

Supplementary Appendix

This appendix has been provided by the authors to give readers additional information about their work.

Supplement to: Lindenauer PK, Pekow P, Wang K, Mamdi DK, Gutierrez B, Benjamin EM. Perioperative beta-blocker therapy and mortality after major noncardiac surgery. *N Engl J Med* 2005;353:349-61.

Supplemental Table. In-Hospital Mortality and Numbers Needed to Treat [Harm] Among Patients in the Complete Study Cohort Who Did Not Receive Perioperative Beta Blockade by Revised Cardiac Risk Index (RCRI), including insulin use in identifying diabetes

RCRI		Mortality Among Untreated %	OR (95% CI)	NNT [NNH] (95% CI)
0	All patients	0.96	1.46 (1.36, 1.57)	[230] ([297], [185])
	HTN	0.88	0.93 (0.77, 1.13)	1628 (488, [899])
1	All patients	2.18	1.18 (1.08, 1.29)	[263] ([597], [163])
	DM	3.85	1.24 (1.12, 1.37)	[114] ([234], [73])
	IHD	1.56	1.16 (0.97, 1.39)	[406] (2035, [167])
	CVD	6.74	1.05 (0.79, 1.39)	[326] (75, [42])
	CRI	4.96	1.01 (0.72, 1.42)	[2651] (74, [52])
	High Risk Surgery	1.40	1.01 (0.88, 1.15)	[14517] (594, [485])
2	All patients	5.17	0.95 (0.85, 1.06)	422 (136, [319])
3	All patients	7.22	0.77 (0.67, 0.88)	63 (44, 125)
4	All patients	10.41	0.62 (0.52, 0.73)	27 (21, 39)

Supplemental Figure. Adjusted OR (95 percent CI) of In-Hospital Mortality Associated with Perioperative Beta Blocker Therapy Among Patients Undergoing Major Noncardiac Surgery Stratified by Revised Cardiac Index (RCRI) Score in the Entire Study Cohort

Legend

HTN (Hypertension), DM* (Diabetes Mellitus), IHD (ischemic Heart Disease), CRI (Chronic Renal Insufficiency), CVD (Cerebrovascular Disease)

*Including insulin use in identifying diabetes

