Supplementary Table 2. Cox Proportional-Hazard models for the prediction of incident coronary heart disease or incident congestive heart failure, based on metabolic syndrome, diabetes and quartiles of pulmonary function tests

Model	Variable	Relative risk (95% CI)	p Value	Covariates
Predict CHD incidence*				
Forced Vital Capacity	FVC% predicted (>=103.8%)	1.0		age, sex, center, albuminuria, hypertension
	FVC% predicted (93.4-103.8%)	1.0 (0.8-1.2)	0.82	high non-HDL cholesterol, smoking
	FVC% predicted (82.8-93.4%)	1.0 (0.8-1.3)	0.94	
	FVC %predicted (<82.8%)	1.1 (0.8-1.3)	0.68	
	MS vs. Normal	1.2 (0.9-1.6)	0.24	
	DM vs. Normal	2.4 (1.8-3.1)	<0.01	
Forced Expiratory	FEV1% predicted (>=103.4%)	1.0		age, sex, center, albuminuria, hypertension
Volume in 1 second	FEV1% predicted (92.9-103.4%)	0.9 (0.7-1.1)	0.38	high non-HDL cholesterol, smoking
	FEV1% predicted (81.6-92.9%)	1.1 (0.8-1.3)	0.66	
	FEV1 %predicted (<81.6%)	1.0 (0.8-1.2)	0.91	
	MS vs. Normal	1.2 (0.9-1.6)	0.23	
	DM vs. Normal	2.4 (1.8-3.1)	<0.01	
Predict CHF incidence*				
Forced Vital Capacity	FVC% predicted (>=103.8%)	1.0		age, center, albuminuria, hypertension
	FVC% predicted (93.4-103.8%)	1.3 (0.8-2.0)	0.28	
	FVC% predicted (82.8-93.4%)	1.9 (1.3-2.9)	<0.01	
	FVC %predicted (<82.8%)	2.1 (1.4-3.2)	<0.01	
	MS vs. Normal	0.9 (0.5-1.5)	0.59	
	DM vs. Normal	1.9 (1.2-3.0)	<0.01	
Forced Expiratory	FEV1% predicted (>=103.4%)	1.0		age, center, albuminuria, hypertension
Volume in 1 second	FEV1% predicted (92.9-103.4%)	1.8 (1.2-2.8)	<0.01	
	FEV1% predicted (81.6-92.9%)	1.8 (1.2-2.8)	<0.01	
	FEV1 %predicted (<81.6%)	2.2 (1.5-3.4)	<0.01	
	MS vs. Normal	0.9 (0.6-1.5)	0.77	
	DM vs. Normal	2.1 (1.3-3.2)	<0.01	

CHD: coronary heart disease; CHF: congestive heart failure. Models were reduced by stepwise selection; pulmonary function, DM, MS were

forced into the model. *Covariates considered were demographic factors, hypertension, high non-HDL cholesterol, albuminuria; all covariates

were candidates for removal; covariates remained significant (p≤0.05) shown in the table.