

Table S1. Causes of Death.

	Everolimus	CNI
Year 1	Graft failure Pleural hemorrhage	Cerebral accident Sepsis Cardiac arrest
Years 2–3	Adenocarcinoma	Malignancy Sudden death Pulmonary cancer Graft failure
Years 4 to year 5–7 visit	Gastrointestinal bleeding Graft failure	Sudden death Cerebral bleeding

Table S2. Laboratory Data at Year 5–7 Visit (Safety Population).

	Everolimus (n = 48)	CNI (n = 47)
Total cholesterol, mmol/L	5.1 (1.4)	4.8 (1.0)
LDL-cholesterol, mmol/L	2.8 (0.9)	2.6 (0.8)
HDL-cholesterol	1.5 (0.6)	1.6 (0.6)
Triglycerides, mmol/L	2.2 (1.6)	2.0 (1.1)
HbA1c, %	5.8 (0.8)	6.1 (1.2)
Leucocytes, x10 ⁹ /L	8.5 (12.0)	7.0 (2.7)
Platelets, x10 ⁹ /L	236 (91)	225 (75)
Hemoglobin, g/dL	14.0 (1.8)	13.8 (1.6)
Alanine aminotransferase, IU/L	27 (11)	30 (24)
Aspartate aminotransferase, IU/L	29 (7)	28 (17)
C-reactive protein, mg/L	5.4 (6.2)	5.3 (9.1)
Blood/plasma albumin, g/L	40 (4)	41 (3)
NT-proBNP, pmol/L, median (range)	35 (6,1762)	33 (4,306)
Troponin, ng/mL	21.0 (35.7)	17.1 (13.0)

Values are shown as mean (SD) unless otherwise stated

CNI, calcineurin inhibitor; HbA1c, glycated hemoglobin; HDL, high-density lipoprotein; LDL, low-density lipoprotein; NT-proBNP, N-terminal pro b-type natriuretic peptide.

Figure S1. Study design. ATG, antithymocyte globulin; CsA, cyclosporine; EVR, everolimus; IVUS, intravascular ultrasound; MMF, mycophenolate mofetil; tx, transplantation

