Supplementary data

Length Polymorphism in *Heme Oxygenase-1* and Risk of Chronic Kidney Disease among Coronary Artery Disease Patients

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Supplementary Table 1. Adjusted hazard ratio (95% confidence interval) of total bilirubin, serum ferritin and malondialdehyde for renal endpoints[a] in CAD patients with a median follow-up of 10.2 years

	Adjusted Hazard Ratio (95% Confidence Interval)		
	Bilirubin For each 1 mg/dL increase	**Ferritin For each 100 μg/L increase**	**Malondialdehyde For each 1 μmol/L increase**
Cox regression model[b]	0.91 (0.86–0.95) *P* = 0.022	1.20 (1.03–1.32) *P* = 0.012	1.23 (1.01–1.42) *P* = 0.010
Cox with time-varying covariate model[c]	0.90 (0.85–0.99) *P* = 0.048	1.16 (0.99–1.35) *P* = 0.058	1.12 (0.90–1.45) *P* = 0.072

[a]Renal endpoints are serum creatinine doubling and/or end-stage renal disease necessitating long-term renal replacement therapy.

[b]A Cox regression model was adjusted for age, sex, smoking status, diabetes, hypertension, prior congestive heart failure, stroke or peripheral arterial disease, total cholesterol, high-density lipoprotein-cholesterol, serum albumin, hemoglobin, estimated glomerular filtration rate, the presence of proteinuria at baseline, and the use of renin-angiotensin system blockades or statins.

[c]The multivariate Cox regression model was further analyzed using the cardiac events as the time-dependent covariates.

[d]To avoid multicollinearity, the genotypes of length polymorphism in *HO-1* promoter were not offered in the Cox regression model and Cox with time-varying covariate model.