## Supplementary Table 1: American College of Rheumatology Neuropsychological Battery (ACR-NB)

Domain	Test	Domain	Test
1. Manual motor	Finger Tapping Test:	4. Language	1. COWAT
speed	1. Dominant Hand	processing <sup>57</sup>	2. ANIMALS
	2. Non-Dominant Hand		
2. Simple Attention	1. Trail A <sup>58</sup>	5. Learning and	Visuospatial <sup>60</sup> :
and Processing	2. Stroop colour naming	Memory	1. RCFT recall
Speed	3. Stroop word reading <sup>59</sup>		2. RCFT Delay Recall
			3. RCFT Recognition
			Verbal <sup>61</sup> :
			<ol><li>HVLT-R delayed recall</li></ol>
			5. HVLT-R Recognition
			6. HVLT-R total recall
3. Visual-spatial	1. RCFT Copy <sup>60</sup>	6. Executive	1. Stroop (interference score) <sup>59</sup>
Construction		Functioning	2. WAIS Letter-Number <sup>62</sup>
			3. WAIS-III Digit Symbol/SDMT <sup>63</sup>
			4. Trail B <sup>58</sup>
			<ol> <li>Auditory consonant Trigrams test<sup>64</sup></li> </ol>

RCFT: Rey-Osterrieth Complex Figure Test

COWAT: Controlled Oral Word Association Test

HVLT-R: Hopkins Verbal Learning Test, revised

SDMT: Symbol Digit Modalities Test

WAIS-III: Wechsler Adult Intelligence Scale, 3rd ed.

Our battery is identical to the ACR recommended cognitive battery for adults with SLE <sup>23,65</sup>, except that the Hopkins Verbal Learning Test – Revised (HVLT-R) was substituted for the California Verbal Learning Test (CVLT) <sup>25</sup> and the Trail Making Test part A <sup>58</sup> was added. The HVLT-R is shorter and an easier test compared to CVLT which could have rendered our battery less sensitive than the original ACR-NB. However, the addition of Trails A to our battery helps to offset that as it adds overall sensitivity to the battery. In addition, the Montreal Cognitive Assessment (MoCA) <sup>66,67</sup> was administered, and the Revised North American Adult Reading Test can assess for estimated pre-morbid IQ.

Supplementary Table 2: Baseline use of specific centrally acting angiotensin converting	
enzyme inhibitors (cACEi) and centrally-acting angiotensin receptor blockers (cARB)	

cACEi/cARB	Number (%)	
Candesartan	7 (13%)	
Valsartan	1 (2%)	
Fosinopril	1 (2%)	
Irbesartan/Ramipril	1 (2%)	
Lisinopril	1 (2%)	
Perindopril	4 (8%)	
Ramipril	37 (70%)	
Trandolapril	1 (2%)	
Total	53 (100%)	

Supplementary Table 3: Equivalent dosing for centrally-acting angiotensin converting enzyme inhibitors (cACEi) and centrally-acting angiotensin receptor blockers (cARB)

cACEi/cARB	Equivalent Dose (milligrams per day)
Ramipril	2.5
Captopril	50
Fosinopril	10
Lisinopril	10
Perindopril	4
Trandolapril	2
Candesartan	8
Valsartan	80

## Supplementary Table 4: Comparison of domain five (learning and memory) cognitive tests between treated (cACEi/cARB) and untreated participants

Cognitive test	cACEi/cARB	No cACEi/cARB	p-value	Ramipril use	No Ramipril	p-value
	use	use			use	
	Mean (SD)	Mean (SD)		Mean (SD)	Mean (SD)	
5.1 RCFT recall	-1.04 (1.25)	-0.812 (1.41)	0.27	-0.93 (1.25)	-0.84 (1.40)	0.73
5.2 RCFT delay recall	-1.12 (1.27)	-0.77 (1.34)	0.09	-0.91 (1.28)	-0.82 (1.34)	0.72
5.3 RCFT recognition	-0.66 (1.07)	-0.48 (1.13)	0.31	-0.52 (1.07)	-0.51 1.13)	0.97
5.4 HVLT-R delayed	-0.95 (1.21)	-0.88 (1.13)	0.72	-1.01 (1.19)	-0.88 (1.14)	0.52
recall						
5.5 HVLT-R recognition	-0.68 (1.26)	-0.86 (1.32)	0.36	-0.73 (1.31)	-0.84 (1.32)	0.65
5.6 HVLT-R total recall	-0.79 (1.02)	-0.87 (0.93)	0.57	-0.86 (0.96)	-0.86 (0.94)	0.98
RCFT: Rey-Osterrieth Complex	k Figure Test					
COWAT: Controlled Oral Wor	d Association Tes	t				

HVLT-R: Hopkins Verbal Learning Test, revised

Supplementary Table 5: Comparison of cognitive dysfunction (CD) between Ramipril treated
(cACEi/cARB) and untreated participants

VARIABLE	No CD n=184 (61.3%)	CD n=116 (38.7%)	p value
Use of Ramipril within 6 months - Yes (%)	20 (10.9%)	14 (12.1%)	0.75
Cumulative dose of Ramipril (mg/kg) - Mean (SD)	37.6 (170.8)	29.5 (106.4)	0.65