Supplementary Online Content

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eTable. Summary of Propensity Score-based Analyses

This supplementary material has been provided by the authors to give readers additional information about their work.

eTable. Summary of Propensity Score-based Analyses

Covariates included in propensity score model	Number of Subjects with a propensity score generated†	Distribution of Propensity scores in NVP group (Median (IQR))	Distribution of Propensity scores in EFV group (Median (IQR))	Hazard ratio with inclusion of the propensity score* (95% CI)	Comments
Age at initiation, date of initiation, sex, baseline CDC clinical category, baseline CDC immunologic category, receipt of TB treatment, NRTI regimen, receipt of single-dose NVP, weight-for-height z-score, and height-for-age z-score	289	0.74 (0.61-0.84) N=174	0.47 (0.31-0.60) N=115	1.9 (1.0-3.8)	This model incorporates the maximum number of measured covariates with potential to have impacted regimen selection.
Age at initiation, date of initiation, sex, baseline CDC clinical category, baseline CDC immunologic category, receipt of TB treatment, NRTI regimen, receipt of single-dose NVP, weight-for-height z-score, and height-for-age z-score	698	0.64 (0.48-0.74) N=340	0.39 (0.21-0.54) N=358	1.9 (1.2-2.9)	This model incorporates all measured covariates with potential to have impacted regimen selection, except for baseline viral load.‡
Age at initiation, date of initiation, sex, baseline CDC clinical category, baseline CDC immunologic category, receipt of TB treatment	804	0.58 (0.45-0.70) N=383	0.41 (0.24-0.55) N=421	1.8 (1.2-2.7)	This model is limited to the 6 variables considered most likely to have influenced treatment choice.

*Reported hazard ratios are based on the utilization of the propensity score as a continuous variable. In all cases, the odds ratio was slightly higher when propensity score quintiles were utilized.

†-missing data may result in absence of propensity score for individual patients

‡-baseline viral load values were almost never available when treatment decisions were made; either they were not obtained at all or when obtained, returned well after treatment was initiated.