

Supplementary Table B. Table includes all considered potential predictors of HT use, not included in Predictor models. For categorical variables, p-values were derived using regression models predicting HT Use (never user v. past or current user); chi square models were used for categorical variables.

Variables	Never User		Past User		Current User		Combined Past and Current Users		Significance: Never Users v Past or Current Users
	N		N		N		N		p-value
Demographic and Anthropometric Variables									
Ethnicity, N(%) Hispanic	779	23 (3.0%)	506	12 (2.4%)	315	11 (3.5%)	821	23 (2.8%)	0.86
Psychological and Personality Variables									
Health Locus of control Self, mean response ^a (SD)	775	6.1 (0.9)	504	6.2 (0.8)	313	6.2 (0.9)	817	6.2 (0.8)	0.19
Health Locus of control Others, mean response ^a (SD)	774	3.4 (1.5)	504	3.3 (1.4)	313	3.3 (1.4)	817	3.3 (1.4)	0.12
Sense of Agency, mean response ^a (SD)	773	2.5 (0.7)	503	2.5 (0.7)	315	2.6 (0.7)	818	2.6 (0.7)	0.67
Conscientiousness, mean response ^a (SD)	775	3.4 (0.5)	503	3.4 (0.4)	315	3.4 (0.5)	818	3.4 (0.5)	0.87
Mood, Level of Satisfaction and Self-Evaluation Variables									
PANAS ^b Negative affect, mean response ^a (SD)	771	1.6 (0.6)	500	1.5 (0.5)	315	1.6 (0.5)	815	1.5 (0.5)	0.46
PANAS ^b Positive affect, mean response ^a (SD)	779	3.6 (0.8)	504	3.6 (0.8)	315	3.6 (0.8)	809	3.6 (0.8)	0.30
Depressive symptoms, mean score ^a (SD)	782	0.8 (1.9)	506	0.7 (1.8)	315	0.9 (2.0)	821	0.7 (1.9)	0.72
Anxiety symptoms, mean score ^a (SD)	782	0.2 (0.9)	506	0.1 (0.8)	315	0.2 (0.9)	821	0.1 (0.8)	0.71
Health Related Behaviors									
Reports regular use of Iron, N(%)	782	60 (7.7%)	506	32 (6.3%)	315	20 (4.0%)	821	52 (6.3%)	0.29
Reports regular use of Fish oil, N(%)	782	86 (11.0%)	506	72 (14.2%)	315	40 (12.7%)	821	112 (13.6%)	0.11
Total light exercise ^c , mean score ^a (SD)	691	15.1 (8.5)	464	15.0 (7.5)	287	14.1 (7.2)	751	14.7 (7.4)	0.34
Total moderate exercise ^c , mean score ^a (SD)	694	23.3 (8.8)	455	23.2 (8.6)	288	22.9 (8.3)	743	23.1 (8.5)	0.60
Total vigorous exercise ^c , mean score ^a (SD)	708	27.0 (8.8)	461	27.6 (8.1)	291	26.3 (8.0)	752	27.1 (8.1)	0.94
Smoking, N(%) ever smoked cigarettes regularly	539	359 (66.6%)	364	230 (63.2%)	216	145 (67.1%)	580	375 (64.7%)	0.49
Physical Health and Medical History									
High Blood Pressure, N(%) experience or treated for	782	284 (36.3%)	506	207 (40.9%)	315	121 (38.4%)	821	328 (40.0%)	0.13
No. of times hospitalized overnight in last year (SD)	749	0.2 (0.8)	489	0.2 (0.6)	307	0.2 (0.6)	796	0.2 (0.6)	0.80
Self reported history of stroke, N(%)	782	22 (2.8%)	506	16 (3.2%)	315	9 (2.9%)	821	25 (3.0%)	0.78
Self reported history of heart attack, N(%)	780	32 (4.1%)	505	19 (3.8%)	315	7 (2.2%)	820	26 (3.2%)	0.32
Self reported history of head injury, N(%)	781	19 (2.4%)	506	8 (1.6%)	315	4 (1.3%)	821	12 (1.5%)	0.16
Self reported history of cancer, N(%)	781	126 (16.1%)	506	109 (21.5%)	314	43 (13.7%)	820	152 (18.5%)	0.20

^aHigher scores indicate higher levels of the variable being measured

^bPANAS: Positive and Negative Affect Schedule

^cScore reflects frequency of activity in two settings (work and leisure) and across two time periods (Winter and Summer)

Supplementary Table A. Detailed variable descriptions

Variable and Variable Category	Obtained from	Description
Demographic and Anthropometric		
Age	Self-administered Questionnaire	Derived by subtracting date of birth from the date of questionnaire
Marital Status	Self-administered Questionnaire	Marital status was indicated using a categorical scale, including five status designations.
Household Income	Self-administered Questionnaire	Socioeconomic status was estimated using a log transformed reported household annual income (log income)
Education	Telephone Interview	Highest level of education completed, was recorded during a telephone interview as a categorical variable ranging from a value of one, indicating no formal schooling to a value of twelve for an advanced professional degree.
Body Mass Index	Self-administered Questionnaire	Estimated using subject-measured height and weight.
Waist-to-Hip Ratio	Self-administered Questionnaire	Detailed instructions and a tape measure were provided to participants for the purpose of obtaining waist and hip measurements. These variables were converted into waist-to-hip ratios.
Psychological and Personality Variables		
Control over one's Health Health Locus of control Self (HLOC-self) Health Locus of control Others (HLOC-Others)	Self-administered Questionnaire	Six questions assessed whether subjects believed they (HLOC-self) and/or others (HLOC-Others) control and direct their state of health. Subjects rated their agreement using a Likert scale ranging from 1 (strongly agree) to 7 (strongly disagree). An average item rating was obtained, with higher scores reflecting greater belief that control over one's state of wellness belongs to oneself or others.
Sense of Agency	Self-administered Questionnaire	Subjects rated how well five adjectives described them (e.g., assertive, self-confident), using a range from 1 ("a lot") to 4 ("not at all"). A mean ranking was derived for an overall estimate of the subject's sense of agency or "perceived control". Higher scores indicated higher levels of agency or self direction.
Conscientiousness	Self-administered Questionnaire	Five questions asked about a participant's propensity to be organized, responsible, hardworking, careless (reverse-scored), and thorough, using a 4-point likert scale, ranging from "a lot" to "not at all". A high score on this scale indicated that a woman viewed herself as highly conscientious.
Optimism	Self-administered Questionnaire	Six items estimating optimism and pessimism were combined into an overall optimism variable. Questions assessed the valance (positive v. negative) of participants' expectations for their future and their general life orientation, using a 5-point scale ranging from low (1) to high (5) agreement with statements. Higher scores indicated more optimism.
Self Esteem	Self-administered Questionnaire	Subjects indicated their agreement with seven questions measuring the construct self esteem, using a scale ranging from 1 ("strongly agree") to 7 ("strongly disagree"). Higher scores corresponded to higher self esteem.
Psychological Well-Being Scale: Autonomy Environmental Mastery Personal Growth Positive Relations Purpose in Life Self Acceptance	Self-administered Questionnaire	Items used to derive the variables (7 items per 6 variables for a total of 42 items) were coded from 1 ("strongly agree") to 7 ("strongly disagree"). For each of the six subscales, high scores suggested that women view themselves as possessing the characteristic.
Mood, Level of Satisfaction and Self-Evaluation of Health		
Positive and Negative Affect Schedule (PANAS) PANAS Positive affect PANAS Negative affect	Self-administered Questionnaire	Subjects indicated how often adjectives described their affective state (e.g., how often they felt enthusiastic or irritable), using a 5-point scale ranging from 1 ("all of the time") to 5 ("none of the time"). Two variables were obtained: PANAS Negative Affect and PANAS Positive Affect with higher scores indicating frequent experience of the affective state.

Supplementary Table A (Continued). Detailed variable descriptions

Variable and Variable Category	Obtained from	Description
Mood, Level of Satisfaction and Self-Evaluation of Health (continued)		
Depression: Composite International Diagnostic Interview – Short Form	Telephone Interview	A continuous depression and anhedonia score was derived from questions asking subjects whether or not they experienced symptoms of depression and anhedonia during the past year. The range of possible scores was from 0 to 7, with higher scores corresponding to more depressed affect.
Anxiety: Composite International Diagnostic Interview – Short Form	Telephone Interview	Ten questions assessed the frequency of subjects' anxiety symptoms over the past year. Subjects indicated how often they experienced symptoms, using a four point scale where 1 meant "most days" and 4, "never." The score indicated the number of "most days" responses, such that higher scores signified greater levels/frequency of anxiety symptoms.
Overall Life Satisfaction	Self-administered Questionnaire	In five questions respondents were asked to describe their satisfaction with their work, health, relationship with spouse/partner, relationship with children, and their life overall. Answers were coded from 0 (the worst possible) to 10 (the best possible), and combined into as overall mean score with higher scores reflecting higher levels of satisfaction.
Physical Health Self-Evaluated	Telephone Interview	In a single question, participants were asked to rate their physical health using a bi-directional 5-point scale, where 1 described "poor health" and 5 "excellent health".
Health Related Behaviors		
Vitamin and Supplement use	Self-administered Questionnaire	Participants provided yes/no responses, indicating if they used multivitamins, Vitamin C, iron or calcium supplements, and fish oil regularly. Regular use was defined as at least a "couple of times" a week.
Routine Preventative Care	Self-administered Questionnaire	Subjects reported how many times in the past year they received routine physical, dental and optical examinations. Based on an assumption that routine care requires one to two annual visits to a provider, and that more or fewer visits was outside the range of typical preventative care, variables were recoded into three groups: 1) subjects who reported no health maintenance visits, 2) subjects completing one to two visits a year, and 3) a group who saw health care provides three or more times a year.
Physical Activity: Light activity level Moderate activity level Vigorous activity level	Self-administered Questionnaire	Subjects reported how often they engaged in light, moderate and strenuous activity at work, during daily chores, and during their leisure time. For each setting they indicated activity frequency for both winter and summer, using a six point scale with 1 indicating "several times a week" and 6 "never". Activity frequency across the three settings and the two time periods (winter and summer) was totaled separately for light, moderate and vigorous activity levels. The overall scores for physical activity were reversed so that higher scores represented more frequent and more strenuous activity across a variety of settings (e.g., work and leisure) and seasons.
Mental Activity	Self-administered Questionnaire	A mental activity variable summarized answers to six questions asking how often the subject engaged in specific activities, such as reading, attending educational lectures, and completing crossword puzzles. A six point scale was used, ranging from a score of 1 indicating "daily engagement" to 6 for "never," and was reversed so that higher scores indicated greater participation in mental activities.
Smoking	Telephone Interview	Using a yes or no response, subjects were asked if they had ever smoked cigarettes regularly. This variable was selected over questions asking about current smoking habits, in order to assess the behavioral factor over the subject's lifetime.
Alcohol Use	Telephone Interview	A categorical variable was derived to characterize alcohol use. An initial "problem drinker" group was derived using a constructed variable characterizing whether the subject reported social or occupation problems due to her alcohol use. This variable was labeled as either a positive or negative based on responses to four questions derived from an alcohol screening tool. Subjects not categorized as problem drinkers were further divided in one of four groups. Groups included teetotalers (never used alcohol), light drinkers (consume less than one drink a week), moderate drinkers (consumes more than two drinks a month and \leq two a day), and heavy drinkers (consumes alcohol more than three times a week and $>$ three drinks a day).

Supplementary Table A (Continued). Detailed variable descriptions

Variable and Variable Category	Obtained from	Description
Physical Health and Medical History		
Current Health: Experienced or being treated for High Blood Pressure Experienced or being treated for Diabetes Hospitalized overnight in past 12 months	Self-administered Questionnaire	To estimate current health, subjects were asked if in the past year they have experienced or been treated for high blood pressure or diabetes. Additionally, participants were asked if they were hospitalized over night for any reason in the past 12 months.
Overall Physical Disability due to health	Self-administered Questionnaire	Ten questions asked subjects to rate the degree to which their health limits their ability to engage in activities. Responses ranged from 1 (a lot) to 4 (not at all). A summary score, adding responses to ten questions was derived. Scores were reversed so that higher scores reflect greater disability due health.
Number of prescription medications	Self-administered Questionnaire	The total number of prescription medications was derived based on subject's responses to a series of yes/no questions. Answers were totaled, resulting in a continuous variable with higher numbers corresponding to more medications.
Past Medical History: Self reported history of stroke Self reported history of heart attack Self reported history of head injury Self reported history of cancer	Telephone Interview	Subjects indicated (as yes/no) whether they had ever had a stroke, heart attack, head injury or cancer.