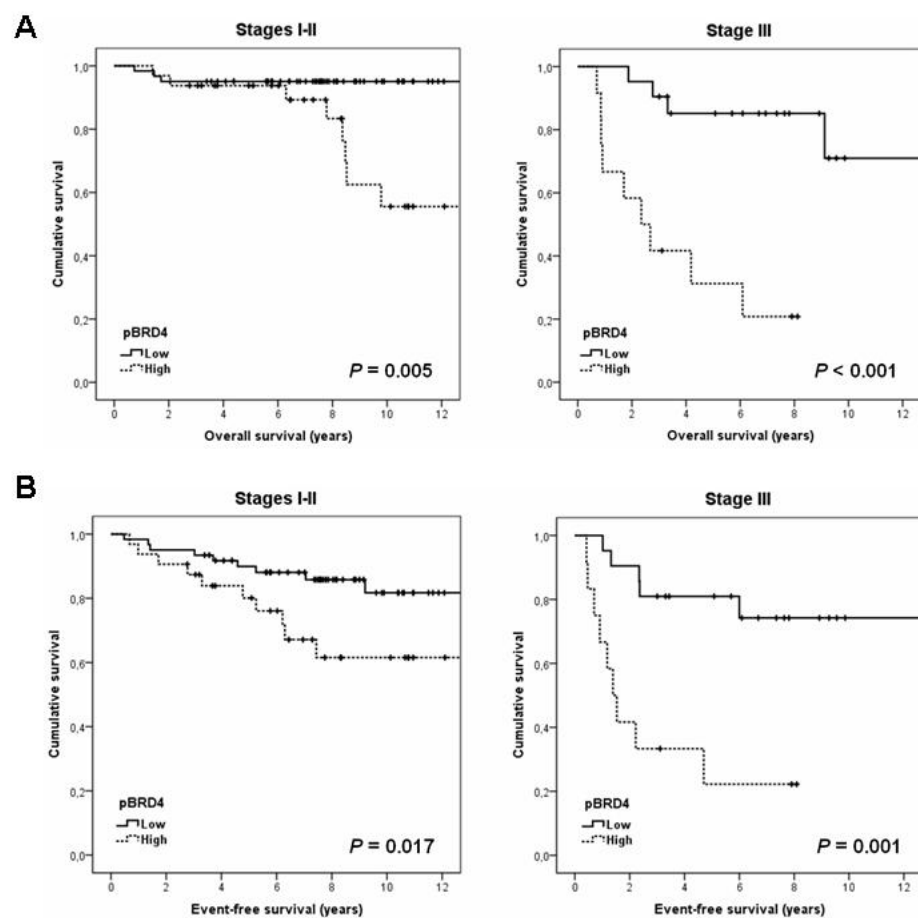


Figure S1. Clinical impact of pBRD4 in the cohort of 132 TNBC patients stratified by stage in (A) OS and (B) EFS.

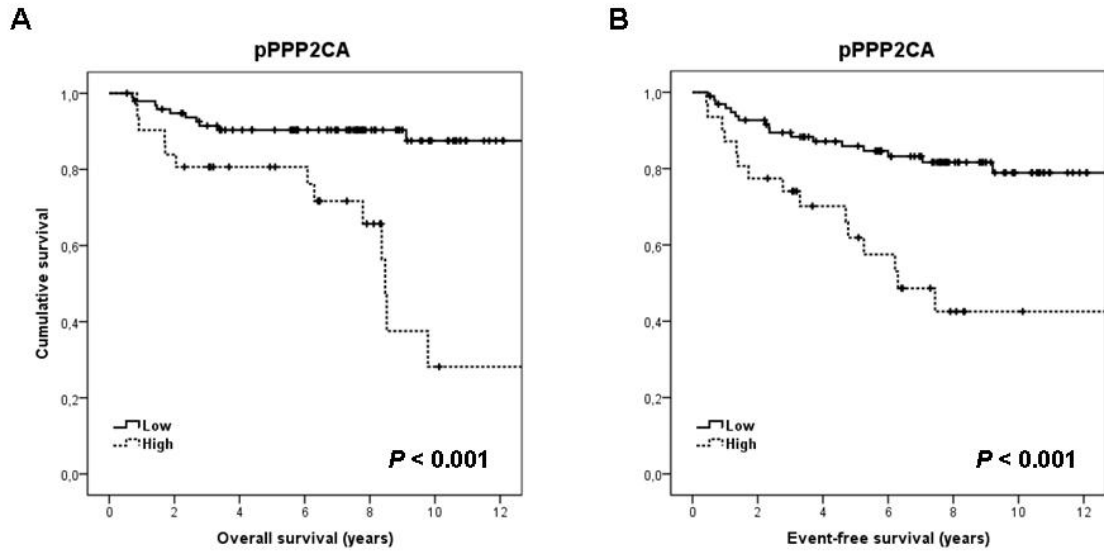


Figure S2. Clinical impact of pPPP2CA in the cohort of 132 TNBC patients in (A) OS and (B) EFS.

Table S1. Clinical and molecular characteristics in a series of 132 triple negative breast cancer patients.

Variation	Variation	No. (%)
Age		
Median (range)	57.5 (31–90)	
T		
	1	54 (40.9)
	2	60 (45.5)
	3–4	18 (13.6)
N		
	0	77 (58.3)
	1	33 (25.0)
	2–3	22 (16.7)
Stage		
	I	39 (29.5)
	II	60 (45.5)
	III	33 (25.0)
Grade		
	Low	4 (3.0)
	Moderate	43 (32.6)
	High	85 (64.4)
Morphological type		
	IDC	122 (92.4)
	ILC	9 (6.8)
	Others	1 (0.8)
Hormonal status		
	Premenopausal	36 (27.3)
	Postmenopausal	96 (73.7)
Chemotherapy		
	None	8 (6.1)
	Adjuvant	104 (78.8)
	Neoadjuvant	20 (15.1)
Chemotherapy backbone		
	None	8 (6.1)
	Anthracyclines	49 (37.1)
	Anthracyclines + Taxanes	42 (31.8)
	CMF	33 (25.0)

Relapse	No	98	(74.2)
	Yes	34	(25.8)

IDC: invasive ductal carcinoma; ILC: invasive lobular carcinoma.

Table S2. Association between SET and pPPP2CA expression levels in TNBC.

	No. Cases	No. Low SET (%)	No. High SET (%)	<i>p</i>
pPPP2CA	128	111	17	<0.001
Low	97	92 (82.9)	5 (29.4)	
High	31	19 (17.1)	12 (70.6)	