

LIHC - Liver Hepatocellular Carcinoma

Subtype	Proliferation	Prognosis	Therapy (Typical/Investigational)	Common Driver Alterations
iCluster 1	High (strong cell cycle activation)	Worst prognosis	May benefit from systemic therapies like sorafenib, lenvatinib, or immunotherapy; cell-cycle inhibitors (e.g., CDK, PLK1) under investigation	Low CTNNB1 mutation; frequent TP53 mutations; low TERT mutation; CDKN2A silencing
iCluster 2	Low (non-proliferative)	Best prognosis	Resection, transplant, or local therapies; CTNNB1/Wnt pathway inhibitors in development	High CTNNB1 and TERT promoter mutations; HNF1A mutations; CDKN2A silencing
iCluster 3	Intermediate	Intermediate–Good	Standard care options plus potential benefit from immunotherapy or Wnt-targeted agents	Mixed profile: CTNNB1 , TERT , TP53 mutations; chromosomal instability; CDKN2A silencing