

Mechanical dyssynchrony combined with septal scarring reliably identifies responders to cardiac resynchronization therapy

Duchenne et al. Mechanical dyssynchrony and scarring in CRT

SUPPLEMENTS: TABLES

Table S1: Frequency of mechanical dyssynchrony before CRT.

	All patients (n=170)	Responders (n=121)	Non- responders (n=49)
SF or ApRock (%)	70	86	30 (*)
SSI \geq 3.1% (%)	69	80	40 (*)
LW-S \geq 860 mmHg·% (%)	69	80	36 (*)

(*) = p<0.05 vs. responders.

Table S2: Predictors of CRT-response in only those patients with LBBB (n=148).

	AUC	95%CI
Markers		
SF or ApRock	0.73	0.66 to 0.84
SSI	0.69	0.58 to 0.79
LW-S work difference	0.76	0.65 to 0.86
Markers + septal scarring		

SF or ApRock + septal scar	0.85	0.77 to 0.93
SSI + septal scar	0.82	0.74 to 0.89
LW-S work difference + septal scar	0.84	0.75 to 0.92

All $p > 0.05$ vs. the same markers in the entire study cohort (n=170).