Allegretti et al, AJKD, "Changes in Kidney Function After Transjugular Intrahepatic Portosystemic Shunts Versus Large-Volume Paracentesis in Cirrhosis: A Matched Cohort Analysis"

Table S1. Multivariable models comparing TIPS vs. serial LVP to predict death by 90 days, stratified by baseline eGFR (A and B) and for all subjects (C).

	Odds Ratio	95% CI	P value
A. Baseline eGFR <60 mL/min/1.73 m ² TIPS	1.30	[0.62, 2.72]	0.5
Serial LVP	[reference]	[0.02, 2.72]	0.5
Age (per year)	1.03	[1.00, 1.07]	0.07
Baseline eGFR (per mL/min/1.73 m ²)	0.96	[0.94, 0.99]	0.004
B. Baseline eGFR ≥60 mL/min/1.73 m ²			
TIPS	0.56	[0.22, 1.40]	0.2
Serial LVP	[reference]		
Age (per year)	1.04	[0.99, 1.08]	0.1
Baseline eGFR (per mL/min/1.73 m ²)	1.00	[0.98, 1.03]	0.9
C. All subjects			
TIPS	0.66	[0.36, 1.21]	0.05
Serial LVP	[reference]	, ,	
Age (per year)	1.03	[1.00, 1.06]	0.03
Baseline eGFR* (per mL/min/1.73 m ²)	1.00	[0.99, 1.01]	0.7
Interaction Term (eGFR + TIPS)	0.97	[0.96, 0.99]	0.01

Key: TIPS (transjugular intrahepatic portosystemic shunt), LVP (large volume paracentesis), eGFR (estimated glomerular filtration rate), CI (confidence interval), NASH (non-alcoholic steatohepatitis). Follow-up was measured for 90 days starting from the day of TIPS placement in the TIPS cohort, and from day 0 to day 90 in the LVP cohort. * Baseline eGFR centered at 60 mL/min/1.73 m² for interaction analysis.