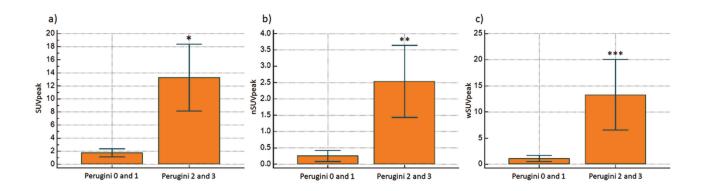
In-vivo quantification of myocardial amyloid deposits in patients with suspected Transthyretin-related Amyoidosis

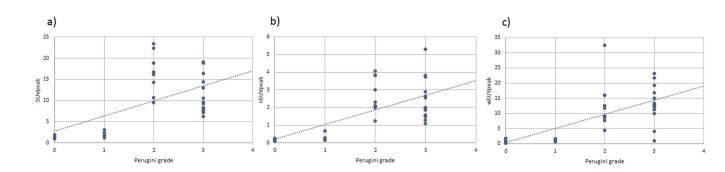
## **SUPPLEMENTAL**

Figure S1: Comparison of SUVpeak values for Perugini grades 0 and 1 vs 2 and 3.



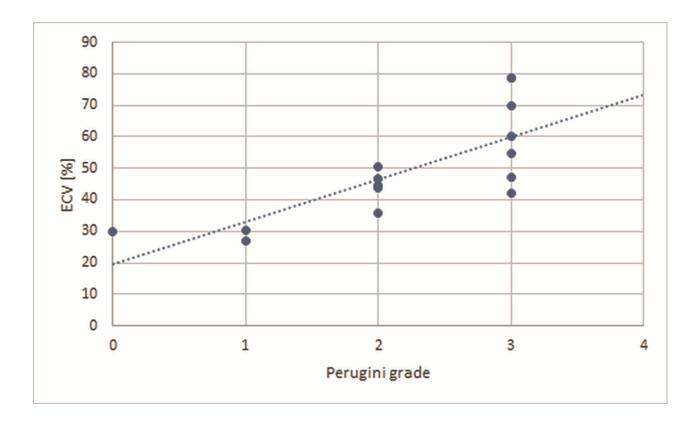
**Figure S1:** SUVpeak (a), nSUVpeak (b) and wSUVpeak (c) were significantly increased in patients with Perugini grades 2 and 3 compared to patients with Perugini grades 1 and 0 (\*p<0.0001 and \*\*p<0.0001, respectively).

Figure S2: Correlation between SUVpeak and nSUVpeak values with Perugini scores.



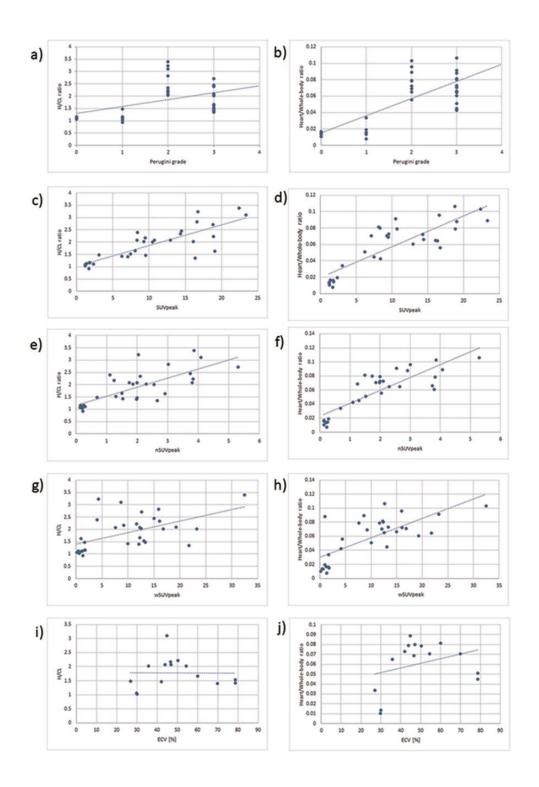
**Figure S2:** The correlation of SUVpeak, nSUVpeak and wSUVpeak with Perugini grades. All three parametes show a good correlation with Perugini grades (r=0.56; p=0.0009; r=0.62; p=0.0001; respectively).

Figure S3: Correlation between ECV values and Perugini scores.



**Figure S3:** Correlation between ECV values and Perugini scores. ECV shows a good correlation with Perugini scores (r=0.76; p=0.0009).

Figure S4: Correlation of H/CL and H/WB with Perugini grades, SUVpeak, nSUV peak, wSUVpeak and ECV.



**Figure S3:** The correlation of semiquantitative H/CL and H/WB with multiple parameters. Both H/CL and H/WB show a good correlation with Perugini grade (r=0.63; p<0.0001 and r=0.74; p<0.0001, **a** and **b**), with SUVpeak (r=0.83; p<0.0001 and r=0.84; p<0.0001, **c** and **d**), with nSUVpeak (r=0.75; p<0.0001 and

r=0.85; p<0.0001,  $\mathbf{e}$  and  $\mathbf{f}$ ) and with wSUVpeak (r=0.54; p=0.0013 and r=0.72; p<0.0001,  $\mathbf{g}$  and  $\mathbf{h}$ ). As shown in  $\mathbf{i}$  and  $\mathbf{j}$  there was no correlation of H/CL and H/WB with ECV ((r=0.005; p=0.99 and r=0.31; p=0.26).