Online supplementary table 1. Entry criteria

Inclusion	criteria
1.	Written or verbal IC for participation in the study was obtained from the subject. In case the study subject him/herself could not sign the IC due to severe muscle weakness, a witness could sign the consent form to indicate that the subject had given verbal consent.
2.	Age of at least 18 years.
3.	Male or female subjects with diagnosis of laboratory supported probable, probable or definite ALS according to El Escorial revised criteria (Brooks BR et al., 2000). Full electromyogram (EMG) report available consistent with ALS (but not necessarily fulfilling electrodiagnostic criteria for ALS) from an experienced neurophysiologist
4.	Ability to swallow the study treatment capsules.
5.	An upright (sitting position) SVC between 60-90% of the predicted value for age, height and sex at screening visit.
6.	Normal oxygen saturation during daytime (measure of \geq 95% when steady state has been reached with a reliable read) in sitting position measured by pulse oximetry.
7.	Disease duration from symptom onset (defined by first muscle weakness or dysarthria) of 12-48 months at the time of baseline/day 1 of the first treatment period.
8.	Patients with or without riluzole. If using riluzole, the dose must have been stable for at least 4 weeks prior to screening and should not be changed during the crossover, double-blind part of the study.
Exclusion	criteria
1.	Subject in whom other causes of neuromuscular weakness had not been excluded.
2.	Subject with a diagnosis of another neurodegenerative disease (e.g. Parkinson's or Alzheimer's disease).
3.	Assisted ventilation or gastrostomy of any type during the preceding 3 months prior to screening or predicted to be required within the randomised, double-blind crossover part of the study.
4.	Recorded diagnosis or evidence of major psychiatric diagnosis, significant cognitive impairment or clinically evident dementia.
5.	Haemodynamically significant uncorrected valve disease or hypertrophic cardiomyopathy or restrictive cardiomyopathy.
6.	Acute myocardial infarction or any other acute coronary event within 1 month before the screening visit.
7.	Any major surgery within 1 month before the screening visit or patients who were scheduled for any major surgery during the planned study period.
8.	History of Torsades de Pointes (TdP), family history of long QT-syndrome or history of life-threatening ventricular arrhythmia within 3 months before screening.
9.	$\rm HR$ < 50 or > 100 bpm as an average over the 24-hour ambulatory Holter-ECG recording at screening.

10.	Systolic blood pressure (SBP) < 100 mmHg or > 180 mmHg, or diastolic blood pressure (DBP) > 100 mmHg at screening.
11.	Ventricular tachycardia (wide complex tachycardia > 100/min, > 5 consecutive beats) in the 24-hour ambulatory Holter-ECG recording at screening.
12.	Episode of atrial fibrillation or atrial flutter lasting > 60 seconds in 24-hour ambulatory Holter-ECG recording at screening.
13.	Second or third degree atrioventricular (AV) block in the 12-lead ECG or in the 24-hour ambulatory Holter-ECG recording at screening.
14.	Potassium < 3.7 mmol/l or > 5.5 mmol/l at screening.
15.	Creatinine > 170 μmol/l at screening or on dialysis.
16.	Blood haemoglobin < 10 g/dl at screening.
17.	Clinically significant hepatic impairment at the discretion of the investigator.
18.	Women of reproductive age without a negative pregnancy test and without a commitment to using an acceptable method of barrier or hormonal contraception (e.g. condoms, diaphragms, oral contraceptives and long acting progestin agents), if sexually active during the study, and for 1 month after the last dose of the study treatment.
19.	Known hypersensitivity to levosimendan.
20.	Administration of levosimendan within 30 days prior to screening visit.
21.	Any botulinum toxin use within 3 months from screening. Use of botulinum toxin was not allowed during double-blind, crossover part of the study
22.	Patients with known history of human immunodeficiency virus (HIV) infection.
23.	Any other clinically significant cardiovascular, pulmonary, gastrointestinal, hepatic, renal, neurological or psychiatric disorder or any other major concurrent illness that in the opinion of the investigator could have interfered with the interpretation of the study results or constituted a health risk for the subject if he/she took part in the study.
24.	Blood donation or loss of significant amount of blood within 60 days prior to screening.
25.	Participation in a clinical trial with any experimental treatment within 30 days prior to the screening visit or previous participation in the present study.
26.	Any other condition that in the opinion of the investigator could have interfered with the interpretation of the study results or constituted a health risk for the subject if he/she took part in the study.