

## Online Supplement

### **The Neutrophil Lymphocyte Ratio as a Predictor of Acute Exacerbations Among Patients with COPD in Uganda**

Patricia Alupo, MBChB, MMED<sup>1</sup> Wincelous Katagira, MBChB, MMed<sup>1</sup> David Mukunya,<sup>2</sup> Paul Okimat, MSc<sup>3</sup> Vickram Tejwani, MD<sup>4</sup> Alex Kayongo, PhD<sup>1</sup> Joanitah Nalunjogi,<sup>1</sup> Nicole M. Robertson, MD<sup>5</sup> Rupert Jones, MD, PhD<sup>1,6</sup> John R. Hurst, PhD<sup>7</sup> Bruce Kirenga, MBChB, MMed, PhD\*<sup>1,2</sup> Trishul Siddharthan, MD\*<sup>8</sup>

*\*Joint senior authorship*

<sup>1</sup>Makerere University Lung Institute, Kampala, Uganda

<sup>2</sup>Department of Medicine, Makerere University College of Health Sciences, Kampala, Uganda

<sup>3</sup>Soroti District Local Government, Soroti, Uganda

<sup>4</sup>Respiratory Institute, Cleveland Clinic, Cleveland, Ohio, United States

<sup>5</sup>Department of Medicine, Johns Hopkins University School of Medicine, Baltimore, Maryland, United States

<sup>6</sup>Faculty of Health, University of Plymouth, Plymouth, United Kingdom

<sup>7</sup>UCL Respiratory, University College London, London, United Kingdom

<sup>8</sup>Division of Pulmonary, Critical Care and Sleep Medicine, University of Miami, Miami, Florida, United States

**Supplement Table 1.**

Multivariate analyses of associations with risk of COPD exacerbation using cox-proportional hazards model

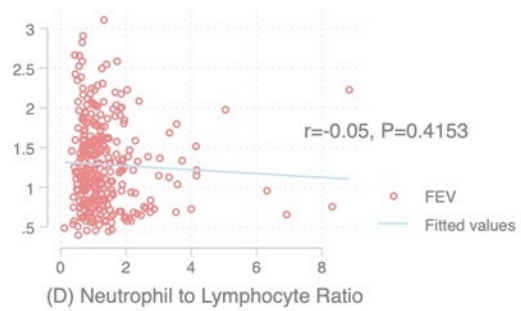
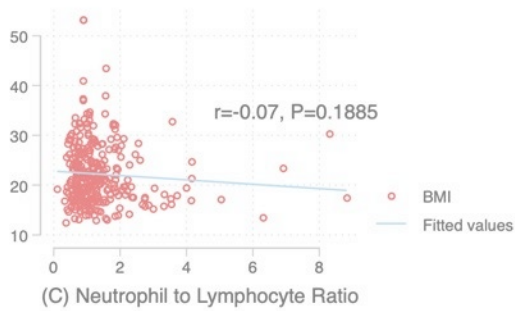
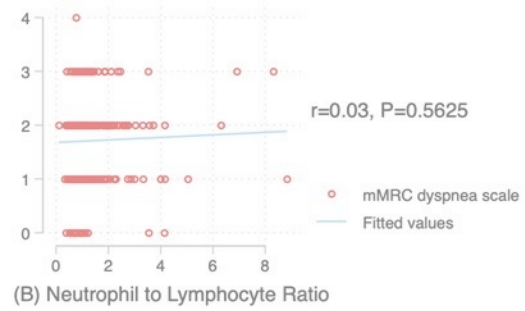
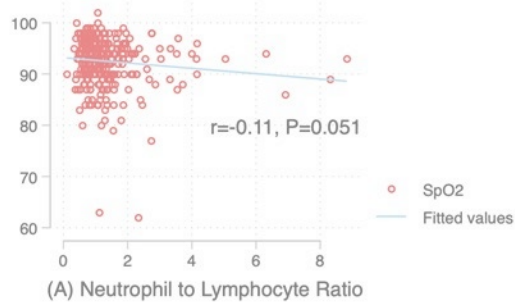
Variable	cHR <sup>1</sup> [95% CI]	P-value	aHR <sup>2</sup> [95% CI]	P-value
<b>Neutrophil lymphocyte ratio</b>				
<1.17	1		1	
≥1.17	2.96 [1.39, 6.33]	0.005	2.56 [1.02, 6.41]	0.044
<b>HIV status</b>				
Negative	1			
Positive	0.01 [0.39, 2.64]	0.976		
<b>BMI</b>				
Underweight	1			
Normal	0.85 [0.38, 1.89]	0.688		
Overweight	0.32 [0.07, 1.43]	0.135		
Obese	1.32 [0.46, 3.80]	0.608		
<b>Age in years</b>				
<60	1		1	
≥60	0.77 [0.38, 1.55]	0.459	0.65 [0.25, 1.74]	0.394
<b>Smoking status</b>				
Ever smoked	1		1	
Never smoked	1.30 [0.61, 2.77]	0.491	0.54[0.19, 1.56]	0.255
<b>History of Hypertension</b>				
No	1			
Yes	1.71 [0.79, 3.72]	0.174		
<b>Previous TB treatment</b>				
Yes	1			

No	1.10 [0.45, 2.67]	0.842		
<b>Sex</b>				
Male	1		1	
Female	1.81 [0.87, 3.78]	0.114	1.89 [0.64, 5.61]	0.252
<b>POSTBD-FEV</b>				
Mild >=80	1		1	
Moderate 50-79	0.67[0.22, 2.09]	0.494	0.43 [0.10, 1.81]	0.248
Severe 30-49	3.53[1.37, 9.10]	0.009	2.66 [0.80, 8.88]	0.111
Very severe <30	1.88 [0.47, 7.53]	0.371	2.48[0.48, 12.71]	0.277
<b>mMRC Dyspnea</b>				
1	1		1	
2 to 4	2.50 [1.09,5.71]	0.030	2.90 [1.11, 7.56]	0.030
<b>Exacerbations at baseline</b>				
No	1		1	
Yes	2.73 [1.56, 6.63]	0.002	1.89 [0.64, 5.61]	0.032

cHR<sup>1</sup>=Crude hazard ratio

aHR<sup>2</sup>=adjusted hazard ratio

**Supplement Figure 1:** correlation between neutrophil to Lymphocyte ratio (NLR) and clinical parameters at baseline. (A) NLR and SpO<sub>2</sub>, (B) NLR and mMRC, (C) NLR and BMI, (D) NLR and FEV<sub>1</sub>. NLR at baseline was slightly correlated with SpO<sub>2</sub>.



**Supplement Figure 2: Kaplan Meire survival graphs before and after stratification by neutrophil lymphocyte ratio.**



Supplementary figures 2a and 2b showing Kaplan Meire survival graphs before and after stratification by neutrophil lymphocyte ratio.

Ntlr=Neutrophil Lymphocyte ratio.