

Figure S1. Inhibition of hsa-miR-105 attenuates chemosensitivity to paclitaxel (PTX) in OVCAR8 cells. (A) OVCAR8 cells were transfected with 100 nM hsa-miR-105 inhibitors (anti-miR-150) or control (Ctrl) using Lipofectamine™ 3000. Following 48 h, the cells were harvested and RT-qPCR analysis was carried out to determine the hsa-miR-105 levels. (B) Forty-eight hours after transfection with the indicated oligonucleotides, OVCAR8 cells were seeded in 96-well plates at the density of 5×10^3 cells/well. Cells were then exposed to different doses of PTX as indicated or DMSO for 24 h, followed by measurement of cell viability using Cell Counting Kit-8 (* $P < 0.05$, ** $P < 0.01$). (C) Anchorage-dependent clonogenic ability of OVCAR8 cells with different transfections was assessed using colony formation assay (* $P < 0.05$). (D) Effects of hsa-miR-105 inhibition on cell invasiveness were evaluated using a Transwell assay, as described in Materials and methods (* $P < 0.05$). Scale bar, 10 μm .

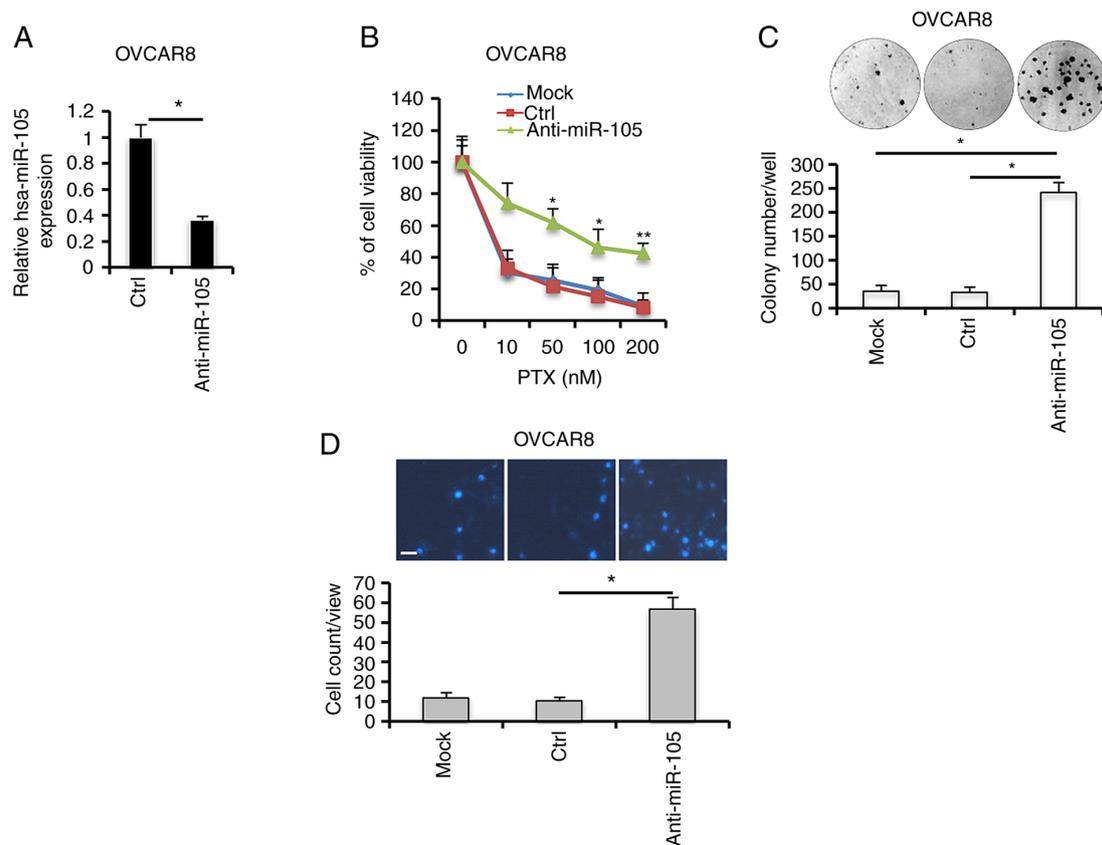


Figure S2. Inhibition of hsa-miR-105 attenuates chemosensitivity to both cisplatin and paclitaxel (PTX) in SKOV3 and OVCAR8 cells. (A) SKOV3 and OVCAR8 cells were transfected with 100 nM hsa-miR-105 inhibitors (anti-miR-105) or negative control using Lipofectamine™ 3000. Following 48 h, the cells were harvested and RT-qPCR analysis was carried out to determine the hsa-miR-105 levels. (B) Forty-eight hours after transfection with the indicated oligonucleotides, SKOV3 and OVCAR8 cells were seeded in 96-well plates at the density of 5×10^3 cells/well. Cells were then exposed to 20 nM of PTX and 3.5 μ M of cisplatin or DMSO for different durations as indicated, followed by measurement of cell viability using Cell Counting Kit-8 (* $P < 0.05$).

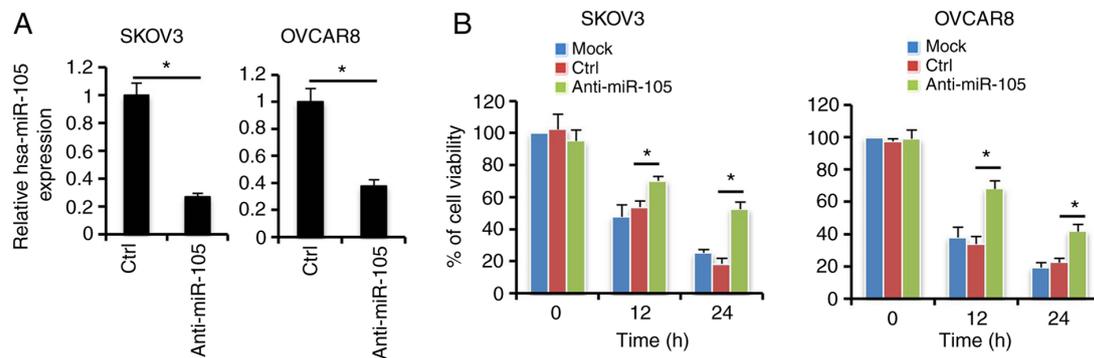


Table SI. Association between hsa-miR-105 expression and clinicopathological parameters of the female patients with ovarian cancer.

Clinicopathological features	Cases (n)	hsa-miR-105 expression		P-value
		High (n=53)	Low (n=62)	
Age (years)				0.5800
<50	32	13	19	
≥50	83	40	43	
FIGO stage				0.6700
I/II	38	17	21	
III/VI	77	36	41	
Tumor grade				0.2300
High-grade	25	9	16	
Low-grade	90	44	46	
Ascitic fluid volume (ml)				0.4900
<500	31	11	20	
≥500	84	42	42	
Primary surgery (≤1 cm)				0.6200
Optimal	77	36	41	
Suboptimal	38	17	21	
Serum CA125 (U/ml)				0.1600
<1,000		24	36	
≥1,000		29	26	
PTX chemosensitivity				0.0042 ^a
Responsive	56	43	13	
Resistant	59	10	49	
Gross classification				0.4170
Mucinous	16	9	7	
Serous	78	58	20	
Endometrioid	14	9	5	
Clear cell	7	3	4	

^aSignificant difference. FIGO, International Federation of Gynecology and Obstetrics; CA125, cancer antigen 125; PTX, paclitaxel.