

# Total metabolic tumor volume on 18F-FDG PET/CT is a useful prognostic biomarker for patients with extensive small cell lung cancer undergoing first-line chemo-immunotherapy

## SUPPLEMENT

### SUPPLEMENTAL TABLES ..... 2

*Table S1:* Area under the curve (AUC) for the prediction of PFS and OS at 6, 12, and 18 months in the chemo-immunotherapy (CIT) and chemotherapy (CT) groups based on total metabolic tumor volume (TMTV) and derived neutrophil-to-liver ratio (dNLR) .....2

*Table S2:* Tests for the additional prognostic value of TMTV and dNLR in the chemo-immunotherapy group .....3

*Table S3:* Estimated Overall Survival (OS) probability at 6, 12, and 18 months in the chemo-immunotherapy (CIT) cohort based on total metabolic tumor volume (TMTV) and liver metastases (LM) status .....4

*Table S4:* Estimated Overall Survival (OS) probability at 6, 12, and 18 months in the chemotherapy (CT) cohort based on total metabolic tumor volume (TMTV) and liver metastases (LM) status.....5

### SUPPLEMENTAL FIGURES..... 6

*Figure S1:* Predictiveness curves for TMTV (A) and Tumor SUVmax (B) for 6-month-PFS...6

*Figure S2:* Relationships between FDG uptake of tumor (tumor SUVmax), metabolic tumor burden (TMTV) and clinic-biological parameters (age, leukocytes, neutrophils, lymphocytes and dNLR) evaluated by Spearman's correlation coefficients .....7

*Figure S3:* Kaplan-Meier curves of Overall Survival (OS) (A) and Progression-Free Survival (PFS) (B) according to the derived Neutrophil-to-Lymphocyte Ratio (dNLR) in the chemotherapy (CT) cohort .....8

*Figure S4:* Kaplan-Meier curves of Progression-Free Survival (PFS) based on total metabolic tumor volume (TMTV) and liver metastases (LM) status in the chemo-immunotherapy (CIT) cohort (A) and in the chemotherapy (CT) cohort (B) .....9

**Table S1: Area under the curve (AUC) for the prediction of PFS and OS at 6, 12, and 18 months in the chemo-immunotherapy (CIT) and chemotherapy (CT) groups based on total metabolic tumor volume (TMTV) and derived neutrophil-to-liver ratio (dNLR).**

AUC (95%CI)	PFS			OS		
	6 months	12 months	18 months	6 months	12 months	18 months
<b>CHEMO-IMMUNOTHERAPY GROUP</b>						
dNLR	0.55 (0.35-0.74)	0.70 (0.44-0.95)	0.66 (0.33-1.00)	0.85 (0.61-1.00)	0.72 (0.54-0.90)	0.62 (0.40-0.82)
TMTV	0.59 (0.40-0.79)	0.63 (0.35-0.90)	0.62 (0.45-0.78)	0.88 (0.73-1.00)	0.61 (0.42-0.80)	0.63 (0.44-0.83)
<b>CHEMOTHERAPY GROUP</b>						
dNLR	0.61 (0.39-0.82)	0.58 (0.38-0.78)	0.58 (0.39-0.79)	0.67 (0.41-0.88)	0.70 (0.51-0.89)	0.77 (0.60-0.94)
TMTV	0.63 (0.43-0.83)	0.61 (0.40-0.81)	0.61 (0.41-0.82)	0.64 (0.40-0.87)	0.56 (0.36-0.77)	0.63 (0.36-0.91)
<i>Abbreviations: progression-free survival (PFS), overall survival (OS), total metabolic tumor volume (TMTV), derived neutrophil-to-lymphocyte ratio (dNLR).</i>						

**Table S2: Tests for the additional prognostic value of TMTV and dNLR in the chemo-immunotherapy group.**

*Legend: Likelihood ratio test and p values were generated comparing multivariable Cox proportional hazard models with and without the addition of TMTV (> 241 cm<sup>3</sup> versus ≤ 241 cm<sup>3</sup>) or with and without dNLR (> 3 versus ≤ 3) in order to test for its additional prognostic value. The multivariable Cox model was generated with backward elimination for Cox regression. The multivariable model for OS included the following clinical variables: age (≥ 70 vs < 70 years), dNLR (>3 vs ≤ 3), liver metastases (yes vs no) and TMTV (> 241 cm<sup>3</sup> versus ≤ 241 cm<sup>3</sup>). The multivariable model for PFS included the following clinical variables: dNLR (>3 vs ≤ 3) and TMTV (> 241 cm<sup>3</sup> versus ≤ 241 cm<sup>3</sup>).*

CHEMO-IMMUNOTHERAPY GROUP				
Cox model variables	PFS		OS	
	LR $\chi^2$	LR p value	LR $\chi^2$	LR p value
Multivariable model ( <u>with</u> TMTV and dNLR)	6.9	-	12.9	-
Multivariable model <u>without</u> TMTV	3.5	0.06	9.0	0.04
Multivariable model <u>without</u> dNLR	3.8	0.08	8.3	0.03

*Abbreviations: likelihood ratio (LR), progression-free survival (PFS), overall survival (OS), total metabolic tumor volume (TMTV), derived neutrophil-to-lymphocyte ratio (dNLR).*

**Table S3: Estimated Overall Survival (OS) probability at 6, 12, and 18 months in the chemo-immunotherapy (CIT) cohort based on total metabolic tumor volume (TMTV) and liver metastases (LM) status.**

Strata	Time (months)	n risk	n event	Survival probability [95% CI]
High risk	6	6	2	0.63 [0.50–1.00]
	12	2	6	0.12 [0.02–0.78]
	18	0	8	0.00 [NA–NA]
Intermediate risk	6	10	0	0.90 [0.73–1.00]
	12	5	5	0.51 [0.26–1.00]
	18	3	2	0.26 [0.08–0.84]
Low risk	6	18	0	0.94 [0.84–1.00]
	12	11	7	0.60 [0.40–0.92]
	18	5	13	0.33 [0.16–0.68]

*Abbreviations: confidence interval (CI), not applicable (NA).*

**Table S4: Estimated Overall Survival (OS) probability at 6, 12, and 18 months in the chemotherapy (CT) cohort based on total metabolic tumor volume (TMTV) and liver metastases (LM) status.**

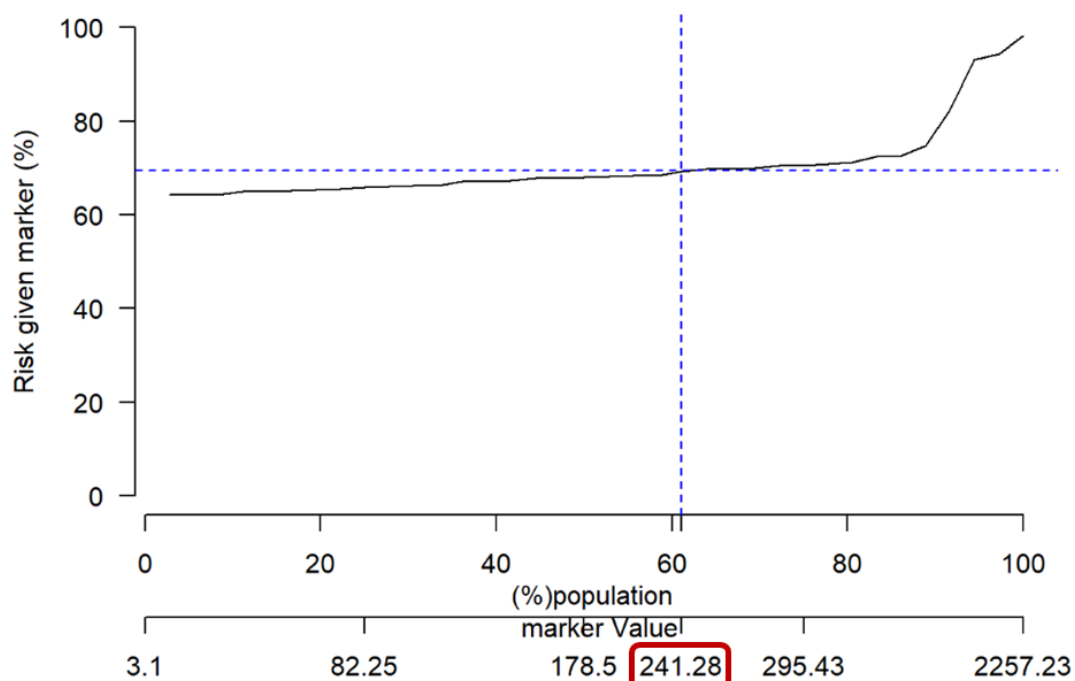
Strata	Time (months)	n risk	n event	Survival probability [95% CI]
High risk	6	6	1	0.71 [0.45–1.00]
	12	3	4	0.29 [0.09–0.92]
	18	1	6	0.14 [0.02–0.88]
Intermediate risk	6	9	1	0.80 [0.59–1.00]
	12	4	6	0.30 [0.12–0.77]
	18	1	9	0.10 [0.02–0.64]
Low risk	6	12	3	0.73 [0.54–0.99]
	12	8	7	0.47 [0.27–0.80]
	18	4	11	0.27 [0.12–0.62]

*Abbreviations: confidence interval (CI).*

**Figure S1: Predictiveness curves for TMTV (A) and Tumor SUVmax (B) for 6-month-PFS.**

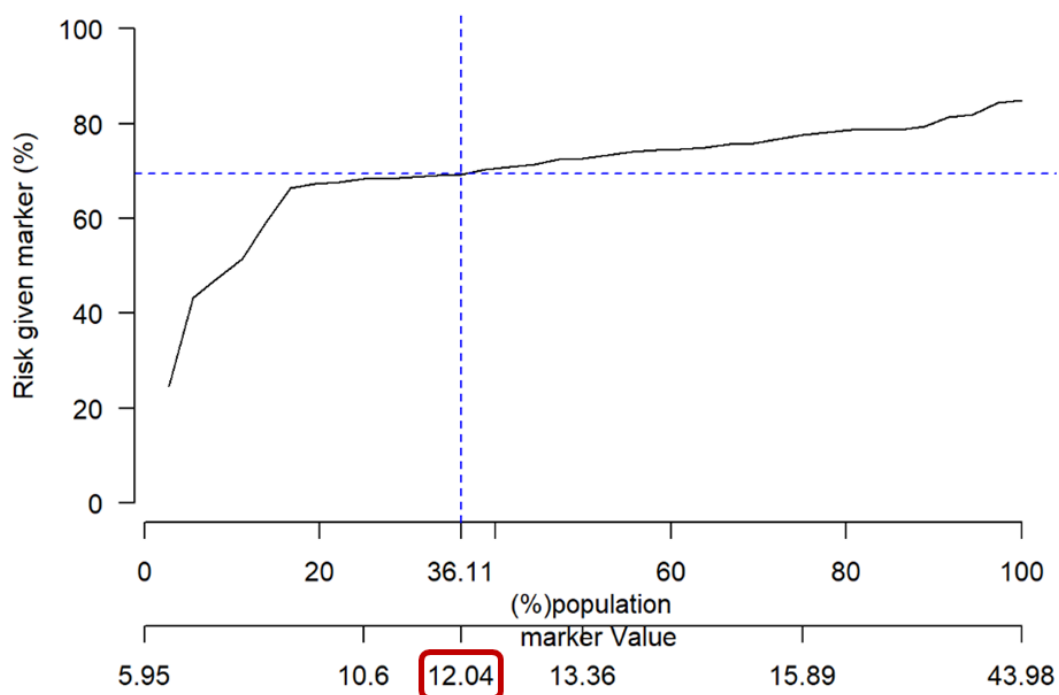
**A**

**Estimating the predictiveness curve of TMTV**

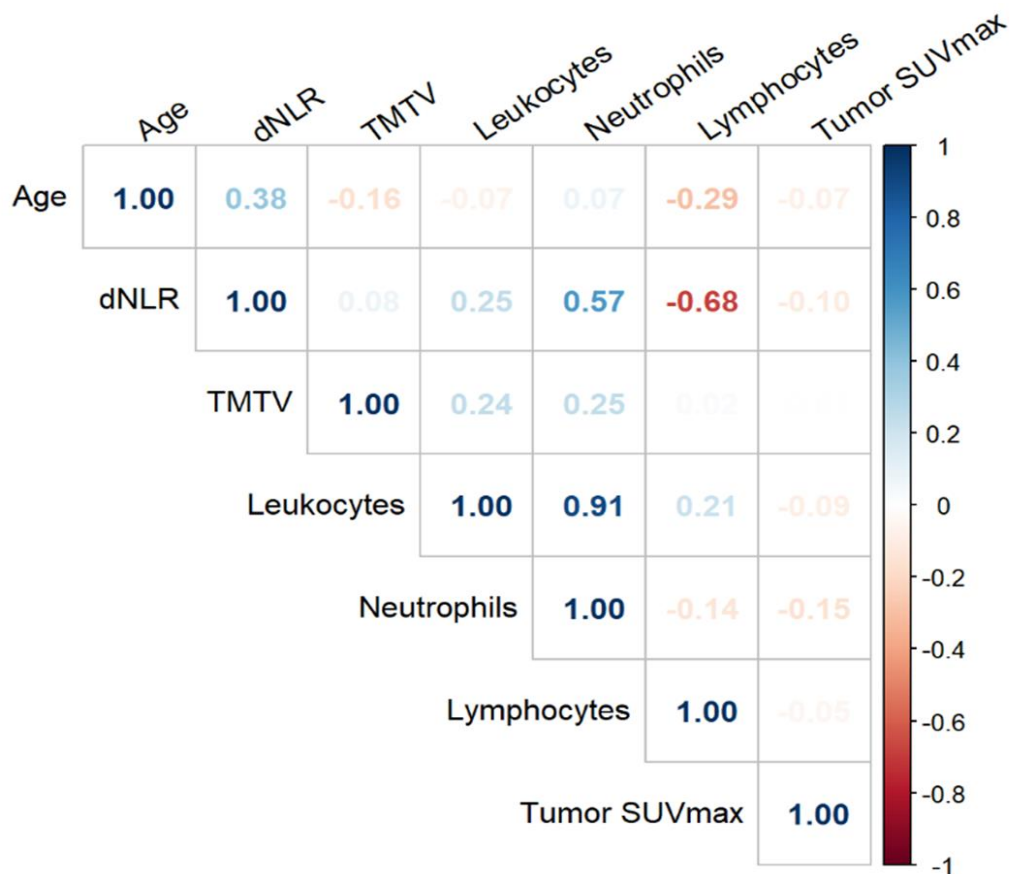


**B**

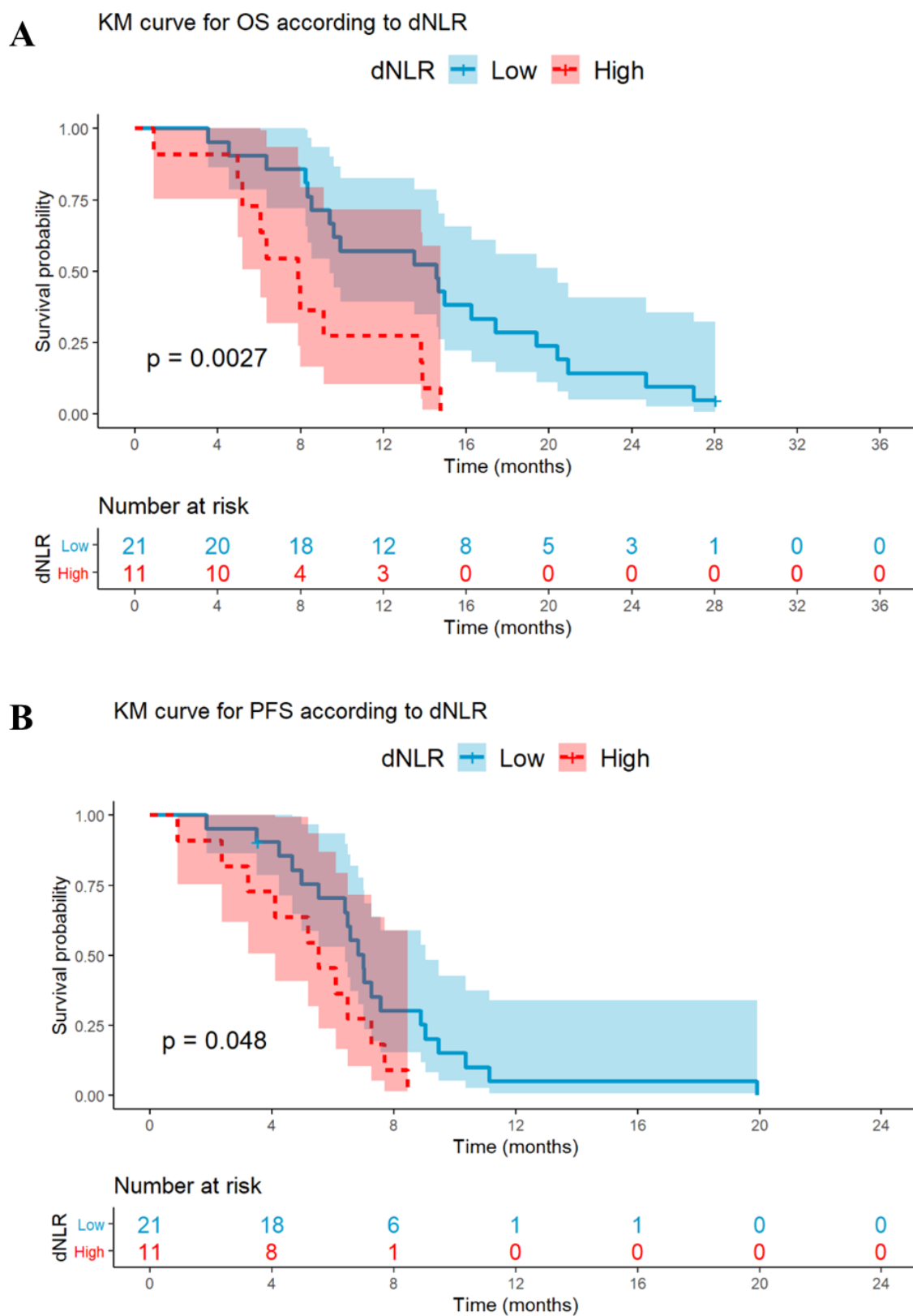
**Estimating the predictiveness curve of tumor SUVmax**



**Figure S2: Relationships between FDG uptake of tumor (tumor SUVmax), metabolic tumor burden (TMTV) and clinic-biological parameters (age, leukocytes, neutrophils, lymphocytes and dNLR) evaluated by Spearman's correlation coefficients.**



**Figure S3: Kaplan-Meier curves of Overall Survival (OS) (A) and Progression-Free Survival (PFS) (B) according to the derived Neutrophil-to-Lymphocyte Ratio (dNLR) in the chemotherapy (CT) cohort.**





**Figure S4: Kaplan-Meier curves of Progression-Free Survival (PFS) based on total metabolic tumor volume (TMTV) and liver metastases (LM) status in the chemo-immunotherapy (CIT) cohort (A) and in the chemotherapy (CT) cohort (B).**

