SUPPLEMENTAL MATERIAL

Supplement I: Flow diagram for Participant Inclusion



As is typically seen in longitudinal epidemiological studies, the 2650 subjects included in our analysis were healthier than the entire MESA sample. They were younger, had higher education levels, less diabetes mellitus, lower blood pressure, lower body-mass index, and fewer smoked. Since the subjects analyzed were healthier, our analyses would be expected to create a bias towards the null.

Supplement II: Measurement of Carotid Distensibility and Young's Elastic Modulus

The carotid distensibility coefficient (DC) was calculated as:

$$DC = \frac{(Ds^2 - Dd^2)}{\Delta p \cdot Dd^2}$$

Ds represents the internal arterial diameter at peak systole, *Dd* represents the internal diameter at end-diastole, and Δp represents the difference between the systolic and diastolic measurements (pulse pressure).¹ Young's elastic Modulus (YEM), the ratio of stress and circumferential strain in the arterial wall, was calculated as:

$$YEM = \left(\frac{\frac{Dd}{h}}{DC}\right)$$

Dd is the arterial diameter at end-diastole, *h* is the arterial wall thickness at end-diastole (external carotid artery diameter minus internal carotid artery diameter).^{1, 2} YEM and DC are inversely related, thus increased arterial stiffness corresponds to a lower DC and a higher YEM. The derived wall thickness (h) was strongly correlated with the far wall carotid IMT values measured directly using a semi-automated border detection program (r=0.78, p <0.001).

Supplement III: Intra- and Inter-reader Reproducibly

Reproducibility measurements were performed by a single reader with 25 representative images selected from each field center. Reproducibility was excellent: p<0.0001 for all measurements: internal end-diastolic diameter (r=0.998), peak systolic internal diameter (r=0.998), end-diastolic external diameter (r=0.997), change in diameter (r=0.925) and wall thickness (r=0.989). Approximately 90% of readings were performed by two readers. Interreader correlations were 0.99 for all 3 diameter measurements and 0.96 for wall thickness. The means and standard deviations of the differences in blinded re-readings are below:

| Intra-reader differences | Differences, reading 1 - reading 2 | | | | | |
|--------------------------|---------------------------------------|---------------------------------------|---------------------------------------|-----------------------|-----------|--|
| | Peak Systolic Internal Diameter | End-Diastolic Internal Diameter | End-Diastolic External Diameter | Change in Diameter | Thickness | |
| Mean (mm) | 0.0089 | 0.0178 | 0.0409 | -0.0089 | 0.0231 | |
| SD (mm) | 0.0561 | 0.0488 | 0.0655 | 0.0636 | 0.0492 | |
| Inter-reader differences | Differences, reader 1 - reader 2 | | | | | |
| Mean (mm) | 0.064 | 0.055 | 0.122 | 0.009 | 0.067 | |
| SD (mm) | 0.070 | 0.058 | 0.075 | 0.062 | 0.090 | |

The intra-reader intra-class correlation coefficient for intra-reader wall thickness was 0.98 and for delta diameter it was 0.85. The inter-reader intra-class correlation coefficients were very similar; for intra-reader wall thickness it was 0.92 and for delta diameter it was 0.87. Of note, each reader read both sets of distensibility studies for each subject, so there is no bias by reader within subjects, which is the basis of all of our analyses

Paired, blinded measurements of the diameter of an ultrasound phantom containing a simulated blood vessel showed mean (standard deviation) diameters of 3.47 (0.02) mm for digitized videotape and 3.47 (0.01) mm for digitized video stream (p=0.660). The size of a digitized pixel using the Medical Digital Recording device was 0.056 mm. A systematic bias of < 1/2 digital pixel (0.028 mm) was statistically rejected using the two, one-sided t-test, thus demonstrating equivalence of both measurements using digitized videotape and digitized video stream.^{3,4} Based on these findings and the visual appearance of essentially superimposable images from digitized videotape and video stream, even if a very small bias existed, it would not affect the relationships between the covariates (it only would affect the absolute values of the measurements).

Data Supplement IV

Supplementary Table IV-A: Multivariable Linear Regression Models for Change in Distensibility Coefficient (DC) without Adjustment for Baseline DC

| Significant Predictors | Me | en | Women | | |
|-----------------------------|---|---------|---|---------|--|
| | Beta (10 ⁻³ mm Hq ⁻¹) | P-value | Beta (10 ⁻³ mm Hg ⁻¹) | P-value | |
| Age | 0.0076 | 0.04 | 0.0003 | 0.95 | |
| Baseline systolic blood | 0.0049 | 0.01 | 0.0074 | <0.001 | |
| pressure | | | | | |
| Total cholesterol, mg/dL | 0.0023 | 0.02 | -0.0003 | 0.72 | |

Models were adjusted for baseline distensibility coefficient, age, ethnicity, education, diabetes mellitus, smoking, total and high-density lipoprotein cholesterol, body-mass index, systolic blood pressure, antihypertensive treatment, and menopausal status (in models restricted to females).

Supplementary Table IV-B: Multivariable Linear Regression Models for Change in Young's Elastic Modulus (YEM) without Adjustment for Baseline YEM

| Significant Predictors | Men | | Women | | |
|--|----------------|---------|----------------|---------|--|
| | Beta (mmHg) | P-value | Beta (mmHg) | P-value | |
| Age | 12.5 | 0.003 | 10.9 | 0.03 | |
| High school graduate | 84.3 | 0.56 | -408.4 | 0.001 | |
| Greater than high school education | -31.7 | 0.80 | -258.2 | 0.03 | |

Models were adjusted for baseline Young's Elastic Modulus, age, ethnicity, education, diabetes mellitus, smoking, total and high-density lipoprotein cholesterol, body-mass index, systolic blood pressure, antihypertensive treatment, and menopausal status (in models restricted to females).

| | Caucasian | Chinese | African | Hispanic | P-value |
|---|--------------|--------------|--------------|--------------|---------|
| | | | American | | |
| Number (%) | 498 (40.3) | 195 (15.8) | 275 (22.2) | 268 (21.7) | |
| Age (years) | 60.2 (9.2) | 60.9 (9.4) | 59.6 (9.1) | 59.1 (9.7) | 0.17 |
| Blood pressure parameters | | | | | |
| Systolic blood pressure | 122.3 (17.2) | 122.3 (18.5) | 127.6 (18.5) | 122.4 (18.4) | <0.001 |
| Diastolic blood pressure | 74.1 (8.8) | 75.5 (9.5) | 77.5 (9.0) | 74.6 (9.0) | <0.001 |
| Hypertension (%) | 183 (36.8) | 73 (37.4) | 148 (53.8) | 88 (32.8) | <0.001 |
| Use of antihypertensive | 151 (30.3) | 52 (26.7) | 120 (43.6) | 69 (25.8) | <0.001 |
| medications (%) | | | | | |
| Lipids (mg/dL) | | | | | |
| Total cholesterol | 186.7 (32.1) | 187.6 (30.1) | 183.5 (35.8) | 192.2 (35.6) | 0.03 |
| High-density lipoprotein | 44.6 (11.3) | 46.1 (11.8) | 46.6 (12.7) | 42.4 (9.4) | <0.001 |
| cholesterol | | | | | |
| Lipid-lowering meds (%) | 106 (21.3) | 25 (12.8) | 41 (14.9) | 33 (12.3) | 0.003 |
| BMI (kg/m²) | 27.7 (3.7) | 24.0 (3.0) | 28.4 (4.2) | 28.2 (3.8) | <0.001 |
| Diabetes mellitus status (%) | 22 (4.4) | 24 (12.3) | 33 (12.0) | 40 (14.9) | <0.01 |
| Impaired fasting glucose | 58 (11.7) | 45 (23.1) | 42 (15.3) | 39 (14.6) | |
| Untreated | 6 (1.2) | 5 (2.6) | 9 (3.3) | 5 (1.9) | |
| Treated | 16 (3.2) | 19 (9.7) | 24 (8.7) | 34 (12.7) | |
| Smoking (%) | | | | | <0.001 |
| Former | 230 (46.2) | 70 (35.9) | 127 (46.2) | 112 (41.8) | |
| Current | 49 (9.8) | 13 (6.7) | 44 (16.0) | 39 (14.6) | |
| Education | | | | | <0.001 |
| Less than high school | 9 (1.8) | 29 (14.9) | 15 (5.5) | 96 (35.8) | |
| education | | | | | |
| High school graduate | 57 (11.5) | 19 (9.7) | 42 (15.3) | 50 (18.7) | |
| Greater than high school | 432 (86.8) | 147 (75.4) | 218 (79.3) | 122 (45.5) | |
| education | | | | | |
| Income (annual) | | | | | <0.001 |
| Less than \$20,000 | 28 (5.6) | 56 (28.7) | 27 (9.8) | 72 (26.9) | |
| Up to \$39,000 | 65 (13.1) | 38 (19.5) | 63 (22.9) | 92 (34.3) | |
| Up to \$74,999 | 153 (30.7) | 50 (25.6) | 99 (36.0) | 77 (28.7) | |
| Greater than \$75,000 | 252 (50.6) | 51 (26.2) | 86 (31.3) | 27 (10.1) | |
| Distensibility Coefficient at | 3.3 (1.2) | 2.9 (1.1) | 2.9 (1.2) | 2.9 (1.2) | <0.001 |
| Exam 1 (10 ⁻³ mmHg ⁻¹) | | | | | |
| Δ Distensibility Coefficient | -0.42 (1.2) | -0.48 (1.0) | -0.40 (1.1) | -0.35 (1.1) | 0.65 |
| (10 ⁻³ mmHg ⁻¹) | | | | | |
| Young's Elastic Modulus at | 1488 (761) | 1750 (958) | 1662 (1095) | 1746 (965) | <0.001 |
| Exam 1 (mmHg) | | | | | |
| Δ Young's Elastic Modulus | 172 (1080) | 220 (1061) | 173 (1649) | 83 (1159) | 0.67 |
| (mmHg) | | | | | |
| Carotid wall thickness (cm) | 0.074 | 0.072 | 0.080 | 0.074 | <0.001 |
| | (0.015) | (0.016) | (0.016) | (0.016) | |
| Peak systolic internal | 0.661 | 0.643 | 0.656 | 0.646 | 0.01 |
| diameter (cm) | (0.075) | (0.080) | (0.083) | (0.065) | |
| End-diastolic internal | 0.611 | 0.602 | 0.610 | 0.603 | 0.28 |
| diameter (cm) | (0.070) | (0.073) | (0.078) | (0.060) | |

Supplementary Table IV-C. Male Participant Characteristics by Race/Ethnicity

| | Caucasian | Chinese | African | Hispanic | P-value |
|---|--------------|--------------|--------------|--------------|---------|
| | | | American | | |
| Number (%) | 541 (38.3) | 185 (13.1) | 385 (27.2) | 303 (21.4) | |
| Age (years) | 59.7 (9.4) | 60.1 (9.2) | 59.9 (9.2) | 59.7 (9.7) | 0.96 |
| Blood pressure parameters | | | | | |
| Systolic blood pressure | 118.9 (20.9) | 121.0 (21.4) | 129.5 (20.3) | 124.0 (22.1) | <0.001 |
| Diastolic blood pressure | 66.2 (9.8) | 68.8 (10.5) | 72.5 (9.6) | 68.1 (9.1) | <0.001 |
| Hypertension (%) | 196 (36.2) | 61 (33.0) | 215 (55.8) | 130 (42.9) | <0.001 |
| Use of antihypertensive | 146 (27.0) | 44 (23.8) | 180 (46.8) | 102 (33.7) | <0.001 |
| medications (%) | | . , | · · · | · · · | |
| Lipids (mg/dL) | | | | | |
| Total cholesterol | 203.2 (35.4) | 195.7 (32.6) | 194.7 (33.5) | 203.6 (37.0) | <0.001 |
| High-density lipoprotein | 59.6 (15.8) | 53.6 (13.6) | 58.3 (15.3) | 54.8 (15.1) | <0.001 |
| cholesterol | | | | | |
| Lipid-lowering meds (%) | 72 (13.3) | 24 (13.0) | 58 (15.1) | 41 (13.5) | 0.86 |
| BMI (kg/m ²) | 27.2 (5.6) | 23.8 (3.2) | 30.5 (5.9) | 28.9 (4.9) | <0.001 |
| Diabetes mellitus status (%) | 14 (2.3) | 14 (7.6) | 46 (12.0) | 35 (11.6) | <0.001 |
| Impaired fasting glucose | 37 (6.8) | 22 (11.9) | 37 (9.6) | 37 (12.2) | |
| Untreated | 2 (0.4) | 2 (1.1) | 5 (1.3) | 8 (2.6) | |
| Treated | 12 (2.Ź) | 10 (5.4́) | 39 (10.1) | 27 (8.9) | |
| Smoking (%) | | | | | <0.001 |
| Former | 206 (38.1) | 4 (2.2) | 124 (32.2) | 67 (22.1) | |
| Current | 63 (11.7) | 3 (1.6) | 55 (14.3) | 31 (10.2) | <0.001 |
| Education | | · · · · · | | | |
| Less than high school | 15 (2.8) | 51 (27.6) | 21 (5.5) | 127 (41.9) | < 0.001 |
| education | | 0. (0) | _: (0.0) | (| |
| High school graduate | 100 (18 5) | 37 (20.0) | 76 (19 7) | 69 (22 8) | 0.52 |
| Greater than high school | 426 (78.7) | 97 (52 4) | 288 (74 8) | 107 (35.3) | <0.02 |
| education | 120 (1011) | 07 (02.1) | 200 (1 1.0) | | \$0.001 |
| Income (annual) | | | | | <0.001 |
| Less than \$20,000 | 48 (8.9) | 74 (40.0) | 60 (15.6) | 124 (40.9) | |
| Up to \$39,000 | 128 (23.7) | 46 (24.9) | 134 (34.8) | 112 (37.0) | |
| Up to \$74,999 | 183 (33.8) | 29 (15.7) | 134 (34.8) | 55 (18.2) | |
| Greater than \$75,000 | 182 (33.6) | 36 (19.5) | 57 (14.8) | 12 (4.0) | |
| Distensibility Coefficient at | 3.4 (1.3) | 3.1 (1.3) | 2.9 (1.2) | 3.0 (1.3) | <0.001 |
| Exam 1 (10^{-3} mmHg ⁻¹) | | () | | | |
| Δ Distensibility Coefficient | -0.47 (1.2) | -0.37 (1.2) | -0.33 (1.1) | -0.33 (1.0) | 0.22 |
| $(10^{-3} \text{ mmHg}^{-1})$ | | | | (-) | - |
| Young's Elastic Modulus at | 1388 (874) | 1716 (1038) | 1607 (969) | 1635 (852) | <0.001 |
| Exam 1 (mmHg) | (| , , | | ~ / | |
| Δ Young's Elastic Modulus | 156 (1050) | 229 (1677) | 242 (1537) | 85 (989) | 0.39 |
| (mmHg) | , | | | | |
| Carotid wall thickness (cm) | 0.071 | 0.070 | 0.077 | 0.071 | < 0.001 |
| | (0.014) | (0.013) | (0.015) | (0.014) | |
| Peak systolic internal | 0.598 | 0.621 | 0.603 | 0.601 | <0.001 |
| diameter (cm) | (0.061) | (0.074) | (0.068) | (0.059) | |
| End-diastolic internal | 0.549 | 0.577 | 0.559 | 0.556 | <0.001 |
| diameter (cm) | (0.057) | (0.070) | (0.065) | (0.056) | |

Supplementary Table IV-D. Female Participant Characteristics by Race/Ethnic Group

Supplement References

- Laurent S, Cockcroft J, Van Bortel L, Boutouyrie P, Giannattasio C, Hayoz D, Pannier B, Vlachopoulos C, Wilkinson I, Struijker-Boudier H. Expert consensus document on arterial stiffness: Methodological issues and clinical applications. Eur Heart J. 2006;27:2588-2605
- 2. Reneman RS, Meinders JM, Hoeks AP. Non-invasive ultrasound in arterial wall dynamics in humans: What have we learned and what remains to be solved. Eur Heart J. 2005;26:960-966
- 3. Hsu J, Hwang J, Liu H-K, Ruberg S. Confidence intervals associated with tests for bioequivalence. Biometrika 1994;81:103-114.
- 4. Chow S, Liu J. Design and analysis of bioequivalence studies. New York: Marcel Dekker; 1992.