Comparison of cardiac magnetic resonance imaging, functional and haemodynamic variables clinical endpoints in pulmonary arterial hypertension: insights from the REPAIR study

Supplemental Material

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1 SUPPLEMENTAL MATERIAL

Supplemental Methods

Statistical analysis

Cohen's d treatment effect size estimator

Cohen's d effect size is computed according to the formula:[1]

Cohen's
$$d = \frac{\text{Mean of the change from baseline to Week 26 or Week 52}}{\text{Standard Deviation of the change from baseline to Week 26 or Week 52}}$$

Cliff's Delta analysis (non-parametric)

The Cliff's Delta estimator is obtained according to the formula:[2]

Variables for which a post-baseline measurement greater than the baseline measurement denotes improvement:

$$Delta = \frac{\#(X_1 > X_2) - \#(X_1 < X_2)}{n_1 n_2}$$

Variables for which a post-baseline measurement less than the baseline measurement denotes improvement:

$$Delta = \frac{\#(X_2 > X_1) - \#(X_2 < X_1)}{n_1 n_2}$$

Where for each variable of interest:

- X₁ is the post-baseline measurement
- X₂ is the baseline measurement
- n₁ is the number of patients with a post-baseline measurement
- n₂ is the number of patients with a baseline measurement

Supplemental Appendix I

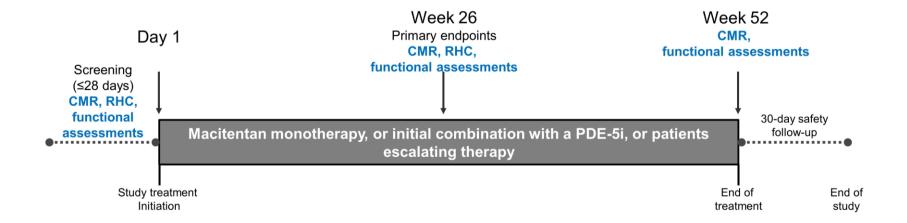
Institutional Review Boards/ethics committees

| Country | Site # | Name of IEC/IRB |
|---------------|--------|--|
| Malaysia | 9001 | Local: IJN Research Ethics Committee |
| Singapore | 1201 | Local: NHG Domain Specific Review Board |
| | 1202* | Local: NHG Domain Specific Review Board |
| Hong Kong | 1301 | Local: Institutional Review Board of the University of |
| | | Hong Kong/ Hospital Authority Hong Kong West |
| | | Cluster |
| | 1302 | Local: Institutional Review Board of the University of |
| | | Hong Kong/ Hospital Authority Hong Kong West |
| | | Cluster |
| | 1303 | Local: Research Ethics Committee (Kowloon |
| | | Central/Kowloon East Cluster) |
| Russia | 1101 | Local: Ethics Committee of Federal State Budgetary |
| | | Institution "Almazov National Medical Research |
| | | Centre" of the Ministry of Health of the Russian |
| | | Federation. |
| | 1102 | Local: Independent Ethics committee of clinical |
| | | trials of Federal State Budgetary Institution |
| | | "National Medical Research Centre of Cardiology" |
| | | of the Ministry of Health of the Russian Federation. |
| Israel | 8001 | Local: Ethics Helsinki Committee |
| | 8002 | Local: Ethics Helsinki Committee |
| United States | 1001* | Local: Partners Human Research Committee |
| of America | 1002* | Local: Western Institutional Review Board |
| | 1004* | Local: Western Institutional Review Board |
| | 1005 | Central: Western Institutional Review Board |
| | 1006 | Local: UT Southwestern Institutional Review Board |
| | 1007* | Local: Aurora Health Care Research Subject |
| | | Protection Program and IRB office |

| | 1008* | Local: Weill Cornell Medicine IRB |
|-------------|--------------|--|
| | 1009* | Local: University of Minnesota Human Research |
| | | Protection Program |
| | 1010* | Local: Western Institutional Review Board |
| | 1012 | Local: The Washington University in St Louis IRB |
| | 1014* | Local: Western Institutional Review Board |
| | 1015* | Local: Houston Methodist Research Institute IRB |
| Australia | 2001* | Central: The Prince Charles Hospital HREC |
| France | 3002, 3003*, | Central: Comité de Protection des Personnes Est III |
| | 3004*, 3005, | |
| | 3007, 3008, | |
| | 3010*, 3011 | |
| Germany | 4001, 4002*, | Central: Ethic Committee of the Medical Faculty of |
| | 4003, 4004*, | Heidelberg |
| | 4005, 4006*, | |
| | 4007, 4008* | |
| Italy | 5001* | Central: Comitato Etico Azienda Ospedaliero |
| | | Universitaria di Bologna Policlinico S.Orsola- |
| | | Malpighi |
| | 5002 | Local: Comitato di Bioetica della Fondazione |
| | | IRCCS Policlinico S. Matteo di Pavia |
| Netherlands | 6001, 6002, | Central: Medical Ethical Committee VU |
| | 6004, 6005*, | |
| | 6006* | |
| United | 7001*, 7003, | Central: NRES Committee Yorkshire & The Humber |
| Kingdom | 7005 | Leeds West Health Research Authority |

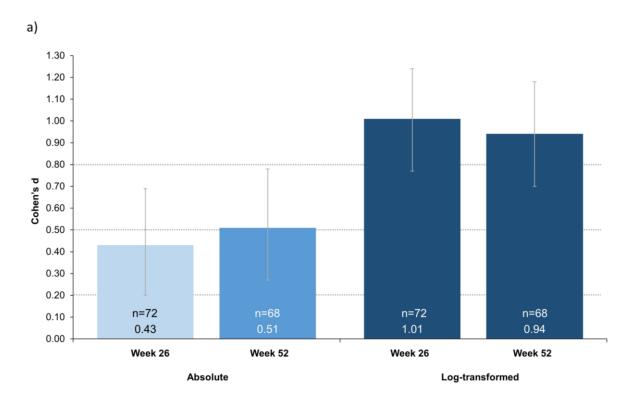
^{*}Sites that were initiated but that did not enrol any subjects.

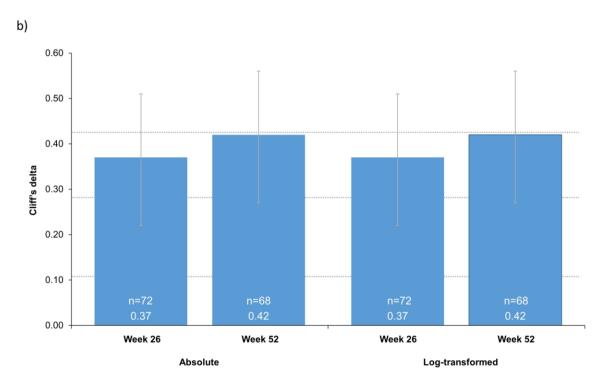
Supplemental Figure 1. Study design



Study design figure has been previously published.[3] CMR: cardiac magnetic resonance imaging; PDE-5i: phosphodiesterase 5 inhibitor; RHC: right heart catheterisation.

Supplemental Figure 2. Cohen's d (a) and Cliff's delta (b) statistics for absolute and log-transformed NT-proBNP (ng/L) values at Weeks 26 and 52 (safety set)

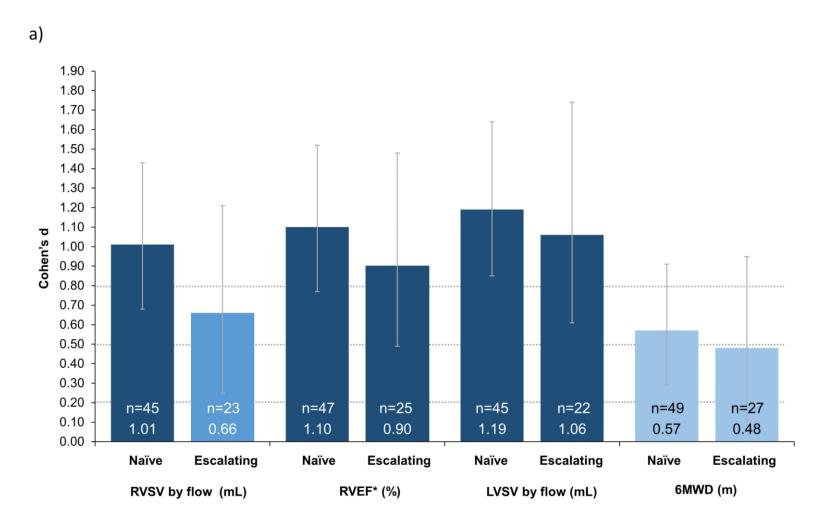


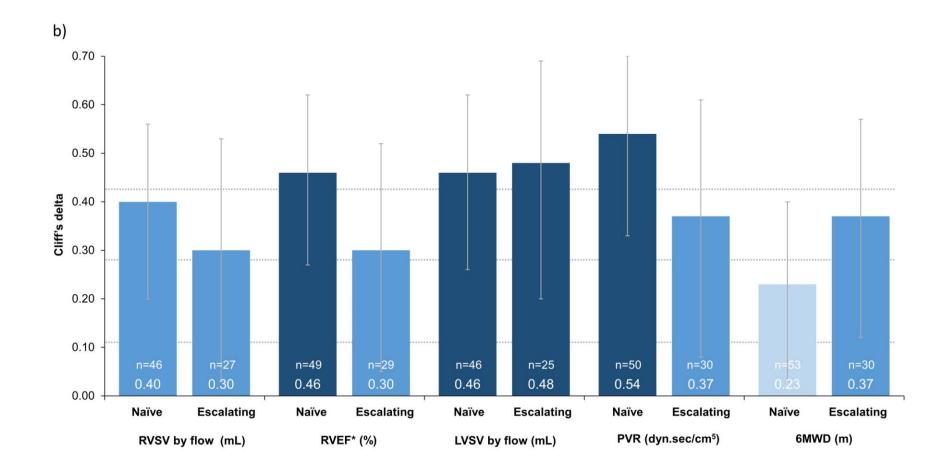


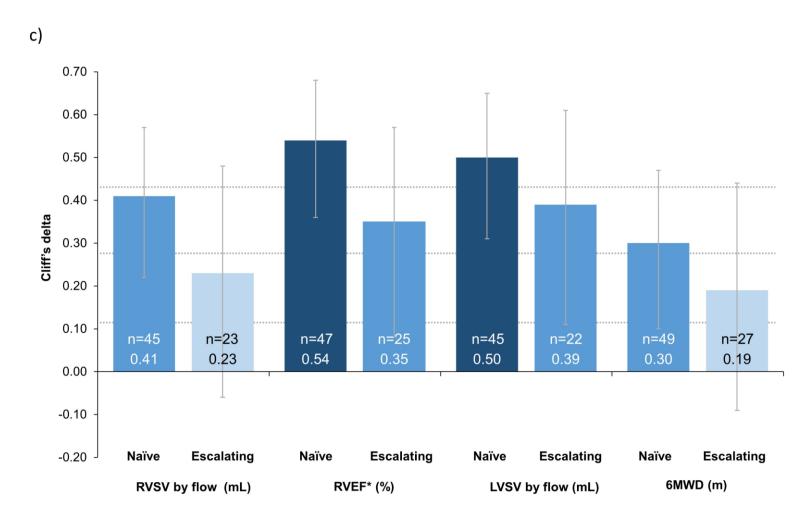
n = number of patients with baseline and post-baseline measurements for a specific variable; Cohen's d and Cliff's delta statistics are reported below the n values. For the standardised treatment effect sizes, ■dark blue indicates a large change, ■mid-blue indicates a medium change, ■light blue indicates a small/fair change. NT-proBNP:

N-terminal pro-brain natriuretic peptide.

Supplemental Figure 3. (a) Cohen's d statistic at Week 52, and Cliff's delta statistic at (b) Week 26, and (c) at Week 52 for CMR and functional variables in treatment-na $\ddot{}$ (N = 56) and escalating (N = 31) patients (safety set)



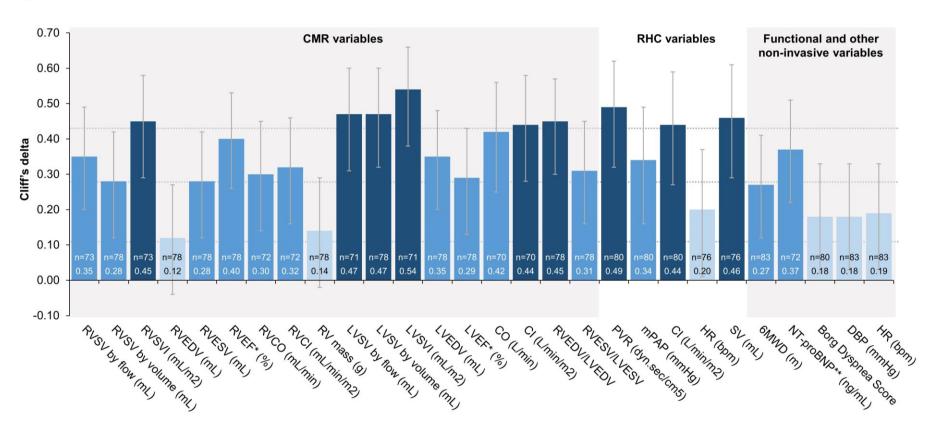


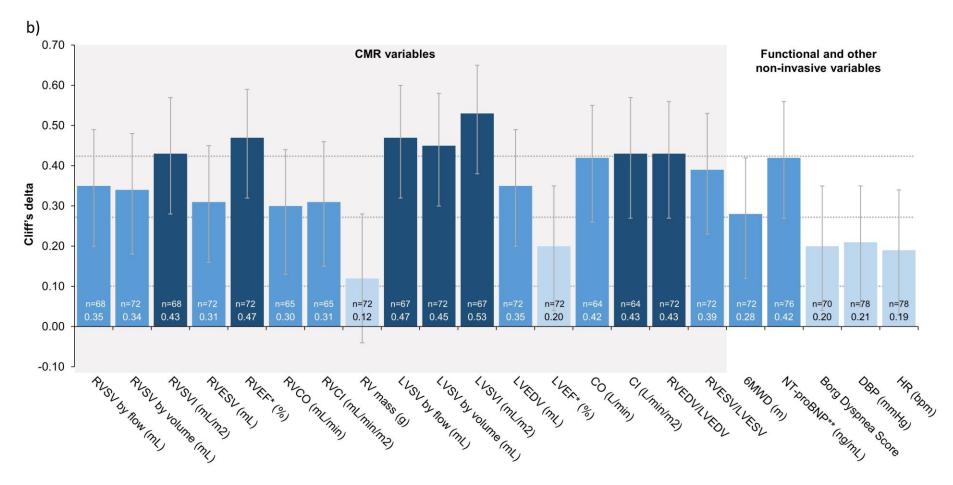


^{*}Determined from standard volumetric measurements. n = number of patients with baseline and post-baseline measurements for a specific variable; Cohen's d and Cliff's delta statistic are reported below the n values. For the standardised treatment effect sizes, dark blue indicates a large change, mid-blue indicates a medium change, light blue indicates a small/fair change. 6MWD: 6-minute walk distance; CMR: cardiac magnetic resonance imaging; LVSV: left ventricular stroke volume; PVR: pulmonary vascular resistance; RVEF: right ventricular ejection fraction; RVSV: right ventricular stroke volume.

Supplemental Figure 4. Cliff's delta statistics at (a) Week 26 and (b) Week 52 for CMR and functional and other non-invasive variables (safety set)







*Determined from standard volumetric measurements. **Log-transformed. Variables with no treatment effect are not included. n = number of patients with baseline and post-baseline measurements for a specific variable; Cliff's delta statistics are reported below the n values. For the standardised treatment effect sizes, dark blue indicates a large change, mid-blue indicates a medium change, light blue indicates a small/fair change. 6MWD: 6-minute walk distance; CI: cardiac index; CMR: cardiac magnetic resonance imaging; CO: cardiac output; DBP: diastolic blood pressure; HR: heart rate; LV: left ventricular; LVEDV: LV end-diastolic volume; LVEF: LV ejection fraction; LVESV: LV end-systolic volume; LVSV: LV stroke volume; LVSV: LVSV index; mPAP: mean pulmonary artery pressure; NT-proBNP: N-terminal pro-brain natriuretic peptide; PVR: pulmonary vascular resistance; RHC: right heart catheterisation; RV: right ventricular; RVCI: RV cardiac index; RVCO: RV cardiac output; RVEDV: RV end-diastolic volume; RVEF: RV ejection fraction; RVESV: RV end-systolic volume; RVSV: RV stroke volume; RVSV: stroke volume

References

- 1 Fitts DA. Commentary on "A review of effect sizes and their confidence intervals, Part I: The Cohen's d family": The degrees of freedom for paired samples designs. *TQMP* 2020; 16: 281–294.
- **2** Macbeth G, Razumiejczyk E, Ledesma RD. Cliff's Delta Calculator: A non-parametric effect size program for two groups of observations. *Universitas Psychologica* 2011; 10: 545–555.
- 3 Vonk Noordegraaf A, Channick R, Cottreel E, et al. The REPAIR Study: Effects of Macitentan on RV Structure and Function in Pulmonary Arterial Hypertension. JACC Cardiovasc Imaging 2022; 15: 240–253.