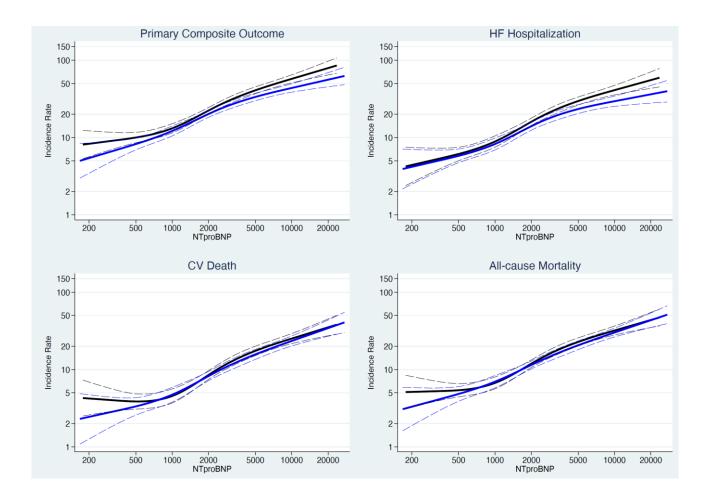
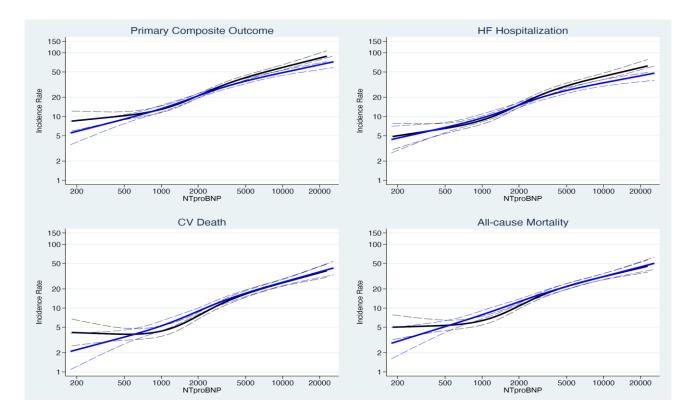
SUPPLEMENT

Supplementary figure S1 Outcomes according to baseline NT-proBNP level in the prespecified analysis population (no atrial fibrillation/flutter at baseline) enrolled as an outpatient (a) and an inpatient (c); all outpatients (including patients with atrial fibrillation/flutter at baseline) are shown in b) and all inpatients (including patients with atrial fibrillation/flutter at baseline) are shown in (d). The Y-axis shows the incidence rate per 100 person-years and the X-axis NT-proBNP level (ng/L). Black line = patients randomly assigned to placebo; blue line = patients randomly assigned to omecamtiv mecarbil.

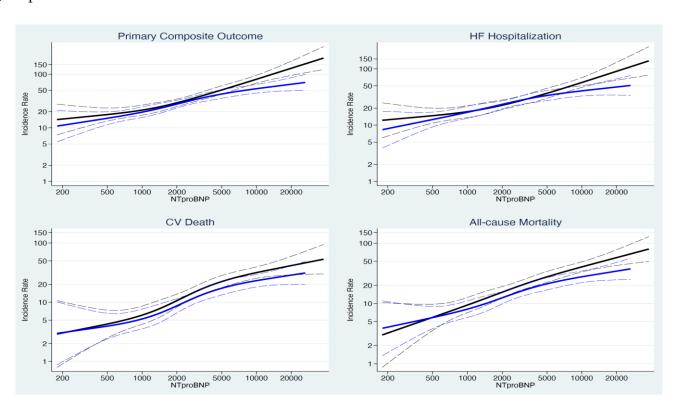
a) Outpatients - not atrial fibrillation/flutter



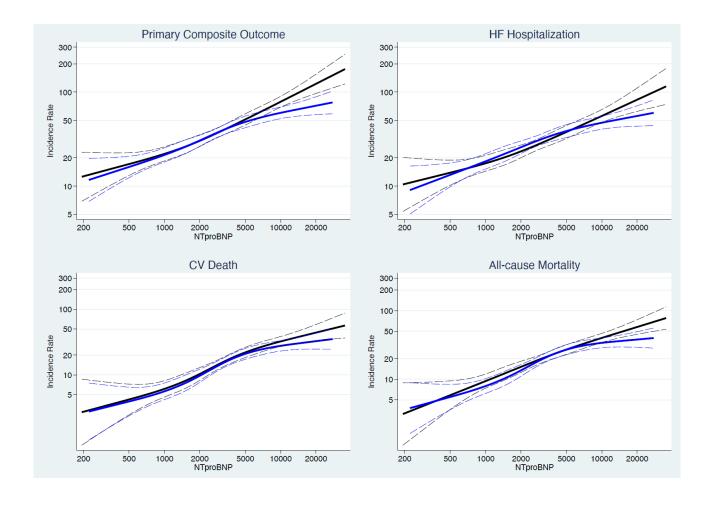
b) All outpatients, irrespective of heart rhythm



c) Inpatients – not atrial fibrillation/flutter

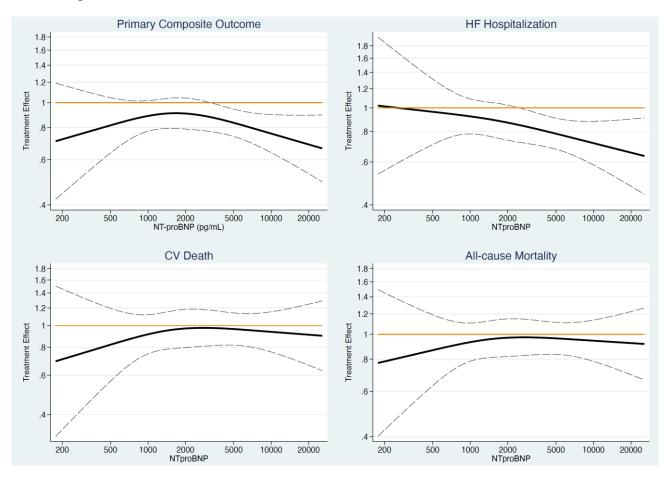


d) All inpatients, irrespective of heart rhythm

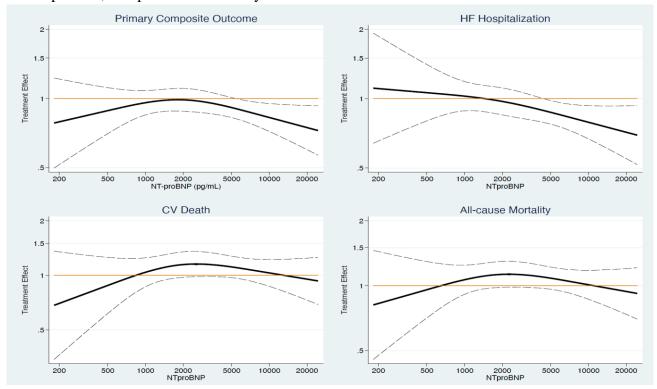


Supplementary Figure S2 Effect of randomized treatment on outcomes according to baseline NT-proBNP level in the prespecified analysis population (no atrial fibrillation/flutter at baseline) enrolled as an outpatient (a) and an inpatient (c); all outpatients (including patients with atrial fibrillation/flutter at baseline) are shown in b) and all inpatients (including patients with atrial fibrillation/flutter at baseline) are shown in (d). Solid black line = continuous hazard ratio; interrupted black lines = 95% confidence interval. Horizontal solid brown line = unity (hazard ratio =1). A hazard ratio of less than 1 indicates a benefit of omecamtiv mecarbil over placebo.

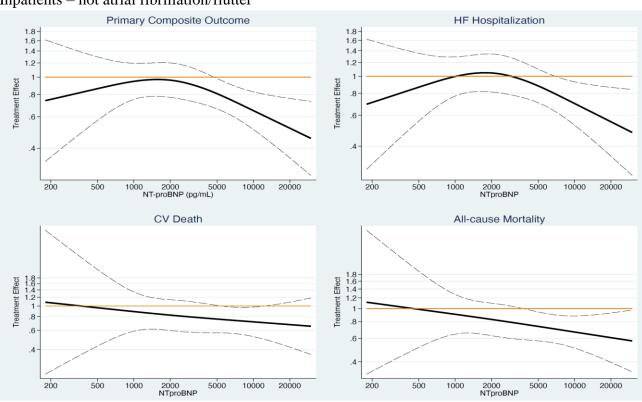
a) Outpatients - not atrial fibrillation/flutter



b) All outpatients, irrespective of heart rhythm



c) Inpatients – not atrial fibrillation/flutter



d) All inpatients, irrespective of heart rhythm

