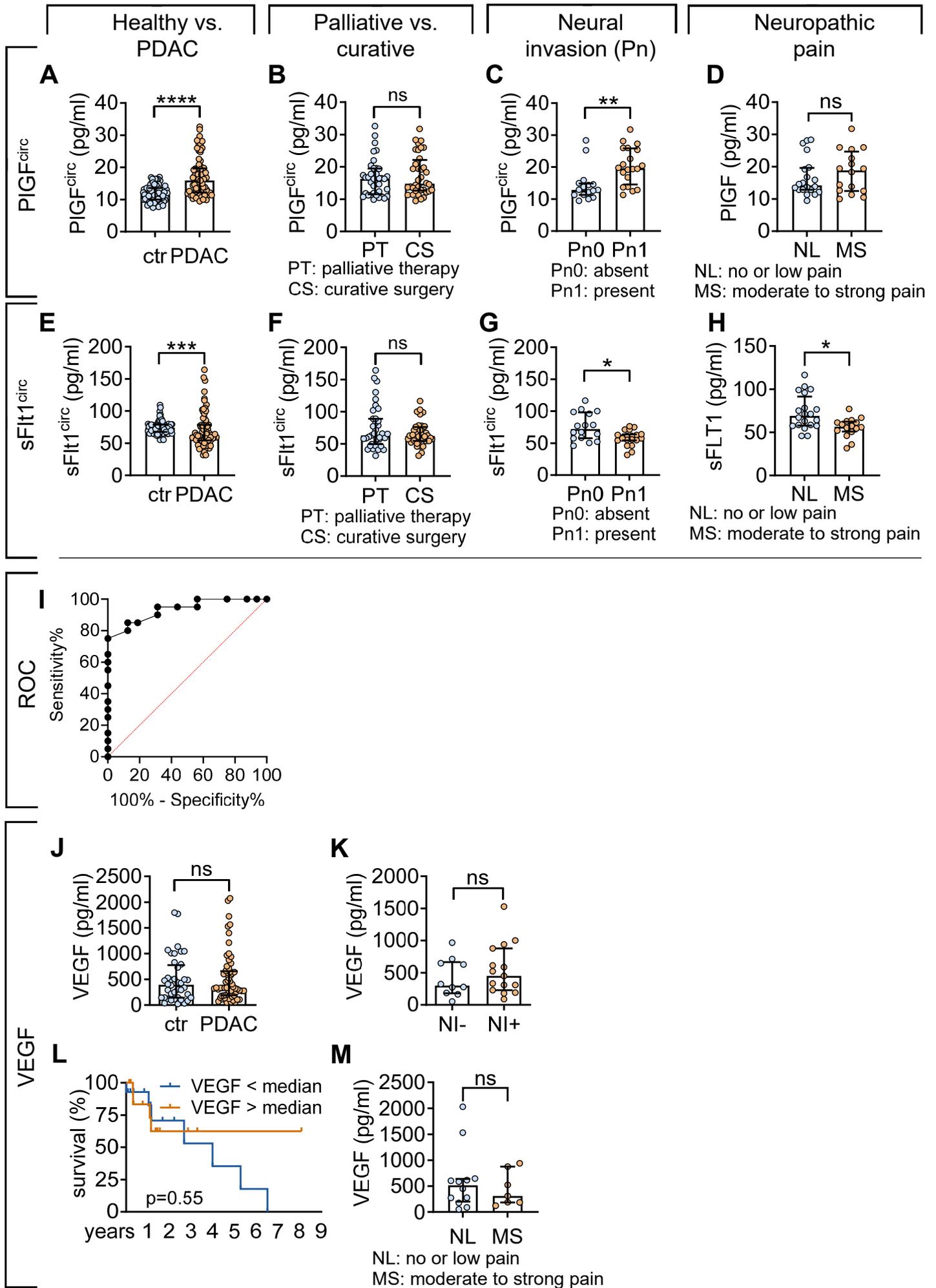


Suppl. Fig. 1



Suppl. Figure 1: Evaluation of circulating PIGF and sFlt1 serum levels in PDAC patients. In contrast, VEGF is not associated with neural invasion and neuropathic pain and does not predict disease prognosis in patients with PDAC following curative-intent surgery.

A, PIGF^{circ} is elevated in PDAC patients (n=73) compared to healthy controls (ctr; n=79). **B**, PIGF^{circ} does not differ among subgroups of patients with non-resectable (locally advanced or metastatic tumors; PT, n=37) and patients receiving curative-intent surgery (CS; n=36). **C**, In the CS cohort, median PIGF^{circ} is elevated in patients with NI (Pn1; n=20) compared to patients without NI (Pn0; n=16). **A-C** show scatter dot plots with median and interquartile range. **D**, Tumor-related pain was quantified using visual analogue scales (VAS 0-10) and grouped into no (0), low (1-3), moderate (4-6), and strong pain (7-10). Shown are PIGF^{circ} in the curative surgery cohort (CS) of patients reporting no or low (n=20) versus moderate to strong pain (n=16). **E**, sFlt1^{circ} is reduced in PDAC patients (n=73) compared to healthy controls (ctr; n=79). **F**, sFlt1^{circ} does not differ among subgroups of patients with non-resectable (locally advanced or metastatic tumors; PT, n=37) and patients receiving curative-intent surgery (CS; n=36). **G**, In the CS cohort, median sFlt1^{circ} is reduced in patients with NI (Pn1; n=20) compared to patients without NI (Pn0; n=16). **H**, Tumor-related pain was quantified (accordingly as referred to in **D**). Shown are sFlt1^{circ} in patients (CS cohort) reporting no or low (n=20) versus moderate to strong pain (n=16). **I**, Panel depicts ROC curve of PIGF/sFlt1^{circ} (AUC=0.934; 95% confidence interval: 0.858-1.000). Analysis displayed 85.0% sensitivity and 87.5% specificity for the discrimination between patients without and patients with NI at a cut-off PIGF/sFlt1^{circ} serum ratio of 0.251. **J**, Elevated VEGF serum levels in the overall cohort of PDAC patients (n=61) as compared to healthy controls (ctr; n=40). Shown is the scatter dot plot with the median and interquartile range; Mann-Whitney test. **K**, VEGF serum levels in patients with NI (NI+; n=15) and in patients without NI (NI-; n=10; Mann-Whitney test). **L**, Shown are Kaplan-Meier estimates of overall survival in patients with serum levels of VEGF <median (n=47) or VEGF >median (n=47), respectively, undergoing curative-intent surgery for resectable PDAC (HR: 1.44; 95% confidence interval: 0.432 to 4.7, Log-rank p=0.55). **M**, Pain was quantified using visual analogue scales (VAS 0-10) and grouped into no (0), low (VAS 1-3), moderate (VAS 4-6), and strong pain (VAS 7-10). Shown are circulating VEGF levels in the curative surgery cohort (CS) of patients reporting no or low (n=12) versus moderate to strong pain (n=7). *, P<0.05; **, P<0.01; ***, P<0.001; ****, P<0.0001; ns, not significant.