

Supplemental Table 1. Prevalence ratios of apparent treatment resistant hypertension (aTRH) associated with estimated glomerular filtration rate (eGFR) and albumin-to-creatinine ratio (ACR) among REasons for Geographic And Racial Differences in Stroke (REGARDS) study participants, limited to those with perfect medication adherence.

	eGFR level, mL/min/1.73m ²			
	≥60 (n=6,061)	45-59 (n=823)	<45 (n=439)	
n with aTRH	909	196	140	
Crude	1 (ref)	1.59 (1.39, 1.82)	2.13 (1.83, 2.47)	
Age-, race-, sex-adjusted	1 (ref)	1.52 (1.32, 1.75)	1.92 (1.65, 2.25)	
Multivariable* adjusted	1 (ref)	1.28 (1.10, 1.48)	1.23 (1.04, 1.46)	
	ACR level, mg/g			
	<10 (n=4,233)	10-29 (n=1,771)	30-299 (n=1,046)	≥300 (n=273)
n with aTRH	501	351	269	124
Crude	1 (ref)	1.67 (1.48, 1.90)	2.17 (1.90, 2.48)	3.84 (3.29, 4.48)
Age-, race-, sex-adjusted	1 (ref)	1.66 (1.46, 1.88)	2.00 (1.75, 2.28)	3.30 (2.83, 3.86)
Multivariable* adjusted	1 (ref)	1.49 (1.31, 1.70)	1.70 (1.48, 1.96)	2.25 (1.88, 2.69)

Perfect medication adherence was defined as a score of 0 on the 4-item Morisky Medication Adherence Scale.

Numbers in table are prevalence ratio (95% confidence interval)

*Adjusted for age, race, sex, geographic region, income, education, physical activity, current smoking, alcohol use, waist circumference, diabetes, total cholesterol, high-density lipoprotein cholesterol, statin use, c-reactive protein, history of myocardial infarction, history of stroke, albumin-to-creatinine ratio (log transformed, in eGFR analyses), and eGFR (in ACR analyses)

Supplemental Table 2. Prevalence ratios for secondary definition* of apparent treatment resistant hypertension (aTRH) associated with estimated glomerular filtration rate (eGFR) and albumin-to-creatinine ratio (ACR) among REasons for Geographic And Racial Differences in Stroke (REGARDS) study participants.

	Crude prevalence ratio (95% CI)	Age-, race-, sex-adjusted prevalence ratio (95% CI)	Multivariable** adjusted prevalence ratio (95% CI)
eGFR, mL/min/1.73m ²			
≥60	1 (ref)	1 (ref)	1 (ref)
45-59	1.62 (1.44, 1.82)	1.56 (1.37, 1.76)	1.33 (1.17, 1.51)
<45	2.04 (1.79, 2.33)	1.88 (1.64, 2.15)	1.25 (1.08, 1.46)
ACR, mg/g			
<10	1 (ref)	1 (ref)	1 (ref)
10-29	1.68 (1.51, 1.87)	1.64 (1.48, 1.83)	1.49 (1.33, 1.66)
30-299	2.14 (1.90, 2.39)	1.98 (1.76, 2.22)	1.64 (1.45, 1.85)
≥300	3.41 (2.97, 3.92)	3.03 (2.63, 3.48)	2.03 (1.73, 2.39)

CI= confidence interval

*requiring the use of a diuretic

**Adjusted for age, race, sex, geographic region, income, education, physical activity, current smoking, alcohol use, waist circumference, diabetes, total cholesterol, high-density lipoprotein cholesterol, statin use, c-reactive protein, history of myocardial infarction, history of stroke, ACR (log transformed, in eGFR analyses), and eGFR (in ACR analyses)

Supplemental Table 3. Number of antihypertensive medication classes being taken and percent of REasons for Geographic And Racial Differences in Stroke (REGARDS) participants taking each class of medication

	no aTRH (n=8,788)	aTRH (n=1,912)
Antihypertensive medication classes		
Mean (SD)	1.9 (0.7)	3.6 (0.7)
Median (25 th , 75 th percentile)	2.0 (1.0, 2.0)	4.0 (3.0, 4.0)
Aldosterone antagonist, %	1.3	7.6
Alpha blocker, %	4.3	16.3
Angiotensin converting enzyme (ACE) inhibitor, %	39.3	62.0
Angiotensin receptor blocker (ARB), %	24.6	40.1
Beta blocker, %	31.6	73.4
Calcium channel blocker, %	32.4	72.1
Central acting agent, %	0.3	1.1
Diuretic, %	51.4	86.8
Vasodilator, %	0.2	3.3

aTRH: apparent treatment resistant hypertension

Supplemental Figure 1. Exclusion criteria

