Table S5. Cox regression analyses of valine as predictor of 1-year mortality in AHF patients.

	HR (95% CI) per 1-SD	**p-value**	**Event/N**
Base model	0.73 (0.59-0.90)	**0.003**	112/303
Model 1	0.73 (0.59-0.89)	**0.002**	112/303
Model 2	0.73 (0.60-0.90)	**0.003**	112/303
Model 3	0.74 (0.60-0.91)	**0.004**	112/303
Model 4	0.73 (0.59-0.89)	**0.002**	112/303
Model 5	0.74 (0.61-0.90)	**0.003**	117/314
Model 6	0.75 (0.61-0.91)	**0.003**	117/314

Valine (μmol/L) was log-transformed before Cox regression analysis.

Base model: Adjusted for age, sex, BMI, MAP, eGFR, BUN, CRP, NT-proBNP, hemoglobin, ALT, albumin, and total cholesterol.

Model 1: Base model with LDL-cholesterol instead of total cholesterol.

Model 2: Base model with signs* of venous volume overload instead of total cholesterol.

Model 3: Base model with previous ß-blocker use instead of total cholesterol.

Model 4: Base model with previous ACEI use instead of total cholesterol.

Model 5: Base model without albumin.

Model 6: Base model with signs* of venous volume overlaod instead of albumin.

*Signs include any of the following: peripheral edema, enlarged liver, ascites, or jugular venous distension.

P-values of < 0.05 were considered significant and are depicted in bold.

ACEI: angiotensin-converting-enzyme inhibitor; ALT, alanine aminotransferase; BMI, body mass index; BUN, blood urea nitrogen; CRP, C-reactive protein; eGFR, estimated glomerular filtration rate; HR, hazard ratio; MAP, mean arterial pressure; N, number of observations; NT-proBNP, N-terminal pro-brain natriuretic peptide.