# SUPPLEMENTAL MATERIAL

# Appendix S1. ChiOTEAF Registry Investigators

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**Table S1. Predictors of the ABC compliance among patients with atrial fibrillation and multimorbidity.**

| | Univariate | | | Multivariate | | |
|---|---|---|---|---|---|---|
| | **Odds ratio** | **95% CI** | **P** | **Odds ratio** | **95% CI** | **P** |
| **Age** | 0.97 | 0.96-0.98 | <0.001 | 0.98 | 0.97-0.99 | <0.001 |
| Female sex | 1.01 | 0.93-1.27 | 0.317 | | | |
| Diabetes mellitus | 1.03 | 0.88-1.21 | 0.711 | | | |
| **Hypertension** | 1.58 | 1.32-1.89 | <0.001 | 1.50 | 1.23-1.82 | <0.001 |
| Heart failure | 0.82 | 0.70-0.96 | 0.014 | - | - | - |
| **Coronary artery disease** | 0.58 | 0.49-0.69 | <0.001 | 0.55 | 0.46-0.65 | <0.001 |
| Prior ischemic stroke | 1.11 | 0.93-1.31 | 0.242 | | | |
| **Prior major bleeding** | 0.11 | 0.05-0.23 | <0.001 | 0.14 | 0.06-0.29 | <0.001 |
| **Chronic kidney disease** | 0.58 | 0.46-0.75 | <0.001 | 0.66 | 0.51-0.86 | 0.002 |
| Liver disease | 0.76 | 0.52-1.12 | 0.16 | | | |
| **COPD** | 0.58 | 0.44-0.76 | <0.001 | 0.71 | 0.53-0.96 | 0.025 |
| Sleep apnea | 1.23 | 0.84-1.79 | 0.288 | | | |
| **Polypharmacy** | 1.87 | 1.59-2.18 | <0.001 | 2.15 | 1.81-2.55 | <0.001 |

CI – confidence interval; COPD – chronic obstructive pulmonary disease; OAC – oral anticoagulation.

**Table S2. Effects of ABC compliance on clinical outcomes (composite outcome; all-cause death; any thromboembolism; major bleeding) among patients with multimorbidity and polypharmacy.**

| Outcomes | ABC N=621 n (%) | Non-ABC N=582 n (%) | P^ | Odds ratio* (95% CI) |
|---|---|---|---|---|
| Composite outcome# | 10 (1.6) | 31 (5.3) | <0.001 | 0.38 (0.18-0.79) |
| All-cause death | 7 (1.1) | 18 (3.1) | 0.017 | 0.49 (0.20-1.20) |
| TE events | 4 (0.6) | 15 (2.6) | 0.007 | 0.31 (0.10-0.94) |
| Major bleeding | 10 (1.6) | 5 (0.9) | 0.242 | 2.43 (0.81-7.26) |

*Adjusted for age.

# Composite outcome of all-cause death/any thromboembolism

^ Between-group comparison made by $\chi 2$ test

TE – thromboembolism; CI – confidence interval.

**Table S3. The effects of ABC compliance on clinical outcomes (composite outcome; all-cause death; any thromboembolism; major bleeding) among overall multimorbidity cohort.**

| Outcomes | ABC N=1133 n (%) | Non-ABC N=3511 n (%) | P^ | Odds ratio* (95% CI) |
|---|---|---|---|---|
| Composite outcome# | 20 (1.8) | 441 (12.6) | <0.001 | 0.19 (0.12-0.30) |
| All-cause death | 13 (1.1) | 377 (10.7) | <0.001 | 0.15 (0.09-0.27) |
| TE events | 8 (0.7) | 84 (2.4) | <0.001 | 0.39 (0.19-0.83) |
| Major bleeding | 13 (1.1) | 77 (2.2) | 0.025 | 0.71 (0.39-1.29) |

*Adjusted for age.

# Composite outcome of all-cause death/any thromboembolism

^ Between-group comparison made by $\chi 2$ test

TE – thromboembolism; CI – confidence interval.

**Table S4. The effects of ABC compliance on clinical outcomes (composite outcome; all-cause death; any thromboembolism; major bleeding) among overall polypharmacy cohort.**

| Outcomes | ABC N=687 n (%) | Non-ABC N=1575 n (%) | P^ | Odds ratio* (95% CI) |
|---|---|---|---|---|
| Composite outcome# | 11 (1.6) | 173 (11.0) | <0.001 | 0.19 (0.10-0.36) |
| All-cause death | 8 (1.2) | 143 (9.1) | <0.001 | 0.18 (0.09-0.37) |
| TE events | 4 (0.6) | 36 (2.3) | 0.003 | 0.35 (0.12-0.99) |
| Major bleeding | 10 (1.5) | 32 (2.0) | 0.345 | 0.98 (0.47-2.05) |

*Adjusted for age.

# Composite outcome of all-cause death/any thromboembolism

^ Between-group comparison made by χ2 test

TE – thromboembolism; CI – confidence interval.