SUPPLEMENTARY DATA

Table S1. Major adverse events at 1 year by valve underexpansion according to the boundary box method

	Expanded N = 613	Underexpanded N = 83	HR (95% CI)	*p*
Composite endpoint	69 (11.2)	8 (9.6)	0.85 (0.41-1.77)	.666
Death (any cause)	41 (6.7)	4 (4.8)	0.72 (0.26-2.01)	.531
Cardiovascular death	35 (5.7)	3 (3.6)	0.63 (0.19-2.06)	.448
Stroke	16 (2.6)	2 (2.4)	0.92 (0.21-4.01)	.915
Heart failure hospitalization	25 (4.1)	2 (2.4)	0.58 (0.14-2.43)	.454

CI, confidence interval; HR, hazard ratio.

Figure S1. Criterion 1 according to the boundary method.

The definition was based on Makkar et al.[1] A boundary box was drawn from the base of the lowest commissural posts to the base of the valve's lower crowns. This box was then copied twice above and once below along the stent body, with the combined area defining the boundary of the assessment region. Once the boundary (yellow lines) was set, a straight line was drawn through the center of each commissural post and extended to the upper and lower limits of the box (green lines). If any 2 of these lines intersected within the boundary, the valve was deemed underexpanded.
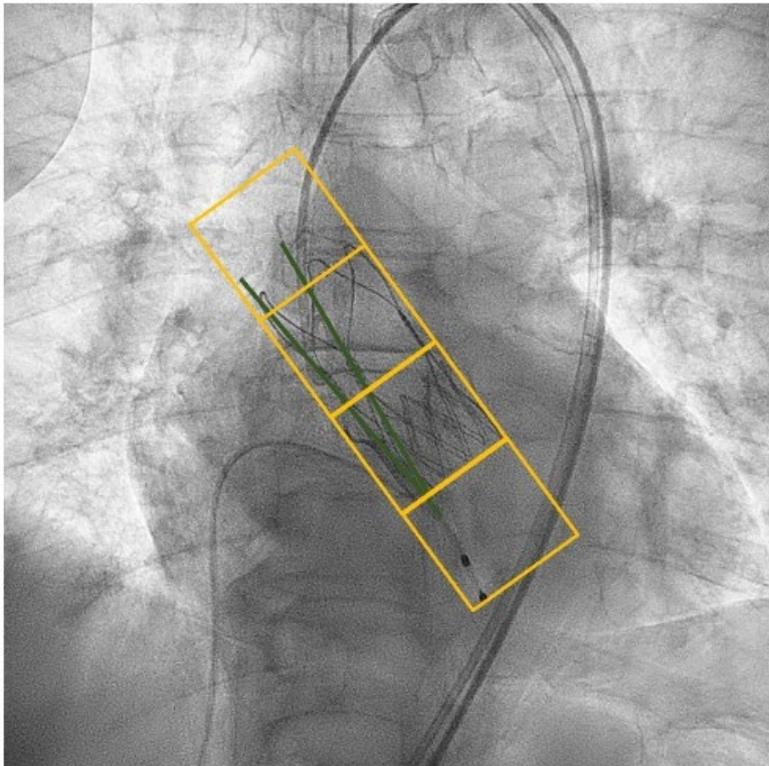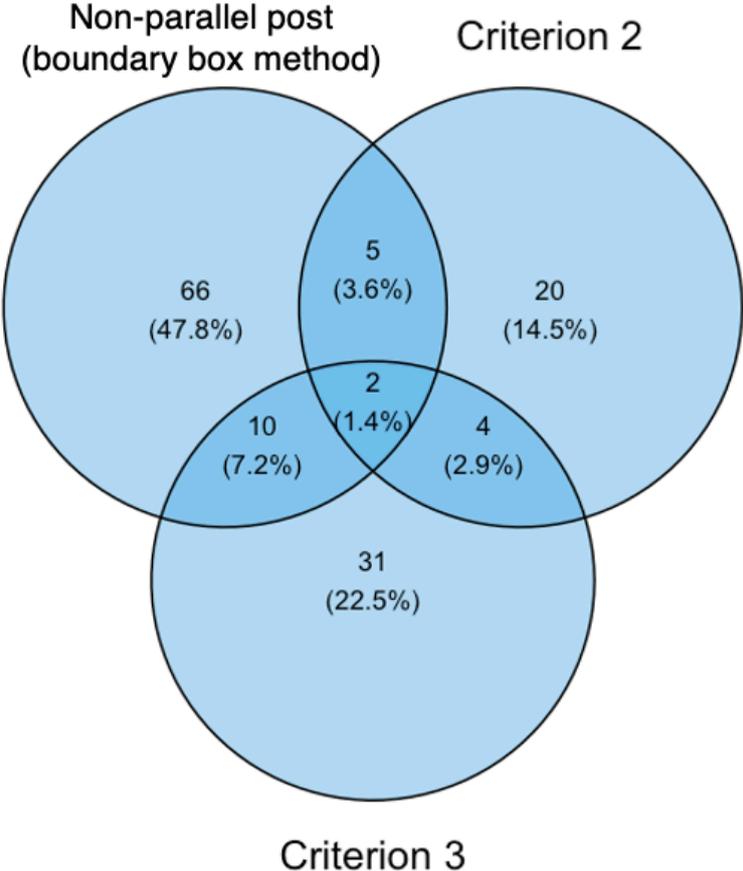
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Figure S2. Venn diagram for underexpansion criteria showing the relationship among the nonparallel post (boundary box method) and criterion 2 and 3 (3-criterion method).

REFERENCES OF THE SUPPLEMENTARY DATA

1. Makkar RR, Chakravarty T, Gupta A, et al. Valve Underexpansion and Clinical Outcomes With

ACURATE neo2: Findings From the ACURATE IDE Trial. *J Am Coll Cardiol.* 2025;86:225-238.