**SUPPLEMENTARY MATERIAL**

**Supplementary Table 1. Definition of narrow SMQ “cardiac failure”**

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| Preferred terms of narrow SMQ “cardiac failure”: |
| Acute pulmonary edema; Cardiac asthma; Cardiac failure; Cardiac failure, acute; Cardiac failure, chronic; Cardiac failure, congestive; Cardiac failure, High output; Cardiogenic shock; Cor pulmonale; Cor pulmonale, acute; Cor pulmonale, chronic; Hepatic congestion; Low cardiac output syndrome; Neonatal cardiac failure; Pulmonary oedema neonatal; Ejection fraction decreased; cardiopulmonary failure; left ventricular failure; pulmonary oedema; right ventricular failure; Hepatojugular reflux; Ventricular failure, Acute left ventricular failure, Acute right ventricular failure, Chronic left ventricular failure, Chronic right ventricular failure, Cardiorenal syndrome, Obstructive shock, Radiation associated cardiac failure |

**Supplementary Figure 1. Risk of the outcomes in patients with predicted preserved and predicted mid-rage/reduced ejection fraction and in those without history of heart failure by treatment arm.**

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\* Excluding fatal stroke. The Cox proportional hazard model was adjusted for age, sex, BMI, HbA1c, eGFR and geographical region. Predicted HFrEF/HFmrEF and HFpEF subtypes were based on the following variables: age, sex, mean arterial pressure, heart rate, BMI, eGFR, history of ischemic heart disease, atrial fibrillation, COPD, diabetes, hypertension, anemia, history of malignancies, valvular disease, use of renin–angiotensin-aldosterone system inhibitors, beta-blockers, diuretics, digoxin and device therapy.