

## Clinical Characteristics and In-Hospital Mortality According to Left Main and Non-Left Main Culprit Lesions

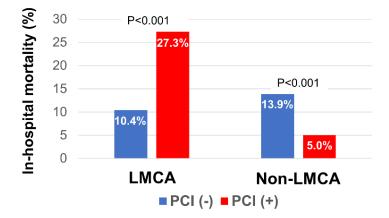
Report From the Japan Acute Myocardial Infarction Registry (JAMIR) —

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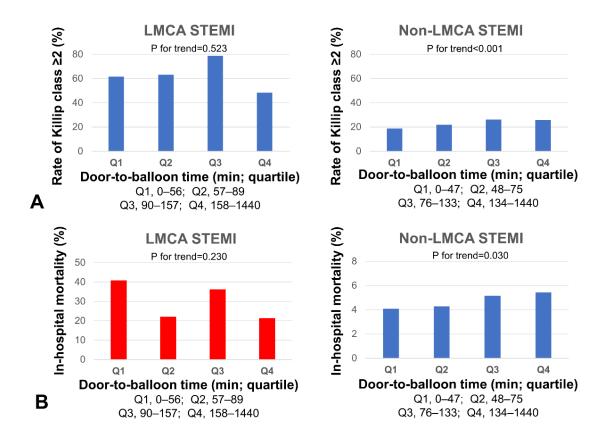
Supplementary Table. Comparison of clinical characteristics of patients with LMCAACS between JAMIR and other registries

	JAMIR	AMIS Plus Registry <sup>10</sup>	GRACE <sup>11</sup>	KAMIR <sup>12</sup>	Pappalardo A, et al. <sup>13</sup>	ASTER <sup>16</sup>
Region	Japan	Switzerland	North and South America, Europe, Australia, New Zealand	South Korea	Italy, United Kingdom	Singapore, South Korea, United States
Time period	2011-2013	2005-2010	2000-2007	2005-2008	2005-2008	2003-2012
Number of patients with LMCA ACS	404	348	1,799	256	48	67
Age, years	71 (68-79)	$63.5 \pm 12.6$	70 (60-78)	66±11	$70 \pm 12.5$	$64.2 \pm 12.8$
Male, %	80.9	75	72	74.2	75	79.1
STEMI, %	67.8	100	35	44.1	45	100
Heart failure or Killip class ≥2, %	62.4	29.9	23.7	NA	NA	NA
Cardiogenic shock, %	33.3	12.2	1.8	14.1	45	65.7
Primary PCI rate, %	75.8	100	28.5	29 (PCI during hospitalization, 78%)	100	100
In-hospital mortality, %	23.3	10.9	7.7 (cardiogenic shock, 34%)	16	21	47.8

Data expressed as mean (± standard deviation) or median (interquartile range). ACS, acute coronary syndrome; AMIS, Acute Myocardial Infarction in Switzerland; ASTER, the Asia-Pacific Left Main ST-Elevation Registry; GRACE, the Global Registry of Acute Coronary Events; JAMIR, Japan Acute Myocardial Infarction Registry; NA, not available. Other abbreviations as in Table 1.



**Supplementary Figure 1.** In-hospital mortality in acute coronary syndrome patients according to left main coronary artery (LMCA) and percutaneous coronary intervention (PCI) status.



**Supplementary Figure 2.** Distribution of (**A**) Killip class ≥2 and (**B**) in-hospital mortality in according to door-to-balloon time quartiles (Q) in patients with (**Left**) left main coronary artery (LMCA) ST-segment elevation myocardial infarction (STEMI) and (**Right**) non-LMCA STEMI.