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Last updated by author(s):	May 18, 2021

Reporting Summary

Nature Research wishes to improve the reproducibility of the work that we publish. This form provides structure for consistency and transparency in reporting. For further information on Nature Research policies, see our Editorial Policies and the Editorial Policy Checklist.

For all statistical analyses, confirm that the following items are present in the figure legend, table legend, main text, or Methods section

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n/a	Confirmed
	\square The exact sample size (n) for each experimental group/condition, given as a discrete number and unit of measurement
	A statement on whether measurements were taken from distinct samples or whether the same sample was measured repeatedly
	The statistical test(s) used AND whether they are one- or two-sided Only common tests should be described solely by name; describe more complex techniques in the Methods section.
	A description of all covariates tested
\boxtimes	A description of any assumptions or corrections, such as tests of normality and adjustment for multiple comparisons
	A full description of the statistical parameters including central tendency (e.g. means) or other basic estimates (e.g. regression coefficient) AND variation (e.g. standard deviation) or associated estimates of uncertainty (e.g. confidence intervals)
	For null hypothesis testing, the test statistic (e.g. <i>F</i> , <i>t</i> , <i>r</i>) with confidence intervals, effect sizes, degrees of freedom and <i>P</i> value noted <i>Give P values as exact values whenever suitable.</i>
\boxtimes	For Bayesian analysis, information on the choice of priors and Markov chain Monte Carlo settings
\boxtimes	For hierarchical and complex designs, identification of the appropriate level for tests and full reporting of outcomes
	Estimates of effect sizes (e.g. Cohen's <i>d</i> , Pearson's <i>r</i>), indicating how they were calculated

Our web collection on statistics for biologists contains articles on many of the points above.

Software and code

Policy information about availability of computer code

Data collection

Microarray gene expression data were processed using the R package affy (v1.66.0) with brainarray Entrez v24 CDFs. ComBat method implemented in the R package sva (3.36.0) was used to account for batch effects from preprocessing, as described in the Methods section.

Data analysis

The manuscript describes the development of a computational method for classification of colorectal cancer liver metastases according to the consensus molecular subtypes. The method is implemented in an updated version of the R package CMScaller (v2.0.1), and will be available from GitHub (https://github.com/Lothelab/CMScaller) with documentation and user examples.

For manuscripts utilizing custom algorithms or software that are central to the research but not yet described in published literature, software must be made available to editors and reviewers. We strongly encourage code deposition in a community repository (e.g. GitHub). See the Nature Research guidelines for submitting code & software for further information.

Data

Policy information about <u>availability of data</u>

All manuscripts must include a data availability statement. This statement should provide the following information, where applicable:

- Accession codes, unique identifiers, or web links for publicly available datasets
- A list of figures that have associated raw data
- A description of any restrictions on data availability

Gene expression profiles of primary CRCs (n=211; Gene Expression Omnibus accession numbers GSE79959, GSE96528, and GSE139170) and CRC cell lines (n=34; GSE97023) have been published. Data from liver metastases (n=283), including clinicopathological annotations, have been submitted under accession number GSE159216 (private until publication of a separate manuscript). The remaining primary tumor samples will be deposited to the Gene Expression Omnibus and published in a separate manuscript. The validation dataset was downloaded from GSE131418 ("Consortium cohort").

Field-specific reportin	g

Please select the o	ne below that is the best fit for your research. If you are not sure, read the appropriate sections before making your selection.			
Life sciences	Behavioural & social sciences Ecological, evolutionary & environmental sciences			
For a reference copy of	or a reference copy of the document with all sections, see nature.com/documents/nr-reporting-summary-flat.pdf			
Life scier	nces study design			
All studies must dis	sclose on these points even when the disclosure is negative.			
Sample size	No sample size calculation was performed, and sample numbers were partly determined by availability. Totally 477 patients were included from the in-house series, and 317 primary tumor samples from 315 patients, as well as 298 samples from 278 liver metastatic lesions from 176 patients were analyzed. The datasets were representative of the general gene expression patterns of both primary and metastatic (resectable) colorectal cancers, and the primary tumors represented all four consensus molecular subtypes in an unbiased manner. Intrapatient inter-metastatic heterogeneity was analyzed in 169 samples of multiple metastatic lesions from each of 45 patients. Validation analyses were performed in an independent and publicly available set of 545 primary colorectal cancers and 73 metastases, confirming representativeness of the in-house patient series.			
Data exclusions	Three metastasis samples with low tumor cell content were discarded from all analyses, based on an upper threshold for the "liver background" estimated in normal liver samples as reference (based on gene expression profiles, see Methods section for description). For selected analyses (indicated), only single patient-wise liver metastasis samples were included, for statistical independence. For intra-patient tumor heterogeneity analyses, only patients with multiple liver metastasis samples available were included.			
Replication	Validation analyses were performed in a publicly available set of 545 primary colorectal cancers and 73 liver metastases, supporting that the metastases have a skewed transcriptomic distribution relative to primary tumors, as initially described in the in-house patient series.			
Randomization	Randomization was not relevant to the study, the purpose was to classify/group samples/patients according to their intrinsic gene expression profiles.			

Reporting for specific materials, systems and methods

We require information from authors about some types of materials, experimental systems and methods used in many studies. Here, indicate whether each material, system or method listed is relevant to your study. If you are not sure if a list item applies to your research, read the appropriate section before selecting a response.

Blinding was not relevant to the study, but classification of samples according to their gene expression profiles was performed independently

Materiais & experimental systems		Methods		
n/a	Involved in the study	n/a	Involved in the study	
\boxtimes	Antibodies	\boxtimes	ChIP-seq	
	Eukaryotic cell lines	\boxtimes	Flow cytometry	
\boxtimes	Palaeontology and archaeology	\boxtimes	MRI-based neuroimaging	
\boxtimes	Animals and other organisms			
	Human research participants			
	Clinical data			
\boxtimes	Dual use research of concern			

of clinicopathological or other molecular variables.

Eukaryotic cell lines

Policy information about cell lines

Cell line source(s)

Blinding

This study involves re-analysis of a previously published gene expression dataset of CRC cell lines. A detailed description of the cell lines and their sources is included in the previous publication (Additional file 1: Table S1 in Berg et al., Mol Cancer 2017;16:116).

Cell line name Supplier Supplier ID

CaCo2 ATCC HTB-37 CL-11 DSMZ ACC 467 CL-34 DSMZ ACC 520 CL-40 DSMZ ACC 535 Co115 INSERM R. Hamelin, Paris

Colo205 ATCC CCL-222 Colo320 DSMZ ACC 144 Colo678 DSMZ ACC 194 DLD-1 ATCC CCL-221 EB INSERM R. Hamelin, Paris FRI INSERM R. Hamelin, Paris HCC2998 NCI60 HCT116 ATCC CCL-247 HCT15 ATCC CCL-225 HT29 ATCC HTB-38 IS1 INSFRM R. Hamelin, Paris IS3 INSERM R. Hamelin, Paris KM12 NCI60

LoVo ATCC CCL-229 LS1034 ATCC CRL-2158 LS174T ATCC CL-188 NCI-H508 ATCC CCL-253 RKO ATCC CRI -2577 SW1116 ECACC 87071006 SW1463 ATCC CCL-234 SW403 FCACC 87071008 SW48 ATCC CCL-231 SW480 FCACC 87092801 SW620 ECACC 87051203 SW837 ATCC CCL-235 SW948 ECACC 91030714 TC71 INSERM R. Hamelin, Paris

V9P INSERM R. Hamelin, Paris WiDr ATCC CCL-218

Authentication

Cell line authenticity has previously (Berg et al., Mol Cancer 2017;16:116) been verified by DNA profiling of 15 short tandem repeat loci, using the AmpFLSTR Identifiler PCR Amplification Kit (Thermo Fisher, Waltham, MA) and matched to the profiles from supplier where available.

Mycoplasma contamination

Cultures were tested for mycoplasma infection before collection using Myco Alert (Lonza, Walkersville, MD, USA) according to the manufacturer's protocol.

Commonly misidentified lines (See ICLAC register)

WiDr is included along with the cell line it is found to be a derivative of, HT29. Gene expression data from the cell lines were analyzed collectively (also together with patient-derived organoids) across the complete set of samples, not sample-wise, and the impact of this particular cell line is therefore not likely to be strong.

Human research participants

Policy information about studies involving human research participants

Population characteristics

Clinicopathological characteristics of each of the patient series analyzed (primary and metastatic colorectal cancers) are provided in Table 1 in the manuscript.

Recruitment

Patients were recruited from observational studies of patients treated surgically for their primary colorectal cancer and/or colorectal liver metastases at Oslo University Hospital, Norway. Most primary rectal tumors treated with radiotherapy prior to sampling were excluded, to avoid the impact of treatment on gene expression profiles. Only samples with sufficient RNA quality were analyzed.

Ethics oversight

The study was approved by the Norwegian Data Protection Authority and Regional Committee for Medical and Health Research Ethics, South-Eastern Norway (REC numbers 1.2005.1629;2010/1805).

Note that full information on the approval of the study protocol must also be provided in the manuscript.

Clinical data

Policy information about clinical studies

All manuscripts should comply with the ICMJE guidelines for publication of clinical research and a completed CONSORT checklist must be included with all submissions.

Clinical trial registration | The study is not a clinical trial.

Study protocol

The study is not a clinical trial.

Data collection

Patients were recruited at Oslo University Hospital, Norway, between 2009 and 2019. Clinicopathological data and follow-up data were collected from hospital medical records.

Outcomes

Survival analyses for patients with colorectal liver metastases were performed with median overall survival as primary end-point. Death from any cause was registered as event and patients were censored at loss to follow-up or after five years. Time to event/ censoring was calculated from start of treatment, either date of surgical resection or neoadjuvant treatment. This is described in the Methods section.