## SUPPLEMENTAL MATERIAL

Table S1. Diagnosis codes used to define patients with psychiatric disorders.

Diagnosis codes used to define patients with psychiatric disorders	
	IOD 10 F10 F10 F00
Minor psychiatric disorders	ICD-10: F10–F19, F40-F99
	ICD-8: 291, 294.30, 299-304, 305-308, 310-315
Severe mental illness	ICD-10: F20-39
	ICD-8: 295-298, 300
Diagnosis codes excluded from the definition of	
patients with psychiatric disorders	
Dementia and mental organic disorder	ICD-10: F00-F09
	ICD-8: 290-294
Acute substance intoxication	ICD-10: F100, F110, F120, F130, F140, F150, F160, F170,
	F180, F190
	ICD-8: 303.90

Table S2. List of psychotropic drugs used to identify patients with psychiatric disorders.

Psychotropic drug	ATC code
Antidepressants	
Tricyclic antidepressants (TC	<b>A</b> )
Imipramin	N06AA02
Clomipramin	N06AA04
Opipramol	N06AA05
Trimipramin	N06AA06
Amitriptylin	N06AA09
Nortriptylin	N06AA10
Doxepin	N06AA12
Dosulepin	N06AA16
Amoxapin	N06AA17
Maprotilin	N06AA21
SSRI	
Fluoxetin	N06AB03
Citalopram	N06AB04
Paroxetin	N06AB05
Sertralin	N06AB06
Fluvoxamin	N06AB08
Escitalopram	N06AB10
NASSA	
Mianserin	N06AX03
Mirtazapin	N06AX11
SNRI	
Venlafaxin	N06AX16
Duloxetin	N06AX21
Duronem	110011121
Other antidepressants	
Isocarboxazid	N06AF01
Moclobemid	N06AG02
Reboxetin	N06AX18
Agomelatin	N06AX22
Antipsychotics	
Typical antipsychotics	
Chlorpromazin	N05AA01
Levomepromazin	N05AA02
Perphenazin	N05AB03
Prochlorperazin	N05AB04
Haloperidol	N05AD01
Flupentixol	N05AF01
Chlorprothixen	N05AF03
Zuclopenthixol	N05AF05
Pimozid	N05AG02
Sulpirid	N05AL01

Other atypical	
- Acepromazin	N05AA04
- Fluphenazin	N05AB02
- Periciazin	N05AC01
- Pipamperon	N05AD05
- Bromperidol	N05AD06
Atypical antipsychotics	
Ziprasidon	N05AE04
Clozapin	N05AH02
Olanzapin	N05AH03
Quetiapin	N05AH04
Risperidon	N05AX08
Aripiprazol	N05AX12
Other typical	
- Melperon	N05AD03
- Sertindol	N05AE03
- Asenapin	N05AH05
- Amisulprid	N05AL05
- Paliperidon	N05AX13
Lithium	N05AN01

Table S3. Diagnosis codes used to define cardiovascular procedures.

Diagnosis codes used to define cardiovascular procedures		
Coronary angiography	UXAC40, UXAC85, UXAC90, UXUC85- 87, UFYA20	
	07, 01 17120	
Coronary revascularization	Percutaneous coronary intervention	KFNG
	Coronary artery bypass graft	KFNA, KFNB, KFNC, KFND, KFNE, KFNF
ICD implantation	BFCB0,	
	BFCB00, BFCB01, BFCB02, BFCB03 KFPG10, KFPG20	

Table S4. Subgroups of patients with psychiatric disorders.

Characteristic	Patients who redeemed psychotropic drugs (%)	Patients with minor psychiatric disorders (%)	Patients with severe mental illness (%)
Total patients	631 (38.0) *	498 (30.0) *	532 (32.0) *
Median age (IQR), y	73 (65-81)	59 (49-68)	66 (55-76)
Men	359 (56.9)	351 (70.5)	287 (53.9)
Charlson score			
0	147 (23.3)	179 (35.9)	157 (29.5)
1	133 (21.1)	123 (24.7)	110 (20.7)
$\geq 2$	351 (55.6)	196 (39.4)	265 (49.8)
Antipsychotics	115 (18.2)	72 (14.5)	197 (37.0)
Antidepressants	579 (91.8)	155 (31.1)	329 (61.8)
Anxiolytics	128 (20.3)	92 (18.5)	134 (25.2)
Living alone – yes, no. (%)	233 (37.0)	274 (55.4)	316 (59.4)
SES			
Low tertile, no. (%)	246 (39.0)	243 (48.8)	268 (50.4)
Medium tertile, no. (%)	235 (37.2)	162 (32.5)	183 (34.4)
High tertile, no. (%)	150 (23.8)	93 (18.7)	81 (15.2)
OHCA-factors			
Arrest in private home, n (%)	406 (70.1)	286 (62.7)	320 (66.3)
Bystander-witnessed arrest, n (%)	434 (71.5)	322 (69.0)	347 (67.2)
Bystander CPR, n (%)	346 (57.0)	257 (54.8)	287 (55.5)
Bystander defibrillation, n (%)	26 (4.5)	19 (4.4)	18 (3.8)
Median time interval from recognition of OHCA to EMS arrival, min (IQR)	10 (6-14)	10 (6-15)	9 (5-14)
Initial shockable rhythm, n (%)	247 (41.3)	200 (41.9)	168 (33.2)
ROSC at hospital arrival, n (%)	398 (69.2)	309 (71.7)	319 (68.5)

Outcome				
30-day survival, n (%)	149 (23.6)	167 (33.5)	137 (25.8)	
1-year survival, n (%)	120 (19.0)	143 (28.7)	119 (22.4)	,
In-hospital procedure				]
CAG	150 (23.8)	164 (32.9)	124 (23.3)	
Acute CAG †	126 (20.0)	136 (27.3)	108 (20.3)	1
Subacute CAG §	24 (3.8)	28 (5.6)	16 (3.0)	(

total psychiatric population (1661 patients)

IQR, interquartile range; SES, socioeconomic status; OHCA, out-of-hospital cardiac arrest; CPR, cardiopulmonary resuscitation; EMS, emergency medical system; ROSC, return of spontaneous circulation; CAG, coronary angiography. Note: in the calculation of percentages, we only included observations with data for the covariate involved.

Table S5. Number of patients with AMI as cause of cardiac arrest in our cohort stratified by psychiatric status.

<sup>†≤24</sup> h from OHCA

<sup>§</sup> During the index-hospitalization from > 24h (i.e. day 2) up to day 30 following OHCA

	Patients without psychiatric disorders (5627)	Patients with psychiatric disorders (1661)
Total AMI	2249 (40.0%)	476 (28.7%)
STEMI	609 (10.8%)	110 (6.6%)
NSTEMI	259 (4.7%)	40 (2.4%)
Unspecified AMI	1381 (24.5%)	326 (19.6%)

Percentages are expressed AMI, acute myocardial infarction; STEMI, ST-Elevation Myocardial Infarction; NSTEMI, non-ST segment elevation myocardial infarction.

Table S6. Hazard ratio with 95% confidence interval (CI) for coronary angiography, coronary revascularization and ICD-implantation in patients with and without psychiatric disorders.

	Hazard ratio (95% CI)
Coronary angiography	
Reference: patients without psychiatric disorders	
Patients with any psychiatric disorders	0.65 (0.58-0.72)
Subgroups	
Patients who redeemed psychotropic drugs	0.65 (0.55-0.77)
Patients with minor psychiatric disorders	0.70 (0.60-0.83)
Patients with severe mental illness	0.59 (0.49-0.70)
Coronary revascularization	
Reference: patients without psychiatric disorders	1.05 (0.01.1.21)
Patients with any psychiatric disorders	1.05 (0.91-1.21)
Subgroups	
Patients who redeemed psychotropic drugs	0.96 (0.76-1.21)
Patients with minor psychiatric disorders	1.10 (0.88-1.37)
Patients with severe mental illness	1.18 (1.02-1.40)
ICD implantation	
Reference: patients without psychiatric disorders	
Patients with any psychiatric disorders	0.65 (0.48-0.88)

Models are adjusted for age, sex, Charlson score, socioeconomic status, year of OHCA and OHCA-factors (location of arrest, witnessed status, initial cardiac rhythm, bystander CPR and ROSC upon hospital arrival). ICD, implantable cardioverter defibrillator.

Table S7. Patients who received acute CAG and still alive at day 2.

Characteristics	Patients without psychiatric disorders (%)	Patients with psychiatric disorders (%)	Total missing (%) *
Total patients	1888 (90.9) †	330 (89.2) §	0
Median age (IQR), y	63 (54-71)	60 (52-69)	0 (0.0)
Men	1575 (83.4)	237 (71.8)	0 (0.0)
Charlson score			
0	1168 (61.9)	141 (42.7)	0 (0.0)
1	350 (18.5)	73 (22.1)	
≥ 2	370 (19.6)	116 (35.2)	
Antipsychotics	0 (0.0)	48 (14.6)	0 (0.0)
Antidepressants	0 (0.0)	194 (58.8)	0 (0.0)
Anxiolytics	51 (2.7)	52 (15.8)	0 (0.0)
Living alone – yes, no. (%)	461 (24.6)	128 (38.8)	14 (0.6)
SES			
Low tertile, no. (%)	338 (17.9)	105 (31.8)	0 (0.0)
Medium tertile, no. (%)	581 (30.8)	122 (37.0)	
High tertile, no. (%)	969 (51.3)	103 (31.2)	
OHCA-factors			
Arrest in private home, n (%)	936 (52.3)	200 (64.7)	120 (5.4)
Bystander-witnessed arrest, n (%)	1534 (83.7)	249 (77.8)	65 (2.9)
Bystander CPR, n (%)	1367 (74.6)	228 (71.3)	65 (2.9)
Bystander defibrillation, n (%)	228 (13.1)	26 (8.6)	180 (8.1)
Median time interval from recognition of	9 (6-13)	9 (6-13)	310 (14.0)
OHCA to EMS arrival, min (IQR)			
Initial shockable rhythm, n (%)	1637 (89.3)	236 (74.9)	69 (3.1)
ROSC at hospital arrival, n (%)	1586 (89.6)	280 (94.0)	229 (10.3)
Outcome			

30-day survival, n (%)	1392 (73.7)	197 (59.7)	0 (0.0)
1-year survival, n (%)	1327 (70.3)	181 (54.8)	0 (0.0)
In-hospital procedure			
Coronary revascularization ¶	1181 (62.6)	185 (56.1)	0 (0.0)

<sup>\*</sup>Expressed as percentage of the total population who received acute CAG and still alive at day 2 (2218 OHCA-patients)

- § Percentage of patients with psychiatric disorders who received an acute CAG (370 patients)
- ¶ During the index-hospitalization up to day 30 following OHCA

IQR, interquartile range; SES, socioeconomic status; OHCA, out-of-hospital cardiac arrest; CPR, cardiopulmonary resuscitation; EMS, emergency medical system; ROSC, return of spontaneous circulation. Note: in the calculation of percentages, we only included observations with data for the covariate involved.

<sup>†</sup> Percentage of patients without psychiatric disorders who received an acute CAG (2076 patients)

Table S8. Patients who received acute CAG and still alive at day 2 stratified by severity of the psychiatric disorders.

Characteristic	Patients who redeemed	Patients with minor psychiatric disorders	Patients with severe mental illness
Total patients	<b>psychotropic drugs</b> 109 (33.0) *	125 (37.9) *	96 (29.1) *
Median age (IQR), y	66 (58-73)	56 (49-63)	61 (51-71)
Men	71 (65.1)	97 (77.6)	69 (71.9)
Charlson score	71 (03.1)	71 (11.0)	07 (71.7)
0	41 (37.6)	57 (45.6)	49 (51.0)
1	24 (22.0)	33 (26.4)	16 (16.7)
≥ 2	44 (40.4)	35 (28.0)	31 (32.3)
Antipsychotics	15 (13.8)	13 (10.4)	25 (26.0)
Antidepressants	105 (97.2)	39 (31.2)	49 (51.0)
Anxiolytics	17 (15.6)	17 (13.6)	18 (18.8)
Living alone – yes, no. (%)	21 (19.3)	64 (51.2)	43 (44.8)
SES	(,		10 (1100)
Low tertile, no. (%)	19 (17.4)	49 (39.2)	37 (38.5)
Medium tertile, no. (%)	43 (39.4)	42 (33.6)	37 (38.5)
High tertile, no. (%)	47 (43.1)	34 (27.2)	22 (22.9)
OHCA-factors			
Arrest in private home, n (%)	74 (70.5)	66 (57.9)	60 (66.7)
Bystander-witnessed arrest, n (%)	83 (78.3)	95 (78.5)	71 (76.3)
Bystander CPR, n (%)	81 (76.4)	77 (63.6)	70 (75.3)
Bystander defibrillation, n (%)	10 (9.9)	8 (7.0)	8 (9.0)
Median time interval from			
recognition of OHCA to EMS	9 (7-13)	9 (6-13)	9 (5-13)
arrival, min (IQR)			
Initial shockable rhythm, n (%)	79 (75.2)	89 (74.2)	68 (75.6)
ROSC at hospital arrival, n (%)	91 (91.9)	108 (94.7)	81 (96.4)
Outcome			
30-day survival, n (%)	65 (59.6)	74 (59.2)	58 (60.4)
1-year survival, n (%)	62 (56.9)	66 (52.8)	53 (55.2)

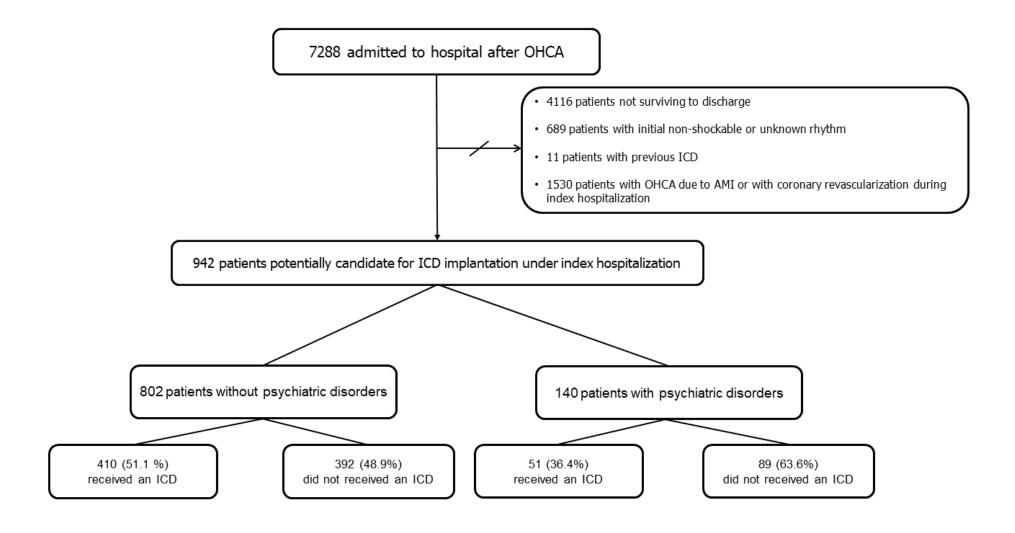
In-hospital procedure			
Coronary revascularization †	60 (55.1)	69 (55.2)	56 (58.3)

<sup>\*</sup> Percentage of patients with psychiatric disorders who received an acute CAG and still alive at day 2 (330 patients)

IQR, interquartile range; SES, socioeconomic status; OHCA, out-of-hospital cardiac arrest; CPR, cardiopulmonary resuscitation; EMS, emergency medical system; ROSC, return of spontaneous circulation.

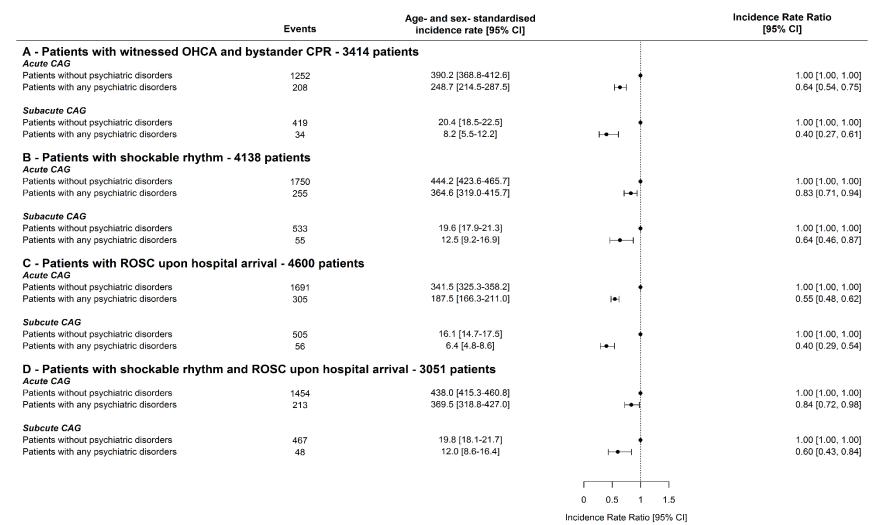
<sup>†</sup> During the index-hospitalization up to day 30 following OHCA

Figure S1. Flow chart for patients potentially eligible to ICD-implantation during index-hospitalization.



OHCA: out-of-hospital cardiac arrest; ICD, implantable cardioverter defibrillator; AMI, acute myocardial infarction

Figure S2. Number of events, age- and sex-standardized incidence rates and incidence rate ratio for acute and subacute coronary angiography in patients with and without psychiatric disorders amongst subsets of individuals who were identified by the presence of selected pre-hospital OHCA-characteristics: A) witnessed OHCAs who received bystander CPR, B) OHCAs with shockable rhythm, C) OHCAs who achieved ROSC upon hospital arrival, and D) OHCAs with shockable rhythm who achieved ROSC upon hospital arrival.



Unit: number of CAGs per 100 in hospital person-days. OHCA, out-of-hospital cardiac arrest; CPR, cardiopulmonary resuscitation; CAG, coronary angiography; ROSC, return of spontaneous circulation.

Figure S3. Number of events, age- and sex-standardized incidence rates and incidence rate ratio for acute and subacute coronary angiography in patients with and without psychiatric disorders according to the Charlson score (Charlson=0 3210 patients, Charlson=1 1494, Charlson  $\geq$  2 2584).

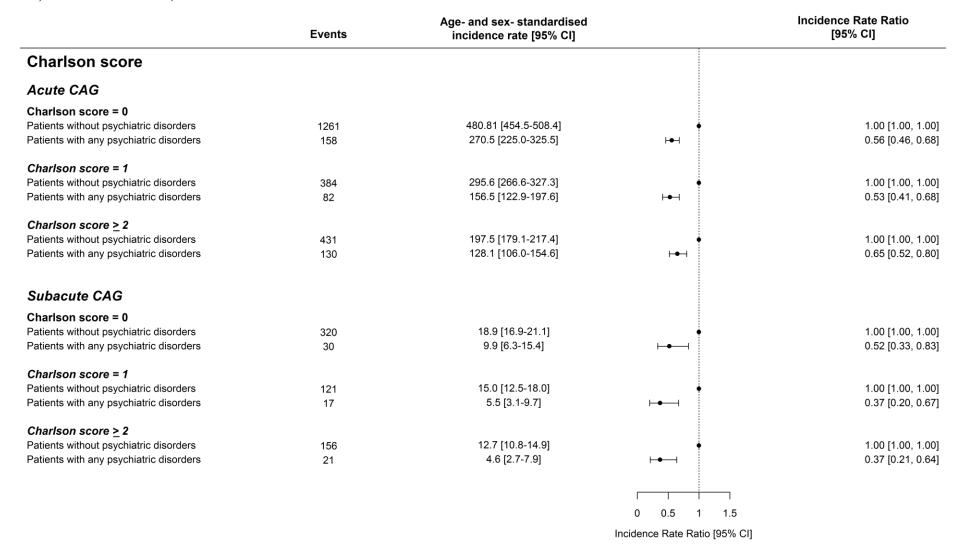


Figure S4. Number of events, age- and sex-standardized incidence rates and incidence rate ratio for acute and subacute coronary angiography in patients with and without psychiatric disorders according to the socioeconomic status (low tertile: 2429 patients, middle tertile: 2430 patients, high tertile: 2429 patients).

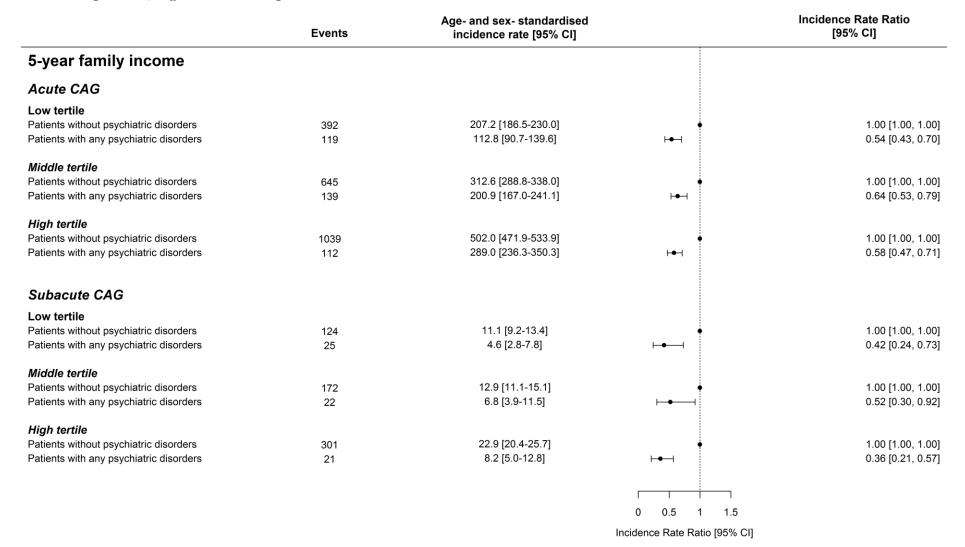


Figure S5. Number of events, age- and sex-standardized incidence rates and incidence rate ratio for acute and subacute coronary angiography in patients with and without psychiatric disorders stratified by the calendar year of cardiac arrest (2001-2007: 2385 patients; 2008-2015: 4903 patients).

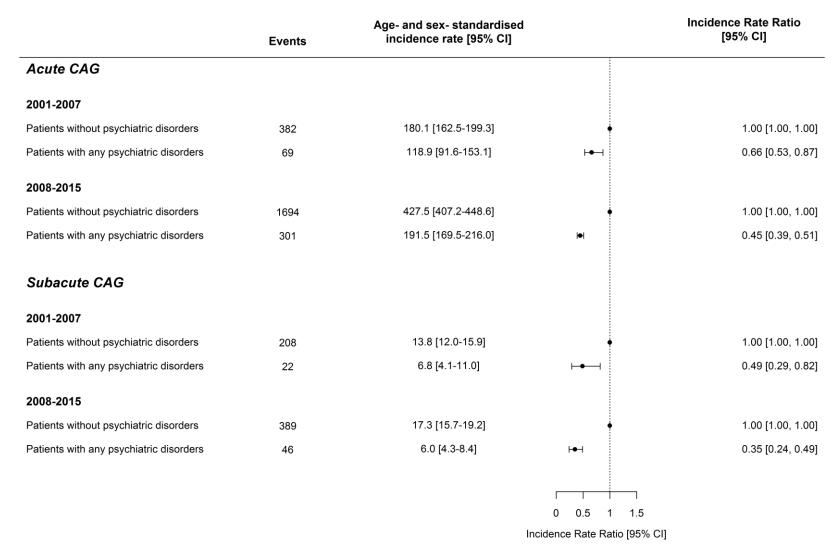


Figure S6. Age-standardized incidence rates and incidence rate ratio for acute and subacute coronary angiography in patients with and without psychiatric disorders stratified by sex (male: 5308 patients, female: 1980 patients).

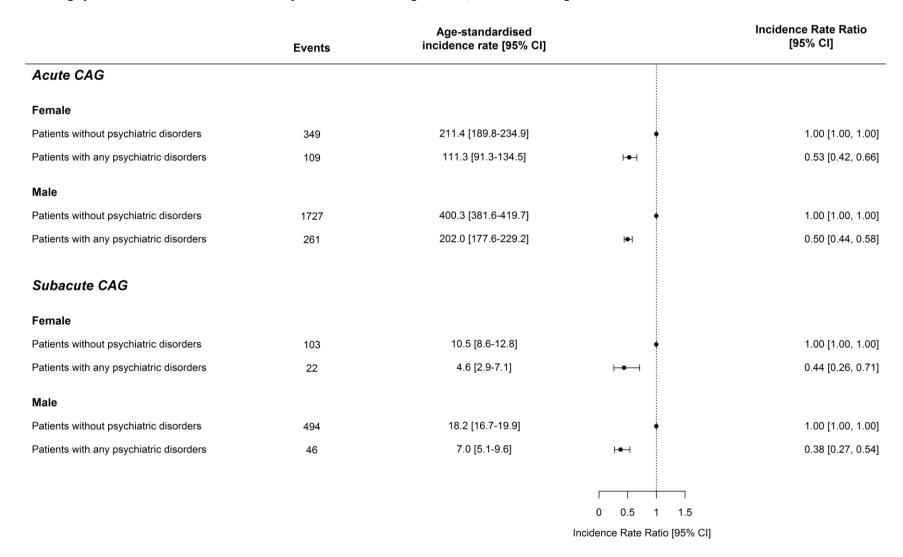


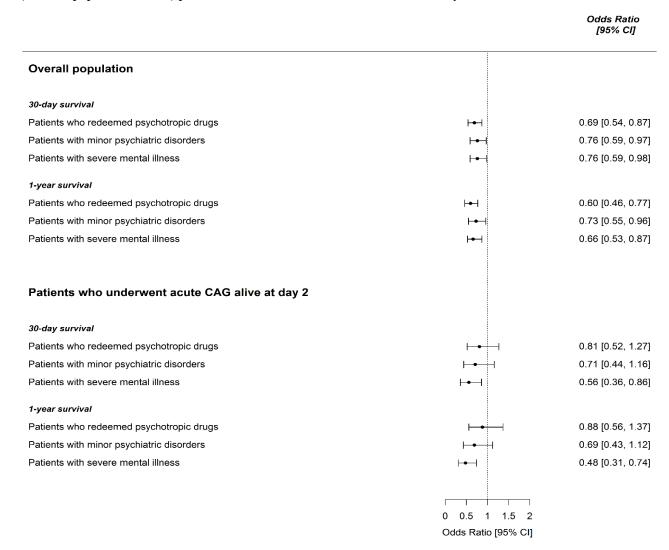
Figure S7. Number of patients, events, age- and sex-standardized incidence rates and incidence rate ratio for acute coronary angiography ( $\leq 1$  day post-OHCA) in STEMI-patients with and without psychiatric disorders.

	Total number of STEMI-patients	Number of acute CAG	Age- and sex- standardised incidence rate [95% CI]		Incidence Rate Ratio [95% CI]
Patients without psychiatric disorders	609	528 (86.7%)	2062.1 [1885.8-2253.4]		1.00 [1.00, 1.00]
Patients with any psychiatric disorders	110	83 (75.5%)	1525.6 [1114.5-2084.9]	-•	0.74 [0.53, 1.02]
				0 0.5 1 1.5 Incidence Rate Ratio [95% CI]	

Unit: number of CAGs per 100 in hospital person-days. STEMI, ST-Elevation Myocardial Infarction; CAG, coronary angiography.

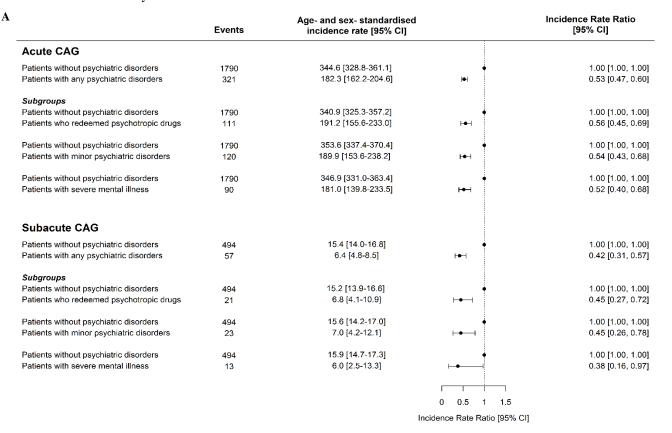
Figure S8. Odds ratio for 30-day and 1-year survival in patients with psychiatric disorders stratified by severity of the disorder compared to patients without psychiatric disorders:

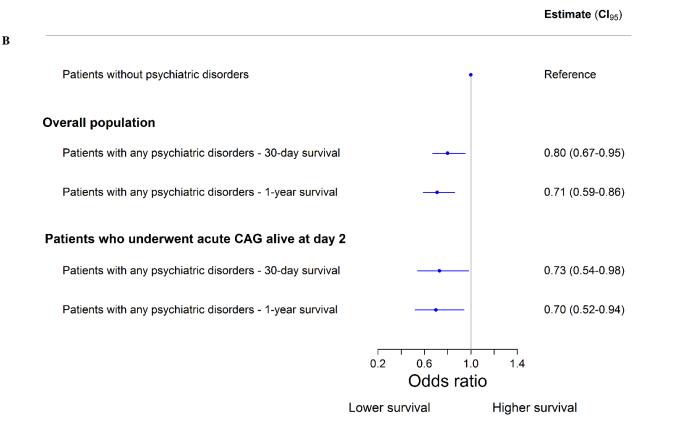
A) overall population and B) patients who received acute CAG still alive at day 2.



The models are adjusted for sex, age, Charlson score, socioeconomic status, year of arrest and pre-hospital OHCA-characteristics (location of arrest, witnessed status, initial cardiac rhythm, bystander CPR and ROSC upon hospital arrival). CAG, coronary angiography; OHCA: out-of-hospital cardiac arrest; CPR, cardiopulmonary resuscitation; ROSC, return of spontaneous circulation.

Figure S9. A) Number of events, age- and sex-standardized incidence rates and incidence rate ratio for acute and subacute CAG in patients with and without psychiatric disorders. Unit: number of CAGs per 100 person-days in hospital. B) Odds ratio for 30-day and 1-year survival in patients with any psychiatric disorders compared to patients without psychiatric disorders in overall population and among patients who received acute CAG still alive at day 2.





The models are adjusted for sex, age, Charlson score, socioeconomic status, year of arrest and pre-hospital OHCA-characteristics (location of arrest, witnessed status, initial cardiac rhythm, bystander CPR and ROSC upon hospital arrival). Reference: patients without psychiatric disorders. Complete case analyses of 6324 OHCA patients. CAG, coronary angiography.