Cardiovascular Disease Positive Findings					
Study	N, Gender, and Mean Age	PTSD Diagnostic & Assessment Methods	Description	Findings	
Lauterbach et al. 2005 (50)	National Comorbidity Survey +PTSD: 429 -PTSD: 5448 Gender: Full sample = 50% women + PTSD = 68.4% women Mean (SD) age years: Full sample 33.2 (10.7) + PTSD = 33.6 (9.8)	Modified version of the DSM-III- R PTSD module from the Diagnostic Interview Schedule (DIS)	Retrospective self- report. Primary outcome = self-report from checklist of medical disorders over preceding year	+ PTSD ↑ 12 of 14 physical disorders, including HTN and cardiac disorders. ulcer, as well as any health problem	
Sawchuk et al. 2005 (61)	People from Northern Plains tribe: 1414 +Lifetime PTSD: 208 -PTSD: 1206 Gender: + PTSD = 69% women - PTSD = 48% women Mean (95% CI) Age years: + PTSD = 37 (36-38) - PTSD = 34 (34-34)	DSM-IV criteria for PTSD using World Health Organization Composite International Diagnostic Interview	Protective Factors Project (AI- SUPERPFP)	12% + PTSD had CVD versus 5% - PTSD (p <.01) After adjusting for age, sex, and education, + PTSD OR for CVD = 2.4 (95% CI 1.4– 4.1). Adjusting for age, sex, and education, and CVD risk factors (diabetes, high blood pressure, smoking history, and a lifetime alcohol abuse/ Dependence) diagnosis + PTSD OR for CVD = 2.0 (95%CI 1.1–3.8)	

## Supplementary Table 2 PTSD and Heart/Cardiovascular Disease

Kang et al. 2006 (55)	WW II POWs: 19,442 +PTSD/+POW: 3,254 -PTSD/+POW: 16,188 +PTSD/-POW: 133 -PTSD/-POW: 9,595 Gender: All men Mean age years in 1991: POWs = 70.2 (SD not provided) Non-POW = 69.9 (SD not provided)	PTSD diagnoses determined by record review	Retrospective follow- up of healthcare utilization (1991-2000). Primary outcome: six ICD-9 categories	+PTSD/+POW versus +PTSD/ PTSD no significant differences in any CVD +PTSD/+POW versus – PTSD/-POW $\uparrow$ HTN (OR, 1.26; 95% CI, 1.16–1.37), and CIHD (OR, 1.13; 95% CI, 1.04–1.22) +PTSD/+POW versus – PTSD/+POW $\uparrow$ HTN (OR 1.25; 95% CI, 1.16–1.35), and CIHD (OR 1.19; 95% CI, 1.11–1.29)
Spiro et al. 2006 (58)	2262 male Veterans in Veterans Health Study +PTSD = 456 -PTSD 1455 MDD: 351 Mean age years" +PTSD: 56 -PTSD: 64 MDD: 61 (SDs not provided)	DSM-IV criteria were applied using information from the PTSD Checklist for Civilians (PCL-C), Traumatic Stress Scale, and the Combat Scale	Cross-sectional self- report Primary outcomes: Health status: SF-36 22 self-reported conditions or symptoms from the comorbidity index	PTSD reported an average of 7.1 comorbid medical conditions compared to 4.5 among those with neither PTSD or depression (p<.001) ORs (adjusted for age and depression) were significant (OR CI > 1.0) for angina, CHF, dermatitis, prostatitis, and stroke, but not for BP, diabetes, or enlarged prostate
Sledjeski et al. 2008 (62)	Individuals from the National Comorbidity Survey-Replication (NCS-R): 5366 +PTSD: 574 +trauma/-PTSD: 4054	Lifetime diagnosis via World Mental Health Survey Initiative Version of the World Health Organization Composite International Diagnostic Interview (WMH-CIDI).	Cross-sectional retrospective report Primary outcomes: 15 self-reported medical conditions	+ PTSD highest risk arthritis/ rheumatism, back/neck pain, headaches, chronic pain, <b>heart</b> <b>disease</b> , and ulcers; those - trauma had the lowest rates

	-trauma: 738 Gender : +PTSD = 75.0% women +trauma/-PTSD = 49.3% women - trauma = 59.1% women 3108 (52.8 weighted %) females and 2258 (47.2 weighted %) males Mean (SD) age years: +PTSD = 41.8 (0.8) +trauma/-PTSD = 45.2 (0.5) -trauma = 42.7 (1.1)			of chronic medical conditions, and traumatized individuals without PTSD fell in-between
Spitzer et al. 2009 (63)	Community German adults: 3171 +PTSD: 62 +trauma/-PTSD: 1669 -trauma/-PTSD: 1440 Gender: +PTSD = 67.7% women +trauma/-PTSD = 50.1% women - trauma = 53.6% women Mean (SD) age years: +PTSD = 55.2 (16.6) +trauma/-PTSD = 57.3 (15.7) - trauma = 1651 women (52.1%) and 1520 men (47.9%); mean age of 53.7 (15.1) years = 49.6 (13.2)	DSM-IV criteria per SCID PTSD Module	Cross sectional/ retrospective report Primary outcome: self-reported medical history as well as physical examination (for BP and BMI)	For + PTSD significant ORs included ↑ angina (OR 2.4), heart failure (OR 3.4), and peripheral artery disease (OR 2.5)
Glaesmer et al. 2011 (52)	Population sample of Germans ages 60-85 years old +PTSD: 67	PTSD diagnosed with Part 3 of the Posttraumatic Diagnostic Scale (PTDS) per DSM-IV criteria	Cross-sectional design. Primary outcome: Physical morbidity - #	+ PTSD ↑ risk "some" medical conditions relative to those – PTSD, <b>including</b> cardiovascular diseases,

	+trauma/-PTSD: 423 - trauma: 966 Gender: +PTSD = 53.7% women +trauma/-PTSD = 52.7% women - trauma = 52.2 % women Age: + PTSD or + trauma/- PTSD significantly older than – trauma (means not provided)		and severity of 21 common chronic conditions, plus an open category assessed via self- report questionnaire	and cardiovascular risk factors (HTN and cholesterol) – ORs ranged from 1.94 for peripheral vascular disease to 3.76 for elevated cholesterol
Pietrzak et al. 2012 (21)	Adults aged > 60 years in Wave 2	Lifetime PTSD diagnosis via NIAAA Wave 2 Alcohol Use Disorder and Associated Disabilities Interview Schedule-DSM-IV CVersion (AUDADIS-IV)	longitudinal study but present analyses	After adjustment for demographics and psychiatric comorbidity, full PTSD was associated with ↑ HTN, <b>angina pectoris</b> , <b>tachycardia, other heart</b> <b>disease</b> , stomach ulcer, gastritis, and arthritis (ORs=1.3 to 1.8). Partial PTSD was associated with increased odds of gastritis (OR=1.7), angina pectoris (OR=1.5), and arthritis (OR=1.4).
Vaccarino et al. 2013 (64)	Vietnam Era Twin Registry born between 1946 and 1956 with no baseline history of CHD: 562 (281 twin pairs) +PTSD: 137 -PTSD: 425	PTSD diagnosed in 1992 via DIS per DSM-III-R criteria (for 19 pairs DIS missing, so imputed based on MSC-PTSD score > 80) 15-item PTSD symptom scale also obtained in 1987	Prospective follow-up with median of 13- years. Primary outcome: CHD, other cardiovascular measures	69 twins developed CHD during follow-up; incidence of CHD 22.6% in twins with PTSD vs. 8.9% in those without PTSD (p <05)

Walczewska et al. 2011 (60)	+PTSD: 80 -PTSD: 70 Inclusion criteria for PTSD group: (1) born 1928 – 1941, (2) deportation to Siberia, (3) minimum duration deportation 5 yrs, (4) +PTSD HC group born in same era, and gender matched but: (1) no traumatic history, (2) no PTSD Gender: +PTSD = 50.0% women - PTSD = 50.0% women Mean (SD) Age years: + PTSD = 69.3 (5.9) - PTSD = 70.8 (4.9)	PTSD diagnosis established by direct interview verified using DSM-IV criteria Classified as mild, moderate, or severe	Cross-sectional design. Primary outcome: health status and cardiovascular risk. Detailed social, medical, and lifestyle history taken via patient report and chart review	<ul> <li>+ PTSD significantly ↑ CAD, diabetes; as well as SBP, DBP, fasting blood glucose, total cholesterol, LDL, and triglycerides</li> <li>HTN and CVD, more prevalent in + PTSD, but not reach statistical significance</li> </ul>
Crum-Cianflone et al. (66)	60,025 participants in the Millennium Cohort Study. +PTSD: 3,331 - PTSD: 56,694 Gender: +PTSD 34.4%, -PTSD 23.4% women Mean age at baseline 34.4 years (SD not specified)	PTSD determined as participants reporting moderate or higher level of at least 1 intrusion, 3 avoidance, and 2 hyperarousal symptoms, with a PCL-C score of ≥50.	Longitudinal survey data. Primary outcome: Newly reported CHD	+ PTSD associated ↑ CHD in age, sex, and race adjusted model (OR, 2.25; 95% CI 1.49–3.39). However, when adjusted for anxiety and depression, + PTSD no longer associated with new onset CHD (adjusted OR, 1.27; 95% CI, 0.76–2.12)