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Supplemental Table 1

	Follow-up for long term BP variability (in 366 patients)	Follow-up for short term BP variability (in 402 patients)
<i>Non fatal cardiovascular events</i>	58	67
Myocardial infarction	22	27
Stroke	13	13
Revascularization	14	15
Heart failure	6	9
Angina	1	1
Atrial fibrillation	1	1
Cerebral aneurysm	1	1
Cause of Death		
<i>Cardiovascular</i>	39	44
Myocardial infarction	22	26
Stroke	11	12
Heart failure	4	2
Revascularization	2	4
<i>Non Cardiovascular</i>	13	15
Neoplasia	8	9
Infection	3	4
Cirrhosis	2	2

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Supplemental Table 2

Unadjusted and adjusted Cox regression analyses of metrics of Systolic BP variability expressed as coefficient of variation (CV).

LONG TERM Systolic BP VARIABILITY Coefficient of variation (CV) of average visit to visit Systolic BP (HR per 5% higher CV)	
Unadjusted analysis HR (95% CI), P	Adjusted* HR (95% CI), P
1.26 (0.98-1.63), P=0.075	1.38 (1.04-1.84), P=0.028

SHORT TERM (24h) VARIABILITY Coefficient of variation (CV) of Average 24h Systolic BP (HR per 5% higher CV)	
Unadjusted analysis HR (95% CI), P	Adjusted* HR (95% CI), P
1.33 (0.97-1.82), P=0.074	0.83 (0.58-1.19), P=0.31

SHORT TERM (day-time) VARIABILITY Coefficient of variation (CV) of Average Day-time Systolic BP (HR per 5% higher CV)	
Unadjusted analysis HR (95% CI), P	Adjusted* HR (95% CI), P
1.50 (1.14-1.98), P=0.004	0.85 (0.62-1.16), P=0.29

SHORT TERM (night-time) VARIABILITY Coefficient of variation (CV) of Average Night-time Systolic BP (HR per 5% higher CV)	
Unadjusted analysis HR (95% CI), P	Adjusted* HR (95% CI), P
1.12 (0.84-1.50), P=0.43	1.02 (0.76-1.36), P=0.92

*adjusted for: age, gender, BMI, diabetes, cholesterol, smoking, hemoglobin, eGFR, background cardiovascular comorbidities, 24h urinary protein and number of anti-hypertensive drugs. In this model we did not adjust for average systolic office BP (long term BP variability) or the corresponding average values of 24h, day-time and night-time BP because the coefficient of Variation already adjusts variability for the average value (CV = SD/average value x 100)

Supplemental Table 3

Absolute, cumulative risk during follow up of the combined endpoint (CV events/death) according to tertiles of different indexes of BP burden and the long term BP variability.

	Average Systolic Office BP (tertiles)			P value
	I	II	III	
Absolute risk of the combined outcome (CV events/death)(%)	18.2%	30.7%	41.5%	<0.001
	Long term systolic BP variability (tertiles) Standard deviation (SD) of average visit to visit Systolic BP			P value
	I	II	III	
Absolute risk of the combined outcome (CV events/death)(%)	23.0%	28.8%	38.0%	0.04
	Average 24h Systolic BP (tertiles)			P value
	I	II	III	
Absolute risk of the combined outcome (CV events/death)(%)	26.1%	23.5%	45.2%	<0.001
	Average day-time Systolic BP (tertiles)			P value
	I	II	III	
Absolute risk of the combined outcome (CV events/death)(%)	27.0%	17.4%	49.6%	<0.001
	Average night-time Systolic BP (tertiles)			P value
	I	II	III	
Absolute risk of the combined outcome (CV events/death)(%)	23.2%	28.9%	42.4%	0.003

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Supplemental Table 4

Absolute number, cumulative risk, incidence rate, total person-time and crude hazard ratio of the combined endpoint (CV events/death) according to tertiles of different indexes of systolic BP variability.

	Long term systolic BP variability (n=366)		
	<i>I tertile</i>	<i>II tertile</i>	<i>III tertile</i>
Combined outcome (CV events/death) (n, %)	26 (23.0%)	38 (28.8%)	46 (38.0%)
Incidence rate (events per 100 persons-year) and 95% CI	4.6 (3.0-6.7)	6.3 (4.4-8.6)	11.4 (8.3-15.2)
Total person-time (years)	572	606	405
Hazard ratio, 95% CI and P value	1*	1.30 (0.79-2.14), P=0.30	2.07 (1.28-3.35) P=0.003
	Short term systolic BP variability (n=402)		
	<i>I tertile</i>	<i>II tertile</i>	<i>III tertile</i>
Combined outcome (CV events/death)(n, %)	24 (17.9%)	45 (33.8%)	56 (41.5%)
Incidence rate (events per 100 persons-year) and 95% CI	2.8 (1.8-4.2)	6.5 (4.7-8.7)	8.5 (6.4-11.0)
Total person-time (years)	847	695	661
Hazard ratio, 95% CI and P value	1*	2.15 (1.31-3.54), P=0.002	2.86 (1.31-1.77), P<0.001

*Reference group.