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Table 1. Coronary Outcomes among Women Randomly Assigned to Estrogen plus Progestin, as Compared with Those Assigned to Placebo.*

Variable	Estrogen-plus-Progestin Group (N=8506)	Placebo Group (N=8102)	Adjusted Hazard Ratio	Nominal 95% CI	Adjusted 95% CI
Mean follow-up time (mo)	67.8	66.8			
	<i>no. of cases (annualized percentage)</i>				
CHD	188 (0.39)	147 (0.33)	1.24	1.00–1.54	0.97–1.60
Nonfatal MI					
Including silent MI	151 (0.31)	114 (0.25)	1.28	1.00–1.63	0.96–1.70
Excluding silent MI	147 (0.31)	109 (0.24)	1.30	1.01–1.67	0.97–1.74
Death due to CHD	39 (0.08)	34 (0.08)	1.10	0.70–1.75	0.65–1.89
CHD, revascularization, or angina	369 (0.77)	356 (0.79)	1.00	0.86–1.15	0.82–1.22
CABG or PTCA	214 (0.45)	205 (0.45)	1.01	0.83–1.22	0.77–1.31
Hospitalization for angina	172 (0.36)	195 (0.43)	0.86	0.70–1.05	0.65–1.13
Confirmed angina	106 (0.22)	126 (0.28)	0.82	0.63–1.06	0.57–1.17
Acute coronary syndrome	322 (0.67)	299 (0.66)	1.03	0.88–1.21	0.83–1.28
Congestive heart failure	113 (0.23)	109 (0.24)	0.99	0.76–1.29	0.69–1.42

* CHD includes acute myocardial infarction (MI) necessitating hospitalization, silent myocardial infarction as determined by serial electrocardiography, and death due to CHD. Hazard ratios and nominal 95 percent confidence intervals (CIs) are stratified according to age, presence or absence of a previous coronary event, and randomly assigned diet-modification group and are adjusted for the presence or absence of previous coronary-artery bypass grafting (CABG) or percutaneous transluminal coronary angioplasty (PTCA). The adjusted 95 percent confidence interval includes control for the above variables and further control for sequential monitoring (for the primary coronary end points) and for multiple (seven) trial outcomes (for the secondary coronary end points). Confirmed angina includes hospitalization for angina with myocardial ischemia confirmed by stress testing or obstructive coronary disease (luminal narrowing of >70 percent) confirmed by coronary angiography. Acute coronary syndromes include Q-wave myocardial infarction, non-Q-wave myocardial infarction, and hospitalization for angina. The numbers of events do not add up to the totals for the categories because some women had more than one event.

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