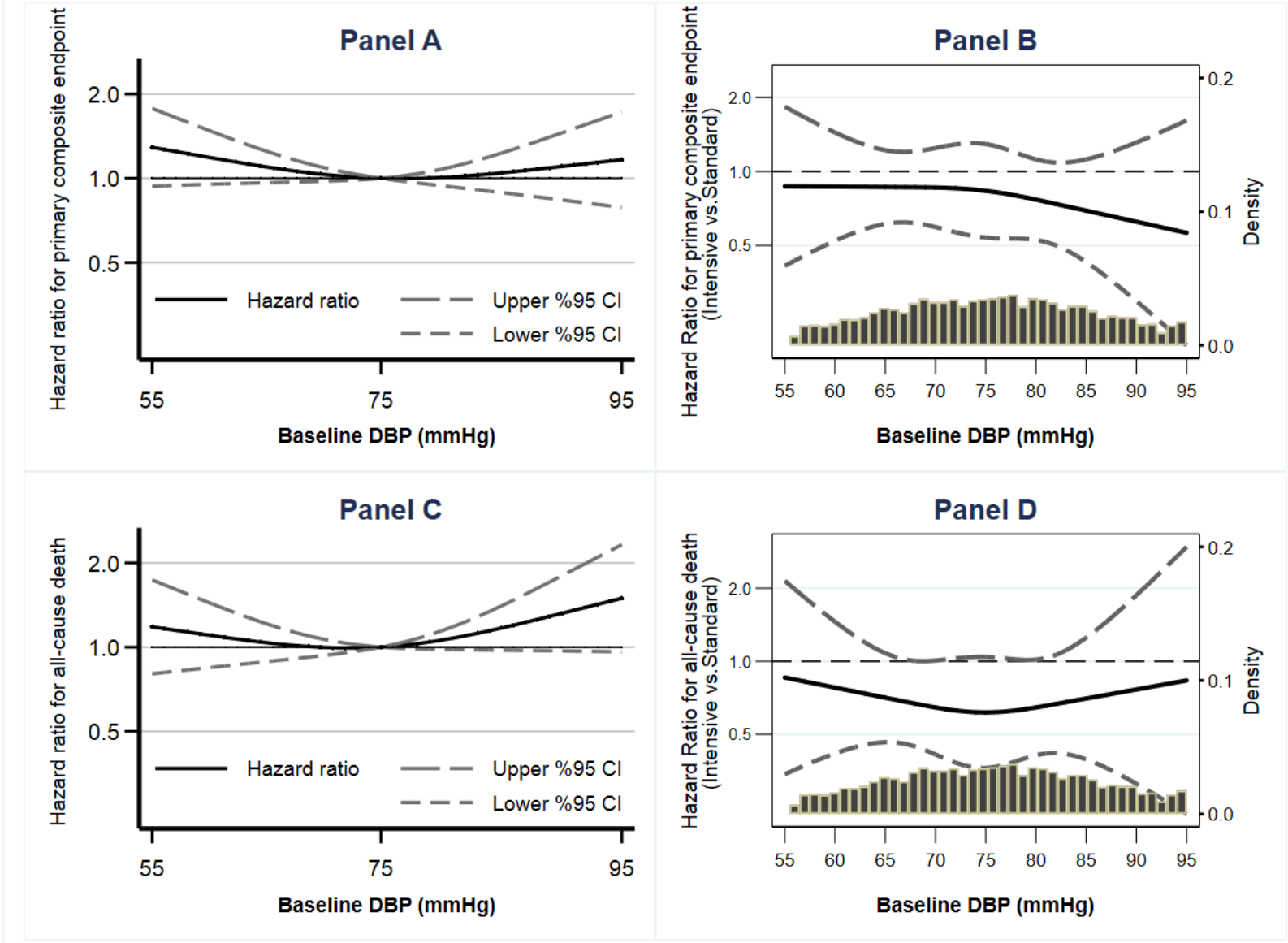
Supplemental Materials

Supplemental Figure 1: Left hand panels: cubic spline regression models showing hazard ratios with pointwise 95% confidence intervals for the association of baseline DBP as a continuous variable with the primary composite endpoint (Panel A) and all-cause death (Panel C) in SPRINT participants with baseline chronic kidney disease. Models include the randomized SBP intervention, age, sex and race. Right hand panels: cubic spline regression models showing hazard ratios with pointwise 95% confidence intervals for the effect of the randomized SBP intervention across a range of baseline DBP on the primary composite endpoint (Panel B) and all-cause death (Panel D) in SPRINT participants with baseline chronic kidney disease. Likelihood ratio tests for the linear interaction item of the baseline DBP and the SBP intervention were non-significant (primary composite endpoint interaction p-value=0.62; all-cause death interaction p-value=0.23. Models are adjusted for the randomized SBP intervention, adjusted for age, sex, race, cardiovascular disease, Framingham 10-year cardiovascular disease risk score ≥15%, smoking history and baseline eGFR.


Panel A
Hazard ratio for primary composite endpoint
2.0
1.0
0.5
Hazard ratio
Upper %95 CI
Lower %95 CI
55
75
95
Baseline DBP (mmHg)
Panel B
Hazard Ratio for primary composite endpoint (Intensive vs.Standard)
2.0
1.0
0.5
0.2
0.1
0.0
Density
55
60
65
70
75
80
85
90
95
Baseline DBP (mmHg)
Panel C
Hazard ratio for all-cause death
2.0
1.0
0.5
Hazard ratio
Upper %95 CI
Lower %95 CI
55
75
95
Baseline DBP (mmHg)
Panel D
Hazard Ratio for all-cause death (Intensive vs.Standard)
2.0
1.0
0.5
0.2
0.1
0.0
Density
55
60
65
70
75
80
85
90
95
Baseline DBP (mmHg)

Supplemental Figure 2: Forest plots showing hazard ratios (HR) and 95% confidence intervals (CI) for the effect of the randomized SBP intervention on the primary composite endpoint (Panel A) and all-cause death (Panel B) for the entire chronic kidney disease (CKD) cohort and by baseline diastolic blood pressure (DBP) tertile. Likelihood ratio tests comparing HR for the SBP intervention among baseline DBP tertiles were non-significant (primary composite endpoint interaction p-value=0.95; all-cause death interaction p-value=0.93). Models are adjusted for age, sex and race, cardiovascular disease, Framingham 10-year cardiovascular disease risk score ≥15%, smoking history and baseline eGFR.