

SUPPLEMENTARY MATERIAL

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Supplemental Appendix A: List of participating centers and investigators

The CREDO-Kyoto AMI Registry Wave-1

Cardiology

Kyoto University Hospital: Takeshi Kimura, Hiroki Shiomi

Kishiwada City Hospital: Mitsuo Matsuda, Hirokazu Mitsuoka

Tenri Hospital: Yoshihisa Nakagawa

Hyogo Prefectural Amagasaki Hospital: Hisayoshi Fujiwara, Yoshiki Takatsu, Ryoji

Taniguchi

Kitano Hospital: Ryuji Nohara

Koto Memorial Hospital: Tomoyuki Murakami, Teruki Takeda

Kokura Memorial Hospital: Masakiyo Nobuyoshi, Masashi Iwabuchi

Maizuru Kyosai Hospital: Ryozo Tatami

Nara Hospital, Kinki University Faculty of Medicine: Manabu Shirotani

Kobe City Medical Center General Hospital: Toru Kita, Yutaka Furukawa, Natsuhiko Ehara

Nishi-Kobe Medical Center: Hiroshi Kato, Hiroshi Eizawa

Kansai Denryoku Hospital: Katsuhisa Ishii

Osaka Red Cross Hospital: Masaru Tanaka

University of Fukui Hospital: Jong-Dae Lee, Akira Nakano

Shizuoka City Shizuoka Hospital: Akinori Takizawa

Hamamatsu Rosai Hospital: Masaaki Takahashi

Shiga University of Medical Science Hospital: Minoru Horie, Hiroyuki Takashima

Japanese Red Cross Wakayama Medical Center: Takashi Tamura

Shimabara Hospital: Mamoru Takahashi

Kagoshima University Medical and Dental Hospital: Chuwa Tei, Shuichi Hamasaki

Shizuoka General Hospital: Hirofumi Kambara, Osamu Doi, Satoshi Kaburagi

Kurashiki Central Hospital: Kazuaki Mitsudo, Kazushige Kadota

Mitsubishi Kyoto Hospital: Shinji Miki, Tetsu Mizoguchi

Kumamoto University Hospital: Hisao Ogawa, Seigo Sugiyama

Shimada Municipal Hospital: Ryuichi Hattori, Takeshi Aoyama, Makoto Araki

Juntendo University Shizuoka Hospital: Satoru Suwa

Cardiovascular Surgery

Kyoto University Hospital: Ryuzo Sakata, Tadashi Ikeda, Akira Marui

Kishiwada City Hospital: Masahiko Onoe

Tenri Hospital: Kazuo Yamanaka

Hyogo Prefectural Amagasaki Hospital: Keiichi Fujiwara, Nobuhisa Ohno

Kokura Memorial Hospital: Michiya Hanyu

Maizuru Kyosai Hospital: Tsutomu Matsushita

Nara Hospital, Kinki University Faculty of Medicine: Noboru Nishiwaki, Yuichi Yoshida

Kobe City Medical Center General Hospital: Yukikatsu Okada, Michihiro Nasu

Osaka Red Cross Hospital: Shogo Nakayama

University of Fukui Hospital: Kuniyoshi Tanaka, Takaaki Koshiji, Koichi Morioka

Shizuoka City Shizuoka Hospital: Mitsuomi Shimamoto, Fumio Yamazaki

Hamamatsu Rosai Hospital: Junichiro Nishizawa

Japanese Red Cross Wakayama Medical Center: Masaki Aota

Shimabara Hospital: Takafumi Tabata

Kagoshima University Medical and Dental Hospital: Yutaka Imoto, Hiroyuki Yamamoto

Shizuoka General Hospital: Katsuhiko Matsuda, Masafumi Nara

Kurashiki Central Hospital: Tatsuhiko Komiya

Mitsubishi Kyoto Hospital: Hiroyuki Nakajima

Kumamoto University Hospital: Michio Kawasuji, Syuji Moriyama

Juntendo University Shizuoka Hospital: Keiichi Tanbara

The CREDO-Kyoto AMI Registry Wave-2

Cardiology

Kyoto University Hospital: Takeshi Kimura, Hiroki Shiomi

Kishiwada City Hospital: Mitsuo Matsuda, Takashi Uegaito

Tenri Hospital: Toshihiro Tamura

Hyogo Prefectural Amagasaki General Medical Center: Yukihiro Sato, Ryoji Taniguchi

Kitano Hospital: Moriaki Inoko

Koto Memorial Hospital: Tomoyuki Murakami, Teruki Takeda

Kokura Memorial Hospital: Kenji Ando, Takenori Domei

Kindai University Nara Hospital: Manabu Shirogami

Kobe City Medical Center General Hospital: Yutaka Furukawa, Natsuhiko Ehara

Kobe City Nishi-Kobe Medical Center: Hiroshi Eizawa

Kansai Denryoku Hospital: Katsuhisa Ishii, Eiji Tada

Osaka Red Cross Hospital: Masaru Tanaka, Tsukasa Inada

Shizuoka City Shizuoka Hospital: Tomoya Onodera, Ryuzo Nawada

Hamamatsu Rosai Hospital: Eiji Shinoda, Miho Yamada

Shiga University of Medical Science Hospital: Takashi Yamamoto, Hiroshi Sakai

Japanese Red Cross Wakayama Medical Center: Takashi Tamura, Mamoru Toyofuku

Shimabara Hospital: Mamoru Takahashi

Shizuoka General Hospital: Hiroki Sakamoto, Tomohisa Tada

Kurashiki Central Hospital: Kazushige Kadota, Takeshi Tada

Mitsubishi Kyoto Hospital: Shinji Miki, Kazuhisa Kaneda

Shimada Municipal Hospital: Takeshi Aoyama

Juntendo University Shizuoka Hospital: Satoru Suwa

Cardiovascular Surgery

Kyoto University Hospital: Kenji Minatoya, Kazuhiro Yamazaki

Kishiwada City Hospital: Tatsuya Ogawa

Tenri Hospital: Atsushi Iwakura

Hyogo Prefectural Amagasaki General Medical Center: Nobuhisa Ohno

Kitano Hospital: Michiya Hanyu

Kokura Memorial Hospital: Yoshiharu Soga, Akira Marui

Kindai University Nara Hospital: Nobushige Tamura

Kobe City Medical Center General Hospital: Tadaaki Koyama

Osaka Red Cross Hospital: Shogo Nakayama

Shizuoka City Shizuoka Hospital: Fumio Yamazaki, Yasuhiko Terai

Hamamatsu Rosai Hospital: Junichiro Nishizawa

Japanese Red Cross Wakayama Medical Center: Naoki Kanemitsu, Hiroyuki Hara

Shizuoka General Hospital: Hiroshi Tsuneyoshi

Kurashiki Central Hospital: Tatsuhiko Komiya

Mitsubishi Kyoto Hospital: Jiro Esaki

Juntendo University Shizuoka Hospital: Keiichi Tambara

Supplemental Appendix B: List of clinical research coordinators**The CREDO-Kyoto AMI Registry Wave-1**

Research Institute for Production Development

Kumiko Kitagawa, Misato Yamauchi, Naoko Okamoto, Yumika Fujino, Saori Tezuka, Asuka

Saeki, Miya Hanazawa, Yuki Sato, Chikako Hibi, Hitomi Sasae, Emi Takinami, Yuriko

Uchida, Yuko Yamamoto, Satoko Nishida, Mai Yoshimoto, Sachiko Maeda, Izumi Miki,

Saeko Minematsu

The CREDO-Kyoto AMI Registry Wave-2

Research Institute for Production Development

Sakiko Arimura, Yumika Fujino, Miya Hanazawa, Chikako Hibi, Risa Kato, Yui Kinoshita,

Kumiko Kitagawa, Masayo Kitamura, Takahiro Kuwahara, Satoko Nishida, Naoko Okamoto,

Yuki Sato, Saori Tezuka, Marina Tsuda, Miyuki Tsumori, Misato Yamauchi, Itsuki

Yamazaki

Supplemental Appendix C: List of the clinical event committee members

The CREDO-Kyoto AMI Registry Wave-1

Mitsuru Abe (Kyoto Medical Center), Hiroki Shiomi (Kyoto University Hospital), Tomohisa Tada (Deutsches Herzzentrum), Junichi Tazaki (Kyoto University Hospital), Yoshihiro Kato (Saiseikai Noe Hospital), Mamoru Hayano (Gunma Cardiovascular Center), Akihiro Tokushige (Kagoshima University Hospital), Masahiro Natsuaki (Kyoto University Hospital), Tetsu Nakajima (Kyoto University Hospital).

The CREDO-Kyoto AMI Registry Wave-2

Masayuki Fuki (Kyoto University Hospital), Eri Toda Kato (Kyoto University Hospital), Yukiko Matsumura-Nakano (Kyoto University Hospital), Kenji Nakatsuma (Mitsubishi Kyoto Hospital), Hiroki Shiomi (Kyoto University Hospital), Yasuaki Takeji (Kyoto University Hospital), Hidenori Yaku (Mitsubishi Kyoto Hospital), Erika Yamamoto (Kyoto University Hospital), Ko Yamamoto (Kyoto University Hospital), Yugo Yamashita (Kyoto University Hospital), Yusuke Yoshikawa (Kyoto University Hospital), Hiroki Watanabe (Japanese Red Cross Wakayama Medical Center)

Supplementary figure legends

Supplemental Figure I. Landmark analysis within and beyond 30 days for all-cause death comparing between Wave-1 and Wave-2 in (A) entire study population, (B) patients with cardiogenic shock, and (C) patients without cardiogenic shock

HR=hazard ratio; CI=confidence interval.

Supplemental Figure II. Landmark analysis within and beyond 30 days for major bleeding comparing between Wave-1 and Wave-2

Major bleeding was defined as GUSTO moderate/severe bleeding.

HR=hazard ratio; CI=confidence interval; GUSTO=global utilization of streptokinase and tissue plasminogen activator for occluded coronary arteries.

Supplemental Figure III . Kaplan-Meier curves for major bleeding comparing between Wave-1 and Wave-2 (A) in patients with ARC-HBR and (B) in patients without ARC-HBR

ARC-HBR=academic research consortium-high bleeding risk; HR=hazard ratio; CI=confidence interval.

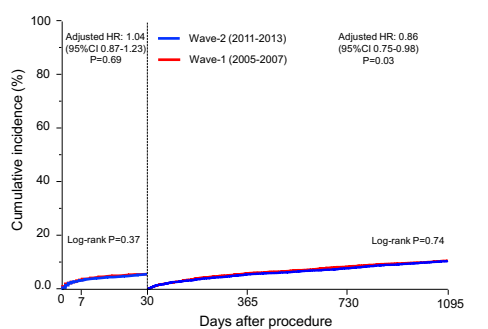
Supplemental Figure IV. Kaplan-Meier curves for persistent DAPT discontinuation comparing between Wave-1 and Wave-2

Persistent discontinuation of DAPT was defined as withdrawal of either thienopyridines or aspirin for at least 2 months.

DAPT=dual antiplatelet therapy.

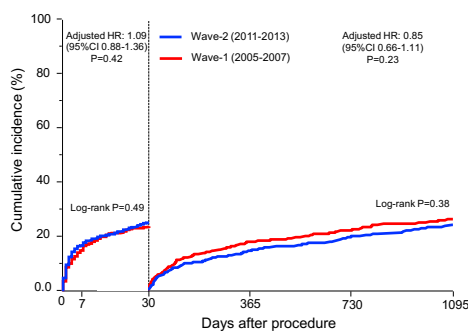
1 Supplemental Figure I. Landmark analysis within and beyond 30 days for all-cause
 2 death comparing between Wave-1 and Wave-2 (A) in entire study population, (B) in
 3 patients with cardiogenic shock, and (C) in patients without cardiogenic shock

(A) All-cause death in entire study population



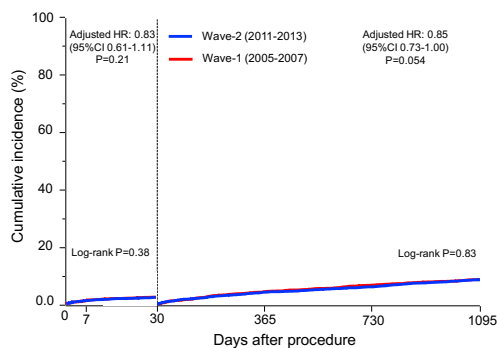
Interval	0 day	7 days	30 days	1 year	2 years	3 years
Wave-2						
N of patients at risk	4723	4551	4395	4041	3858	3685
N of patients with event	183	280	222	328	442	442
Cumulative incidence		3.9%	5.9%	5.1%	7.6%	10.4%
Wave-1						
N of patients at risk	4278	4137	4023	3744	3602	3454
N of patients with event	154	235	223	329	419	419
Cumulative incidence		3.6%	5.5%	5.6%	8.3%	10.6%

(B) All-cause death in patients with cardiogenic shock



Interval	0 day	7 days	30 days	1 year	2 years	3 years
Wave-2						
N of patients at risk	757	629	556	446	407	375
N of patients with event	136	193	73	100	123	123
Cumulative incidence		18.0%	25.6%	13.7%	19.0%	23.6%
Wave-1						
N of patients at risk	596	506	450	370	346	317
N of patients with event	100	143	74	96	114	114
Cumulative incidence		16.8%	24.0%	16.6%	21.5%	25.7%

(C) All-cause death in patients without cardiogenic shock



Interval	0 day	7 days	30 days	1 year	2 years	3 years
Wave-2						
N of patients at risk	3966	3922	3839	3595	3451	3310
N of patients with event	47	87	149	228	319	319
Cumulative incidence		1.2%	2.2%	3.9%	6.1%	8.6%
Wave-1						
N of patients at risk	3682	3631	3573	3374	3256	3137
N of patients with event	54	92	149	233	305	305
Cumulative incidence		1.5%	2.5%	4.2%	6.6%	8.7%

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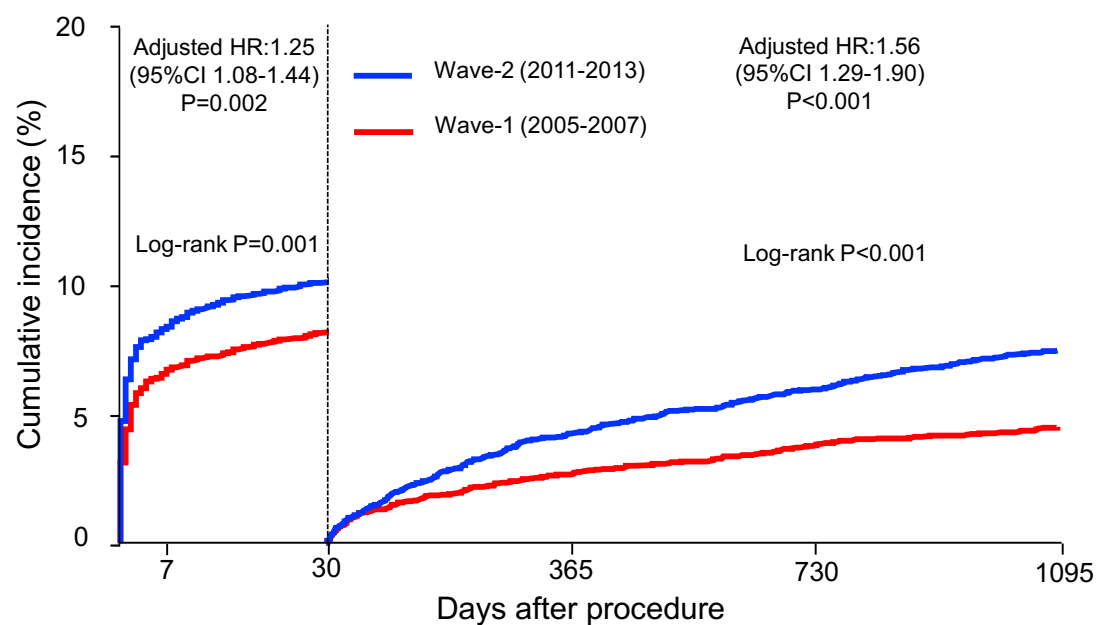
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- 1 Supplemental Figure II. Landmark analysis within and beyond 30 days for major
- 2 bleeding comparing between Wave-1 and Wave-2

Major bleeding

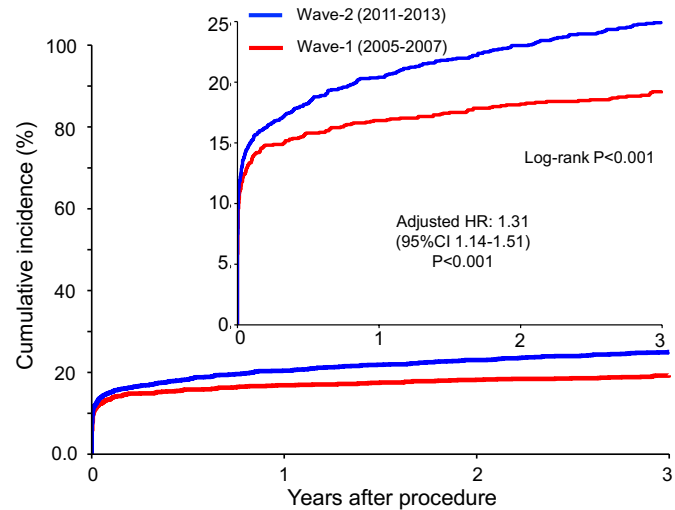


Interval	0 day	7 days	30 days	1 year	2 years	3 years
Wave-2						
N of patients at risk	4723	4234	4067	3665	3453	3276
N of patients with event		383	457	161	229	284
Cumulative incidence		8.2%	9.8%	4.1%	5.9%	7.4%
Wave-1						
N of patients at risk	4278	3909	3773	3485	3333	3189
N of patients with event		272	331	97	136	161
Cumulative incidence		6.4%	7.8%	2.6%	3.7%	4.5%

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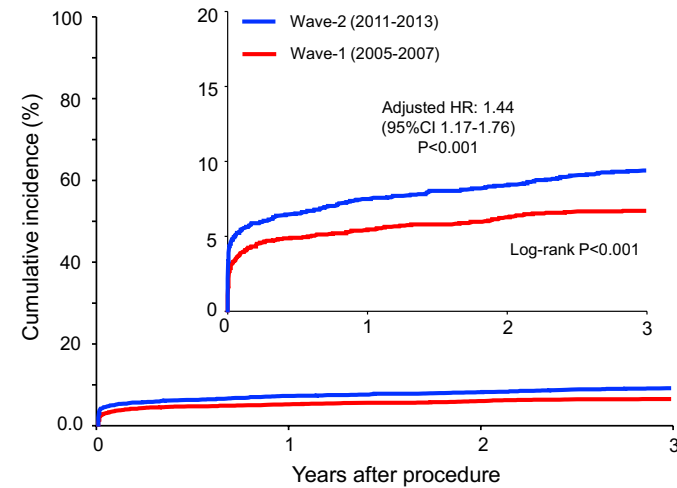
- 1 Supplemental Figure III. Kaplan-Meier curves for major bleeding comparing between Wave-1 and Wave-2 for major bleeding (A) in
 2 patients with ARC-HBR and (B) in patients without ARC-HBR

(A) Major bleeding in patients with ARC-HBR



Interval	0 day	30 days	1 year	2 years	3 years
Wave-2					
N of patients at risk	2213	1736	1454	1308	1199
N of patients with event		322	430	476	508
Cumulative incidence		14.8%	20.4%	23.0%	25.0%
Wave-1					
N of patients at risk	1811	1451	1259	1170	1082
N of patients with event		237	293	313	328
Cumulative incidence		13.4%	16.8%	18.2%	19.3%

(B) Major bleeding in patients without ARC-HBR



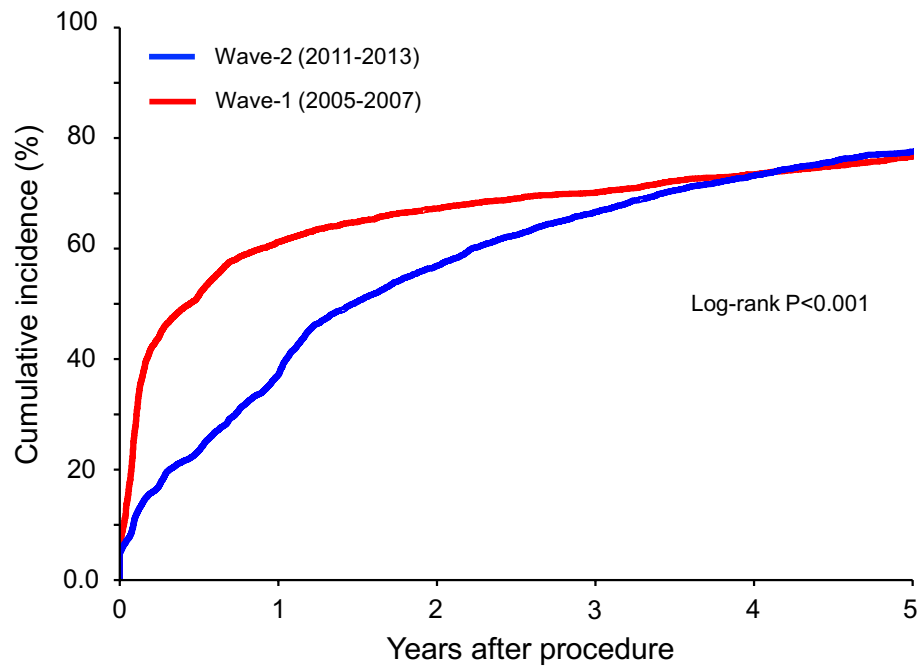
Interval	0 day	30 days	1 year	2 years	3 years
Wave-2					
N of patients at risk	2510	2331	2211	2145	2077
N of patients with event		135	188	210	233
Cumulative incidence		5.4%	7.6%	8.5%	9.5%
Wave-1					
N of patients at risk	2467	2322	2226	2163	2107
N of patients with event		94	135	154	164
Cumulative incidence		3.8%	5.5%	6.4%	6.8%

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- 1 Supplemental Figure IV. Kaplan-Meier curves for persistent DAPT discontinuation
- 2 comparing between Wave-1 and Wave-2

Persistent DAPT discontinuation



Interval	0 day	30 days	1 year	2 years	3 years	4 years	5 years
Wave-2							
N of patients at risk	4625	3987	2603	1716	1272	971	700
Cumulative incidence		9.6%	37.2%	56.9%	66.7%	73.2%	77.5%
Wave-1							
N of patients at risk	4180	3093	1457	1186	1029	849	442
Cumulative incidence		23.7%	61.2%	67.3%	70.1%	73.4%	76.7%

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