

## Supplementary Online Content

Yap DWT, Leone AG, Wong NZH, et al. Efficacy of immune checkpoint inhibitors in patients with advanced esophageal squamous cell carcinoma: a meta-analysis including low PD-L1 subgroups. *JAMA Oncol*. Published online December 8, 2022.  
doi:10.1001/jamaoncol.2022.5816

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This supplementary material has been provided by the authors to give readers additional information about their work.

**eTable 1. Search Information**

<b>Date of search</b>	1 October 2021
<b>Databases</b>	PubMed, Web of Science, Scopus, Embase, American Society of Clinical Oncology Meeting Library
<b>Search string</b>	(gastric OR stomach OR esophageal OR gastroesophageal OR gastro-oesophageal OR gastro-esophageal) AND (checkpoint inhibitors OR ICI OR pembrolizumab OR ipilimumab OR nivolumab OR avelumab OR camrelizumab OR durvalumab OR sintilimab OR programmed death ligand OR "PD-L1" OR "PD-1" OR immunotherapy) AND (random* AND trial)
<b>Search string exploded</b>	("gastrics"[All Fields] OR "stomach"[MeSH Terms] OR "stomach"[All Fields] OR "gastric"[All Fields] OR ("stomach"[MeSH Terms] OR "stomach"[All Fields] OR "stomachs"[All Fields] OR "stomach s"[All Fields] OR "stomachal"[All Fields] OR "stomaches"[All Fields]) OR ("esophageal"[All Fields] OR "esophagic"[All Fields] OR "esophagitis"[MeSH Terms] OR "esophagitis"[All Fields] OR "esophagitides"[All Fields] OR "oesophagal"[All Fields] OR "oesophageal"[All Fields] OR "oesophagic"[All Fields] OR "oesophagitis"[All Fields]) OR ("gastro esophageal"[All Fields] OR "gastro oesophageal"[All Fields] OR "gastro oesophagitis"[All Fields] OR "gastroesophagal"[All Fields] OR "gastroesophageal"[All Fields] OR "gastroesophagic"[All Fields] OR "gastroesophagitis"[All Fields] OR "gastroesophageal"[All Fields] OR "gastroesophagal"[All Fields] OR "gastroesophageal"[All Fields] OR "gastroesophagitis"[All Fields] OR "gastroesophageal"[All Fields] OR "gastro esophageal"[All Fields] OR "gastro oesophageal"[All Fields] OR "gastro oesophagitis"[All Fields] OR "gastroesophagal"[All Fields] OR "gastroesophageal"[All Fields] OR "gastroesophagic"[All Fields] OR "gastroesophagitis"[All Fields]) AND (((("cell cycle checkpoints"[MeSH Terms] OR ("cell"[All Fields] AND "cycle"[All Fields] AND "checkpoints"[All Fields]) OR "cell cycle checkpoints"[All Fields] OR "checkpoint"[All Fields] OR "checkpoints"[All Fields]) AND ("antagonists and inhibitors"[MeSH Subheading] OR ("antagonists"[All Fields] AND "inhibitors"[All Fields]) OR "antagonists and inhibitors"[All Fields] OR "inhibitors"[All Fields] OR "inhibitor"[All Fields] OR "inhibitor s"[All Fields])) OR "ICI"[All Fields] OR ("pembrolizumab"[Supplementary Concept] OR "pembrolizumab"[All Fields]) OR ("ipilimumab"[MeSH Terms] OR "ipilimumab"[All Fields]) OR ("nivolumab"[MeSH Terms] OR "nivolumab"[All Fields] OR "nivolumab s"[All Fields]) OR ("avelumab"[Supplementary Concept] OR "avelumab"[All Fields]) OR ("camrelizumab"[Supplementary Concept] OR "camrelizumab"[All Fields]) OR ("durvalumab"[Supplementary Concept] OR "durvalumab"[All Fields]) OR ("sintilimab"[Supplementary Concept] OR "sintilimab"[All Fields]) OR (("program"[All Fields] OR "program s"[All Fields] OR "programe"[All Fields] OR "programed"[All Fields] OR "programes"[All Fields] OR "programing"[All Fields] OR "programmability"[All Fields] OR "programmable"[All Fields] OR "programmably"[All Fields] OR "programme"[All Fields] OR "programme s"[All Fields] OR "programmed"[All Fields] OR "programmer"[All Fields] OR "programmer s"[All Fields] OR "programmers"[All Fields] OR "programmes"[All Fields] OR "programming"[All Fields] OR "programmings"[All Fields] OR "programs"[All Fields]) AND ("death"[MeSH Terms] OR "death"[All Fields] OR "deaths"[All Fields]) AND ("ligand s"[All Fields] OR "liganded"[All Fields] OR "liganding"[All Fields] OR "ligands"[MeSH Terms] OR "ligands"[All Fields] OR "ligand"[All Fields])) OR "PD-L1"[All Fields] OR "PD-1"[All Fields] OR ("immunotherapy"[MeSH Terms] OR "immunotherapy"[All Fields] OR "immunotherapies"[All Fields] OR "immunotherapy s"[All Fields])) AND ("random*" [All Fields] AND ("clinical trials as topic"[MeSH Terms] OR ("clinical"[All Fields] AND "trials"[All Fields] AND "topic"[All Fields]) OR "clinical trials as topic"[All Fields] OR "trial"[All Fields] OR "trial s"[All Fields] OR "trialed"[All Fields] OR "trialing"[All Fields] OR "trials"[All Fields]))

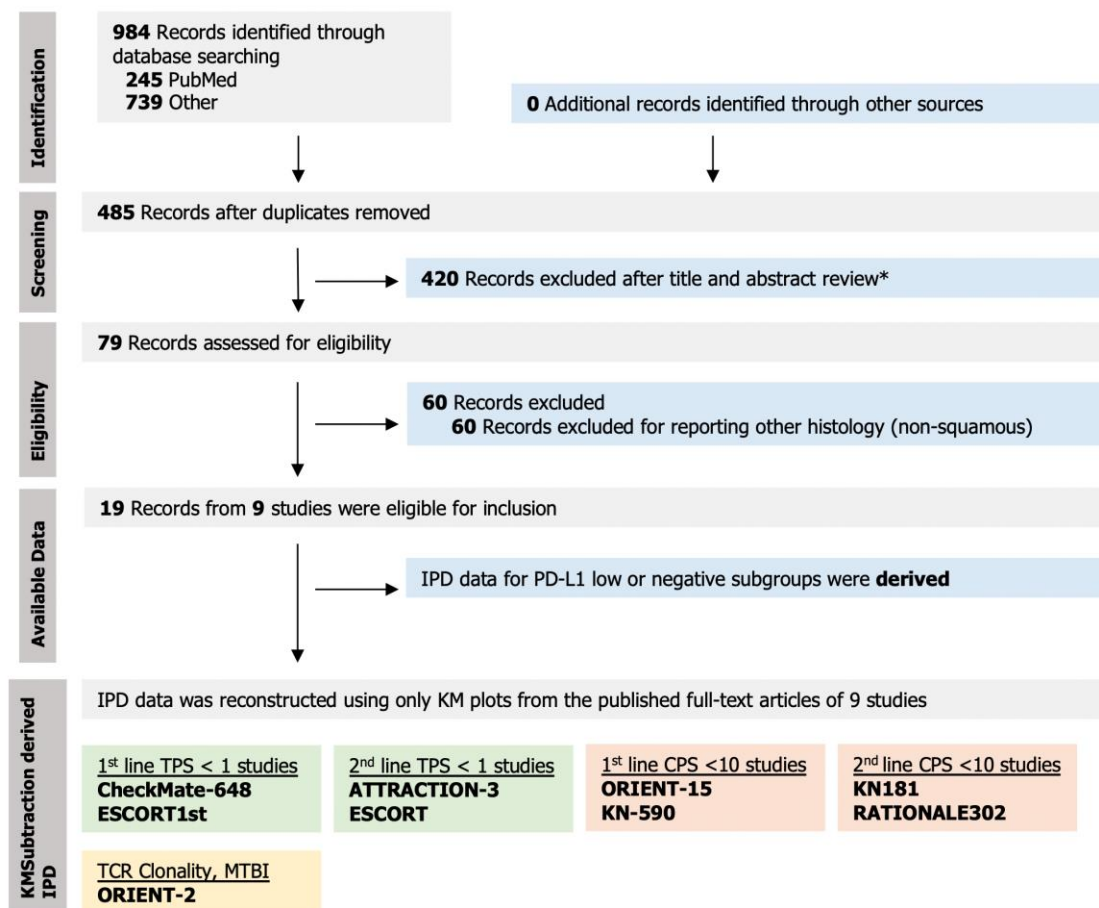
**eTable 2. Search Information and Where KMSubtraction Was Implemented**

Trial,	PD-L1 assay and reporting method	Comparison	Outcome	Histology	“Overall” curve	“Subgroup” High PD-L1 expressing curve	Did the original publication report the low PD-L1 KM curve?	Did the original publication report the low PD-L1 Hazard ratio?	PD-L1 low curves derived by KMSubtraction: i.e. “Subtracting” “Subgroup” curve from “overall” curve
<b>ATTRACTION-3</b> Kato, 2019 NCT02569242	TPS $\geq 1$ :Positive for PD-L1 when cancerous cells with stained cell membranes account for $\geq 1\%$ of at least 100 evaluable cancerous cells  IHC 28-8 pharmDx assay (Dako, Santa Clara, CA, USA)	Nivo/Chemo	OS	ESCC	Overall	PD-L1 TPS $\geq 1$	Yes	Yes	NIL as originally reported in manuscript
<b>CheckMate-648</b> Yuichiro, 2022 NCT03143153	TPS $\geq 1\%$ : Percentage of tumor cells with partial or complete membrane staining in at least 100 viable TCs  IHC 28-8 pharmDx assay (Dako, Santa Clara, CA, USA)  *CPS also was retrospectively generated in the original trial. However, main KM curves were stratified based on TPS only	Nivo+Chemo/Chemo	OS	ESCC	Overall	PD-L1 TPS $\geq 1$	No	Yes	PD-L1 TPS $< 1$
		Nivo+Ipi/Chemo	OS	ESCC	Overall	PD-L1 TPS $\geq 1$	No	Yes	PD-L1 TPS $< 1$
		Nivo+Chemo/Chemo	PFS	ESCC	Overall	PD-L1 TPS $\geq 1$	No	Yes	PD-L1 TPS $< 1$
		Nivo+Ipi/Chemo	PFS	ESCC	Overall	PD-L1 TPS $\geq 1$	No	Yes	PD-L1 TPS $< 1$
		Nivo+Chemo/Chemo	DOR	ESCC	Overall	PD-L1 TPS $\geq 1$	No	NA	PD-L1 TPS $< 1$
<b>ESCORT</b> Huang, 2020 NCT03099382	TPS $\geq 1\%$ : Percentage of viable tumor cells showing partial or complete membrane staining  IHC 6E8 Abcam (Shuwen Biotech, Deqing, Zhejiang, China)	Camre/Chemo	OS	ESCC	Overall	PD-L1 TPS $\geq 1$	No	Yes	PD-L1 TPS $< 1$
		Camre+Chemo/Chemo	OS	ESCC	Overall	PD-L1 TPS $\geq 1$	Yes	Yes	NIL as originally reported in manuscript
<b>ESCORT 1st</b> Luo, 2021 NCT03691090	TPS $\geq 1\%$ : Percentage of viable tumor cells showing partial or complete membrane staining, relative to all viable tumor cells present in the sample (positive and negative)  IHC 6E8 Abcam (Shuwen Biotech, Deqing, Zhejiang, China)	Camre+Chemo/Chemo	PFS	ESCC	Overall	PD-L1 TPS $\geq 1$	Yes	Yes	NIL as originally reported in manuscript
		Camre+Chemo/Chemo	DOR	ESCC	Overall	PD-L1 TPS $\geq 1$	Yes	NA	NIL as originally reported in manuscript
		Camre+Chemo/Chemo	DOR	ESCC	Overall	PD-L1 TPS $\geq 1$	Yes	NA	NIL as originally reported in manuscript

<b>KN181</b> Kojima, 2020 NCT02559687	CPS: defined as the number of PD-L1–positive cells (tumor cells, macrophages, and lymphocytes) divided by the total number of tumor cells, multiplied by 100  IHC 22C3 pharmDx assay (Agilent Technologies, Carpinteria, CA, USA)	Pembro/Chemo	OS	ESCC	Overall	PD-L1 CPS ≥10	No	Yes	PD-L1 CPS <10
<b>KN590</b> Sun, 2021 NCT03189719	CPS: defined as the number of PD-L1–positive cells (tumor cells, macrophages, and lymphocytes) divided by the total number of tumor viable cells  IHC 22C3 pharmDx assay (Agilent Technologies, Carpinteria, CA, USA)	Pembro+Chemo/Chemo	OS	ESCC	Overall	PD-L1 CPS ≥10	No	No	PD-L1 CPS <10
<b>ORIENT-2</b> Xu, 2022 NCT03116152	IHC 22C3 pharmDx assay (Dako, Santa Clara, CA, USA)  *Results for CPS and TPS subgroups were reported as hazard ratios only. Curves were only stratified based on NLR/ TCR clonality.	Sinti/Chemo	OS	ESCC	Overall	KM curves not reported (only HRs presented)	No	No	Not possible as only overall curve published, PD-L1 high subgroup curve not reported
<b>ORIENT-15</b> Lu, 2022 NCT03748134	CPS: defined as the number of PD-L1 staining cells (tumor cells, macrophages, and lymphocytes) divided by the total number of tumor cells  IHC 22C3 pharmDx assay (Agilent Technologies, Carpinteria, CA, USA)	Sinti+Chemo/Chemo	OS	ESCC	Overall	PD-L1 CPS ≥10	No	Yes	PD-L1 CPS <10
		Sinti+Chemo/Chemo	PFS	ESCC	Overall	PD-L1 CPS ≥10	No	Yes	PD-L1 CPS <10
		Sinti+Chemo/Chemo	DOR	ESCC	Overall	PD-L1 CPS ≥10	No	NA	PD-L1 CPS <10
<b>RATIONALE 302</b> Lin, 2022 NCT03430843	TAP: Total percentage of the tumor area covered by tumor cells with any membrane staining above background and tumor-associated immune cells with any staining above background.  IHC SP263 assay (Ventana)	Tisle/Chemo	OS	ESCC	Overall	PD-L1 TAP ≥10	Yes	Yes	NIL as originally reported in manuscript

Abbreviations: Nivo, nivolumab; Ipi, ipilimumab; Camre, camrelizumab; Pembro, pembrolizumab; Sinti, sintilimab; Tisle, Tislelizumab; Chemo, chemotherapy; PD-L1, programmed death ligand 1; ESCC, esophageal squamous cell carcinoma; CPS, combined positive score; TPS, tumor proportion score; TAP, tumor area positivity; CM648, CheckMate 648; KN590, KEYNOTE-590; KN181, KEYNOTE-181.

eFigure 1. PRISMA Diagram



PRISMA, preferred reporting items for systematic reviews and meta-analyses; PD-L1, programmed death ligand 1; CPS, combined positive score; TPS, Tumor Proportion Score; IPD, individual patient data; KM, Kaplan-Meier; ESCC, esophageal squamous cell carcinoma; TCR, T-Cell Receptor; MTBI, Molecular Tumor Burden Index

eFigure 2. Risk-of-Bias Assessment

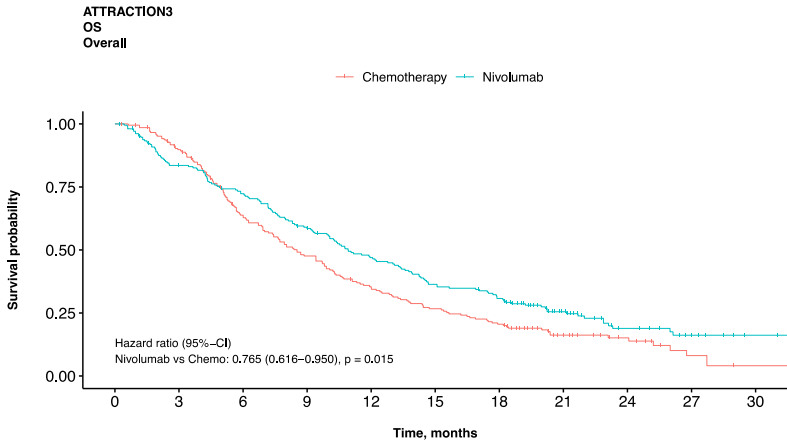
		Risk of bias domains					
		D1	D2	D3	D4	D5	Overall
Study	CM648						
	ESCORT1st						
	KN181						
	RATIONALE302						
	ORIENT15						
	KN590						
	ATR3						
	ESCORT						
	ORIENT2						

Domains:  
D1: Risk of bias arising from the randomization process  
D2: Risk of bias due to deviations from the intended interventions  
D3: Risk of bias due to missing outcome data  
D4: Risk of bias in the measurement of the outcome  
D5: Risk of bias in selection of the reported result

Judgement:  
The study is judged to be at low risk of bias for all domains for this result

D, domain; CM648, CheckMate-648; KN181, KEYNOTE-181; KN590, KEYNOTE-590; ATR3, ATTRACTION-3

eFigure 3. Comparisons to Original Curves for Overall and PD-L1–High Subgroups

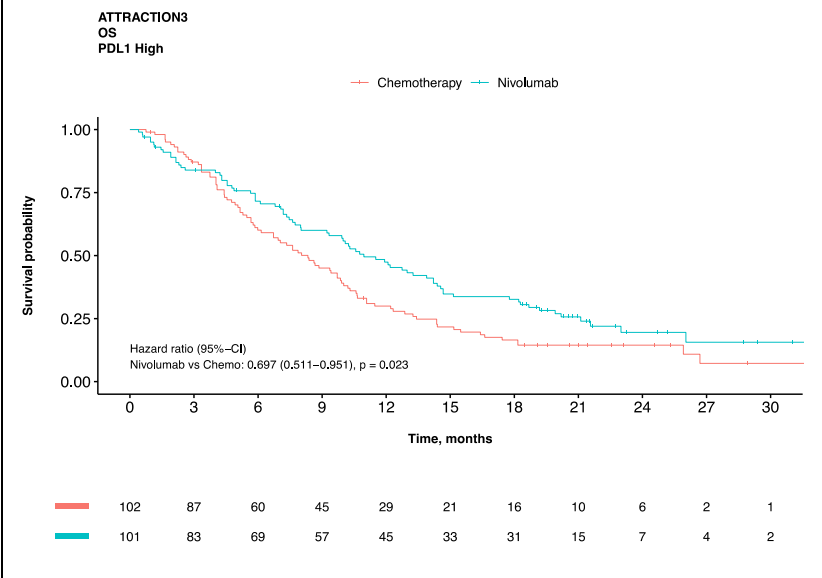
Study, outcome, cohort	Original	Reconstructed																								
<p><b>ATTRACTION 3, Overall survival, overall cohort</b></p>	<p>The original figure may be found in the primary trial manuscript</p> <p>Kato K, Cho BC, Takahashi M, Okada M, Lin CY, Chin K, Kadowaki S, Ahn MJ, Hamamoto Y, Doki Y, Yen CC, Kubota Y, Kim SB, Hsu CH, Holtved E, Xynos I, Kodani M, Kitagawa Y. Nivolumab versus chemotherapy in patients with advanced oesophageal squamous cell carcinoma refractory or intolerant to previous chemotherapy (ATTRACTION-3): a multicentre, randomised, open-label, phase 3 trial. <i>Lancet Oncol.</i> 2019 Nov;20(11):1506-1517. doi: 10.1016/S1470-2045(19)30626-6. Epub 2019 Sep 30. Erratum in: <i>Lancet Oncol.</i> 2019 Nov;20(11):e613. PMID: 31582355.</p> <p>Figure 2A</p>	 <p>ATTRACTION3 OS Overall</p> <p>— Chemotherapy — Nivolumab</p> <p>Hazard ratio (95% CI) Nivolumab vs Chemo: 0.765 (0.616–0.950), p = 0.015</p> <table border="1" data-bbox="1220 869 2004 949"> <tr> <td>—</td> <td>209</td> <td>183</td> <td>126</td> <td>94</td> <td>68</td> <td>52</td> <td>40</td> <td>21</td> <td>12</td> <td>4</td> <td>1</td> </tr> <tr> <td>—</td> <td>210</td> <td>171</td> <td>147</td> <td>118</td> <td>93</td> <td>72</td> <td>60</td> <td>34</td> <td>17</td> <td>9</td> <td>4</td> </tr> </table>	—	209	183	126	94	68	52	40	21	12	4	1	—	210	171	147	118	93	72	60	34	17	9	4
—	209	183	126	94	68	52	40	21	12	4	1															
—	210	171	147	118	93	72	60	34	17	9	4															

**ATTRACTION  
3, overall  
survival, TPS  
>1%**

The original figure may be found in the primary trial manuscript

Kato K, Cho BC, Takahashi M, Okada M, Lin CY, Chin K, Kadowaki S, Ahn MJ, Hamamoto Y, Doki Y, Yen CC, Kubota Y, Kim SB, Hsu CH, Holtved E, Xynos I, Kodani M, Kitagawa Y. Nivolumab versus chemotherapy in patients with advanced oesophageal squamous cell carcinoma refractory or intolerant to previous chemotherapy (ATTRACTION-3): a multicentre, randomised, open-label, phase 3 trial. *Lancet Oncol.* 2019 Nov;20(11):1506-1517. doi: 10.1016/S1470-2045(19)30626-6. Epub 2019 Sep 30. Erratum in: *Lancet Oncol.* 2019 Nov;20(11):e613. PMID: 31582355.

Figure S2B



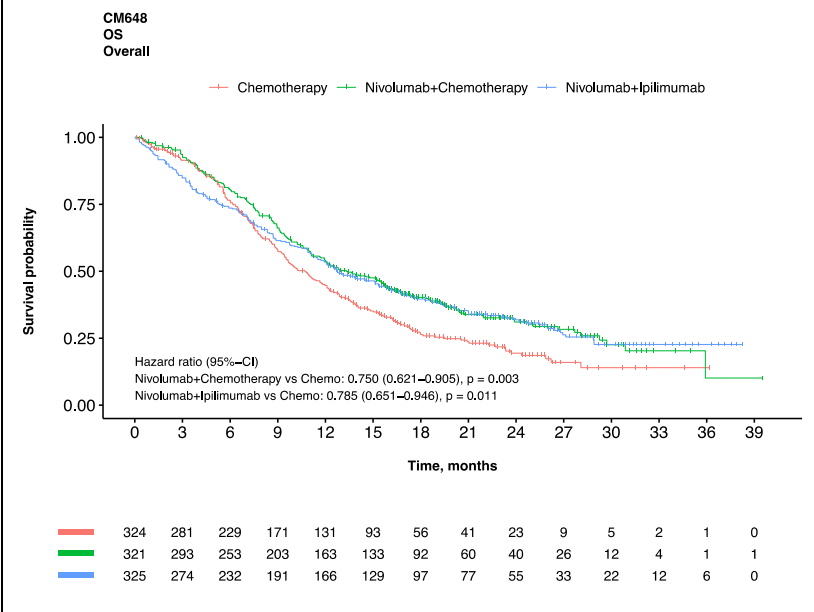


**CM648,  
overall  
survival,  
overall cohort**

The original figure may be found in the primary trial manuscript

Doki Y, Ajani JA, Kato K, Xu J, Wyrwicz L, Motoyama S, Ogata T, Kawakami H, Hsu CH, Adenis A, El Hajbi F, Di Bartolomeo M, Braghiroli MI, Holtved E, Ostoich SA, Kim HR, Ueno M, Mansoor W, Yang WC, Liu T, Bridgewater J, Makino T, Xynos I, Liu X, Lei M, Kondo K, Patel A, Gricar J, Chau I, Kitagawa Y; CheckMate 648 Trial Investigators. Nivolumab Combination Therapy in Advanced Esophageal Squamous-Cell Carcinoma. *N Engl J Med.* 2022 Feb 3;386(5):449-462. Doi: 10.1056/NEJMoa2111380. PMID: 35108470.

Figure 1B  
Figure 2B

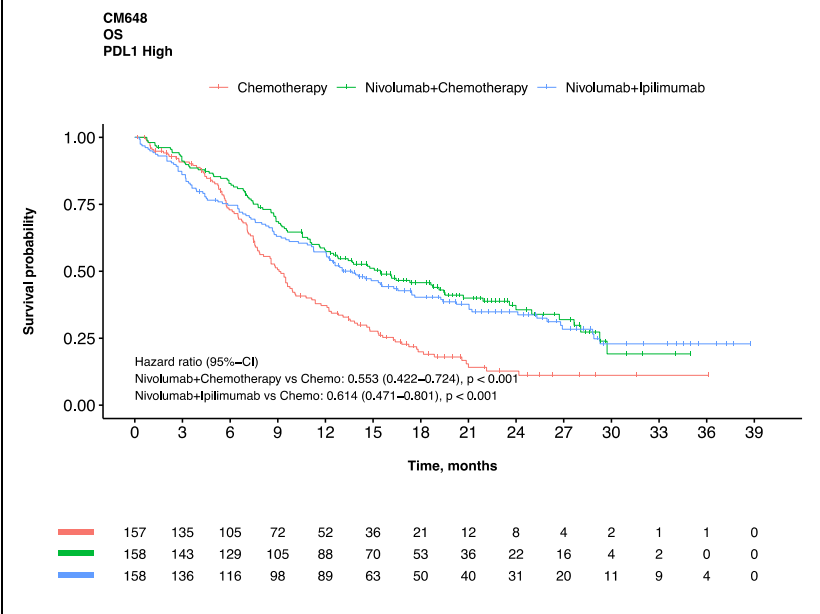


**CM648,  
overall  
survival, TPS  
≥1**

The original figure may be found in the primary trial manuscript

Doki Y, Ajani JA, Kato K, Xu J, Wyrwicz L, Motoyama S, Ogata T, Kawakami H, Hsu CH, Adenis A, El Hajbi F, Di Bartolomeo M, Braghiroli MI, Holtved E, Ostoich SA, Kim HR, Ueno M, Mansoor W, Yang WC, Liu T, Bridgewater J, Makino T, Xynos I, Liu X, Lei M, Kondo K, Patel A, Gricar J, Chau I, Kitagawa Y; CheckMate 648 Trial Investigators. Nivolumab Combination Therapy in Advanced Esophageal Squamous-Cell Carcinoma. *N Engl J Med.* 2022 Feb 3;386(5):449-462. Doi: 10.1056/NEJMoa2111380. PMID: 35108470.

Figure 1A  
Figure 2A

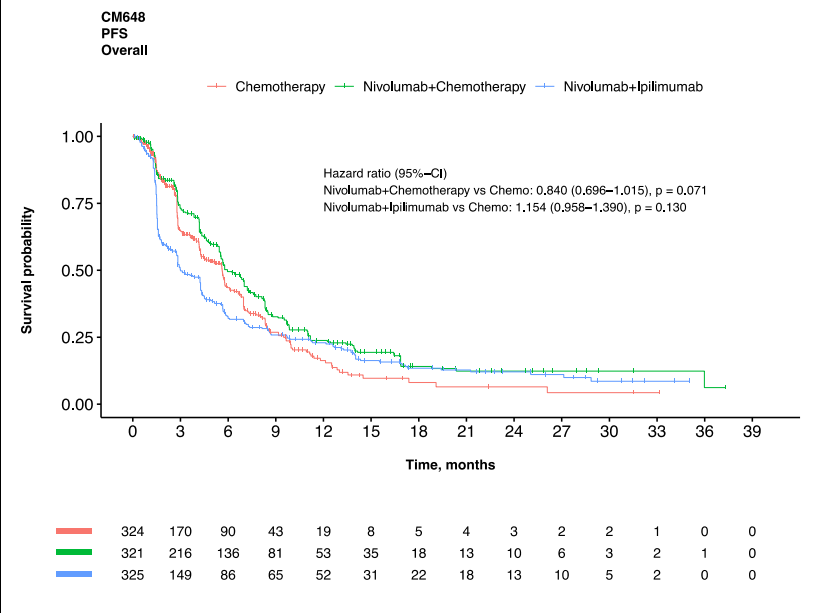


**CM648,  
Progression  
Free Survival,  
Overall cohort**

The original figure may be found in the primary trial manuscript

Doki Y, Ajani JA, Kato K, Xu J, Wyrwicz L, Motoyama S, Ogata T, Kawakami H, Hsu CH, Adenis A, El Hajbi F, Di Bartolomeo M, Braghiroli MI, Holtved E, Ostoich SA, Kim HR, Ueno M, Mansoor W, Yang WC, Liu T, Bridgewater J, Makino T, Xynos I, Liu X, Lei M, Kondo K, Patel A, Gricar J, Chau I, Kitagawa Y; CheckMate 648 Trial Investigators. Nivolumab Combination Therapy in Advanced Esophageal Squamous-Cell Carcinoma. *N Engl J Med.* 2022 Feb 3;386(5):449-462. Doi: 10.1056/NEJMoa2111380. PMID: 35108470.

Figure 1D  
Figure 2D

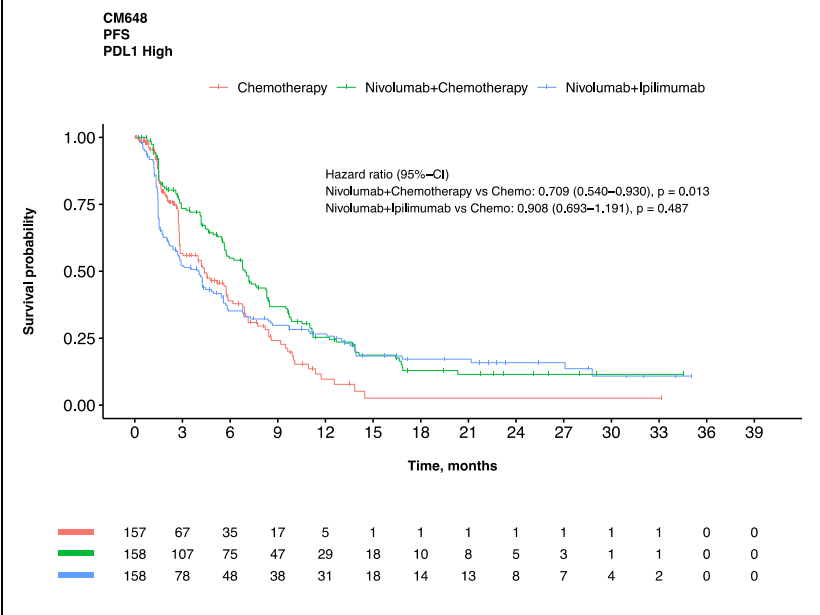


**CM648,  
Progression  
Free Survival,  
TPS ≥1**

The original figure may be found in the primary trial manuscript

Doki Y, Ajani JA, Kato K, Xu J, Wyrwicz L, Motoyama S, Ogata T, Kawakami H, Hsu CH, Adenis A, El Hajbi F, Di Bartolomeo M, Braghiroli MI, Holtved E, Ostoich SA, Kim HR, Ueno M, Mansoor W, Yang WC, Liu T, Bridgewater J, Makino T, Xynos I, Liu X, Lei M, Kondo K, Patel A, Gricar J, Chau I, Kitagawa Y; CheckMate 648 Trial Investigators. Nivolumab Combination Therapy in Advanced Esophageal Squamous-Cell Carcinoma. *N Engl J Med.* 2022 Feb 3;386(5):449-462. Doi: 10.1056/NEJMoa2111380. PMID: 35108470.

Figure 1C  
Figure 2C

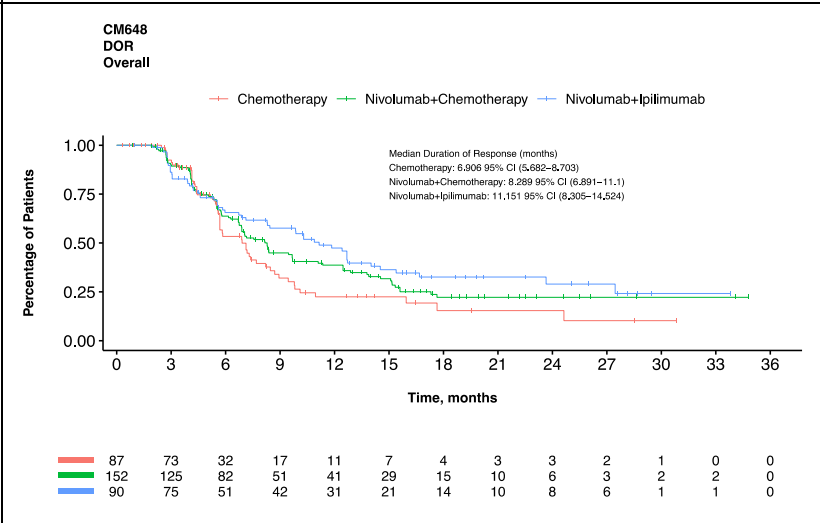


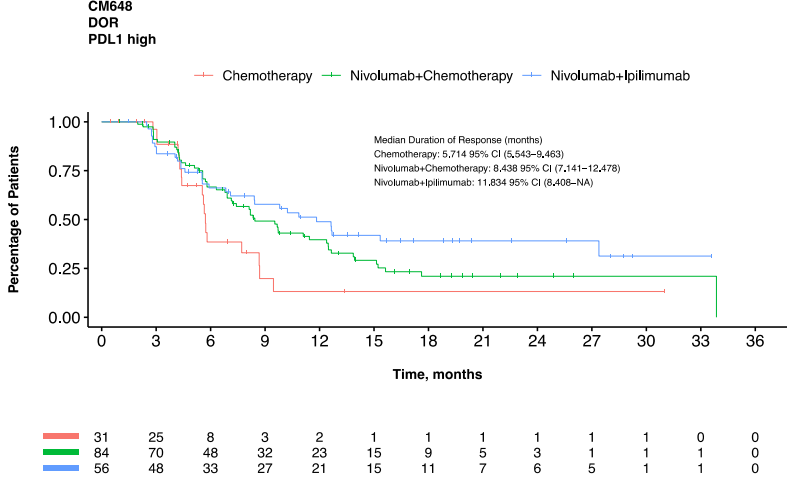
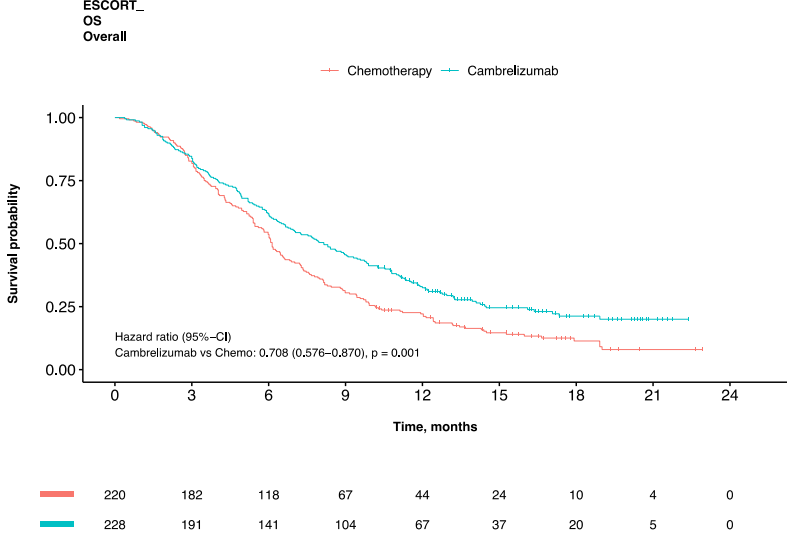
**CM648, DOR,  
Overall cohort**

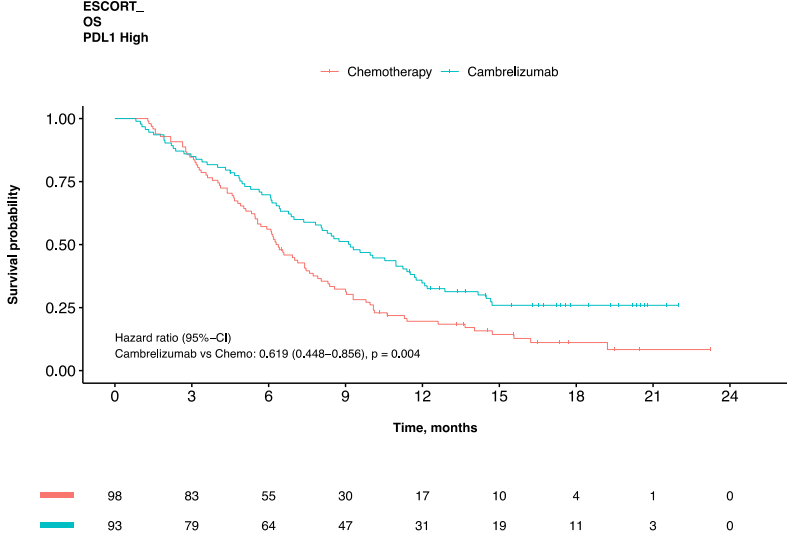
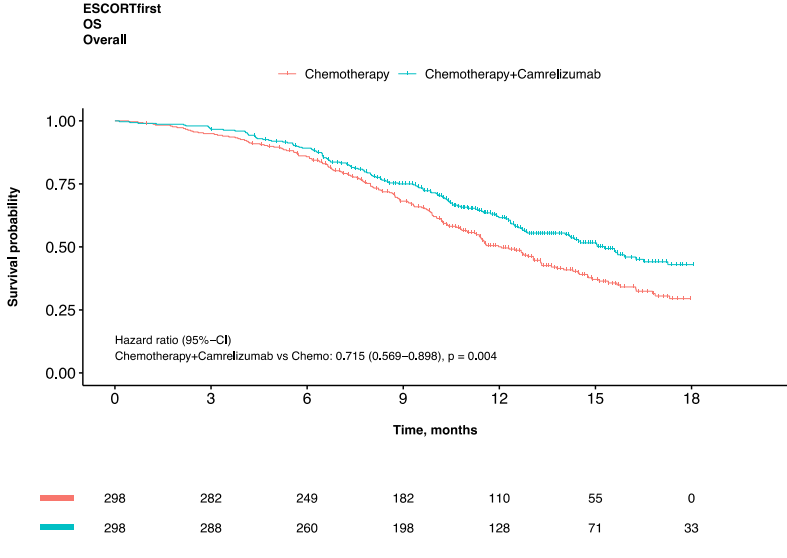
The original figure may be found in the primary trial manuscript

Doki Y, Ajani JA, Kato K, Xu J, Wyrwicz L, Motoyama S, Ogata T, Kawakami H, Hsu CH, Adenis A, El Hajbi F, Di Bartolomeo M, Braghiroli MI, Holtved E, Ostoich SA, Kim HR, Ueno M, Mansoor W, Yang WC, Liu T, Bridgewater J, Makino T, Xynos I, Liu X, Lei M, Kondo K, Patel A, Gricar J, Chau I, Kitagawa Y; CheckMate 648 Trial Investigators. Nivolumab Combination Therapy in Advanced Esophageal Squamous-Cell Carcinoma. *N Engl J Med.* 2022 Feb 3;386(5):449-462. Doi: 10.1056/NEJMoa2111380. PMID: 35108470.

Figure S2B  
Figure S2D



<p><b>CM648, DOR, TPS ≥1</b></p>	<p>The original figure may be found in the primary trial manuscript</p> <p>Doki Y, Ajani JA, Kato K, Xu J, Wyrwicz L, Motoyama S, Ogata T, Kawakami H, Hsu CH, Adenis A, El Hajbi F, Di Bartolomeo M, Braghiroli MI, Holtved E, Ostoich SA, Kim HR, Ueno M, Mansoor W, Yang WC, Liu T, Bridgewater J, Makino T, Xynos I, Liu X, Lei M, Kondo K, Patel A, Gricar J, Chau I, Kitagawa Y; CheckMate 648 Trial Investigators. Nivolumab Combination Therapy in Advanced Esophageal Squamous-Cell Carcinoma. <i>N Engl J Med.</i> 2022 Feb 3;386(5):449-462. Doi: 10.1056/NEJMoa2111380. PMID: 35108470.</p> <p>Figure S2A Figure S2C</p>	 <p><b>CM648 DOR PDL1 high</b></p> <p>— Chemotherapy — Nivolumab+Chemotherapy — Nivolumab+Ipilimumab</p> <p>Median Duration of Response (months)      Chemotherapy: 5.714 95% CI (5.343–6.463)      Nivolumab+Chemotherapy: 6.438 95% CI (7.141–12.478)      Nivolumab+Ipilimumab: 11.834 95% CI (8.408–NA)</p> <table border="1"> <tr> <td>31</td><td>25</td><td>8</td><td>3</td><td>2</td><td>1</td><td>1</td><td>1</td><td>1</td><td>1</td><td>0</td><td>0</td> </tr> <tr> <td>84</td><td>70</td><td>48</td><td>32</td><td>23</td><td>15</td><td>9</td><td>5</td><td>3</td><td>1</td><td>1</td><td>0</td> </tr> <tr> <td>56</td><td>48</td><td>33</td><td>27</td><td>21</td><td>15</td><td>11</td><td>7</td><td>6</td><td>5</td><td>1</td><td>0</td> </tr> </table>	31	25	8	3	2	1	1	1	1	1	0	0	84	70	48	32	23	15	9	5	3	1	1	0	56	48	33	27	21	15	11	7	6	5	1	0
31	25	8	3	2	1	1	1	1	1	0	0																											
84	70	48	32	23	15	9	5	3	1	1	0																											
56	48	33	27	21	15	11	7	6	5	1	0																											
<p><b>ESCORT, overall survival, overall cohort</b></p>	<p>The original figure may be found in the primary trial manuscript</p> <p>Huang J, Xu J, Chen Y, Zhuang W, Zhang Y, Chen Z, Chen J, Zhang H, Niu Z, Fan Q, Lin L, Gu K, Liu Y, Ba Y, Miao Z, Jiang X, Zeng M, Chen J, Fu Z, Gan L, Wang J, Zhan X, Liu T, Li Z, Shen L, Shu Y, Zhang T, Yang Q, Zou J; ESCORT Study Group. Camrelizumab versus investigator's choice of chemotherapy as second-line therapy for advanced or metastatic oesophageal squamous cell carcinoma (ESCORT): a multicentre, randomised, open-label, phase 3 study. <i>Lancet Oncol.</i> 2020 Jun;21(6):832-842. doi: 10.1016/S1470-2045(20)30110-8. Epub 2020 May 13. PMID: 32416073.</p> <p>Figure 2A</p>	 <p><b>ESCORT OS Overall</b></p> <p>— Chemotherapy — Camrelizumab</p> <p>Hazard ratio (95%–CI)      Camrelizumab vs Chemo: 0.708 (0.576–0.870), p = 0.001</p> <table border="1"> <tr> <td>220</td><td>182</td><td>118</td><td>67</td><td>44</td><td>24</td><td>10</td><td>4</td><td>0</td> </tr> <tr> <td>228</td><td>191</td><td>141</td><td>104</td><td>67</td><td>37</td><td>20</td><td>5</td><td>0</td> </tr> </table>	220	182	118	67	44	24	10	4	0	228	191	141	104	67	37	20	5	0																		
220	182	118	67	44	24	10	4	0																														
228	191	141	104	67	37	20	5	0																														

<p><b>ESCORT, overall survival, TPS<math>\geq</math>1</b></p>	<p>The original figure may be found in the primary trial manuscript</p> <p>Huang J, Xu J, Chen Y, Zhuang W, Zhang Y, Chen Z, Chen J, Zhang H, Niu Z, Fan Q, Lin L, Gu K, Liu Y, Ba Y, Miao Z, Jiang X, Zeng M, Chen J, Fu Z, Gan L, Wang J, Zhan X, Liu T, Li Z, Shen L, Shu Y, Zhang T, Yang Q, Zou J; ESCORT Study Group. Camrelizumab versus investigator's choice of chemotherapy as second-line therapy for advanced or metastatic oesophageal squamous cell carcinoma (ESCORT): a multicentre, randomised, open-label, phase 3 study. <i>Lancet Oncol.</i> 2020 Jun;21(6):832-842. doi: 10.1016/S1470-2045(20)30110-8. Epub 2020 May 13. PMID: 32416073.</p> <p>Figure S3</p>	 <table border="1" data-bbox="1243 694 1982 774"> <tr> <td>98</td> <td>83</td> <td>55</td> <td>30</td> <td>17</td> <td>10</td> <td>4</td> <td>1</td> <td>0</td> </tr> <tr> <td>93</td> <td>79</td> <td>64</td> <td>47</td> <td>31</td> <td>19</td> <td>11</td> <td>3</td> <td>0</td> </tr> </table>	98	83	55	30	17	10	4	1	0	93	79	64	47	31	19	11	3	0
98	83	55	30	17	10	4	1	0												
93	79	64	47	31	19	11	3	0												
<p><b>ESCORT1, overall survival, overall cohort</b></p>	<p>The original figure may be found in the primary trial manuscript</p> <p>Luo H, Lu J, Bai Y, Mao T, Wang J, Fan Q, Zhang Y, Zhao K, Chen Z, Gao S, Li J, Fu Z, Gu K, Liu Z, Wu L, Zhang X, Feng J, Niu Z, Ba Y, Zhang H, Liu Y, Zhang L, Min X, Huang J, Cheng Y, Wang D, Shen Y, Yang Q, Zou J, Xu RH; ESCORT-1st Investigators. Effect of Camrelizumab vs Placebo Added to Chemotherapy on Survival and Progression-Free Survival in Patients With Advanced or Metastatic Esophageal Squamous Cell Carcinoma: The ESCORT-1st Randomized Clinical Trial. <i>JAMA.</i> 2021 Sep 14;326(10):916-925. doi: 10.1001/jama.2021.12836. PMID: 34519801; PMCID: PMC8441593.</p> <p>Figure 2A</p>	 <table border="1" data-bbox="1243 1284 1982 1364"> <tr> <td>298</td> <td>282</td> <td>249</td> <td>182</td> <td>110</td> <td>55</td> <td>0</td> </tr> <tr> <td>298</td> <td>288</td> <td>260</td> <td>198</td> <td>128</td> <td>71</td> <td>33</td> </tr> </table>	298	282	249	182	110	55	0	298	288	260	198	128	71	33				
298	282	249	182	110	55	0														
298	288	260	198	128	71	33														

<p><b>ESCORT1, overall survival, TPS<math>\geq</math>1</b></p>	<p>The original figure may be found in the primary trial manuscript</p> <p>Luo H, Lu J, Bai Y, Mao T, Wang J, Fan Q, Zhang Y, Zhao K, Chen Z, Gao S, Li J, Fu Z, Gu K, Liu Z, Wu L, Zhang X, Feng J, Niu Z, Ba Y, Zhang H, Liu Y, Zhang L, Min X, Huang J, Cheng Y, Wang D, Shen Y, Yang Q, Zou J, Xu RH; ESCORT-1st Investigators. Effect of Camrelizumab vs Placebo Added to Chemotherapy on Survival and Progression-Free Survival in Patients With Advanced or Metastatic Esophageal Squamous Cell Carcinoma: The ESCORT-1st Randomized Clinical Trial. <i>JAMA</i>. 2021 Sep 14;326(10):916-925. doi: 10.1001/jama.2021.12836. PMID: 34519801; PMCID: PMC8441593.</p> <p>eFigure 5B</p>	<p>ESCORT1st OS PDL1 High</p> <p>— Chemotherapy — Chemotherapy+Camrelizumab</p> <p>Hazard ratio (95%-CI) Chemotherapy+Camrelizumab vs Chemo: 0.626 (0.457-0.856), p = 0.003</p> <table border="1"> <tr> <td>163</td> <td>152</td> <td>133</td> <td>93</td> <td>53</td> <td>20</td> <td>0</td> </tr> <tr> <td>166</td> <td>161</td> <td>146</td> <td>113</td> <td>71</td> <td>34</td> <td>16</td> </tr> </table>	163	152	133	93	53	20	0	166	161	146	113	71	34	16								
163	152	133	93	53	20	0																		
166	161	146	113	71	34	16																		
<p><b>KN181, overall survival, overall cohort</b></p>	<p>The original figure may be found in the primary trial manuscript</p> <p>Kojima T, Shah MA, Muro K, Francois E, Adenis A, Hsu CH, Doi T, Moriwaki T, Kim SB, Lee SH, Bennouna J, Kato K, Shen L, Enzinger P, Qin SK, Ferreira P, Chen J, Girotto G, de la Fouchardiere C, Senellart H, Al-Rajabi R, Lordick F, Wang R, Suryawanshi S, Bhagia P, Kang SP, Metges JP; KEYNOTE-181 Investigators. Randomized Phase III KEYNOTE-181 Study of Pembrolizumab Versus Chemotherapy in Advanced Esophageal Cancer. <i>J Clin Oncol</i>. 2020 Dec 10;38(35):4138-4148. doi: 10.1200/JCO.20.01888. Epub 2020 Oct 7. PMID: 33026938.</p> <p>Figure 2B</p>	<p>KN181 OS Overall</p> <p>— Chemotherapy — Pembrolizumab</p> <p>Hazard ratio (95%-CI) Pembrolizumab vs Chemo: 0.761 (0.615-0.941), p = 0.012</p> <table border="1"> <tr> <td>203</td> <td>161</td> <td>117</td> <td>75</td> <td>50</td> <td>33</td> <td>20</td> <td>12</td> <td>8</td> <td>5</td> <td>2</td> </tr> <tr> <td>198</td> <td>163</td> <td>121</td> <td>94</td> <td>77</td> <td>52</td> <td>38</td> <td>21</td> <td>12</td> <td>7</td> <td>1</td> </tr> </table>	203	161	117	75	50	33	20	12	8	5	2	198	163	121	94	77	52	38	21	12	7	1
203	161	117	75	50	33	20	12	8	5	2														
198	163	121	94	77	52	38	21	12	7	1														

<p><b>KN181, overall survival, CPS<math>\geq</math>10</b></p>	<p>The original figure may be found in the primary trial manuscript</p> <p>Kojima T, Shah MA, Muro K, Francois E, Adenis A, Hsu CH, Doi T, Moriwaki T, Kim SB, Lee SH, Bennouna J, Kato K, Shen L, Enzinger P, Qin SK, Ferreira P, Chen J, Girotto G, de la Fouchardiere C, Senellart H, Al-Rajabi R, Lordick F, Wang R, Suryawanshi S, Bhagia P, Kang SP, Metges JP; KEYNOTE-181 Investigators. Randomized Phase III KEYNOTE-181 Study of Pembrolizumab Versus Chemotherapy in Advanced Esophageal Cancer. <i>J Clin Oncol.</i> 2020 Dec 10;38(35):4138-4148. doi: 10.1200/JCO.20.01888. Epub 2020 Oct 7. PMID: 33026938.</p> <p>Figure S4</p>	<p>KN181 OS PDL1 High</p> <p>— Chemotherapy — Pembrolizumab</p> <p>Hazard ratio (95%-CI) Pembrolizumab vs Chemo: 0.611 (0.436-0.856), p = 0.004</p> <table border="1"> <tr> <td>82</td><td>62</td><td>42</td><td>31</td><td>18</td><td>13</td><td>8</td><td>4</td><td>3</td><td>2</td><td>1</td> </tr> <tr> <td>85</td><td>75</td><td>56</td><td>48</td><td>40</td><td>27</td><td>21</td><td>9</td><td>4</td><td>2</td><td>0</td> </tr> </table>	82	62	42	31	18	13	8	4	3	2	1	85	75	56	48	40	27	21	9	4	2	0
82	62	42	31	18	13	8	4	3	2	1														
85	75	56	48	40	27	21	9	4	2	0														
<p><b>KN590, overall survival, overall cohort</b></p>	<p>The original figure may be found in the primary trial manuscript</p> <p>Sun JM, Shen L, Shah MA, Enzinger P, Adenis A, Doi T, Kojima T, Metges JP, Li Z, Kim SB, Cho BC, Mansoor W, Li SH, Sunpaweravong P, Maqueda MA, Goekkurt E, Hara H, Antunes L, Fountzilias C, Tsuji A, Oliden VC, Liu Q, Shah S, Bhagia P, Kato K; KEYNOTE-590 Investigators. Pembrolizumab plus chemotherapy versus chemotherapy alone for first-line treatment of advanced oesophageal cancer (KEYNOTE-590): a randomised, placebo-controlled, phase 3 study. <i>Lancet.</i> 2021 Aug 28;398(10302):759-771. doi: 10.1016/S0140-6736(21)01234-4. Erratum in: <i>Lancet.</i> 2021 Nov 20;398(10314):1874. PMID: 34454674.</p> <p>Figure 2B</p>	<p>KN590 OS Overall</p> <p>— Chemotherapy — Pembrolizumab+Chemotherapy</p> <p>Hazard ratio (95%-CI) Pembrolizumab+Chemotherapy vs Chemo: 0.715 (0.589-0.868), p &lt; 0.001</p> <table border="1"> <tr> <td>274</td><td>247</td><td>202</td><td>146</td><td>103</td><td>75</td><td>57</td><td>34</td><td>23</td><td>13</td><td>4</td> </tr> <tr> <td>274</td><td>258</td><td>221</td><td>175</td><td>139</td><td>111</td><td>89</td><td>50</td><td>27</td><td>14</td><td>6</td> </tr> </table>	274	247	202	146	103	75	57	34	23	13	4	274	258	221	175	139	111	89	50	27	14	6
274	247	202	146	103	75	57	34	23	13	4														
274	258	221	175	139	111	89	50	27	14	6														



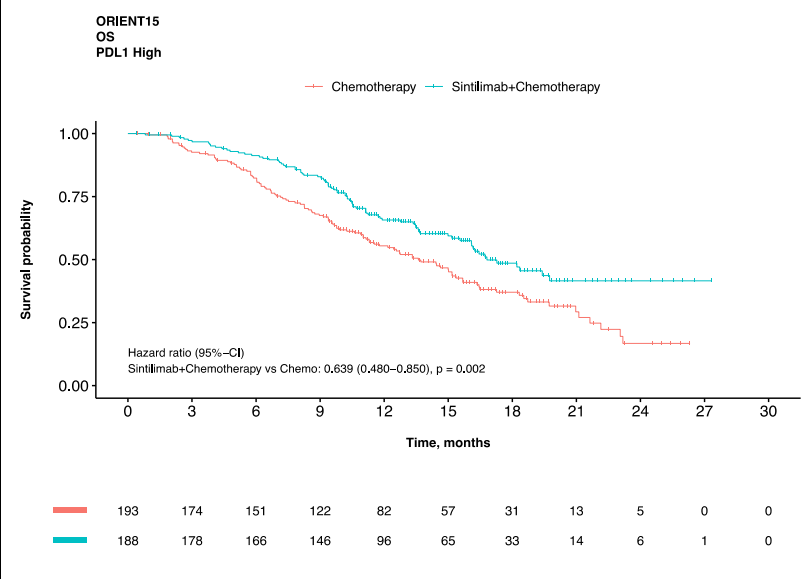
<p><b>KN590, overall survival, CPS≥10</b></p>	<p>The original figure may be found in the primary trial manuscript</p> <p>Sun JM, Shen L, Shah MA, Enzinger P, Adenis A, Doi T, Kojima T, Metges JP, Li Z, Kim SB, Cho BC, Mansoor W, Li SH, Sunpaweravong P, Maqueda MA, Goekkurt E, Hara H, Antunes L, Fountzilias C, Tsuji A, Oliden VC, Liu Q, Shah S, Bhagia P, Kato K; KEYNOTE-590 Investigators. Pembrolizumab plus chemotherapy versus chemotherapy alone for first-line treatment of advanced oesophageal cancer (KEYNOTE-590): a randomised, placebo-controlled, phase 3 study. <i>Lancet</i>. 2021 Aug 28;398(10302):759-771. doi: 10.1016/S0140-6736(21)01234-4. Erratum in: <i>Lancet</i>. 2021 Nov 20;398(10314):1874. PMID: 34454674.</p> <p>Figure 2A</p>	<p>KN590 OS PDL1 High</p> <p>— Chemotherapy — Pembrolizumab+Chemotherapy</p> <p>Hazard ratio (95%-CI) Pembrolizumab+Chemotherapy vs Chemo: 0.574 (0.437-0.753), p &lt; 0.001</p> <table border="1"> <tr> <td>143</td><td>124</td><td>99</td><td>70</td><td>48</td><td>34</td><td>24</td><td>15</td><td>10</td><td>4</td><td>1</td> </tr> <tr> <td>143</td><td>134</td><td>119</td><td>96</td><td>78</td><td>61</td><td>51</td><td>29</td><td>16</td><td>7</td><td>3</td> </tr> </table>	143	124	99	70	48	34	24	15	10	4	1	143	134	119	96	78	61	51	29	16	7	3
143	124	99	70	48	34	24	15	10	4	1														
143	134	119	96	78	61	51	29	16	7	3														
<p><b>ORIENT15, overall survival, overall cohort</b></p>	<p>The original figure may be found in the primary trial manuscript</p> <p>Lu Z, Wang J, Shu Y, Liu L, Kong L, Yang L, Wang B, Sun G, Ji Y, Cao G, Liu H, Cui T, Li N, Qiu W, Li G, Hou X, Luo H, Xue L, Zhang Y, Yue W, Liu Z, Wang X, Gao S, Pan Y, Galais MP, Zaanani A, Ma Z, Li H, Wang Y, Shen L; ORIENT-15 study group. Sintilimab versus placebo in combination with chemotherapy as first line treatment for locally advanced or metastatic oesophageal squamous cell carcinoma (ORIENT-15): multicentre, randomised, double blind, phase 3 trial. <i>BMJ</i>. 2022 Apr 19;377:e068714. doi: 10.1136/bmj-2021-068714. PMID: 35440464; PMCID: PMC9016493.</p> <p>Figure 2 (top)</p>	<p>ORIENT15 OS Overall</p> <p>— Strata — Chemotherapy — Sintilimab+Chemotherapy</p> <p>Hazard ratio (95%-CI) Sintilimab+Chemotherapy vs Chemo: 0.629 (0.508-0.778), p &lt; 0.001</p> <table border="1"> <tr> <td>332</td><td>300</td><td>258</td><td>202</td><td>127</td><td>88</td><td>45</td><td>17</td><td>6</td><td>0</td><td>0</td> </tr> <tr> <td>327</td><td>305</td><td>283</td><td>240</td><td>161</td><td>105</td><td>52</td><td>25</td><td>11</td><td>2</td><td>0</td> </tr> </table>	332	300	258	202	127	88	45	17	6	0	0	327	305	283	240	161	105	52	25	11	2	0
332	300	258	202	127	88	45	17	6	0	0														
327	305	283	240	161	105	52	25	11	2	0														

**ORIENT15,  
overall  
survival,  
CPS≥10**

The original figure may be found in the primary trial manuscript

Lu Z, Wang J, Shu Y, Liu L, Kong L, Yang L, Wang B, Sun G, Ji Y, Cao G, Liu H, Cui T, Li N, Qiu W, Li G, Hou X, Luo H, Xue L, Zhang Y, Yue W, Liu Z, Wang X, Gao S, Pan Y, Galais MP, Zaanan A, Ma Z, Li H, Wang Y, Shen L; ORIENT-15 study group. Sintilimab versus placebo in combination with chemotherapy as first line treatment for locally advanced or metastatic oesophageal squamous cell carcinoma (ORIENT-15): multicentre, randomised, double blind, phase 3 trial. *BMJ*. 2022 Apr 19;377:e068714. doi: 10.1136/bmj-2021-068714. PMID: 35440464; PMCID: PMC9016493.

Figure 2 (bottom)

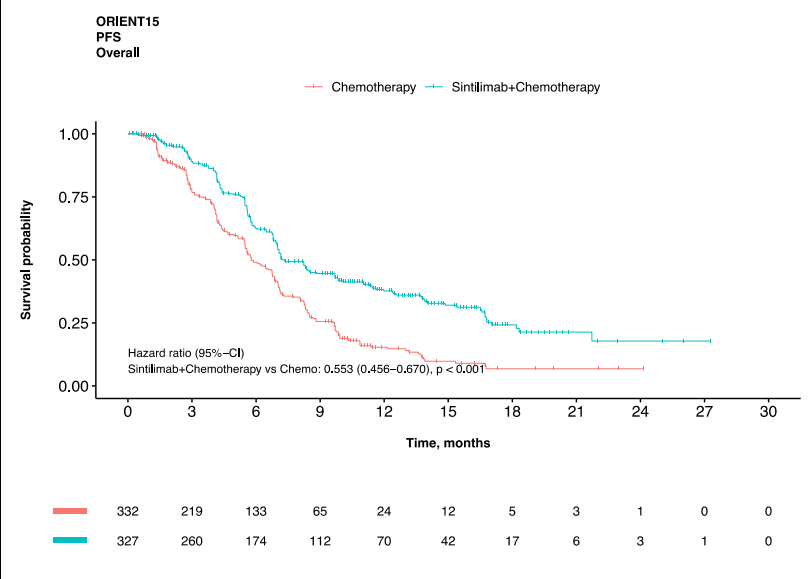


**ORIENT15,  
Progression  
Free Survival,  
Overall cohort**

The original figure may be found in the primary trial manuscript

Lu Z, Wang J, Shu Y, Liu L, Kong L, Yang L, Wang B, Sun G, Ji Y, Cao G, Liu H, Cui T, Li N, Qiu W, Li G, Hou X, Luo H, Xue L, Zhang Y, Yue W, Liu Z, Wang X, Gao S, Pan Y, Galais MP, Zaanan A, Ma Z, Li H, Wang Y, Shen L; ORIENT-15 study group. Sintilimab versus placebo in combination with chemotherapy as first line treatment for locally advanced or metastatic oesophageal squamous cell carcinoma (ORIENT-15): multicentre, randomised, double blind, phase 3 trial. *BMJ*. 2022 Apr 19;377:e068714. doi: 10.1136/bmj-2021-068714. PMID: 35440464; PMCID: PMC9016493.

Figure 4 (top)



<p><b>ORIENT15, Progression Free Survival, TPS ≥1</b></p>	<p>The original figure may be found in the primary trial manuscript</p> <p>Lu Z, Wang J, Shu Y, Liu L, Kong L, Yang L, Wang B, Sun G, Ji Y, Cao G, Liu H, Cui T, Li N, Qiu W, Li G, Hou X, Luo H, Xue L, Zhang Y, Yue W, Liu Z, Wang X, Gao S, Pan Y, Galais MP, Zaanani A, Ma Z, Li H, Wang Y, Shen L; ORIENT-15 study group. Sintilimab versus placebo in combination with chemotherapy as first line treatment for locally advanced or metastatic oesophageal squamous cell carcinoma (ORIENT-15): multicentre, randomised, double blind, phase 3 trial. <i>BMJ</i>. 2022 Apr 19;377:e068714. doi: 10.1136/bmj-2021-068714. PMID: 35440464; PMCID: PMC9016493.</p> <p>Figure 4 (bottom)</p>	<table border="1"> <tr> <td>193</td> <td>131</td> <td>80</td> <td>39</td> <td>16</td> <td>9</td> <td>4</td> <td>3</td> <td>1</td> <td>0</td> <td>0</td> </tr> <tr> <td>188</td> <td>150</td> <td>104</td> <td>66</td> <td>46</td> <td>24</td> <td>11</td> <td>4</td> <td>2</td> <td>1</td> <td>0</td> </tr> </table>	193	131	80	39	16	9	4	3	1	0	0	188	150	104	66	46	24	11	4	2	1	0				
193	131	80	39	16	9	4	3	1	0	0																		
188	150	104	66	46	24	11	4	2	1	0																		
<p><b>ORIENT15, DOR, Overall cohort</b></p>	<p>The original figure may be found in the primary trial manuscript</p> <p>Lu Z, Wang J, Shu Y, Liu L, Kong L, Yang L, Wang B, Sun G, Ji Y, Cao G, Liu H, Cui T, Li N, Qiu W, Li G, Hou X, Luo H, Xue L, Zhang Y, Yue W, Liu Z, Wang X, Gao S, Pan Y, Galais MP, Zaanani A, Ma Z, Li H, Wang Y, Shen L; ORIENT-15 study group. Sintilimab versus placebo in combination with chemotherapy as first line treatment for locally advanced or metastatic oesophageal squamous cell carcinoma (ORIENT-15): multicentre, randomised, double blind, phase 3 trial. <i>BMJ</i>. 2022 Apr 19;377:e068714. doi: 10.1136/bmj-2021-068714. PMID: 35440464; PMCID: PMC9016493.</p> <p>Figure S2</p>	<table border="1"> <tr> <td>151</td> <td>128</td> <td>76</td> <td>32</td> <td>17</td> <td>8</td> <td>5</td> <td>2</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>216</td> <td>181</td> <td>119</td> <td>84</td> <td>58</td> <td>36</td> <td>8</td> <td>3</td> <td>1</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> </table>	151	128	76	32	17	8	5	2	0	0	0	0	0	216	181	119	84	58	36	8	3	1	0	0	0	0
151	128	76	32	17	8	5	2	0	0	0	0	0																
216	181	119	84	58	36	8	3	1	0	0	0	0																

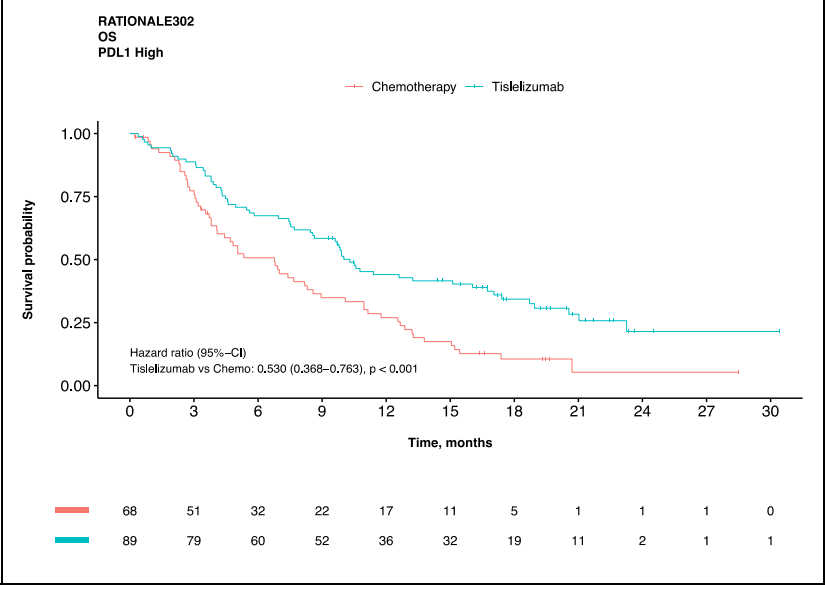
<p><b>ORIENT15, DOR, TPS ≥1</b></p>	<p>The original figure may be found in the primary trial manuscript</p> <p>Lu Z, Wang J, Shu Y, Liu L, Kong L, Yang L, Wang B, Sun G, Ji Y, Cao G, Liu H, Cui T, Li N, Qiu W, Li G, Hou X, Luo H, Xue L, Zhang Y, Yue W, Liu Z, Wang X, Gao S, Pan Y, Galais MP, Zaanan A, Ma Z, Li H, Wang Y, Shen L; ORIENT-15 study group. Sintilimab versus placebo in combination with chemotherapy as first line treatment for locally advanced or metastatic oesophageal squamous cell carcinoma (ORIENT-15): multicentre, randomised, double blind, phase 3 trial. <i>BMJ</i>. 2022 Apr 19;377:e068714. doi: 10.1136/bmj-2021-068714. PMID: 35440464; PMCID: PMC9016493.</p> <p>Figure S3</p>	<table border="1"> <tr> <td>94</td> <td>79</td> <td>42</td> <td>21</td> <td>12</td> <td>7</td> <td>4</td> <td>2</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>127</td> <td>105</td> <td>70</td> <td>48</td> <td>36</td> <td>20</td> <td>5</td> <td>2</td> <td>1</td> <td>0</td> <td>0</td> <td>0</td> </tr> </table>	94	79	42	21	12	7	4	2	0	0	0	0	127	105	70	48	36	20	5	2	1	0	0	0
94	79	42	21	12	7	4	2	0	0	0	0															
127	105	70	48	36	20	5	2	1	0	0	0															
<p><b>RATIONALE302, overall survival, overall cohort</b></p>	<p>The original figure may be found in the primary trial manuscript</p> <p>Shen L, Kato K, Kim SB, Ajani JA, Zhao K, He Z, Yu X, Shu Y, Luo Q, Wang J, Chen Z, Niu Z, Zhang L, Yi T, Sun JM, Chen J, Yu G, Lin CY, Hara H, Bi Q, Satoh T, Pazo-Cid R, Arkenau HT, Borg C, Lordick F, Li L, Ding N, Tao A, Shi J, Van Cutsem E; RATIONALE-302 Investigators. Tislelizumab Versus Chemotherapy as Second-Line Treatment for Advanced or Metastatic Esophageal Squamous Cell Carcinoma (RATIONALE-302): A Randomized Phase III Study. <i>J Clin Oncol</i>. 2022 Sep 10;40(26):3065-3076. doi: 10.1200/JCO.21.01926. Epub 2022 Apr 20. PMID: 35442766; PMCID: PMC9462531.</p> <p>Figure 2A</p>	<table border="1"> <tr> <td>256</td> <td>189</td> <td>123</td> <td>82</td> <td>50</td> <td>33</td> <td>21</td> <td>11</td> <td>5</td> <td>2</td> <td>1</td> </tr> <tr> <td>256</td> <td>213</td> <td>157</td> <td>120</td> <td>88</td> <td>63</td> <td>44</td> <td>25</td> <td>13</td> <td>8</td> <td>2</td> </tr> </table>	256	189	123	82	50	33	21	11	5	2	1	256	213	157	120	88	63	44	25	13	8	2		
256	189	123	82	50	33	21	11	5	2	1																
256	213	157	120	88	63	44	25	13	8	2																

**RATIONALE302,  
overall survival,  
TAP $\geq$ 10**

The original figure may be found in the primary trial manuscript

Shen L, Kato K, Kim SB, Ajani JA, Zhao K, He Z, Yu X, Shu Y, Luo Q, Wang J, Chen Z, Niu Z, Zhang L, Yi T, Sun JM, Chen J, Yu G, Lin CY, Hara H, Bi Q, Satoh T, Pazo-Cid R, Arkenau HT, Borg C, Lordick F, Li L, Ding N, Tao A, Shi J, Van Cutsem E; RATIONALE-302 Investigators. Tislelizumab Versus Chemotherapy as Second-Line Treatment for Advanced or Metastatic Esophageal Squamous Cell Carcinoma (RATIONALE-302): A Randomized Phase III Study. *J Clin Oncol.* 2022 Sep 10;40(26):3065-3076. doi: 10.1200/JCO.21.01926. Epub 2022 Apr 20. PMID: 35442766; PMCID: PMC9462531.

Figure 2B



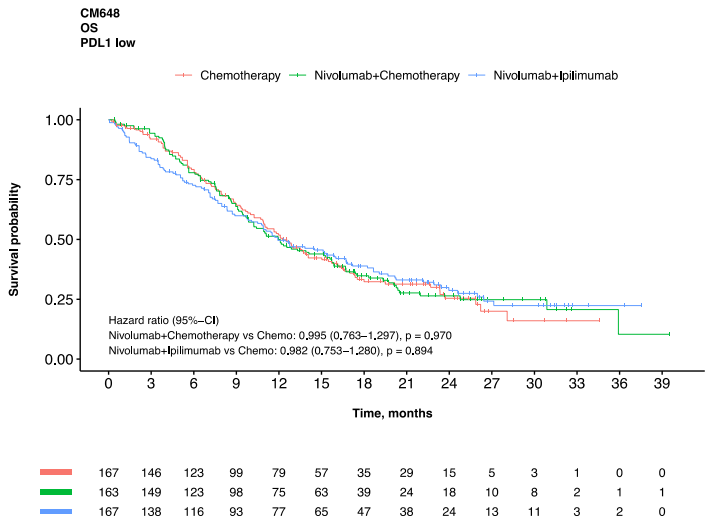
Abbreviations: CPS, combined positive score; TPS, tumor proportion score; Chemo, chemotherapy; Immuno, immunotherapy; Nivo, nivolumab; Ipi, ipilimumab; Camre, camrelizumab; Pembro, pembrolizumab; Sinti, sintilimab; Tisle, Tislelizumab; HR, hazard ratio; CI, confidence interval; PD-L1, programmed death ligand 1

eFigure 4. Example Comparisons of KMSubtraction Outcomes With Reported HRs for PD-L1–Low Subgroups

Trial, comparison	PD-L1 expression subgroup	Outcome	Reported		KMSubtraction with bipartite matching																						
			Hazard ratio (95%-CI)	p-value	Curve, hazard ratio (95%-CI)																						
<i>ORIENT15 (Esophageal squamous cell carcinoma)</i>																											
Sintilimab + Chemotherapy (139) vs Chemotherapy (139)	CPS < 10	OS	0.62 (0.45-0.85)	NR	<p>ORIENT15 OS PDL1 low</p> <p>— Chemotherapy — Sintilimab+Chemotherapy</p> <p>Hazard ratio (95%-CI) Sintilimab+Chemotherapy vs Chemo: 0.618 (0.448-0.851), p = 0.003</p> <table border="1"> <tr> <td>139</td> <td>125</td> <td>107</td> <td>80</td> <td>45</td> <td>30</td> <td>14</td> <td>4</td> <td>1</td> <td>0</td> <td>0</td> </tr> <tr> <td>139</td> <td>127</td> <td>117</td> <td>94</td> <td>65</td> <td>39</td> <td>19</td> <td>11</td> <td>5</td> <td>1</td> <td>0</td> </tr> </table>	139	125	107	80	45	30	14	4	1	0	0	139	127	117	94	65	39	19	11	5	1	0
139	125	107	80	45	30	14	4	1	0	0																	
139	127	117	94	65	39	19	11	5	1	0																	

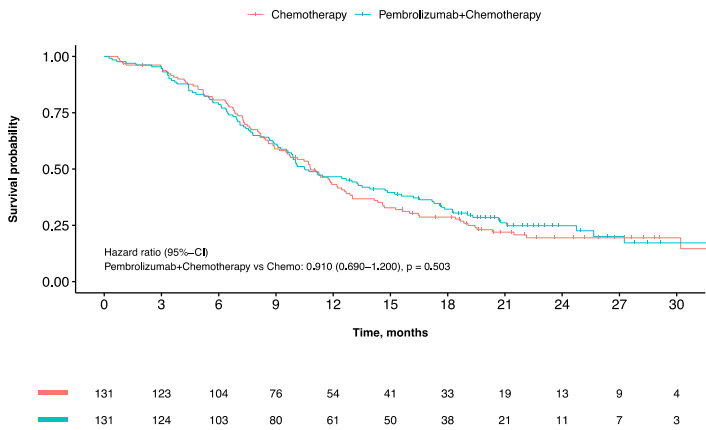
**Checkmate-648 (Esophageal squamous cell carcinoma)**

Nivo+Chemo vs Chemo	TPS <1	OS	0.98 (0.76-1.28)	NR
Nivo+Ipi vs Chemo	TPS <1	OS	0.96 (0.74-1.25)	NR



**KN590**

Pembro + Chemo vs Chemo	CPS < 10	OS	0.99 (0.74-1.32)	HR
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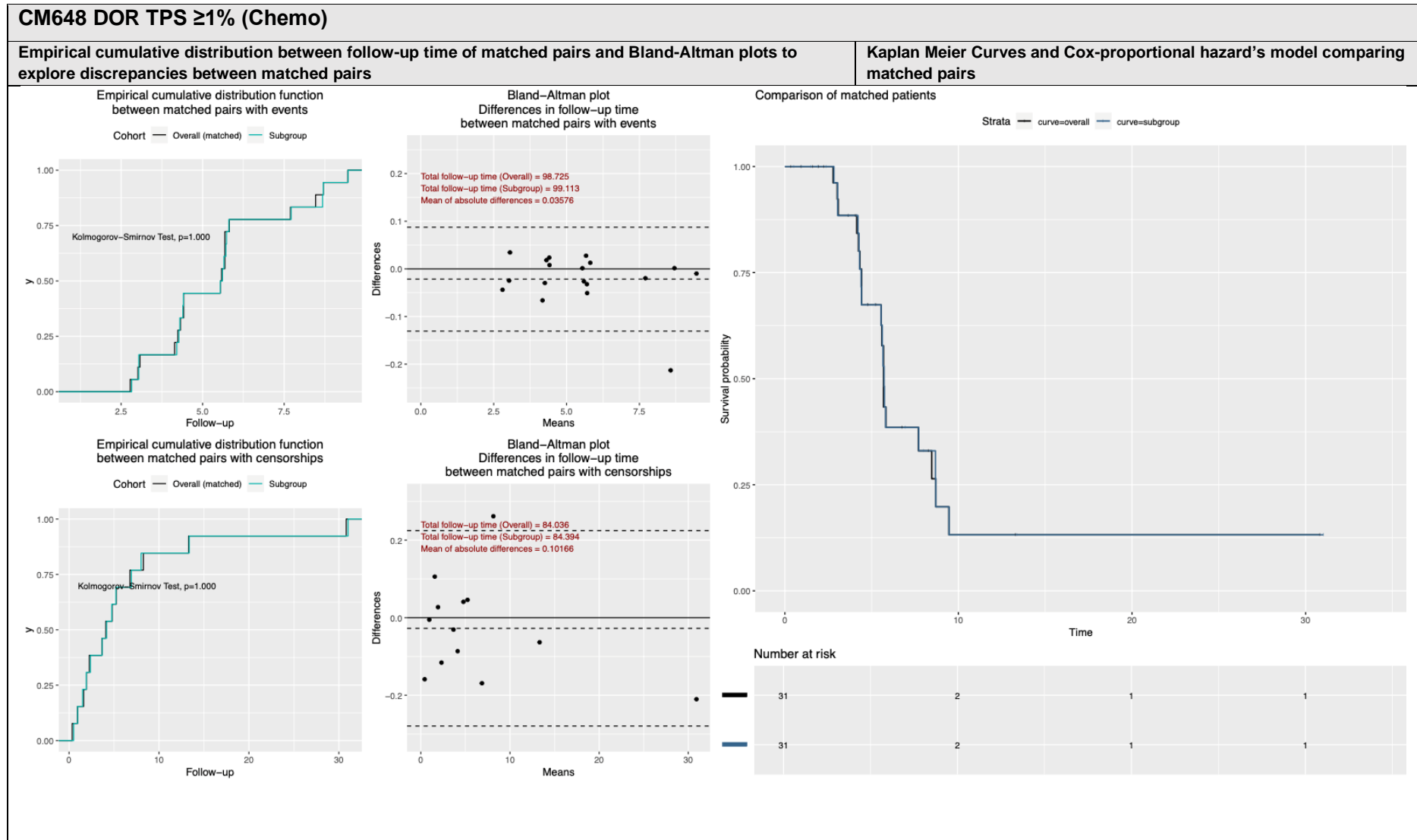
**ESCORT**

Camre vs Chemo	TPS <1	OS	0.82 (0.62-1.09)	NR	<table border="1" data-bbox="1344 574 1993 638"> <tr> <td>122</td> <td>99</td> <td>63</td> <td>37</td> <td>27</td> <td>14</td> <td>6</td> <td>3</td> <td>0</td> </tr> <tr> <td>135</td> <td>112</td> <td>76</td> <td>56</td> <td>36</td> <td>18</td> <td>9</td> <td>2</td> <td>0</td> </tr> </table>	122	99	63	37	27	14	6	3	0	135	112	76	56	36	18	9	2	0				
122	99	63	37	27	14	6	3	0																			
135	112	76	56	36	18	9	2	0																			
<b>KN181</b>																											
Pembro vs Chemo	CPS <10	OS	0.88 (0.66-1.16)		<table border="1" data-bbox="1344 1101 1993 1165"> <tr> <td>121</td> <td>99</td> <td>75</td> <td>44</td> <td>32</td> <td>20</td> <td>12</td> <td>8</td> <td>5</td> <td>3</td> <td>1</td> </tr> <tr> <td>113</td> <td>88</td> <td>65</td> <td>46</td> <td>37</td> <td>25</td> <td>18</td> <td>12</td> <td>8</td> <td>5</td> <td>1</td> </tr> </table>	121	99	75	44	32	20	12	8	5	3	1	113	88	65	46	37	25	18	12	8	5	1
121	99	75	44	32	20	12	8	5	3	1																	
113	88	65	46	37	25	18	12	8	5	1																	

Abbreviations: Sinti, Sintilimab; Nivo, nivolumab; Ipi, ipilimumab; Pembro, Pembrolizumab; Chemo, chemotherapy; CI, confidence interval; PD-L1, programmed death ligand 1 ESCC, esophageal squamous cell carcinoma; NR, not reported; TPS, tumor proportion score.



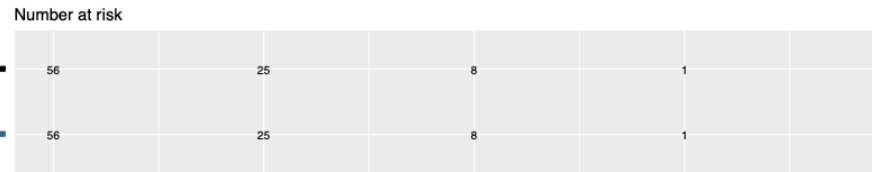
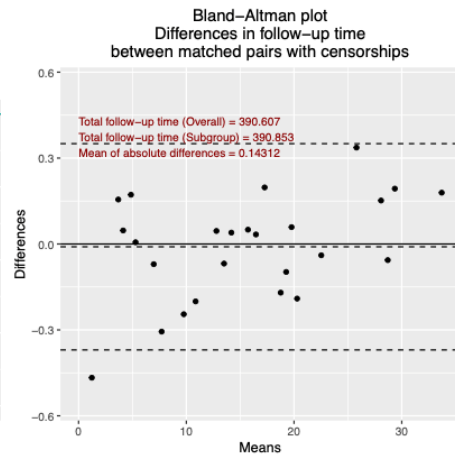
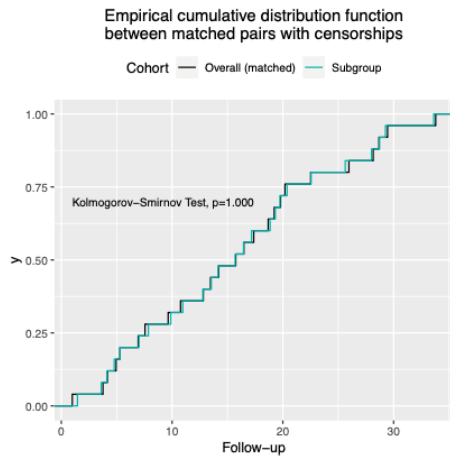
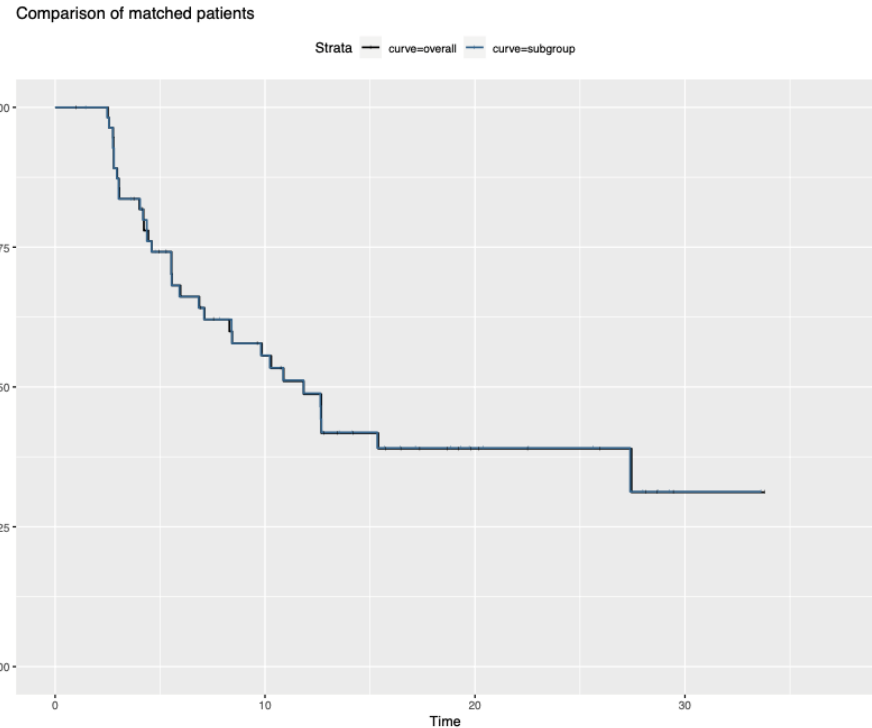
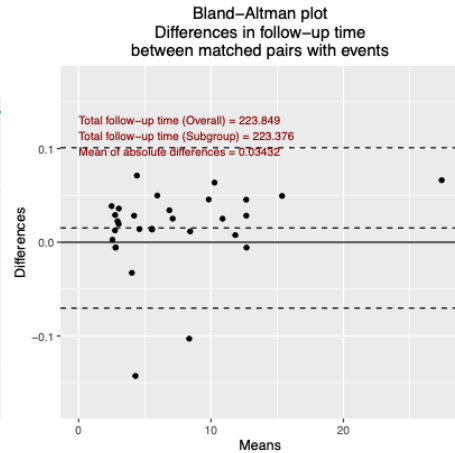
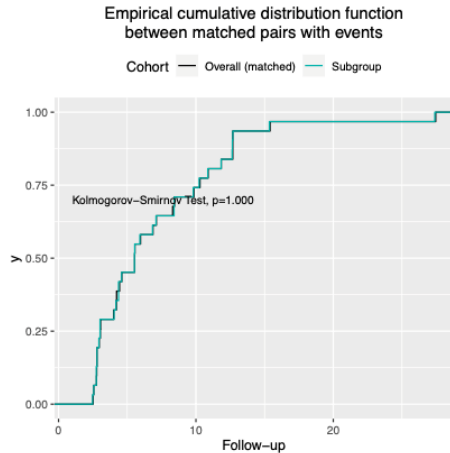
eFigure 5. Evaluation of KMSubtraction Bipartite Matching



# CM648 DOR TPS $\geq 1\%$ (Nivo + Ipi)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

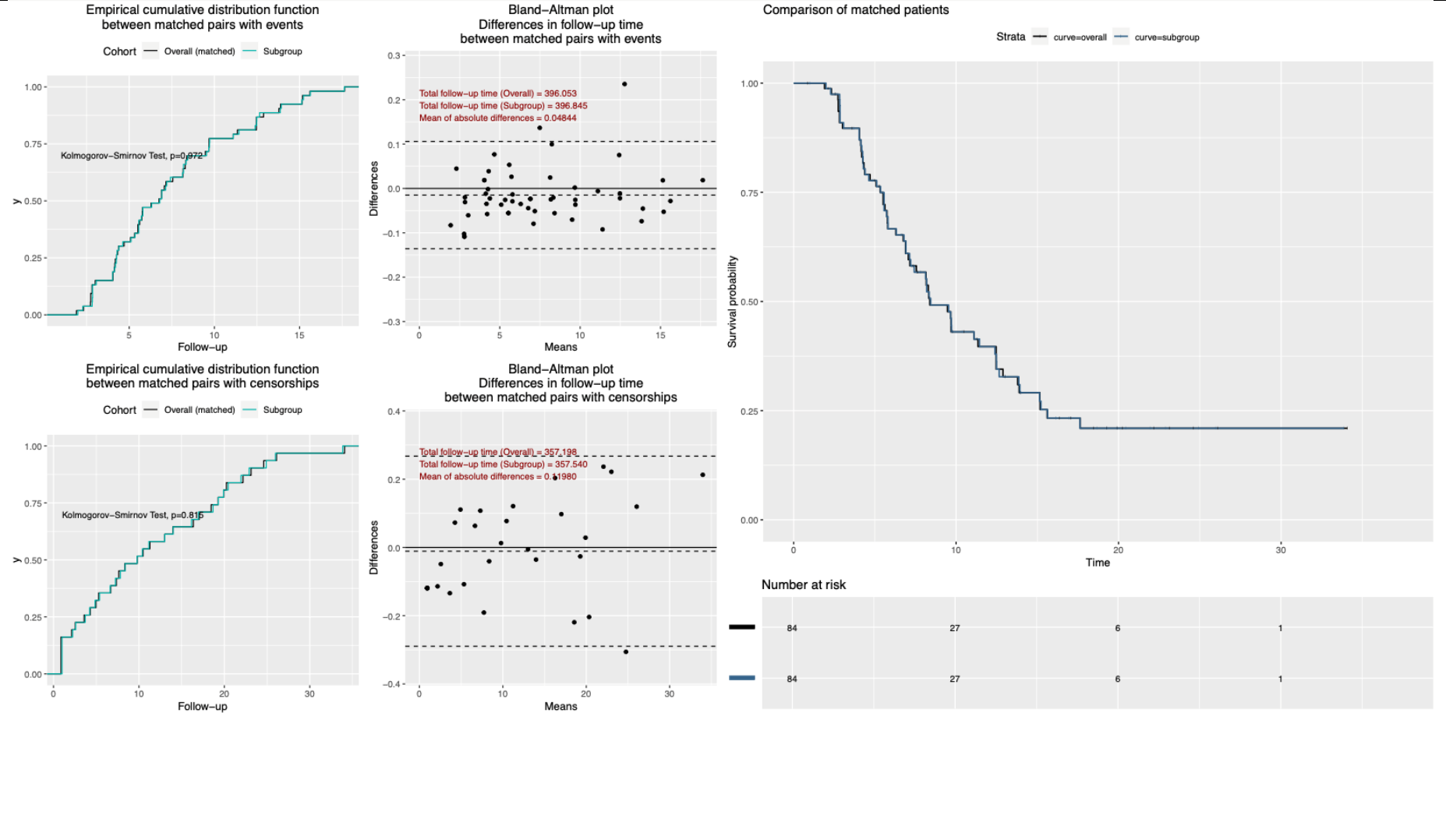
Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs



# CM648 DOR TPS $\geq 1\%$ (Nivo + Chemo)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

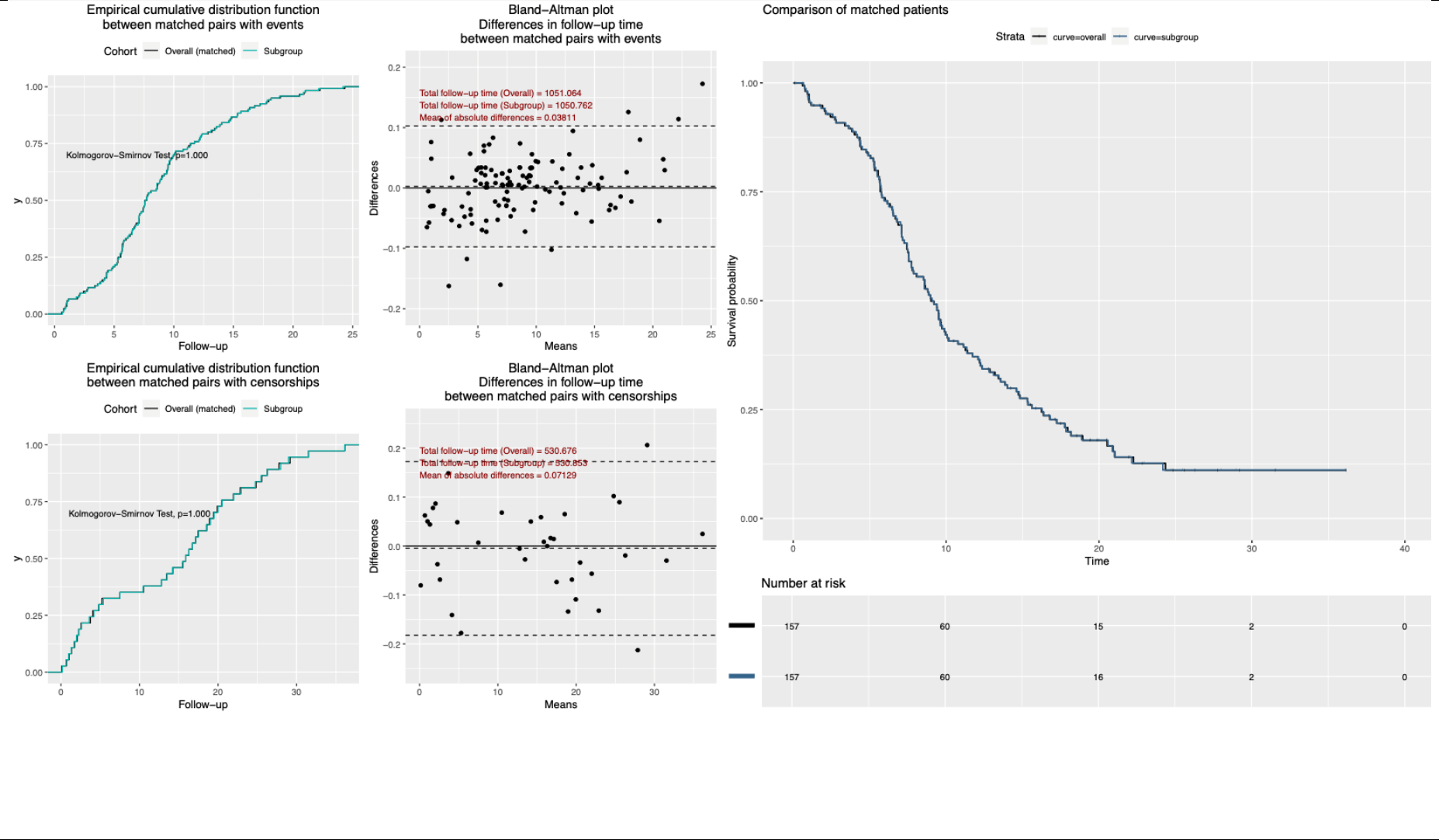
Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs



# CM648 OS TPS $\geq 1\%$ (Chemo)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

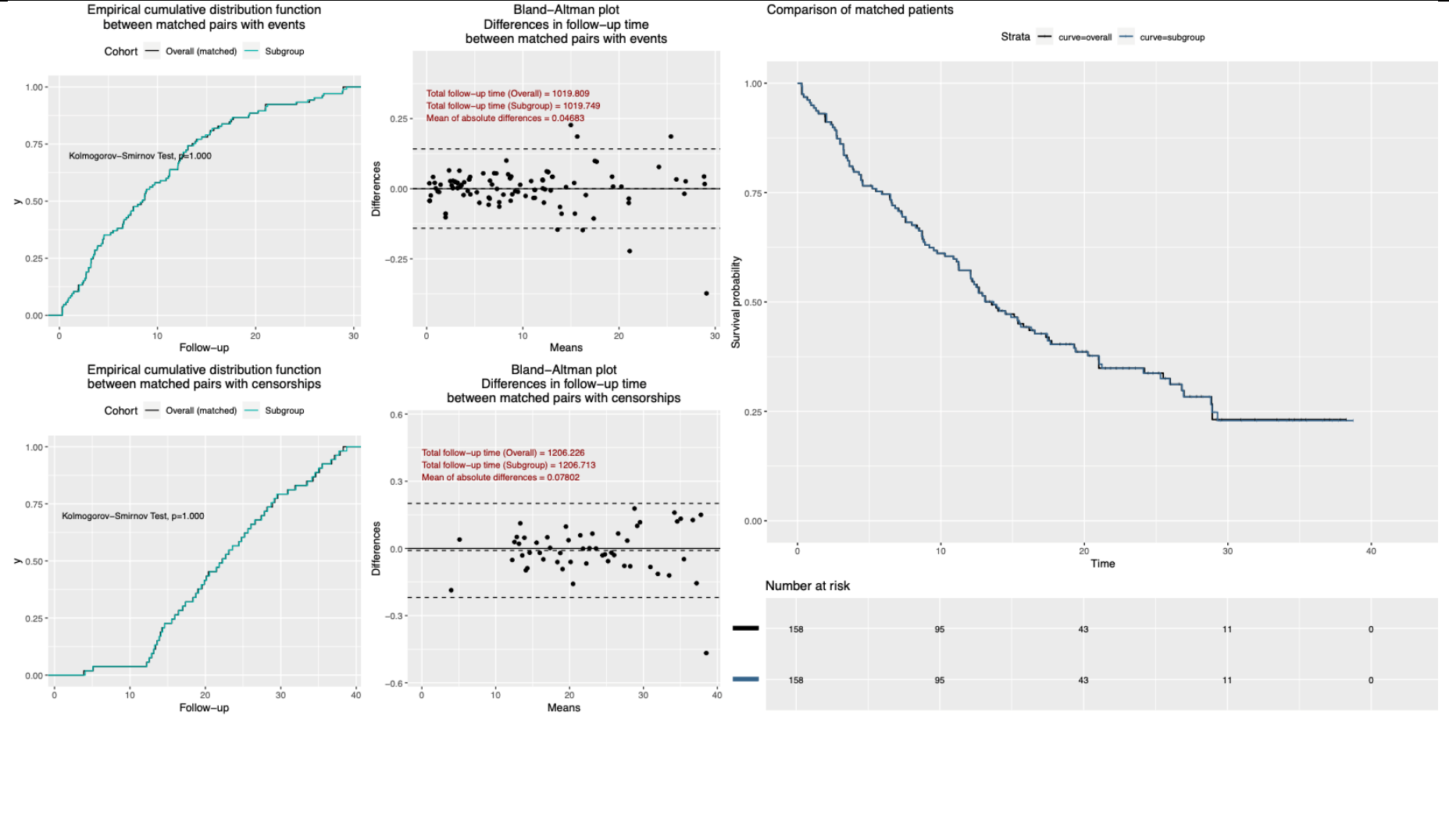
Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs



# CM648 OS TPS $\geq 1\%$ (Nivo + Ipi)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

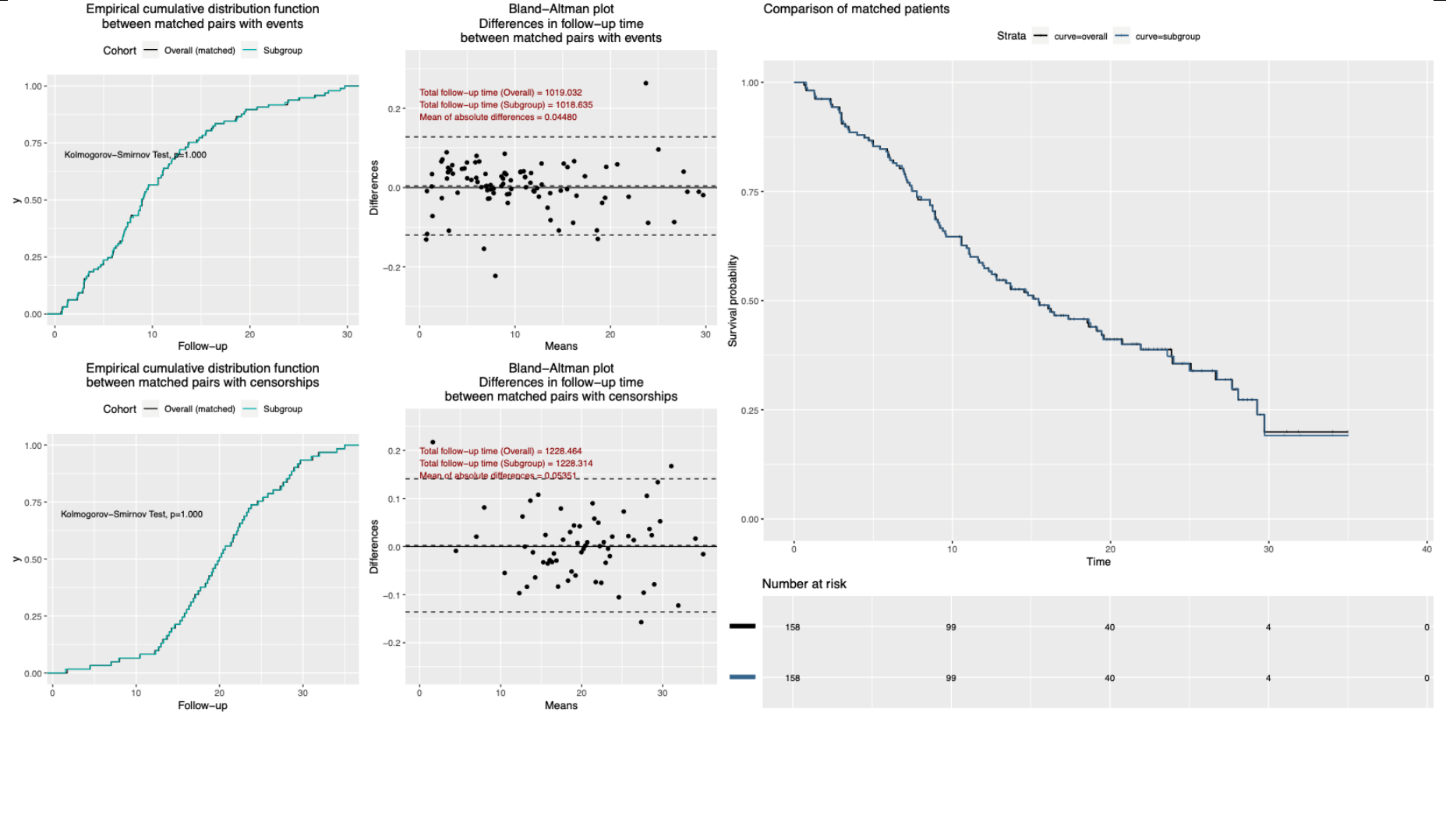
Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs



# CM648 OS TPS $\geq 1\%$ (Nivo + Chemo)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

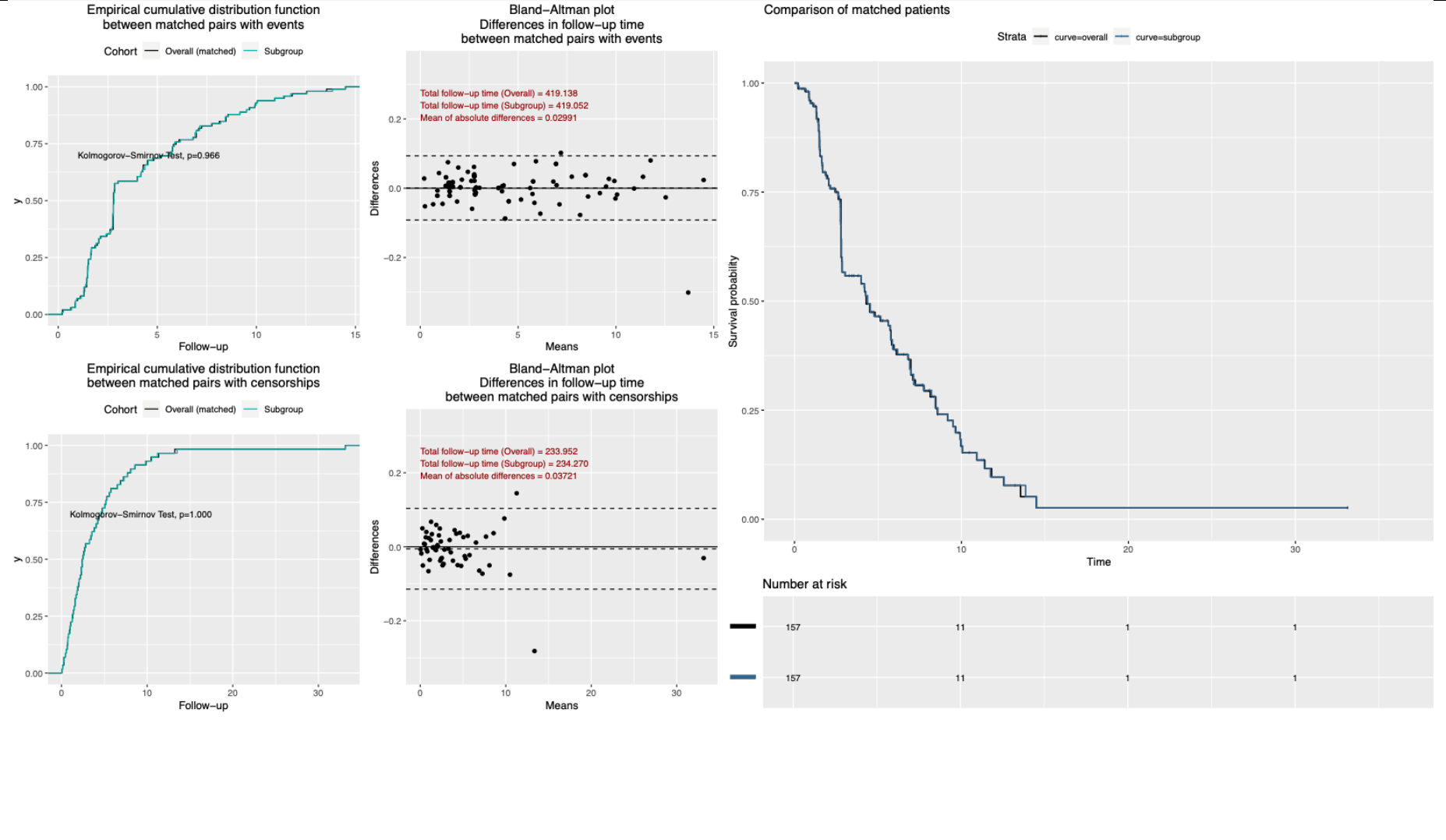
Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs



# CM648 PFS TPS $\geq 1\%$ (Chemo)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

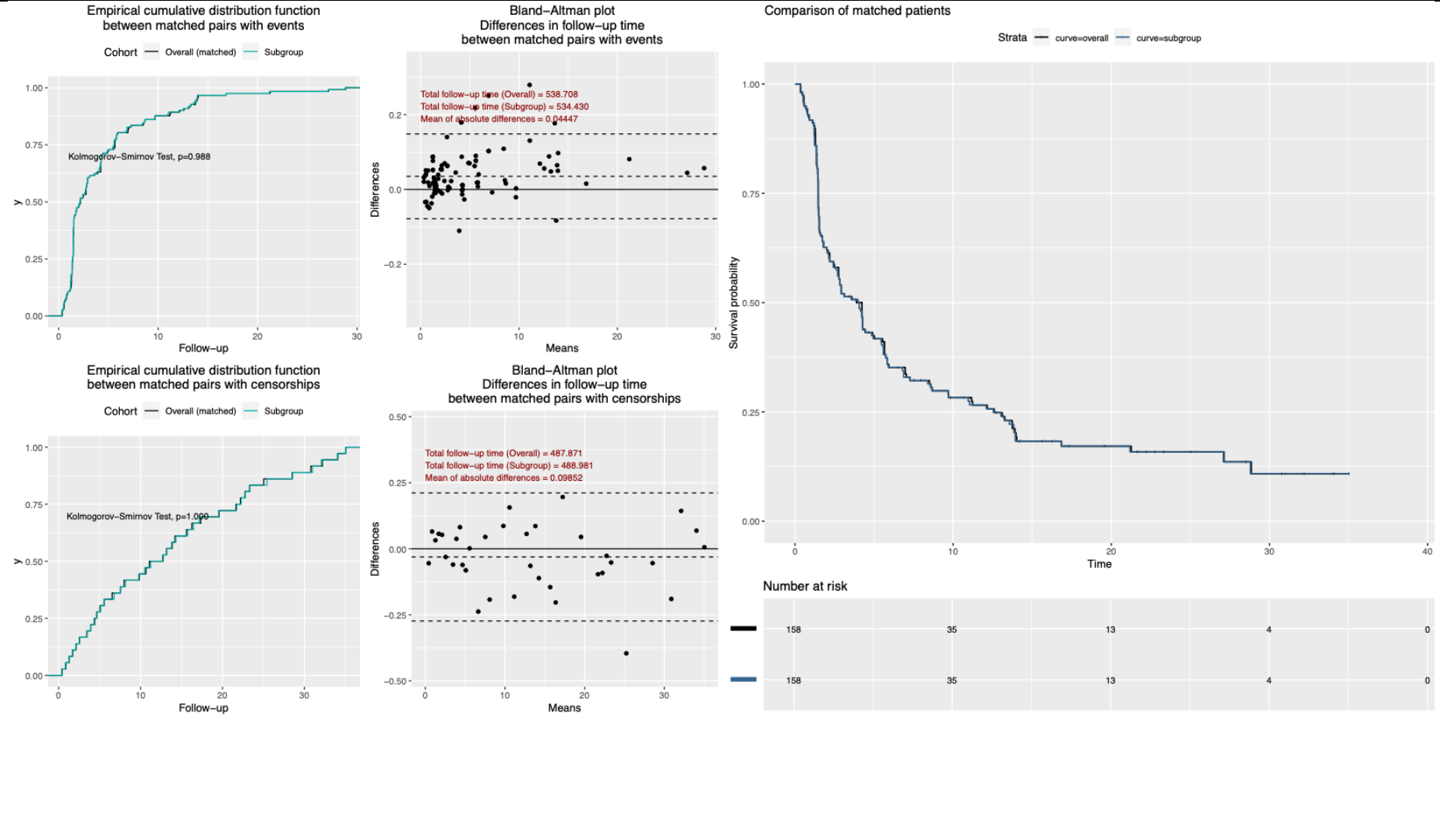
Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs



# CM648 PFS TPS $\geq 1\%$ (Nivo + Ipi)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs

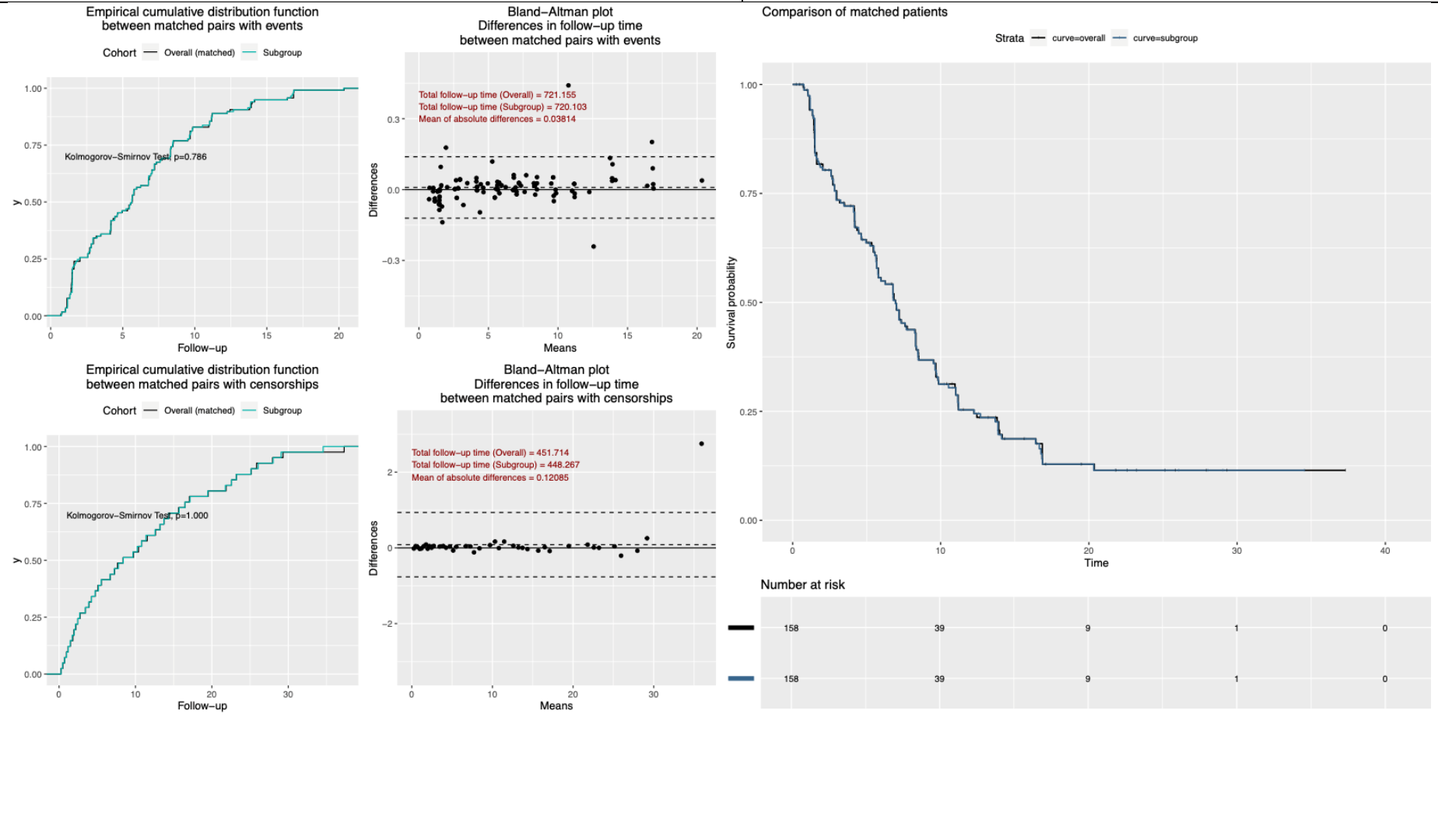




# CM648 PFS TPS $\geq 1\%$ (Nivo + Chemo)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

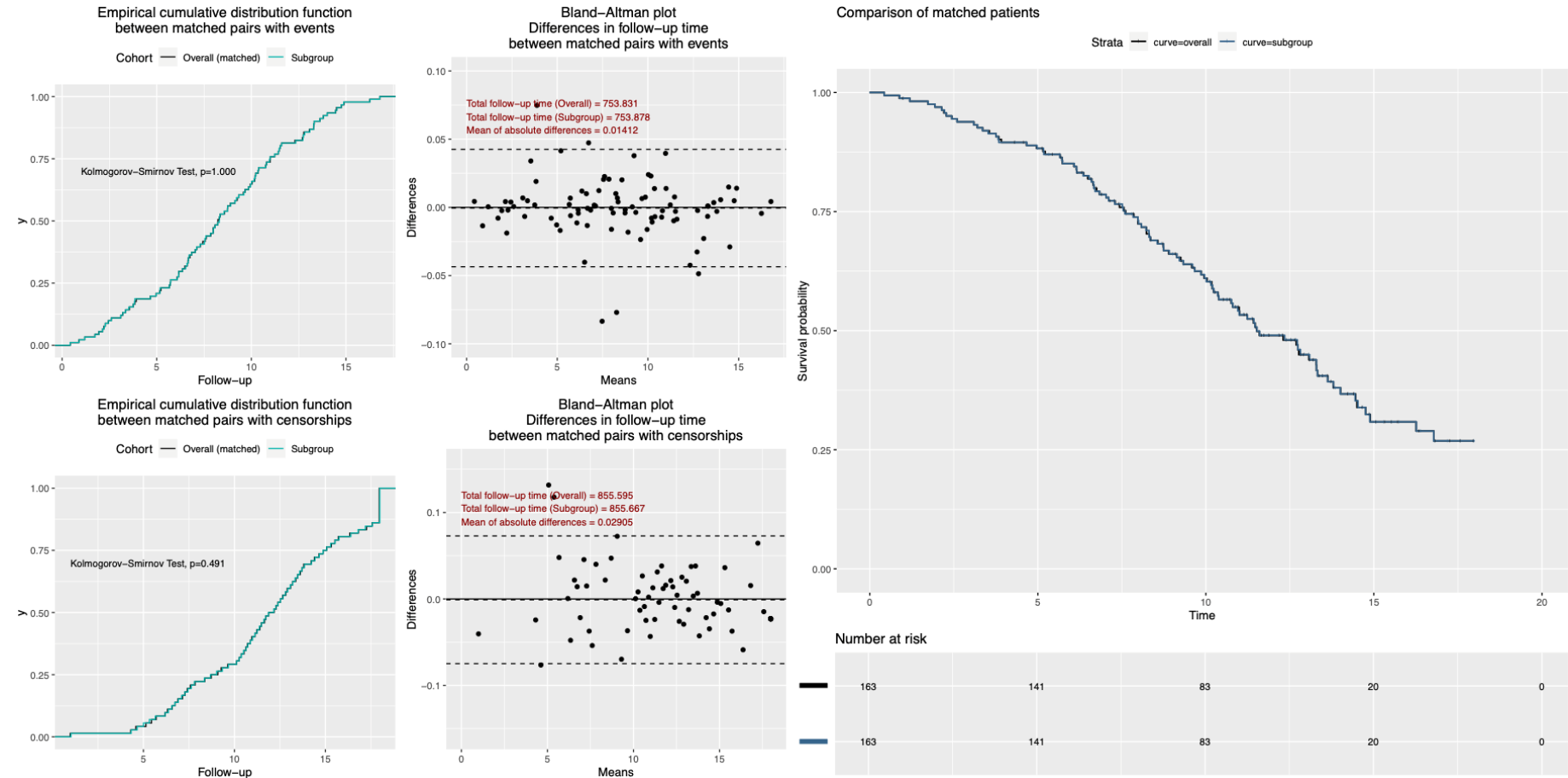
Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs



# ESCORT1st OS TPS $\geq 1\%$ (Chemo)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

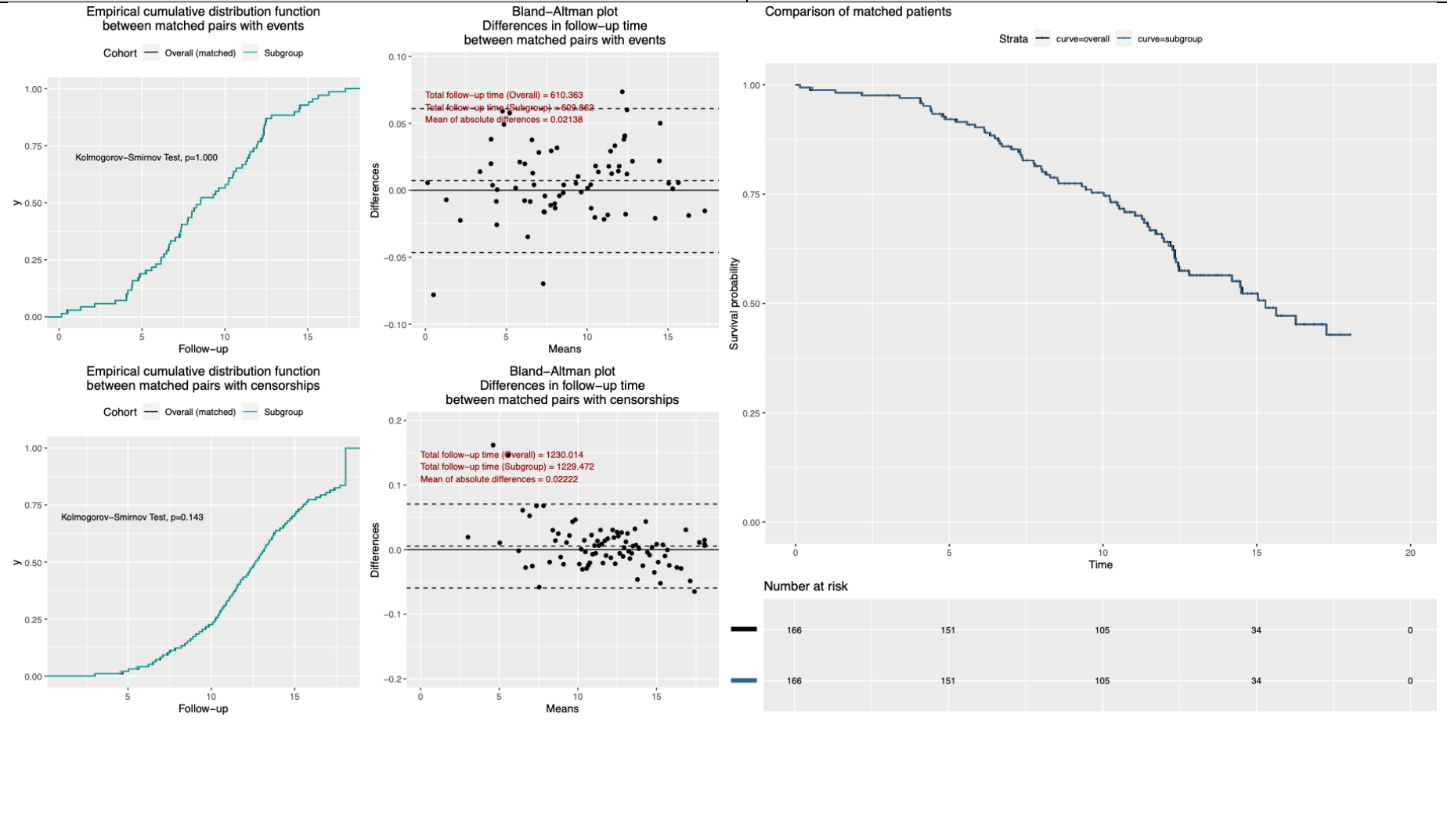
Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs



# ESCORT1st OS TPS $\geq 1\%$ (Camre + Chemo)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

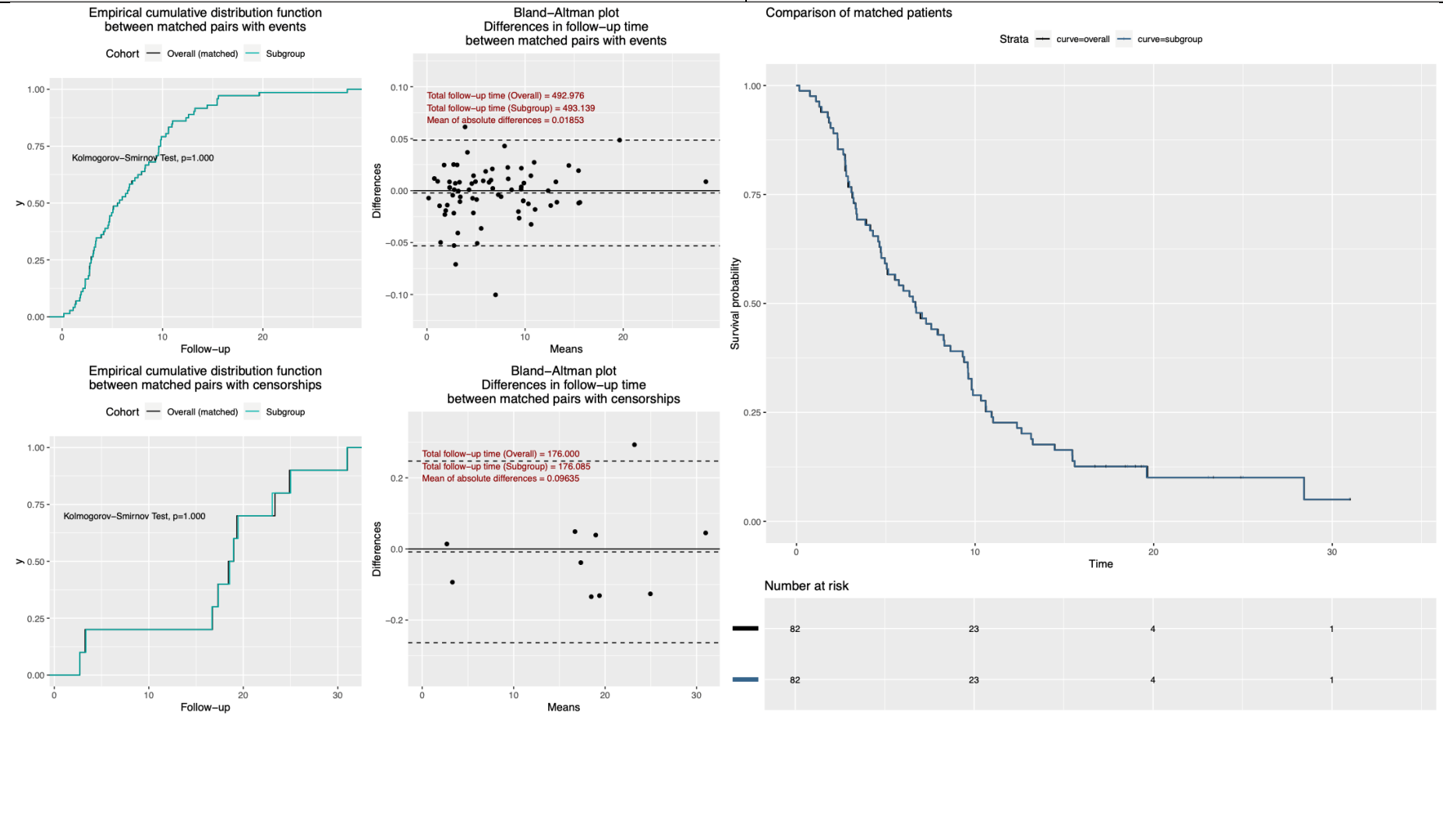
Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs



# KN181 OS CPS $\geq 10\%$ (Chemo)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

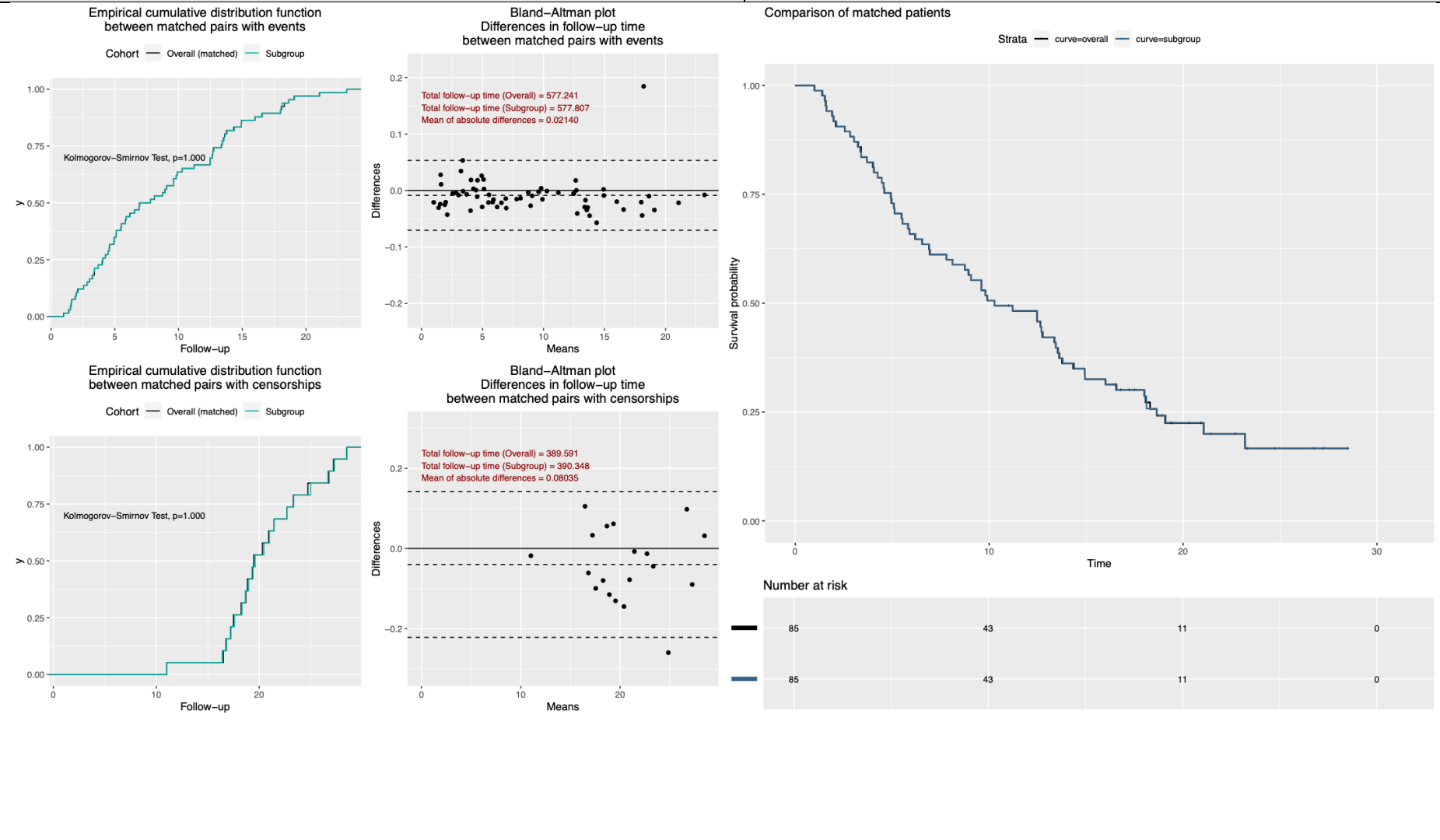
Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs



# KN181 OS CPS $\geq 10\%$ (Pembro)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

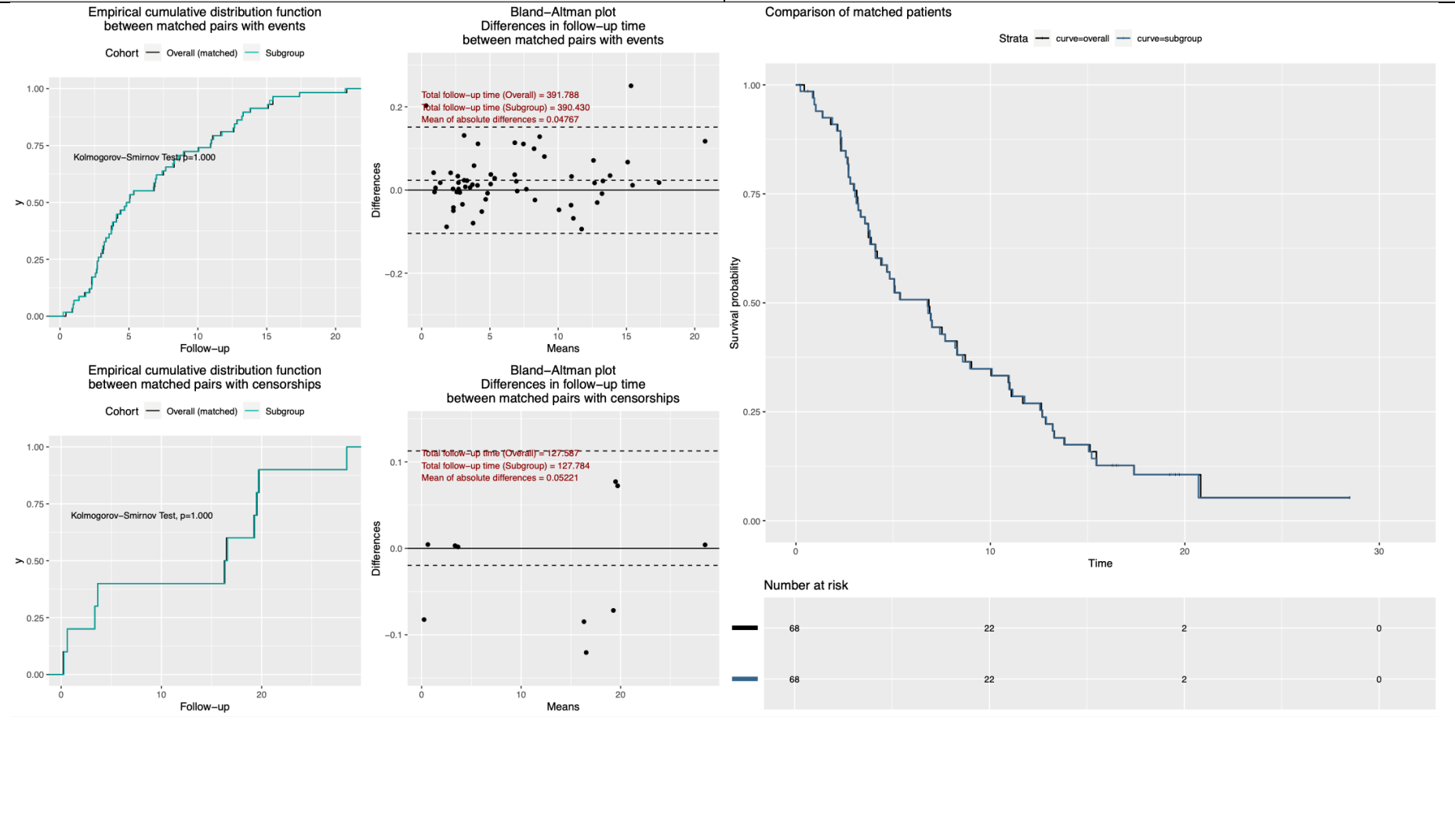
Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs



# RATIONALE302 OS TAP $\geq 10\%$ (Chemo)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

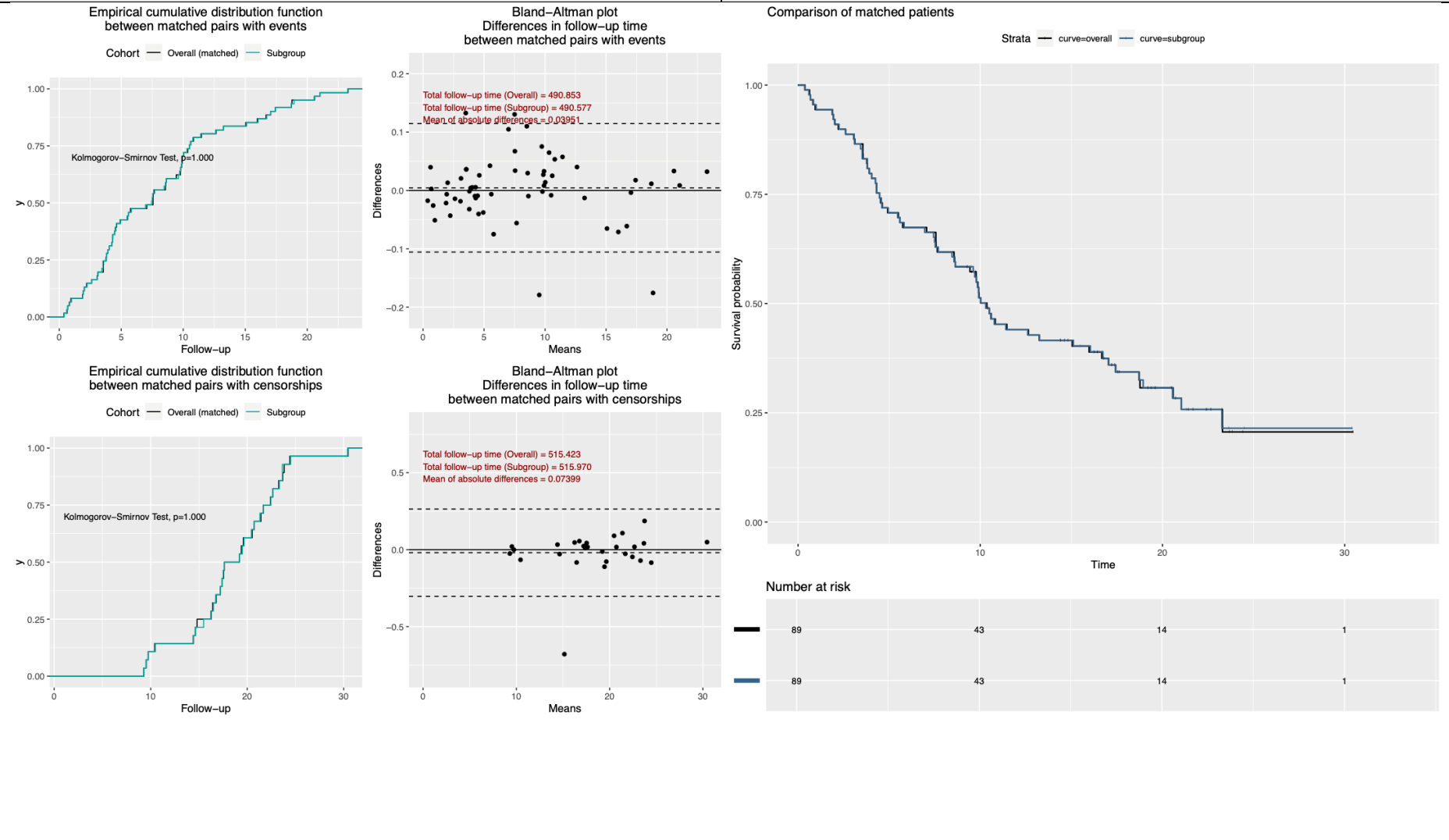
Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs



# RATIONALE302 OS TAP $\geq 10\%$ (Tisle)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

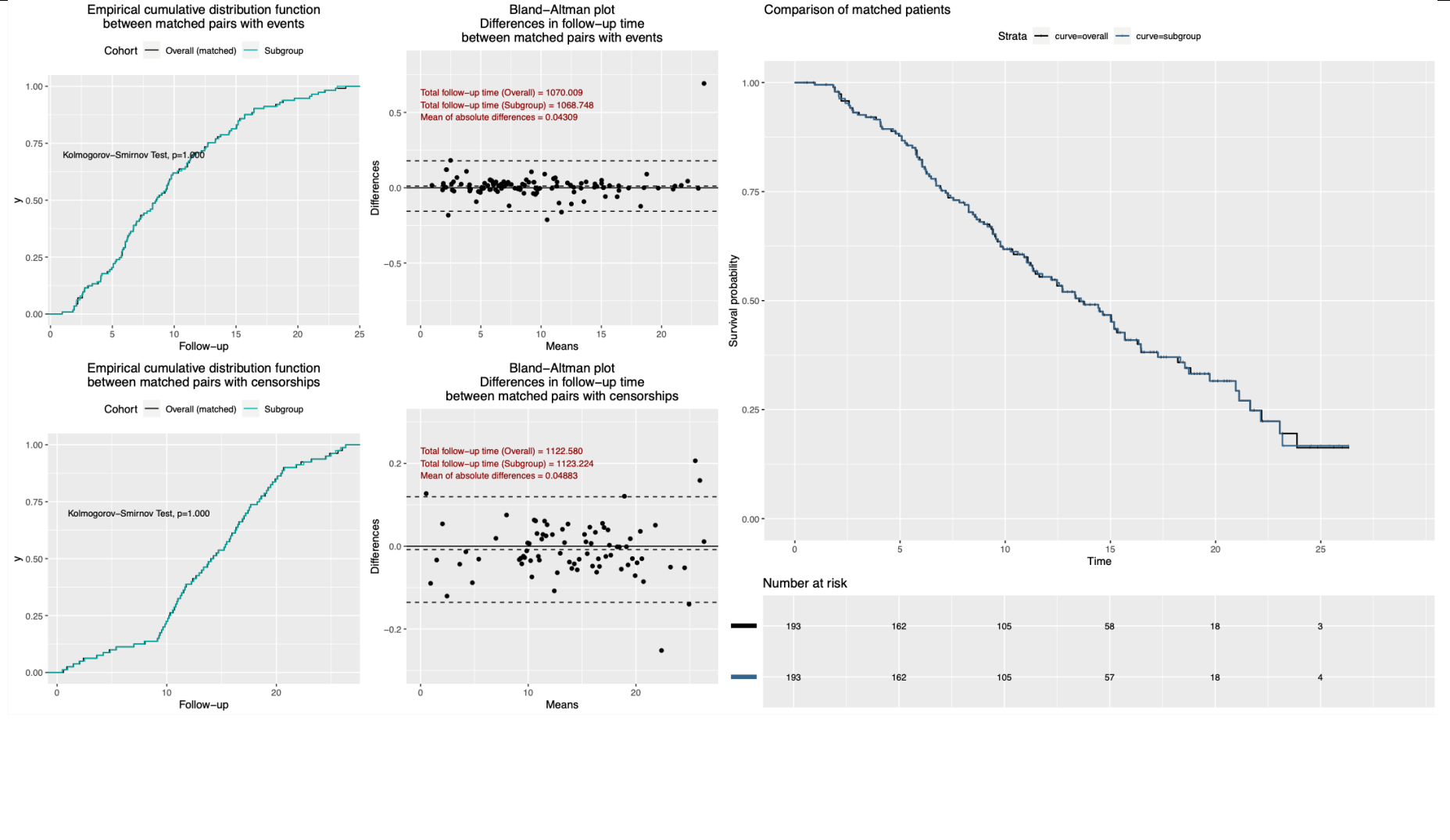
Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs



# ORIENT15 OS CPS $\geq 10\%$ (Chemo)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs

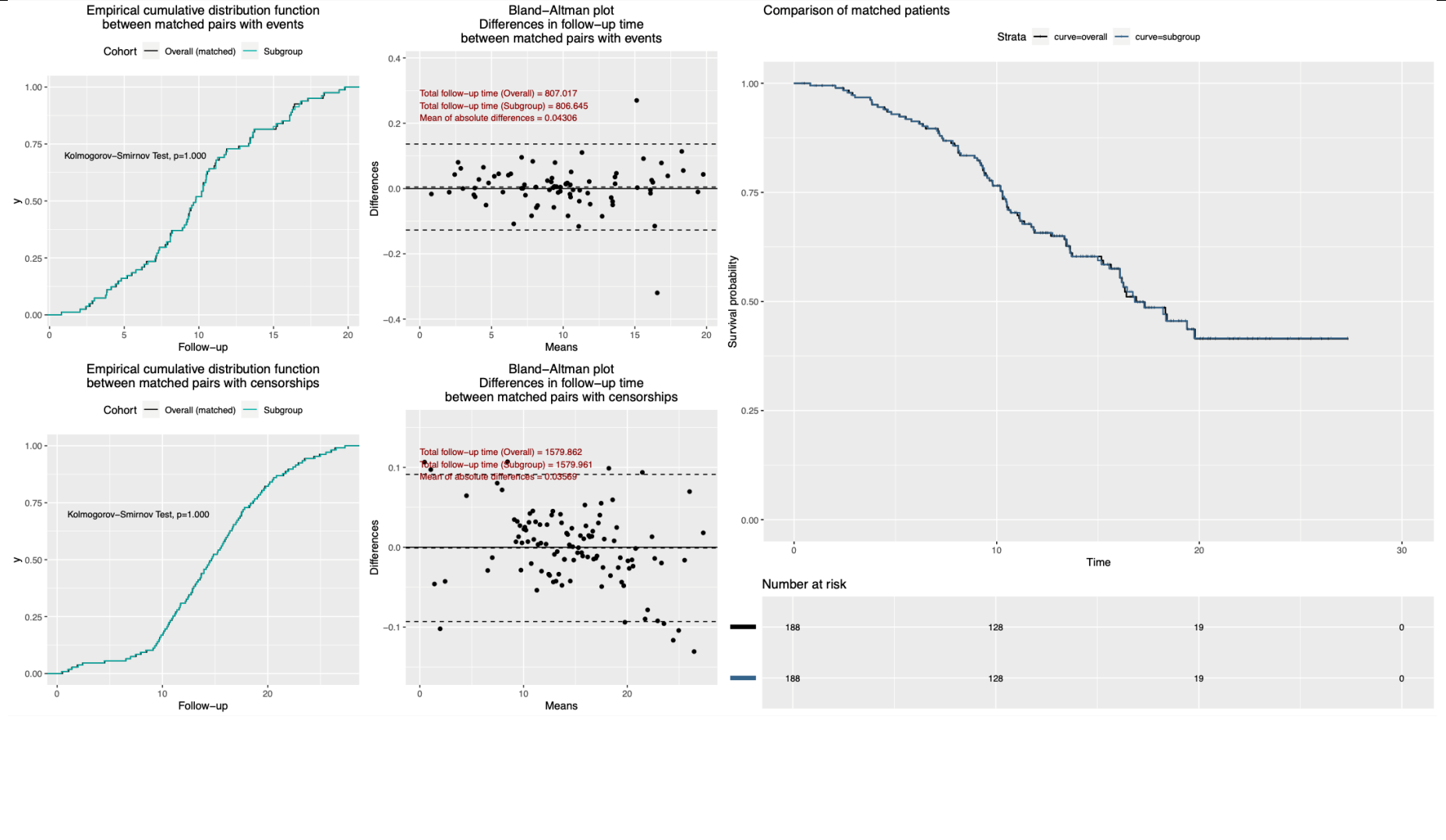




# ORIENT15 OS CPS $\geq 10\%$ (Sinti + Chemo)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

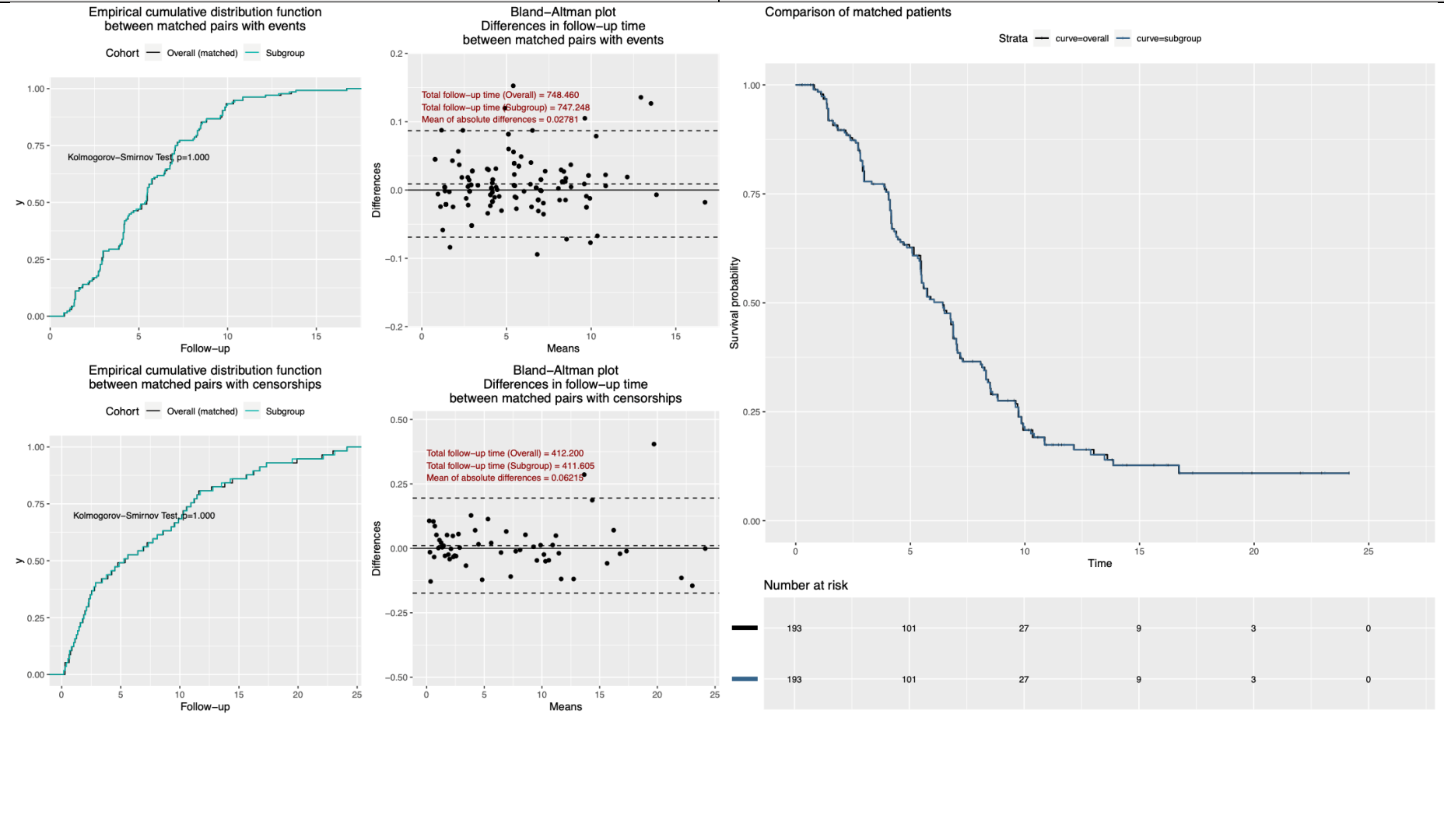
Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs



# ORIENT15 PFS CPS $\geq 10\%$ (Chemo)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

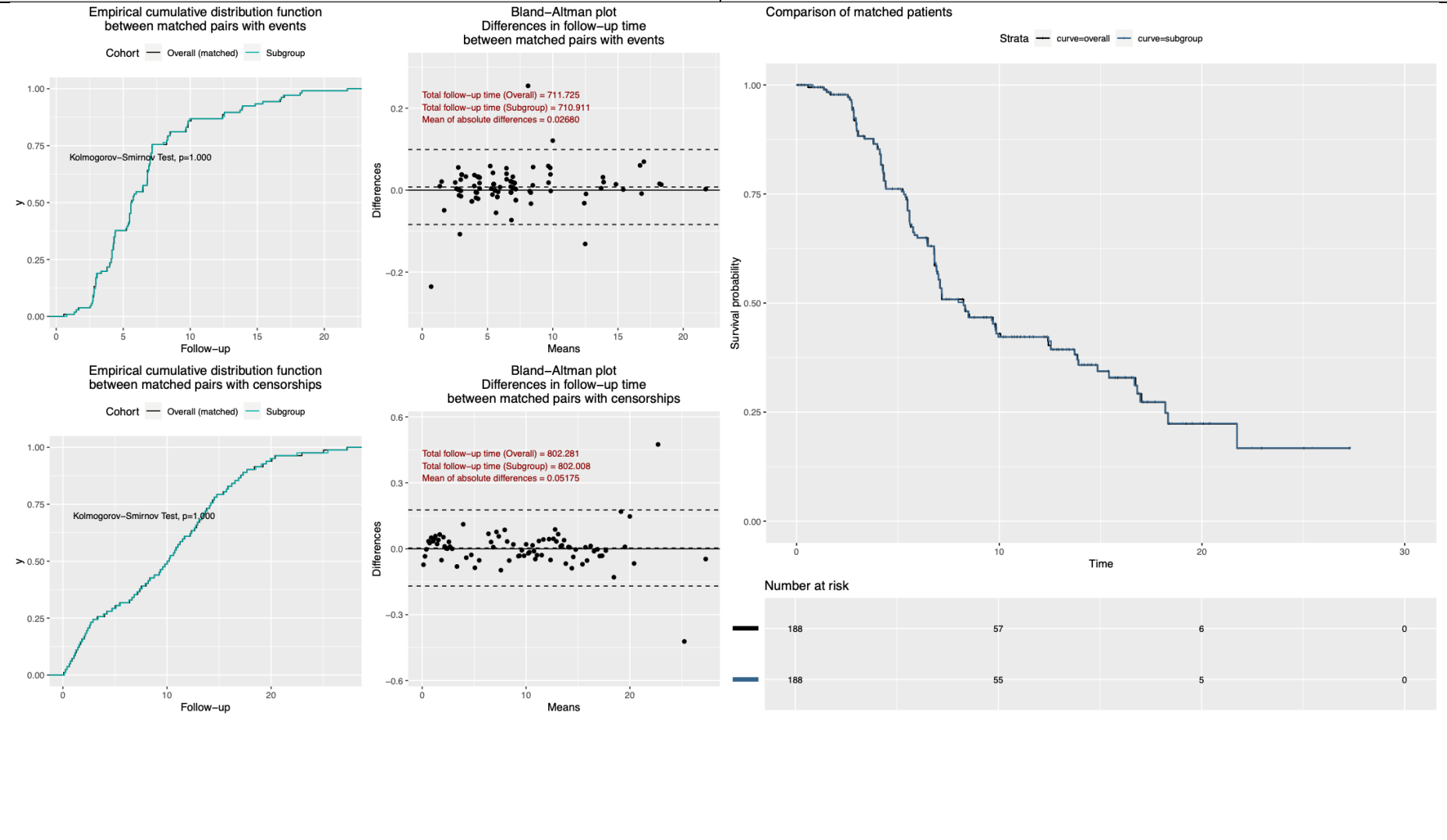
Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs



# ORIENT15 PFS CPS $\geq 10\%$ (Sinti + Chemo)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

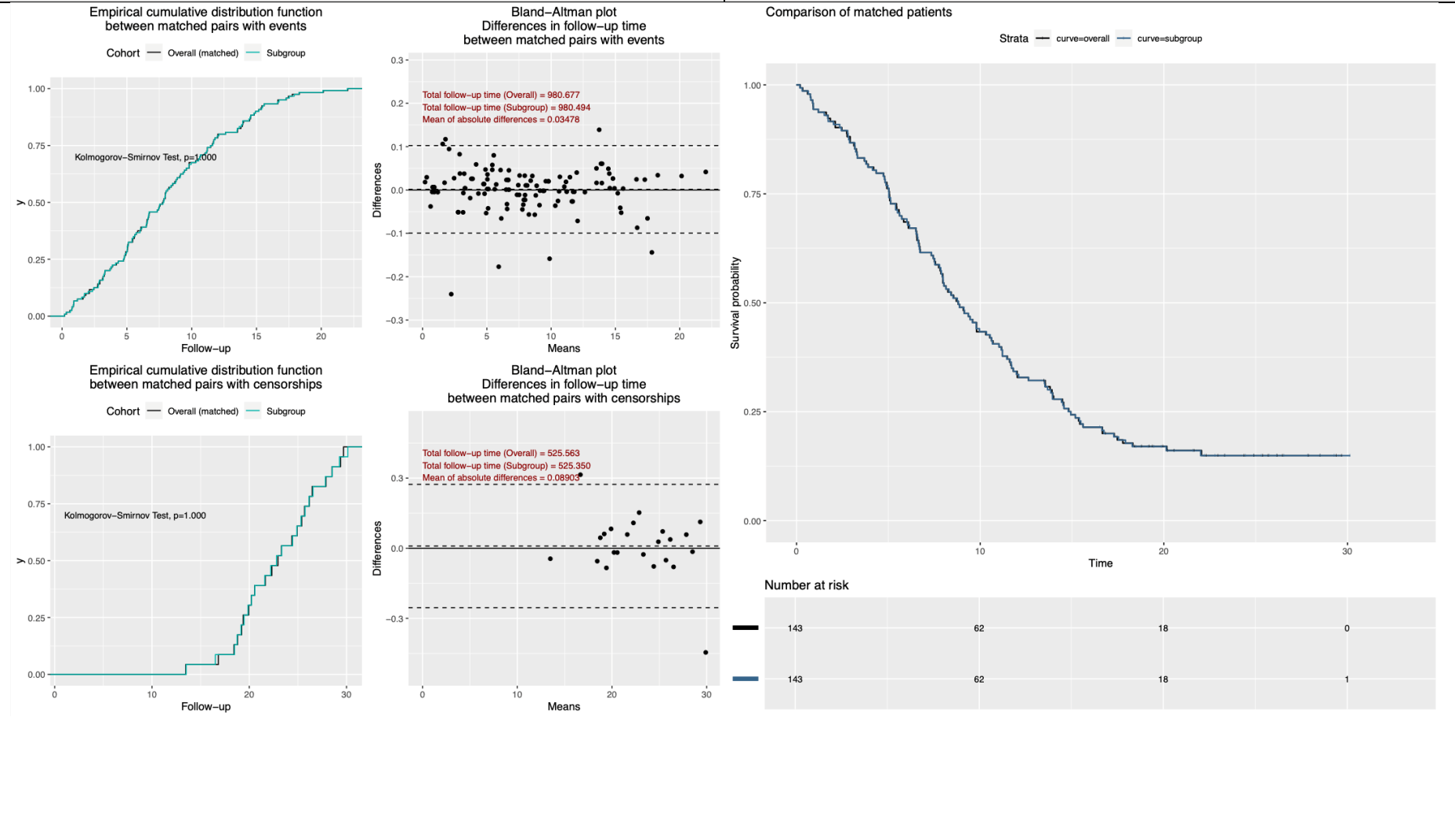
Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs



# KN590 OS CPS $\geq 10\%$ (Chemo)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

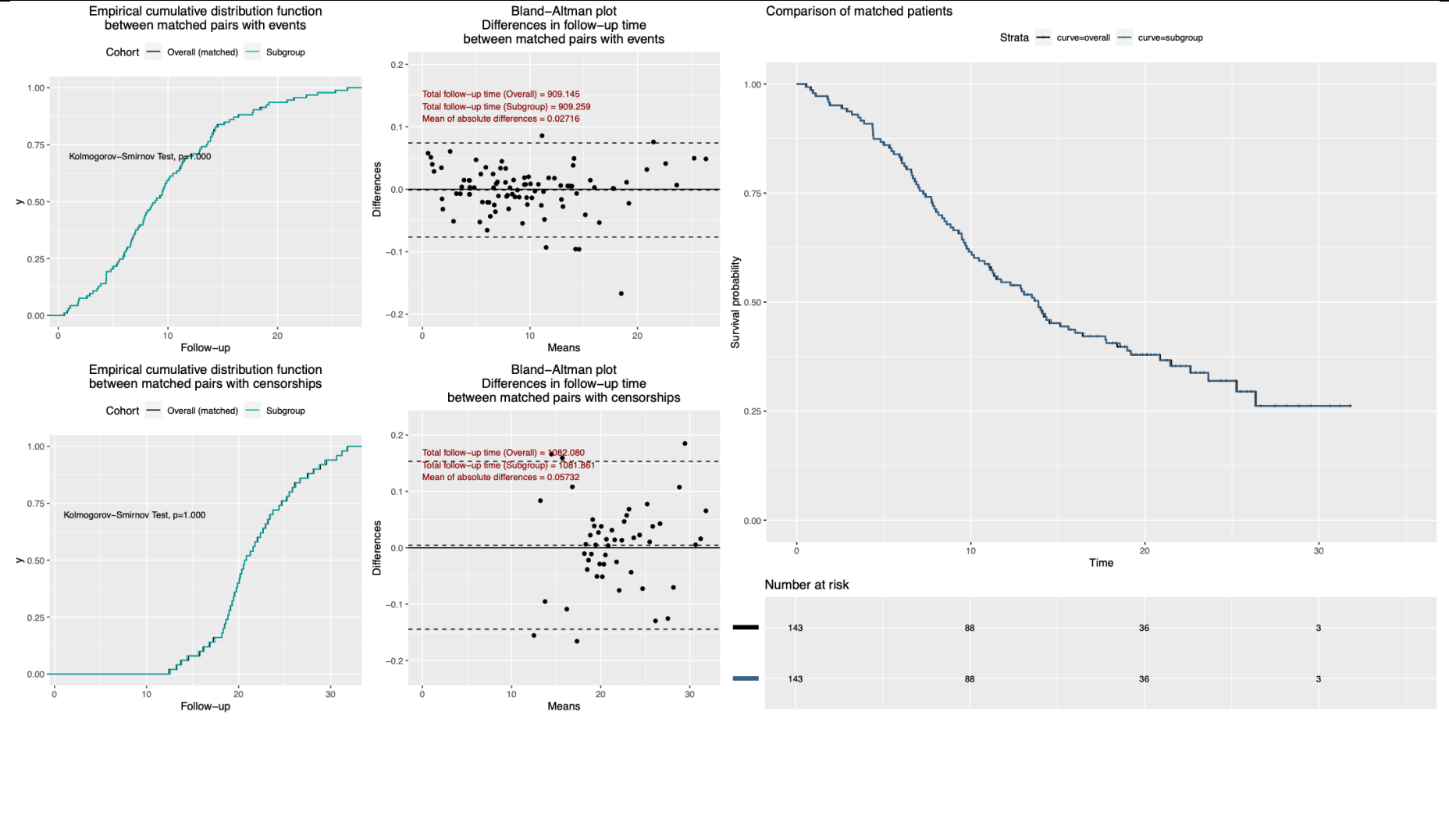
Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs



# KN590 OS CPS $\geq 10\%$ (Pembro + Chemo)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

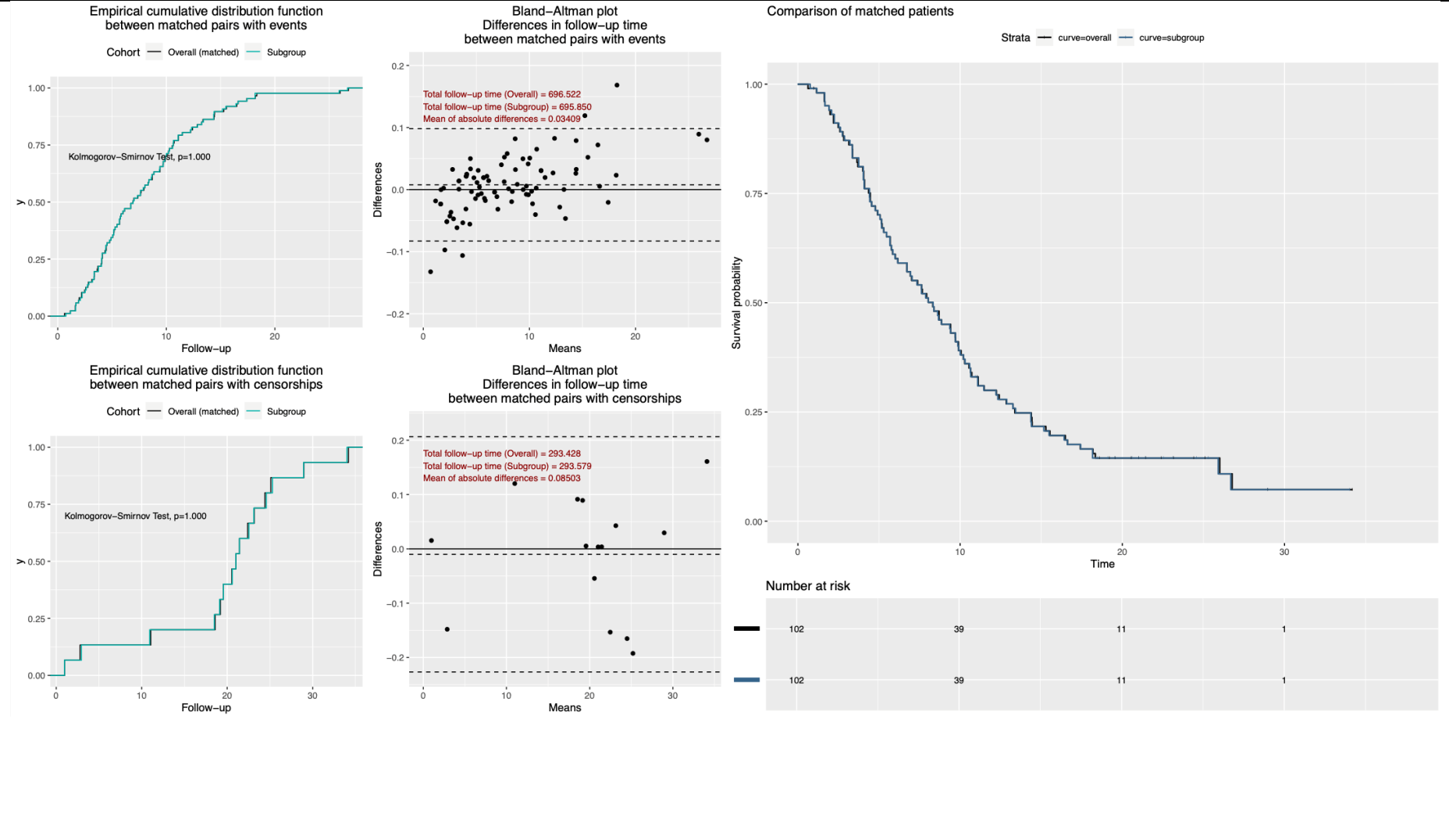
Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs



# ATTRACTION3 OS TPS $\geq 1\%$ (Chemo)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

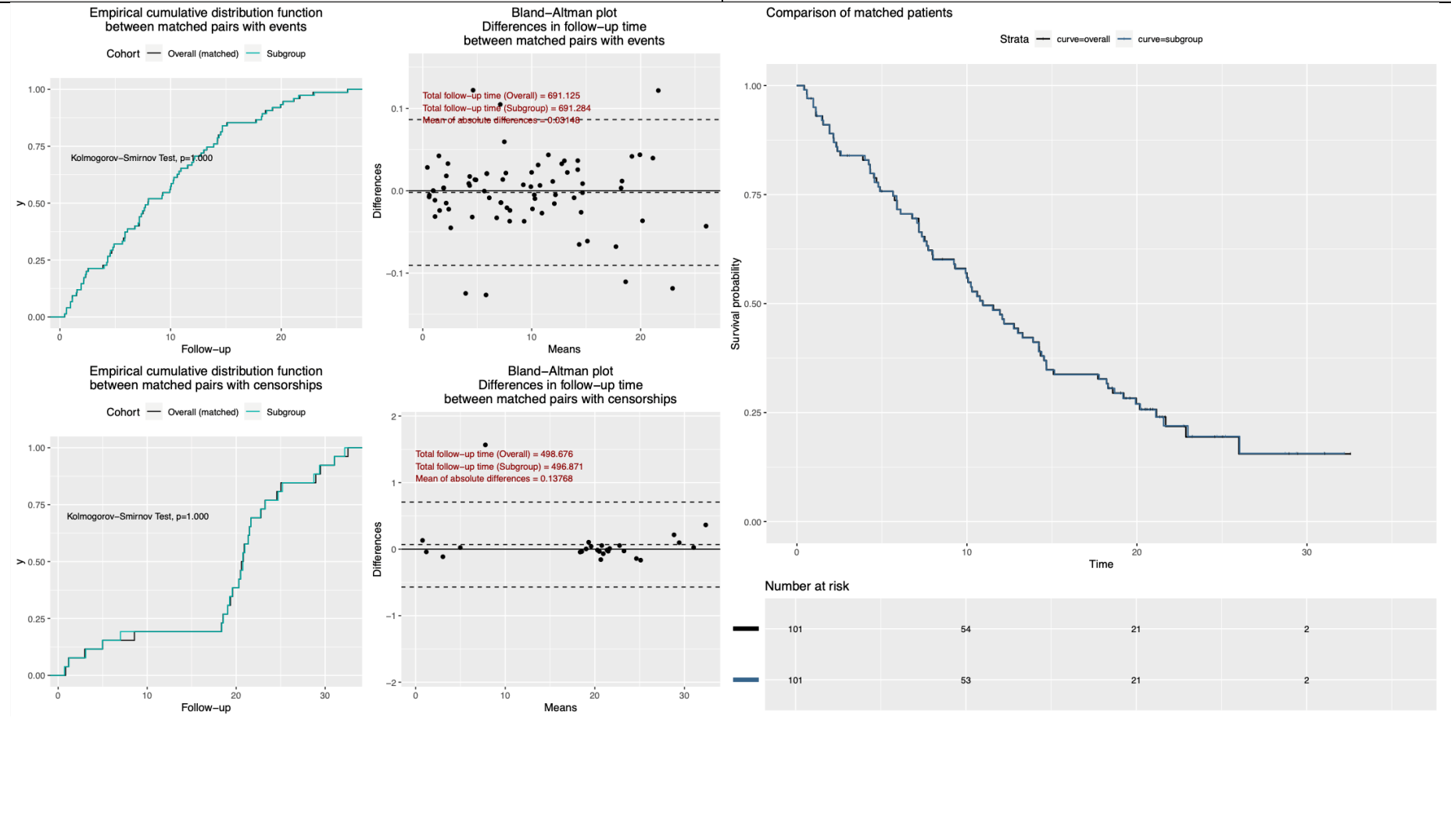
Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs



# ATTRACTION3 OS TPS $\geq 1\%$ (Nivo)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

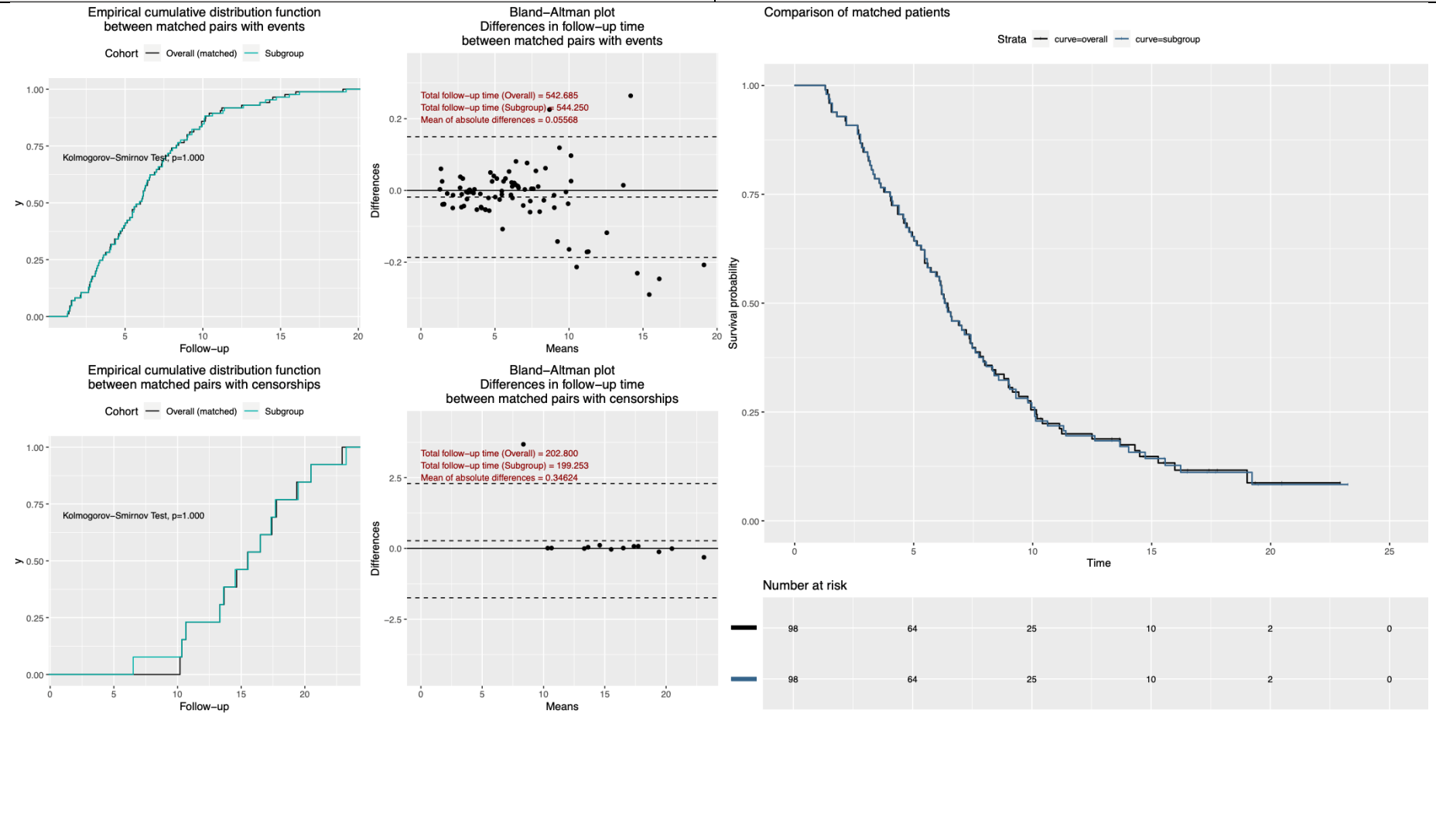
Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs



# ESCORT OS TPS $\geq 1\%$ (Chemo)

Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs

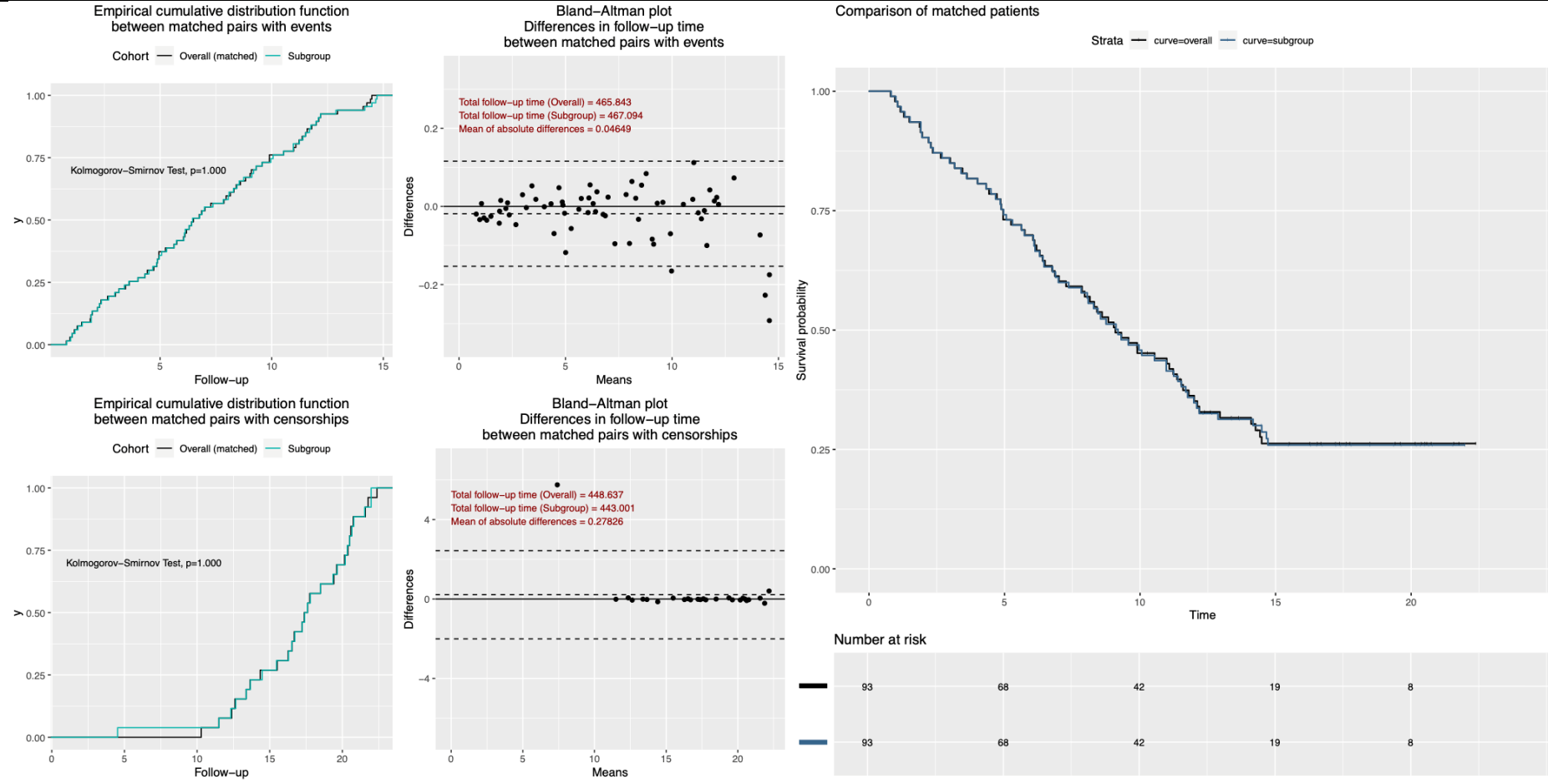




# ESCORT OS TPS $\geq 1\%$ (Camre)

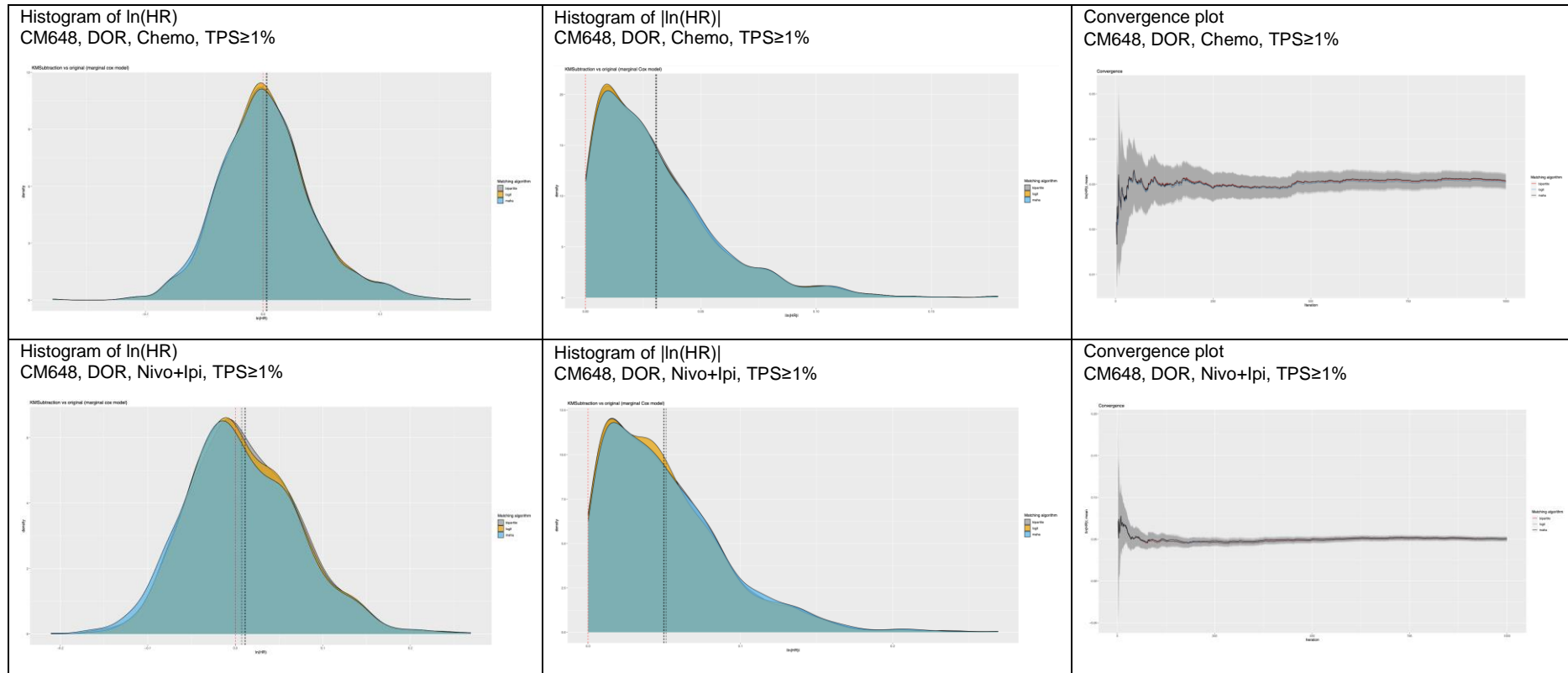
Empirical cumulative distribution between follow-up time of matched pairs and Bland-Altman plots to explore discrepancies between matched pairs

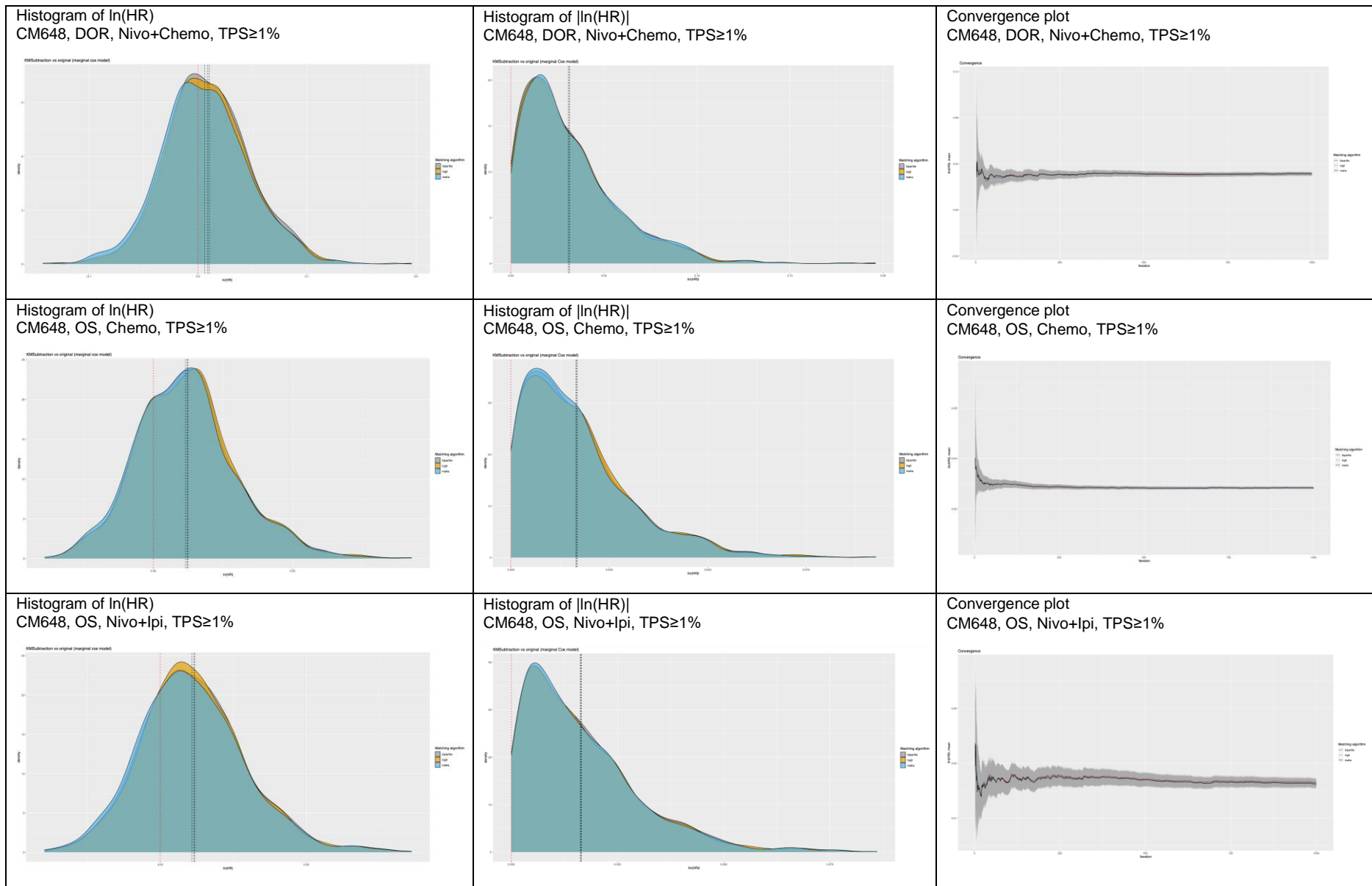
Kaplan Meier Curves and Cox-proportional hazard's model comparing matched pairs

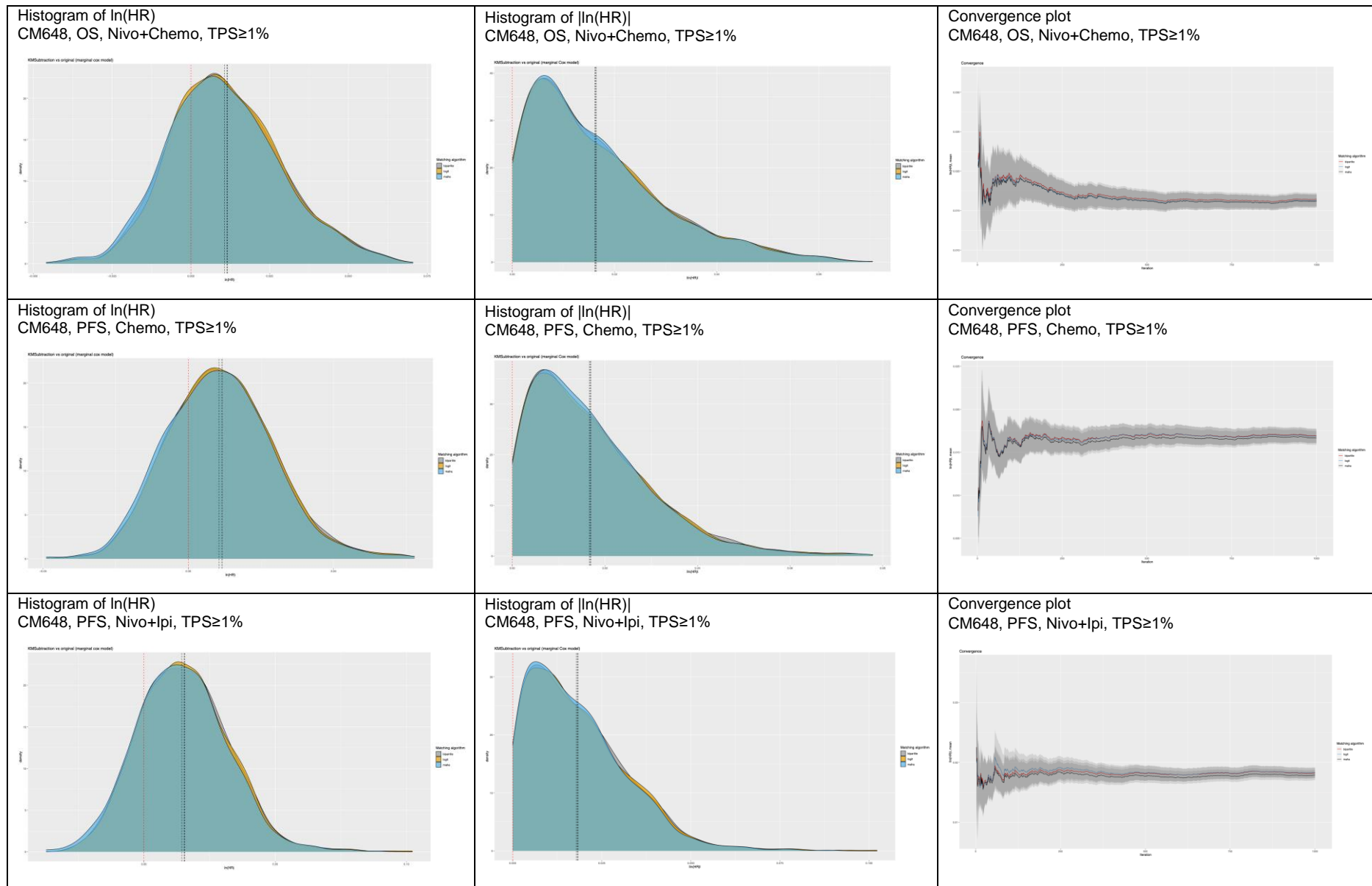


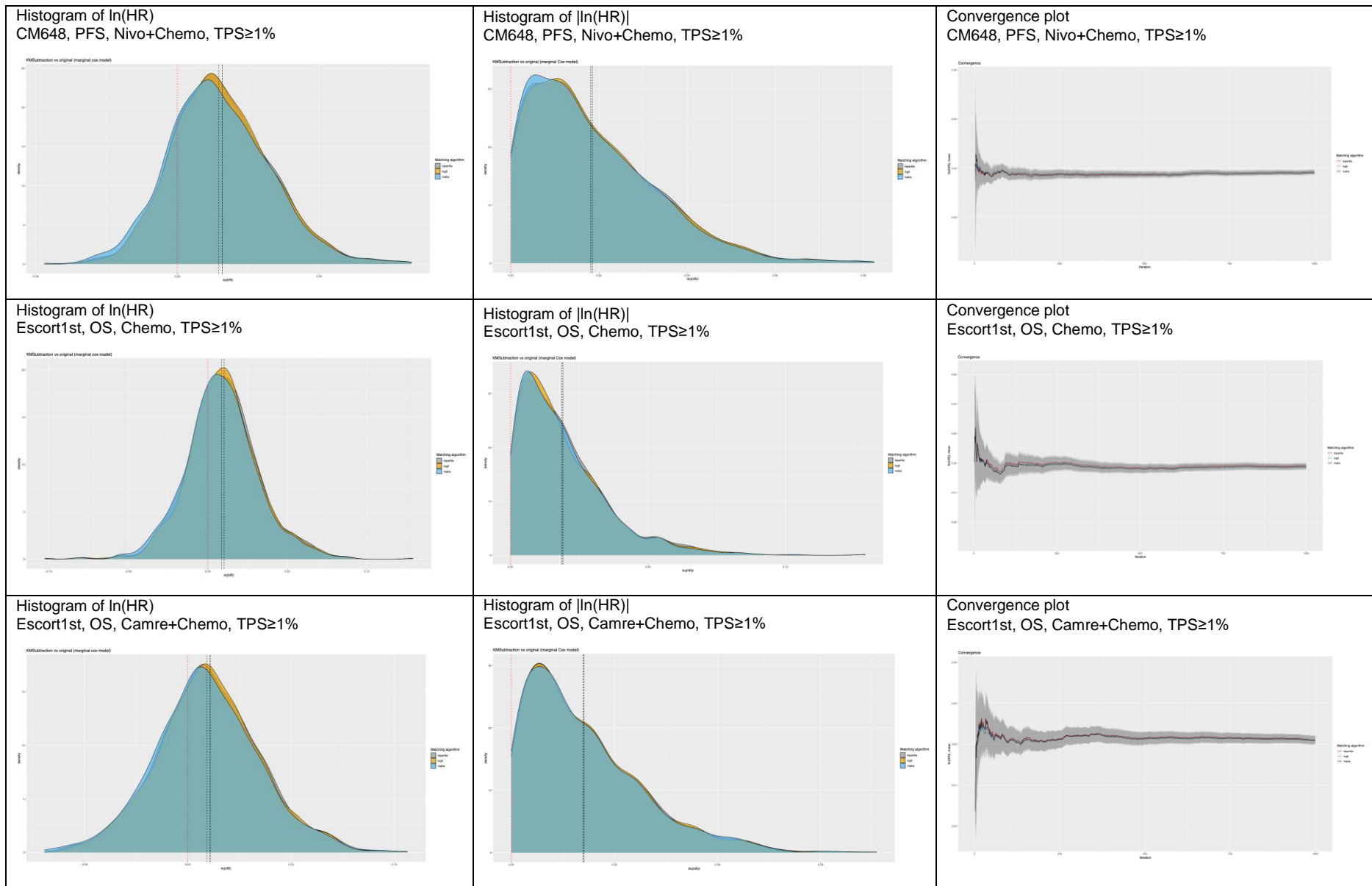
Abbreviations: Nivo, nivolumab; Ipi, ipilimumab; Camre, camrelizumab; Pembro, pembrolizumab; Sinti, sintilimab; Tisle, Tislelizumab; Chemo, chemotherapy; CPS, combined positive score; TPS, tumor proportion score; TAP, tumor area positivity; CM648, CheckMate 648; KN590, KEYNOTE-590; KN181, KEYNOTE-181.

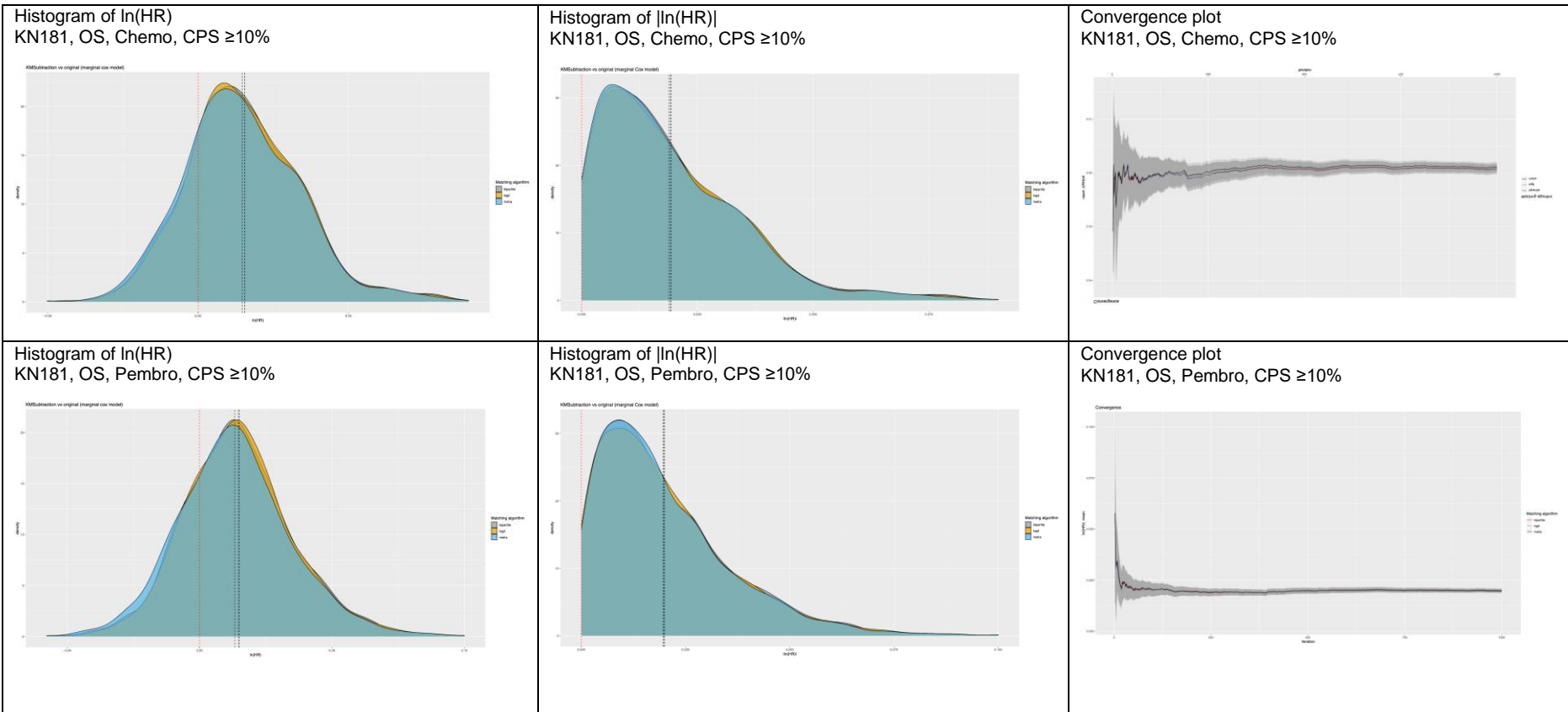
**eFigure 6. Convergence Plots and Histograms of Simulations**

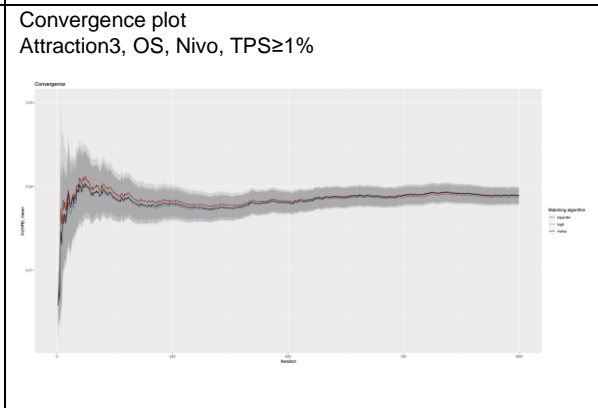
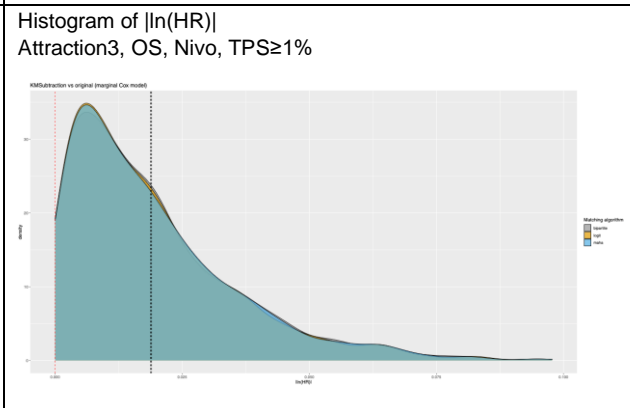
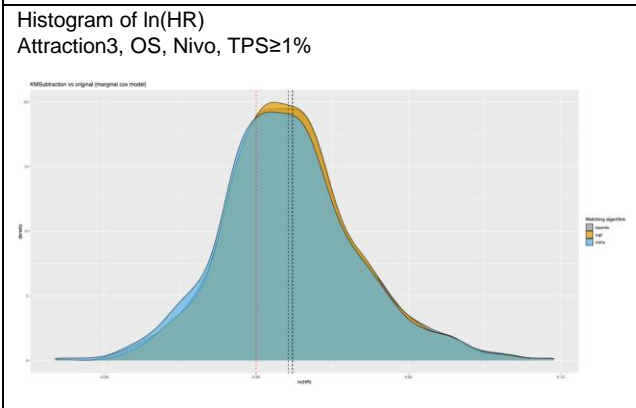
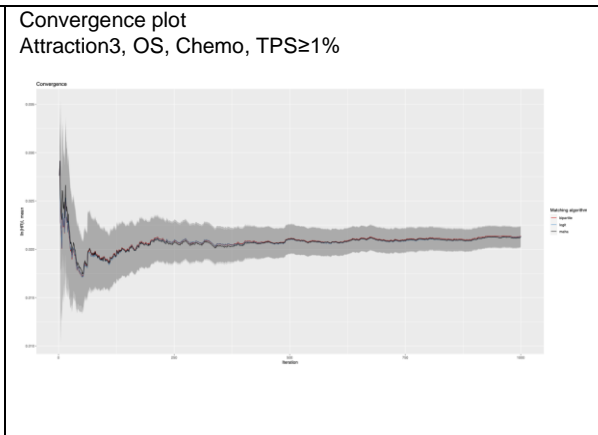
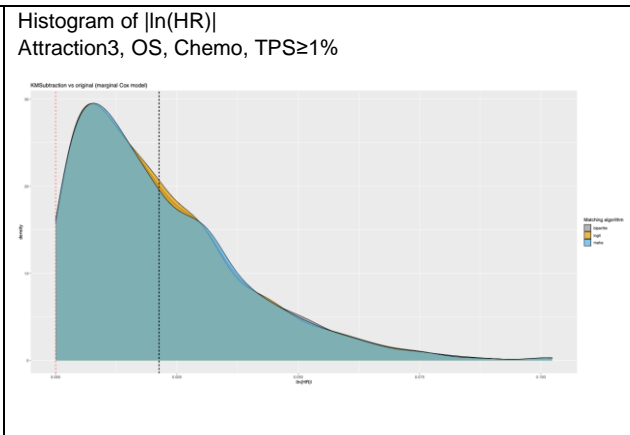
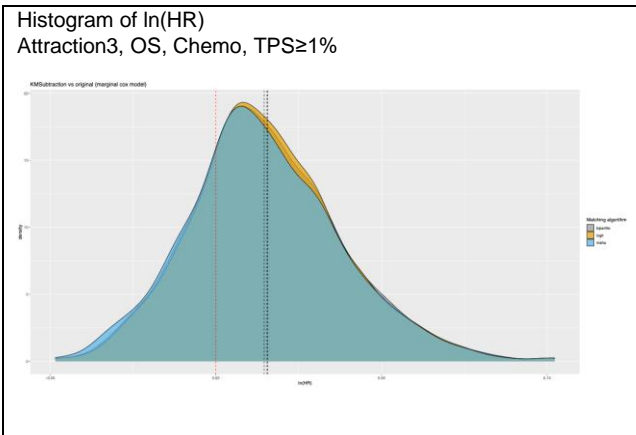


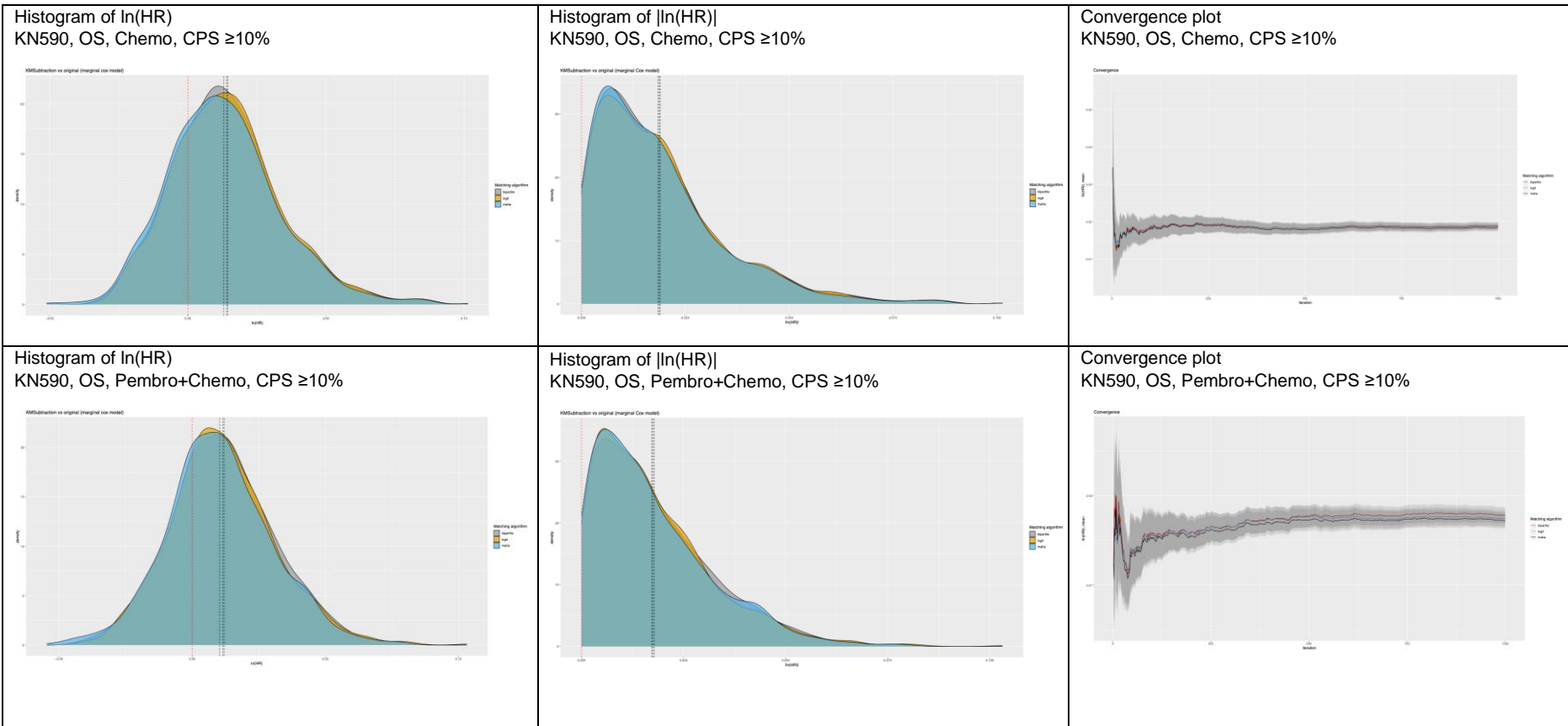






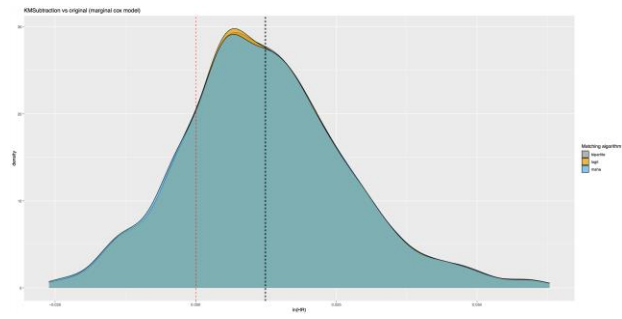




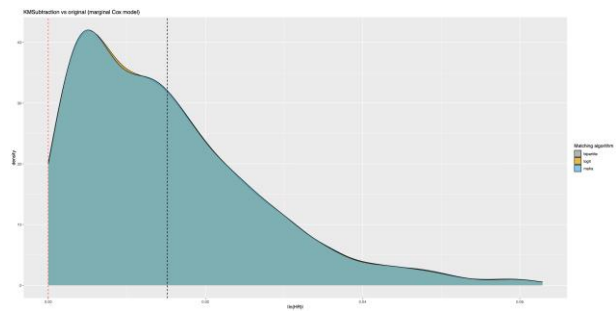




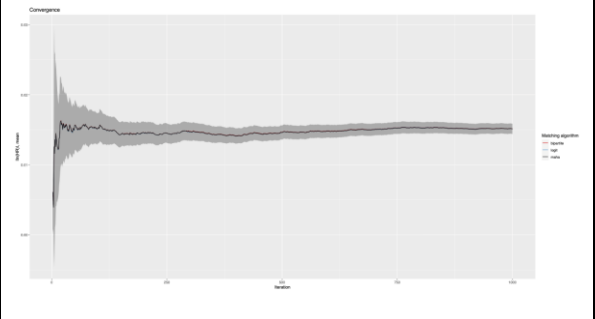
Histogram of  $\ln(\text{HR})$   
 RATIONALE302, OS, Chemo, TAP  $\geq 10\%$



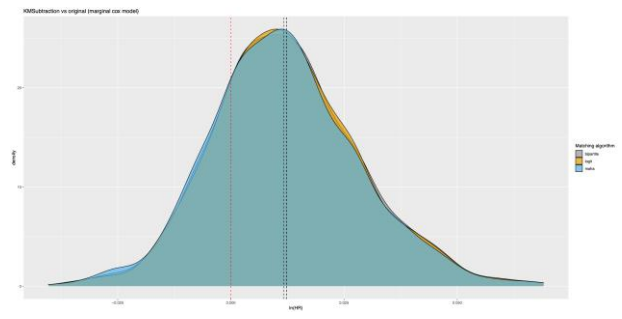
Histogram of  $|\ln(\text{HR})|$   
 RATIONALE302, OS, Chemo, TAP  $\geq 10\%$



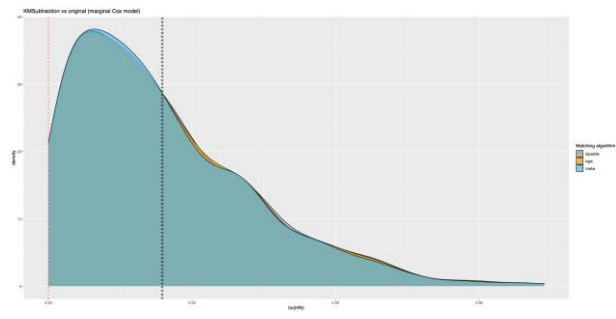
Convergence plot  
 RATIONALE302, OS, Chemo, TAP  $\geq 10\%$



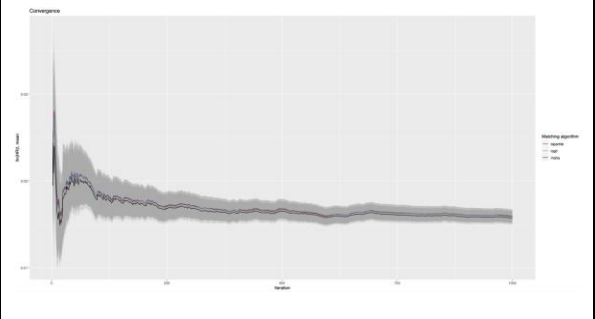
Histogram of  $\ln(\text{HR})$   
 RATIONALE302, OS, Tisle, TAP  $\geq 10\%$

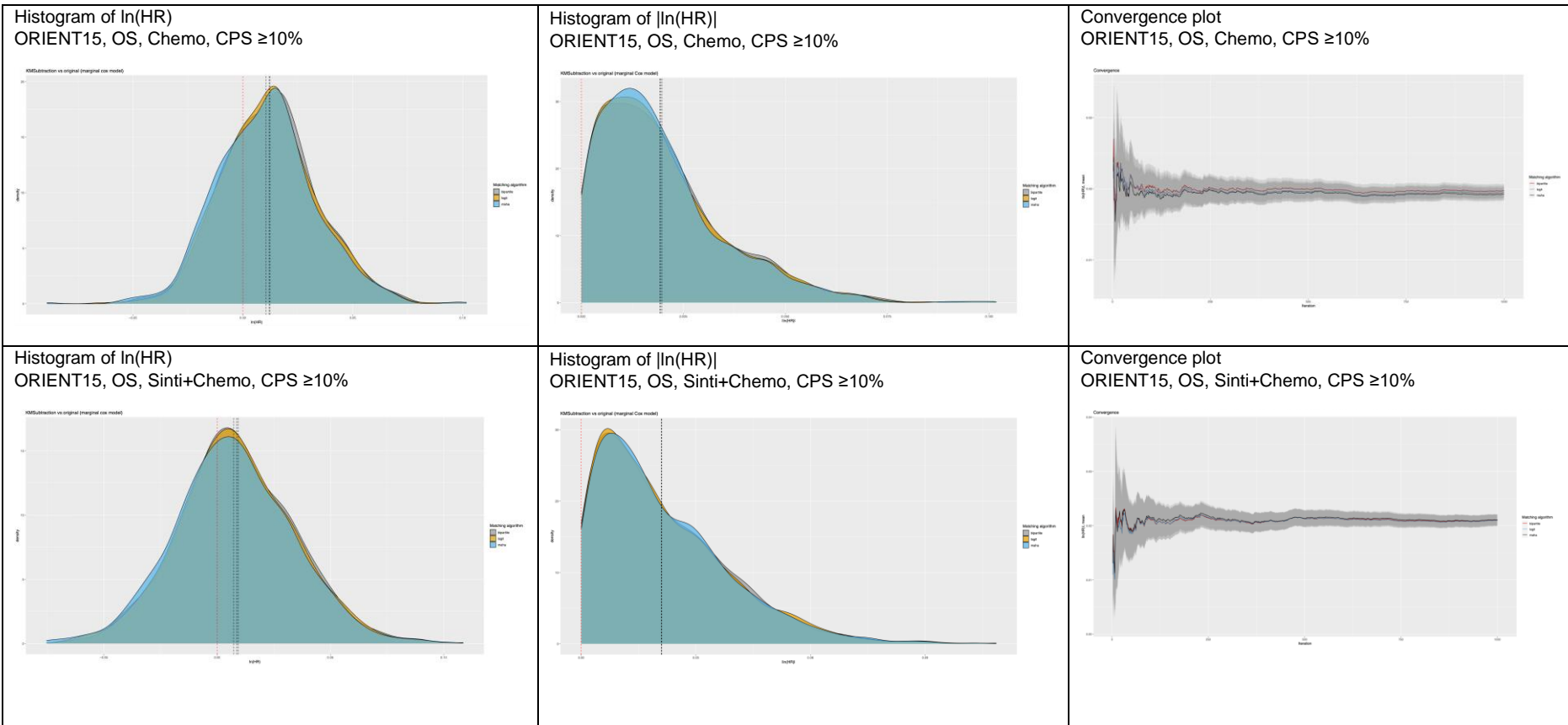


Histogram of  $|\ln(\text{HR})|$   
 RATIONALE302, OS, Tisle, TAP  $\geq 10\%$

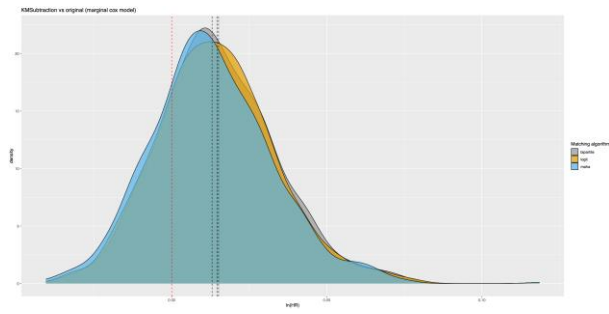


Convergence plot  
 RATIONALE302, OS, Tisle, TAP  $\geq 10\%$

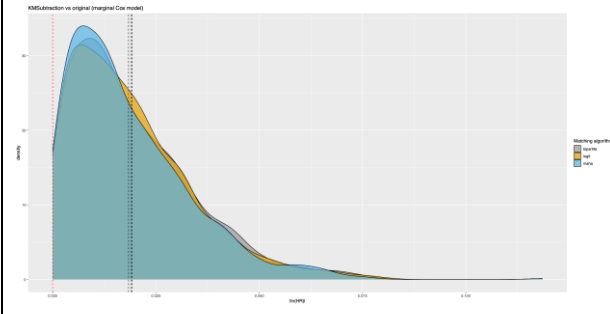




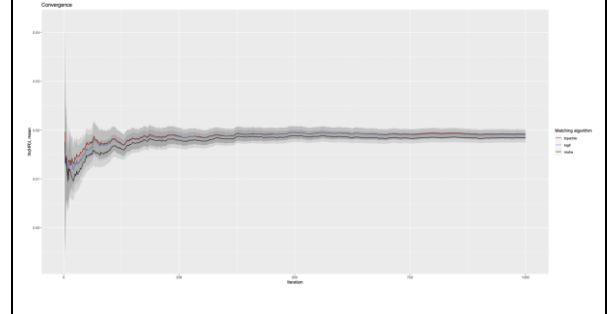
Histogram of  $\ln(\text{HR})$   
ORIENT15, PFS, Chemo, CPS  $\geq 10\%$



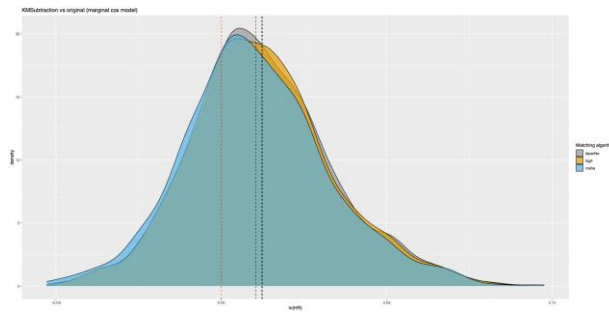
Histogram of  $|\ln(\text{HR})|$   
ORIENT15, PFS, Chemo, CPS  $\geq 10\%$



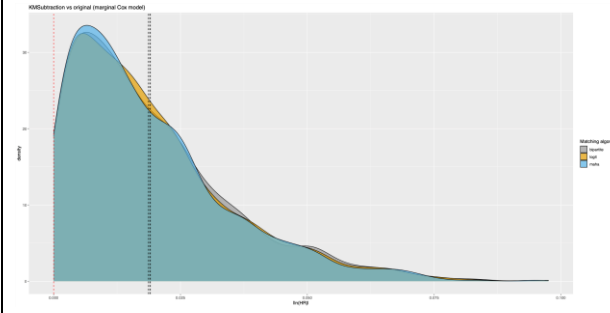
Convergence plot  
ORIENT15, PFS, Chemo, CPS  $\geq 10\%$



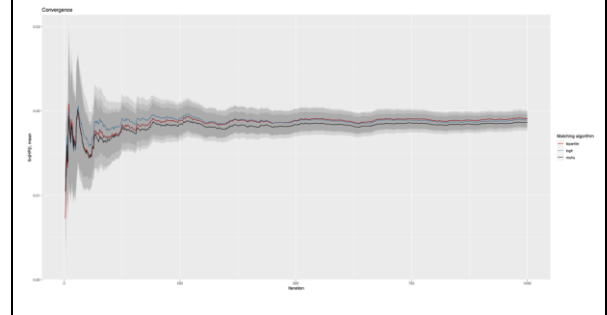
Histogram of  $\ln(\text{HR})$   
ORIENT15, PFS, Sinti+Chemo, CPS  $\geq 10\%$

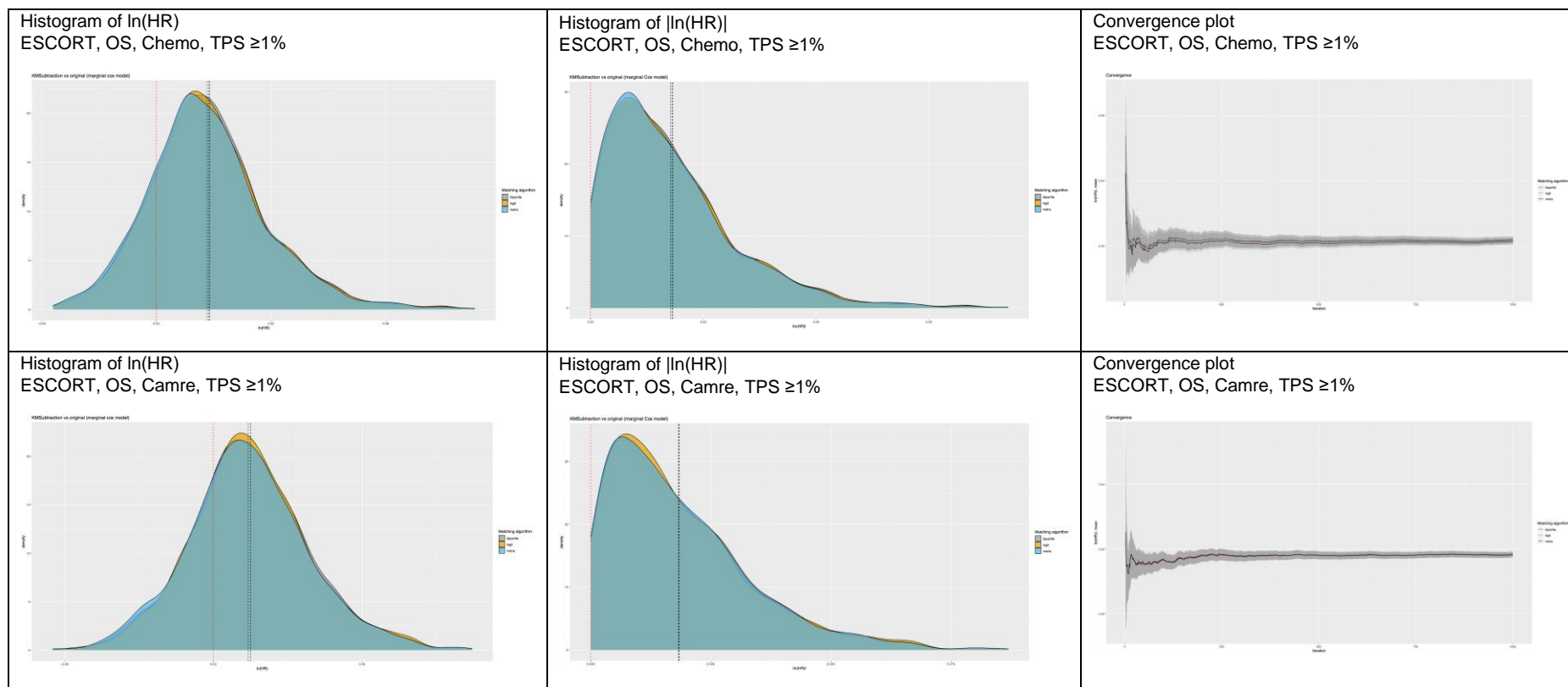


Histogram of  $|\ln(\text{HR})|$   
ORIENT15, PFS, Sinti+Chemo, CPS  $\geq 10\%$



Convergence plot  
ORIENT15, PFS, Sinti+Chemo, CPS  $\geq 10\%$

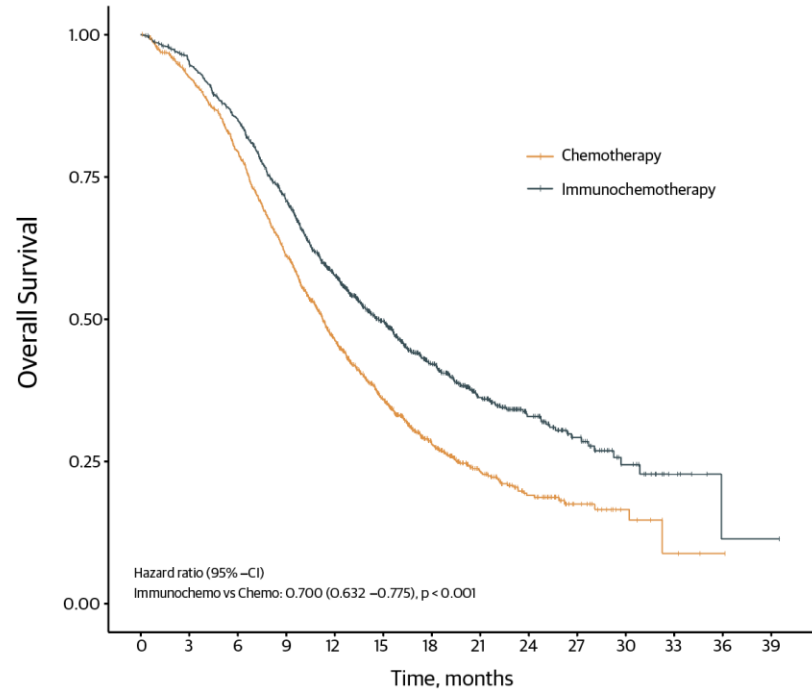




Convergence and histograms of simulations conducted for **eFigure 5** is demonstrated here. Abbreviations: Nivo, nivolumab; Ipi, ipilimumab; Camre, camrelizumab; Pembro, pembrolizumab; Sinti, sintilimab; Tisle, Tislelizumab; Chemo, chemotherapy; CPS, combined positive score; TPS, tumor proportion score; TAP, tumor area positivity; CM648, CheckMate 648; KN590, KEYNOTE-590; KN181, KEYNOTE-181.

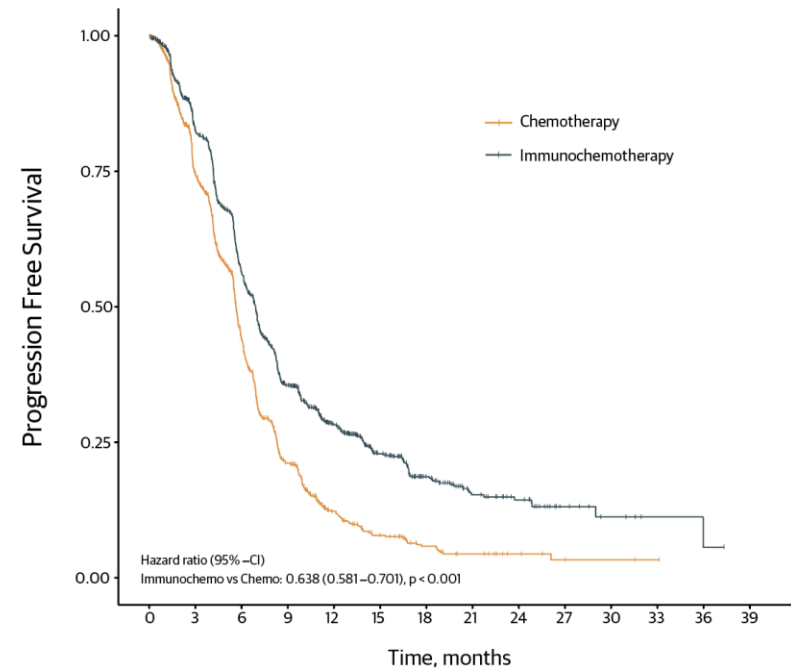
**eFigure 7. One-Stage Pooled Analysis of First-line and Second-line Studies**

**7A** One-stage pooled analysis  
Overall Survival  
CM648, ESCORT1st, KN590, ORIENT15



—	1228	1110	938	701	471	311	158	92	52	22	9	3	1	0
—	1220	1144	1017	816	591	420	266	135	78	42	18	6	1	1

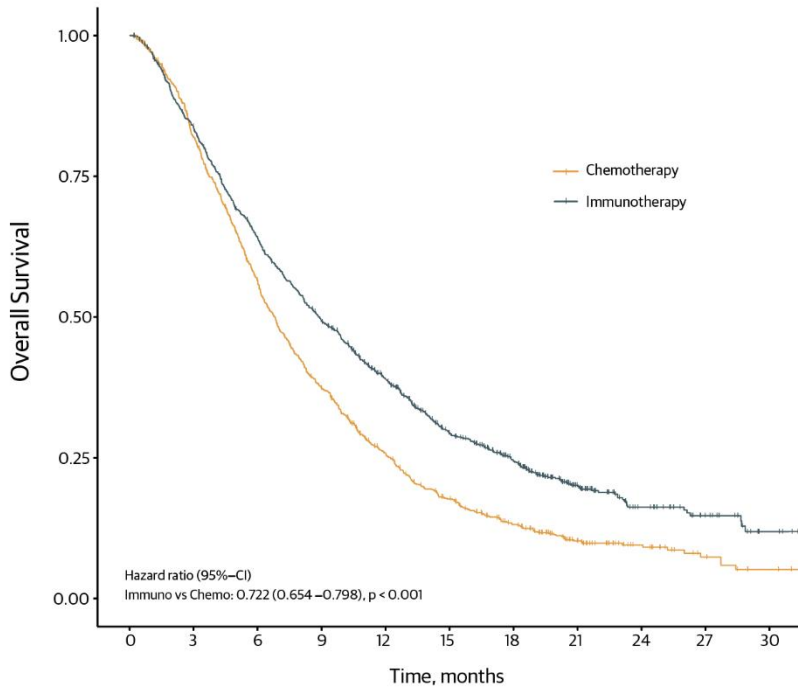
**7B** One-stage pooled analysis  
Progression Free Survival  
CM648, ESCORT1st, KN590, ORIENT15



—	1228	807	430	183	77	40	21	12	6	3	2	1	0	0
—	1220	931	605	339	222	140	70	38	26	10	5	2	1	0

7C

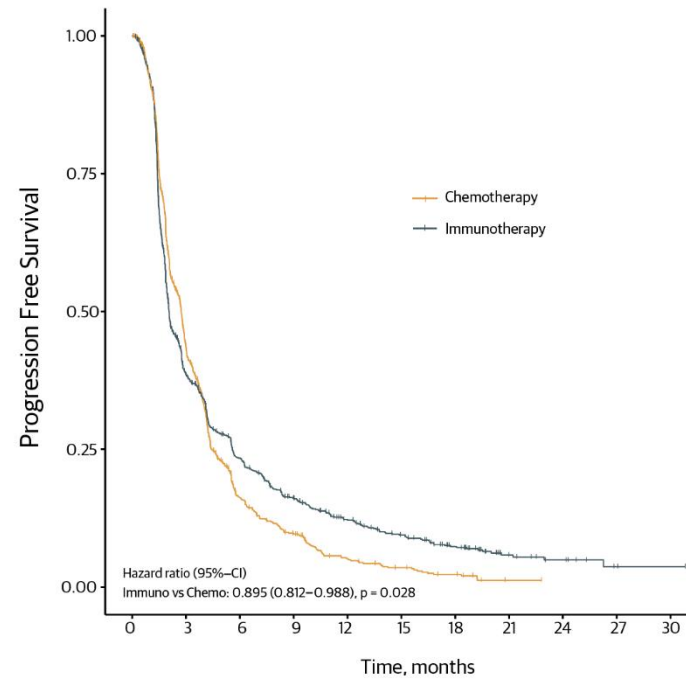
One-stage pooled analysis  
Overall Survival  
ESCORT, RATIONALE-302, KN-181, ATTRACTION-3, ORIENT-2



983	788	534	351	227	149	95	50	25	11	4
987	816	623	475	350	237	166	87	43	24	7

7D

One-stage pooled analysis  
Progression Free Survival  
ESCORT, RATIONALE-302, KN-181, ATTRACTION-3, ORIENT-2



983	355	116	63	30	18	10	1	0	0	0
987	359	209	136	90	63	39	15	8	2	1

**7(A)** One stage meta-analyses of Overall Survival in first-line studies **(B)** One stage meta-analyses of Progression Free Survival in first-line studies **(C)** One stage meta-analyses of Overall Survival in second-line studies **(D)** One stage meta-analyses of Progression Free Survival in second-line studies