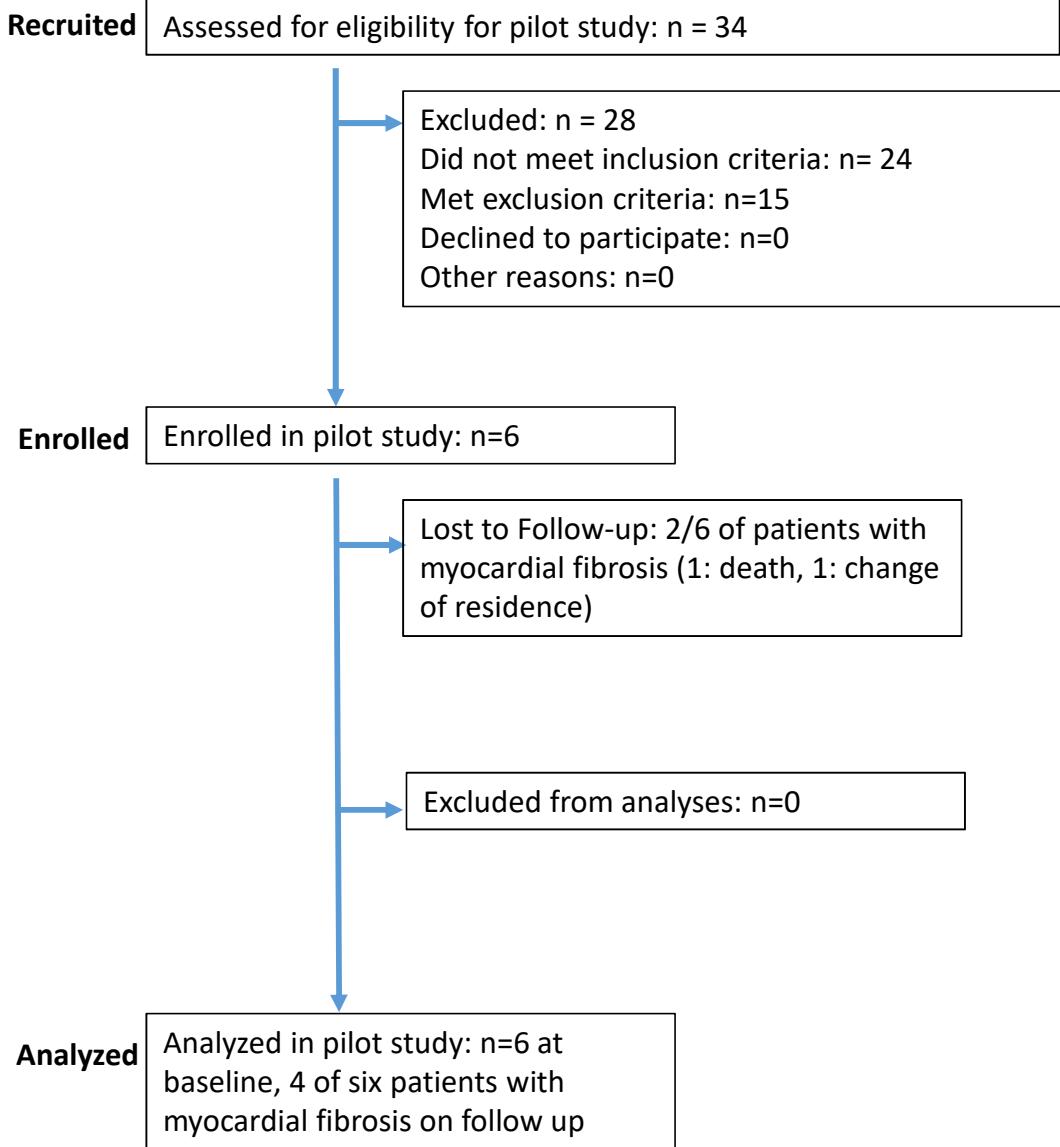
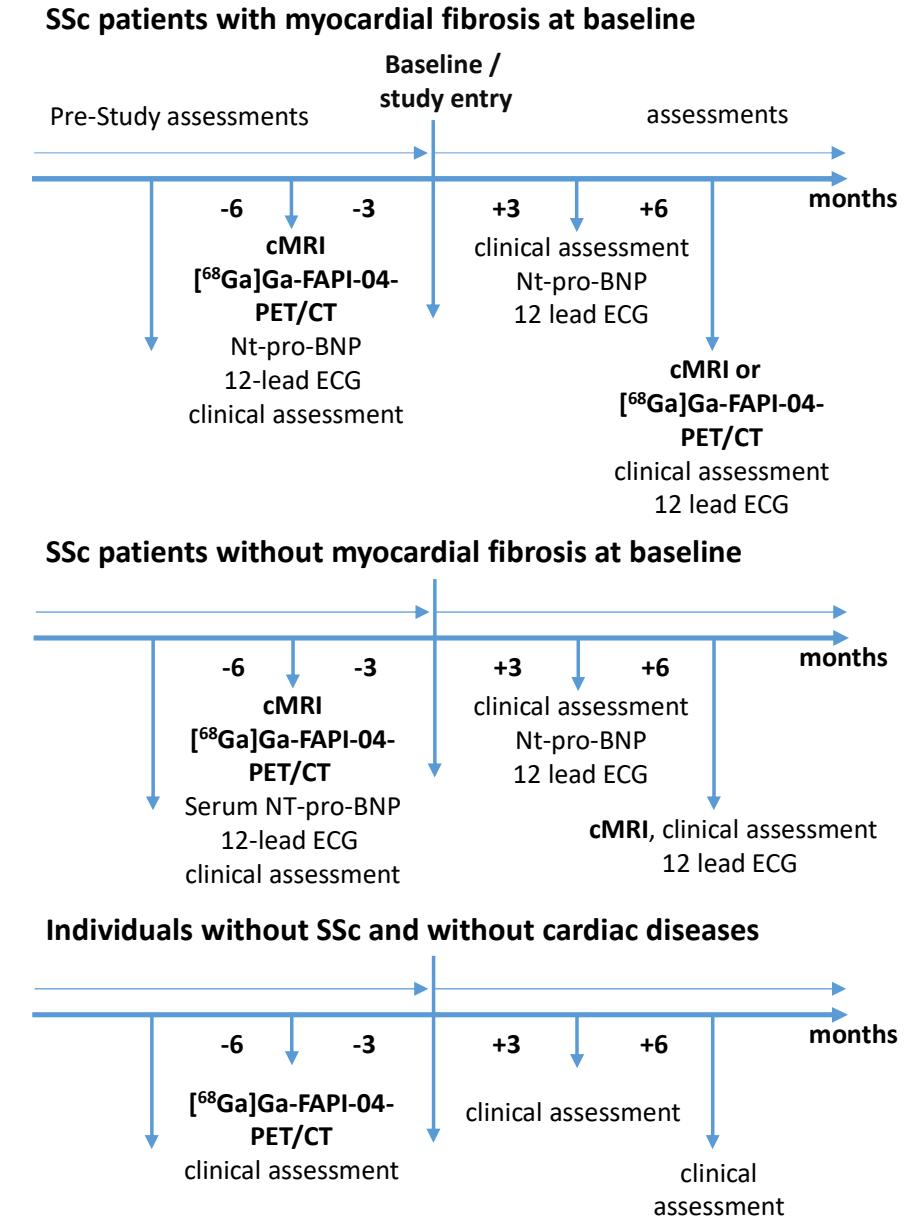
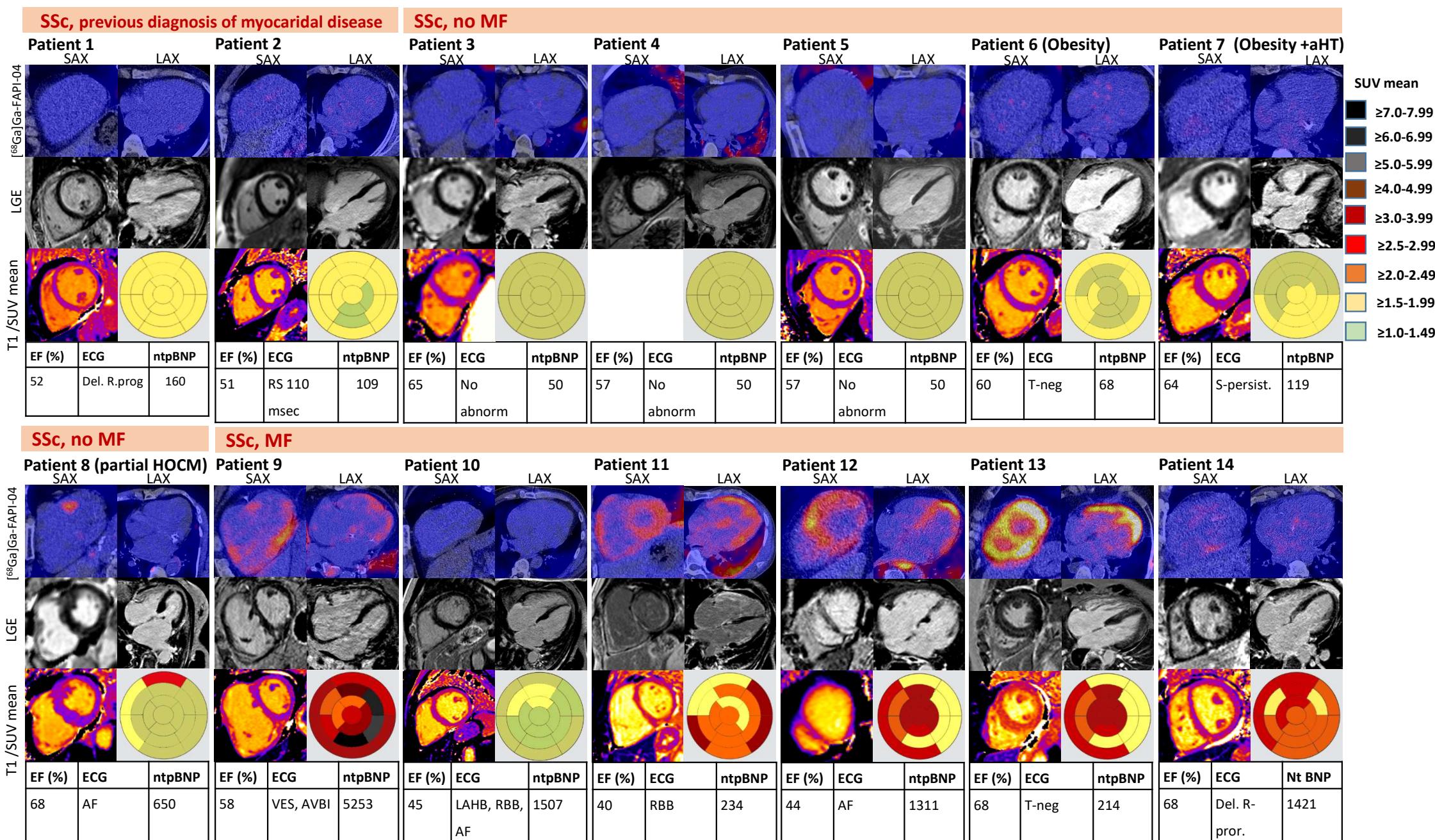
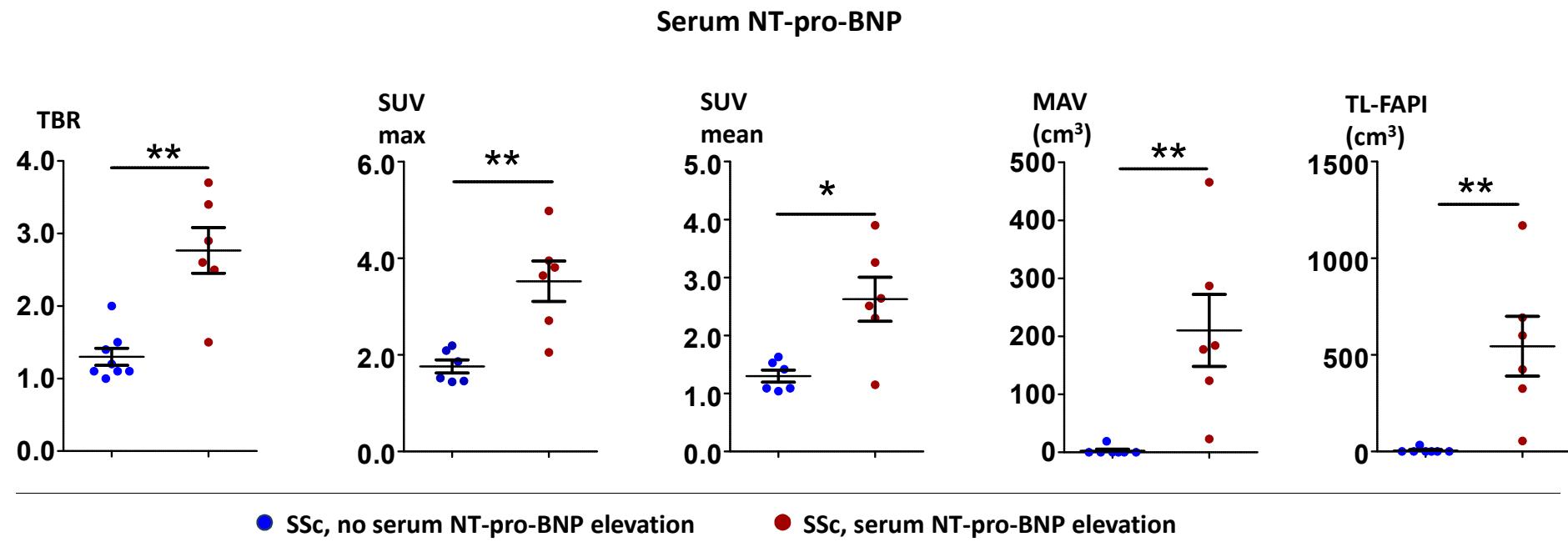


**A****B**

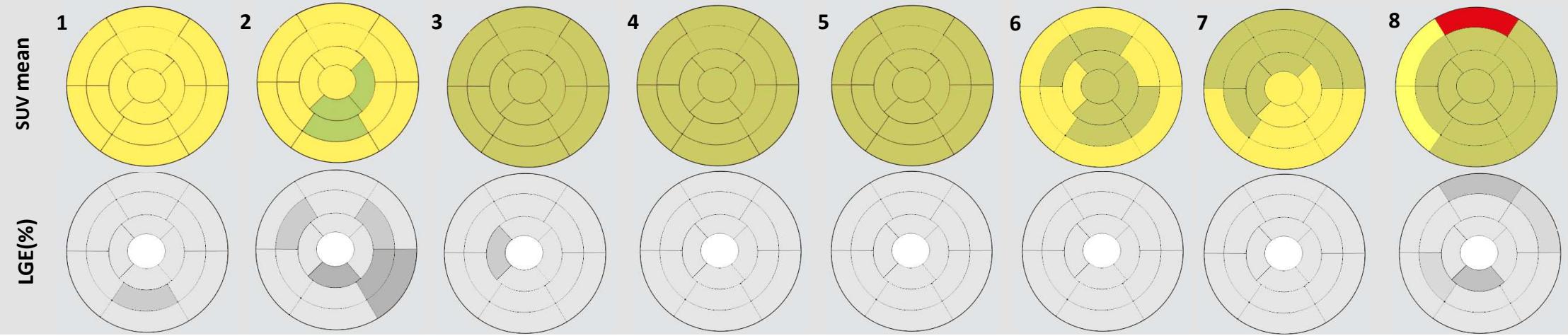
**Supplementary Figure 1: A Participant flow diagram. B Pictogramm of assessments included in the trial.** cMRI: cardiac MRI, ECG: electrocardiogram, Nt-pro-BNP: N-terminal-pro- brain natriuretic peptide.  $[^{68}\text{Ga}]\text{Ga-FAPI-04}$ :  $^{68}\text{Gallium-labeled Fibroblast Activation-Protein-Inhibitor-04}$ , PET: positron-emission tomography, CT: computational tomography



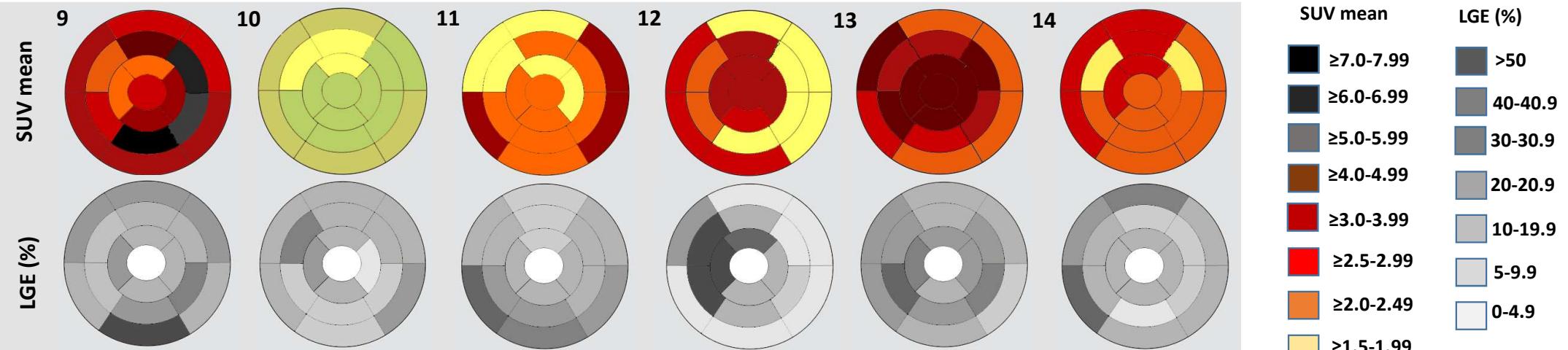
Supplementary Figure 2: Baseline investigations of all SSc-participants: [<sup>68</sup>Gal]Ga-FAPI-04-PET/CT scan, late gadolinium enhancement (LGE), T1-mapping , SUV mean according to the 17-regions AHA-modell, clinical information: ejection fraction (MRI; EF; %), electrocardiogram (ECG), nt-pro-BNP (ntpBNP, pg/ml). AHA: American heart Association, SAX: short axis-, LAX: long axis view.



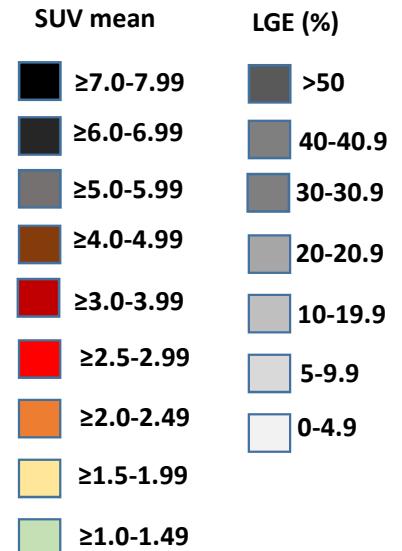
**Supplementary Figure 3:**  $[^{68}\text{Ga}]$ Ga-FAPI-uptake values depending on the presence of elevation of serum NT pro BNP. Results are presented as median with interquartile range. \* $p<0.05$ ; \*\* $p<0.01$ ; \*\*\* $p<0.001$ .



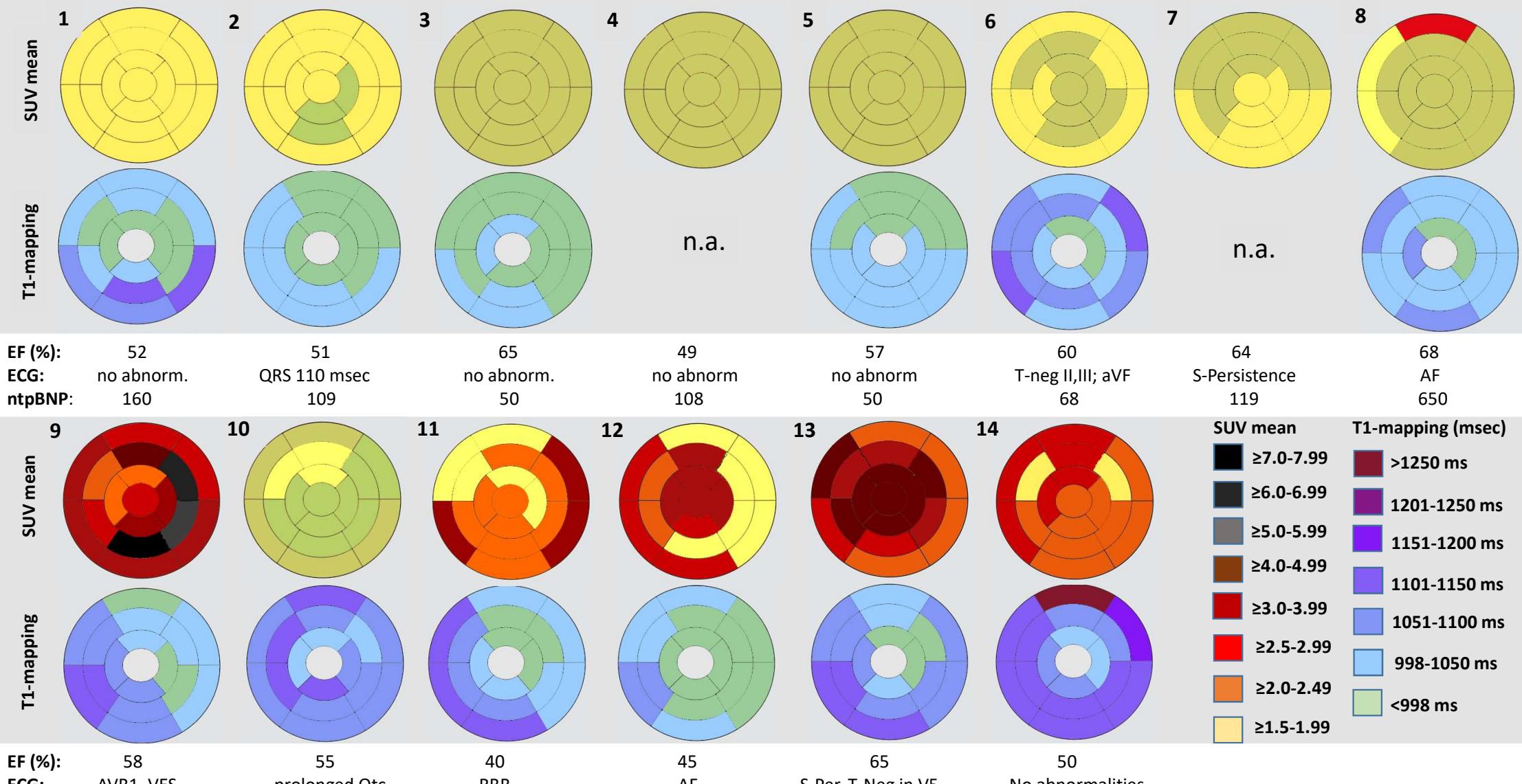
<b>EF (%):</b>	52	51	65	49	57	60	64	68
<b>ECG:</b>	no abnorm.	QRS 110 msec	no abnorm.	no abnorm	no abnorm	T-neg II,III; aVF	S-Persistence	AF
<b>ntpBNP:</b>	160	109	50	108	50	68	119	650



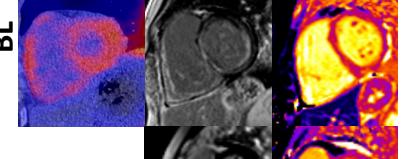
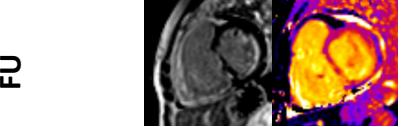
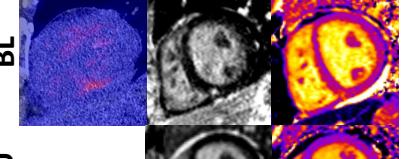
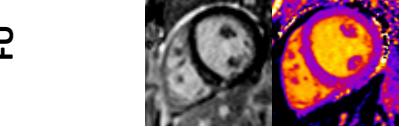
<b>EF (%):</b>	58	55	40	45	65	50
<b>ECG:</b>	AVB1, VES	prolonged Qtc	RBB	AF	S-Per, T-Neg in V5	No abnormalities
<b>ntpBNP:</b>	5253	740	111	1311	712	1170



**Supplementary Figure 4: Mapping of SUV mean values and LGE (%) to the 17 regions of the AHA-model in all SSc-participants (1-14) at baseline: The intensity of cMRI-based findings and <sup>68</sup>Ga-FAPI-04-uptake differ inter-individually arguing for different activity of the fibrotic remodeling process.** EF: ejection fraction (%), ECG: electrocardiogram, Nt-pro-BNP (N-terminal-pro-BNP, pg/ml), AVB: atrioventricular block. VES: ventricular extrasystoles. LAHB: left anterior hemi block, RBB: right bundle block, AF: atrial fibrillation, S-Per: S-persistence, T-neg: negative T, R-progr: R-progression.



**Supplementary Figure 5: Mapping of SUV mean values and T1-relaxation times to the 17 regions of the AHA-model in all SSc-participants (1-14) at baseline: The intensity of cMRI-based findings and <sup>68</sup>Ga-FAPI-04-uptake differ inter-individually arguing for different activity of the fibrotic remodeling process. EF: ejection fraction (%), ECG: electrocardiogram, Nt-pro-BNP (N-terminal-pro-BNP, pg/ml), AVB: atrioventricular block. VES: ventricular extrasystoles. LAHB: left anterior hemi block, RBB: right bundle block, AF: atrial fibrillation, S-Per: S-persistence, T-neg: negative T, R-progr: R-progression.**

	[ <sup>68</sup> Ga]Ga-FAPI-04-PET/CT	LGE	T1-Mapping	[ <sup>68</sup> Ga]Ga-FAPI-04 (MAV/TLFAP cm <sup>3</sup> )	LGE (%)	T1 relax. Time (msec)	Nt-pro-BNP (pg/ml)	EF (%)	ECG abnormalities
<b>A</b>	BL			SUV mean 2.1 MAV 286.0 TLFAPI 600.6	18.4	1032	111	40	RBB
					20.7	1054	277	20	RBB, accumulating VES
<b>B</b>	BL			SUV mean 2.3 MAV 21.0 TLFAPI 54.7	15.8	1108	1170	50	No abnormalities
					16.0	1041	301	57	No abnormalities

**Supplementary Figure 6: Follow up observations of participants 11 and 14.** Representative images of [<sup>68</sup>Ga]-FAPI-04-PET/CT scan and the corresponding cMRI (LGE and T1) at baseline (BL) and the corresponding sections of the same modalities on follow up (FU) are shown. Clinical findings including serum Nt-pro-BNP levels, EF(%) and ECG findings are tabulated. **A:** Clinical progress on follow up despite therapy with nintedanib and MMF (Participant 11). **B:** Myocardial fibrosis on MRI and low <sup>68</sup>Ga-FAPI-04 uptake at BL and stable MRI and improved clinical parameters on FU (Participant 14). BL: baseline, FU: follow up, VES: ventricular extrasystoles, RBB: right bundle branch block, EF: ejection fraction.