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Regular acetaminophen use and blood pressure in people with hypertension The PATH-BP Trial

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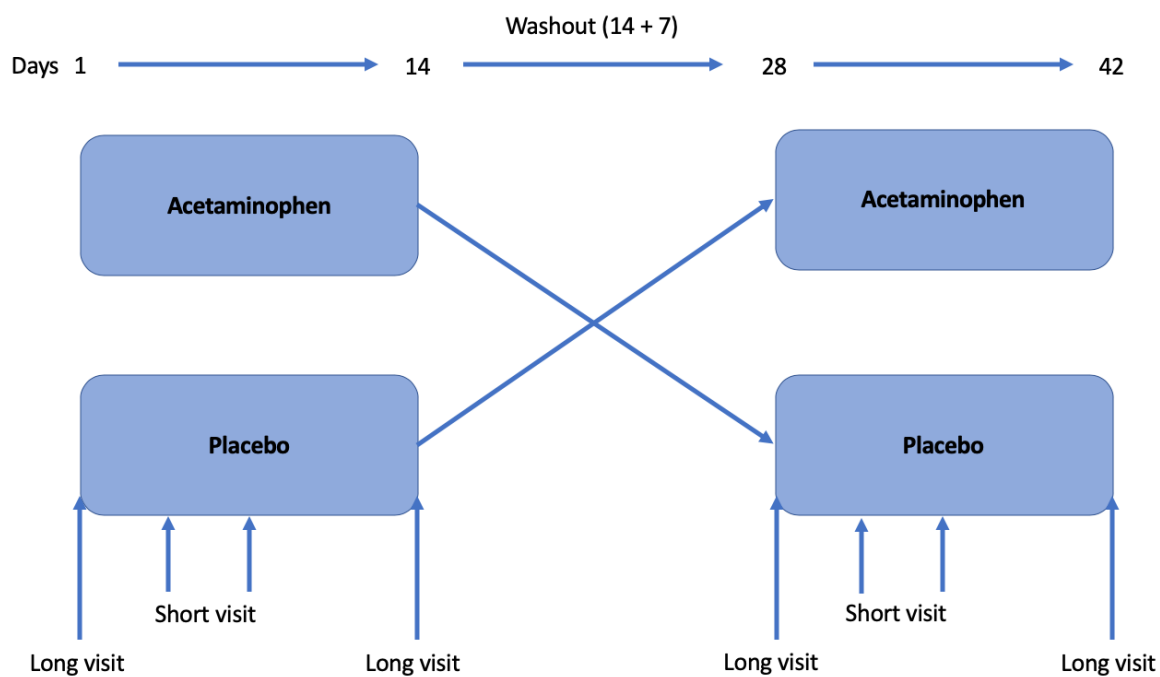
Statistical analysis

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Figure S1. Study design

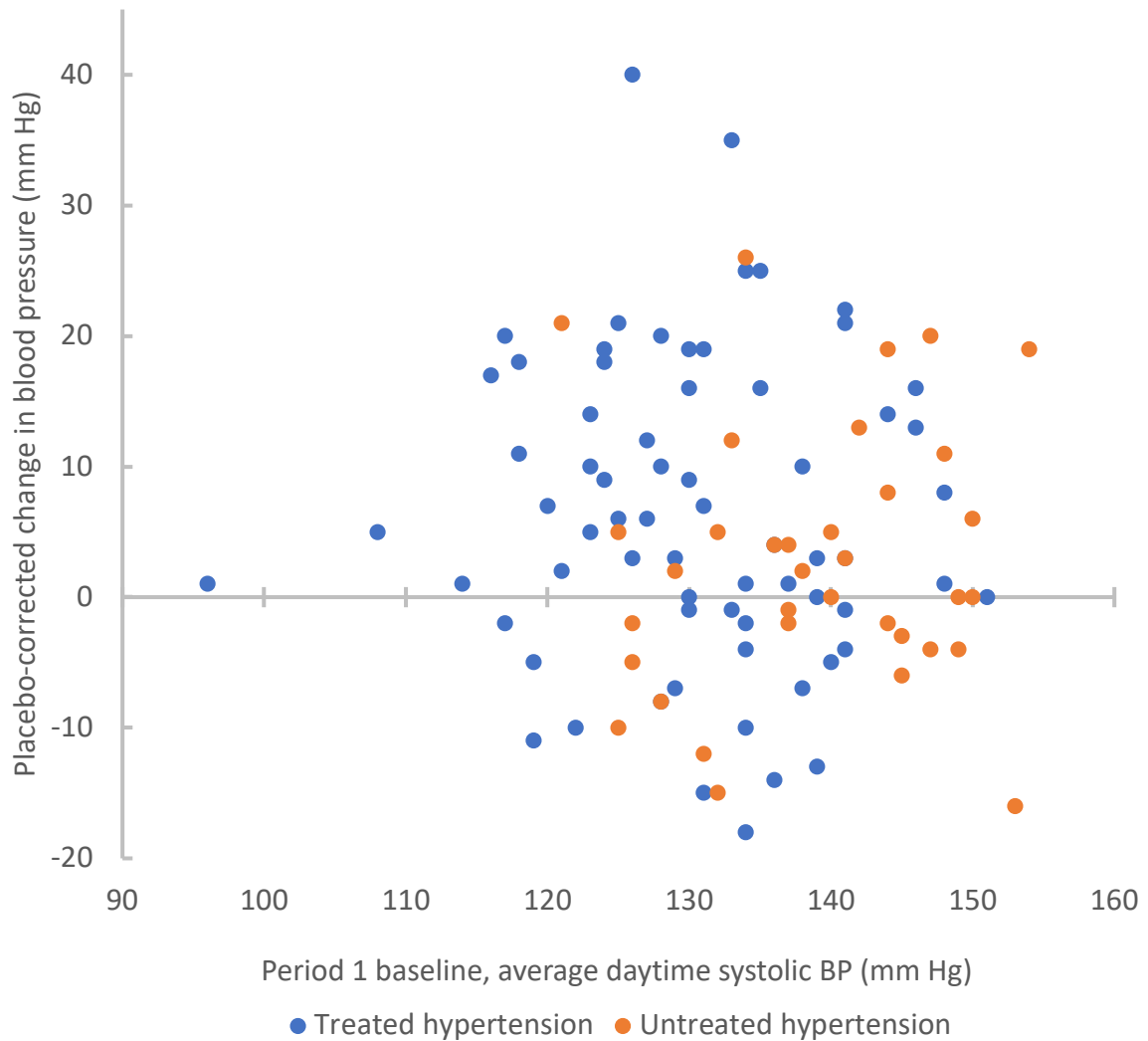


PATH-BP cross-over study design. Participants attended for 4 visits during each arm of the study (2 long and 2 short). Long visits (~1hr) at days 0 and 14 consisted of semi-automated clinic BPs (x3), blood sampling and fitting of an ambulatory BP monitor. Short visits (~30 minutes) at days 4 and 7 consisted of semi-automated clinic BPs (x3) and blood sampling.

Table S1. Baseline data for those that completed both arms of the study

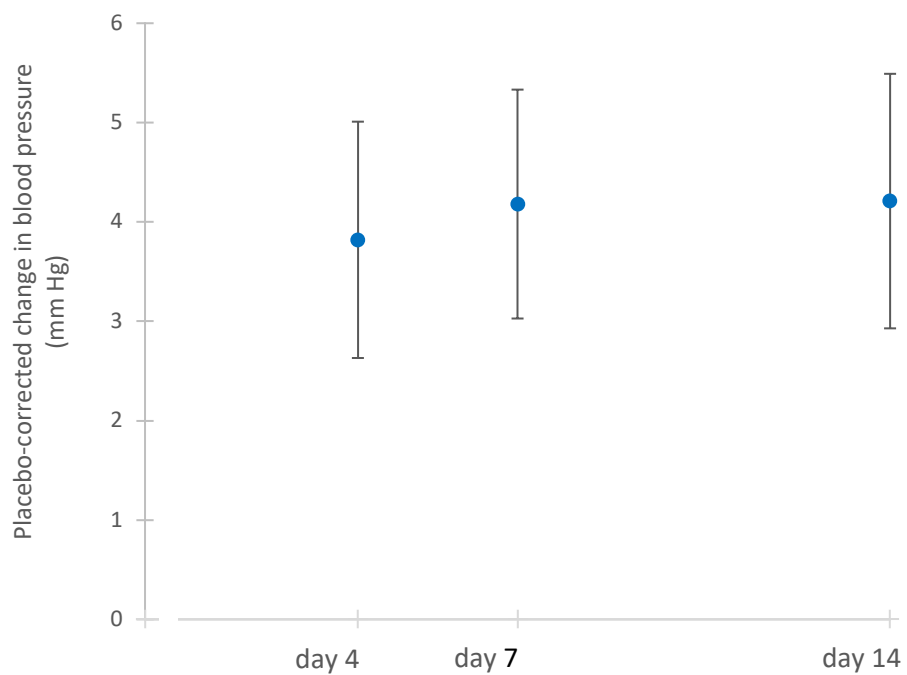
	Acetaminophen-first (n = 53)	Placebo-first (n = 50)
Age (yrs.) (± SD)	61.1 (7.9)	62.1 (8.1)
Male sex – no. (%)	38 (72)	41 (82)
Smoking Status – no. (%)		
• Current	2 (7)	1 (2)
• Ex-smoker	17 (32)	20 (40)
• Never smoked	34 (64)	29 (58)
On treatment for hypertension – no. (%)	38 (72)	31 (62)
Antihypertensive treatment – no. (%)		
ACE Inhibitor	19 (36)	12 (20)
Angiotensin receptor blocker	18 (34)	15 (30)
Calcium channel blocker	9 (17)	13 (26)
Diuretic	12 (23)	16 (32)
Beta-blocker	4 (8)	3 (6)
Number of Antihypertensives – no. (%)		
No antihypertensives	15 (28)	19 (38)
1 Drug	20 (38)	10 (20)
2 Drugs	12 (23)	14 (28)
3 Drugs	6 (11)	7 (14)
Statin therapy – no. (%)	15 (28)	10 (20)

Figure S2. Placebo-corrected change in systolic daytime ambulatory blood pressure from baseline.



Placebo-corrected change in average daytime systolic ambulatory BP from baseline. There was no statistical difference in systolic BP change between those participants treated and not treated for hypertension, $p = 0.13$

Figure S3. Placebo-corrected change in clinic blood pressure from baseline



The change in clinic systolic BP from baseline to day 4 ,7, 14, taking the difference between active and placebo phase. Values given are mean \pm standard error.