**Table S5**

Treatment at tumour progression for 244 patients diagnosed with GBM during the years 2005-2015 (the biobank cohort).

|  |  |  |  |
| --- | --- | --- | --- |
| Treatment at tumour progression | No | % | Median overall survival (95 % CI) |
| Treatment at tumour progression – all | 126 | 52 | 18.8 (16.1-21.5) |
| Surgery - all | 50 | 20 | 26.4 (18.8-33.4) |
| Surgery as monotherapy | 2 | 1 |  |
| Surgery and chemotherapy/ bevacizumab | 44 | 18 | 26.2 (18.9-33.6) |
| Surgery and radiotherapy | 2 | 1 |  |
| Surgery, radiotherapy and chemotherapy/bevacizumab | 2 | 1 |  |
| Radiotherapy | 10 | 4 | 26.3 (16.4-36.3) |
| Chemotherapy and/or bevacizumab1 | 66 | 27 | 15.3 (14.0-16.7) |
| Best supportive care | 115 | 47 | 5.5 (4.1-6.8) |
| No tumour progression | 3 | 1 |  |

1 Systemic treatment used at tumour progression was temozolomide, lomustine monotherapy, PCV (a combination of procarbazine, lomustine and vincristine), bevacizumab as monotherapy or in combination with temozolomide, irinotecan or lomustine.