Eligibility Form: Prognostic Implications of Left Ventricular Strain by Speckle-Tracking Echocardiography in Population-based Studies

1. Reference details		
Ref ID		
Reference citation		
First author		
Year of publication		
Title of the paper		
Type of publication	Paper ☐	Abstract ☐
Assessor's identifier	1 ☐	2 ☐
Date		
Contact details of authors		

2. Study eligibility			
Inclusion of the study	Yes ☐	No ☐	Unclear ☐
Eligibility criteria	**Reason for exclusion (if excluded)**	Yes	No
Longitudinal (cohort) study	• Ineligible study design e.g. Cross-sectional, case-control, or CRT	☐	☐
General population, community/population-based samples/ unselected community-dwelling individuals	• Ineligible population e.g. patients with established CVD, not population-based, unrepresentative samples of the general population	☐	☐
LV strain measured by STE	• Ineligible exposure e.g. measured by MRI	☐	☐
	• Ineligible outcome (Different from outcomes considered in this review e.g. LV remodelling)	☐	☐
	• Duplicate	☐	☐
	• Reviews, abstracts, letters, or conference proceeding	☐	☐
	• Other (please specify): e.g. not in English or in a peer reviewed journal	☐	☐
Notes:			

Additional information
Notes:

DO NOT PROCEED IF PAPER EXCLUDED FROM REVIEW

Data Extraction Form: Prognostic Implications of Left Ventricular Strain by Speckle-Tracking Echocardiography in Population-based Studies

3. Study details		
Ref ID		
Study (cohort) name		
Study design	Longitudinal (cohort) study ☐	
Region/country		
Sample size		
Mean (range) age	Mean ± SD :	Range (IQR):
Sex	Male, n (%):	Female, n (%):
Ethnicity		
Follow-up duration		
Clinical variables (n, %)		
• Hypertension		
• Diabetes mellitus		
• Dyslipidaemia		
• Smoking status		
• Known CVD		
Dose the study include/mention a statement regarding the ethical approval, or adherence to an appropriate standard (such as the declaration of Helsinki)? Yes ☐ No ☐		

4. Exposure details			
Hardware		Software	
Procedure:	2D-STE ☐	3D-STE ☐	
Measured LV strain (direction)		Images obtained from	number of LV segments
Longitudinal: Yes ☐ No ☐			
Circumferential: Yes ☐ No ☐			
Radial: Yes ☐ No ☐			
Others (specify): Yes ☐ No ☐			
Number of sonographers used to perform the analysis:		Provide data on intra- or inter-observer variability or both?	Yes ☐ No ☐ Note:
Notes:			

5. Outcomes' details	
Type of outcomes used in this review	Outcomes reported in this study (n)
Primary outcome(s) All-cause mortality	

Secondary outcome (s) A. Composite **cardiovascular** (CV) end point includes: CV mortality, CHD events (MI, unstable angina, angina/ischemia requiring emergent hospitalization or revascularization), HF hospitalization, new onset AF, life threatening arrhythmia , recorded automatic implantable cardioverter defibrillator (AICD) shocks, stroke, transit ischemic attack, peripheral arterial disease with arterial revascularization procedure.	
B. Composite **cardiac** end point includes: CV mortality, CHD events, HF hospitalization, new onset AF, life threatening arrhythmia, recorded AICD shocks.	
Report an individual end point included in the composite cardiac or CV end point	Yes ☐ No ☐ List if yes:
Assessment of outcome	☐ independent blind assessment ☐ record linkage ☐ self-report ☐ others
Notes:	

6. Available number of participants		
		Number
Baseline sample size	Yes ☐ No ☐	
Excluded from the baseline	Yes ☐ No ☐ Reason if yes:	
Lost to follow-up	Yes ☐ No ☐	
Other losses	Yes ☐ No ☐	
Total number included in the analysis	Yes ☐ No ☐	
All subjects accounted for	Yes ☐ No ☐	
Notes:		

7. Statistical analysis		
Statistical method used	Cox proportional hazards regression Yes ☐ No ☐ Others if 'No':	
Analysis includes males and	Yes ☐ No ☐	

females	
Study reports results by sex	Yes ☐ No ☐
List all models used including unadjusted	

7. Results of the association of interest								
Exposure	Outcome	Group (M/F/All)	Total (n) included in the analysis	Events/non-events	Effect estimate	95% CI, SE, p	Unit	Adjustments (none if unadjusted)