**Supplementary Table 1.** Illustration of application ofinformation provided by bioactive adrenomedullin (bio-ADM) and proenkephalin A 119-159 (penKid) in acute heart failure

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|  | **Peripheral oedema** | **Worsening renal function** |
| **Low bio-ADM** (<43 pg/mL) | n=311; 169 events (54.3%) |  |
| **High bio-ADM** (≥43 pg/mL) | n=198; 169 events (85.4%) |  |
| **Low penKid** (<100 pmol/L) |  | n=280; 24 events (8.6%) |
| **High penkid** (≥100 pmol/L) |  | n=221; 43 events (19.5%) |

All results are from the pooled cohort. Low and high levels are defined as previously proposed in literature: bio-ADM (≥43 pg/mL, 99th percentile)1 and penKid (≥100 pmol/L).2 Bio-ADM; bioactive adrenomedullin; penKid, proenkephalin A 119-159

**References**

1. Marino R, Struck J, Maisel AS, Magrini L, Bergmann A and Di Somma S. Plasma adrenomedullin is associated with short-term mortality and vasopressor requirement in patients admitted with sepsis. *Crit Care*. 2014;18:R34.

2. Marino R, Struck J, Hartmann O, Maisel AS, Rehfeldt M, Magrini L, Melander O, Bergmann A and Di Somma S. Diagnostic and short-term prognostic utility of plasma pro-enkephalin (pro-ENK) for acute kidney injury in patients admitted with sepsis in the emergency department. *Journal of nephrology*. 2015;28:717-24.