Supplementary table 1 Association between gender and efficacy of randomised treatment – clinical outcomes

Outcomes	Gender	Pre-hospital ticagrelor (n=906)		In-hospital ticagrelor (n=952)		Model, n	Adjusted hazard ratio ≠ (95% CI)	P-value (interaction) ≠
		N	Patients with endpoint, n (%)	N	Patients with endpoint, n (%)			
Composite of Death/MI/Stroke/Urgent Revasc/Definite Acute Stent Thrombosis	Female	173	13 (7.5)	196	12 (6.1)	1613	0.98 (0.42-2.27)	0.87
	Male	733	28 (3.8)	756	30 (4.0)		0.90 (0.51-1.59)	
Composite of Death/MI/Urgent Revasc	Female	173	13 (7.5)	196	10 (5.1)	1613	1.32 (0.55-3.20)	0.55
	Male	733	26 (3.5)	756	24 (3.2)		0.95 (0.52-1.76)	
All-cause mortality	Female	173	13 (7.5)	196	8 (4.1)	1613	1.59 (0.61-4.12)	0.93
	Male	733	17 (2.3)	756	11 (1.5)		1.50 (0.60-3.74)	
Myocardial infarction	Female	173	1 (0.6)	196	2 (1.0)	1613	0.44 (0.04-4.95)	0.72
	Male	733	6 (0.8)	756	8 (1.1)		0.72 (0.25-2.09)	
Stroke	Female	173	1 (0.6)	196	2 (1.0)	1613	0.54 (0.05-5.90)	0.99
	Male	733	3 (0.4)	756	0 (0.0)		Nt estimated	
Urgent revascularization	Female	173	1 (0.6)	196	1 (0.5)	1613	0.86 (0.05-14.07)	0.76
	Male	733	4 (0.5)	756	7 (0.9)		0.54 (0.15-1.87)	
Definite Acute Stent Thrombosis	Female	173	1 (0.6)	196	2 (1.0)	1613	0.37 (0.03-4.27)	0.49
	Male	733	1 (0.1)	756	9 (1.2)		0.12 (0.01-1.02)	
Acute Stent Thrombosis (definite or probable)	Female	173	7 (4.0)	196	4 (2.0)	1613	1.31 (0.37-4.69)	0.52
	Male	733	14 (1.9)	756	16 (2.1)		0.80 (0.35-1.80)	

≠ Adjusted hazard (for female versus male) and p-values for interaction was calculated from Cox proportional hazard model including gender, age, weight, prior myocardial infarction, prior percutaneous coronary intervention, diabetes, hypertension, non-hemorrhagic stroke, gastrointestinal bleeding, time from symptom onset to pre-hospital ECG, admission KIllip class, baseline hemoglobin, estimated glomerular filtration rate, glycoprotein IIb/IIIa inhibitor use during index procedure, location of myocardial infarction

Supplementary table 2 Association between gender and efficacy of randomised treatment – primary and secondary outcomes

Outcomes	Gender	Pre-hospital ticagrelor (n=906)		In-hospital ticagrelor (n=952)		Model N ≠	Adjusted odds ratio ≠ (95% CI)	P-value (interaction) ≠
		N	Patients with endpoin, n (%)	N	Patients with endpoint, n (%)			
Absence of ST segment elevation resolution ≥ 70% pre-PCI	Female	142	122 (85.9)	168	147 (87.5)	1419	0.75 (0.37-1.53)	0.71
	Male	632	550 (87.0)	656	575 (87.7)		0.85 (0.59-1.23)	
Absence of TIMI flow grade 3 in infarct related artery at initial angiography	Female	155	127 (81.9)	175	135 (77.1)	1478	1.36 (0.76-2.41)	0.19
	Male	669	554 (82.8)	681	576 (84.6)		0.88 (0.64-1.20)	
Absence of ST segment resolution ≥ 70% AND absence of TIMI flow grade 3 in infarct related artery pre-PCI	Female	129	120 (93.0)	153	142 (92.8)	1304	1.07 (0.41-2.81)	0.84
	Male	590	557 (94.4)	598	568 (95.0)		0.96 (0.57-1.62)	
Absence of ST-segment resolution ≥70% after PCI	Female	144	61 (42.4)	163	80 (49.1)	1409	0.76 (0.47-1.25)	0.51
	Male	629	291 (46.3)	650	326 (50.2)		0.92 (0.72-1.17)	
Absence of TIMI flow grade 3 in infarct related artery after PCI	Female	144	30 (20.8)	154	37 (24.0)	1368	0.93 (0.51-1.71)	0.98
	Male	621	107 (17.2)	631	117 (18.5)		0.92 (0.68-1.26)	
Absence of ST segment resolution ≥70% AND absence of TIMI flow grade 3 in infarct related artery after PCI	Female	125	60 (48.0)	138	81 (58.7)	1235	0.64 (0.38-1.10	0.13
	Male	562	282 (50.2)	565	290 (51.3)		1.01 (0.78-1.32)	

≠≠ Adjusted odds ratio (for female versus male) and p-values for interaction was calculated from logistic regression model including gender, age, weight, prior myocardial infarction, prior percutaneous coronary intervention, diabetes, hypertension, non-hemorrhagic stroke, gastrointestinal bleeding, time from symptom onset to pre-hospital ECG, admission KIllip class, baseline hemoglobin, estimated glomerular filtration rate, glycoprotein IIb/IIIa inhibitor use during index procedure, location of myocardial infarction

Supplementary table 3 Association between gender and safety of randomised treatment (safety outcomes)

End point	Gender	Pre-hospital ticagrelor (n=906)		In-hospital ticagrelor (n=952)		Model N ≠	Adjusted hazard ratio ≠ (95% CI)	P-value (interaction) ≠
		N	Patients with endpoint, n (%)	N	Patients with endpoint, n (%)			
PLATO major bleeding	Female	173	6 (3.5)	196	11 (5.6)	1613	0.61 (0.21-1.83)	0.23
	Male	733	19 (2.6)	756	14 (1.9)		1.39 (0.66-2.93)	
PLATO major and minr bleeding	Female	173	7 (4.0)	196	13 (6.6)	1613	0.59 (0.22-1.61)	0.19
	Male	733	33 (4.5)	756	26 (3.4)		1.27 (0.73-2.21)	
TIMI major bleeding	Female	173	3 (1.7)	196	7 (3.6)	1613	0.60 (0.14-2.54)	0.28
	Male	733	9 (1.2)	756	5 (0.7)		1.62 (0.53-4.98)	
TIMI major and minr bleeding	Female	173	6 (3.5)	196	12 (6.1)	1613	0.55 (0.19-1.60)	0.24
	Male	733	29 (4.0)	756	25 (3.3)		1.14 (0.64-2.03)	
BARC type 3-5 (major) bleeding	Female	173	6 (3.5)	196	10 (5.1)	1613	0.69 (0.23-2.11)	0.26
	Male	733	18 (2.5)	756	13 (1.7)		1.51 (0.70-3.26)	
BARC type 2-5 (major and minr) bleeding	Female	173	7 (4.0)	196	13 (6.6)	1613	0.59 (0.22-1.60)	0.21
	Male	733	31 (4.2)	756	25 (3.3)		1.23 (0.70-2.17)	

≠Adjusted hazard (for female versus male) and p-values for interaction was calculated from Cox proportional hazard model including gender, age, weight, prior myocardial infarction, prior percutaneous coronary intervention, diabetes, hypertension, non-hemorrhagic stroke, gastrointestinal bleeding, time from symptom onset to pre-hospital ECG, admission KIllip class, baseline hemoglobin, estimated glomerular filtration rate, glycoprotein IIb/IIIa inhibitor use during index procedure, location of myocardial infarction