

SUPPLEMENTARY DATA

Table 1 of the supplementary data. Inclusion criteria

Remain comatose after ROSC (Glasgow Coma Scale score ≤ 8)
OHCA in all rhythms: shockable and nonshockable
Prior exclusion of an obvious noncardiac cause of the cardiac arrest (head CT scan and transthoracic echocardiogram)
Nondiagnostic electrocardiogram after ROSC (neither ST-segment elevation nor left bundle branch block)
Absence of exclusion criteria

CT, computed tomography; OHCA, out of hospital cardiac arrest; ROSC, recovery of spontaneous circulation.

Table 2 of the supplementary data. Exclusion criteria

Age < 18 y
Pregnant women or women of childbearing age unless they have a negative pregnancy test
Time to ROSC > 60 min
Noncardiac etiology of the comatose state: drug overdose, head injury, or stroke
Signs of STEMI or left bundle branch block on the ECG
Hemodynamic instability (refractory cardiogenic shock despite vasoactive drugs or refractory arrhythmias)
Known coagulopathy or bleeding
Refusal to participate in the study by the next of kin

ECG, electrocardiogram; STEMI, ST-segment elevation myocardial infarction.

Table 3 of the supplementary data. Primary outcome measures

Survival with good neurological outcome for activities of daily life (CPC 1-2)
MACE: death, myocardial infarction, clinically evident bleeding (BARC > 2) or ventricular arrhythmias

BARC, Bleeding Academic Research Consortium; CPC, cerebral performance category; MACE, major adverse cardiac events.

Table 4 of the supplementary data. Secondary outcome measures

Hospital survival
Neurological outcome assessed by the CPC scale
Left ventricular ejection fraction
Infarction size defined by the maximum CPK and troponin
Vascular complications: fistula, pseudoaneurysm, or clinically evident hematoma (BARC \geq 2)
Clinically evident hemorrhage: BARC \geq 2
Sustained ventricular arrhythmias or requirement of cardioversion
Acute renal failure: creatinine increase of > 0.5 mg/dL or $> 50\%$ baseline
Reinfarction: according to the universal definition of acute myocardial infarction
Stent thrombosis defined by the ARC
Infections: high inflammatory markers (CRP, procalcitonin, leukocytosis with neutrophilia) requiring antibiotics
Length of intubation
Length of hospital stay

ARC, Academic Research Consortium; BARC, Bleeding Academic Research Consortium; CPC, cerebral performance category; CPK, creatine phosphokinase; CRP, C-reactive protein.

Figure 1 of the supplementary data Flow chart of the COUPE trial. CT, computed tomography; LVEF, left ventricular ejection fraction; ROSC, return of spontaneous circulation.

