Table S1. Strengthening the reporting of observational studies in epidemiology (STROBE) checklist of cohort studies.

	Item No	Recommendation	Page No
Title and abstract	1	(*a*) Indicate the study's design with a commonly used term in the title or the abstract.	1
		(*b*) Provide in the abstract an informative and balanced summary of what was done and what was found.	1
Introduction			
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported.	3
Objectives	3	State specific objectives, including any prespecified hypotheses.	4
Methods			
Study design	4	Present key elements of study design early in the paper.	5-7
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection.	5-7
Participants	6	(*a*) *Cohort study*—Give the eligibility criteria, and the sources and methods of selection of participants. Describe methods of follow-up. (*b*) *Cohort study*—For matched studies, give matching criteria and number of exposed and unexposed.	5-7
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable.	5-7
Data sources/ measurement	8*	For each variable of interest, give sources of data and details of methods of assessment (measurement). Describe comparability of assessment methods if there is more than one group.	5-7
Bias	9	Describe any efforts to address potential sources of bias.	5-7
Study size	10	Explain how the study size was arrived at.	NA
Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why.	5-7
Statistical methods	12	(*a*) Describe all statistical methods, including those used to control for confounding.	5-7
		(*b*) Describe any methods used to examine subgroups and interactions.	5-7
		(*c*) Explain how missing data were addressed.	5-7
		(*d*) *Cohort study*—If applicable, explain how loss to follow-up was addressed.	5-7
		(*e*) Describe any sensitivity analyses.	5-7

Results			
Participants	13*	(a) Report numbers of individuals at each stage of study—e.g., numbers potentially eligible, examined for eligibility, confirmed eligible, included in the study, completing follow-up, and analyzed.	8-11
		(b) Give reasons for non-participation at each stage.	8-11
		(c) Consider use of a flow diagram.	8-11
Descriptive data	14*	(a) Give characteristics of study participants (e.g., demographic, clinical, social) and information on exposures and potential confounders.	8-11
		(b) Indicate number of participants with missing data for each variable of interest.	8-11
		(c) *Cohort study*—Summarize follow-up time (e.g., average and total amount).	8-11
Outcome data	15*	*Cohort study*—Report numbers of outcome events or summary measures over time.	8-11
Main results	16	(*a*) Give unadjusted estimates and, if applicable, confounder-adjusted estimates and their precision (e.g., 95% confidence interval). Make clear which confounders were adjusted for and why they were included.	8-11
		(*b*) Report category boundaries when continuous variables were categorized.	8-11
		(*c*) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period.	8-11
Other analyses	17	Report other analyses done—e.g., analyses of subgroups and interactions, and sensitivity analyses.	8-11
Discussion			
Key results	18	Summarize key results with reference to study objectives.	11-14
Limitations	19	Discuss limitations of the study, taking into account sources of potential bias or imprecision. Discuss both direction and magnitude of any potential bias.	11-14
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence.	11-14
Generalizability	21	Discuss the generalizability (external validity) of the study results.	11-14
Other information			
Funding	22	Give the source of funding and the role of the funders for the present study and, if applicable, for the original study on which the present article is based.	15

* Give information separately for exposed and unexposed groups.

Note: An explanation and elaboration article discusses each checklist item and gives methodological background and published examples of transparent reporting. The STROBE checklist is best used in conjunction with this article (freely available on the websites of PLoS Medicine at http://www.plosmedicine.org/, Annals of Internal Medicine at http://www.annals.org/, and Epidemiology at http://www.epidem.com/). Information on the STROBE initiative is available at http://www.strobe-statement.org, accessed on 11 October 2023.

Table S2. Univariate and multivariate analyses of outcomes of interest in patients undergoing emergent endovascular aortic repair.

	Exposures	Univariate analysis		Multivariate analysis*	
		HR/β (95%CI)	P	HR/β (95%CI)	P
T1AEL	Unstable vs. stable	1.51 (0.34, 6.76)	0.59	3.89 (0.40, 37.75)	0.24
	MAP	0.98 (0.92, 1.04)	0.51	0.94 (0.83, 1.07)	0.36
	HR	1.00 (0.95, 1.05)	0.93	0.99 (0.94, 1.06)	0.86
Reintervention	Unstable vs. stable	0.88 (0.24, 3.29)	0.85	0.92 (0.22, 3.76)	0.90
	MAP	1.02 (0.98, 1.07)	0.26	1.02 (0.98, 1.06)	0.29
	HR	1.01 (0.98, 1.05)	0.46	1.01 (0.98, 1.05)	0.46
Survival	Unstable vs. stable	2.01 (1.05, 3.84)	0.034	2.12 (1.06, 4.27)	0.031
	MAP	0.98 (0.96, 1.00)	0.10	0.99 (0.96, 1.01)	0.24
	HR	1.01 (0.99, 1.04)	0.17	1.01 (0.99, 1.03)	0.21
30-day mortality	Unstable vs. stable	4.40 (0.77, 25.02)	0.09	4.86 (0.77, 30.79)	0.09
	MAP	0.92 (0.85, 0.99)	0.024	0.92 (0.85, 1.00)	0.038
	HR	1.03 (0.98, 1.08)	0.31	1.03 (0.97, 1.08)	0.36

T1AEL = type IA endoleak, MAP = mean artery pressure, HR = heart rate, BMI = body mass index.

*Adjusted for gender, age, coronary artery disease, and pulmonary diseases for survival and 30-day mortality; adjusted for gender, age, oversizing ratio, neck length, neck diameter, and neck angulation for T1AEL and reintervention.