SUPPLEMENTAL MATERIAL

Title: Sex Differences in Long-term Mortality after Myocardial Infarction: A Systematic Review **Authors:** Emily M. Bucholz, MPH, Neel M. Butala, BA, Saif S. Rathore, MD, PhD, MPH, Rachel P. Dreyer, PhD, Alexandra J. Lansky, MD, Harlan M. Krumholz, MD, SM

Supplemental Tables: 3 **Supplemental Figures:** 1

Supplemental Table S1. Characteristics of excluded studies

Author, Year	Study Name, Years of	Same Study	Reason for Exclusion
a 1 2222 ^{S1}	Inclusion	Population	
Crowley, 2003 ^{S1}	Worcester Heart Attack	Goldberg, 1993	- Limited to diabetics only
2 1 100057	Study, 1975-1999	0 1 11 4000	- Shorter follow-up of 5 years
Donahue, 1993 ^{S2}	Worcester Heart Attack	Goldberg, 1993	- Older study
	Study, 1974-1986		- Results are stratified by
51: 2044 ^{S3}	N 6		diabetes
Eliasson, 2011 ^{S3}	Northern Sweden MONICA	Isaksson 2011	- No adjusted gender
Galatius, 1998 ^{S4}	Registry, 1989-2006	Calatina Jamaan	estimates reported
Galatius, 1998	Danish Verapamil Infarction	Galatius-Jensen,	- Includes probable and no
	Trial, 1979-1981	1996	infarction patients
			 Primary outcome reinfarction
Grundtvig, 2012 ^{S5}		Crundtuia 2011	
Grundtvig, 2012		Grundtvig, 2011	 No adjusted gender estimates
Herlitz 1996 (<i>Clinical</i>	Sahlaronska University	Welin, 2000	- No adjusted gender
Cardiology) ^{S6}	Sahlgrenska University Hospital, 1986-1987	Weiiii, 2000	estimates reported
Herlitz 1996 (Amer J	Sahlgrenska University	Welin, 2000	- No adjusted gender
Hypertens) ^{S7}	Hospital, 1986-1987	Weiiii, 2000	estimates reported
riyperterisj	1103pitai, 1300-1307		- Shorter follow-up of 5 years
Herlitz 1997 ^{S8}	Sahlgrenska University	Welin, 2000	- No adjusted gender
TICTITE 1557	Hospital, 1986-1987	W CIIII, 2000	estimates reported
	1103pital, 1300-1307		- Strong suspicion and vague
			suspicion of AMI included
			- Shorter follow-up of 5 years
Koek 2007 ^{S9}	Dutch National Hospital	Koek, 2006	- Results stratified by
	Discharge Register, 1995		diabetes
Launbjerg 1994	Danish Verapamil Infarction	Galatius-Jensen,	- Includes probable and no
(<i>BMJ</i>) ^{S10}	Trial, 1979-1981	1996	infarction
	•		- No adjusted gender
			estimates reported
Launbjerg 1994	Danish Verapamil Infarction	Galatius-Jensen,	- Includes AMI and non-AMI
(Cardiology) ^{S11}	Trial, 1979-1981	1996	patients
			- No adjusted gender
			estimates reported
Norhammar 2008 ^{S12}	RIKS-HIA, 1995-2002	Lawesson 2012	- Smaller sample size
			- Results stratified by
			diabetes
Peltonen 2000 ^{S13}	Northern Swedish MONICA	Isaksson 2011	- No age-adjustment
	Study, 1985-1994		- Shorter follow-up

REFERENCES

- S1. Crowley A, Menon V, Lessard D, Yarzebski J, Jackson E, Gore JM, Goldberg RJ. Sex differences in survival after acute myocardial infarction in patients with diabetes mellitus (Worcester Heart Attack Study). Am Heart J. 2003;146:824-31.
- S2. Donahue RP, Goldberg RJ, Chen Z, Gore JM, Alpert JS. The influence of sex and diabetes mellitus on survival following acute myocardial infarction: a community-wide perspective. J Clin Epidemiol. 1993;46:245-52.
- S3. Eliasson M, Jansson JH, Lundblad D, Naslund U. The disparity between long-term survival in patients with and without diabetes following a first myocardial infarction did not change between 1989 and 2006: an analysis of 6,776 patients in the Northern Sweden MONICA Study. Diabetologia. 2011;54:2538-43.
- S4. Galatius S, Launbjerg J, Mortensen LS, Hansen JF. 5993 survivors of suspected myocardial infarction. 10 year incidence of later myocardial infarction and subsequent mortality. Eur Heart J. 1998;19:564-9.
- S5. Grundtvig M, Hagen TP, Amrud ES, Reikvam A. Reduced life expectancy after an incident hospital diagnosis of acute myocardial infarction Effects of smoking in women and men. Int J Cardiol. 2013;167:2792-7.
- S6. Herlitz J, Bang A, Hartford M, Karlson BW. Influence of gender on survival, mode of death, reinfarction, use of medication, and aspects of well being during a period of five years after onset of acute myocardial infarction. Clin Cardiol. 1996;19:555-61.
- S7. Herlitz J, Bang A, Karlson BW. Five-year prognosis after acute myocardial infarction in relation to a history of hypertension. Am J Hypertens. 1996;9:70-6.
- S8. Herlitz J, Karlson BW, Lindqvist J, Sjolin M. Long-term prognosis in men and women coming to the emergency department with chest pain or other symptoms suggestive of acute myocardial infarction. Eur J Emerg Med. 1997;4:196-203.
- S9. Koek HL, Soedamah-Muthu SS, Kardaun JW, Gevers E, de Bruin A, Reitsma JB, Bots ML, Grobbee DE. Short- and long-term mortality after acute myocardial infarction: comparison of patients with and without diabetes mellitus. Eur J Epidemiol. 2007;22:883-8.
- S10. Launbjerg J, Fruergaard P, Madsen JK, Mortensen LS, Hansen JF. Ten year mortality in patients with suspected acute myocardial infarction. BMJ. 1994;308:1196-9.
- S11. Launbjerg J, Fruergaard P, Madsen JK, Mortensen LS, Hansen JF. Ten-year mortality of patients admitted to coronary care units with and without myocardial infarction. Risk factors from medical history and diagnosis at discharge. DAVIT-Study Group. Danish Verapamil Infarction Trial. Cardiology. 1994;85:259-66.
- S12. Norhammar A, Stenestrand U, Lindback J, Wallentin L. Women younger than 65 years with diabetes mellitus are a high-risk group after myocardial infarction: a report from the Swedish Register of Information and Knowledge about Swedish Heart Intensive Care Admission (RIKS-HIA). Heart. 2008;94:1565-70.
- S13. Peltonen M, Lundberg V, Huhtasaari F, Asplund K. Marked improvement in survival after acute myocardial infarction in middle-aged men but not in women. The Northern Sweden MONICA study 1985-94. J Intern Med. 2000;247:579-87.

Supplemental Table S2. Study quality characteristics

Study Characteristic	Reference	
Study Design		
Source of data		
Registries	6,9,11,12,14,16,17,18,20,21,26,27,30,31,35,36,41,42,44	
Randomized clinical trials	19,33,37,38	
Hospital/community cohort	7,8,10,13,15,22,23,24,28,29,32,34,39,40,43,45	
,		
Retrospective study design	6,14	
Diagnosis of AMI		
2 of 3 established criteria [*]	8,9,11,12,13,15,17,18,20,21,22,24,28,30,31,33,35,36,37,38,	
	39,40,41,42,43,44,45	
1 of 3 established criteria [*]	10,19,29	
Discharge diagnosis/ICD-9 codes	6,14,16,26,27,34	
Did not specify criteria	7,23,32	
Inclusion Criteria		
Specific conditions		
Heart failure	31	
Cardiac arrest	29	
Ventricular fibrillation	43	
A	44 40 20 24 20 26 20 40 44	
Age criteria	11,18,20,21,28,36,38,40,41	
Treatment		
PCI only	13,29,30	
Streptokinase only	22	
Follow-Up		
Start-point	0.0.40.44 4.0.40.44 4.7.00.04.00.00.04.05.07.00.00.05.00.40.45	
Admission	8,9,10,11 [‡] ,12,13,14,17,20,21,22,23,24,26,27,29,32,35,39,42,45	
Discharge	6,10,16,19,30,34,41,43,44	
15 days	22,38	
30 days	7,11,12,13,15,18,21,23,28,33,35,36	
3 months	40	
After onset of heart failure	31	
After randomization [§]	37	
Multiple start points analyzed	10,11,12,13,21,22,23,35	
Length of follow-up		
<10 years	6,7,8,9,10,11,12,13,16,18,24,26,27,28,29,30,31,32,33,34,35,36,37	
≥10 years	14,15,17,19,20,21,22,23,38,39,40,41,42,43,44,45	
	± ,,±5,±7,±5,E0,E±,E5,50,55,∓0,∓±,∓5,₹5,₹₹,₹5	

Source of follow-up data

Population registries/death 11,14,16,17,18,19,20,24,27,28,29,33,34,35,38,40,42,45

certificates 7,9,10,13,21,31,39,43

Medical records/patient contact 6,26,32

Administrative claims data 8,12,15,23,30,36,37,41,44

Population registries and medical

records

Not specified

Provided information on losses to 8,9,10,13,15,16,18,19,20,21,27,28,30,33,35,36,39,40,41,45

follow-up

^{*} Criteria for diagnosis of AMI included: 1) ischemic symptoms, 2) ECG changes, and 3) elevations in cardiac enzymes

[†] In study by Hellerman et al, 59% of heart failure episodes occurred within 30 days of MI and 68% within 1 year post-MI

[‡] In study by Lowel et al, survival was calculated only among patients who survived first 24 hours of admission.

[§] In study by Reynolds et al, median (IQR) time from MI to randomization was 8.5 (5.0, 17.0) in women and 8.0 (5.0, 16.0) in men.

Supplementary Table S3. Distribution of risk factors, clinical presentation, and treatment in men vs. women across studies

Characteristic	Higher Percentage in	No Difference	Lower Percentage in
Citaracteristic	Higher Percentage in Women	Between Genders	Women
Risk Factors/Comorbid (Detween denders	vvoilleii
Diabetes Mellitus	6, 11, 12, 13, 16, 18,	9, 35, 41	
Diabetes Mellitus	19, 20, 21, 24, 26, 27,	9, 33, 41	
	32, 34, 37, 39, 40, 42,		
	44, 45		
History of CHF	6, 9, 16, 24, 26, 37, 42	32	
Hypertension	6, 9, 11, 12, 16, 18,	13, 15, 35	
, p a. ca	19, 20, 21, 24, 32, 34,	10, 10, 00	
	37, 39, 41, 42, 44, 45		
Smoking	,,,,,		9, 11, 12, 13, 15, 18,
Ü			19, 32, 34, 35, 37, 39,
			41, 42, 45
Prior MI		13	6, 19, 22, 32, 34, 37,
			42, 45
Obesity	9, 32		35
Angina	34, 41	12, 15, 19, 21, 37	
Depression/Psychiatric	24, 32, 40, 41	35	
History			
Renal Dysfunction	6, 26, 32, 45	16, 42	
Hypercholesterolemia	9	12, 13, 37, 45	6
Clinical Presentation			
Killip Class 3 or 4	12, 21, 42	15	
Anterior MI	37, 44	12, 13, 15, 19, 21	
Cardiac Arrest		11, 19	
CHF/Pulmonary	15, 24, 37, 44	11, 19	
Edema			
Cardiogenic Shock	11, 44	13, 15, 19	
Heart block	15	19, 44	
Arrhythmias		9, 12, 15, 21, 32, 44	19
Treatment			
Coronary angiography		21	6, 11, 16, 24, 42
CABG		12, 21, 32, 44	6, 9, 11, 16
PCI		9, 11, 32, 45	6, 12, 16, 44
Fibrinolytics		32, 45	11, 34, 44
In-Hospital Medications			2.4
Aspirin	42		34
Beta-blockers	42	44.44	11, 12, 34, 44
Calcium-channel	42	11, 44	
blockers	14 24 42 44		
Diuretics	11, 34, 42, 44		
ACE inhibitors	11, 12, 42	1.1	43
Statins	42	11	42
Nitrates	42	11	34, 44

Discharge Medication	S		
Aspirin		9, 16, 37, 45	42
Beta-blockers		9, 16, 32, 37	11, 12, 24, 34, 42, 45
Calcium-channel	16, 24, 37, 45	9, 11	
blockers			
Diuretics	9, 11, 16, 34, 37, 45		
ACE inhibitors	11, 24	12, 32, 34, 37	16, 42, 45
Statins	11	32, 37	24, 34, 42, 45
Nitrates	16, 37, 45	9, 11, 24	

Abbreviations: ACE, angiotensin-converting enzyme; CABG, coronary artery bypass grafting; CHF, congestive heart failure; MI, myocardial infarction; PCI, percutaneous coronary intervention.