

Tolerability of Bedtime Diuretics: A Prospective Cohort Analysis (Supplemental Information)

| Supplemental Table 1. Comparison of baseline characteristics for participants that were excluded vs. included in the primary outcome analysis | | | |
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| Characteristics | Excluded (n=46) No. (%) | Included (n=533) No. (%) | p-value |
| Sex, female | 27 (58.7) | 308 (57.8) | 0.99 |
| Province | | | |
| Alberta | 39 (84.8) | 442 (82.9) | 0.84 |
| British Columbia | 4 (8.7) | 48 (9.0) | 0.99 |
| Manitoba | 2 (4.4) | 35 (6.6) | 0.76 |
| Saskatchewan | 1 (2.2) | 8 (1.5) | 0.53 |
| Rural resident | 4 (8.7) | 71 (13.3) | 0.49 |
| Age, mean (STD), y | 64.6 (10.6) | 65.5 (10.0) | 0.55 |
| ≤ 29 | 0 | 1 (0.2) | 0.99 |
| 30 - 39 | 0 | 2 (0.4) | 0.99 |
| 40 - 49 | 3 (6.5) | 24 (4.5) | 0.46 |
| 50 - 59 | 9 (19.6) | 116 (21.8) | 0.85 |
| 60 - 69 | 18 (39.1) | 202 (37.9) | 0.87 |
| 70 - 79 | 11 (23.9) | 146 (27.4) | 0.73 |
| 80 - 89 | 5 (10.9) | 39 (7.3) | 0.38 |
| ≥ 90 | 0 | 3 (0.6) | 0.99 |
| Ethnicity | | | |
| White | 43 (93.5) | 504 (94.6) | 0.73 |
| South east asian | 0 | 12 (2.3) | 0.61 |
| Asian | 1 (2.2) | 3 (0.6) | 0.28 |
| First nation | 0 | 6 (1.1) | 0.99 |
| Black | 0 | 0 | 0.99 |
| Other | 1 (2.2) | 7 (1.3) | 0.49 |
| Decline to answer | 1 (2.2) | 1 (0.2) | 0.15 |

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| Education level | | | |
| Less than high school | 4 (8.7) | 21 (3.9) | 0.13 |
| High school diploma | 19 (41.3) | 147 (27.6) | 0.06 |
| Technical or trade college diploma | 9 (19.6) | 146 (27.4) | 0.30 |
| University degree | 13 (28.3) | 219 (41.1) | 0.12 |
| Decline to answer | 1 (2.2) | 0 | 0.08 |
| Annual household income, CAD\$ | | | |
| < 25,000 | 4 (8.7) | 25 (4.7) | 0.28 |
| 25,000 to 100,000 | 20 (43.5) | 287 (53.8) | 0.22 |
| > 100,000 | 20 (43.5) | 189 (35.5) | 0.34 |
| Decline to answer | 2 (4.4) | 32 (6.0) | 0.99 |
| Comorbidities ^a | | | |
| Coronary artery disease | 9 (19.6) | 100 (18.8) | 0.85 |
| Diabetes | 6 (13) | 92 (17.3) | 0.54 |
| Sleep apnea | 11 (23.9) | 99 (18.6) | 0.43 |
| Chronic kidney disease | 7 (15.2) | 48 (9.0) | 0.19 |
| COPD | 6 (13.0) | 50 (9.4) | 0.43 |
| Stroke | 1 (2.2) | 28 (5.3) | 0.72 |
| Heart failure | 0 | 10 (1.9) | 0.99 |
| Hip fracture | 1 (2.2) | 2 (0.4) | 0.22 |
| Cigarette smoker (current) | 2 (4.4) | 42 (7.9) | 0.56 |
| Nocturia, median (IQR), nocturnal urinations/wk | 7 (0-14.0) | 6 (1-10.5) | 0.61 |
| Does not experience nocturia | 12 (26.1) | 129 (24.2) | 0.72 |
| Nocturia occurs but "not a problem" | 21 (45.6) | 255 (47.8) | 0.88 |
| Nocturia "a minor problem" | 12 (26.1) | 139 (26.1) | 0.99 |
| Nocturia "a major problem" | 1 (2.2) | 10 (1.9) | 0.60 |
| Physical exercise, median (IQR), days per week ^b | 3 (0-5.0) | 3 (0.5-5.0) | 0.42 |
| 0 | 15 (32.6) | 133 (25.0) | 0.29 |
| 1 | 6 (13.0) | 43 (8.1) | 0.26 |
| 2 | 1 (2.2) | 68 (12.8) | 0.03 |
| 3 | 6 (13.0) | 75 (14.1) | 0.99 |
| 4 | 6 (13.0) | 54 (10.1) | 0.46 |
| 5 | 2 (4.4) | 49 (9.2) | 0.41 |

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| 6 | 1 (2.2) | 15 (2.8) | 0.99 |
| 7 | 9 (19.6) | 96 (18.0) | 0.84 |
| BMI, median (IQR), Kg/M ² | 27.7 (26.1-33.4) | 28.3 (25.5-32.3) | 0.80 |
| Underweight (< 18.5) | 0 | 3 (0.6) | 0.99 |
| Normal weight (18.5 - 24.9) | 9 (19.6) | 105 (19.7) | 0.99 |
| Overweight (25 - 29.9) | 21 (45.7) | 220 (41.3) | 0.64 |
| Obese (≥ 30) | 16 (34.8) | 205 (38.5) | 0.75 |
| EQ-5D-5L overall health score, median (IQR) ^c | 80 (75-90) | 80 (75-90) | 0.88 |
| Physically frail ^d | 7 (15.2) | 73 (13.7) | 0.82 |
| Cognition ^e | | | |
| Normal | 41 (89.1) | 496 (93.1) | 0.37 |
| Questionable impairment | 3 (6.5) | 36 (6.8) | 0.99 |
| Impairment consistent with dementia | 2 (4.4) | 1 (0.2) | 0.02 |

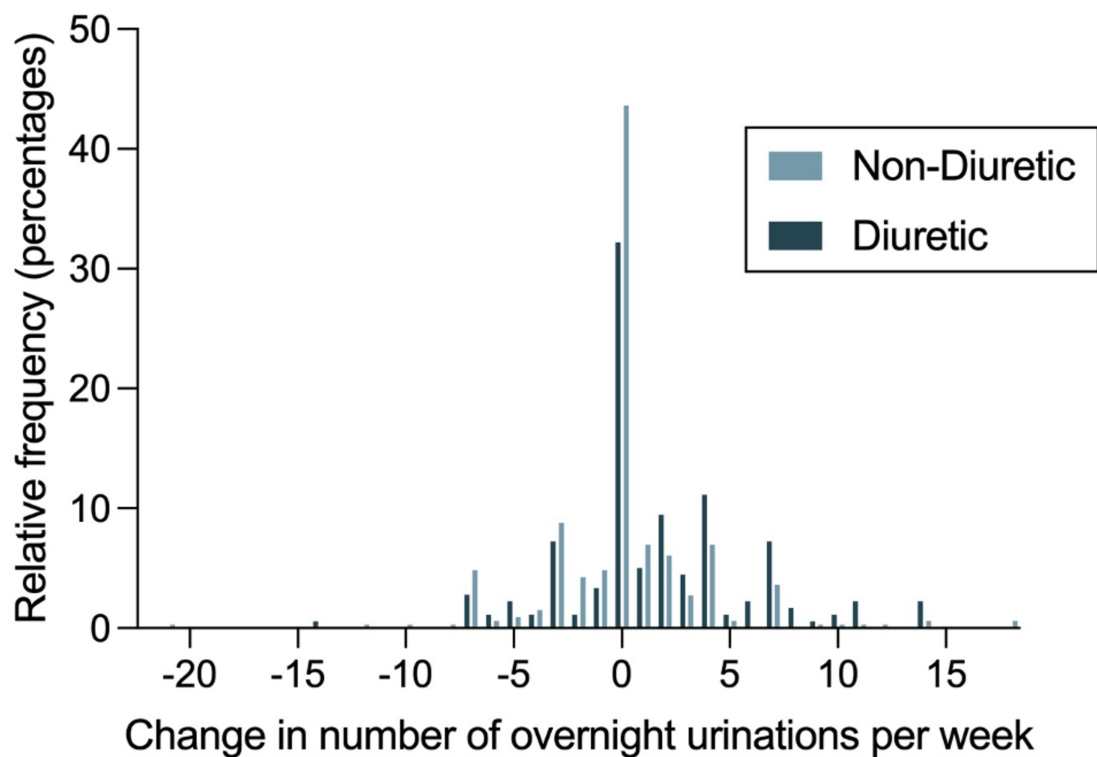
^a Derived from Alberta provincial health claims data and self-report.

^b "How many days in the past week have you exercised for 30 minutes or more, vigorously enough to raise your breathing rate?"

^c Self-rating of overall health on a scale of 0 (worst) to 100 (best).

^d As per Tilburg Frailty Indicator's physical sub-scale (sub-scale score ≥3 defines physically frail).

^e As per Short Blessed screening test score. Considered to be normal (0-4), questionable impairment (5-9), or impairment consistent with dementia (>9).



Supplemental Figure 1. 6-week change in overnight urinations per week.

Figure is the change in the number of overnight urinations per week experienced by hypertensive primary care patients 6-weeks after being randomly allocated to switch their only blood pressure lowering pill from morning to bedtime. Grouped by those whose pill contained a diuretic (90.7% of which were thiazides), and those who used a different class of blood pressure lowering medication.