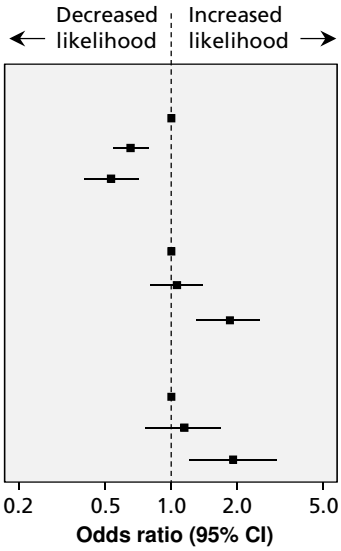
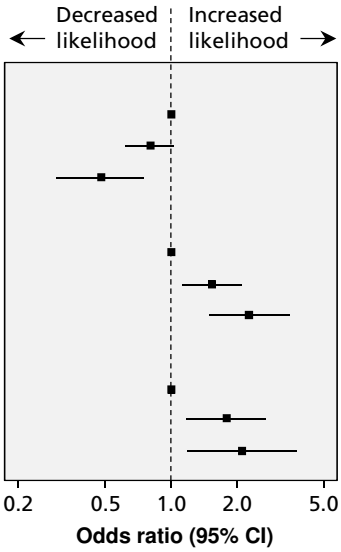
A: CRP level at baseline

Outcome; CRP level	No. of events, *n*/*N*	OR (95% CI)
Successful aging		
Low	439/1483	1.00 (ref)
Intermediate	204/1040	0.65 (0.54–0.79)
High	78/521	0.53 (0.40–0.71)
CVD event		
Low	136/1427	1.00 (ref)
Intermediate	106/989	1.06 (0.81–1.40)
High	79/481	1.84 (1.31–2.57)
Non-CVD death		
Low	56/1347	1.00 (ref)
Intermediate	51/934	1.14 (0.76–1.69)
High	40/442	1.92 (1.21–3.04)



B: CRP level over 5-yr exposure period

Outcome; no. of times CRP level was high	No. of events, *n*/*N*	OR (95% CI)
Successful aging		
0	602/2334	1.00 (ref)
1	94/484	0.80 (0.62–1.04)
2	25/226	0.48 (0.30–0.75)
CVD event		
0	217/2241	1.00 (ref)
1	64/449	1.54 (1.13–2.11)
2	40/207	2.27 (1.49–3.47)
Non-CVD death		
0	93/2117	1.00 (ref)
1	35/420	1.79 (1.17–2.72)
2	19/186	2.11 (1.19–3.74)



Appendix 4: Multivariable logistic regression of associations between C-reactive protein (CRP) levels at baseline (A) and over a 5-year exposure period (B) and subsequent aging phenotypes at 10-year follow-up. Aging phenotypes were: successful aging (v. normal aging, cardiovascular disease [CVD] event and non-CVD death phenotypes combined), total *n* = 3044; CVD event (v. successful and normal aging phenotypes combined), total *n* = 2897 (excludes 147 participants who died of non-CVD causes); and non-CVD death (v. successful and normal aging phenotypes combined), total *n* = 2723 (excludes 321 participants who had fatal or nonfatal CVD event). For model A, CRP levels were separated into 3 categories: low (< 1 mg/L), intermediate (1–3 mg/L) and high (> 3 mg/L). For model B, CRP was measured twice (5 yr before baseline and at baseline); 0 = neither measurement was high, 1 = either measurement was high, 2 = both measurements were high. Odds ratios (ORs) were adjusted for sex, age, socioeconomic status, smoking status, physical activity, acute inflammation and use of anti-inflammatory drugs. Values greater than 1.0 indicated an increased likelihood of the outcome. CI = confidence interval, ref = reference group.

Appendix to: Akbaraly TN, Hamer M, Ferrie JE, et al. Chronic inflammation as a determinant of future aging phenotypes. *CMAJ* 2013. DOI:10.1503/cmaj.122072.