

Akronym (reference)	design	disease	n	years	criterion	comparison	result
<i>Total mortality</i>							
Heart & Soul (Pottala et al 2010)	cohort	stable CAD	956	5.9	total mortality	HS-Omega-3 Index ≥4.6% vs. <4.6%	HR 0.73; 95%CI, 0.56–0.94
Triumph (Harris et al, 2007)	cohort	recent MI	1144	2	total mortality	EPA in red cells tertiles	EPA < 0.25% total mortality 26% 0.25 < EPA ≤0.8% tot. mort.13% EPA > 0.80% total mortality 7%
Triumph (Abuannadi et al, 2010)	cohort	recent MI	1424	1	total mortality	HS-Omega-3 Index <4% vs. ≥4.0%	HR 2.0; 95 %CI 1.2 – 3.3
Racs* (von Schacky, 2014)	cohort	recent ACS	460	2	total mortality	HS-Omega-3 Index in quartiles	n.s.
SCD (Siscovick et al 1995)	case-control	SCD	82/108	0	SCD	red cell EPA+DHA in quartiles	OR 1.0 – 0.1 (95%CI 0.1-0.4) across quartiles
Phys Health (Albert et al, 2002)	case-control	SCD	84/182		SCD	whole blood EPA+DHA in quartiles	OR 1.0 – 0.1 (95%CI 0.02-0.48)
<i>Car. Morbidity</i> (Harris et al, 2007b)	case-control	ACS	94/94		ACS	whole blood EPA+DHA in quintiles	OR 1.0 – 0.2 (95%CI not reported) OR 0.67 (95%CI 0.46 to 0.98) per 1 standard deviation increase EPA+DHA
- (Block et al, 2008)	case-control	ACS	768/768		ACS	HS-Omega-3 Index in tertiles	OR 1.0 – 0.31 (95%CI 0.14–0.67) across tertiles
- (Park et al 2009)	case-control	ACS	50/50		ACS	HS-Omega-3 Index in tertiles	OR 1.0 – 0.08 (95%CI 0.02-0.38) across tertiles
- (Kim et al, 2010)	case-control	ACS	24/68		STEMI	HS-Omega-3 Index in quartiles	OR 6.38 (95%CI 1.02-39.85) -1.0 across quartiles

Abbreviations: Coronary artery disease: CAD; HR: hazard ratio; MI: myocardial infarction; EPA: eicosapentaenoic acid; ACS: acute coronary syndrome; SCD: sudden cardiac death; DHA: docosahexaenoic acid; OR: odds ratio; STEMI: ST-elevation myocardial infarction.

*No case estimate was reported in Racs. Therefore, by definition, it is unclear, whether the discriminatory power of the HS-Omega-3 Index was too small, or the study was too small to detect the discriminatory power.