

**Cardiac Remodeling in Response to 1 Year of Intensive Endurance Training**  
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# SUPPLEMENTAL MATERIAL

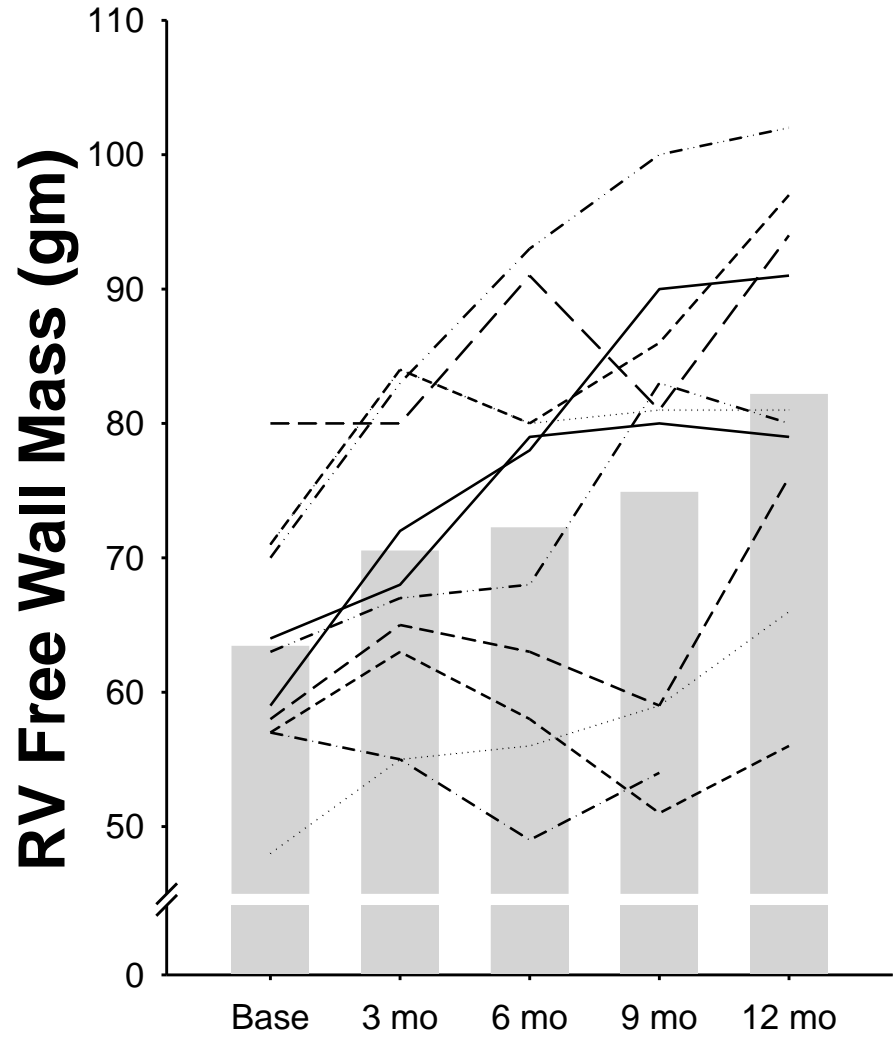
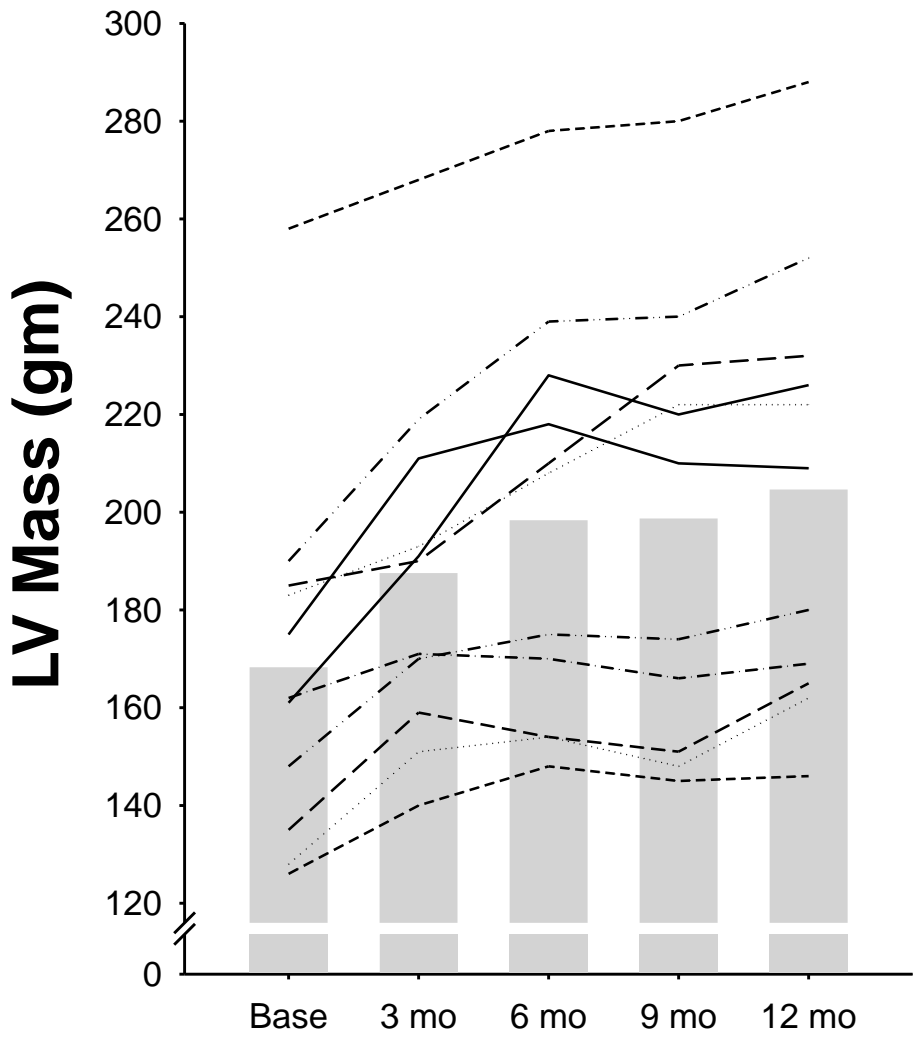
## Supplemental Figure Legends

**Supplemental Figure 1:** Individual changes in left (LV mass, left graph) and right (RV mass, right graph) ventricular mass measured by MRI every 3 months during the 1 year training program. Light gray bars represent the mean values for each time point as depicted in manuscript Figure 2 with statistical analysis reported in the text.

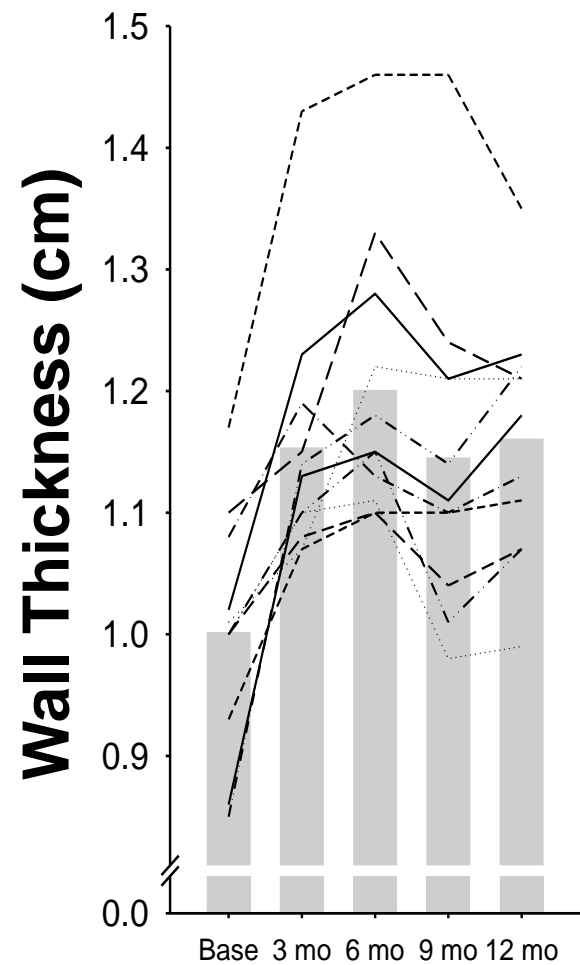
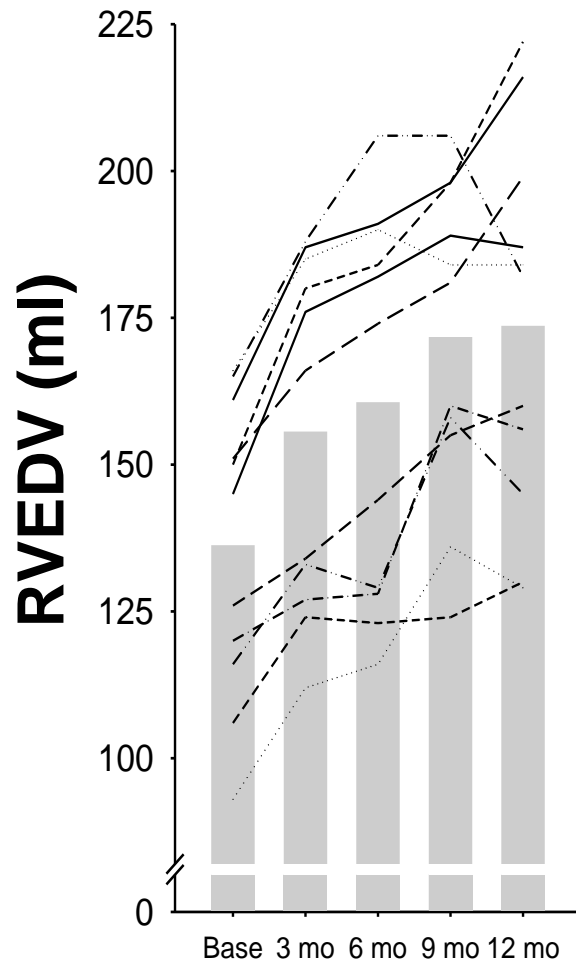
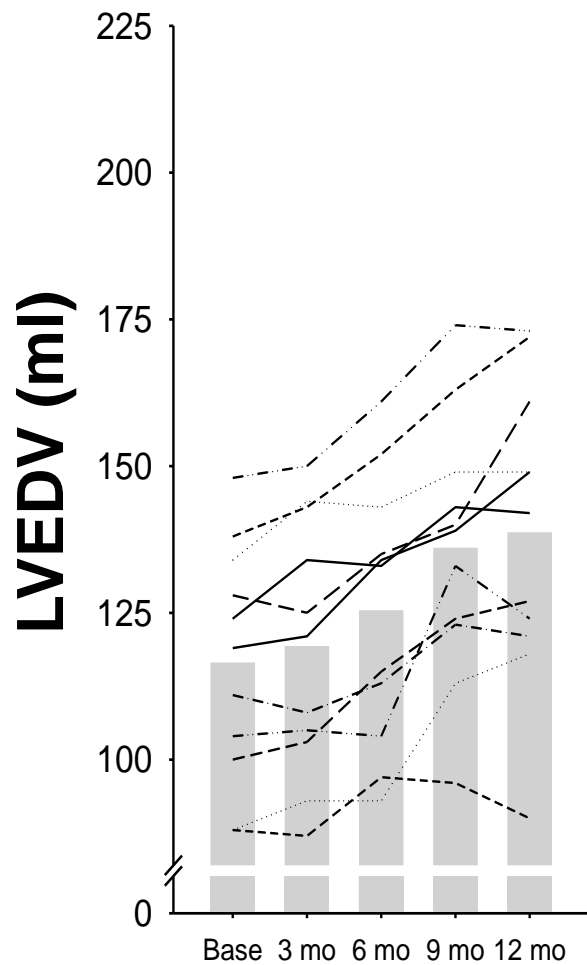
**Supplemental Figure 2:** Individual changes in left (LVEDV, left graph) and right (RVEDV, middle graph) ventricular end-diastolic volume and mean wall thickness measured by MRI every 3 months during the 1 year training program. Light gray bars represent the mean values for each time point as depicted in manuscript Figure 3 with statistical analysis reported in the text.

**Supplemental Figure 3:** Quadratic regression analysis between average quarterly TRIMP values and LV mass (left graph), LVEDV (middle) and LV mean wall thickness (LVMWT, right) . Individual curves are shown in the black lines; the solid gray line represents the random effect regression as depicted in manuscript Figure 4 with statistical analysis reported in the text.

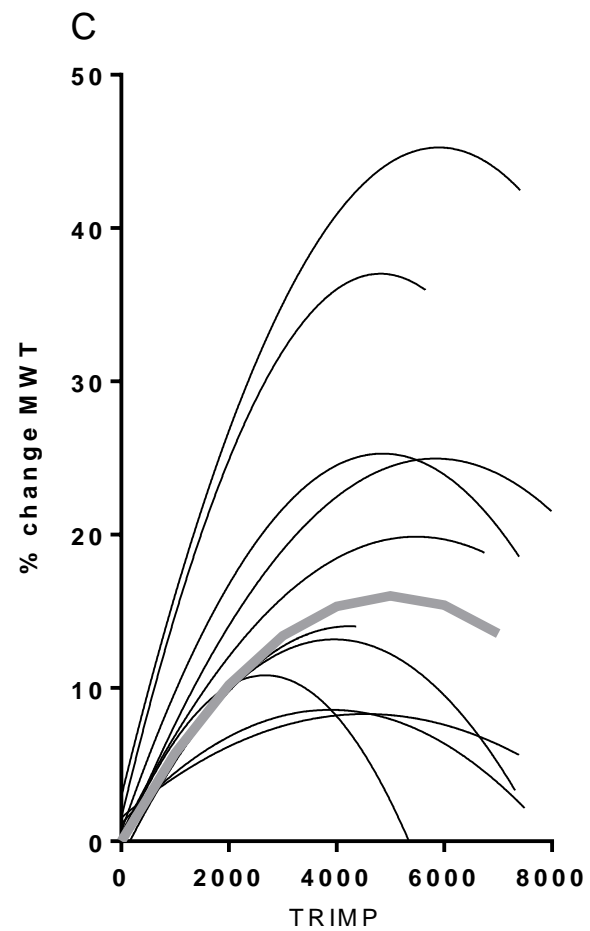
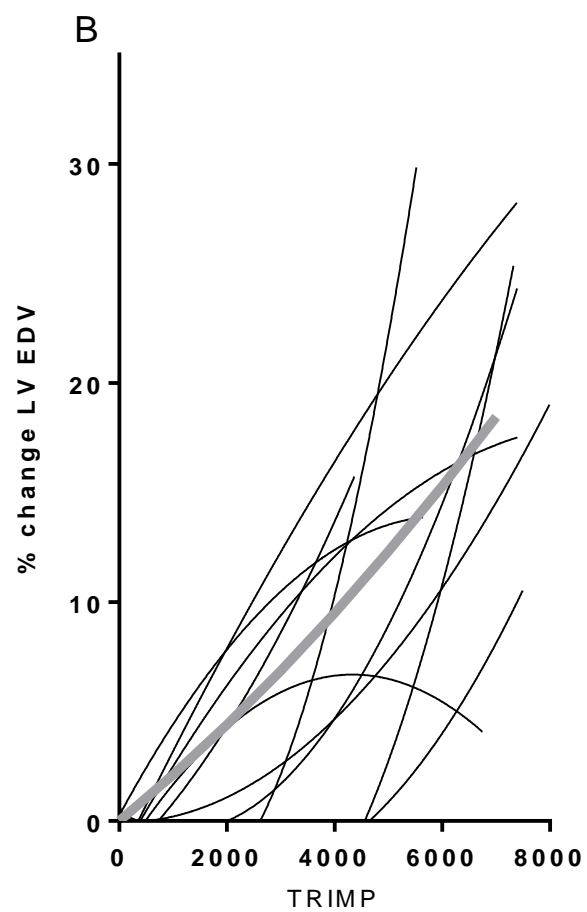
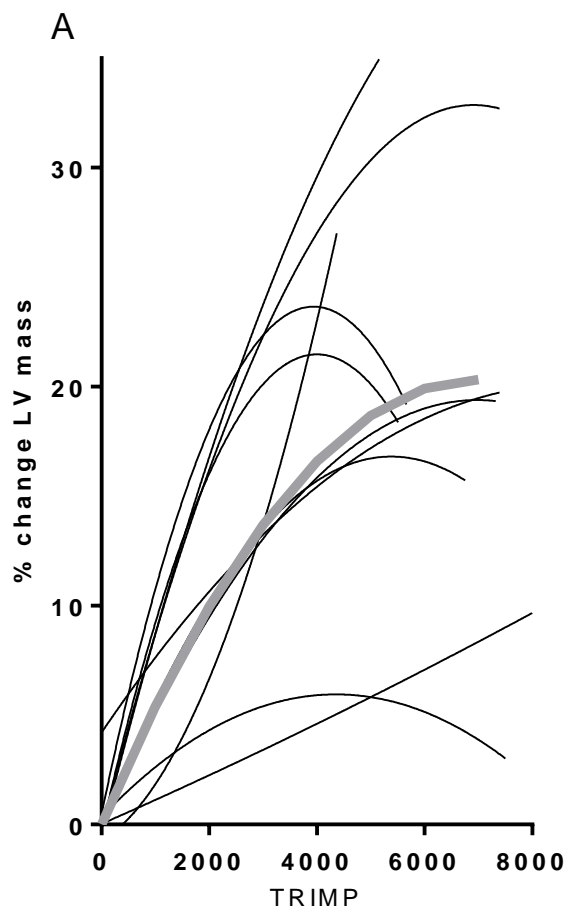
**Supplemental Figure 4:** Pressure-volume curves representing pulmonary capillary wedge pressure (PCW) as an index of LV end diastolic pressure vs LVEDV obtained from 2-D echo, over range of LV filling produced by lower body negative pressure (two lowest values of PCW), quiet baseline (two middle values of PCW), and rapid saline infusion (two highest values of PCW) with modeling of the p/v curves as described in the text. The first two curves show the data for the men only from the current study using both pre and post training data. The far right curve shows the p/v curve for elite male endurance athletes modified from reference 15.



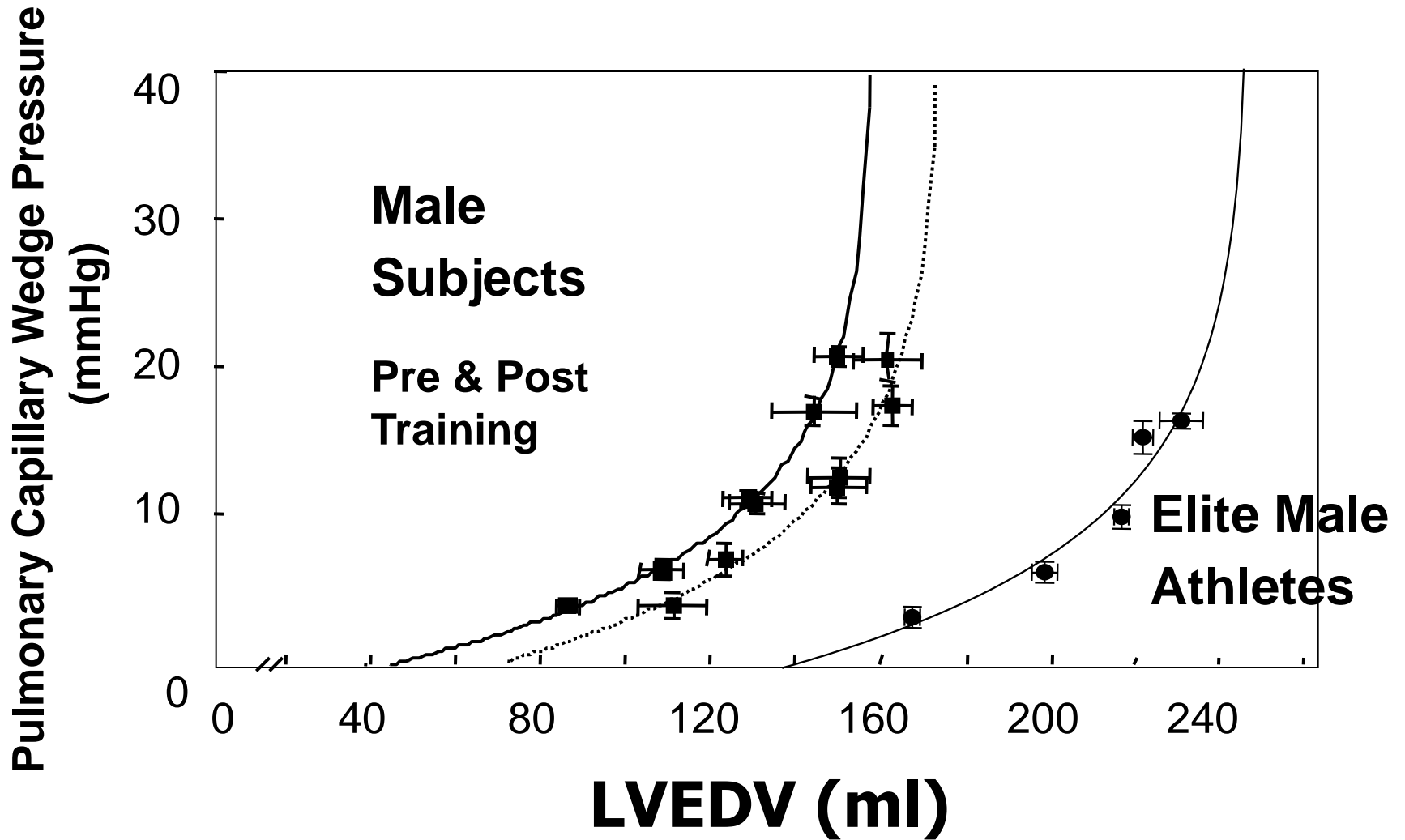
Supplemental Fig 1



Supplemental Fig 2



Supplemental Fig 3



Supplemental Fig 4

Elite curve from

Levine et al, Circulation 1991;84:1016-23