

Supplementary data

Supplementary Table 1. Incident myocardial infarctions during follow-up for the rPCI and mPCI groups.

rPCI (n=6)				
	Index PCI Lesion	FU Revasc. Lesion	Type of MI	Comment
Case 1	RCA		NSTEMI Type II	Hypertensive crisis, no culprit-lesion in coronary angiography
Case 2	LAD		NSTEMI Type II	Hypertensive crisis, no culprit-lesion in coronary angiography
Case 3	LAD		NSTEMI Type II	Critical aortic valve stenosis, no culprit-lesion in coronary angiography
Case 4	RCA		NSTEMI Type II	Atrial fibrillation, no culprit-lesion in coronary angiography
Case 5	LM/LAD	M1	NSTEMI Type I	Non TLR, PCI M1 carried out
Case 6	LAD	LAD	STEMI Type IVb	TLR, early (8 days after index PCI) in-stent thrombosis due to subtherapeutic INR levels (Vitamin-K Antagonist+Clopidogrel, ASA only for index procedure), Re-PCI LAD
mPCI (n=7)				
	Index PCI Lesion	FU Revasc. Lesion	Type of MI	Comment
Case 1	RCA	LAD	NSTEMI Type I	Non TLR, PCI LAD carried out
Case 2	LCx	RCA	NSTEMI Type I	Non TLR, PCI LAD carried out
Case 3	LAD	LAD	NSTEMI Type IVc	TLR, in-stent restenosis (11 months after the index PCI), comorbidities included a dialysis dependent chronic kidney disease, CABG carried out
Case 4	LAD	-	NSTEMI Type IVa	Planned LAD intervention at index PCI, dissection of target lesion during index procedure with no-reflow. Due to rising Troponin levels and ST-

				segment changes re-angiography with documentation of a unchanged coronary vessel situation. No further intervention attempted due to asymptomatic patient.
Case 5	LAD	-	NSTEMI Type IVa	Coronary perforation in index procedure with subsequent cardiac tamponade hours later, LAD after initial implantation of covered stents with good short-term result
Case 6	RCA	RCA	NSTEMI typ IVa	TLR, index PCI targeting a heavily calcified RCA stenosis using rotablation. During the index stay (1 day after index PCI) rising Troponin levels, new ST-Segment depression and chest pain was noted. Re-angiography with post-dilatation using high-pressure balloons and implantation of additional one DES due to suspected edge dissection.
Case 7	LCx	LAD	NSTEMI Type I	Index PCI with CFx intervention in the setting of a NSTEMI. During index stay persistent ST-Segment depression and chest pain with subsequent LAD PCI.

Type of myocardial infarction was classified according to the 4th Universal definition.[20] CABG Coronary artery bypass grafting; LCx: Left circumflex artery; FU Follow-up; LAD Left anterior descending artery; LM Left main coronary artery; M1 First marginal branch of the left circumflex artery; MI Myocardial infarction; NSTEMI Non-ST-Segment elevation myocardial infarction; PCI Percutaneous coronary intervention; RCA Right coronary artery; Revasc. Revascularisation; TLR Target lesion revascularisation.