### Supplementary appendix

Table S1 Distributions of variables with missing data comparing observed complete case data to results from pooling the datasets with imputed variables from multiple imputation

| Level/Unit                          | Mean | Number (%) with missing data | Complete case | Multiple imputation |
|-------------------------------------|------|-------------------------------|---------------|---------------------|
| BNP (Box-Cox transform) (pg/ml)     | Mean | 54 (28.1%)                    | 8.46          | 8.57                |
| Age (year)                          | Mean | 1 (0.5%)                      | 53            | 53                  |
| sex                                 | %    | 0 (0%)                        |               |                     |
| BMI (kg/m²)                         | Mean | 5 (2.6%)                      | 26            | 26                  |
| Creatinine (mmol/L)                 | Mean | 16 (8.3%)                     | 82.53         | 82.66               |
| Na+ (mmol/L)                        | Mean | 21 (10.9%)                    | 139.8         | 140.1               |
| Cl⁻ (mmol/L)                        | Mean | 22 (11.4%)                    | 102.8         | 103.5               |
| LBBB on EKG (%)                     | %    | 5 (2.6%)                      | 17.65%        | 18.65%              |
| QRS duration on EKG (mm)            | Mean | 11 (5.7%)                     | 124.2         | 125.3               |
| Hemoglobin (Hgb) (G/L)              | Mean | 27 (14.0%)                    | 147.8         | 146.6               |
Figure legends

Figure S1. The linear relationship between CMR-RVpGLS and major adverse cardiac events in patients with stage C or D heart failure with non-ischemic dilated cardiomyopathy during a 5-y follow-up.

Figure S2. ROC curves for the association of RVpGLS and major adverse cardiac events. The analysis reveals that the cutoff RVpGLS -8.5 (area under the curve: 0.698; sensitivity: 77.8%; specificity: 64%).