**B20.4.1.1 survival study**

In the first study, 1x106 C6 glioma cells were implanted into the right striatum of 58 male Wistar rats. Starting 8 days post-implantation, animals were treated weekly with intra-peritoneal injections of either 5 mg/kg of the anti-VEGF monoclonal antibody B20.4.1.1, (Roche/Genentech, South San Francisco, CA, USA), N=26, or saline, N=32. The animals were then observed for up to 25 days to assess survival.

B20.4.1.1 is a monoclonal antibody that was identified from antibody phage libraries [1] and, unlike the clinically utilized bevacizumab (Avastin®), binds and blocks not only human but also rat and murine VEGF interactions with VEGF receptors VEGFR1 and VEGFR2 with high *in vitro* potency [2,3]. As shown in Supplementary Fig 1, treatment with weekly doses of B20.4.1.1 results in a significant 25% survival rate (p < 0.001, Kaplan-Meier log rank test, N=26), whereas control animals treated with saline (N=32) all had to be euthanized by 8 days post-treatment (16 days post tumor cell implantation).

**A screenshot of a cell phone

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**Supplementary Fig 1. B20.4.1.1 administration on C6 survival**. Male Wistar rats implanted with C6 glioma cells into the right striatum were treated with weekly doses of 5 mg/kg of B20.4.1.1 (N=26) or a saline control (N=32) beginning 8 days post tumor cell implantation. A p-value < 0.001 from Kaplan-Meier log rank test highlights the significance of the ~25% survival rate.

**References**

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