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## A Overall survival

Modality	P-score	Favors Modality	Favors RFA	HR	95% CI
TACE+RFA	0.791			0.67	[0.21-2.20]
TACE+PEI	0.602			0.96	[0.30-3.11]
PBT	0.551			1.07	[0.58-1.98]
PEI	0.245	Γ-π-		1.48	[1.10-1.98]
PAI	0.175	— <u>—</u> —		2.22	[0.55-8.92]
		0.2 0.5 1	2 5		
B Overall progress	sion-free survival	HR (95	5% CI)		
Modality	P-score	Favors Modality	Favors RFA	HR	95% CI
TACE+RFA	0.855			0.84	[0.51-1.41]
PBT	0.704			0.99	[0.70-1.41]
PEI	0.224	T	, 	1.88	[1.37-2.57]
PAI	0.036			3.85	[1.25-11.79]
		0.1 0.5 1	2 10		
		HR (95	5% CI)		
C Local progression	on-free survival				
Modality	P-score	Favors Modality	Favors RFA	HR	95% Cl
TACE+RFA	0.852	́		0.63	[0.25-1.59]
PBT	0.804	— <u> </u>		0.73	[0.39-1.37]
PAI	0.162			2.44	[1.05-5.66]
PEI	0.107			2.86	[1.18-6.92]
		0.2 0.5 1	2 5		

Supplementary Figure 4. Treatment effects for (A) overall survival and (B) overall and (C) local progression-free survivals in the sensitivity analysis based on randomized controlled trials (RCTs) limited for HCC nodules ≤3 cm in diameter. Six, five, and five treatments from seven, four, and three of the 19 RCTs, respectively, were included in networks created to analyze hazard ratios (HRs) for overall survival and overall and local progression-free survivals, respectively. PAI, percutaneous acetic acid injections; CA, cryoablation; RFA, radiofrequency ablation; LA, laser ablation; PBT, proton beam therapy; TACE, trans-arterial chemoembolization; MWA, microwave ablation; PEI, percutaneous ethanol injection; HCC, hepatocellular carcinoma; CI, confidence interval.

HR (95% CI)