

Table S5. Association of the concomitant use of CYP3A4/P-gp inhibitors or inducers with thromboembolic events among patients using dabigatran.

DDI	Cases (n=471), no. (%)	Controls (n=2351), no. (%)	Univariate		Model 1 ^a		Model 2 ^b		Model 3 ^c		Model 4 ^d	
			OR (95% CI)	<i>P</i> value	AOR (95% CI)	<i>P</i> value	AOR (95% CI)	<i>P</i> value	AOR (95% CI)	<i>P</i> value	AOR (95% CI)	<i>P</i> value
None DDI	286 (60.7)	1404 (59.7)	1		1		1		1		1	
CYP3A4/P-gp Inhibitors	110 (23.4)	592 (25.2)	0.90 (0.70-1.14)	0.376	0.85 (0.66-1.08)	0.185	0.89 (0.69-1.14)	0.340	0.83 (0.65-1.07)	0.155	0.87 (0.68-1.12)	0.292
CYP3A4/P-gp Inducers	58 (12.3)	248 (10.5)	1.19 (0.96-1.64)	0.295	1.16 (0.84-1.61)	0.378	1.15 (0.83-1.60)	0.414	1.10 (0.79-1.54)	0.567	1.11 (0.79-1.55)	0.555
Both	17 (3.6)	107 (4.6)	0.74 (0.43-1.27)	0.278	0.72 (0.42-1.23)	0.224	0.72 (0.42-1.24)	0.238	0.68 (0.39-1.18)	0.171	0.69 (0.40-1.19)	0.177

AOR: adjusted odds ratio; CI: confidence interval; CYP3A4: cytochrome P450 3A4; DDI: drug-drug interaction; OR: odds ratio

^a Adjusted for age, sex, income and comorbidities (hypertension, congestive heart failure, diabetes mellitus, chronic obstructive pulmonary disease [COPD], malignancy, dyslipidaemia, peripheral arterial occlusive disease [PAOD]).

^b Adjusted for age, sex, income and high risk of stroke.

^c Adjusted for age, sex, income, comorbidities (hypertension, congestive heart failure, diabetes mellitus, COPD, malignancy, dyslipidaemia, PAOD), medication use (warfarin, antiplatelet, calcium channel blockers, antihypertensives, hypoglycaemic agents, insulin, lipid-lowering agents, non-steroid anti-inflammatory drugs, proton pump inhibitors and corticosteroid).

^d Adjusted for age, sex, income, high risk of stroke, medication use (warfarin, antiplatelet, calcium channel blockers, antihypertensives, hypoglycaemic agents, insulin, lipid-lowering agents, non-steroid anti-inflammatory drugs, proton pump inhibitors and corticosteroids).