**Supplementary Information for**

**Disorganization of Intercalated Discs in Dilated Cardiomyopathy**

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Fig. S1



**Fig. S1 Immunohistochemical findings in Hypertrophic cardiomyopathy.**

Immunohistologically, in HCM, we observed no decrease in N-cadherin immunostaining (N-cadherin immunostaining; scale bar, 5 µm; original magnification, ×1000). In addition, ICDs were dyed in a band shape, with no evidence of deterioration or disorganization. Similar findings were obtained in the control and CHF groups.

Fig. S2



**Fig. S2 A case diagnosed as DCM was considered to be CHF based on the results of N-cadherin immunostaining and ICD scattering.**

This case was clinically diagnosed as DCM, and an autopsy was performed. Histologically, characteristic findings such as cardiomyocyte atrophy, nuclear pleomorphism, and interstitial fibrosis were not observed (A: H-E staining; scale bar, 20 µm; original magnification, ×400). ICDs were visible (B: H-E staining; scale bar, 10 µm; original magnification, ×1000).

Immunohistochemistry revealed that N-cadherin immunostaining was not reduced in ICDs, and the ICDs had a band-like appearance (C–F: N-cadherin immunostaining; scale bar, 5 µm; original magnification, ×1000). ICD scattering was not observed. Based on these findings, we classified this case as CHF. Because this patient was receiving adriamycin, we suspected adriamycin cardiomyopathy.

Fig. S3



**Fig. S3 A case diagnosed as CHF was considered to be DCM based the results of N-cadherin immunostaining and ICD scattering**

This case was clinically diagnosed as CHF, and an autopsy was performed. Histologically, cardiomyocyte atrophy, nuclear pleomorphism, and interstitial fibrosis were observed (A: H-E staining; scale bar, 20 µm; original magnification, ×400). ICDs were not clearly visible (B: H-E staining; scale bar, 10 µm; original magnification, ×1000).

In immunohistochemistry, N-cadherin immunostaining was reduced in many ICDs, and ICD disintegration was observed (C–F: N-cadherin immunostaining; scale bar, 5 µm; original magnification, ×1000). ICD scattering was apparent. Based on these findings, we have classified this case as DCM.