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SUPPLEMENTARY DATA

Table 1 of the supplementary data

Registries included in the study

Registry	Inclusion period	Number of patients
Álvaro Cunqueiro Hospital, Vigo[1]	January 2010 to January 2016	1644
University Clinic Hospital, Santiago de Compostela[2]	November 2003 to October 2017	2079
San Juan University Hospital, Alicante[3]	January 2010 to December 2017	555
University Clinic Hospital, València[4]	October 2002 to March 2008	513
Joan XXIII University Hospital, Tarragona[5]	December 2009 to December 2012	300
Ramón y Cajal Hospital, Madrid[6]	September 2013 to December 2015	106
Bellvitge University Hospital, Barcelona[7]	January 2010 to May 2013	206
Multicenter ACHILLES registry[8]	February 2014 to December 2015	431
Vall d'Hebron University Hospital, Barcelona[9]	January 2010 to April 2017	647
La Princesa University Hospital, Madrid[*]	January 2010 to November 2017	258
Multicenter LONGEVO registry[10]	March 2016 to September 2016	472

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[3] Cordero A, López-Palop R, Carrillo P, et al. Prevalence and postdischarge incidence of malignancies in patients with acute coronary syndrome. *Rev Esp Cardiol*. 2018;71:267–273.

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[10] Alegre O, Formiga F, López-Palop R, et al. An easy assessment of frailty at baseline independently predicts prognosis in very elderly patients with acute coronary syndromes. *J Am Med Dir Assoc.* 2018;19:296–303.

* Data not published

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Table 2 of the supplementary data

Variables included in the creation of the propensity score

Age
Sex
Smoking
Hypertension
Hypercholesterolemia
Prior myocardial infarction
Prior percutaneous coronary intervention
Prior coronary surgery
Admission systolic blood pressure
Admission heart rate
Killip class on admission
ST-segment deviation
Troponin elevation
Diabetes
Chronic lung disease
Glomerular filtration rate
Hemoglobin
Prior stroke
Peripheral artery disease

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Table 3 of the supplementary data

Effect of revascularization at admission on mortality

	Imputed			Nonimputed		
Covariates	**HR**	**95%CI**	***P***	**HR**	**95%CI**	***P***
Age (per 5 years)	1.31	1.24-1.39	.000	1.30	1.23-1.39	.001
Male sex	1.21	1.06-1.38	.004	1.24	1.07-1.43	.004
Prior myocardial infarction	1.05	0.91-1.21	.468	1.02	0.88-1.19	.776
Prior admission for heart failure	1.20	1.02-1.41	.029	1.09	0.91-1.31	.331
Admission systolic blood pressure (per 10 mmHg)	0.91	0.88-0.93	.001	0.90	0.88-0.92	.000
Admission heart rate (per 20 bpm)	1.07	1.01-1.14	.032	1.08	1.01-1.15	.028
Admission Killip class ≥ 2	2.44	2.12-2.80	.001	2.49	2.14-2.91	.001
ST-segment deviation	1.50	1.31-1.70	.001	1.50	1.30-1.72	.001
Troponin elevation	1.37	1.10-1.70	.005	1.39	1.09-1.76	.007
Left ventricular ejection fraction ≤ 40%	1.00			1.00		
Left ventricular ejection fraction 41%-49%	0.81	0.65-1.02	.068	0.81	0.63-1.05	.110
Left ventricular ejection fraction ≥ 50%	0.75	0.65-0.87	.001	0.74	0.63-0.87	.001
Revascularization at index admission	**0.61**	**0.53-0.69**	**.001**	**0.63**	**0.55-0.72**	**.001**
Comorbidity burden, per comorbidity	1.34	1.27-1.41	.001	1.36	1.29-1.43	.001
N	**7211**			**5964**		

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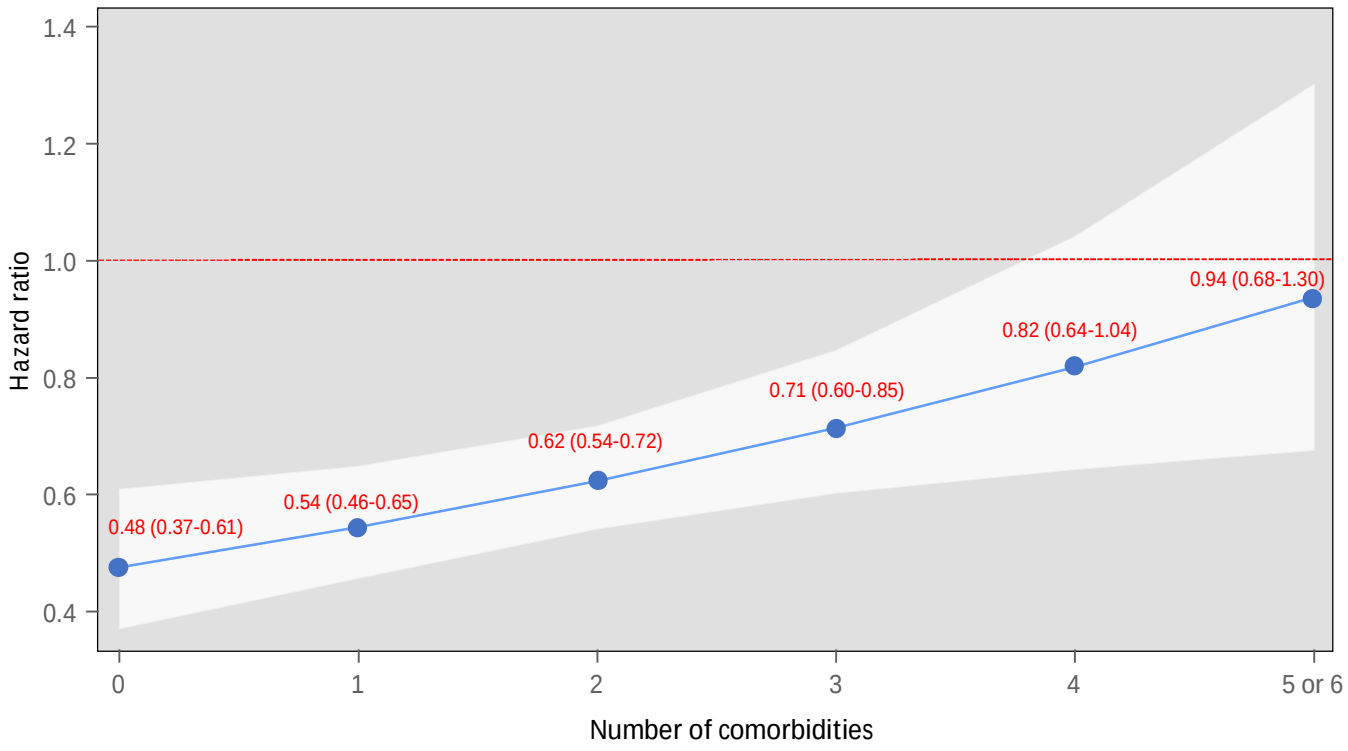
Figure 1 of the supplementary data

Protective effect of revascularization on all-cause mortality according to the number of comorbidities. N = 5964; *P* for interaction =.0079; C-statistic = 0.7858. Model adjusted by base model covariates and using nonimputed data.