

Supplementary materials

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ESM Methods

Outcome definitions

A. Hospitalization for Heart Failure (HF)

Presentation to an acute care facility and requiring an overnight hospitalization (change in calendar day) with a newly diagnosed or exacerbation of heart failure requiring treatment meeting the following criteria:

1. Symptoms and signs of heart failure:

One or more of the following symptoms consistent with heart failure:

- a) Worsening dyspnea
- b) Worsening orthopnea
- c) Paroxysmal nocturnal dyspnea
- d) Increasing fatigue/ worsening exercise tolerance

AND

Two or more of the following signs consistent with heart failure:

- a) Rapid weight gain
- b) Pulmonary edema or rales
- c) Elevated jugular venous pressure
- d) Radiologic signs of heart failure

- e) Peripheral edema
- f) Increasing abdominal distension or ascites
- g) S₃ gallop
- h) Hepatojugular reflux
- i) Elevated brain natriuretic peptide (BNP) or N-terminal proBNP (> Upper Reference Limit)

AND

2. Treatment

Treatment with intravenous diuretics, intravenous vasodilators, intravenous inotropes, mechanical fluid removal (e.g., ultrafiltration or dialysis), or insertion of an intra-aortic balloon pump for hemodynamic compromise. Initiation of standing oral diuretics or intensification (doubling) of the maintenance diuretic dose will also qualify.

ESM results

In the following section, results from the exploratory analyses are presented.

ESM table 1: Results of the primary and the secondary endpoints by Cox-regression analyses omitting baseline ejection fraction from the model.

| Heart failure | Hazard Ratio | [95% Conf. Lower bound] | Interval] Upper bound | P-value |
|--|--------------|-------------------------|-----------------------|---------|
| Intensive therapy | 0.264 | 0.126 | 0.597 | 0.001 |
| Age | 1.089 | 1.027 | 1.145 | 0.003 |
| NT-proBNP baseline | 1.002 | 1.001 | 1.003 | 0.003 |
| BMI baseline | 1.080 | 1.006 | 1.160 | 0.034 |
| | | | | |
| Heart failure / CV death | Hazard Ratio | [95% Conf. Lower bound] | Interval] Upper bound | P-value |
| Intensive therapy | 0.364 | 0.201 | 0.659 | 0.001 |
| Age | 1.081 | 1.030 | 1.135 | 0.002 |
| GFR baseline | 0.989 | 0.976 | 1.002 | 0.096 |
| NT-proBNP baseline | 1.002 | 1.001 | 1.003 | 0.000 |
| HbA _{1c} baseline | 1.018 | 1.003 | 1.033 | 0.160 |
| BMI baseline | 1.061 | 1.000 | 1.127 | 0.050 |
| | | | | |
| Heart failure / all cause death | Hazard Ratio | [95% Conf. Lower bound] | Interval] Upper bound | P-value |
| Intensive therapy | 0.510 | 0.338 | 0.765 | 0.001 |
| Age | 1.080 | 1.044 | 1.117 | 0.000 |
| GFR baseline | 0.990 | 0.981 | 0.999 | 0.035 |
| NT-proBNP baseline | 1.002 | 1.001 | 1.003 | 0.001 |
| HbA _{1c} baseline | 1.010 | 0.999 | 1.020 | 0.077 |
| BMI: Body Mass Index; GFR: Glomerular filtration rate. | | | | |

ESM table 2: Results of the primary and the secondary endpoints by Cox-regression analyses without elimination of variables

| Heart failure | Hazard Ratio | [95% Conf. Lower bound] | Interval] Upper bound | P-value |
|----------------------------|--------------|-------------------------|-----------------------|---------|
| Intensive therapy | 0.219 | 0.089 | 0.539 | 0.001 |
| Age | 1.099 | 1.018 | 1.188 | 0.016 |
| Sex | 1.013 | 0.385 | 2.664 | 0.980 |
| Ejection fraction baseline | 0.954 | 0.908 | 1.002 | 0.061 |
| NT-proBNP baseline | 1.001 | 1.000 | 1.003 | 0.103 |
| HbA _{1c} baseline | 1.020 | 0.999 | 1.041 | 0.066 |
| u-AER baseline | 1.006 | 1.000 | 1.012 | 0.063 |
| GFR baseline | 0.991 | 0.973 | 1.009 | 0.321 |
| Systolic BP baseline | 1.000 | 0.977 | 1.023 | 0.977 |
| Total cholesterol baseline | 1.028 | 0.739 | 1.429 | 0.872 |
| BMI baseline | 1.102 | 1.010 | 1.202 | 0.028 |

| Heart failure / CV death | Hazard Ratio | [95% Conf. Lower bound] | Interval] Upper bound | P-value |
|--|--------------|-------------------------|-----------------------|---------|
| Intensive therapy | 0.273 | 0.137 | 0.543 | 0.000 |
| Age | 1.105 | 1.040 | 1.175 | 0.001 |
| Sex | 1.104 | 0.501 | 2.434 | 0.806 |
| Ejection fraction baseline | 0.946 | 0.910 | 0.984 | 0.006 |
| NT-proBNP baseline | 1.001 | 1.000 | 1.003 | 0.151 |
| HbA _{1c} baseline | 1.023 | 1.007 | 1.040 | 0.006 |
| u-AER baseline | 1.004 | 0.999 | 1.010 | 0.093 |
| GFR baseline | 0.989 | 0.975 | 1.003 | 0.123 |
| Systolic BP baseline | 1.004 | 0.987 | 1.021 | 0.654 |
| Total cholesterol baseline | 0.895 | 0.683 | 1.173 | 0.422 |
| BMI baseline | 1.079 | 1.007 | 1.157 | 0.031 |
| Heart failure / all cause death | Hazard Ratio | [95% Conf. Lower bound] | Interval] Upper bound | P-value |
| Intensive therapy | 0.479 | 0.303 | 0.758 | 0.002 |
| Age | 1.087 | 1.046 | 1.130 | 0.000 |
| Sex | 1.068 | 0.626 | 1.822 | 0.809 |
| Ejection fraction baseline | 0.975 | 0.948 | 1.002 | 0.069 |
| NT-proBNP baseline | 1.001 | 1.000 | 1.002 | 0.034 |
| HbA _{1c} baseline | 1.009 | 0.998 | 1.021 | 0.121 |
| u-AER baseline | 1.003 | 0.999 | 1.006 | 0.180 |
| GFR baseline | 0.991 | 0.981 | 1.001 | 0.080 |
| Systolic BP baseline | 1.002 | 0.990 | 1.014 | 0.769 |
| Total cholesterol baseline | 1.051 | 0.876 | 1.260 | 0.594 |
| BMI baseline | 1.032 | 0.979 | 1.088 | 0.237 |

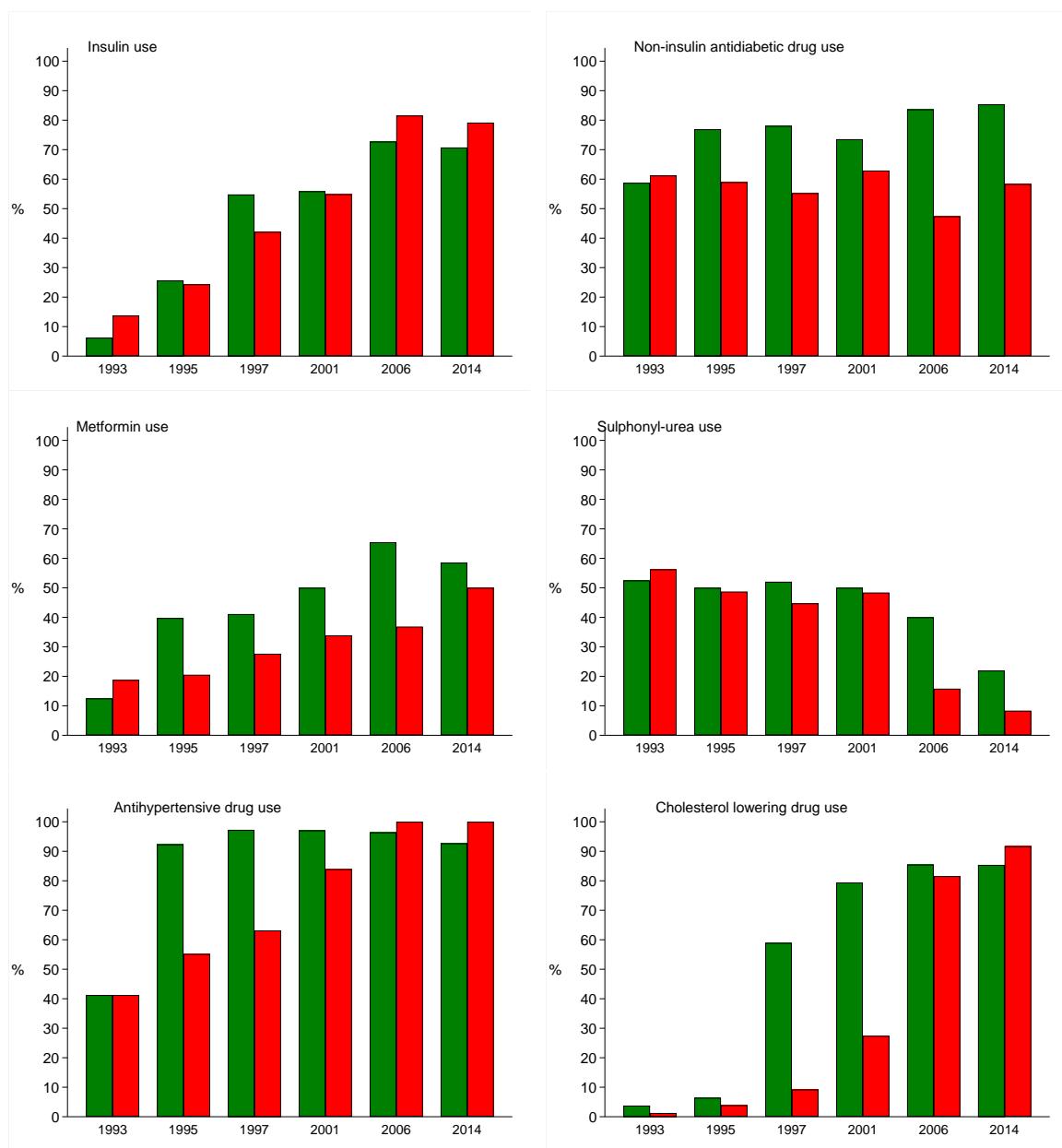
GFR: Glomerular filtration rate; u-AER: urinary albumin excretion rate; BP: blood pressure

ESM table 3: Hazard ratio for increase in urinary albumin excretion rate in the highest tertile compared with the two lower tertiles.

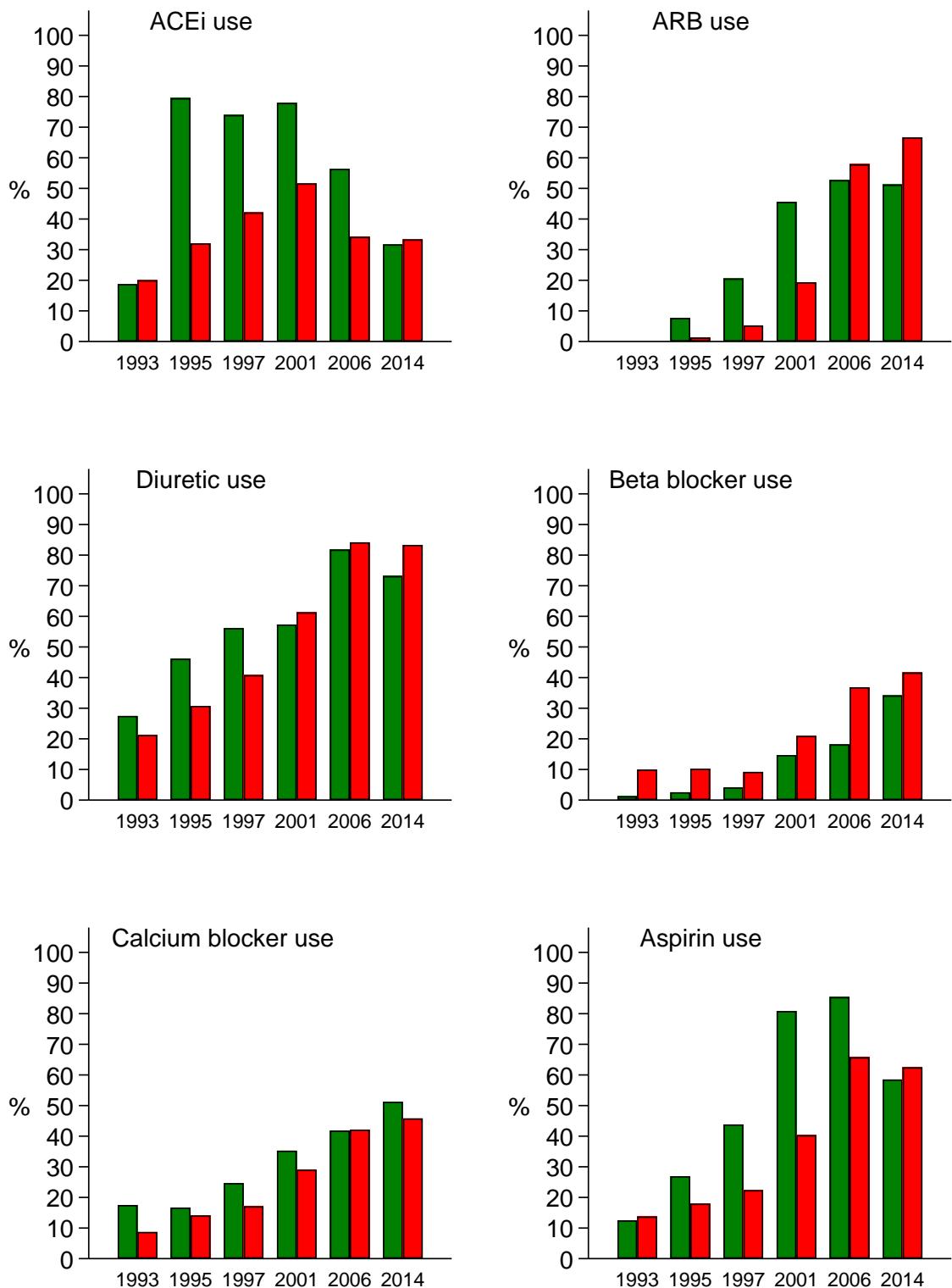
| | Hazard Ratio | [95% Conf. Lower bound] | Interval] Upper bound | P-value |
|--|--------------|-------------------------|-----------------------|---------|
| Heart failure | 1.221 | 0.582 | 2.560 | 0.597 |
| Heart failure / CV death | 1.243 | 0.684 | 2.261 | 0.475 |
| Heart failure / all cause death | 1.124 | 0.727 | 1.738 | 0.598 |

Hazard ratio for increase in urinary albumin excretion rate in the highest tertile compared with the two lower tertiles in a Cox-regression including covariates as in ESM table 2. There was no association between change in albuminuria and the primary and secondary outcomes.

ESM Figures



ESM figure 1: Self-reported use of insulin, other glucose lowering drugs, any antihypertensive drugs and cholesterol lowering drugs at each follow-up point. Data for medicine use between study visits was not available. Green bars, intensive-therapy group; red bars, conventional-therapy group.



ESM figure 2: Use of specific antihypertensive drugs used. The use of other glucose lowering drugs than insulin, ACEs and ARBs as well as statins and aspirin was more widely used in the intensive-therapy group during the 7.8 years of intervention. Data for medicine use between study visits was not available. Green bars, intensive-therapy group; red bars, conventional-therapy group. ACEi: Angiotensin converting enzyme inhibitor; ARB: Angiotensin II receptor blocker.