## **Supplemental Online Content**

Jia X, Al Rifai M, Hoogeveen R, et al. Association of long-term change in N-terminal pro–B-type natriuretic peptide with incident heart failure and death. *JAMA Cardiol*. Published online February 8, 2023. doi:10.1001/jamacardio.2022.5309

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This supplemental material has been provided by the authors to give readers additional information about their work.

	Visit 2 NT-proBNP <125pg/mL	Visit 2 NT-proBNP ≥125pg/mL	Pinteraction
Heart Failure			0.096
Model 1	1.10 (1.07, 1.13)	1.16 (1.09, 1.24)	
Model 2	1.06 (1.02, 1.11)	1.10 (0.98, 1.23)	
Model 3	1.12 (1.08, 1.16)	1.05 (0.95, 1.16)	
Model 4	1.00 (0.95, 1.05)	0.77 (0.56, 1.07)	
All-Cause Death			0.791
Model 1	1.08 (1.05, 1.10)	1.08 (1.05, 1.11)	
Model 2	1.05 (1.02, 1.09)	1.05 (1.01, 1.09)	
Model 3	1.07 (1.04, 1.11)	1.06 (1.02, 1.10)	
Model 4	1.02 (0.98, 1.06)	0.96 (0.91, 1.02)	

**eTable 1.** Stratified analysis by visit 2 NT-proBNP levels of the association between percent change in NT-proBNP (continuous variable) with risk of incident heart failure hospitalization and all-cause death after visit 4.

Model 1: age, sex, race

Model 2: model 1 plus systolic blood pressure, diastolic blood pressure, hypertensive medication use, diabetes, fasting glucose, lowdensity lipoprotein cholesterol, triglyceride, cholesterol lowering medication use, cigarette smoking, estimated glomerular filtration rate, body mass index, prevalent coronary heart disease.

Model 3: model 2 plus visit 2 NT-proBNP (log-transformed)

Model 4: model 2 plus visit 4 NT-proBNP (log-transformed)

Subgroups	HR (95% CI)	p-interaction
		0.11
Female	1.12 (1.04,1.21)	
Male	1.04 (0.99,1.09)	
		0.96
White	1.06 (1.01,1.10)	
Black	1.05 (0.94,1.17)	
		0.15
Non-hypertensive	1.03 (0.96,1.11)	
Hypertensive	1.10 (1.04,1.16)	
		0.04
Non-diabetic	1.05 (1.00,1.10)	
Diabetic	1.15 (1.01,1.32_	
		0.45
BMI $< 30 \text{ kg/m}^2$	1.06 (1.01,1.07)	
BMI $\geq$ 30 kg/m <sup>2</sup>	1.10 (1.00,1.21)	
		0.046
Not current smoking	1.04 (0.99,1.09)	
Current smoking	1.16 (1.06,1.28)	
		0.14
No prevalent CHD	1.10 (1.04,1.17)	
Prevalent CHD	1.03 (0.97,1.10)	

eTable 2. Subgroup analysis of association between percent change in NT-proBNP and heart failure hospitalization.

Abbreviations: BMI = body mass index, CHD = coronary heart disease

Model is adjused for age, sex, race, systolic blood pressure, diastolic blood pressure, hypertensive medication use, diabetes, fasting glucose, low-density lipoprotein cholesterol, triglyceride, cholesterol lowering medication use, cigarette smoking, estimated glomerular filtration rate, body mass index, prevalent coronary heart disease.

Subgroups HR (95% CI) p-interaction 0.02 Female 1.13 (1.07,1.20) Male 1.04 (1.00,1.07) 0.10 White 1.05 (1.02,1.08) Black 1.09 (1.02,1.17)0.58 0.17 Non-hypertensive 1.04 (1.00,1.08) Hypertensive 1.08 (1.03,1.13) 0.73 Non-diabetic 1.05 (1.02,1.09) Diabetic 1.05 (1.01,1.09) 0.054 BMI  $< 30 \text{ kg/m}^2$ 1.04 (1.01,1.08) 1.12 (1.05,1.19) BMI  $\geq$  30 kg/m<sup>2</sup> 0.91 Not current smoking 1.05 (1.03,1.08) Current smoking 1.06 (0.96,1.16) 0.02 No prevalent CHD 1.10 (1.06,1.15) Prevalent CHD 1.03 (0.99,1.07)

**eTable 3.** Subgroup analysis of association between percent change in NT-proBNP and all-cause death. Significant p-interaction is <0.007 after accounting for multiple

*Abbreviations:* BMI = body mass index, CHD = coronary heart disease

Model is adjused for age, sex, race, systolic blood pressure, diastolic blood pressure, hypertensive medication use, diabetes, fasting glucose, low-density lipoprotein cholesterol, triglyceride, cholesterol lowering medication use, cigarette smoking, estimated glomerular filtration rate, body mass index, prevalent coronary heart disease.

	Visit 2 NT-proBNP <125pg/mL		Visit 2 NT-proBNP ≥125pg/mL			
	>25% decrease	$\leq 25\%$ change	>25% increase	>25% decrease	$\leq 25\%$ change	>25% increase
Heart Failure						
Hospitalization						
Model 1	1.08 (0.88, 1.32)	Ref	2.61 (2.11, 3.22)	1.17 (0.89, 1.53)	Ref	6.13 (3.15, 11.96)
Model 2	1.15 (0.86, 1.53)	Ref	1.93 (1.39, 2.67)	0.86 (0.57, 1.29)	Ref	6.56 (2.27, 18.99)
Model 3	1.02 (0.76, 1.37)	Ref	4.30 (2.82, 6.55)	0.81 (0.53, 1.22)	Ref	7.46 (2.53, 21.97)
Model 4	1.37 (1.02, 1.84)	Ref	1.26 (0.86, 1.84)	1.32 (0.32, 5.50)	Ref	1.30 (0.82, 2.06)
All-Cause						
Death						
Model 1	1.02 (0.89, 1.17)	Ref	1.82 (1.56, 2.11)	0.97 (0.80, 1.18)	Ref	8.02 (5.16, 12.47)
Model 2	1.14 (0.94, 1.38)	Ref	1.56 (1.26, 1.94)	0.59 (0.44, 0.79)	Ref	5.47 (2.58, 11.60)
Model 3	1.10 (0.90, 1.33)	Ref	2.06 (1.55, 2.72)	0.55 (0.41, 0.74)	Ref	5.60 (2.63, 11.93)
Model 4	1.21 (0.99, 1.47)	Ref	1.32 (1.03, 1.69)	0.80 (0.58, 1.11)	Ref	1.22 (0.41, 3.69)

**eTable 4.** Stratified analysis by visit 2 NT-proBNP levels of the association between percent change in NT-proBNP, modeled as a categorical variable, with risk for incident heart failure hospitalization and all-cause death after visit 4.

Model 1: age, sex, race

Model 2: model 1 plus systolic blood pressure, diastolic blood pressure, hypertensive medication use, diabetes, fasting glucose, lowdensity lipoprotein cholesterol, triglyceride, cholesterol lowering medication use, cigarette smoking, estimated glomerular filtration rate, body mass index, prevalent coronary heart disease.

	β-coefficient	95% Confidence	p-value
		Interval	
Age	0.025	0.018 - 0.031	< 0.001
Male	-0.308	-0.3720.245	< 0.001
Black Race	-0.298	-0.3830.213	< 0.001
Systolic Blood Pressure	0.011	0.008 - 0.014	<0.001
Diastolic Blood Pressure	-0.005	-0.0090.000	0.044
Hypertension Medication Use	0.278	0.198 - 0.358	<0.001
Diabetes	0.056	-0.073 - 0.185	0.393
LDL-C	-0.001	-0.001 - 0.000	0.155
Triglyceride	-0.003	-0.0040.002	< 0.001
Cholesterol medication	-0.054	-0.183 - 0.076	0.414
eGFR	-0.012	-0.0140.010	< 0.001
Body Mass Index	-0.010	-0.0170.003	0.004
Current Smoker	0.223	0.144 - 0.857	< 0.001
Prevalent Coronary Heart Disease	2.663	2.065-3.260	<0.001

eTable 5. Association between risk factors at visit 2 with absolute change in NT-proBNP.

*Abbreviations:* LDL-C = low-density lipoprotein cholesterol, eGFR = estimated glomerular filtration rate.

eFigure 1. Inclusion and exclusion criteria.





eFigure 2. Kaplan-Meier curves of heart failure hospitalization (a) and all-cause death (b) by NT-proBNP change categories.