

# **Potential prognostic factors in progression-free survival for patients with cervical cancer**

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## **SUPPLEMENTARY INFORMATION – Content list**

### **Materials and methods**

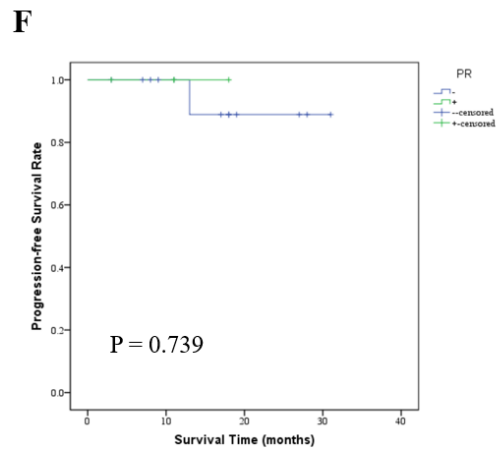
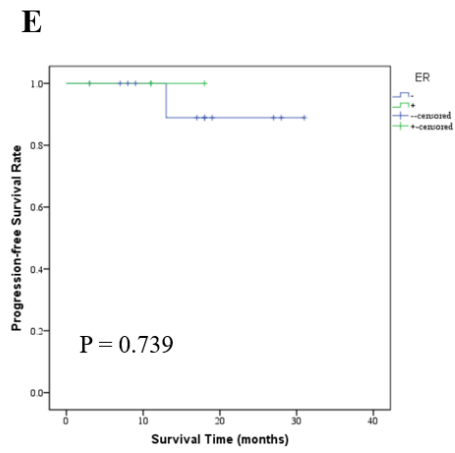
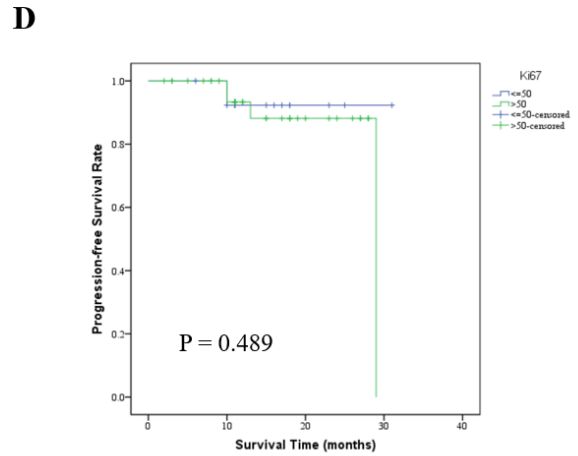
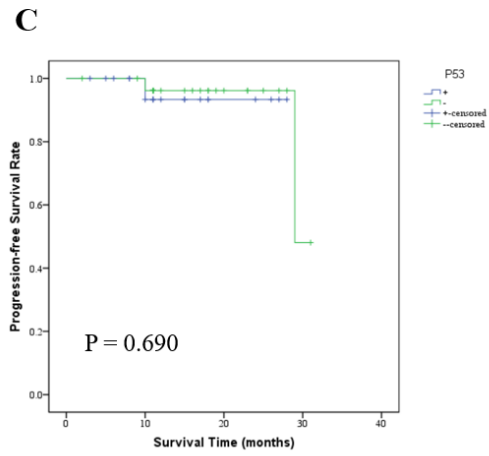
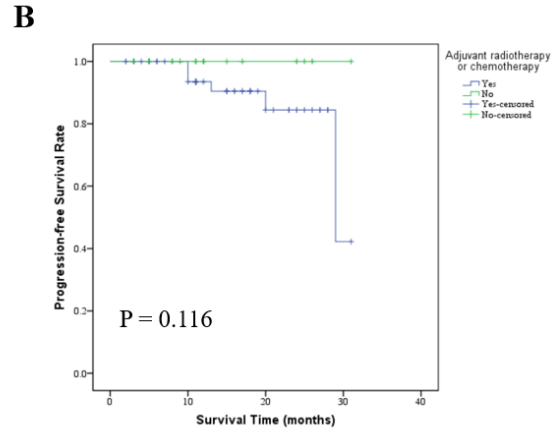
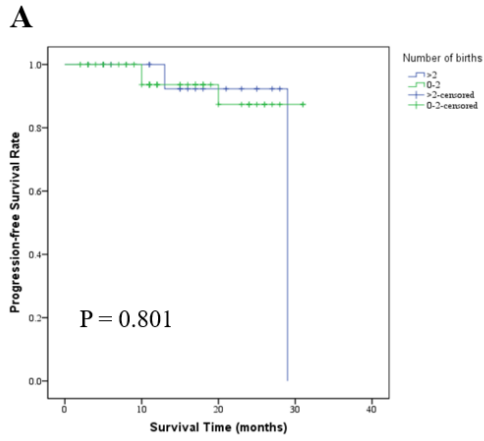
#### **Study design and participants**

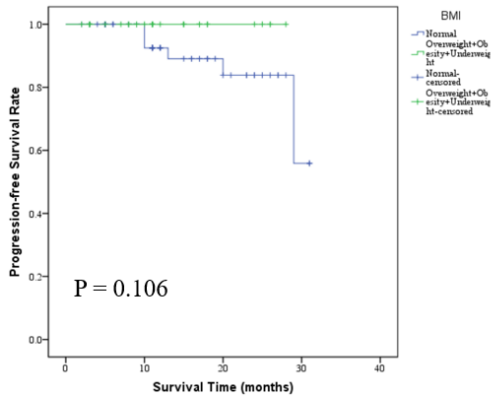
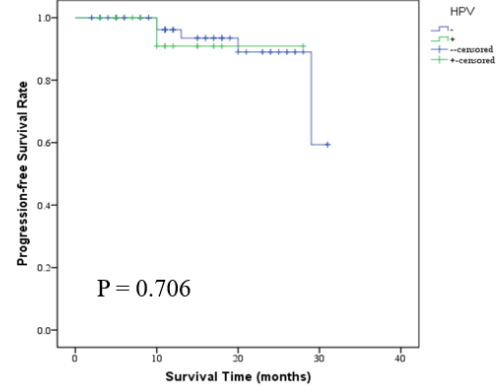
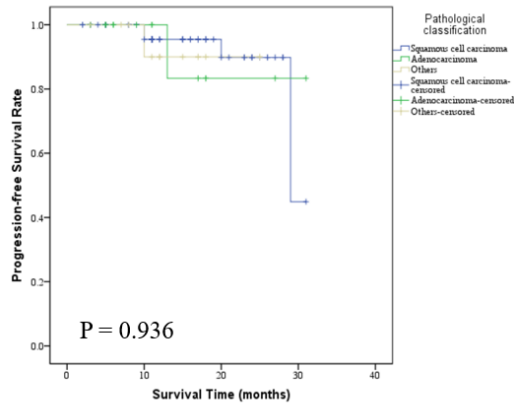
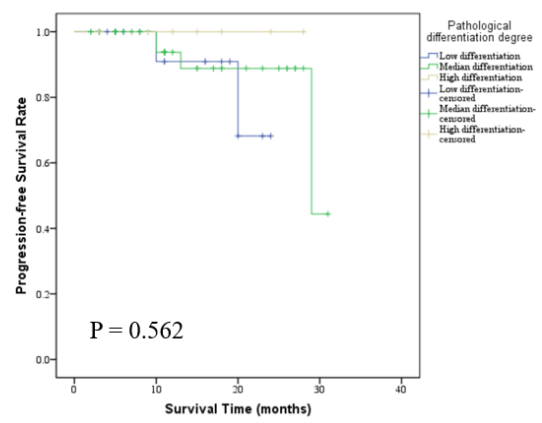
Cervical cancer screening is carried out according to the international three stages in China. In this study, 12 asymptomatic patients were all diagnosed by routine cervical cancer screening.

In our hospital, all patients underwent routine blood routine, biochemistry, coagulation, liver function test, SCC, CEA, AFP, CA125, electrocardiogram, chest CT plain scan with enhancement, pelvic MR plain scan with enhancement and other examinations before surgery. Due to the high cost and false negatives of PET and CT, such tests are only added when significant lymph node enlargement occurs on routine imaging. In this study, most patients of the pelvic lymph nodes were negative before surgery, and a few had slightly enlarged lymph nodes.

## FIGURE

- Figure S1 - Kaplan-Meier curves of PFS in patients with cervical cancer. (a): Number of births; (b): Adjuvant radiotherapy or chemotherapy; (c): P53; (d): Ki-67; (e): ER; (f): PR; (g): BMI; (h): HPV; (i): Pathological type; (j): Pathological differentiation degree



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