

Supplementary data

Supplementary Table 1. STROBE Statement—Checklist of items that should be included in reports of cohort studies.

| | Item No | Recommendation | Reported |
|------------------------------|---------|--|--|
| Title and abstract | 1 | (a) Indicate the study's design with a commonly used term in the title or the abstract (b) Provide in the abstract an informative and balanced summary of what was done and what was found | X |
| Introduction | | | |
| Background/rationale | 2 | Explain the scientific background and rationale for the investigation being reported | X |
| Objectives | 3 | State specific objectives, including any prespecified hypotheses | X |
| Methods | | | |
| Study design | 4 | Present key elements of study design early in the paper | X |
| Setting | 5 | Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection | X |
| Participants | 6 | (a) Give the eligibility criteria, and the sources and methods of selection of participants. Describe methods of follow-up (b) For matched studies, give matching criteria and number of exposed and unexposed | X |
| Variables | 7 | Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable | X |
| Data sources/ measurement | 8* | For each variable of interest, give sources of data and details of methods of assessment (measurement). Describe comparability of assessment methods if there is more than one group | X |
| Bias | 9 | Describe any efforts to address potential sources of bias | X |
| Study size | 10 | Explain how the study size was arrived at | X |
| Quantitative variables | 11 | Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why | X |
| Statistical methods | 12 | (a) Describe all statistical methods, including those used to control for confounding (b) Describe any methods used to examine subgroups and interactions (c) Explain how missing data were addressed (d) If applicable, explain how loss to follow-up was addressed (e) Describe any sensitivity analyses | a. X b. X c. N/A d. N?A e. N/A |

| | | | |
|--------------------------|-----|---|---|
| Results | | | |
| Participants | 13* | (a) Report numbers of individuals at each stage of study—eg numbers potentially eligible, examined for eligibility, confirmed eligible, included in the study, completing follow-up, and analysed (b) Give reasons for non-participation at each stage (c) Consider use of a flow diagram | X |
| Descriptive data | 14* | (a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders (b) Indicate number of participants with missing data for each variable of interest (c) Summarise follow-up time (eg, average and total amount) | X |
| Outcome data | 15* | Report numbers of outcome events or summary measures over time | X |
| Main results | 16 | (a) Give unadjusted estimates and, if applicable, confounder-adjusted estimates and their precision (eg, 95% confidence interval). Make clear which confounders were adjusted for and why they were included (b) Report category boundaries when continuous variables were categorized (c) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period | X |
| Other analyses | 17 | Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses | X |
| Discussion | | | |
| Key results | 18 | Summarise key results with reference to study objectives | X |
| Limitations | 19 | Discuss limitations of the study, taking into account sources of potential bias or imprecision. Discuss both direction and magnitude of any potential bias | X |
| Interpretation | 20 | Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence | X |
| Generalisability | 21 | Discuss the generalisability (external validity) of the study results | X |
| Other information | | | |
| Funding | 22 | Give the source of funding and the role of the funders for the present study and, if applicable, for the original study on which the present article is based | X |

*Give information separately for exposed and unexposed groups.

Note: An Explanation and Elaboration article discusses each checklist item and gives methodological background and published examples of transparent reporting. The STROBE checklist is best used in conjunction with this article (freely available on the Web sites of PLoS Medicine at <http://www.plosmedicine.org/>, Annals of Internal Medicine at <http://www.annals.org/>, and Epidemiology at <http://www.epidem.com/>). Information on the STROBE Initiative is available at <http://www.strobe-statement.org>

Supplementary Table 2. Major characteristics of the five included studies. Adapted with permission from [3].

| Variable | ABSORB II | ABSORB Japan | ABSORB China | ABSORB III | ABSORB EXTEND |
|--|------------------------------------|---|---|-------------------------------|------------------------------|
| ClinicalTrials.gov identifier | NCT01425281 | NCT01844284 | NCT01923740 | NCT01751906 | NCT01023789 |
| Type of study | Randomised | Randomised | Randomised | Randomised | Observational |
| Masking | Single blind | Single blind | Open label | Single blind | Open label |
| Number of centres | 46 | 38 | 24 | 193 | 56 |
| Number of patients | 501 | 400 | 480 ^a | 2,008 | 812 |
| - Assigned to BRS | 335 | 266 | 241 | 1,322 | 812 |
| - Assigned to EES | 166 | 134 | 239 | 686 | N/A |
| Number of lesions allowed | 2 | 2 | 2 | 2 | 2 |
| Number of vessels allowed ^b | 2 | 2 | 2 | 2 | 2 |
| Target lesion reference vessel diameter (mm) | 2.25-3.8 by online QCA | 2.5-3.75 by online QCA or visual assessment | 2.5-3.75 by online QCA or visual assessment | 2.5-3.75 by visual assessment | 2.0-3.8 by visual assessment |
| Maximum target lesion length (mm) | 48 | 24 | 24 | 24 | 28 |
| Device overlap allowed | Yes | For bail-out only | For bail-out only | For bail-out only | Yes |
| Routine angiographic follow-up | At 3 years | At 13 months | At 1 year | No | No |
| Primary endpoint | Angiographic vasomotion at 3 years | TLF at 1 year | Angiographic in-segment late loss at 1 year | TLF at 1 year | Not specified |
| Total duration of follow-up (years) | 5 | 5 | 5 | 5 | 3 |

^a A total of 5 patients (3 randomised to BVS and 2 randomised to EES) withdrew consent immediately after enrolment and were deregistered. These patients are not included in the study population.

^b Maximum one lesion per vessel.

BRS: bioresorbable scaffold; EES: everolimus-eluting stent; QCA: quantitative coronary analysis; TLF: target lesion failure

Supplementary Table 3. Clinical characteristics of the five included studies.

| Variable | ABSORB II (n=335) | ABSORB Japan (n=266) | ABSORB China (n=238) | ABSORB III (n=1322) | ABSORB EXTEND (n=812) | Overall (n=2,973) |
|---------------------------------------|----------------------|----------------------------|----------------------------|------------------------|-----------------------------|----------------------|
| Age (years) | 61.5±10.0 | 67.2±9.4 | 57.2±11.4 | 63.5±10.6 | 61.1±10.8 | 62.4±10.8 |
| Men | 253 (75.5%) | 210 (78.9%) | 171 (71.8%) | 934 (70.7%) | 603 (74.3%) | 2,171 (73.0%) |
| Body mass index (kg/m ²) | 27.9±4.1 | 24.0±3.0 | 25.2±3.4 | 30.6±6.2 | 27.2±4.4 | 28.4±5.6 |
| Diabetes | 80 (23.9%) | 96 (36.1%) | 61 (25.6%) | 416 (31.5%) | 216 (26.6%) | 869 (29.2%) |
| Insulin-dependent | 22 (6.6%) | 24 (9.0%) | 23 (9.7%) | 138 (10.5%) | 37 (4.6%) | 244 (8.2%) |
| Dyslipidaemia | 252 (75.2%) | 218 (82.0%) | 102 (42.9%) | 1,140 (86.2%) | 584 (71.9%) | 2,296 (77.2%) |
| Hypertension | 231 (69.0%) | 208 (78.2%) | 140 (58.8%) | 1,122 (84.9%) | 580 (71.4%) | 2,281 (76.7%) |
| Current smoker | 79 (23.6%) | 53 (19.9%) | 78 (32.8%) | 281 (21.3%) | 188 (23.2%) | 679 (22.8%) |
| Prior myocardial infarction | 93 (28.0%) | 42 (16.0%) | 40 (16.8%) | 282 (21.5%) | 230 (28.5%) | 687 (23.3%) |
| Prior PCI | 117 (34.9%) | 94 (35.3%) | 24 (10.1%) | 482 (36.5%) | 224 (27.6%) | 941 (31.7%) |
| Prior CABG | 7 (2.1%) | 5 (1.9%) | 0 | 57 (4.3%) | 14 (1.7%) | 83 (2.8%) |
| Creatinine clearance (ml/min) | 98.2±32.3 | N/A | 97.0±32.2 | 105.5±79.4 | N/A | 103.2±68.9 |
| Advanced chronic kidney disease* | N/A | N/A | 2 (0.8%) | 143 (10.8%) | 8 (1.0%) | 153 (6.5%) |
| Evidence of ischaemia at presentation | | | | | | |
| None | 0 | 0 | 1 (0.4%) | 28 (2.1%) | 54 (6.7%) | 83 (2.8%) |
| Stable angina | 214 (63.9%) | 170 (63.9%) | 53 (22.3%) | 757 (57.3%) | 461 (56.8%) | 1,655 (55.7%) |
| Unstable angina | 68 (20.3%) | 26 (9.8%) | 156 (65.5%) | 355 (26.9%) | 215 (26.5%) | 820 (27.6%) |
| Silent ischaemia | 42 (12.5%) | 70 (26.3%) | 6 (2.5%) | 132 (10.0%) | 49 (6.0%) | 299 (10.1%) |
| Acute myocardial infarction | 11 (3.3%) | 0 | 18 (7.6%) | 37 (2.8%) | 33 (4.1%) | 99 (3.3%) |
| Post-myocardial infarction angina | 0 | 0 | 4 (1.7%) | 12 (0.9%) | 0 | 16 (0.7%) |
| Stable ischaemic heart disease | 256 (76.4%) | 240 (90.2%) | 60 (25.2%) | 917 (69.4%) | 564 (69.5%) | 2,037 (68.5%) |
| Acute coronary syndrome | 79 (23.6%) | 26 (9.8%) | 178 (74.8%) | 404 (30.6%) | 248 (30.5%) | 935 (31.5%) |

*Estimated glomerular filtration rate <30 ml/min/1.73 m² or dialysis at the time of screening.

CABG: coronary artery bypass graft; PCI: percutaneous coronary intervention

Supplementary Table 4. Angiographic characteristics of the five included studies.

| Variable | ABSORB II (n=335) | ABSORB Japan (n=266) | ABSORB China (n=238) | ABSORB III (n=1322) | ABSORB EXTEND (n=812) | Overall (n=2,973) |
|---|------------------------------|-------------------------------------|-------------------------------------|--------------------------------|--------------------------------------|------------------------------|
| Number of diseased vessels | 1.19±0.45 | N/A | 1.55±0.78 | 1.37±0.60 | 1.25±0.63 | 1.33±0.62 |
| Number of lesions treated | 1.09±0.28 | 1.03±0.18 | 1.05±0.23 | 1.05±0.21 | 1.08±0.27 | 1.06±0.24 |
| One | 306 (91.3%) | 257 (96.6%) | 225 (94.5%) | 1,257 (95.1%) | 750 (92.4%) | 2,795 (94.0%) |
| Two | 29 (8.7%) | 9 (3.4%) | 13 (5.5%) | 64 (4.8%) | 62 (7.6%) | 177 (6.0%) |
| Treated vessel | | | | | | |
| Right coronary | 95 (26.1%) | 85 (30.9%) | 63 (25.1%) | 404 (29.2%) | 250 (28.6%) | 897 (28.5%) |
| Left anterior descending | 163 (44.8%) | 127 (46.2%) | 139 (55.4%) | 617 (44.5%) | 395 (45.2%) | 1,441 (45.8%) |
| Circumflex | 106 (29.1%) | 63 (22.9%) | 49 (19.5%) | 363 (26.2%) | 228 (26.1%) | 809 (25.7%) |
| Left main | 0 | 0 | 0 | 1 (0.1%) | 1 (0.1%) | 2 (0.1%) |
| Baseline quantitative coronary analysis | | | | | | |
| Reference vessel diameter (mm) | 2.59±0.38 | 2.71±0.45 | 2.81±0.44 | 2.67±0.45 | 2.65±0.39 | 2.67±0.43 |
| Minimal luminal diameter (mm) | 1.07±0.32 | 0.96±0.33 | 0.98±0.40 | 0.92±0.37 | 1.11±0.32 | 1.00±0.36 |
| Diameter stenosis (%) | 58.6±11.1 | 64.5±11.1 | 65.3±12.9 | 65.2±12.5 | 58.0±10.6 | 62.4±12.2 |
| Lesion length (mm) | 13.8±6.5 | 13.4±5.3 | 14.1±5.1 | 12.6±5.4 | 12.3±5.3 | 12.9±5.5 |
| Lesion characteristics | | | | | | |
| Thrombus | 5 (1.4%) | 0 | 0 | 3 (0.2%) | 14 (1.6%) | 22 (0.7%) |
| Tortuosity (moderate/severe) | 34 (9.4%) | 23 (8.4%) | 6 (2.4%) | 40 (2.9%) | N/A | 103 (4.5%) |
| Angulation >45° | 9 (2.5%) | 33 (12.0%) | 18 (7.2%) | 166 (12.0%) | N/A | 226 (9.9%) |
| Calcification (moderate/severe) | 46 (12.7%) | 76 (27.7%) | 44 (17.5%) | 457 (33.1%) | 121 (13.9%) | 744 (23.7%) |
| Ulceration | N/A | 11 (4.0%) | 6 (2.4%) | 37 (2.7%) | N/A | 54/1,905 (2.8%) |
| Aneurysm | N/A | 2 (0.7%) | 1 (0.4%) | 36 (2.6%) | N/A | 39/1,905 (2.0%) |
| Bifurcation | 0 | 100 (36.4%) | 126 (50.2%) | 508 (36.7%) | 48 (5.5%) | 782 (24.9%) |
| Type B2/C lesion | 165 (45.5%) | 208 (75.6%) | 188 (74.9%) | 949 (68.7%) | 386 (44.7%) | 1,896 (60.5%) |

Supplementary Table 5. Procedural characteristics of the five included studies.

| Variable | ABSORB II (n=335) | ABSORB Japan (n=266) | ABSORB China (n=238) | ABSORB III (n=1,322) | ABSORB EXTEND (n=812) | Overall (n=2,973) |
|--|----------------------|----------------------------|----------------------------|-------------------------|-----------------------------|----------------------|
| Intravascular imaging guidance | 325 (97.0%) | 40 (15.0%) | 0 | 146 (11.2%) | 12 (4.3%) | 523 (21.6%) |
| Predilatation | 364 (100.0%) | 275 (100.0%) | 250 (99.6%) | 1,383 (99.9%) | 870 (99.7%) | 3,142 (99.8%) |
| Maximum predilatation balloon diameter (mm) | 2.6±0.4 | 2.8±0.4 | 2.8±0.4 | 2.9±0.4 | 2.6±0.3 | 2.7±0.4 |
| Maximum predilatation balloon pressure (atm) | 8.0±0.0 | N/A | N/A | 12.1±3.4 | 12.7±3.4 | 11.7±3.5 |
| Post-dilatation with non-compliant balloon | 221 (60.7%) | 176 (64.0%) | 154 (61.4%) | 788 (57.0%) | 599 (68.7%) | 1,938 (61.6%) |
| Maximum post-dilatation balloon diameter (mm) | 3.15±0.34 | 3.18±0.44 | 3.29±0.43 | 3.22±0.45 | 3.12±0.24 | 3.18±0.39 |
| Maximum post-dilatation balloon pressure (atm) | 15.4±3.4 | 15.5±4.1 | 16.8±3.8 | 15.6±3.3 | 16.7±3.5 | 16.0±3.6 |
| Total scaffold length per lesion (mm) | 24.1±10.8 | 20.2±5.8 | 22.8±6.7 | 20.5±7.2 | 22.0±7.0 | 21.5±7.6 |
| Overlapping scaffolds | N/A | N/A | N/A | N/A | 115 (14.2%) | 115 (14.2%) |
| Post-PCI quantitative coronary analysis | | | | | | |
| In-scaffold | | | | | | |
| Acute gain (mm) | 1.15±0.38 | 1.47±0.40 | 1.51±0.46 | 1.45±0.45 | 1.17±0.34 | 1.34±0.44 |
| Minimal luminal diameter (mm) | 2.22±0.33 | 2.42±0.37 | 2.48±0.39 | 2.37±0.40 | 2.28±0.31 | 2.34±0.37 |
| Diameter stenosis (%) | 15.8±6.5 | 11.6±7.5 | 12.2±7.5 | 11.6±8.8 | 15.3±6.3 | 13.2±7.9 |
| In-segment | | | | | | |
| Acute gain (mm) | 0.99±0.40 | 1.25±0.41 | 1.32±0.47 | 1.23±0.46 | 0.99±0.36 | 1.14±0.44 |
| Minimal luminal diameter (mm) | 2.06±0.37 | 2.20±0.39 | 2.30±0.40 | 2.15±0.41 | 2.10±0.33 | 2.14±0.39 |
| Diameter stenosis (%) | 20.1±7.7 | 20.0±6.7 | 19.0±6.8 | 20.0±7.9 | 20.0±7.0 | 19.9±7.5 |
| Device success | N/A | 271 (98.9%) | 245 (98.0%) | N/A | 861 (98.9%) | 1,377 (98.7%) |

PCI: percutaneous coronary intervention

Supplementary Table 6. Salient clinical, angiographic, and procedural characteristics according to dual antiplatelet discontinuation.

| Variable | Permanent discontinuation (n=2,139) | No permanent discontinuation (n=830) | Overall (n=2,969) | p-value |
|---|--|---|--------------------------|----------------|
| Age (years) | 62.9±10.7 | 61.2±10.9 | 62.5±10.8 | <0.0001 |
| Men | 1,541 (72.0%) | 628 (75.7%) | 2,169 (73.1%) | 0.05 |
| Diabetes | 603 (28.2%) | 266 (32.0%) | 869 (29.3%) | 0.04 |
| Current smoker | 443 (20.7%) | 234 (28.2%) | 677 (22.8%) | <0.0001 |
| Prior myocardial infarction | 426 (20.0%) | 262 (31.8%) | 688 (23.3%) | <0.0001 |
| Prior PCI | 626 (29.3%) | 359 (43.3%) | 985 (33.2%) | <0.0001 |
| Acute coronary syndrome | 659 (30.8%) | 275 (33.2%) | 934 (31.5%) | 0.21 |
| Number of diseased vessels | 1.32±0.61 | 1.33±0.64 | 1.33±0.62 | 0.97 |
| Number of treated lesions | 1.06±0.24 | 1.06±0.24 | 1.06±0.24 | 0.93 |
| Total lesion length (mm)* | 12.9±5.5 | 12.6±5.4 | 12.9±5.5 | 0.16 |
| Reference vessel diameter (mm)* | 2.68±0.43 | 2.65±0.43 | 2.67±0.43 | 0.07 |
| Calcification (moderate/severe)* | 559 (24.8%) | 183 (20.9%) | 742 (23.7%) | 0.07 |
| Bifurcation lesion* | 569 (25.1%) | 212 (24.3%) | 781 (24.9%) | 0.61 |
| Left main or left anterior descending artery treated* | 560 (24.7%) | 250 (28.4%) | 810 (25.8%) | 0.04 |
| Intravascular imaging guidance | 412 (23.1%) | 110 (17.4%) | 522 (21.6%) | 0.003 |
| Device success* | 2,442 (99.3%) | 956 (99.1%) | 3,398 (99.2%) | 0.55 |

* per lesion.

Supplementary Table 7. Any dual antiplatelet therapy discontinuation in 2,973 BRS-treated patients.

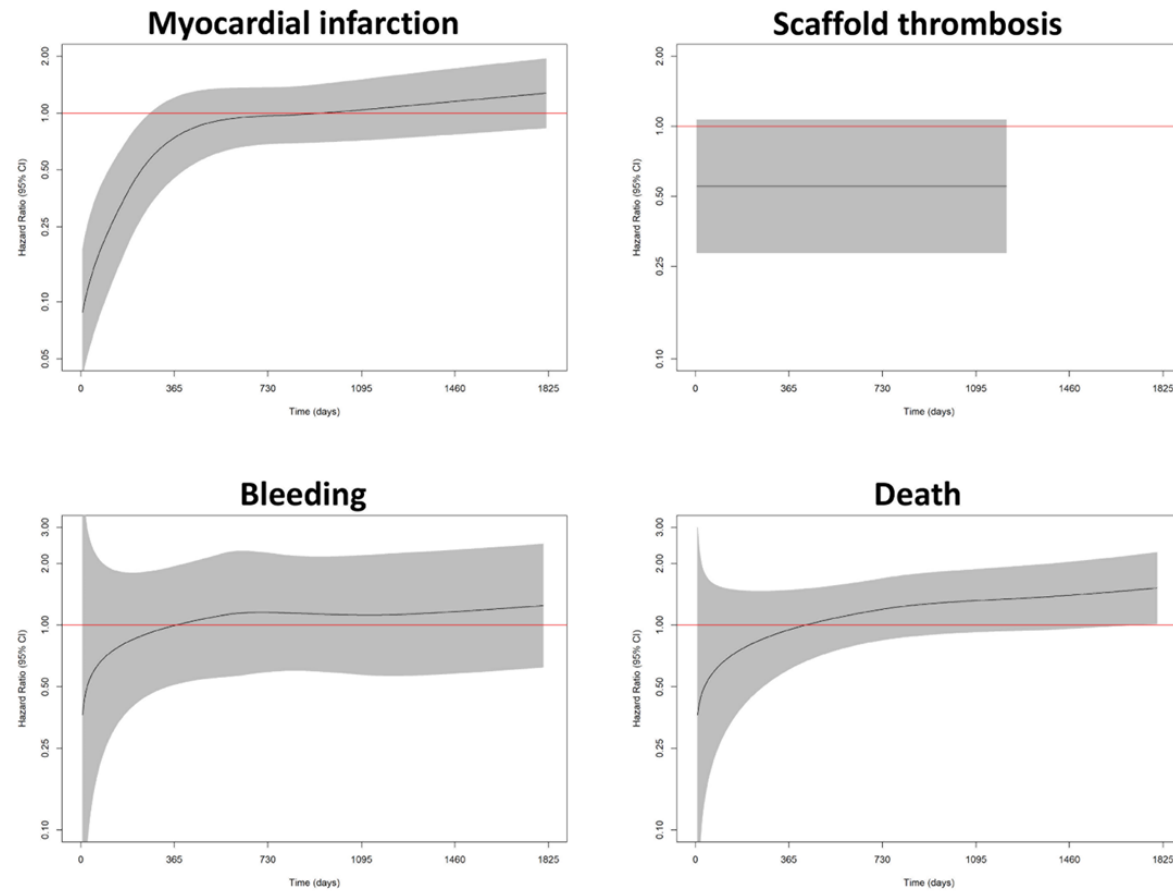
| Interval | >24 hours | ≥7 days | Permanently |
|------------------|---------------------|---------------------|---------------------|
| 0-1 year | 678/2,970 (22.8%) | 630/2,970 (21.2%) | 482/2,970 (16.2%) |
| 0-6 months | 187/2,970 (6.3%) | 145/2,970 (4.9%) | 73/2,970 (2.5%) |
| 6 months-1 year | 610/2,937 (20.8%) | 586/2,937 (20.0%) | 479/2,937 (16.3%) |
| 1-3 years | 1,661/2,911 (57.1%) | 1,640/2,911 (56.3%) | 1,475/2,911 (50.7%) |
| 1-2 years | 1,490/2,911 (51.2%) | 1,474/2,911 (50.6%) | 1,311/2,911 (45.0%) |
| 2-3 years | 1,576/2,840 (55.5%) | 1,566/2,840 (55.1%) | 1,454/2,840 (51.2%) |
| 0-3 years | 1,742/2,970 (58.7%) | 1,699/2,970 (57.2%) | 1,484/2,970 (50.0%) |

Note: the denominators represent the number of patients alive and on-study at the start of each interval.

Supplementary Table 8. Pooled adverse event rates and unadjusted and adjusted risks occurring in patients with versus without permanent dual antiplatelet therapy (DAPT) discontinuation during 3-5-year and 0-5-year follow-up.

| Variable | No permanent discontinuation | Permanent discontinuation* | Unadjusted HR (95% CI) | <i>p</i>-value | Adjusted HR (95% CI) | <i>p</i>-value |
|------------------------------|-------------------------------------|-----------------------------------|-------------------------------|-----------------------|-----------------------------|-----------------------|
| Myocardial infarction | | | | | | |
| 3-5 years | 4.8% | 0.2% | 24.59 (5.85-103.34) | <0.0001 | 1.08 (0.56-2.07) | 0.82 |
| 0-5 years | 14.0% | 6.8% | 2.06 (1.60-2.65) | <0.0001 | 0.84 (0.59-1.18) | 0.31 |
| Scaffold thrombosis | | | | | | |
| 3-5 years | 0.1% | 0.1% | 1.93 (0.10-36.05) | 0.78 | N/A | N/A |
| 0-5 years | 3.3% | 1.8% | 1.98 (1.21-3.23) | 0.005 | 0.60 (0.31-1.16) | 0.13 |
| Bleeding | | | | | | |
| 3-5 years | 2.7% | 0.0% | N/A | <0.0001 | 1.08 (0.40-2.94) | 0.87 |
| 0-5 years | 3.5% | 2.2% | 1.37 (0.84-2.24) | 0.04 | 1.23 (0.64-2.36) | 0.53 |
| Death | | | | | | |
| 3-5 years | 8.0% | 0.2% | 47.43 (11.52-195.2) | <0.0001 | 1.08 (0.66-1.77) | 0.75 |
| 0-5 years | 8.2% | 4.8% | 1.58 (1.13-2.20) | 0.0008 | 1.31 (0.92-1.87) | 0.14 |

CI: confidence interval; HR: hazard ratio



Supplementary Figure 1. Spline analysis demonstrating the time-varying association of the hazard for study outcomes depending on dual antiplatelet therapy (DAPT) status during the 5-year follow-up period.

Note: the model could not be fitted for scaffold thrombosis due to the very low event rate beyond 3 years.