Figure S1. Determination of cut-off point by ROC curve analysis. ROC curve analysis was performed to determine the cut-off point to divide patients into high and low resistin expression groups. The arrow indicates the selected point in the present study, assuming for optimizing both sensitivity (30.8%) and specificity (82.4%) in an exploratory setting. The area under the curve value was 0.534 (95% confidence interval, 0.401-0.667). ROC, receiver-operating characteristic.

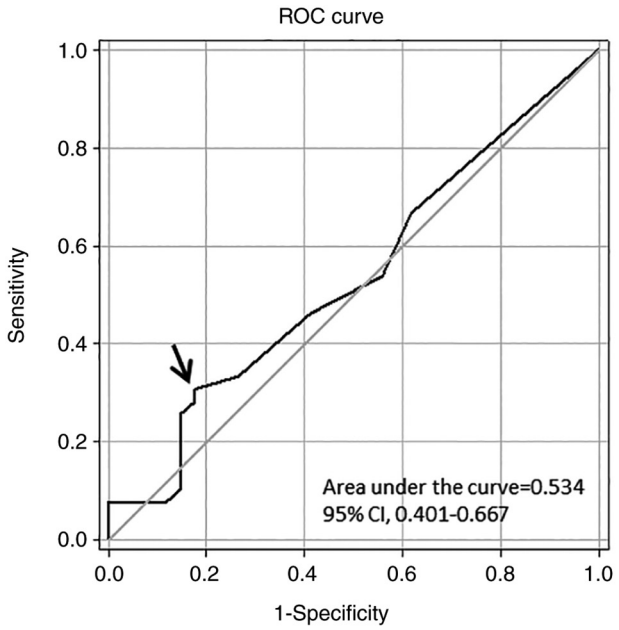

Figure S2. *In vitro* assessment of the migratory and proliferative abilities of human esophageal squamous cell carcinoma cells. (A) Representative micrographs depicting the migratory ability of TE8 cells treated with resistin via the Transwell assay. (B) Quantitation of the migratory ability of TE8 cells treated with different concentrations of resistin (0, 25, 50 and 100 ng/ml). (C) *In vitro* assessment of the proliferative ability in TE8 cells treated with different concentrations of resistin (0, 25, 50 and 100 ng/ml) for 24, 48 and 72 h via the XTT assay. Data were obtained from three independent experiments. *P<0.05 vs. control.

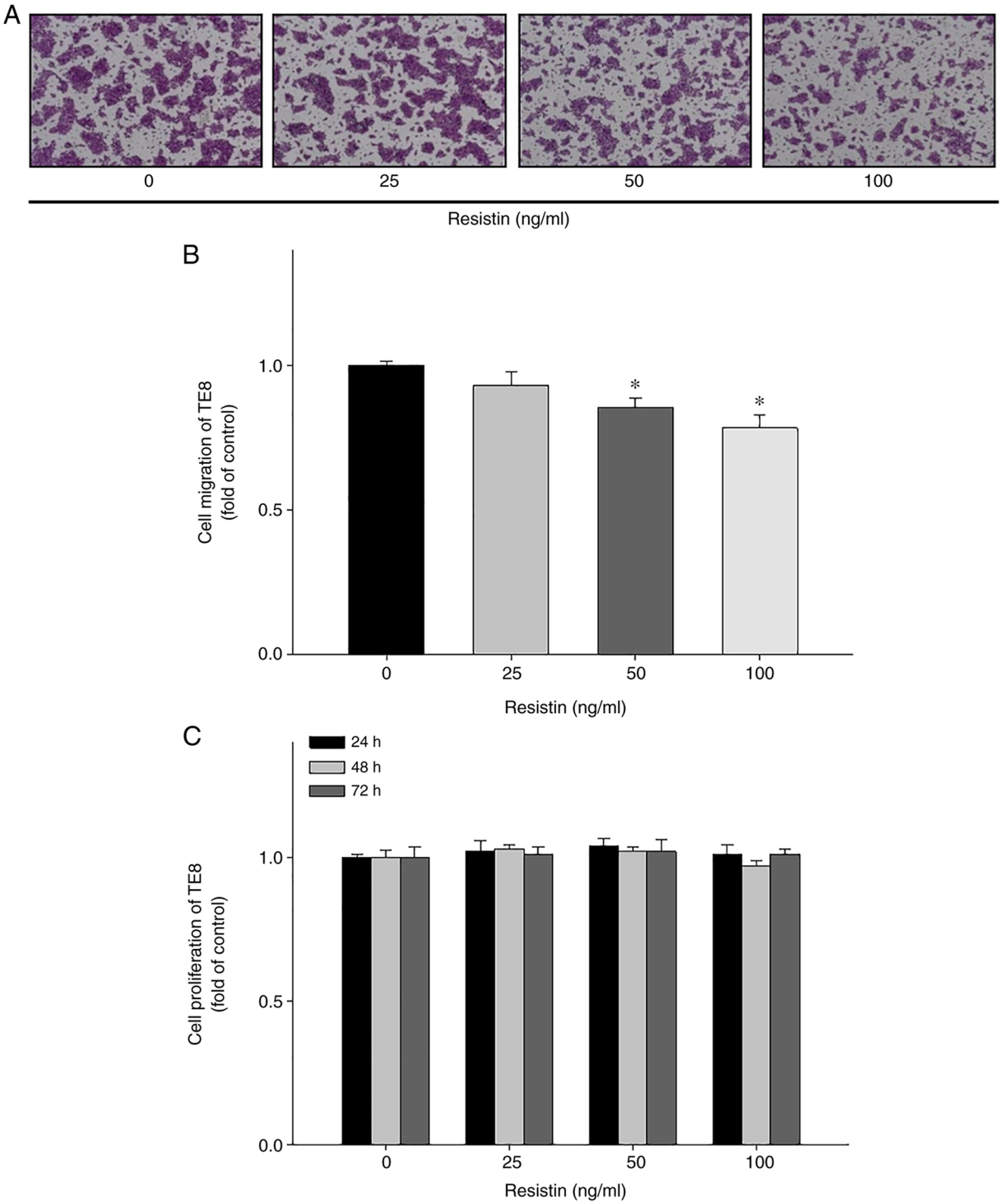

Table SI. Serum resistin levels in healthy controls and patients with ESCC.

Serum resistin level (ng/ml)	
Healthy controls (n=26)	Patients with ESCC (n=26)
21.84	23.62
26.56	16.87
27.51	15.08
16.61	13.81
18.20	10.43
15.59	23.75
23.88	28.53
22.99	21.71
18.59	18.91
29.30	25.54
20.75	25.09
26.24	20.82
26.49	7.43
31.72	16.48
19.42	23.62
25.09	9.22
24.32	18.52
21.58	24.38
23.43	21.77
20.63	26.75
21.01	22.41
20.18	21.20
23.94	20.69
26.62	16.99
18.97	22.41
22.09	19.22

ESCC, esophageal squamous cell carcinoma.