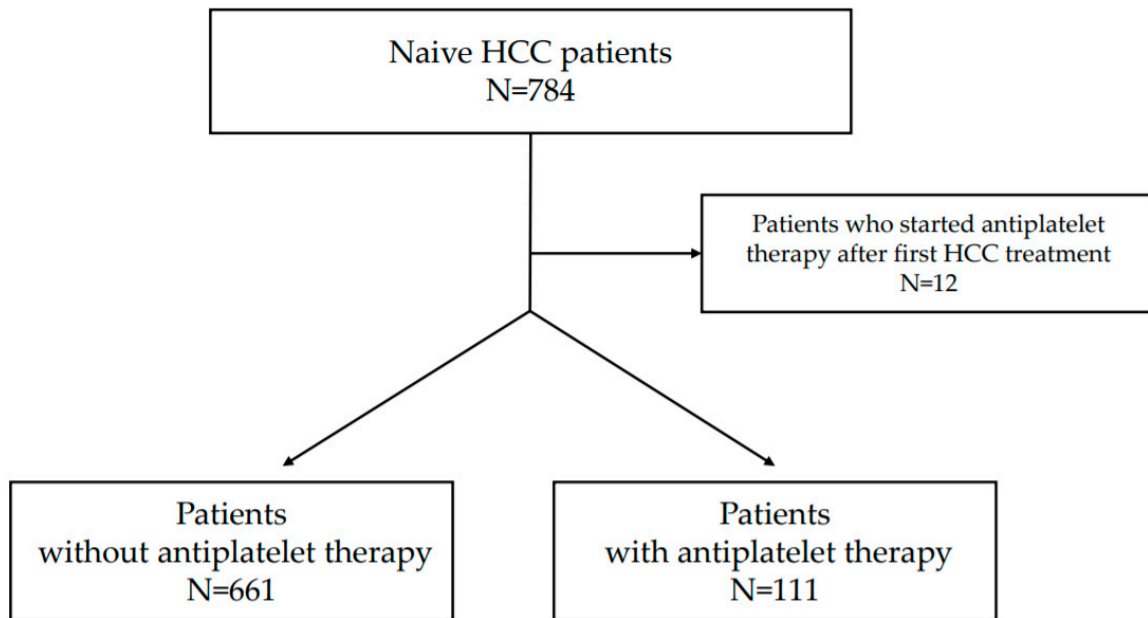


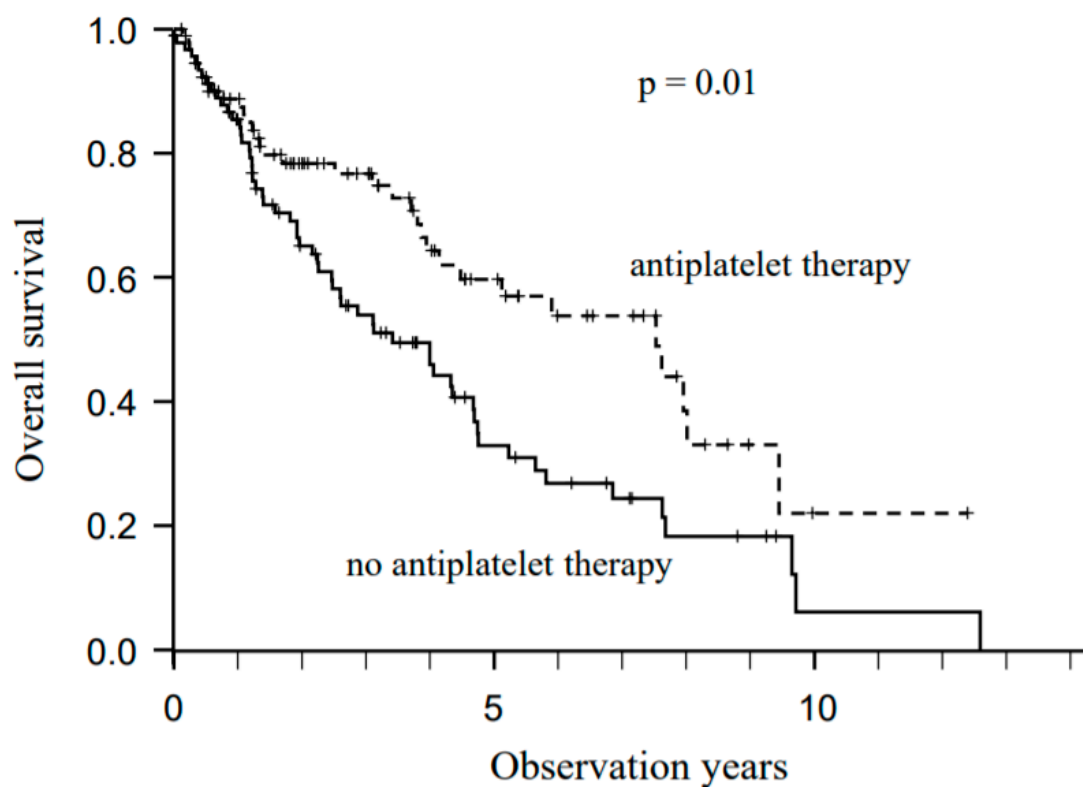
# Supplementary Materials: Antiplatelet Therapy Improves the Prognosis of Patients with Hepatocellular Carcinoma



**Figure S1.** Patients with HCC who entered in this study.

**Table S1.** Baseline characteristics in HCC patients undertaking or not undertaking antiplatelet therapy after propensity score matching.

	antiplatelet therapy (n=93)	no antiplatelet therapy (n=93)	p-value
Age (IQR), years	76 (68-81)	76 (69-80)	0.69
Male (%)	84.9	59.1	< 0.001
Etiology, HBV/HCV/ NBNC	14/43/36	8/51/34	0.30
Child-Pugh grade (A/B/C)	80/11/2	72/21/0	0.06
Stage, I/II/III/IVa/IVb	18/48/22/2/3	14/52/21/2/4	0.95
Tumor number (IQR)	1 (1-2)	1 (1-2)	0.34
Tumor size (IQR), cm	3.2 (2.0-5.0)	2.9 (2.0-5.3)	0.64
Vascular invasion (%)	5.4	4.3	1.00
Extrahepatic Metastasis (%)	3.2	4.3	1.00
AFP (IQR), ng/mL	7.5 (4.5-27.1)	9.5 (4.9-79.9)	0.24
DCP (IQR), mAU/mL	81 (26-526)	63 (22-1174)	0.88
First treatment, curative/TACE/others/BSC	34/56/1/2	33/56/2/2	1.00



**Figure S2.** Antiplatelet therapy was associated with better prognosis after propensity score matching. Five-year survival in patients with antiplatelet therapy was significantly better than that without antiplatelet therapy (59.7% versus 32.9%,  $p = 0.01$ ).



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