

Figure S1 Determination of the optimal cutoff value for Δ LMR. Time-dependent ROC curve for Δ LMR in the training set. The cutoff value of Δ LMR was determined as -2.73 (AUC: 0.583; $P=0.007$). ROC, receiver operating characteristic; Δ LMR, postoperative lymphocyte-monocyte ratio minus preoperative lymphocyte-monocyte ratio; AUC, area under the ROC curve.

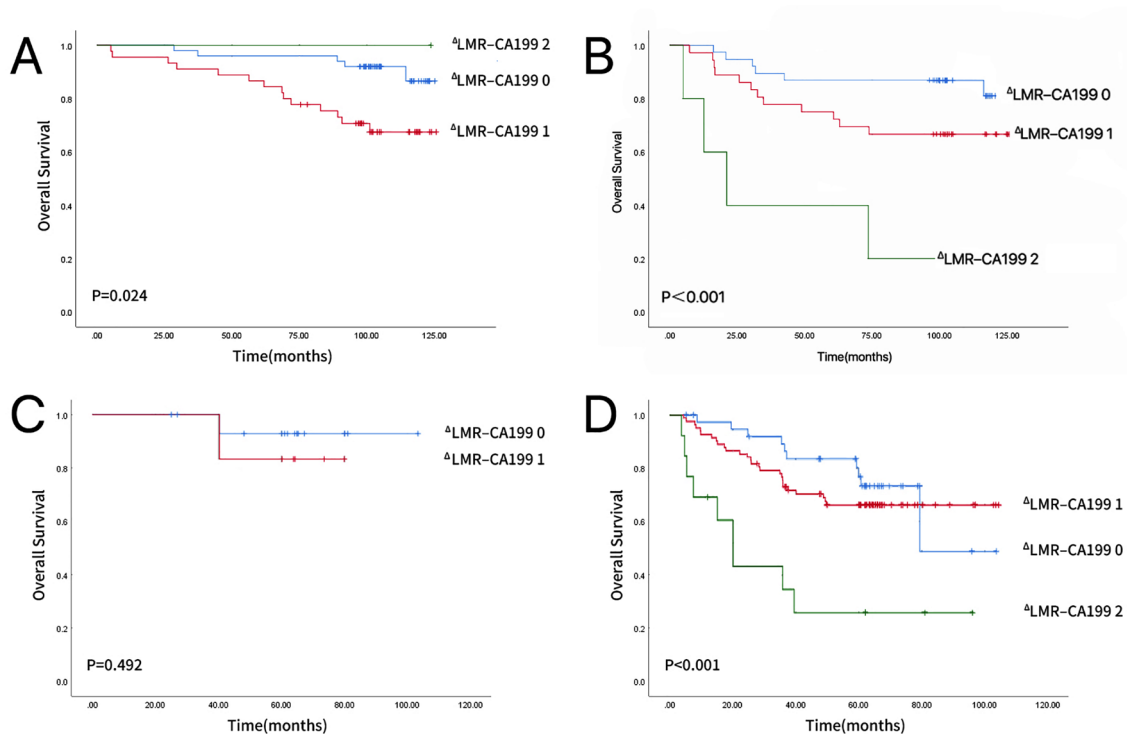


Figure S2 Kaplan-Meier survival curves incorporating the Δ LMR-CA199 score into the TNM staging system. Significant differences were observed in patients in the TNM II–III stages [(B) training set; (D) validation set] but not in those in TNM stage I [(A) training set; (C) validation set]. Δ LMR, postoperative lymphocyte-monocyte ratio minus preoperative lymphocyte-monocyte ratio; CA199, carbohydrate antigen 199; TNM, tumor-node-metastasis.

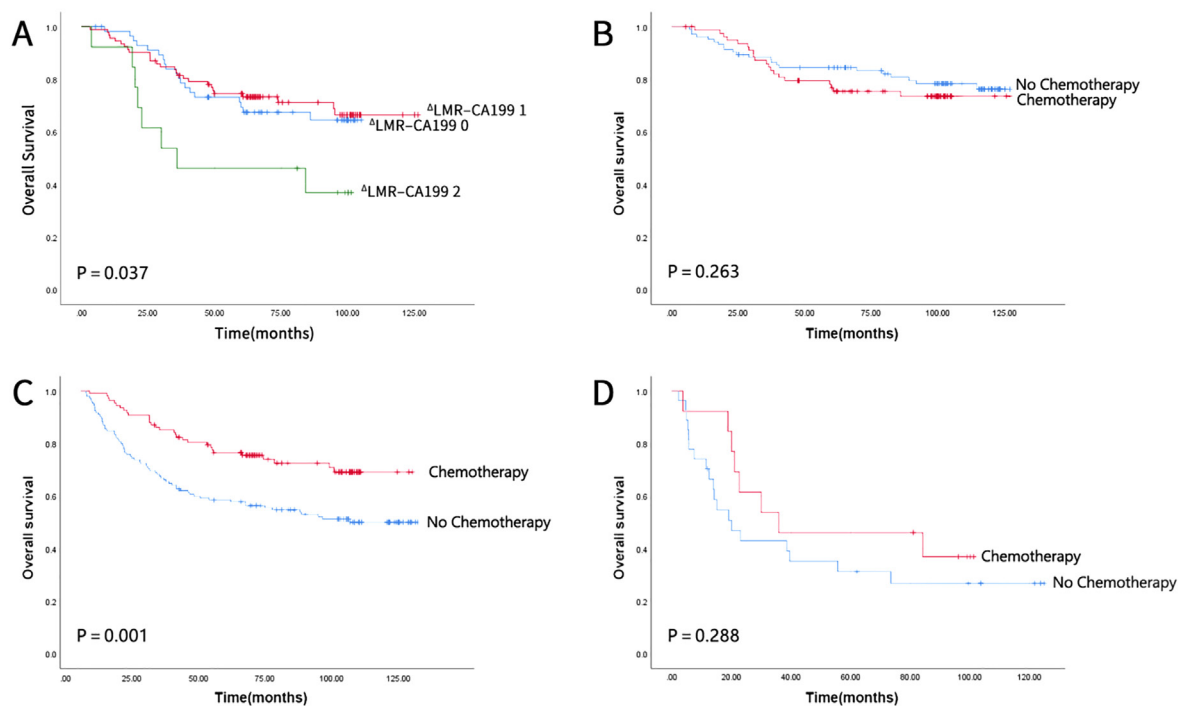


Figure S3 Kaplan-Meier survival curves indicating that the three risk stratifications of Δ LMR-CA199 are significantly different in patients who receive postoperative adjuvant chemotherapy for advanced GC. (A) Comparison of the survival curves between patients with or without chemotherapy in GC. (B) Δ LMR-CA199 risk score of 0. (C) Δ LMR-CA199 risk score of 1. And (D) Δ LMR-CA199 risk score of 2. Δ LMR, postoperative lymphocyte-monocyte ratio minus preoperative lymphocyte-monocyte ratio; CA199, carbohydrate antigen 199; GC, gastric cancer.