

S4-Table: Record of health issues reported by the participants.

PARTICIPANT ID	HEALTH ISSUES (1 = YES, 0 = NO)																
	MOUTH_ULCER	GINGIVITIS	PERIODONTITIS	ORAL_CANCER	ORAL_THRUSH	ACUTE_CELLULITIS	GRANULOMA	OSTEOMYELITIS	APPETITE_CONDITION	DROWSINESS	INSOMNIA	NAUSEA	MYALGIA	ARTHRALGIA	VISION	ANOREXIA	HEADACHE
101	0	0	0	0	0	0	0	0	0	1	0	0	1	1	1	0	1
102	0	0	0	0	1	0	0	0	0	1	0	0	0	0	1	1	1
103	1	1	0	0	0	0	0	0	0	1	1	0	0	0	1	0	1
104	1	1	1	0	0	1	1	0	0	1	0	0	0	1	0	0	1
105	1	0	0	0	1	1	1	0	0	1	0	0	0	1	0	1	1
106	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
107	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
108	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
109	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1
110	1	0	1	0	1	1	0	0	0	1	1	0	1	0	0	1	1
111	1	1	0	0	1	0	0	0	0	1	0	1	0	0	0	0	1
112	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0
113	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1
114	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	1
115	1	0	1	0	0	1	0	0	0	0	0	0	1	1	0	1	1
116	0	0	0	0	0	0	0	0	0	1	1	0	1	0	0	0	1
117	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1
118	1	0	0	0	1	0	0	1	0	1	1	0	0	1	0	0	1
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121	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0
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123	1	0	0	0	1	0	1	0	0	1	0	0	0	0	0	1	0
124	0	0	1	0	0	0	0	0	0	0	1	1	1	0	1	0	1
125	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1
126	1	0	0	0	1	1	1	1	0	0	1	0	0	0	1	0	1
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130	0	0	0	0	1	0	0	0	0	0	0	1	0	1	0	1	1
131	0	0	0	0	0	1	1	0	0	1	0	0	0	0	0	0	1
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133	1	1	1	0	1	0	0	0	0	1	0	0	0	0	0	0	0
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146	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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153	1	1	0	0	0	0	1	1	0	1	0	0	0	1	1	1	0
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256	1	1	0	0	1	0	0	0	0	1	1	0	0	1	0	0	1
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264	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	0	0
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269	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
270	0	0	0	0	1	0	0	0	1	0	1	0	0	0	0	0	0
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272	1	1	0	0	0	1	0	0	0	1	0	0	1	0	0	1	0
273	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0
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280	0	0	1	0	1	0	1	0	0	0	0	0	0	0	0	0	0
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282	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
283	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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285	1	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	1
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349	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1
350	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0
351	0	0	0	0	1	0	0	0	0	0	0	1	1	1	0	0	1

