## Supplementary material

Kryczka KE, Płoski R, Księżycka E, et al. The association between the insertion/deletion polymorphism of the angiotensin-converting enzyme gene and the plasma fibrinogen level in women and men with premature coronary artery atherosclerosis. Pol Arch Intern Med. 2020; 130: 748-756. doi:10.20452/pamw. 15461

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Table S1. Frequency of categorical traditional risk factors according to the insertion/deletion (I/D) polymorphism of the angiotensin-converting enzyme gene in women and men

|  | Genotypes |  |  | $P$ | Heterogeneity of sex |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | $\begin{aligned} & \text { II } \\ & \mathrm{n}=90(22.1 \%) \end{aligned}$ | $\begin{aligned} & \text { ID } \\ & \mathrm{n}=194(47.7 \%) \end{aligned}$ | $\begin{aligned} & \text { DD } \\ & \mathrm{n}=123(30.2 \%) \end{aligned}$ |  |  |
| Sex W | 61 (67.7\%) | 118 (60.8\%) | 78 (63.4\%) |  | 0,53 |
|  | 29 (32.2\%) | 76 (39.2\%) | 45 (36.6\%) |  |  |
| Hypertension | 58 (64.4\%) | 108 (55.7\%) | 74 (60.2\%) | 0.36 |  |
|  | 45 (73.8\%) | 76 (64.4\%) | 52 (66.7\%) | 0.44 | 0.48 |
|  | 13 (44.8\%) | 32 (42.1\%) | 22 (48.9\%) | 0.77 |  |
| Diabetes | 9 (10.0\%) | 29 (14.9\%) | 16 (13.0\%) | 0.52 |  |
|  | 7 (11.5\%) | 24 (20.3\%) | 12 (15.4\%) | 0.30 | 0.43 |
|  | 2 (6.9\%) | 5 (6.6\%) | 4 (8.9\%) | 0.92 |  |
| Hypercholesterolemia | 73 (81.1\%) | 152 (78.3\%) | 104(84.5\%) | 0.39 |  |
| Women | 48 (78.7\%) | 93 (78.8\%) | 68 (87.2\%) | 0.28 | 0.40 |
| Men | 25 (86.2\%) | 59 (77.6\%) | 36 (80.0\%) | 0.62 |  |
| Family history of cardiovascular diseases | 15 (16.7\%) | 33 (17.0\%) | 30 (24.4\%) | 0.21 |  |
| Women | 10 (16.4\%) | 19 (16.1\%) | 25 (32.0\%) | 0.016 | 0.12 |
| Men | 5 (17.2\%) | 14 (18.4\%) | 5 (11.1\%) | 0.56 |  |
| Smoking Women | 61 (67.8\%) | 150 (77.3\%) | 92 (74.8\%) | 0.23 |  |
|  | 37 (60.7\%) | 90 (76.3\%) | 59 (75.6\%) | $\underline{0.064}$ | 0.21 |


| Men | $24(82.8 \%)$ | $60(78.9 \%)$ | $33(73.3 \%)$ | 0.61 |  |
| ---: | :--- | :--- | :--- | :--- | :--- |
| Women | $41(67.2 \%)$ | $68(57.3 \%)$ | $50(64.1 \%)$ | 0.41 | 0.80 |
| Acute coronary syndrome | $60(66.7 \%)$ | $122(62.9 \%)$ | $79(123 \%)$ | 0.83 |  |
| Men | $19(65.5 \%)$ | $54(71.0 \%)$ | $29(64.4 \%)$ | 0.72 |  |
| ST-segment elevation <br> myocardial infarction | $33(36.7 \%)$ | $75(38.7 \%)$ | $46(37.4 \%)$ | 0.94 |  |
| Women | $22(36.1 \%)$ | $44(37.3 \%)$ | $27(34.6 \%)$ | 0.93 | 0.96 |
| Men | $11(37.9 \%)$ | $31(40.8 \%)$ | $19(42.2 \%)$ | 0.93 |  |

Table S2. Two-way ANOVA of continuous traditional risk factors according to the insertion/deletion (I/D) polymorphism of the angiotensin-converting enzyme gene in women and men

| Risk factors mean [95\% CI] | Genotypes |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | II $\begin{aligned} & \mathrm{n}=90 \\ & (22.1 \%) \end{aligned}$ | $\begin{aligned} & \text { ID } \\ & n=194 \\ & (47.7 \%) \end{aligned}$ | $\begin{aligned} & \text { DD } \\ & \mathrm{n}=123(30.2 \%) \end{aligned}$ |  | $P$ <br> Two-way ANOVA, with interaction |
| Age, years <br> Women <br> Men | $\begin{aligned} & \hline 44.0 \\ & {[43.0-45.0]} \\ & 48.9 \\ & {[47.7-50.0]} \\ & 39.1 \\ & {[37.4-40.8]} \end{aligned}$ | $\begin{aligned} & \hline 45.7 \\ & {[45.1-46.4]} \\ & 49.9 \\ & {[49.1-50.7]} \\ & 41.6 \\ & {[40.6-42.6]} \end{aligned}$ | $\begin{aligned} & \hline 46.0 \\ & {[45.2-46.9]} \\ & 49.4 \\ & {[48.4-50.5} \\ & 42.6 \\ & {[41.3-44.0]} \end{aligned}$ | $\begin{aligned} & 49.4 \text { [48.8-50.0] } \\ & 41.1 \text { [40.3-41.9] } \end{aligned}$ | Genotypes*Sex: $p=0.085$ <br> Sex: $\boldsymbol{p < 0 . 0 0 1}$ <br> Genotypes: $\boldsymbol{p = 0 . 0 0 6}$; <br> DD vs II: $\mathbf{0 . 0 0 8}$ <br> ID vs II: 0.015 |
| Body mass index, $\mathrm{kg} / \mathrm{m}^{2}$ <br> Women <br> Men | $\begin{aligned} & \hline 28.3 \\ & {[27.3-29.4]} \\ & 28.4 \\ & {[27.1-29.6]} \\ & 28.3 \\ & {[26.5-30.1]} \end{aligned}$ | $\begin{aligned} & \hline 28.1 \\ & {[27.3-28.8]} \\ & 28.1 \\ & {[27.2-29.0]} \\ & 28.0 \\ & {[26.9-29.1]} \end{aligned}$ | $\begin{aligned} & \hline 27.7 \\ & {[26.8-28.6]} \\ & 27.0 \\ & {[25.9-28.1]} \\ & 28.5 \\ & {[27.0-29.9]} \end{aligned}$ | $\begin{aligned} & 27.8[27.2-28.5] \\ & 28.3[27.4-29.1] \end{aligned}$ | Genotypes*Sex: <br> $p=0.35$ <br> Sex: $p=0.43$ <br> Genotypes: $p=0.71$ |
| High-sensitive C-reactive protein, $\mathrm{mg} / \mathrm{dl}$ <br> Women <br> Men | $\begin{aligned} & 0.21 \\ & {[0.12-0.52]} \\ & \\ & 0.18 \\ & {[0.11-0.51]} \\ & 0.26 \\ & {[0.15-0.85]} \end{aligned}$ | 0.21 $[0.11-0.50]$ 0.26 $[0.12-0.62]$ 0.17 $[0.09-0.32]$ | $\begin{aligned} & 0.23 \\ & {[0.10-0.45]} \\ & 0.23 \\ & {[0.09-0.55]} \\ & 0.21 \\ & {[0.12-0.62]} \end{aligned}$ | $\begin{aligned} & 0.23 \\ & {[0.11-0.55]} \\ & 0.19 \\ & {[0.10-0.38]} \end{aligned}$ | Genotypes*Sex: $p=0.085$ <br> Sex: $p=0.91$ <br> Genotypes: $p=0.27$ |
| White blood | 10.3 | 9.5 | 10.2 |  | Genotypes*Sex: |


| cells, K/ul | [7.5-13.3] | [7.1-12.9] | [7.7-13.5] |  | $\begin{aligned} & p=0.22 \\ & \text { Sex: } \boldsymbol{p}<\mathbf{0 . 0 0 1} \end{aligned}$ |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Women | 10.4 | 8.9 | 10.0 | 9.2 | Genotype: $p=0.29$; |
|  | [7.0-12.9] | [6.9-11.4] | [7.4-12.4] | [7.0-12.25] |  |
| Men | 9.9 | 11.75 | 10.9 | 11.35 | ID: |
|  | [8.8-13.4] | [8.6-14.4] | [8.6-14.5] | [8.6-14.4] | $p<0.001$ |

Table S3. Mean fibrinogen level according to presence of traditional cardiovascular risk factors

| Fibrinogen, $\mathrm{mg} / \mathrm{dl}$Mean (standard deviation) |  |  |  |
| :---: | :---: | :---: | :---: |
| Risk factor | Risk factor presents | Risk factor absents | $P$ |
| Male sex | 391.5 (161.2) | 534.5 (180.9) | <0.001 |
| Hypertension | 488.3 (180.9) | 472.4 (195.8) | 0.40 |
| Women | 530.79 (173.68) | 542.09 (195.84) | 0.64 |
| Men | 378.63 (151.34) | 401.97 (169.76) | 0.38 |
| Diabetes | 482.0 (188.5) | 481.8 (187.1) | 0.99 |
| Women | 525.32 (181.20) | 536.33 (181.23) | 0.72 |
| Men | 312.72 (104.53) | 397.79 (164.01) | 0.93 |
| Hypercholesterolemia | 485.3 (182.8) | 467.2 (204.6) | 0.44 |
| Women | 532.98 (173.45) | 541.03 (212.33) | 0.78 |
| Men | 402.17 (169.12) | 349.05 (120.90) | 0.053 |
| Family history of cardiovascular diseases | 511.7 (184.3) | 474.7 (187.3) | 0.12 |
| Women | 557.29 (182.84) | 528.42 (180.37) | 0.30 |
| Men | 409.16 (144.26) | 388.19 (165.12) | 0.56 |
| Smoking | 492.3 (189.8) | 451.1 (176.2) | 0.045 |
| Women | 557.28 (183.88) | 474.76 (159.18) | 0.001 |
| Men | 389.11 (149.56) | 400.20 (201.35) | 0.73 |
| Menopause Women | 532.67 (188.69) | 538.36 (164.13) | 0.82 |
| Menopause Women <br> early $\leq 3$ years  <br> (vs late $>3$ years)  | 507.67 (156.38) | 552.77 (209.76) | 0.12 <br> Late vs lack of menopause $\mathrm{p}=0.61$ <br> Early vs lack of menopause $\mathrm{p}=0.23$ |

Table S4. ANCOVA of different models tested. Dependent value: fibrinogen, mg/dl

| Model's factors | Factors and interactions tested, $p$ | Covariance: <br> age, $p$ |
| :--- | :--- | :--- |
| Two -way ANCOVA with interactions, $p$ |  |  |


| I/D genotypes, sex, I/D <br> genotypes * sex | I/D genotypes: 0.61 ; sex: <0.001, I/D genotypes <br> * sex: 0.022 | 0.11 |
| :--- | :--- | :--- |
| I/D genotypes, hypertension, <br> I/D genotypes * NT | I/D genotypes: 0.75 ; hypertension: 0.77, I/D <br> genotypes * hypertension: 0.37 | $<0.001$ |
| I/D genotypes, diabetes, I/D <br> genotypes * diabetes | I/D genotypes: 0.71 ; diabetes: 0.52, I/D <br> genotypes * diabetes: 0.89 | $<0.001$ |
| I/D genotypes, <br> hypercholesterolemia, I/D <br> genotypes * <br> hypercholesterolemia | I/D genotypes: 0.82; hypercholesterolemia: $0.70 ;$ <br> I/D genotypes * hypercholesterolemia: 0.70 | $<0.001$ |
| I/D genotypes, family history <br> of CVD, I/D genotypes * <br> family history of CVD | I/D genotypes:0.20; family history of CVD: $0.16 ;$ <br> I/D genotypes * family history of CVD: 0.06 | $<0.001$ |
| I/D genotypes, smoking, I/D <br> genotypes * smoking | I/D genotypes: 0.23; smoking:0.03; I/D <br> genotypes * smoking: 0.10 | $<0.001$ |
|  | $\underline{\text { Three-way ANCOVA with interactions, p }}$ |  |
| I/D genotypes, sex, smoking, <br> I/D genotypes * sex, I/D <br> genotypes * smoking | I/D genotypes: $0.30 ;$ sex: <0.001, smoking: <br> $\mathbf{0 . 0 3 , ~ I / D ~ g e n o t y p e s * ~ s e x : ~ 0 . 0 1 9 , ~ I / D ~ g e n o t y p e s ~}$ <br> * smoking: p=0.057 | 0.19 |

CVD: cardiovascular diseases, I/D: insertion/deletion polymorphism of the angiotensin-converting enzyme

Table S5. Significant differences in fibrinogen levels across genotypes- adjustment for multiple comparison: Bonferroni correction

| Comparison |  | Difference [95\% CI] | P |
| :--- | :--- | :--- | :--- |
| DD Women | DD Men | $208.6[102.2 ; 314.9]$ | $<\mathbf{0 . 0 0 1}$ |
|  | ID Men | $176.2[70.7 ; 281.6]$ | $<0.001$ |
|  | II Men | $217.1[79.1 ; 355.0 ;]$ | $<0.001$ |
|  | ID Women | $83[2.7 ; 165.3]$ | $\mathbf{0 . 0 3 6}$ |
| II Women | II Men | $160.4[28.2 ; 292.6]$ | $\mathbf{0 . 0 1}$ |
|  | ID Men | $119.5[16.0 ; 223.0]$ | 0.01 |
|  |  | $151.9[40.9 ; 262.9]$ | 0.001 |
|  |  |  |  |


| ID Women | DD Men | 124.6 [17.0; 232.1] | 0.01 |
| :---: | :---: | :---: | :---: |
| Insignificant differences of fibrinogen levels across genotypes- adjustment for multiple comparison: Bonferroni |  |  |  |
| ID Women | II Men | 133.1 [-1.4; 267.5] | 0.055 |
|  | ID Men | 92.2 [-2.6;186.8] | 0.06 |
| ID Men | DD Men | 32.4 [-68.5; 133.3] | 1.0 |
| II Women | ID Women | 27.3 [-56.5; 111.3] | 1.0 |
|  | DD Women | -55.7 [-147.8; 34.6] | 1.0 |
| II Men | ID Men | -40.9 [-160.3; 78.5] | 1.0 |
|  | DD Men | -8.5 [-138.0; -121.0] | 1.0 |

DD: dominant homozygote, ID: heterozygote, II: recessive homozygote of the I/D polymorphism of the angiotensin-converting enzyme
gene

The optimal subject-level gene model assessment based on Horita N, Kaneko T. Genetic model selection for a case-control study and a meta-analysis. Meta Gene 5 (2015) 1-8

Table S6. Four model strategy for women and men

|  | Fibrinogen, $\mathrm{mg} / \mathrm{dl}$ | Genotype |  |  | Odds Ratio (OR)$[95 \% \mathrm{CI}]$ |  | OR [95\% CI] <br> Four models: |  |  |  | Optimal model |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | II | ID | DD | $\begin{aligned} & \text { ID vs } \\ & \text { DD } \end{aligned}$ | $\begin{aligned} & \text { II vs } \\ & \text { ID } \end{aligned}$ | RE <br> 'II' vs <br> 'ID+DD | $\begin{aligned} & \text { Multi } \\ & \text { 'ID*II' } \\ & \text { vs 'DD' } \end{aligned}$ | $\begin{aligned} & \hline \text { DO } \\ & \text { 'II }+\mathrm{ID} \text { ' } \\ & \text { vs 'DD' } \end{aligned}$ | $\begin{aligned} & \hline \mathbf{O V} \\ & \text { 'ID' vs } \\ & \text { 'DD+II' } \end{aligned}$ |  |
| Women | $>$ Median <br> (526) <br> $\leq$ Median <br> (526) | $\begin{aligned} & \hline 27 \\ & (44.3) \\ & \hline 34 \\ & (55.7) \end{aligned}$ | 50 $(42.4)$ 68 $(57.6)$ | 50 $(64.1)$ 28 $(35.9)$ |  |  |  |  |  |  | Dominant |
|  |  |  |  | P | 0.003 | 0.809 | 0.356 | 0.012 | 0.002 | 0.037 |  |
| Men | $\begin{aligned} & \hline \text { Median } \\ & (357.5) \end{aligned}$ | $\begin{aligned} & 15 \\ & (51.7) \end{aligned}$ | $44$ <br> (57.9) | $\begin{aligned} & 16 \\ & (35.6) \end{aligned}$ |  |  |  |  |  |  | Dominant |
|  | $\begin{aligned} & \leq \text { Median } \\ & (357.5) \end{aligned}$ | $\begin{aligned} & \hline 14 \\ & (48.3) \end{aligned}$ | $\begin{aligned} & \hline 32 \\ & (42.1) \end{aligned}$ | $\begin{aligned} & \hline 29 \\ & (64.4) \end{aligned}$ |  |  |  |  |  |  |  |
|  |  |  |  | P | 0.017 | 0.569 | 0.836 | 0.099 | 0.020 | 0.050 |  |

Models: RE: recessive, Multi: multiplicative, DO: dominant, OV: over-dominant; II: recessive homozygote, ID: heterozygote, DD : dominant homozygote of the insertion/deletion polymorphism of angiotensin converting enzyme gene

ANCOVA for dominant model. Dependent value: fibrinogen ( $\mathrm{mg} / \mathrm{dl}$ ); factors: I/D genotype, sex, smoking; covariance: age. Results: ID+II: 0.25, sex: <0.001, smoking: 0.54, sex * (ID+II): 0.013, sex* smoking: 0.038, (ID+II)*smoking: 0.028


Figure S1. Four model strategy with optimal dominant model signed for women and men with premature coronary artery disease (logarithmic scale OR plane).

II: recessive homozygote, ID: heterozygote, DD: dominant homozygote of the insertion/deletion polymorphism of the angiotensin-converting enzyme gene

F: female; M: male
OR: odds ratio

## The List of reagents for laboratory tests:

## Lipids:

- Total cholesterol -Roche CHOL2 reagent, Cobas 6000 analyzer, enzymatic colorimetric method;
- High-density lipoprotein (HDL) cholesterol -Roche HDL4 reagent, Cobas 6000 analyzer, homogenous enzymatic colorimetric method;
- Low-density lipoprotein (LDL) cholesterol - Roche LDL3 reagent, Cobas 6000 analyzer, homogenous enzymatic colorimetric method;
- Triglycerides - Rosche TRIGL reagent, Cobas 6000 analyzer, homogenous enzymatic colorimetric method;

Glucose: Roche GLUC3 reagent, Cobas 6000 analyzer, hexokinase reference enzymatic method;

High-sensitive C-reactive protein (hs CRP): Roche CRPHS reagent, Cobas 6000 analyzer, latex-enhanced immunoturbidimetric method Fibrinogen: SIEMENS „Multifibren® U" reagent, BCS analyzer, modified Clauss method; Morphology:

- SYSMEX XN-1000 PURE Analyzer
- Reagents:
$\checkmark$ Lysercell WDF
$\checkmark$ Cellpack DCL
$\checkmark$ Sulfolyser
$\checkmark$ Fluorocell WDF
$\checkmark$ Fluorocell WNR
$\checkmark$ Lycercell WNR
- Methods:
$\checkmark$ Flow cytometry (White blood cells)

