

Supplementary material

Desperak P, Hudzik B, Gąsior M. Assessment of patients with coronary artery disease who may benefit from the use of rivaroxaban in the real world: implementation of the COMPASS trial criteria in the TERCET registry population. Pol Arch Intern Med. 2019; 129: 460-468. doi:10.20452/pamw.14907

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Table S1 Baseline characteristics and outcomes of the patients with missing data.	
Variable	Missing-data patients n = 1,887
Age, years, n (Q1-Q3)	64 (57-72)
Sex	
Female, n (%)	556 (29)
Male, n (%)	1,331 (71)
Body-mass index, kg/m ² , mean (SD)	28.0 (4.3)
eGFR, mL/min/1.73 m ² , mean (SD)	79.6 (24.3)
Systolic blood pressure, mm Hg, mean (SD)	133 (21)
Diastolic blood pressure, mm Hg, mean (SD)	78 (12)
Risk factors	
Current smoker, n (%)	628 (36)
Former smoker, n (%)	914 (53)
Diabetes mellitus, n (%)	531 (30)
Arterial hypertension, n (%)	1,362 (74)
Peripheral artery disease, n (%)	164 (10)
Previous MI, n (%)	1,188 (67)

Previous PCI, n (%)	1,389 (74)
Previous CABG, n (%)	468 (26)
Multivessel CAD, n (%)	901 (51)
Chronic heart failure, n (%)	139 (15)
Left ventricular ejection fraction, % (SD)	44.5 (9.0)
Stroke, n (%)	83 (5)
Previous treatment	
ACE inhibitor or ARB, n (%)	1,145 (83)
Lipid-lowering drug, n (%)	943 (91)
β -blocker, n (%)	1,245 (90)
MI, stroke, or cardiovascular death, n (%)	178 (9)
Death, n (%)	85 (4)
MI, n (%)	72 (4)
Stroke, n (%)	33 (2)
Coronary revascularization, n (%)	138 (7)
Abbreviations: ACE, angiotensin-converting enzyme; ARB, angiotensin receptor blocker; CABG, coronary artery bypass grafting; eGFR, estimated glomerular filtration rate	