



Fig S2. The lower level of miR-192-5p was associated with poor prognosis of HCC patients.

(A, B) In HCC Cohort 1, Kaplan-Meier curves of overall survival (A) and time to recurrence (B) according to the miR-192-5p levels in tumor samples. Patients were categorized based on their median and quantile division of miR-192-5p levels. (C) In HCC Cohort 3, Kaplan-Meier curves of overall survival according to the median miR-192-5p level in tumor samples. Left panel was for all HCC patients. Middle panel was for HCC patients with tumor resection. Right panel was for HCC patients with liver transplantation. (D) In HCC Cohort 3, Kaplan-Meier curves of overall survival according to the tertile and quantile division of miR-192-5p level in tumor samples. (E) In HCC Cohort 3, Kaplan-Meier curves of time to recurrence according to the median miR-192-5p level in tumor samples. Left panel, all HCC patients; middle panel, patients with tumor resection; right panel, patients with liver transplantation. (F) In HCC Cohort 3, Kaplan-Meier curves of time to recurrence according to the tertile and quantile division of miR-192-5p level in tumor samples. (A-F) Log-rank test was performed. Patient numbers for each group and p-values were listed in each individual panel.