

Supplementary Data

The DCCT/EDIC Study Research Group

The following persons and institutions participated in the DCCT/EDIC Study Research Group:

Study Chairpersons—S. Genuth, D.M. Nathan, B. Zinman (vice-chair), O. Crofford (past)

Clinical Centers:

Albert Einstein College of Medicine—J. Crandall (past), M. Reid (past), J. Brown-Friday (past), S. Engel (past), J. Sheindlin (past), M. Phillips (past), H. Martinez (past), H. Shamoon (past), H. Engel (past)

Case Western Reserve University—R. Gubitosi-Klug, L. Mayer, S. Pendegast, H. Zegarra, D. Miller, L. Singerman, S. Smith-Brewer, M. Novak, J. Quin (past), Saul Genuth (past), M. Palmert (past), E. Brown (past), J. McConnell (past), P. Pugsley (past), P. Crawford (past), W. Dahms (deceased)

Weill Cornell Medical College—D. Brillon, M.E. Lackaye, S. Kiss, R. Chan, A. Orlin, M. Rubin, V. Reppucci (past), T. Lee (past), M. Heinemann (past), S. Chang (past), B. Levy (past), L. Jovanovic (past), M. Richardson (past), B. Bosco (past), A. Dwoskin (past), R. Hanna (past), S. Barron (past), R. Campbell (deceased)

Henry Ford Health System—F. Whitehouse, D. Kruger, J.K. Jones, P.A. Edwards, A. Bhan, J.D. Carey, E. Angus, A. Thomas, M. McLellan (past), A. Galprin (past)

International Diabetes Center—R. Bergenstal, M. Johnson, K. Gunyou, L. Thomas, J. Laechelt, P. Hollander (past), M. Spencer (past), D. Kendall (past), R. Cuddihy (past), P. Callahan (past), S. List (past), J. Gott (past), N. Rude (past), B. Olson (past), M. Franz (past), G. Castle (past), R. Birk (past), J. Nelson (past), D. Freking (past), L. Gill (past), W. Mestrezat (past), D. Etzwiler (deceased), K. Morgan (deceased)

Joslin Diabetes Center—L.P. Aiello, E. Golden, P. Arrigg, V. Asuquo, R. Beaser, L. Bestourous, J. Cavallerano, R. Cavicchi, O. Ganda, O. Hamdy, R. Kirby, T. Murtha, D. Schlossman, S. Shah, G. Sharuk, P. Silva, P. Silver, M. Stockman, J. Sun, E. Weimann, H. Wolpert, L.M. Aiello (past), A. Jacobson (past), L. Rand (past), J. Rosenzweig (past)

Massachusetts General Hospital—D.M. Nathan, M.E. Larkin, M. Christofi, K. Folino, J. Godine, P. Lou, C. Stevens, E. Anderson (past), H. Bode (past), S. Brink (past), C. Cornish (past), D. Cros (past), L. Delahanty (past), A. deManbey (past), C. Haggan (past), J. Lynch (past), C. McKittrick (past), D. Norman (past), D. Moore (past), M. Ong (past), C. Taylor (past), D. Zimbler (past), S. Crowell (past), S. Fritz (past), K. Hansen (past), C. Gauthier-Kelly (past)

Mayo Foundation—F.J. Service, G. Ziegler, R. Colligan (past), L. Schmidt (past), B. French (past), R. Woodwick (past), R. Rizza (past), W.F. Schwenk (past), M. Haymond (past), J. Pach (past), J. Mortenson (past), B. Zimmerman (deceased), A. Lucas (deceased)

Medical University of South Carolina—L. Luttrell, M. Lopes-Virella, S. Caulder, C. Pittman, N. Patel, K. Lee, M. Nutaitis, J. Fernandes, K. Hermayer, S. Kwon, A. Blevins, J. Parker, J. Colwell (past), D. Lee (past), J. Soule (past), P.

Lindsey (past), M. Bracey (past), A. Farr (past), S. Elsing (past), T. Thompson (past), J. Selby (past), T. Lyons (past), S. Yacoub-Wasef (past), M. Szpiech (past), D. Wood (past), R. Mayfield (past)

Northwestern University—M. Molitch, B. Schaefer, L. Jampol, A. Lyon, M. Gill, Z. Strugula, L. Kaminski, R. Mirza, E. Simjanoski, D. Ryan, C. Johnson, A. Wallia, S. Ajroud-Driss, P. Astelford, N. Leloudes, A. Degillio

University of California, San Diego—O. Kolterman, G. Lorenzi, M. Goldbaum, K. Jones (past), M. Prince (past), M. Swenson (past), I. Grant (past), R. Reed (past), R. Lyon (past), M. Giotta (past), T. Clark (past), G. Friedenberg (deceased)

University of Iowa—W.I. Sivitz, B. Vittetoe, J. Kramer, M. Bayless (past), R. Zeitler (past), H. Schrott (past), N. Olson (past), L. Snetselaar (past), R. Hoffman (past), J. MacIndoe (past), T. Weingeist (past), C. Fountain (past)

University of Maryland School of Medicine—D. Counts, S. Johnsonbaugh, M. Patronas, M. Carney, P. Salemi (past), R. Liss (past), M. Hebdon (past), T. Donner (past), J. Gordon (past), R. Hemady (past), A. Kowarski (past), D. Ostrowski (past), S. Steidl (past), B. Jones (past)

University of Michigan—W.H. Herman, C.L. Martin, R. Pop-Busui, D.A. Greene (past), M.J. Stevens (past), N. Burkhardt (past), T. Sandford (past), J. Floyd (deceased)

University of Minnesota—J. Bantle, N. Wimmegren, J. Terry, D. Koozekanani, S. Montezuma, B. Rogness (past), M. Mech (past), T. Strand (past), J. Olson (past), L. McKenzie (past), C. Kwong (past), F. Goetz (past), R. Warhol (past)

University of Missouri—D. Hainsworth, D. Goldstein, S. Hitt, J. Giangiacomo (deceased)

University of New Mexico—D.S. Schade, J.L. Canady, M.R. Burge, A. Das, R.B. Avery, L.H. Ketai, J.E. Chapin, M.L. Schluter (past) J. Rich (past), C. Johannes (past), D. Hornbeck (past)

University of Pennsylvania—M. Schutta, P.A. Bourne, A. Brucker, S. Braunstein (past), S. Schwartz (past), B.J. Mischak-Carey (past), L. Baker (deceased)

University of Pittsburgh—T. Orchard, L. Cimino, T. Songer, B. Doft, S. Olson, D. Becker, D. Rubinstein, R.L. Bergren, J. Fruit, R. Hyre, C. Palmer, N. Silvers (past), L. Lobes (past), P. Paczan Rath (past), P.W. Conrad (past), S. Yalamanchi (past), J. Wesche (past), M. Bratkowski (past), S. Arslanian (past), J. Rinkoff (past), J. Warnicki (past), D. Curtin (past), D. Steinberg (past), G. Vagstad (past), R. Harris (past), L. Steranchak (past), J. Arch (past), K. Kelly (past), P. Ostrosaka (past), M. Giuliani (past), M. Good (past), T. Williams (past), K. Olsen (past), A. Campbell (past), C. Shipe (past), R. Conwit (past), D. Finegold (past), and M. Zaucha (past), A. Drash (deceased)

University of South Florida—A. Morrison, J.I. Malone, M.L. Bernal, P.R. Pavan, N. Grove, E.A. Tanaka (past), D. McMillan (past), J. Vaccaro-Kish (past), L. Babbione (past), H. Solc (past), T.J. DeClue (past)

University of Tennessee—S. Dagogo-Jack, C. Wigley, H. Ricks, A. Kitabchi, E. Chaum, M.B. Murphy (past), S. Moser (past), D. Meyer (past), A. Iannacone (past), S. Yoser (past), M. Bryer-Ash (past), S. Schussler (past), H. Lambeth (past)

University of Texas Southwestern Medical Center at Dallas—P. Raskin, S. Strowig, M. Basco (past), S. Cercone (deceased)

University of Toronto—B. Zinman, A. Barnie, R. Devenyi, M. Mandelcorn, M. Brent, S. Rogers, A. Gordon, N. Bakshi, B. Perkins, L. Tuason, F. Perdikaris, R. Ehrlich (past), D. Daneman (past), K. Perlman (past), S. Ferguson (past)

University of Washington—J. Palmer, R. Fahlstrom, I.H. de Boer, J. Kinyoun, L. Van Ottingham, S. Catton (past), J. Ginsberg (past)

University of Western Ontario—J. Dupre, C. McDonald, J. Harth, M. Driscoll, T. Sheidow, J. Mahon (past), C. Canny (past), D. Nicolle (past), P. Colby (past), I. Hramiak (past), N.W. Rodger (past), M. Jenner (past), T. Smith (past), W. Brown (past)

Vanderbilt University—M. May, J. Lipps Hagan, A. Agarwal, T. Adkins, R. Lorenz (past), S. Feman (past), L. Servant (deceased)

Washington University, St. Louis—N.H. White, L. Levardoski, G. Grand, M. Thomas, D. Joseph, K. Blinder, G. Shah, D. Burgess (past), I. Boniuk (deceased), J. Santiago (deceased)

Yale University School of Medicine—W. Tamborlane, P. Gatcomb, K. Stoessel, P. Ramos, K. Fong, P. Ossorio, J. Ahern (past)

Clinical Coordinating Center:

Case Western Reserve University—R. Gubitosi-Klug, C. Beck, S. Genuth, J. Quin (past), P. Gaston (past), M. Palmert (past), R. Trail (past), W. Dahms (deceased)

Data Coordinating Center:

George Washington University, The Biostatistics Center—J. Lachin, P. Cleary, J. Backlund, I. Bebu, B. Braffett, L. Diminick, X. Gao, W. Hsu, K. Klumpp, M. Larsen, P. McGee (past), W. Sun (past), S. Villavicencio (past), K. Anderson (past), L. Dews (past), Naji Younes (past), B. Rutledge (past), K. Chan (past), D. Rosenberg (past), B. Petty (past), A. Determan (past), D. Kenny (past), C. Williams (deceased)

National Institute of Diabetes and Digestive and Kidney Diseases:

National Institute of Diabetes and Digestive and Kidney Diseases Program Office—C. Cowie, C. Siebert (past)

Central Units:

Central Biochemistry Laboratory (University of Minnesota)—M. Steffes, V. Arends, J. Bucksa (past), M. Nowicki (past), B. Chavers (past)

Central Carotid Ultrasound Unit (New England Medical Center)—D. O’Leary, J. Polak, A. Harrington, L. Funk (past)

Central ECG Reading Unit (University of Minnesota)—R. Crow (past), B. Gloeb (past), S. Thomas (past), C. O’Donnell (past)

Central ECG Reading Unit (Wake Forest School of Medicine)—E.Z. Soliman, Z.M. Zhang, Y. Li, C. Campbell, L. Keasler, S. Hensley, J. Hu, M. Barr, T. Taylor, R. Prineas (past)

Central Neurologic Reading Center (University of Michigan, Mayo Clinic, Southern Illinois University)—E.L. Feldman (past), J.W. Albers (past), P. Low (past), C. Sommer (past), K. Nickander (past), T. Speigelberg (past), M. Pfiefer (past), M. Schumer (past), M. Moran (past), J. Farquhar (past)

Central Neuropsychological Coding Unit (University of Pittsburgh)—C. Ryan (past), D. Sandstrom (past), T. Williams (past), M. Geckle (past), E. Cupelli (past), F. Thoma (past), B. Burzuk (past), T. Woodfill (past)

Central Ophthalmologic Reading Center (University of Wisconsin)—R. Danis, B. Blodi, D. Lawrence, H. Wabers, S. Gangaputra (past), S. Neill (past), M. Burger (past), J. Dingledine (past), V. Gama (past), R. Sussman (past), M. Davis (past), L. Hubbard (past)

Computed Tomography Reading Center (Harbor UCLA Research and Education Institute)—M. Budoff, S. Darabian, P. Rezaeian, N. Wong (past), M. Fox (past), R. Oudiz (past), L. Kim (past), R. Detrano (past)

Audiometry Reading Center (EpiSense, University of Wisconsin)—K. Cruickshanks, D. Dalton, K. Bainbridge (National Institute on Deafness and Other Communication Disorders)

Cardiac MR Reading Center (Johns Hopkins University, National Heart Lung and Blood Institute)—J. Lima, D. Bluemke, E. Turkbey, R. J. van der Geest (past), C. Liu (past), A. Malayeri (past), A. Jain (past), C. Miao (past), H. Chahal (past), R. Jarboe (past)

Editor, EDIC Publications—D.M. Nathan

Collaborators:

Advanced Glycation End Products (Case Western Reserve University)—V. Monnier, D. Sell, C. Strauch

Biomarkers (Cleveland Clinic)—S. Hazen, A. Pratt, W. Tang

Central Obesity Study (University of Washington)—J. Brunzell, J. Purnell

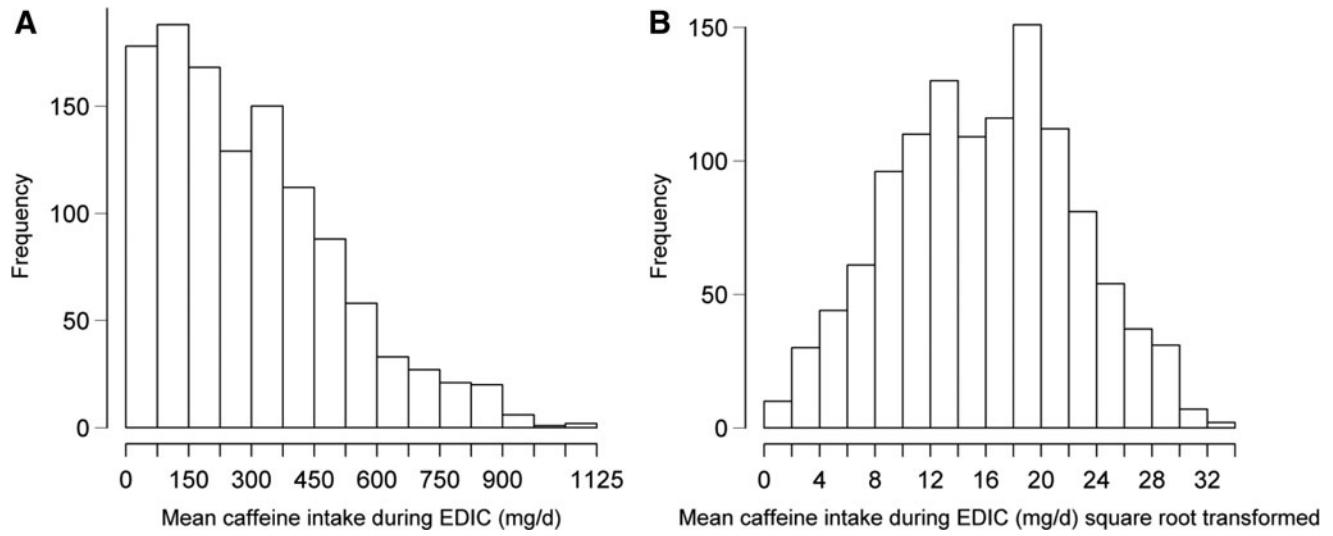
Epigenetics (Beckman Research Institute of City of Hope Medical Center)—R. Natarajan, F. Miao, L. Zhang, Z. Chen

Genetic Studies (Hospital for Sick Children)—A. Paterson, A. Boright, S. Bull, L. Sun, S. Scherer (past)

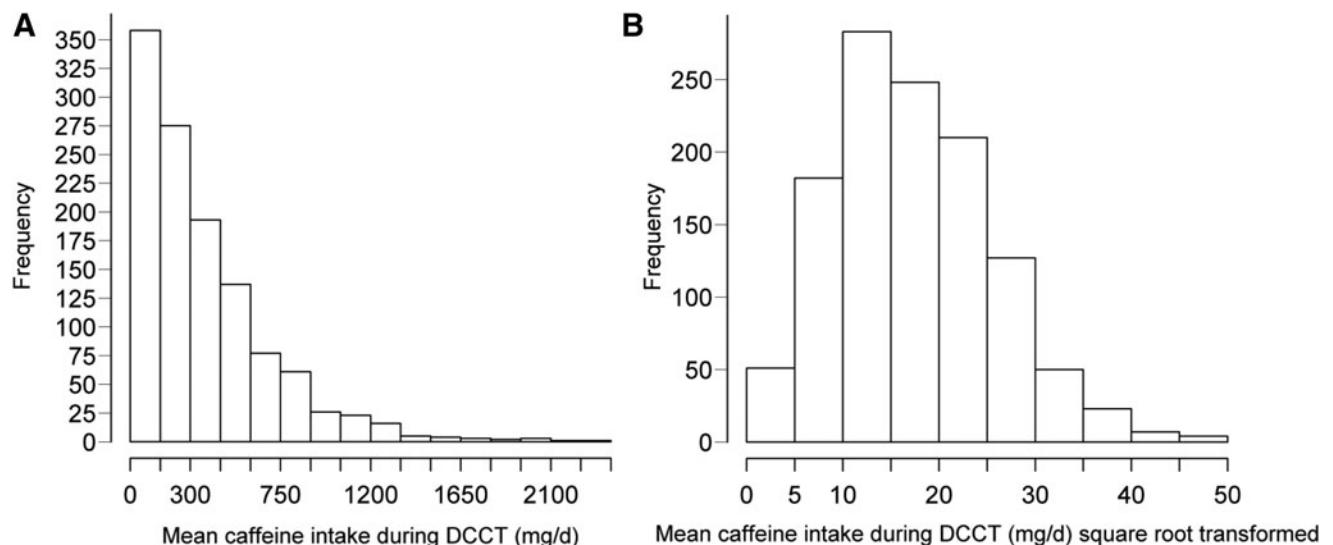
Molecular Risk Factors Program Project (Medical University of South Carolina)—M. Lopes-Virella, T.J. Lyons, A. Jenkins, R. Klein, G. Virella, A. Jaffa, R. Carter, J. Stoner, W.T. Garvey (past), D. Lackland (past), M. Brabham (past), D. McGee (past), D. Zheng (past), R. K. Mayfield (past)

SCOUT (VeraLight)—J. Maynard (past)

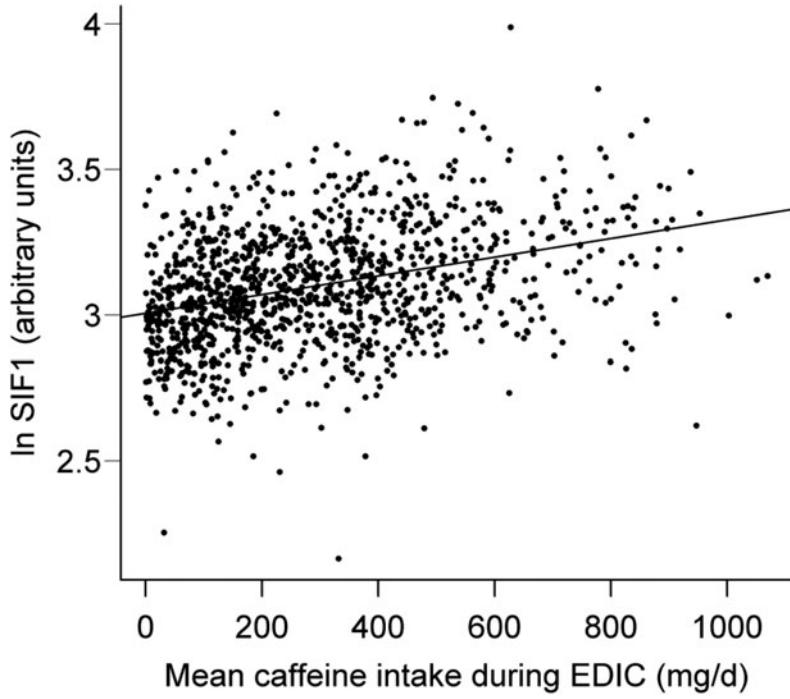
UroEDIC (University of Washington, University of Michigan)—H. Wessells, A. Sarma, A. Jacobson, R. Dunn, S. Holt, J. Hotaling, C. Kim, Q. Clemens, J. Brown (past), K. McVary (past)



SUPPLEMENTARY FIG. S1. Distribution of mean caffeine intake per person during the EDIC study ($n=1,181$): (A) raw and (B) square root transformed. The overall mean \pm SD caffeine intake per person was 295 ± 214 mg/day.



SUPPLEMENTARY FIG. S2. Distribution of mean caffeine intake per person during the DCCT ($n=1,185$): (A) raw and (B) square root transformed. The overall mean \pm SD caffeine intake per person was 369 ± 335 mg/day.



SUPPLEMENTARY FIG. S3. Scatterplot showing the positive association of mean caffeine intake during the EDIC study with \log_e transformed $SIF1_{LED}$ 375 nm[0.6, 0.2] ($n=1,181$). The solid line represents the slope from the unadjusted linear regression analysis.

SUPPLEMENTARY TABLE S1. UNIVARIATE AND MULTIVARIABLE EFFECTS OF COVARIATES ON $SIF1_{LED}$ 375 NM[0.6, 0.2] IN THE DCCT/EDIC STUDY

	Univariate model				Multivariable model		
	R ²	β	SE	P value	β	SE	P value
Age (years)	13.6%	0.011	0.00080	1.61E-39	0.011	0.00073	2.48E-50
Male versus female	0.0%	-0.0023	0.012	0.85	0.018	0.010	0.08
Skin tone (arbitrary units)	1.5%	0.00052	0.00012	2.79E-05	0.00087	0.00011	2.67E-15
Clinic latitude (>37° North vs. South)	1.7%	-0.060	0.013	9.05E-06	-0.056	0.011	5.01E-07
Current versus never smoker	6.9%	0.16	0.017	6.58E-20	0.15	0.015	6.32E-22
Current versus former smoker		0.12	0.019	4.13E-09	0.11	0.017	2.57E-10
Any eGFR <60 mL/min/1.73 m ² to date (yes vs. no)	5.6%	0.19	0.023	1.71E-16	0.11	0.020	2.27E-08
DCCT eligibility HbA1c (%)	1.6%	0.016	0.0037	9.87E-06	0.0064	0.0034	0.057
DCCT mean HbA1c (%)	1.1%	0.016	0.0043	2.28E-04	0.0089	0.0041	0.03
EDIC mean HbA1c (%)	6.3%	0.050	0.0056	1.62E-18	0.030	0.00534	2.01E-08

Data shown are $\beta \pm SE$ values from linear regression analysis for each covariate with ln transformed $SIF1_{LED}$ 375 nm[0.6, 0.2]. The R^2 shown is the variance explained for each variable in the univariate model. Multivariable models included age, sex, skin tone, clinic latitude, smoking status, any estimated glomerular filtration rate (eGFR) <60 mL/min/1.73 m², DCCT eligibility HbA1c, mean DCCT HbA1c, and mean EDIC HbA1c as covariates.

SUPPLEMENTARY TABLE S2. UNIVARIATE AND MULTIVARIABLE EFFECTS OF COVARIATES ON MEAN CAFFEINE INTAKE DURING THE EDIC STUDY

	Univariate model				Adjusted model		
	R ²	β	SE	P value	β	SE	P value
Age (years)	4.5%	0.20	0.027	1.89E-13	0.20	0.026	3.32E-14
Male versus female	1.9%	1.81	0.38	1.94E-06	1.67	0.37	7.69E-06
Skin tone (arbitrary units)	0.2%	-0.0060	0.0040	0.13	0.0042	0.0039	0.29
Clinic latitude (>37° North vs South)	0.0%	0.22	0.43	0.60	-0.10	0.40	0.80
Current versus never smoker	7.9%	4.19	0.55	8.62E-14	4.028	0.55	3.43E-13
Current versus former smoker		0.66	0.62	0.29	0.62	0.60	0.30
Any eGFR <60 mL/min/1.73 m ² to date (yes vs. no)	0.0%	0.34	0.75	0.65	-0.61	0.72	0.39
DCCT eligibility HbA1c (%)	0.1%	0.11	0.12	0.38	0.060	0.12	0.63
DCCT mean HbA1c (%)	0.0%	0.10	0.14	0.46	0.017	0.15	0.91
EDIC mean HbA1c (%)	1.1%	0.65	0.18	3.64E-04	0.42	0.19	3.03E-02

Data shown are $\beta \pm SE$ values from linear regression analysis for each covariate with square root transformed mean caffeine intake during the EDIC. The R² shown is the variance explained for each variable in the univariate model. Multivariable models included age, sex, skin tone, clinic latitude, smoking status, any estimated glomerular filtration rate (eGFR) <60 mL/min/1.73 m², DCCT eligibility HbA1c, mean DCCT HbA1c, and mean EDIC HbA1c as covariates.

SUPPLEMENTARY TABLE S3. ASSOCIATION OF CAFFEINE INTAKE DURING THE DCCT WITH SIF

SIF outcome (excitation wavelength), model	Variance	$\beta \pm SE$	P value
SIF1 (375 nm) ^a			
Unadjusted	11.8%	0.00021 ± 1.67E-05	4.2E-34
Adjusted	2.7%	0.00012 ± 1.64E-05	2.6E-12
SIF14 (456 nm) ^a			
Unadjusted	8.5%	0.00020 ± 1.93E-05	9.0E-25
Adjusted	2.3%	0.00012 ± 2.02E-05	2.6E-09

Data shown are $\beta \pm SE$ values from linear regression analysis for caffeine intake with SIF1_{LED} 375 nm[0.6, 0.2] and SIF14_{LED} 456 nm[0.4, 0.8] ($n=1,185$). Variance was calculated as a type II squared semipartial correlation. Adjusted models included age, sex, skin tone, clinic latitude, smoking status, any estimated glomerular filtration rate <60 mL/min/1.73 m², DCCT eligibility HbA1c, mean DCCT HbA1c, and mean EDIC HbA1c as covariates.

^aLn transformed.

SUPPLEMENTARY TABLE S4. ASSOCIATION OF MEAN CAFFEINE INTAKE DURING THE DCCT AND EDIC JOINTLY WITH SIF

<i>SIF outcome (excitation wavelength), model, predictor</i>	<i>Model R</i> ²	$\beta \pm SE$	<i>P value</i>
SIF1 (375 nm) ^a			
M1			
DCCT mean caffeine	13.4%	0.000128 ± 2.34E-05	5.34E-08
EDIC mean caffeine		0.00018 ± 3.67E-05	1.14E-06
M2			
DCCT mean caffeine	37.0%	4.74E-05 ± 2.13E-05	2.62E-02
EDIC mean caffeine		0.000157 ± 3.18E-05	9.16E-07
SIF14 (456 nm) ^a			
M1			
DCCT mean caffeine	11.4%	8.25E-05 ± 2.69E-05	2.18E-03
EDIC mean caffeine		0.000265 ± 4.21E-05	4.58E-10
M2			
DCCT mean caffeine	26.0%	2.58E-05 ± 2.62E-05	3.25E-01
EDIC mean caffeine		0.000219 ± 3.91E-05	2.85E-08

Data shown are $\beta \pm SE$ values from linear regression analyses for both mean caffeine intake during DCCT and EDIC with SIF1_{LED}_{375 nm[0.6, 0.2]} and SIF14_{LED}_{456 nm[0.4, 0.8]} ($n = 1,181$). M1 includes only DCCT and EDIC caffeine intake as predictors in the model. M2 is additionally adjusted for age, sex, skin tone, clinic latitude, smoking status, any estimated glomerular filtration rate <60 mL/min/1.73 m², DCCT eligibility HbA1c, mean DCCT HbA1c, and mean EDIC HbA1c as covariates.

^aLn transformed.

SUPPLEMENTARY TABLE S5. PROPORTION OF SUBJECTS REPORTING DRINKING CAFFEINATED BEVERAGES OR DECAFFEINATED COFFEE CONSUMPTION AT LEAST ONCE PER MONTH DURING EDIC YEARS 13–15

	<i>Caffeinated coffee (n = 1,074)</i>	<i>Decaffeinated coffee (n = 1,076)</i>	<i>Regular cola (n = 1,076)</i>	<i>Low-calorie cola (n = 1,074)</i>	<i>Tea (n = 1,073)</i>
Never or less than once per month	257 (23.93%)	723 (67.2%)	901 (83.7%)	194 (18.1%)	359 (33.5%)
At least once per month	817 (76.1%)	353 (32.8%)	175 (16.3%)	880 (81.9%)	714 (66.5%)

Data shown are n (%) for the mean intake of each beverage during EDIC Years 13–15.

SUPPLEMENTARY TABLE S6. SUBJECT CHARACTERISTICS OF THE PITTSBURGH EDC SUBJECTS WITH CAFFEINE INTAKE AND SIF MEASURES ($n=210$) TAKEN AT THE TIME OF SIF ASSESSMENT

	<i>Out of n = 210</i>
Demographic characteristic	
Male sex	101 (48.1%)
Age (years)	49.3 ± 7.3
Diabetes duration (years)	40.6 ± 7.0
Smoking status ^a	
Never	123 (58.6%)
Former	55 (26.2%)
Current	23 (11.0%)
Any eGFR < 60 mL/min/1.73 m ² to date (yes) ^b	60 (28.6%)
Glycemic exposure measured as mean HbA1c (%) (mmol/mol) ^c	8.6 ± 1.0 (70 ± 11)
Mean caffeine intake (mg/day)	294 ± 250
Time between caffeine intake assessment and SIF1 (years) ^d	18 ± 3.0
rs1495741 genotype (AA/AG/GG) ^e	101/68/11
SIF1 _{LED} 375nm, $k_x=0.6$, $km=0.2$ (arbitrary units) ^f	3.3 ± 0.24
SIF14 _{LED} 456nm, $k_x=0.4$, $km=0.8$ (arbitrary units) ^f	0.43 ± 0.24

Data are n (%) or mean \pm SD values as indicated.

^aSmoking status was defined by response to the question “Do you smoke cigarettes now?,” with “never smoker” defined as ≤ 100 cigarettes in a subject’s lifetime.

^bThe estimated glomerular filtration rate (eGFR) was estimated using the Chronic Kidney Disease–Epidemiology Collaboration equation from the 18-year examination.

^cMean HbA1c was calculated for each subject using repeated measures collected every 2 years from 1986–1988 to 1996–1998 and again during the 18-year exam (2004–2006).

^dThe minimum lag time between measures of caffeine intake during EDC and measures of SIF was 8 years.

^eThirty subjects did not have rs1495741 genotype data available.

^fLn transformed.

SUPPLEMENTARY TABLE S7. ASSOCIATION OF RS1495741 AND CAFFEINE INTAKE WITH SIF IN THE PITTSBURGH EDC STUDY

	<i>N (AA/AG/GG)</i>	<i>Predictors</i>	$\beta \pm SE$	<i>P value</i>
SIF1 (375 nm) ^a	180 (101/68/11)	rs1495741 Caffeine	-0.08 ± 0.02 0.0001 ± 0.00008	0.002 0.12
SIF14 (456 nm) ^a	140 (77/56/7)	rs1495741 Caffeine	-0.13 ± 0.03 0.0002 ± 0.00009	1.7E-05 0.004

Data shown are $\beta \pm SE$ values from linear regression analyses for the effects of rs1495741 and caffeine intake effects when both included in the same model with SIF1_{LED} 375 nm[0.6, 0.2] and SIF14_{LED} 456 nm[0.4, 0.8] after additionally adjusting for age, sex, smoking, and estimated glomerular filtration rate <60 mL/min/1.73 m². SIF14_{LED} 456 nm[0.4, 0.8] was not measured in participants who had SIF measured in 2007–2009; therefore only 140 subjects had genotype, caffeine, and SIF14_{LED} 456 nm[0.4, 0.8] measures available in those analyses.

^aLn transformed.