Appendix A

Table A.1

Univariate and multivariable logistic regression to identify the pre-TAVI determinants for post-TAVI global longitudinal strain ≥ -14 .

| Effect | Unit | Univariate analysis | | Multivariable analysis | |
|-----------------------------------|------|---------------------|----------|------------------------|--------|
| | | Estimate (95% CI) | Р | Estimate (95% CI) | Р |
| NT-proBNP (pg/mL) | 2000 | 1.89 (1.21–2.96) | 0.0055 | 0.88 (0.58–1.37) | 0.58 |
| LV mass index (g/m ²) | 40 | 1.67 (1.09–2.55) | 0.0173 | 1.37 (0.75–2.51) | 0.31 |
| LVEF (%) | 10 | 0.39 (0.26–0.58) | < 0.0001 | 0.69 (0.42–1.16) | 0.16 |
| SVi (mL/m²) | 12 | 0.49 (0.33–0.72) | 0.0003 | 0.80 (0.50–1.28) | 0.35 |
| GWE (mmHg%) | 5 | 0.38 (0.25–0.58) | < 0.0001 | 0.55 (0.34–0.91) | 0.0209 |
| GWI (mmHg%) | 600 | 0.24 (0.14–0.40) | < 0.0001 | | |
| GCW (mmHg%) | 600 | 0.28 (0.18–0.45) | < 0.0001 | 0.50 (0.27–0.94) | 0.0306 |

CI: confidence interval; GCW: global constructive work; GWE: global work efficiency; GWI: global work index; LV: left ventricular; LVEF: left ventricular ejection fraction; NT-proBNP: N-terminal prohormone of brain natriuretic peptide; SVi: stroke volume index; TAVI: transcatheter aortic valve implantation.

Table A.2

Multivariable logistic regression to identify the pre-TAVI determinants for post-TAVI global longitudinal strain ≥ -14 , in the subpopulation with pre-TAVI global longitudinal strain < -14.

| Effect | Unit | Estimate (95% CI) | Р |
|-----------------------------------|------|-------------------|--------|
| NT-proBNP (pg/mL) | 2000 | 0.87 (0.16–4.74) | 0.88 |
| LV mass index (g/m ²) | 40 | 2.03 (0.73–5.60) | 0.17 |
| LVEF (%) | 10 | 0.76 (0.32–1.80) | 0.53 |
| SVi (mL/m ²) | 12 | 0.82 (0.39–1.75) | 0.61 |
| GWE (mmHg%) | 5 | 0.22 (0.06–0.81) | 0.0225 |
| GWI (mmHg%) | 600 | 4.31 (0.25–72) | 0.31 |
| GCW (mmHg%) | 600 | 0.29 (0.02–3.53) | 0.33 |

CI: confidence interval; GCW: global constructive work; GWE: global work efficiency; GWI: global work index; LV: left ventricular; LVEF: left ventricular ejection fraction; NT-proBNP: N-terminal prohormone of brain natriuretic peptide; SVi: stroke volume index; TAVI: transcatheter aortic valve implantation.

Table A.3

Univariate logistic regression to identify the pre-TAVI determinants for post-TAVI global longitudinal strain deterioration.

| Effect | Standardized estimate | Р |
|---------------------|-----------------------|--------|
| GLS | -0.311 | 0.0004 |
| GWI | -0.212 | 0.0182 |
| GCW | -0.207 | 0.0208 |
| LAVi | -0.168 | 0.07 |
| TAPSE | -0.155 | 0.21 |
| LVEF | -0.145 | 0.11 |
| NT-proBNP | 0.108 | 0.26 |
| SVi | -0.107 | 0.24 |
| Atrial fibrillation | 0.099 | 0.28 |
| Sex | -0.078 | 0.39 |
| AV mean gradient | -0.074 | 0.41 |
| CAD | 0.040 | 0.66 |
| GWE | -0.034 | 0.71 |
| GWW | -0.030 | 0.74 |
| Diabetes | 0.028 | 0.76 |
| E/E' | -0.024 | 0.81 |
| LV mass index | -0.024 | 0.80 |
| V _{max} TR | -0.019 | 0.86 |
| Age | 0.017 | 0.85 |
| IVS diameter | -0.012 | 0.90 |

AV: aortic valve; GCW: global constructive work; GLS: global longitudinal strain; GWE: global work efficiency; GWI: global work index; GWW: global wasted work; IVS: interventricular septum; LAVi: left atrium volume index; LV: left ventricular; LVEF: left ventricular ejection fraction; NT-proBNP: Nterminal prohormone of brain natriuretic peptide; SVi: stroke volume index; TAVI: transcatheter aortic valve implantation; TAPSE: tricuspid annular plane systolic excursion; V_{max} TR: maximal tricuspid regurgitation velocity.

Table A.4

Univariate and multivariable logistic regression to identify the pre-TAVI determinants for New York Heart Association class III and IV symptoms.

| Effect | Unit | Univariate analysis | | Multivariable analysis | |
|-------------------|------|---------------------|--------|------------------------|------|
| | | Estimate (95% CI) | Р | Estimate (95% CI) | Р |
| NT-proBNP (pg/mL) | 2000 | 1.81 (1.20–2.72) | 0.0046 | 1.53 (0.95–2.46) | 0.08 |
| LVEF (%) | 10 | 0.73 (0.55–0.97) | 0.0278 | 1.06 (0.70–1.60) | 0.79 |
| GLS (% | 3 | 1.42 (1.06–1.91) | 0.0192 | 1.13 (0.59–2.13) | 0.72 |
| GWI (mmHg%) | 600 | 0.69 (0.50–0.95) | 0.0238 | | |
| GCW (mmHg%) | 600 | 0.67 (0.49–0.91) | 0.0100 | 0.84 (0.45–1.57) | 0.59 |

CI: confidence interval; GCW: global constructive work; GLS: global longitudinal strain; GWI: global work index; LVEF: left ventricular ejection fraction; NT-proBNP: N-terminal prohormone of brain natriuretic peptide; TAVI: transcatheter aortic valve implantation.

Fig. A.1. Evolution of global work efficiency (GWE) after transcatheter aortic valve implantation (TAVI) based on pre-TAVI global longitudinal strain (GLS) stratification. Horizontal grey line corresponds to mean values in healthy population [14]. Relative change, defined as (post-TAVI measure minus pre-TAVI measure) divided by pre-TAVI measure, was statistically significant in patients with GLS < -14%: *P* < 0.0001.



Fig. A.2. Evolution of global wasted work (GWW) after transcatheter aortic valve implantation (TAVI) based on pre-TAVI global longitudinal strain (GLS) stratification. Horizontal grey lines correspond to mean values and standard derivation in healthy population [15]. Relative change, defined as (post-TAVI measure minus pre-TAVI measure) divided by pre-TAVI measure, was statistically not significant in both subgroups (GLS < -14% or GLS $\ge -14\%$).



Fig. A.3. Evolution of global work index (GWI) after transcatheter aortic valve implantation (TAVI) based on pre-TAVI New York Heart Association (NYHA) stratification. Horizontal grey lines correspond to mean values and standard derivation in healthy population [15]. Relative change, defined as (post-TAVI measure minus pre-TAVI measure) divided by pre-TAVI measure, was statistically significant in both subgroups (NYHA class I or II versus NYHA class III or IV) (P < 0.0001), without significant heterogeneity across subgroups (P value for interaction = 0.162).



Fig. A.4. Evolution of global constructive work (GCW) after transcatheter aortic valve implantation (TAVI) based on pre-TAVI New York Heart Association (NYHA) stratification. Horizontal grey lines correspond to mean values and standard derivation in healthy population [15]. Relative change, defined as (post-TAVI measure minus pre-TAVI measure) divided by pre-TAVI measure, was statistically significant in both subgroups (NYHA class I or II versus NYHA class III or IV) (P < 0.0001), without significant heterogeneity across subgroups (P value for interaction = 0.138).



Fig. A.5. Evolution of global work efficiency (GWE) after transcatheter aortic valve implantation (TAVI) based on pre-TAVI New York Heart Association (NYHA) stratification. Horizontal grey line corresponds to mean values in healthy population [15]. Relative change, defined as (post-TAVI measure minus pre-TAVI measure) divided by pre-TAVI measure, was statistically significant only in patients with pre-TAVI NYHA class I or II: P = 0.0132.



Fig. A.6. Evolution of global wasted work (GWW) after transcatheter aortic valve implantation (TAVI) based on pre-TAVI New York Heart Association (NYHA) stratification. Horizontal grey lines correspond to mean values and standard derivation in healthy population [15]. Relative change, defined as (post-TAVI measure minus pre-TAVI measure) divided by pre-TAVI measure, was not statistically significant in both subgroups (NYHA class I or II versus NYHA class III or IV).

