SUPPLEMENTARY DATA

Figure 1 of the supplementary data. Office systolic blood-pressure between the intensive and standard treatment groups.

The systolic blood-pressure target was 110 mmHg to less than 130 mmHg in the intensive treatment group and 130 mmHg to less than 150 mmHg in the standard-treatment group. A: office systolic blood-pressure in the intensive treatment group. B: office systolic blood-pressure in the standard treatment group.

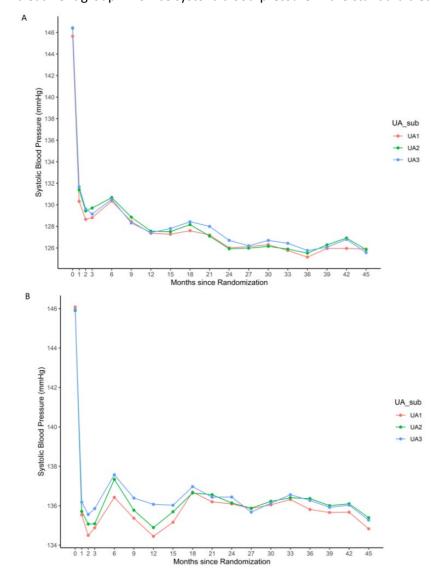
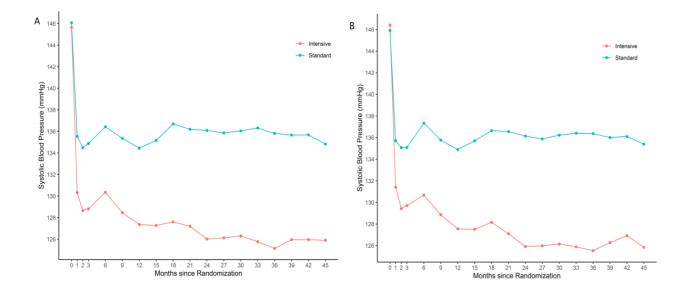


Figure 2 of the supplementary data. Office systolic blood pressure in the 3 tertiles of uric acid. The systolic blood-pressure target was 110 mmHg to less than 130 mmHg in the intensive treatment group and 130 mmHg to less than 150 mmHg in the standard treatment group. A, office systolic blood pressure in uric acid tertile 2; C, office systolic blood pressure in uric acid tertile 3.



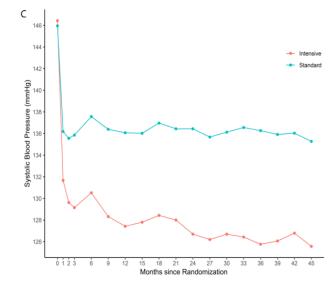


Table 1 of the supplementary data. Baseline characteristics of the STEP participants and of those in the intensive treatment group and standard treatment group

	Overall	Intensive treatment	Standard treatment	P^b
	(n = 8294)	(n = 4132)	(n = 4162)	
Age	66.26 ± 4.83	66.23 ± 4.85	66.28 ± 4.80	.619
Male sex	3867 (46.6)	1944 (47.0)	1923 (46.2)	.454
BMI ^a	25.58 ± 3.16	25.56 ± 3.16	25.61 ± 3.16	.432
SBP, mmHg	146.07 ± 16.65	146.17 ± 16.79	145.98 ± 16.52	.612
DBP, mmHg	82.47 ± 10.60	82.66 ± 10.67	82.29 ± 10.52	.117
ALT, U/L	18.36 ± 11.79	18.48 ± 11.67	18.24 ± 11.90	.355
AST, U/L	23.56 ± 9.82	23.71 ± 10.15	23.41 ± 9.47	.173
Urea umol/L	5.66 ± 1.34	5.68 ± 1.35	5.64 ± 1.32	.139
CR, umol/L	73.24 ± 18.00	73.12 ± 17.84	73.35 ± 18.17	.557
Fasting serum glucose, umol/L	6.13 ± 1.59	6.09 ± 1.58	6.17 ± 1.60	.035
Uric acid, mmol/L	347.26 ± 89.15	347.58 ± 88.68	346.95 ± 89.62	.750
Triglycerides, mmol/L	4.88 ± 1.08	4.89 ± 1.11	4.88 ± 1.06	.692
Total cholesterol, mmol/L	1.60 ± 1.07	1.61 ± 1.13	1.58 ± 1.02	.335
HDL-C, mmol/L	1.26 ± 0.31	1.26 ± 0.31	1.26 ± 0.30	.622
LDL-C, mmol/L	2.69 ± 0.88	2.68 ± 0.88	2.69 ± 0.87	.649
Diabetes mellitus history	1586 (19.1)	779 (18.9)	807 (19.4)	.553
Hyperlipidemia history	3052 (36.8)	1556 (37.7)	1496 (35.9)	.111
Framingham score	28.59 (16.33)	28.60 (16.28)	28.58 (16.38)	.945
Framingham Risk Score ≥15%	6422 ± 77.7	3200 ± 77.7	3222 ± 77.7	.999
no./total no ^c				
eGFR	109.28 ± 24.05	109.61 ± 24.14	108.96 ± 23.95	.218

ALT, alanine aminotransferase; AST, aspartate aminotransferase; BMI, body mass index; CR, creatinine; SBP, systolic blood pressure; DBP, diastolic blood pressure; eGFR, estimated glomerular filtration rate; HDL-C, high-density lipoprotein cholesterol; LDL-C, low-density lipoprotein cholesterol; LDL-C, low-density lipoprotein cholesterol. Values are expressed as No. (%) or mean ± standard deviation. Percentages may not add up to 100 because of rounding. To convert the values for fasting serum glucose to milligrams per deciliter, divide by 0.05551. To convert the values for triglycerides to milligrams per deciliter, divide by 0.01129. IQR denotes interquartile range.

^a Body-mass index is weight in kilograms divided by height in meters squared.

 $^{^{\}rm b}P$ value < .05.

^cA Framingham Risk Score of 15% or higher indicates a high 10-year risk of cardiovascular disease.

Table 2 of the supplementary data. Hazard ratios for the primary and secondary outcomes

Outcome	Intensive treatmen	nt (n = 4132)	Standard treatmen	t (n = 4162)		
Outcome	No. of patients, %	% per year	No. of patients, %	% per year		Р
					SHR (95%CI)	
Primary composite outcome	144 (3.5)	1.0	192 (4.6)	1.4	0.74 (0.60-0.93)	.007*
Secondary outcomes						
Components of primary outcome						
Stroke	47 (1.1)	.3	71 (1.7)	0.5	0.66 (0.46, 0.95)	.027*
Acute coronary syndrome	55 (1.3)	.4	80 (1.9)	0.6	0.68 (0.49, 0.96)	.030*
Mortality						
Death from cardiovascular cause	18 (0.4)	.1	22 (0.5)	0.2	0.82 (0.44, 1.52)	.524
					HR (95% CI)	
Death from any cause	66 (1.6)	.5	60 (1.4)	0.4	1.10 (0.78, 1.57)	.579

CI, confidence interval; HR, hazard ratio; SHR, subdistribution hazard ratio.

The primary outcome was a composite of acute coronary syndrome, stroke, acute decompensated heart failure, coronary revascularization, atrial fibrillation, or mortality from cardiovascular cause.

In the analyses of the primary outcome and secondary outcomes (excluding all-cause death), hazard ratio (95% confidence interval) and P value were calculated using the Fine–Gray subdistribution hazard model. In the analysis of all-cause death, the Cox regression model was used. *P < .05.

Table 3 of the supplementary data

	Intensive treatment Standard treatment		nent	Crude model		Adjusted model 1 ^a				
Outcomes	Total number	No. of events, %	% with event per year	Total number	No. of events, %	% with event per year		Р		Р
Second Outcomes										
Stroke							SHR		SHR	
Tertile 1 (n = 2762)	1355	7	0.16	1407	22	0.47	0.326 (0.140-0.763)	.010b	0.353 (0.151-0.828)	.017b
Tertile 2 (n = 2766)	1393	20	0.43	1373	27	0.59	0.721 (0.404-1.285)	.267	0.697 (0.391-1.244)	.222
Tertile 3 (n = 2766)	1384	20	0.43	1382	22	0.48	0.898 (0.490-1.644)	.726	0.905 (0.494-1.659)	.746
Cardiovascular death							SHR		SHR	
Tertile 1 (n = 2762)	1355	5	0.11	1407	4	0.08	1.294 (0.348-4.808)	.701	1.268 (0.338-4.752)	.725
Tertile 2 (n = 2766)	1393	7	0.15	1373	8	0.17	0.857 (0.311-2.361)	.765	0.834 (0.307-2.263)	.721
Tertile 3 (n = 2766)	1384	6	0.13	1382	10	0.22	0.592 (0.215-1.630)	.311	0.595 (0.215-1.644)	.317
Acute coronary syndrome							SHR		SHR	
Tertile 1 (n = 2762)	1355	11	0.24	1407	25	0.53	0.450 (0.222-0.915)	.027 ^b	0.448 (0.221-0.909)	.026 ^b
Tertile 2 (n = 2766)	1393	21	0.45	1373	27	0.59	0.758 (0.429-1.339)	.340	0.753 (0.427-1.329)	.327
Tertile 3 (n = 2766)	1384	23	0.50	1382	28	0.61	0.814 (0.469-1.412)	.464	0.817 (0.472-1.417)	.472
Heart failure							SHR		SHR	
Tertile 1 (n = 2762)	1355	0	0	1407	3	0.06	1.729 (0.557- 5.365) ^b e-09	<.001 ^b	1.681 (0.542- 5.220) ^b e-09	<.001 ^b
Tertile 2 (n = 2766)	1393	0	0	1373	3	0.07	1.641 (0.529-5.093) ^b e-09	<.001 ^b	1.624 (0.523-5.024) ^b e-09	<.001 ^b
Tertile 3 (n = 2766)	1384	2	0.04	1382	5	0.11	0.395 (0.077-2.040)	.268	0.399 (0.077-2.055)	.272
All-cause death							HR		HR	
Tertile 1 (n = 2762)	1355	18	0.40	1407	20	0.43	0.948 (0.501-1.793)	.869	0.977 (0.515-1.852)	.943
Tertile 2 (n = 2766)	1393	20	0.43	1373	14	0.31	1.383 (0.698-2.739)	.352	1.352 (0.682-2.680)	.388
Tertile 3 (n = 2766)	1384	28	0.60	1382	26	0.56	1.066 (0.625-1.818)	.814	1.075 (0.630-1.833)	.791

CI, confidence interval; HR, hazard ratio; SHR, subdistribution hazard ratio.

In the analyses of the primary outcome and secondary outcomes (excluding all-cause death), hazard ratio (95% confidence interval) and P value were calculated using the Fine-Gray subdistribution hazard model. In the analysis of all-cause death, the Cox regression model was used. a Adjustment for fasting serum glucose. $^bP < .05$.

Table 4 of the supplementary data.

Outcome	
	P
Primary composite outcome	.120
Secondary outcomes	
Components of primary outcome	
Stroke	.051
Acute coronary syndrome	.217
Mortality	
Death from cardiovascular cause	.069
Death from any cause	.697

The interaction P values were calculated using Cox regression for all-cause mortality, and Fine-Gray regression for other primary and secondary outcomes. The interactions between treatment with uric acid as continuous endpoints.