Supplementary

Appendix 1 The TASC system

Femoropopliteal Lesions

Type A Lesions: Focal, short (typically <10 cm) stenoses or occlusions of the superficial femoral or popliteal arteries.

Type B Lesions: Lesions of intermediate length (approximately 10–15 cm) or cases with two or more focal lesions.

Type C Lesions: More diffuse or multi-segmental disease involving the superficial femoral and/or popliteal arteries, often with longer lesion lengths.

Type D Lesions: Chronic total occlusions that are long-segment (typically >15 cm), frequently accompanied by heavy calcification and poor distal runoff.

Table S1 Demographic characteristics of the entire DCB bailout group

Characteristics	Value (n=320)
Age, years	68.58±9.65
Male	241 (75.3)
Hypertension	245 (76.5)
Dyslipidemia	136 (42.5)
Diabetes	195 (61.0)
Stroke	59 (18.4)
Coronary heart disease	104 (32.5)
Renal insufficiency	42 (13.0)
Smoking	170 (53.1)
Rutherford classification	
1	20 (6.2)
2	43 (13.4)
3	148 (46.3)
4	44 (13.8)
5	50 (15.6)
6	15 (4.7)

Data are presented as mean ± SD or n (%). DCB, drug-coated balloon; SD, standard deviation.

Table S2 Angiographic and procedural characteristics of the entire DCB bailout group

Variables	DCB group (n=340)
Vessel	
Femoral only	152 (44.7)
Femoropopliteal	188 (55.3)
PACSS	2.19 (1.71)
Lesion type	
De novo	275 (80.9)
Presence of ISR	65 (19.1)
CTO	245 (72.1)
BTK intervention	125 (36.8)
Lesion length (mm)	201.44±110.52
Stent placement	67 (19.7)
Lesion debulking	86 (25.3)

Data are presented as mean ± SD or n (%). BTK, below-the-knee; CTO, chronic total occlusion; DCB, drug-coated balloon; PACSS, Peripheral Artery Calcium Scoring System.

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