

1 Supplementary Table 1 – Clinical trials studying heart failure outcomes using digital health and
2 mHealth based monitoring and interventions

Type of monitoring	Study	Sample size	Intervention	Outcomes
Vital sign and weight measurement	Tele-HF[1]	1653	Telephone based, Symptom and weight	No reduction in mortality or HF hospitalization
	TIM-HF[2]	710	Mobile based, daily EKG, BP and weight	No reduction in mortality or HF hospitalization
	BEAT-HF[3]	1437	Telephone based, Weight, BP, HR and symptoms	No reduction in mortality or HF hospitalization Better QoL score at 180 days
	TIM-HF2[4]	1571	Web based, Weight, BP, HR, SpO2, EKG and self-rated health status (scale of 1 to 5)	Reduction in all-cause mortality and loss of days due to CV admissions
Thoracic impedance and fluid monitoring	multiSENSE[5]	900	Device based ICD or CRT, Heart sounds, thoracic impedance, RR, tidal volume, HR, patient activity	70% sensitivity of heartlogic algorithm to detect HF event. Median days before HF event – 34 days
	Opti-Link HF[6]	1002	Device based ICD or CRT, thoracic impedance	No reduction in mortality or HF hospitalization. 24% impedance alerts not transmitted
	DOT-HF[7]	335	Device based ICD or CRT, thoracic impedance	No reduction in mortality or HF hospitalization
	SMILE[8]	268	Device based, ReDS system Thoracic impedance	48% reduction in HF readmission
	LINK-HF[9]	100	Device based, Multisensor chest patch	76% sensitivity of algorithm to detect HF hospitalization. Median days before HF admission – 6.5 to 8.5 days
	BMADHF[10]	500	Device based, μ Cor thoracic fluid monitoring patch	Ongoing. To evaluate mortality and HF hospitalization
Pulmonary artery pressure monitoring	CHAMPION[11]	550	Device based CardioMEMS, Pulmonary artery pressures	37% reduction in HF hospitalization
	GUIDE-HF[12]	1022	Device based CardioMEMS, Pulmonary artery pressures	No reduction in mortality or HF hospitalization. Pre-COVID 19 subgroup showed reduction in HF hospitalization.

3 **References**

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