7. APPENDIX

Supplementary table 1. List of biobanks generated from multiple cancer types. *Collections can be generated from both primary tumors and metastases for some of the cancer types. N corresponds to the number of organoid lines that were characterized per biobank. Efficiency in the generation was also indicated. References in the table correspond to the references from the original article. Image taken from Schutgens & Clevers, 2020.*

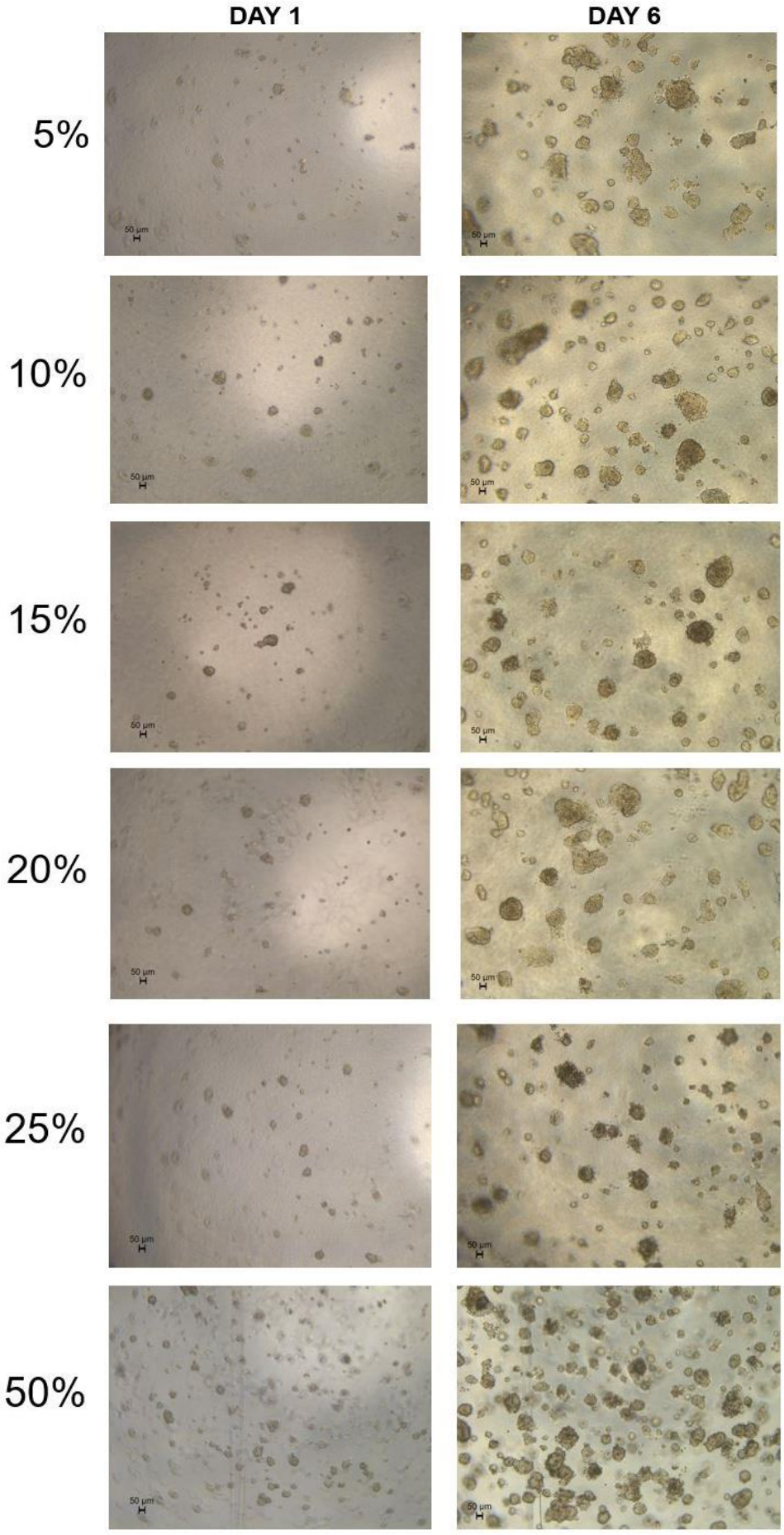
Organ of origin	Number of lines[a]	Histological subtypes	Reference
Colon	22	Adenocarcinomas	22
Colorectum	55	Premalignant lesions (tubular and tubulovillous adenomas, sessile serrated lesions, and a hyperplastic polyp) Adenocarcinomas (well differentiated, moderately differentiated, poorly differentiated, mucinous, not specified) Metastases of adenocarcinomas Neuroendocrine carcinomas	79
Colorectum	10	Colorectal metastases	78
Rectum (for cystic fibrosis)	71	Not applicable	23
Pancreas	8	Ductal adenocarcinomas	19
Pancreas	39	Ductal adenocarcinomas	80
Pancreas	114	Ductal adenocarcinomas	82
Liver	8	Hepatocellular carcinomas Cholangiocarcinomas Combined hepatocellular cholangiocarcinomas	86
Bladder	20	Urothelial carcinomas Squamous cell carcinomas	
Prostate	7	Adenocarcinoma metastases and circulating tumor cells	76
Ovary	33	High-grade serous carcinoma	28
Ovary	56	Borderline tumors (both mucinous and serous) Clear cell carcinomas Endometrioid carcinomas Mucinous carcinomas Low-grade serous carcinomas High-grade serous carcinomas	85
Breast	95	Ductal carcinoma Lobular carcinoma	32
Mixed[b]	56	Tumors from prostate, breast, colorectal, esophagus, brain, pancreas, lung, small intestine, ovary, uterus, soft tissue (not further specified), bladder, ureter, kidney	87
Mixed	[c]	Metastatic colorectal cancer Metastatic gastroesophageal cancer	83

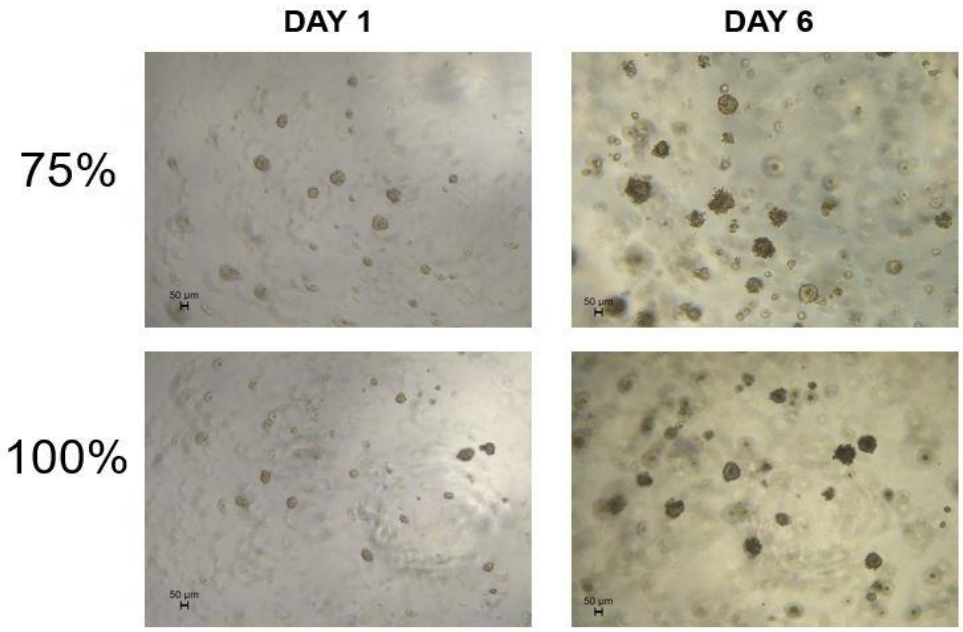
[a]Refers to the number of organoid lines reported, not the number of patients (for some patients, multiple lines were established).
[b]Histological types were not comprehensively reported.
[c]The number of lines was not specifically mentioned (83).

	1	2	3	4	5	6	7	8	9	10	11	12
A												
B		Control	0.1 µM	1 µM	5 µM	10 µM	50 µM	100 µM	150 µM	200 µM	Blank	
C		Control	0.1 µM	1 µM	5 µM	10 µM	50 µM	100 µM	150 µM	200 µM	Blank	
D		Control	0.1 µM	1 µM	5 µM	10 µM	50 µM	100 µM	150 µM	200 µM	Blank	
E		Control	0.1 µM	1 µM	5 µM	10 µM	50 µM	100 µM	150 µM	200 µM	Blank	
F		Control	0.1 µM	1 µM	5 µM	10 µM	50 µM	100 µM	150 µM	200 µM	Blank	
G		Control	0.1 µM	1 µM	5 µM	10 µM	50 µM	100 µM	150 µM	200 µM	Blank	
H												

	1	2	3	4	5	6	7	8	9	10	11	12
A												
B		Control	0.1 µM	1 µM	5 µM	10 µM	50 µM	100 µM	150 µM	200 µM	Blank	
C		Control	0.1 µM	1 µM	5 µM	10 µM	50 µM	100 µM	150 µM	200 µM	Blank	
D		Control	0.1 µM	1 µM	5 µM	10 µM	50 µM	100 µM	150 µM	200 µM	Blank	
E												
F												
G												
H												

Supplementary figure 1. Schematic representation of the distribution of drugs: 5-FU and Oxaliplatin independently and as a combination. *Due to the number of wells required per condition, two plates had to be used. The response to the treatment was analyzed for each drug independently in P96W 1 and as a combination in P96W 2. For both plates the first and last rows and columns were left empty. The second column was used as control and the eleventh column was used as blank. Grey means that it was empty, yellow was for wells containing 5-FU, blue was for wells containing Oxaliplatin and green was for the combination of 5-FU and Oxaliplatin*


DAY 1
DAY 6
5%
10%
15%
20%
25%
50%
50 µm



Supplementary figure 2. Colorectal cancer tumoral organoids (CTO65-P02) cultured in different Matrigel concentrations for the evaluation of the growth rate. *All wells contained a final volume of 5 µL and 1000 cells/µL were seeded. Pictures were taken on day 1 and day 6 of culture. Scale bar: 50 µm; 5X magnification was used. Matrigel concentrations were indicated in the picture*