Cardiovascular events in patients treated with chimeric antigen receptor T-cell therapy for aggressive B-cell lymphoma

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Table S1. Multivariable Logistic Regression Model for 30-d Major Adverse Cardiovascular Events (MACE)

Odds Ratio Estimates and Wald Confidence Intervals				
Effect	p-value	OR Estimate	95% CI for OR	
Age $\geq$ 60 vs age < 60 years	0.0067	3.976	1.466	10.779
CRS $\geq$ grade 3 vs. < grade 3	0.0031	4.664	1.680	12.951

Table S2. **Multivariable Cox Proportional Hazards Model for Association of 30-d MACE with Overall Survival**

Analysis of Maximum Likelihood Estimates					
Covariate		p-value	Hazard Ratio	95% CI for HR	
Bulky lesion of at least 7.5cm	1 vs. 0	0.0004	2.737	1.572	4.766
ECOG prior CAR-T cell infusion	1: 2/3/4 vs. 0: 0/1	0.0138	2.160	1.170	3.988
Carboplatin Prior CAR-T cell infusion	0 vs. 1	0.0314	1.791	1.054	3.045
CAD	1 vs. 0	0.0416	2.391	1.034	5.530
Family History of CAD	0 vs. 1	0.0522	2.109	0.993	4.481
30-day MACE	1 vs. 0	0.3987	1.354	0.670	2.737
CAD: coronary artery disease; CAR: chimeric antigen receptor; ECOG, Eastern Cooperative Oncology Group; MACE: major adverse cardiac event					

The multivariable analysis showed that the effect of MACE by 30 days on OS was not significant with the adjustment of bulky disease, ECOG, prior Carboplatin, coronary artery disease (CAD), and family history of CAD in the model.