

### Supplementary Materials

**Table S1.** Full list of inclusion, exclusion and exit criteria of SMARTool clinical study.

<b>Inclusion criteria</b>
1) Male and female subjects, aged 48-82 years
2) Caucasian population
3) Submitted to CCTA for suspected CHD between 2009 and 2012 (in the context of EVINCI and ARTreat FPVII studies) at the Hospitals reported in "SMARTool Clinical Center" document and satisfying the eligibility criteria reported above
4) Submitted to clinical follow-up in the last 6 months to verify stable clinical conditions and documented CHD or persistent intermediate/high probability of CHD
5) Signed informed consents (clinical and genetic)
<b>Exclusion criteria</b>
1) Multi-vessel severe disease (3 vessels and/or LM disease with >90% stenosis)
2) Severe coronary calcification (CAC score > 600)
3) Having undergone surgical procedures related to heart diseases (valve replacement, CRT or CRTD treatment, any surgery of the heart or arteries)
4) Documented MACE at history (myocardial infarction, severe heart failure, recurrent angina) in the last 6 months with/without revascularization
5) Documented severe peripheral vascular disease (carotid, femoral)
6) Surgery of carotid and/or peripheral arteries or cerebral ischemic attack
7) History/surgery of Abdominal Aortic Aneurysm(AAA)
8) Severe Heart failure (NYHA Class III-IV)
9) LV dysfunction (left ventricle EF <40%)
10) Atrial fibrillation
11) Lack of written informed consent (clinical consent and/or genetic consent)
12) Pregnancy (evaluated by urine test) and breastfeeding
13) Active Cancer
14) Asthma
15) Cardiomyopathy or congenital heart disease
16) Significant valvular disease (hemodynamically significant valvular stenosis or insufficiency by echoDoppler)
17) Renal dysfunction (creatinine > 1.3 mg/dL)
18) Chronic Kidney Disease (eGFR < 30 ml/min/1.73 m <sup>2</sup> )
19) Hepatic failure (at least 3 of the following: albumin < 3.5 g/dL; prolonged prothrombin time-PT; jaundice; ascites)
20) Waldenström disease
21) Multiple myeloma
22) Autoimmune/Acute inflammatory disease
23) Previous severe adverse reaction to iodine contrast agent
24) Positivity at blood tests for HIV, Hepatitis B and C (CRF number 1-clinical evaluation)
<b>Exit criteria</b>
A) Informed consent retired by the patient (genetic or clinical)
B) Adverse events to contrast medium during CCTA

**Table S2.** Bivariate correlations between the values of the phenotypic polarization ratio. RFI CCR5/CD11b and: a) the expression levels of markers (on all CD14<sup>++/+</sup> monocytes and on subset Mon1), b) the receptor expression ratios (among the subsets Mon1/Mon3 and Mon2/Mon3), positively and significantly associated with DCV.

<b>all CD14<sup>++/+</sup> monocytes</b>	<b>R</b>	<b>P-value</b>
%+ CCR5	0.462	0.0002*
RFI CCR5	0.783	< 0.0001*
RFI CCR2	0.505	< 0.0001*
RFI CX3CR1	0.705	< 0.0001*
RFI CD163	0.305	0.0167*
<b>Subset Mon1</b>	<b>R</b>	<b>P-value</b>
%+ CCR5	0.422	0.0007*
%+ CCR2	0.466	0.0002*
RFI CCR2	0.507	< 0.0001*
RFI CX3CR1	0.662	< 0.0001*
<b>Ratio Mon1/Mon3</b>	<b>R</b>	<b>P-value</b>
%+ CX3CR1	0.296	0.0207*
%+ CCR2	0.386	0.0021*
RFI HLA-DR	0.227	0.0791
RFI CD11b	-----	Ns
RFI CCR2	0.306	0.0164*
<b>Ratio Mon2/Mon3</b>	<b>R</b>	<b>P-value</b>
%+ CX3CR1	0.332	0.0090*
%+ CCR2	0.368	0.0035*
RFI HLA-DR	-----	Ns
RFI CCR2	0.374	0.0030*

\* $P < 0.05$  : statistically significant (by bivariate correlation analysis). Ns = not significant. %+ = percentage of positivity.  
RFI = Relative Fluorescence Intensity.