Supplemental statistical methods

SPSS version 22.0 (IBM SPSS Statistics) were used for statistical analysis. Spearman correlation analysis was conducted for the correlation between diameter of coronary arteries and CT-FFR. The correlation coefficient values were interpreted as follows: 0.00 to 0.09 considered negligible, 0.10 to 0.39 considered weak, 0.40 to 0.69 considered moderate, 0.70 to 0.89 considered strong, and 0.90 to 1.00 considered very strong (1). One-way ANOVA test was used to determine CT-FFR differences among semiquantitative image quality score, and then, a pairwise comparison between groups was made. The significance values were adjusted by the Bonferroni correction for multiple tests. Differences were considered significant at $P<0.05$ (two-tailed).
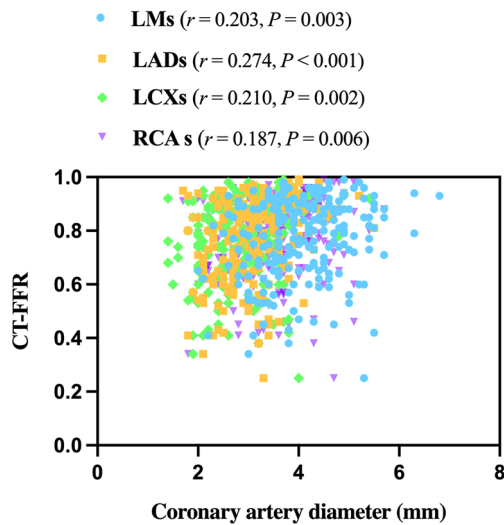

Figure S1 The correlation between coronary artery diameter and CT-FFR. The Spearman correlation between the diameter of coronary arteries and CT-FFR was weak in LMs, LADs, LCXs, and RCAs. CT-FFR, computed tomography derived fractional flow reserve; LM, left main artery; LAD, left anterior descending coronary artery; LCX, left circumflex coronary artery; RCA, right coronary artery.
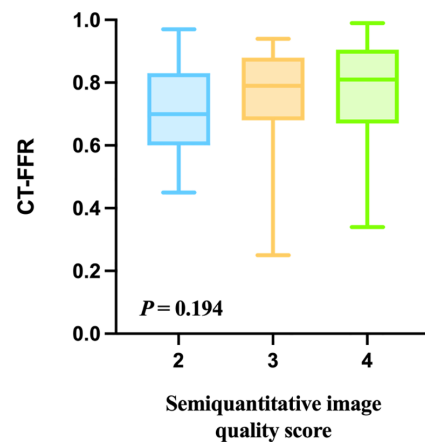
Figure S2 Association between the semiquantitative image quality and CT-FFR. The ANOVA test showed that there was no statistically significant difference in terms of CT-FFR among the semiquantitative image quality score (P=0.194). CT-FFR, computed tomography derived fractional flow reserve; ANOVA, analysis of variance.