

Appendix 3: Supplementary tables [posted as supplied by author]

Table A. Likelihood ratios associated with CCTA findings

CCTA finding	Number of patients and percentage with CCTA finding among patients who suffered the primary outcome N=74	Number of patients and percentage with CCTA finding among patients who did not suffer the primary outcome N=881	Likelihood ratio	95% CI
Normal	3 (4.1%)	78 (8.9%)	0.46	0.15-1.42
Non-obstructive	19 (25.7%)	352 (40.0%)	0.64	0.43-0.95
Obstructive	29 (39.2%)	328 (37.2%)	1.05	0.78-1.42
Extensive obstructive	23 (31.1%)	123 (14.0%)	2.23	1.53-3.24

Table B. Models to predict 30-day cardiovascular death and myocardial infarction for patients without a prior history of coronary artery bypass graft surgery.

Model with the RCRI score and CCTA variables, C=0.63 (95% CI, 0.56-0.70)				
RCRI				
0	320	15 (4.7)	1.00	0.21**
1	353	25 (7.1)	1.46 (0.77-2.77)	-
2	143	13 (9.1)	1.75 (0.82-3.73)	0.25
≥3	35	5 (14.3)	2.84 (1.01-7.96)	0.15
CCTA				
Normal	81	3 (3.7)	1.00	0.22*
Non-obstructive	371	19 (5.1)	1.48 (0.44-5.00)	-
Obstructive	279	23 (8.2)	2.23 (0.67-7.44)	0.53
Extensive Obstructive	120	13 (10.8)	2.72 (0.77-9.60)	0.19
				0.12

* Overall p-value for 4-category CCTA.

** Overall p-value for 4-category RCRI.

CCTA = Coronary Computed Tomographic Angiography. RCRI = Revised Cardiac Risk Index.

Table C. Risk reclassification for those who suffered the primary outcome and for those who did not suffer the primary outcome in the model that included CCTA findings compared to the model that only included the RCRI scores^a

Models for 30 day probability of cardiovascular death and myocardial infarction								
Model that included CCTA findings								
RCRI scores only	<i>Patients who had an event</i>				<i>Patients who did not have an event</i>			
	<5%	5% to 10%	>10% to 15%	>15%	<5%	5% to 10%	>10% to 15%	>15%
<5%	5	10	0	0	191	114	0	0
5-10%	0	19	10	0	35	292	51	0
>10- 15%	0	12	0	7	12	110	0	37
>15%	0	0	1	10	0	3	7	29

^a The CCTA risk reclassification for those who suffer the primary outcome was: $(27-13)/74 = 18.9\%$; 95% CI, 2.2-35.7; $p=0.03$. The risk reclassification for those who did not suffer the primary outcome was: $(167-202)/881 = -4.0\%$; 95% CI, -8.3- 0.30; $p=0.07$.

Table D. Post hoc risk reclassification for those who suffered the primary outcome and for those who did not suffer the primary outcome in the model that included CCTA findings compared to the model that only included the RCRI scores that used the European Society of Cardiology risk categories

Models for 30 day probability of cardiovascular death and myocardial infarction						
Model that included CCTA findings						
	<i>Patients who had an event</i>			<i>Patients who did not have an event</i>		
RCRI scores only	<1%	1% to 5%	>5%	<1%	1% to 5%	>5%
<1%	0	0	0	0	0	0
1% to 5%	0	5	10	0	191	114
>5%	0	0	59	0	47	529

^a The CCTA risk reclassification for those who suffer the primary outcome was: $(10-0)/74 = 13.5\%$; 95% CI, 5.1-21.9%; $p=0.002$. The risk reclassification for those who did not suffer the primary outcome was: $(47-114)/881 = -7.6\%$; 95% CI, -10.4 - -4.8; $p<0.001$.

Table E. Post hoc sensitivity model to predict 30-day cardiovascular death and myocardial infarction that used a 70% stenosis to define obstructive and extensive obstructive coronary artery disease

Model with the CCTA findings and Revised Cardiac Risk Index scores, C=0.68; 95% CI, 0.62-0.74				
	Number of Patients	Number of Patients with Event (%)	Hazard Ratio 95% CI	P-value
RCRI scores				0.027 ^a
0	320	15 (4.7)	1.00	-
1	407	29 (7.1)	1.32 (0.70, 2.48)	0.397
2	178	19 (10.7)	1.64 (0.80, 3.32)	0.174
≥3	50	11 (22.0)	3.34 (1.47, 7.56)	0.004
CCTA findings				<0.001 ^b
Normal	81	3 (3.7)	1.00	-
Non-obstructive	489	24 (4.9)	1.41 (0.42, 4.67)	0.578
Obstructive	296	27 (9.1)	2.27 (0.69, 7.52)	0.179
Extensive Obstructive	89	20 (22.5)	5.49 (1.61, 18.71)	0.006

^a Overall p-value for 4-category Revised Cardiac Risk Index

^b Overall p-value for 4-category CCTA.

CCTA = Coronary Computed Tomographic Angiography. RCRI = Revised Cardiac Risk Index.

Table F. Post hoc risk reclassification for those who suffered the primary outcome and for those who did not suffer the primary outcome in the model that included CCTA findings compared to the model that only included the RCRI scores that used a 70% stenosis to define obstructive and extensive obstructive coronary artery disease

Models for 30 day probability of cardiovascular death and myocardial infarction						
Model that included CCTA findings						
	<i>Patients who had an event</i>			<i>Patients who did not have an event</i>		
RCRI scores only	<5%	5% to 15%	>15%	<5%	5% to 15%	>15%
<5%	6	9	0	240	65	0
5% to 15%	0	33	15	47	440	50
>15%	0	1	10	0	13	26

^a The CCTA risk reclassification for those who suffer the primary outcome was: $(24-1)/74 = 31.1$; 95% CI, 17.8-44.3%; $p < 0.001$. The risk reclassification for those who did not suffer the primary outcome was: $(60-115)/881 = -6.2$ %; 95% CI, -9.2- -3.3; $p < 0.001$.

Table G. Post hoc risk reclassification for those who suffered the primary outcome and for those who did not suffer the primary outcome in the model that included CCTA findings compared to the model that only included the RCRI scores. Including only patients with 1 or 2 of the following: history of CAD, age >70, diabetes requiring treatment

Models for 30 day probability of cardiovascular death and myocardial infarction						
Model that included CCTA findings						
	<i>Patients who had an event</i>			<i>Patients who did not have an event</i>		
RCRI scores only	<5%	5% to 15%	>15%	<5%	5% to 15%	>15%
<5%	2	8	0	160	100	0
5% to 15%	0	33	3	34	338	27
>15%	0	0	8	0	8	20

^a The CCTA risk reclassification for those who suffer the primary outcome was: $(11-0)/54 = 20.4\%$; 95% CI, 8.3 - 32.4; $p < 0.001$. The risk reclassification for those who did not suffer the primary outcome was: $(42-127)/687 = -12.4\%$; 95% CI, -16.1 - -8.7; $p < 0.001$.