Supplementary Table 3. Comparison of diagnostic performances of ECA-MRI and HBA-MRI for "definite" HCC and "definite" or "probable" HCC categories according to 2018 and 2022 KLCA-NCC criteria – reader 1 and reader 2

	ECA-MRI (95% CI)	HBA-MRI (95% CI)	*P*-value*
Reader 1			
"Definite" HCC of both 2018 and 2022 KLCA-NCC			
Sensitivity (%)	67.1 (58.8–74.8)	74.4 (68.7–79.5)	0.061
Specificity (%)	95.7 (85.5–99.5)	94.7 (87.1–98.6)	0.801
"Definite" or "probable" HCC of 2018 KLCA-NCC			
Sensitivity (%)	76.9 (69.2–83.6)	79.6 (74.2–84.2)	0.535
Specificity (%)	95.7 (85.5–99.5)	92.1 (83.6–97.1)	0.426
"Definite" or "probable" HCC of 2022 KLCA-NCC			
Sensitivity (%)	84.6 (77.6–90.1)	80.3 (75.0–84.9)	0.280
Specificity (%)	95.7 (85.5–99.5)	90.8 (81.9–96.2)	0.305
Reader 2			
"Definite" HCC of both 2018 and 2022 KLCA-NCC			
Sensitivity (%)	64.3 (55.9–72.2)	76.2 (70.7–81.2)	0.011
Specificity (%)	95.7 (85.5–99.5)	94.7 (87.1–98.6)	0.801
"Definite" or "probable" HCC of 2018 KLCA-NCC			
Sensitivity (%)	79.0 (71.4–85.4)	82.9 (77.9–87.2)	0.334
Specificity (%)	93.6 (82.5–98.7)	93.4 (85.3–97.8)	0.966
"Definite" or "probable" HCC of 2022 KLCA-NCC			
Sensitivity (%)	86.1 (79.2–91.2)	83.3 (78.3–87.5)	0.467
Specificity (%)	89.4 (76.9–96.5)	92.1 (83.6–97.1)	0.604

ECA, extracellular contrast agent; MRI, magnetic resonance imaging; HBA, hepatobiliary agent; HCC, hepatocellular carcinoma; KLCA-NCC, Korean Liver Cancer Association-National Cancer Center; CI, confidence interval.
*P-values between ECA-MRI and HBA-MRI were compared by using chi-square test.