SUPPLEMENTAL MATERIAL

Data S1.

SUPPLEMENTAL METHODS

Inverse probability of weighting

We used inverse probability of weighting to balance the distribution of covariates between two patient groups. If *e* denotes the estimated propensity score (i.e. $e=(hat{P}(Z=1 | x), where the patient x is included in patient group 1; then, 1-e = (hat{P}(Z=0 | x))), then the original sample is weighted by the following weights: <math>Z/e+(1-Z)/1-e$ where Z represents the patient group. For instance, women (Z=1) are assigned a weight equal to the reciprocal of the propensity score (1/e), while men (Z=0) are assigned a weight equal to the reciprocal of one minus the propensity score (1/1-e). The weighting procedure for each sample balances the covariate distributions between two patient groups.¹⁸

Nearest neighbor imputation algorithms

Nearest neighbor (NN) imputation algorithms are efficient methods to fill in missing data where each missing value on some records is replaced by a value obtained from related cases in the whole set of records. Thus, imputation for clinical features was conducted using the average of measured values from k records (kNN).¹⁹

NN algorithms are similarity-based methods that rely on distance metrics and results may change in relation to the similarity measure used to evaluate the distance between recipients and donors. In our work, we used the following norm as metric to evaluate distance:

$(\sum ni=1|xi-yi|p)1/p$

Before imputation of the recipient Xi, the full set with no missing data C(X) was filtered to select a subset of features relevant to the missing variable to be imputed (Xi_miss). To this end, C(X) was considered as a dataset in the context of a regression problem, where the variable with the missing

data (Xmiss) was set as the class variable and the other q variables (X1, X2, ..., Xq) as predictors. We also applied the RReliefF algorithm. The set was, therefore, filtered to select a subset $Cs(X) \subset C(X)$ where (X1, X2, ..., Xs) \subset (X1, X2, ..., Xq) and s < q. In the present context, we set the number of neighbors for RReliefF equal to 10 and set s as 10 %, 20 % or 30 % of q. As C(X) is invariant to Xi, the filtering step was performed only once before the NN imputation step that, on the contrary was performed separately for each Xi.

More specifically, to impute the missing value in i-th column, we find k-nearest neighbor columns from i-th column (in terms of Euclidean distance) and replace the missing value with weighted mean of the k-nearest neighbor columns. Weights are inversely proportional to the Euclidean distance from i-th column.

Interaction test

The comparison of two estimated quantities, each with its standard error, is a general method that can be applied widely.²⁰ These measures were always analyzed on the log scale because the distributions of the log ratios tend to be those closer to normal than of the ratios themselves. If the estimates are *E*1 and *E*2 with standard errors SE(*E*1) and SE(*E*2), then the difference d=E1 - E2 has standard error SE(d)= \ddot{O} [SE(*E*1)2 + SE(*E*2)2] i.e., the square root of the sum of the squares of the separate standard errors. The ratio z=d/SE(d) gives a test of the null hypothesis that in the population the difference *d* is zero, by comparing the value of *z* to the standard normal distribution. The 95% confidence interval for the difference is d-1.96SE(d) to d+1.96SE(d).

SUPPLEMENTAL RESULTS

Interaction tests

In our study, the estimated women-to-men RR ratio for obstructive CAD among nondiabetics was 0.43 (95%CI 0.36-0.51) and diabetics was 0.89 (0.43-1.83), but are the relative risks from the

subgroups significantly different from each other? We show how to answer this question by using the interaction test based on the summary data quoted. (**Table S4**). We obtained the logs of the odds ratios (relative risks) and their confidence intervals (rows 2 and 4). As 95% confidence intervals were obtained as 1.96 standard errors either side of the estimate, the SE of each log relative risk was obtained by dividing the width of its confidence interval by 2×1.96 (row 6). The estimated difference in log relative risks was d=E1- E2= 0.5696 (row 7) and its standard error 0.1958 (row 8). From these two values, we tested the interaction and estimated the ratio of the relative risks (with confidence interval). The test of interaction was the ratio of d to its standard error: z= 2.9091, which gives p value=0.0018 when we referred it to a table of the normal distribution (row 10). The estimated interaction effect was exp =1.7676 (row 11). The confidence interval for this effect was 1.2042 to 2.5945 (row 12). There was thus good evidence to support different outcome effects of diabetes on obstructive CAD between sexes. A similar approach was used for comparing any other sex difference. (**Tables S5, S6, and S9**).

		Overall		Ob	structive CAD		None	obstructive CA	D
				(\$1	tenosis ≥50%)		(st	tenosis <50%)	
	Women	Men		Women	Men		Women	Men	
Characteristics	(n=4347)	(n=10446)	p value	(n=4119)	(n=10119)	p value	(n=228)	(n=327)	p value
Age, mean ± SD, y	65.2 ± 11.2	59.9 ± 11.4	< 0.0001	65.4 ± 11.2	59.9 ± 11.4	< 0.0001	62.5 ± 11.5	59.8 ± 12.3	0.0077
Cardiovascular risk	4020 (92.5)	9543 (91.4)	0.0208	3814 (92.6)	9245 (91.4)	0.0127	206 (90.4)	298 (91.1)	0.7563
factors (overall), n (%)									
Diabetes, n (%)	1293 (29.7)	2270 (21.7)	< 0.0001	1247 (30.3)	2196 (21.7)	< 0.0001	46 (20.2)	74 (22.6)	0.4872
Hypertension, n (%)	3415 (78.6)	6953 (66.6)	< 0.0001	3228 (78.4)	6710 (66.3)	< 0.0001	187 (82.0)	243 (74.3)	0.0288
Hypercholesterolemia, n	2025 (46.6)	4584 (43.9)	0.0027	1929 (46.8)	4463 (44.1)	0.0031	96 (42.1)	121 (37.0)	0.2283
(%)									
Current smokers, n (%)	1394 (32.1)	5026 (48.1)	< 0.0001	1344 (32.6)	4889 (48.3)	< 0.0001	50 (21.9)	137 (41.9)	< 0.0001
Former smokers, n (%)	176 (4.0)	983 (9.4)	< 0.0001	162 (3.9)	937 (9.3)	< 0.0001	14 (6.1)	46 (14.1)	0.0016
Clinical history of	1255 (28.9)	2819 (27.0)	0.0205	1176 (28.6)	2729 (27.0)	0.0569	79 (34.6)	90 (27.5)	0.0763
ischemic heart disease									
(overall), n (%)									
Previous angina pectoris,	757 (17.4)	1583 (15.2)	0.0008	705 (17.1)	1531 (15.1)	0.0038	52 (22.8)	52 (15.9)	0.0456
n (%)									
Previous MI, n (%)	534 (12.3)	1432 (13.7)	0.0178	504 (12.2)	1398 (13.8)	0.0103	30 (13.2)	34 (10.4)	0.3263
Previous heart failure, n	184 (4.2)	384 (3.7)	0.1185	174 (4.2)	368 (3.6)	0.1070	10 (4.4)	16 (4.9)	0.7795
(%)									

Table S1. Baseline characteristics of the overall population sorted by sex and CAD status in patients with acute coronary syndrome at index event.

Clinical history of	201 (4.6)	432 (4.1)	0.1909	194 (4.7)	417 (4.1)	0.1259	7 (3.1)	15 (4.6)	0.3521		
cardiovascular											
disorders (overall), n											
(%)											
PAD, n (%)	62 (1.4)	195 (1.9)	0.0486	61 (1.5)	189 (1.9)	0.0946	1 (0.4)	6 (1.8)	0.1063		
Previous stroke, n (%)	141 (3.2)	260 (2.5)	0.0146	135 (3.3)	251 (2.5)	0.0121	6 (2.6)	9 (2.8)	0.9311		
Clinical presentation at admission											
STEMI, n (%)	2871 (66.0)	7094 (67.9)	0.0284	2833 (68.8)	7027 (69.4)	0.4369	38 (16.7)	67 (20.5)	0.2521		
ST-segment shifts in	816 (18.8)	2212 (21.2)	0.0008	800 (19.4)	2189 (21.6)	0.0283	16 (7.0)	23 (7.0)	0.9942		
anterior leads (at ECG), n											
(%)											
Systolic BP at baseline,	140.4 ± 127.7	139.5 ± 26.7	0.0699	140.1 ± 27.8	139.4 ± 26.7	0.1619	145.8±25.4	143 ± 25.9	0.2047		
mean \pm SD, mmHg											
Heart rate at baseline,	80.2 ± 18.2	80.2 ± 18.0	0.8447	80.3 ± 18.2	80.2 ± 17.9	0.6824	78.7 ± 17.5	79.8 ± 21.8	0.5134		
mean \pm SD, bets/min											
Serum creatinine at	1.0 ± 0.5	1.1 ± 0.7	< 0.0001	1.0 ± 0.5	1.1 ± 0.7	< 0.0001	0.9 ± 0.3	1.1 ± 0.7	0.0009		
baseline, mean \pm SD,											
mg/dl											
Killip Class ≥2), n (%)	855 (19.7)	1602 (15.3)	< 0.0001	827 (20.1)	1547 (15.3)	< 0.0001	28 (12.3)	55 (16.8)	0.1317		
BP indicates blood pressur	e; CAD, coronary	artery disease;	ECG, electro	ocardiogram; Ml	, myocardial inf	arction, PAI	D, peripheral ar	tery disease, ST	EMI= ST-		
segment elevation myocard	dial infarction.										

Table S2. Use of medications and PCI within 24 hours from hospitalization sorted by sex (women versus men) and CAD status in the overall population of patients with acute coronary syndromes.

		All Patients			tructive CAD enosis ≥50%)		Nonobstructive CAD (stenosis <50%)		
Characteristics	Women (n=4347)	Men (n 10446)	p value	Women (n=4119)	Men (n=10119)	p value	Women (n =228)	Men (n =327)	p value
Aspirin, n (%)	4298 (98.9)	10352 (99.1)	0.2189	4071 (98.8)	10028(99.1)	0.1654	227 (99.6)	324 (99.1)	0.4857
Clopidogrel, n (%)	3908 (89.9)	9291 (88.9)	0.0819	3703 (89.9)	9000 (88.9)	0.0889	205 (89.9)	291 (89.0)	0.7278
Unfractionated heparin, n (%)	2411 (55.5)	6073 (58.1)	0.0028	2309 (56.1)	5905 (58.4)	0.0121	102 (44.7)	168 (51.4)	0.1239
LMWH, n (%)	2091 (48.1)	4769 (45.7)	0.0066	1960 (47.6)	4595 (45.0)	0.0184	131 (57.5)	174 (53.2)	0.3229
Heparins (overall), n (%)	3671 (84.4)	9021 (86.4)	0.0030	3484 (84.6)	8735 (86.3)	0.0083	187 (82.0)	286 (87.5)	0.0837
GP IIb/IIIa inhibitor, n (%)	515 (11.8)	1328 (12.7)	0.1414	511 (12.4)	1326 (13.1)	0.2552	4 (1.8)	2 (0.6)	0.2408
Beta-blockers	3336 (76.7)	8065 (77.2)	0.5421	3132 (76.0)	7773 (76.8)	0.3225	204 (89.5)	292 (89.3)	0.9469
ARBs/ACE-inhibitors, n (%)	3425 (78.8)	8139 (77.9)	0.2378	3235 (78.5)	7873 (77.8)	0.3349	190 (83.3)	266 (81.3)	0.5450
PCI, n (%)	3880 (89.3)	9626 (92.2)	<0.0001	3880 (94.2)	9626 (95.1)	0.0278	0 (0.0%)	0 (0.0%)	-

ACE indicates angiotensin-converting enzyme; ARBs, angiotensin II receptor blockers; CAD, coronary artery disease; GP, glycoprotein; LMWH, low molecular weight heparin; PCI, percutaneous coronary intervention.

Table S3. Use of medications and reperfusion therapies within 24 hours from hospitalization sorted by sex (women versus men) and CADstatus in patients with STEMI.

	All Patients				structive CAD enosis $\geq 50\%$)		Nonobstructive CAD (stenosis <50%)		
Characteristics	Women (n=2871)	Men (n=7094)	p value	Women (n=2833)	Men (n=7027)	p value	Women (n=38)	Men (n=67)	p value
Aspirin, n (%)	2843 (99.0)	7045 (99.3)	0.1717	2805 (99.0)	6978 (99.3)	0.1673	38 (100.0)	67 (100.0)	1.0000
Clopidogrel, n (%)	2541 (88.5)	6228 (87.7)	0.3158	2508 (88.5)	6170 (87.8)	0.3113	33 (86.8)	58 (86.6)	0.9686
Unfractionated heparin, n (%)	1604 (55.9)	4110 (57.9)	0.0595	1593 (56.2)	4079 (58.0)	0.0993	11 (28.9)	31 (46.3)	0.0765
LMWH, n (%)	1314 (45.8)	3201 (45.1)	0.5581	1290 (45.5)	3168 (45.1)	0.6837	24 (63.2)	33 (49.3)	0.1699
Heparins (overall), n (%)	2424(84.4)	6175 (87.0)	0.0008	2394 (84.5)	6119 (87.1)	0.0011	30 (78.9)	56 (83.6)	0.5693
Beta-blockers, n (%)	2137 (74.4)	5422 (76.4)	0.0371	2104 (74.3)	5366 (76.4)	0.0300	33 (86.8)	56 (83.6)	0.6514
ARBs/ACE-inhibitors, n (%)	2203 (76.7)	5503 (77.6)	0.3673	2173 (76.7)	5449 (77.5)	0.3699	30 (78.9)	54 (80.6)	0.8427
Reperfusion therapies									
Fibrinolysis, n (%)	140 (4.9)	479 (6.8)	0.0001	140 (4.9)	479 (6.8)	0.0002	0 (0.0)	0 (0.0)	-
PCI, n (%)	2749 (95.8)	6836 (96.4)	0.1613	2749 (97.0)	6836 (97.3)	0.5081	0 (0.0)	0 (0.0)	_

ACE indicates angiotensin-converting enzyme; ARBs, angiotensin II receptor blockers; CAD, coronary artery disease; GP, glycoprotein; LMWH, low molecular weight heparin; PCI, percutaneous coronary intervention; STEMI, ST-segment elevation myocardial infarction

	1	All Patients		Obs	structive CAD		Nonobstructive CAD		
Characteristics	Women (n=4347)	Men (n=10446)	p value	Women (n=4119)	Men (n=10119)	p value	Women (n=228)	Men (n=327)	p value
Aspirin, n (%)	1291 (29.7)	2613 (25.0)	<0.0001	1212 (29.4)	2531 (25.0)	< 0.0001	79 (34.6)	82 (25.1)	0.0162
Clopidogrel, n (%)	462 (10.6)	928 (8.9)	0.0014	426 (10.3)	896 (8.9)	0.0071	36 (15.8)	32 (9.8)	0.0409
ACE-inhibitors /ARBs, n (%)	2222 (51.1)	3904 (37.4)	< 0.0001	2100 (51.0)	3766 (37.2)	< 0.0001	122 (53.5)	138 (42.2)	0.0087
Beta-blockers, n (%)	1657 (38.1)	2844 (27.2)	< 0.0001	1553 (37.7)	2721 (26.9)	< 0.0001	104 (45.6)	123 (37.6)	0.0609
Statins, n (%)	1002 (23.1)	2034 (19.5)	< 0.0001	949 (23.0)	1976 (19.5)	< 0.0001	53 (23.2)	58 (17.7)	0.1175

		Group 1	Group 2	Group 1	Group 2
		[Diabetes]	[No diabetes]	[Current smokers]	[Non-smokers]
		(n = 3563)	(n = 11230)	(n=6420)	(n=8373)
1	RR ratio	0.89	0.49	0.75	0.50
2	log RR ratio	-0.1165	-0.7133	-0.2877	-0.6931
3	95% CI for	0.62 - 1.29	0.41 - 0.60	0.54 - 1.03	0.41 - 0.61
	RR ratio				
4	95% CI for	-0.4780 - 0.2546	-0.89160.5108	-0.6162 -0.0296	-0.89160.4943
	log RR ratio				
5	Width of CI	0.7326	0.3808	0.6458	0.3973
6	SE (=width /	0.1869	0.0971	0.1647	0.1014
	(2*1.96))				
			Difference between log relativ	ve risk ratios	
7	d (= $E_1 - E_2$)	0.5	968	0.4	4054
8	SE (d)	0.2	106	0.	1934
9	CI (d)	0.1840 -	- 1.0096	0.0263	- 0.7845
10	Test of	2.8338 (p-va	due: 0.0023)	2.0962 (p-v	alue: 0.0180)
	Interaction				
			Ratio of relative risk r		
11	RRR ratio	1.8	163	1.4	1999
	(= exp (d))				
	CI (RRR ratio)	1.2020	-2.7445	1.0266	-2.1913

Table S5. Interaction test calculations for comparing two estimated risk ratios (relative risks of women versus men) by inverse probability of weighting: diabetes, current smoking, hypercholesterolemia, hypertension for obstructive CAD.

Group 1	Group 2	Group 1	Group 2

		[Hypercholesterolemia]	[No	[Hypertension]	[No hypertension]
		(n=6609)	hypercholesterolemia]	(n=10368)	(n=4425)
			(n=8184)		
1	RR ratio	0.55	0.56	0.56	0.50
2	log RR ratio	-0.5978	-0.5798	-0.5798	-0.6931
3	95% CI for	0.42 - 0.72	0.45 - 0.70	0.47 - 0.68	0.35 - 0.73
	RR ratio				
4	95% CI for	-0.86750.3285	-0.79850.3567	-0.75500.3857	-1.04980.3147
	log RR ratio				
5	Width of CI	0.5390	0.4418	0.3693	0.7351
6	SE (=width /	0.1375	0.1127	0.0942	0.1875
	(2*1.96)				
			Difference between log relative	risk ratios	
7	$d (=E_1 - E_2)$	-0.01	180	0	.1133
8	SE (d)	0.17	78	0	.2098
9	CI (d)	-0.3665 -	- 0.3305	-0.297	9 - 0.5245
10	Test of	-0.1012 (p-va	lue: 0.4597)	0.5400 (p-v	values: 0.2946)
	Interaction				
			Ratio of relative risk ra	tios	
11	RRR ratio	0.98	22	1	.1200
	(= exp (d))				
12	CI (RRR ratio) 0.6932	- 1.3917	0.7424	4 – 1.6896

 Table S6. Interaction test: calculations for comparing two estimated RR ratios (women

 versus men) by inverse probability of weighting: STEMI in obstructive versus

 nonobstructive CAD in patients with acute coronary syndrome at index event.

		Group 1	Group 2
		[Obstructive CAD]	[Nonobstructive CAD]
		(n =14238)	(n= 555)
1	RR ratio	1.12	0.92
2	log RR ratio	0.1133	-0.0834
3	95% CI for RR ratio	1.03 - 1.21	0.60 - 1.43
4	95% CI for log RR ratio	0.0296 - 0.1906	-0.5108 - 0.3577
5	Width of CI	0.1611	0.8685
6	SE (=width / (2*1.96))	0.0411	0.2216
	Difference	between log relative risk ra	atios
7	d (= $E_1 - E_2$)	0.	1967
8	SE (d)	0.	2253
9	CI (d)	-0.2449	9 - 0.6384
10	Test of Interaction	08730 (p-v	value: 0.1913)
	Ra	tio of relative risk ratios	
11	RRR ratio(=exp(d))	1.	2174
12	CI (RRR ratio)	0.7827	- 1.8934

Table S7. Interaction test: calculations for comparing two estimated RR ratios (women versus men) by inverse probability of weighting: 30-day mortality in obstructive versus nonobstructive CAD in patients with acute coronary syndrome at index event.

		Group 1	Group 2		
		[Obstructive CAD]	[Nonobstructive CAD]		
		(n =14238)	(n= 555)		
1	RR ratio	1.75	0.79		
2	log RR ratio	0.5596	-0.2357		
3	95% CI for RR ratio	1.48 - 2.07 0.31 - 1.74			
4	95% CI for log RR ratio	0.3920 - 0.7275	-1.1712 - 0.5539		
5	Width of CI	0.3355 1.7251			
6	SE (=width / (2*1.96))	0.0856	0.4401		
	Difference	between log relative risk ra	itios		
7	d (= $E_1 - E_2$)	0.′	7953		
8	SE (d)	0.4	4483		
9	CI (d)	-0.0834	- 1.6740		
10	Test of Interaction	1.7740 (p-v	value: 0.0380)		
	Rat	tio of relative risk ratios			
11	RRR ratio(=exp(d))	2.2	2151		
12	CI (RRR ratio)	0.9200	- 5.3335		

	I	Primary PCI		
Characteristics	Women	Men	n valua	
Characteristics	(n=2641)	(n=6547)	p value	
Cardiovascular risk factors				
Diabetes, %	22.5	22.1	0.6765	
Hypertension, %	65.8	66.2	0.7140	
Hypercholesterolemia, %	43.1	43.7	0.5996	
Current smokers, %	46.6	47.2	0.6021	
Former smokers, %	6.7	7.1	0.4957	
Clinical history of ischemic heart disease				
Previous angina pectoris, %	10.8	11.1	0.6780	
Previous myocardial infarction, %	10.2	10.2	1.0000	
Previous heart failure, %	2.6	2.6	1.0000	
Clinical history of cardiovascular disorders				
Peripheral artery disease, %	1.7	1.7	1.0000	
Previous stroke, %	2.8	2.7	0.7894	
Clinical presentation at admission				
ST-segment shifts in anterior leads (at ECG), %	29.1	29.6	0.6342	
Systolic BP at baseline, mean \pm SD, mmHg	137.5 ± 28.2	137.5 ± 27.1	0.9307	
Heart rate at baseline, mean \pm SD, beats/min	80.0 ± 17.7	80.3 ± 17.9	0.6048	
Serum creatinine at baseline, mean \pm SD, mg/dl	0.98 ± 0.50	1.04 ± 0.60	0.0001	
Killip Class≥2, %	17.0	17.1	0.9082	
Outcomes				
30-day mortality, %	7.1	4.0	< 0.0001	
Relative Risk Ratio (95% CI)	1.84 (1.52 – 2.23)		< 0.0001	

Table S8. Inverse probability of weighting: outcomes sorted by sex (women versus men) in patients with obstructive CAD who underwent primary PCI.

Table S9. Inverse probability of weighting: outcomes sorted by sex (women versus men) and CAD status in patients with acute coronarysyndrome at index event. Analysis restricted the cohort of obstructive CAD patients having 70% or greater stenosis

	Ob	structive CAD		None	Nonobstructive CAD			
	(s	tenosis ≥70%)		(st	enosis <70%)			
	Women	Men		Women	Men			
Characteristics	(n=4037)	(n=10043)	p value	(n=310)	(n=403)	p value		
Age, mean \pm SD, y	61.4 ± 11.9	61.4 ± 11.5	0.8643	60.9 ± 11.8	60.8 ± 12.3	0.8409		
Cardiovascular risk factors								
Diabetes, %	24.4	24.1	0.7070	20.3	21.7	0.6503		
Hypertension, %	69.7	69.6	0.9071	78.9	76.8	0.5048		
Hypercholesterolemia, %	44.4	44.6	0.8291	43.1	42.0	0.7687		
Current smokers, %	43.4	44.0	0.5165	35.3	35.0	0.9338		
Former smokers, %	7.3	7.8	0.3120	10.0	10.3	0.8956		
Clinical history of ischemic heart disease								
Previous angina pectoris, %	15.2	15.6	0.5535	17.6	17.7	0.9723		
Previous myocardial infarction, %	13.0	13.4	0.5274	11.6	11.4	0.9339		
Previous heart failure, %	3.6	3.8	0.5707	4.5	4.6	0.9496		
Clinical history of cardiovascular disease								
Peripheral artery disease, %	1.7	1.8	0.6821	0.7	1.2	0.4964		
Previous stroke, %	2.8	2.8	1.0000	3.4	2.5	0.4778		
Clinical presentation at hospital admission								
ST-segment shifts in anterior leads (at ECG), %	20.7	21.0	0.6922	9.7	9.7	1.0000		

Systolic BP at baseline, mean \pm SD, mm Hg	139.7±28.0	139.6 ± 26.6	0.8675	142.0±25.5	142.1±26.4	0.9488
Heart rate at baseline, mean \pm SD, beats/min	80.0 ± 17.8	80.2 ± 17.9	0.6810	80.1 ± 18.3	79.6 ± 20.9	0.9488
Serum creatinine at baseline, mean \pm SD, mg/dl	0.99 ± 0.5	1.06 ± 0.6	< 0.0001	0.99 ± 0.4	1.01 ± 0.5	0.4338
Killip Class ≥2, %	16.4	16.4	0.7726	13.4	14.4	0.7029
Outcomes						
30-day mortality, %	5.9	3.4	< 0.0001	1.1	1.9	0.3846
Relative Risk Ratio (95% CI)	1.75 (1.4	8-2.08)	< 0.0001	0.56 (0.1	15 – 2.08)	0.3903

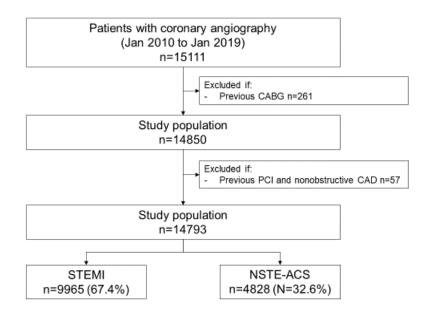
BP indicates blood pressure; CAD, coronary artery disease.

Obstructive CAD was defined as a 70% or more narrowing of the luminal diameter.

Table S10. Interaction test: calculations for comparing two estimated RR ratios (women versus men) by inverse probability of weighting: 30-day mortality in obstructive (stenosis ≥70%) versus nonobstructive CAD in patients with acute coronary syndrome at index event.

			Group 2			
		[Obstructive CAD]	[Nonobstructive CAD]			
		(n=14080)	(N=713)			
1 I	RR ratio	1.75	0.56			
2 1	log RR ratio	0.5596	-0.5798			
3 9	95% CI for RR ratio	1.48 - 2.08	0.15 - 2.08			
4 9	95% CI for log RR ratio	0.3920 - 0.7324	-1.8971 - 0.7324			
5 V	Width of CI	0.3404	2.6295			
6 8	SE (=width / (2*1.96))	0.0868	0.6708			
	Difference	e between log relative risk	ratios			
7 a	$d (=E_1 - E_2)$	1.1394				
8 8	SE (d)	0.6764				
9 (CI (d)	-0.1863 - 2.4651				
10]	Test of Interaction	1.6845 (p-value: 0.0460)				
	Ra	tio of relative risk ratios				
11 I	RRR ratio (=exp(d))	3.1249				
12 (CI (RRR ratio)	0.8300 - 11.7647				

Figure S1. Study Flow Chart.



CABG indicates coronary artery bypass graft; CAD, coronary artery disease; NSTE-ACS, non-ST elevation acute coronary syndromes; PCI, percutaneous coronary intervention; STEMI, ST-elevation myocardial infarction.