

## **SUPPLEMENTARY DATA**

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## 1. Supplementary Tables

**Supplementary table 1.** Standardized mean differences of variables before and after inverse-probability-weighting adjustment

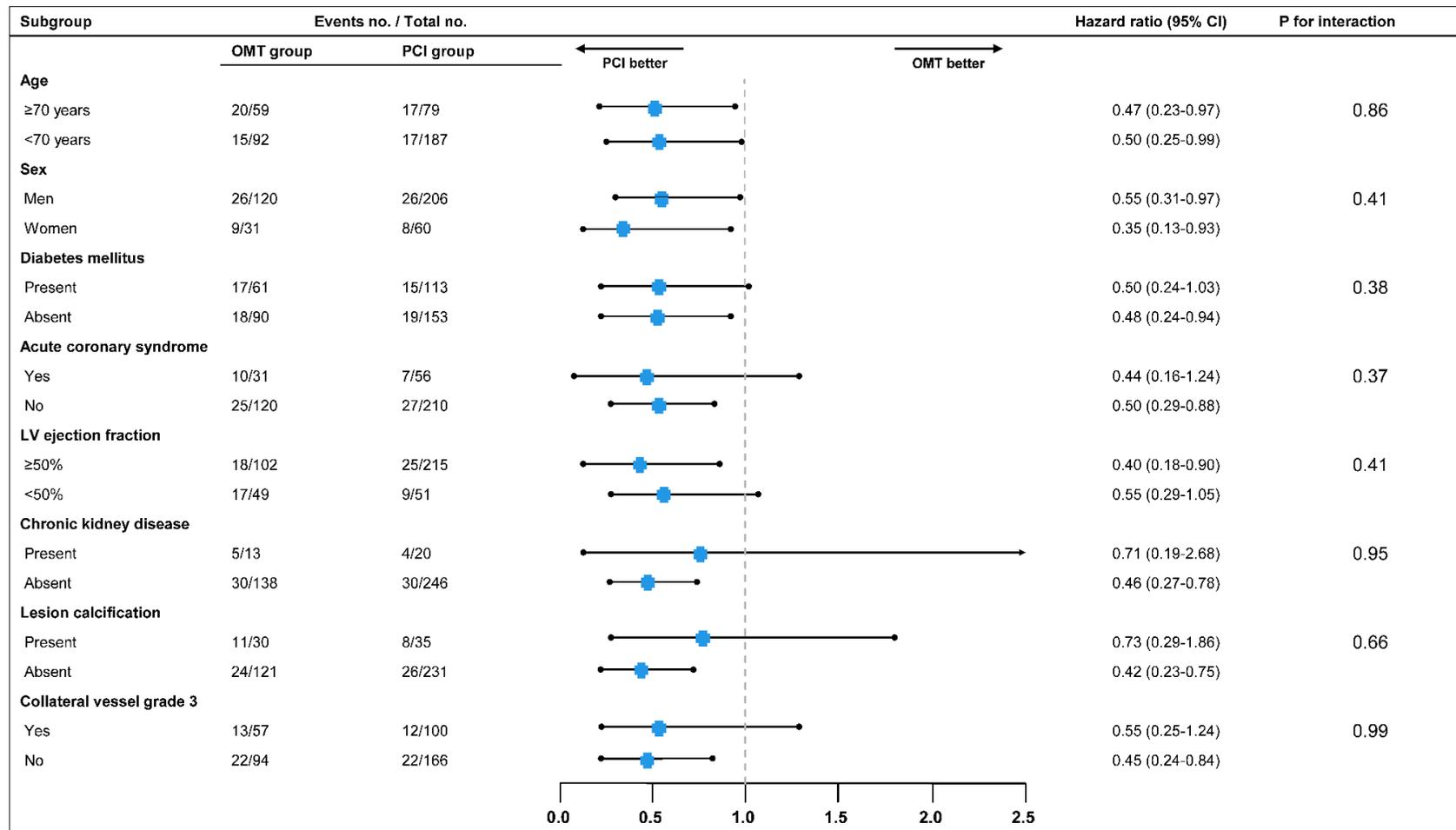
	<b>Unadjusted</b>	<b>Adjusted</b>
Male sex	5.2	5.1
Age, y	34.7	1.5
Left ventricular ejection fraction	24.6	2.1
Acute coronary syndrome	21.5	7.7
Current smoking	11.3	1.8
Hypertension	10.3	0.7
Diabetes mellitus	2.5	1.7
Dyslipidemia	16.3	0.5
Chronic kidney disease	9.8	5.2
History of percutaneous coronary intervention	27.5	3.9
History of myocardial infarction	24.0	1.0
History of stroke	9.4	1.5
History of peripheral artery disease	10.4	8.0
Family history of coronary artery disease	17.1	0.6
LM disease	7.4	11.8

LAD disease	11.4	9.1
LCX disease	15.8	2.2
RCA disease	26.5	3.0
Multivessel disease	17.9	0.1
In-stent restenosis	16.2	9.0
Blunt stump	12.4	2.4
Bridging collateral	10.8	1.5
Collateral vessel grade 3	3.4	3.9
Calcification	3.3	4.6
Aspirin	21.6	2.8
Clopidogrel	103.5	3.1
Other antiplatelet	10.5	6.7
Statin	15.7	13.2
Beta-blocker	2.3	2.4
Calcium channel blocker	16.7	7.2
Renin-angiotensin system blockade	2.1	10.4
Spirolactone	11.3	1.3

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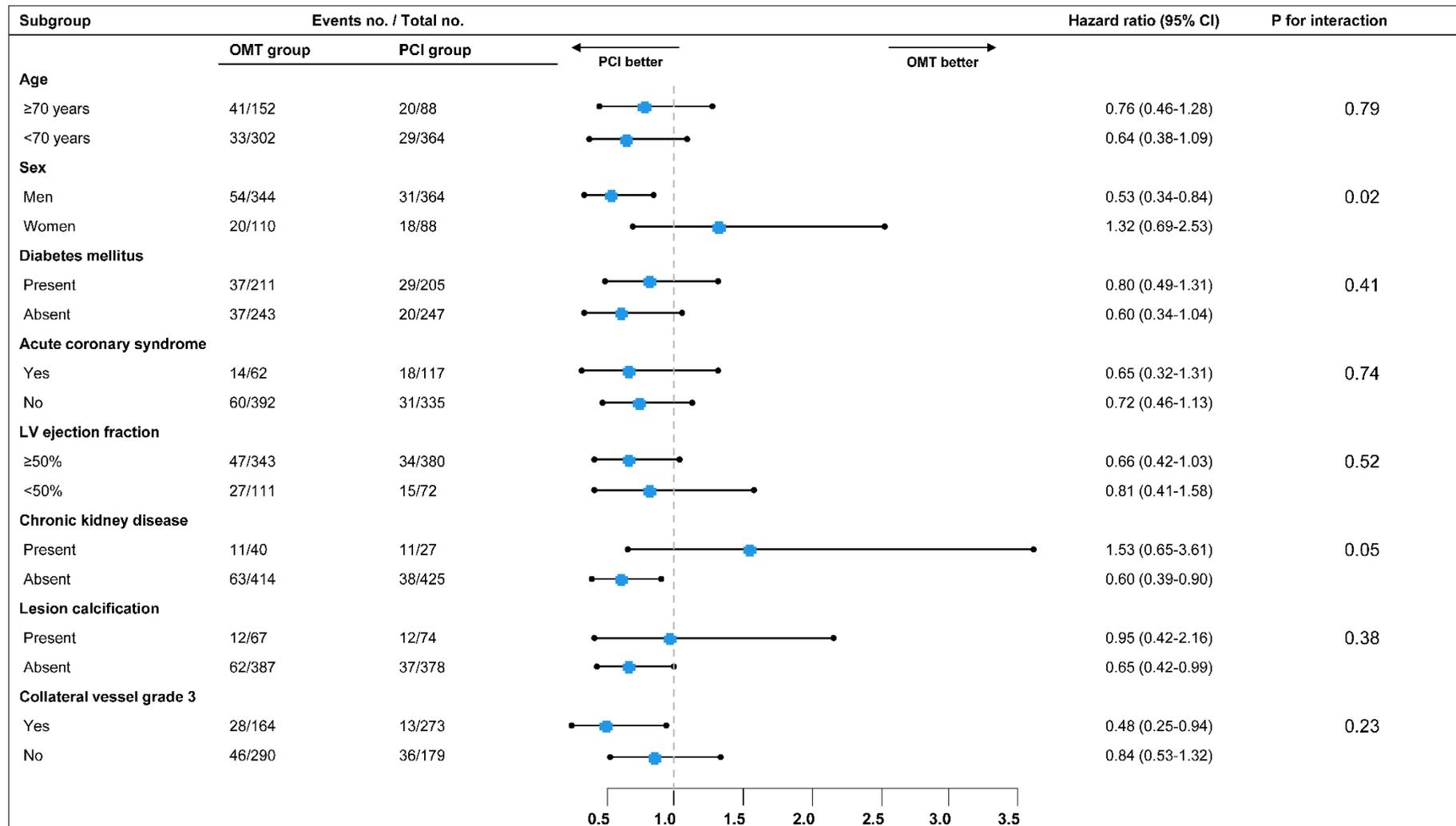
LM, left main coronary artery; LAD, left anterior descending artery; LCX, left circumflex artery; RCA, right coronary artery

## 2. Supplementary Figures



**Supplementary Figure 1.** Subgroup analysis for primary outcome in LAD CTO population. Benefits of PCI for LAD CTO were generally observed throughout various subgroups of clinical factors. No significant interactions between the factors and the treatment methods were found in any of the pairs.

CI, confidence interval; LV, left ventricular; OMT, optimal medical therapy; PCI, percutaneous coronary intervention.



**Supplementary Figure 2.** Subgroup analysis for primary outcome in non-LAD CTO population. Men and those without chronic kidney disease showed significant benefit from PCI for non-LAD CTO. Significant interaction between sexes and the treatment methods were observed.

Abbreviations. CI, confidence interval; LV, left ventricular; OMT, optimal medical therapy; PCI, percutaneous coronary intervention.