

Original Article

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Do Biliary Complications after Hypofractionated Radiation Therapy in Hepatocellular Carcinoma Matter?

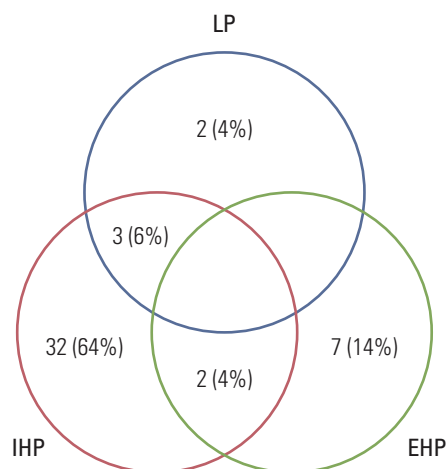
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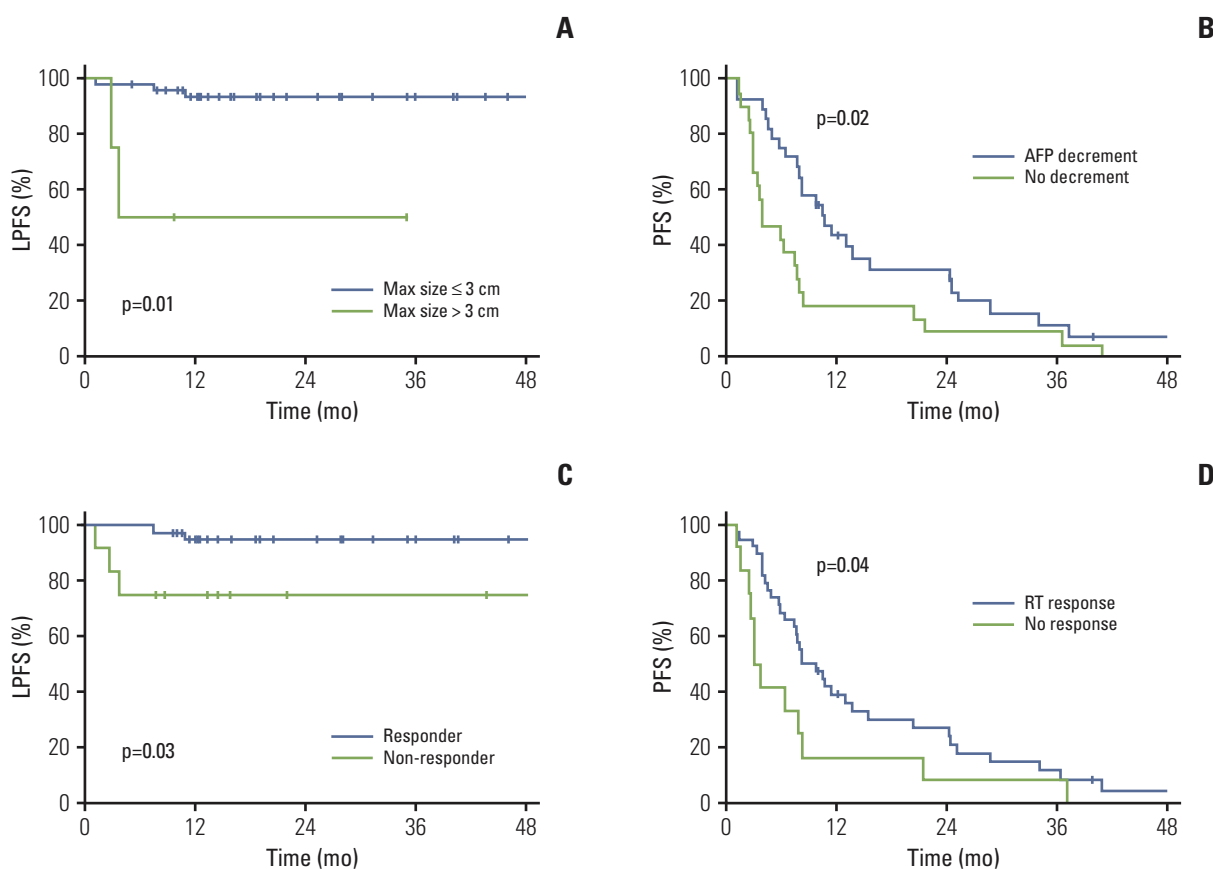
Supplementary Data

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Supplementary Fig. S1. Patterns of first site progression after hypofractionated radiation therapy. Intrahepatic progression (IHP) was the most frequent first failure pattern, followed by extrahepatic progression (EHP), and then isolated local progression (LP), which was only found in 4% of patients after hypofractionated radiation therapy.



Supplementary Fig. S2. Kaplan-Meier survival curves according to significant prognostic factors: maximum tumor size (> 3 cm) on local progression-free survival (LPFS), α -fetoprotein (AFP) decrement on progression-free survival (PFS), and radiation therapy (RT) response were significant prognostic factors for overall survival, as well as for PFS and LPFS.

Supplementary Table 1. Treatment related hematologic and hepatic toxicity within 6 months after RT (n=50)

| | 0 | I | II | III | IV |
|------------------|----|----|----|-----|----|
| AST | 11 | 33 | 3 | 2 | 1 |
| ALT | 17 | 26 | 4 | 2 | 1 |
| ALP | 29 | 21 | - | - | - |
| Anemia | 41 | 9 | - | - | - |
| Neutropenia | 39 | 8 | 3 | - | - |
| Thrombocytopenia | 38 | 6 | 2 | 4 | - |
| Child-Pugh score | 42 | 4 | 4 | - | - |

RT, radiation therapy; AST, aspartate aminotransferase; ALT, alanine transaminase; ALP, alkaline phosphatase.