

## Supplement

**Table S1**

Multivariate analyses after removing subjects with a known cardiac ejection fraction of  $\leq 45\%$  (n=224 included subjects)

Variable	Parameter Estimate (SE)	p-value
<b>Change in hospitalization rate</b>		
Age	-0.008 (0.009)	0.389
CSA secondary to cardiac cause $\pm$ CSB <sup>a</sup>	0.318 (0.428)	0.458
CSA secondary to opioids/multiple/other <sup>a</sup>	0.302 (0.355)	0.396
Full adherence to ASV at 1 month <sup>b</sup>	0.033 (0.252)	0.897
<b>Change in rate of Emergency Department visits</b>		
Age	-0.012 (0.011)	0.270
CSA secondary to cardiac cause $\pm$ CSB <sup>a</sup>	0.064 (0.525)	0.904
CSA secondary to opioids/multiple/other <sup>a</sup>	0.827 (0.436)	0.059
Full adherence to ASV at 1 month <sup>b</sup>	-0.204 (0.309)	0.510
<b>Change in rate of outpatient visits<sup>c</sup></b>		
Age	1.780 (1.637)	0.288
CSA secondary to cardiac cause $\pm$ CSB <sup>a</sup>	187.778 (67.620)	0.010*
CSA secondary to opioids/multiple/other <sup>a</sup>	17.928 (128.812)	0.890
Full adherence to ASV at 1 month <sup>b</sup>	28.267 (50.812)	0.583
<b>Change in rate of prescribed medications</b>		
Age	-0.067 (0.067)	0.314
CSA secondary to cardiac cause $\pm$ CSB <sup>a</sup>	1.156 (3.193)	0.718

CSA secondary to opioids/multiple/other <sup>a</sup>	-0.639 (2.650)	0.810
Full adherence to ASV at 1 month <sup>b</sup>	1.802 (1.881)	0.339
<b>Mortality post-ASV</b>	<b>Hazard Ratio (CI)</b>	<b>p-value</b>
Age	1.07 (1.05, 1.10)	<0.01*
CSA secondary to cardiac cause ± CSB <sup>a</sup>	1.87 (0.81, 4.30)	0.141
CSA secondary to opioids/multiple/other <sup>a</sup>	1.79 (0.81, 3.97)	0.153
Full adherence to ASV at 1 month <sup>b</sup>	0.71 (0.41, 1.23)	0.223

\*significant value

<sup>a</sup>versus TECSA

<sup>b</sup>versus partial/no/unknown adherence

<sup>c</sup>In the 33 patients in whom data regarding outpatient visits pre- and post-ASV was extracted

**Abbreviations:** ASV, adaptive servoventilator; CI=confidence intervals; CSA, central sleep apnoea; CSB, Cheyne-Stokes breathing; SE, standard error; TECSA=treatment-emergent central sleep apnoea