miR-200a/b-429 downregulation is a candidate biomarker of tumor radioresistance and independent of hypoxia in locally advanced cervical cancer

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Supplementary Table S1. Patient characteristics

Characteristics	miRNA explorative cohort (n=90)		miRNA validation cohort 1 (n=110)		miRNA validation cohort 2 (n=79)*		
	No	%	No	%	No	%	p-value ^g
							6.7x10 ⁻²
Age, years							0.7 × 10
Median	52.9		54.9		48		
Range	21.8-83.9		23.8-84.2		26-84		2.9x10 ⁻¹
FIGO stage							2.9X10
1b -2b	70	78	76	69	61	77	
3b-4a	20	22	34	31	18	23	
Tumor size (median)		,		,			2
Volume (range) ^a	26.8 cm ³ (2.8-266.8)		43.8 cm ³ (1.9-302.4)				3.1x10 ⁻³
Diameter (range)					5cm (2.3-8)		
NA	6	7	5	5			
Lymph node status							4.5x10 ⁻¹
Positive	44	49	45	41	39	49	
Negative	46	51	65	59	40	51	4
Concurrent cisplatin							5.5x10 ⁻¹
Yes (median no. of courses)	74 (5)	82	90 (5)	82	NA		
No	16	18	20	18	NA		
Hypoxia status ^c							7.5x10 ⁻²
Less hypoxic	63	71	64	58	NA		
More hypoxic	26	29	46	42	NA		
Observation time (months) d							1.08x10 ⁻¹¹
Median	43		60		60		
Range	22-60		28-60		9-60		
Status							
PFS ^e	19	21	34 ^f	31	26	32	1.8x10 ⁻¹
Central pelvic recurrence	5	6	8	7	NA		7.8x10 ⁻¹
Lateral pelvic recurrence	4	4	8	7	NA		5.6x10 ⁻¹
Distal recurrence			-				9.4x10 ⁻²
(metastasis)	11	12	25	23	NA		

FIGO, Federation International de Gynecologie et d'Obstetrique a

Calculated based on 3 orthogonal diameters (a,b,c) as (π/6)abc

Detected by MRI or CT at diagnosis, according to the response evaluation criteria in solid tumors (RECIST) v 1.1

The tumors were classified as more or less hypoxic according to the 6-gene hypoxia classifier (Fjeldbo et

Follow up time for patients with no events (recurrences) up to 60 months e Follow up data up to 60 months

^f Location of recurrence was unknown for three patients

 $^{^{\}rm g}$ Kruskall-Wallis-, Chi-square-, Fisher exact- or Mann-Whitney U-test were used where appropriate

^{*} How et al, 2014. Training cohort

Supplementary Table S2. miR-200a/b/-429 expression score *versus* clinical markers and hypoxia status for 200 patients.

Marker	Statistical test	<i>P</i> -value
FIGO stage (I,II,III,IV)	Kruskal-Wallis test	4.2x10 ⁻¹
Lymph node status (pos. vs neg.)	Mann Whitney U-test	5.5x10 ⁻¹
Tumor volume (mm ³)	Spearman rho correlation	3.7x10 ⁻¹
Hypoxia status (more vs less hypoxic)	Mann Whitney U-test	6.4x10 ⁻¹

Supplementary Table S3. Tumor growth delay (TDG) in miR-200a/b/-429-overexpressing xenografts after radiation treatment (RT)

Group	Tumors (n)	V ₀ (mm³) ^a (mean±SEM)	T _{1.5x} (mean±SEM)	TGD (days) ^b (mean±SEM)	<i>P</i> -value	Normalized TGD (days) ^d (mean±SEM)	Enhancement e factor
Control f	3	200±19.2	5.3±0.9	-			
miR-200a/b/-429 ^f	4	233±19.1	3.7±0.2	- 1.6±0.2			
Control + RT	8	210±11.3	6.7±0.8	1.4±0.8			
miR-200a/b/-429 + RT	10	230±11.7	13.0±1.9	7.7±1.9	1.3x10 ⁻²	9.4±1.9	6.6

^a V₀, tumor volume at time of radiation (day 0)

^b TGD = difference in $T_{1.5x}$ when compared to Control

^c Students T-test, compared to Control + RT

 $^{^{}m d}$ Normalized TGD = tumor growth delay in miR-200 + IR group minus TGD in miR-200 group

^e Normalized TGD of miR-200a/b/-429 + RT group divided by TGD of Control + RT group

Tumor growth data obtained from non-irradiated tumors in the xenograft characterization study. Tumors which matched the volume V_0 and following 1.5 x V_0 in the corresponding groups of RT-tumors (Control + RT and miR-200a/b/-429 + RT, respectively) were used to enable comparable growth data.