**Supplementary material for Byrne et al., “Cardiac responses in paediatric Pompe disease in the ADVANCE participant cohort,” *Cardiology in the Young***

**Table S1.** Cardiac findings in medical history taken at enrolment (full ADVANCE cohort of 113 participants). Participants could have multiple concurrent findings

|  |  |  |
| --- | --- | --- |
| Category | IOPD (n=87), n | LOPD (n=26), n |
| Any myocardial involvement | 87 | 6 |
| Cardiomegaly with or without additional conditions | 72 | 5 |
| Cardiomegaly alone | 50 | 3 |
| Cardiomegaly and either cardiomyopathy or any form of hypertrophy | 22 | 2 |
| Cardiomyopathy and/or any form of hypertrophy without reported cardiomegaly | 13 | 1 |
| Other primary cardiac findings | 2 | 0 |
| Arrhythmia alone | 1 | 0 |
| Hypokinesis of interventricular septum alone | 1 | 0 |
| Hypertrophy |  |  |
| Left ventricular | 9 | 0 |
| Right ventricular | 1 | 0 |
| Biventricular | 8 | 0 |
| Unspecified | 1 | 1\* |
| Hypertrophic | 16 | 0 |
| Dilated | 2 | 0 |
| Other or unspecified | 5 | 3 |
| Congestive heart failure | 26 | 2 |
| Unspecified | 6 | 0 |
| I | 12 | 1 |
| II | 1 | 0 |
| III | 5 | 1 |
| IV | 2 | 0 |
| Patent foramen ovale | 1 | 0 |
| Patent ductus arteriosus | 3 | 0 |
| Valvular comorbidity | 6 | 1† |
| Insufficiency | 2 | 0 |
| Regurgitation | 2 | 1 |
| Stenosis | 2 | 0 |
| Murmurs | 7 | 0 |
| Conduction disorders | 2 | 0 |
| First-degree heart block | 1 | 0 |
| Atrioventricular branch block | 1 | 0 |
| Wolff–Parkinson–White syndrome | 7 | 1‡ |
| Dysrhythmia (reported as “arrhythmia” not further specified) | 6 | 0 |
| Short PR interval | 2 | 0 |
| Long or borderline QT interval | 2 | 0 |
| T-wave abnormality | 3 | 0 |
| ST strain | 1 | 0 |
| Sinus | 1 | 0 |
| Supraventricular | 9 | 1‡ |
| Unspecified | 4 | 0 |
| Sinus bradycardia | 1 | 0 |

ECG = electrocardiograph; IOPD = infantile-onset Pompe disease; LOPD = late-onset Pompe disease.

\*1 participant with LOPD with cardiac involvement had cardiomyopathy and ventricular hypertrophy (ventricle[s] unspecified); the other 5 participants had cardiomegaly.

†1 participant with LOPD without any other reported cardiac findings (no cardiomegaly, cardiomyopathy, hypertrophy, or congestive heart failure) had mild mitral regurgitation.

‡1 participant with LOPD without any other reported cardiac findings had a history of supraventricular tachycardia and Wolff–Parkinson–White syndrome.