Online only supplementary material

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Supplementary references

Supplementary table 1: Characteristics of men and women identified as prevalent and incident PD cases in 2010.

	Prevalent cases							Incident cases						
Characteristics	Men (n=88,944)			Women (n=88,895)			Men (n=15,254)			Women (n=14,686)				
	No.	%	Mean (SD)	No.	%	Mean (SD)	No.	%	Mean (SD)	No.	%	Mean (SD)		
Age, years			74.7 (10.8)			77.0 (10.8)			73.4 (12.5)			75.0 (12.7)		
Neurologist visits														
≥ 1 visit	34,155	38.4		30,834	34.7		7,385	48.4		6,938	47.2			
No. of visits			2.4 (1.5)			2.3 (1.6)			1.8 (1.1)			1.7 (1.0)		
General practitioner visits														
≥ 1 visit	78,372	88.1		80,333	90.4		11,587	76.0		11,337	77.2			
No. of visits			5.8 (3.3)			6.3 (3.5)			3.5 (2.6)			3.9 (2.7)		
Proportion of time treated														
100%	75,627	85.0		75,629	85.1		12,381	81.2		11,143	82.7			
Mean			98.4 (6.5)			98.7 (5.6)			97.2 (9.2)			97.8 (7.8)		
Antiparkinsonian drug or class														
Type 1 dopamine agonists	24,418	27.5		20,936	23.6		3,182	20.9		3,225	22.0			
Mean daily dose ^b			221.0 (160.6)			192.4 (154.0)			128.9 (129.3)			116.0 (135.1)		
Cumulative LEDs ^b			70,691.1 (57,871.0)			60,741.2 (54,670.1)			23,065.5 (29,443.3)			20,541.9 (28,706.0)		
Type 2 dopamine agonists	2,105	2.4		1,715	1.9		86	0.6		59	0.4			
Amantadine (≥ 1 claim)	3,657	4.0		3,493	3.9		199	1.3		247	1.7			
Anticholinergic agents ^a	2,200	2.5		1,782	2.0		238	1.6		232	1.6			
COMT inhibitors	17,829	20.1		13,849	15.6		817	5.4		739	5.0			
Selegiline/Rasagiline	4,236	4.8		3,099	3.5		241	1.6		214	1.5			
Levodopa	79,028	88.9		80,127	90.1		12,268	80.4		11,804	80.4			
Mean daily dose ^b			474.3 (335.5)			410.1 (283.7)			290.4 (209.5)			281.8 (185.0)		
Cumulative LEDs ^b			159,757.0 (126,683.8)			137,897.4 (106,233.2)			51,594.0 (48,248.3)			51,110.9 (47,625.7)		
Piribedil	12,029	13.5		10,254	11.5		986	6.5		720	4.9			
Mean daily dose ^b			124.8 (67.4)			119.3 (67.5)			93.7 (57.0)			94.6 (67.0)		
Community Control of C			38,604.0 (25,994.7)			37,035.9 (25,201.1)			16,385.3 (17,788.1)			16,028.8 (17,133.6)		

COMT, catechol-O-methyl transferase; LED, levodopa equivalent dose; PD, Parkinson's disease; SD, standard deviation.

aNo LED data were available for these classes of antiparkinsonian drugs.

bDoses were computed among treated subjects and are expressed in milligrams of LED.

Supplementary table 2: Systematic review of eligible incidence studies of Parkinson's disease.

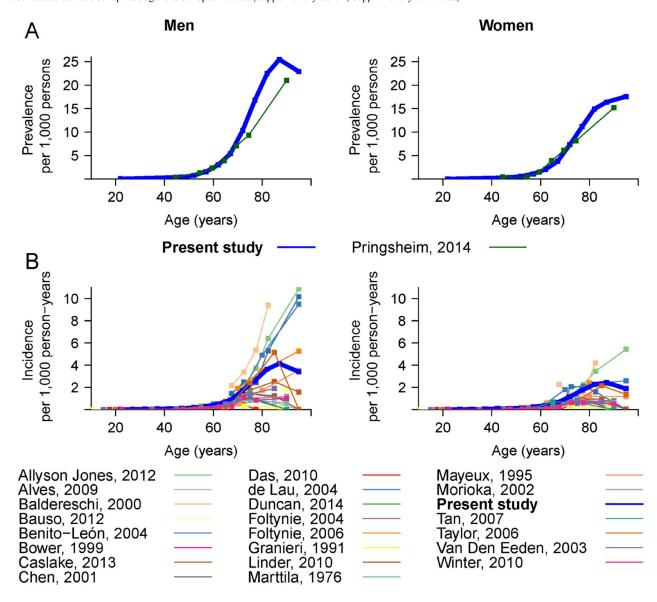
		Continent										Overall age-adjusted	
Study			Study period		Men			Women				M-F ratio	
First author, Year	Country		Start	End	PD cases	Person-years	Inc. /10 ⁵	PD cases	Person-years	Inc. /10 ⁵	Age	Ratio	(95% CI)
Allyson-Jones, 2012	Canada	North America	1992	2001	5,947	1,893,300.00	314.11	4,963	2,433,800.00	203.92	65+	1.82	1.69 to 1.96
Alves, 2009	Norway	Europe	2004	2006	151	415,662.50	36.33	114	443,448.50	25.71	40+	1.56	1.42 to 1.71
Baldereschi, 2000	Italy	Europe	1992	1996	29	6,289.75	461.07	13	5,860.21	221.83	65+	2.12	1.26 to 3.57
Bauso, 2012	Argentina	South America	2003	2008	116	156,083.20	74.32	118	256,116.40	46.07	40+	1.92	1.61 to 2.30
Benito-Leon, 2004	Spain	Europe	1994	1998	19	5,284.00	359.58	11	7,435.00	147.95	65+	2.55	0.93 to 6.98
Bower, 1999	USA	North America	1976	1990	85	131,382.00	64.70	64	170,257.00	37.59	50+	2.02	1.59 to 2.57
Caslake, 2013	UK	Europe	2002	2009	125	269,500.00	46.38	85	280,900.00	30.26	40+	1.97	1.39 to 2.78
Chen, 2001	Taiwan	Asia	1993	1995	8	17,540.05	45.61	7	17,308.55	40.44	40+	1.10	0.71 to 1.70
Das, 2010	India	Asia	2003	2007	10	82,925.00	12.06	11	74,005.00	14.86	40+	0.88	0.37 to 2.08
Duncan, 2014	UK	Europe	2009	2011	86	221,993.44	38.74	67	230,930.48	29.01	40+	1.58	1.00 to 2.50
Foltynie, 2004	UK	Europe	2001	2002	49	154,815.00	31.65	46	169,201.00	27.19	40+	1.36	0.97 to 1.91
Foltynie, 2006	UK	Europe			19	7,132.09	266.40	16	10,360.81	154.43	65+	1.87	1.29 to 2.70
Granieri, 1991	Italy	Europe	1967	1987	173	898,342.07	19.26	218	1,114,726.54	19.56	40+	1.00	0.83 to 1.22
de Lau, 2004	Netherlands	Europe	1990	1999	31	15,447.00	200.69	36	22,973.00	156.71	55+	1.47	0.61 to 3.53
Linder, 2010	Sweden	Europe	2004	2009	59	125,024.00	47.19	52	134,272.00	38.73	40+	1.36	1.25 to 1.47
Marttila, 1976	Finland	Europe	1968	1970	66	216,891.96	30.43	112	284,760.60	39.33	40+	0.91	0.69 to 1.20
Mayeux, 1995	USA	North America	1988	1991	36	72,807.00	49.45	47	110,127.00	42.68	45+	1.56	0.98 to 2.47
Morioka, 2002	Japan	Asia	1997	1997	75	266,745.63	28.12	108	313,752.14	34.42	40+	1.00	0.67 to 1.50
Tan, 2007	Singapore	Asia	2001	2003	6	14,132.00	42.46	6	17,295.00	34.69	50+	1.19	0.49 to 2.90
Taylor, 2006	UK	Europe			30	48,402.00	61.98	20	50,211.00	39.83	40+	2.31	1.41 to 3.80
Van Den Eeden, 2003	USA	North America	1994	1995	356	989,778.00	35.97	228	1,100,822.00	20.71	40+	1.84	1.52 to 2.23
Winter, 2010	Russia	Europe	2006	2008	140	566,200.00	24.73	168	771,475.00	21.78	45+	1.57	1.31 to 1.89

Data were extracted for subjects 40 years and older only. Inc., incidence (per 100,000 person-years). Please see the Supplementary references list for complete references.

Supplementary figure 1: Age- and sex-specific incidence and prevalence of Parkinson's disease in France, 2010, and comparison to other studies.

A- Prevalence: we present for comparison age- and sex-specific prevalence rates of Parkinson's disease from a meta-analysis of prevalence studies. S23

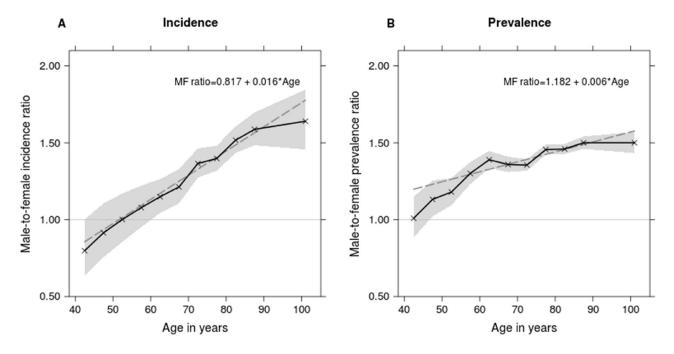
B- Incidence: we present for comparison age- and sex-specific incidence rates of Parkinson's disease from the studies included in our systematic review of incidence studies that also reported age- and sex-specific rates (Supplementary table 2; Supplementary references).



Supplementary figure 2: Age-specific male-to-female incidence (A) and prevalence (B) ratios of Parkinson's disease when sex was not included in the prediction model to define cases.

Solid line, observed age-specific male-to-female ratios estimated by modeling prevalence and incidence through Poisson regression. Grey area, 95% confidence intervals of observed male-to-female ratios.

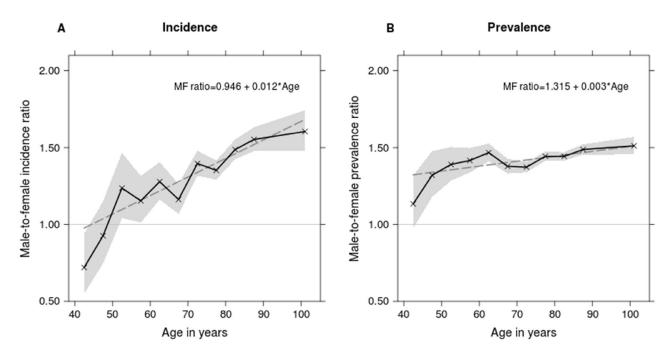
Dashed line, linear regression of male-to-female ratios weighted by the inverse of their variance on age (in years, centered at 40 years).

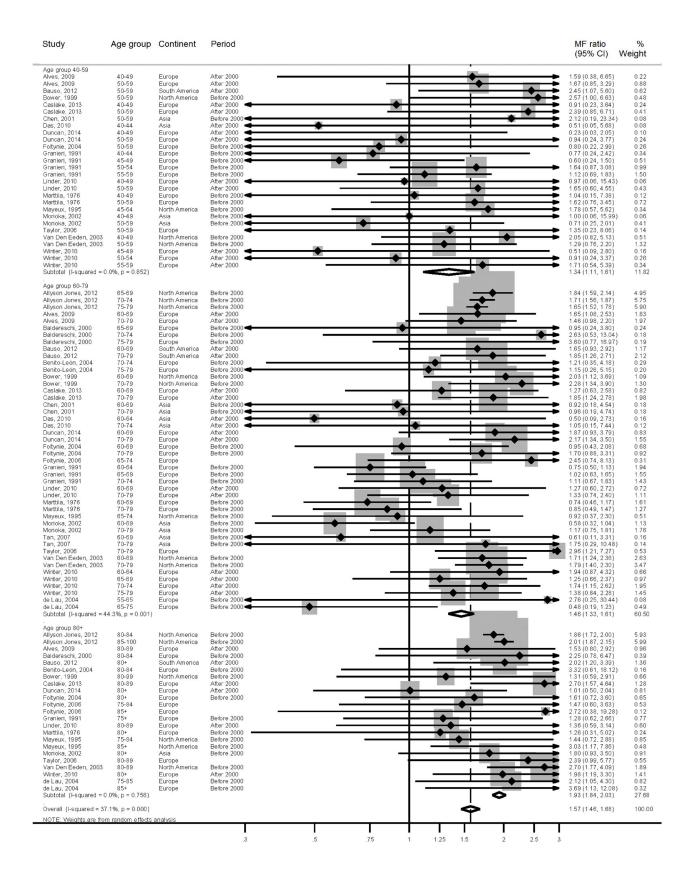


Supplementary figure 3. Age-specific male-to-female incidence (A) and prevalence (B) ratios of Parkinson's disease when levodopa was used at the only tracer to define cases.

Solid line, observed age-specific male-to-female ratios estimated by modeling prevalence and incidence through Poisson regression. Grey area, 95% confidence intervals of observed male-to-female ratios.

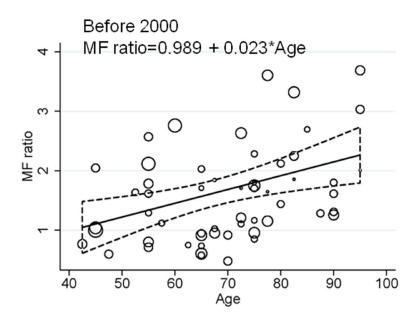
Dashed line, linear regression of male-to-female ratios weighted by the inverse of their variance on age (in years, centered at 40 years).

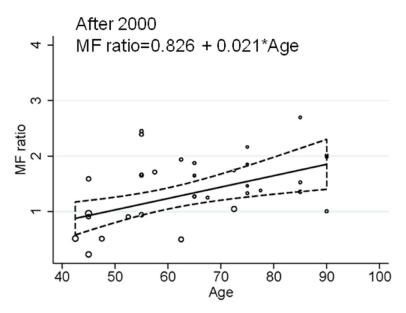




Supplementary figure 5: Systematic review of age-specific male-to-female incidence ratios of Parkinson's disease, by study time period (before/after 2000).

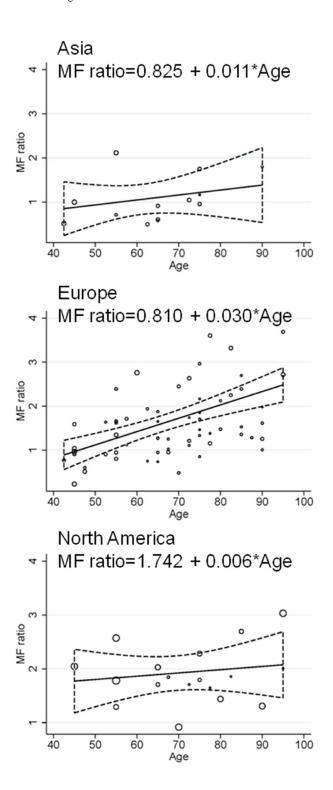
Circles represent observed male-to-female incidence ratios for each study by age by sex strata, estimated by modeling incidence through Poisson regression; their size is proportional to the variance of the male-to-female incidence ratios: more precise estimates are represented by larger circles. Solid line, linear regression of male-to-female incidence ratios weighted by the inverse of their variance on age (in years, centered at 40 years). Dashed line, 95% confidence intervals of the linear regression.





Supplementary figure 6: Systematic review of age-specific male-to-female incidence ratios of Parkinson's disease, by continent (Asia, Europe, North America).

Circles represent observed male-to-female incidence ratios for each study by age by sex strata, estimated by modeling incidence through Poisson regression; their size is proportional to the variance of the male-to-female incidence ratios: more precise estimates are represented by larger circles. Solid line, linear regression of male-to-female incidence ratios weighted by the inverse of their variance on age (in years, centered at 40 years). Dashed line, 95% confidence intervals of the linear regression.



Supplementary references

- S1. Allyson Jones C, Wayne Martin WR, Wieler M, King-Jesso P, Voaklander DC. Incidence and mortality of Parkinson's disease in older Canadians. Parkinsonism Relat Disord 2012;18:327-31.
- S2. Alves G, Muller B, Herlofson K et al. Incidence of Parkinson's disease in Norway: the Norwegian ParkWest study. J Neurol Neurosurg Psychiatry 2009;80:851-7.
- S3. Baldereschi M, Di CA, Rocca WA et al. Parkinson's disease and parkinsonism in a longitudinal study: two-fold higher incidence in men. ILSA Working Group. Italian Longitudinal Study on Aging. Neurology 2000;55:1358-63.
- S4. Bauso DJ, Tartari JP, Stefani CV, Rojas JI, Giunta DH, Cristiano E. Incidence and prevalence of Parkinson's disease in Buenos Aires City, Argentina. Eur J Neurol 2012;19:1108-13.
- S5. Benito-Leon J, Bermejo-Pareja F, Morales-Gonzalez JM et al. Incidence of Parkinson disease and parkinsonism in three elderly populations of central Spain. Neurology 2004;62:734-41.
- S6. Bower JH, Maraganore DM, McDonnell SK, Rocca WA. Incidence and distribution of parkinsonism in Olmsted County, Minnesota, 1976-1990. Neurology 1999;52:1214-20.
- S7. Caslake R, Taylor K, Scott N et al. Age-, gender-, and socioeconomic status-specific incidence of Parkinson's disease and parkinsonism in northeast Scotland: the PINE study. Parkinsonism Relat Disord 2013;19:515-21.
- S8. Chen RC, Chang SF, Su CL et al. Prevalence, incidence, and mortality of PD: a door-to-door survey in Ilan county, Taiwan. Neurology 2001;57:1679-86.
- S9. Das SK, Misra AK, Ray BK, et al. Epidemiology of Parkinson disease in the city of Kolkata, India: a community-based study. Neurology 2010;75:1362-9.
- S10. Duncan GW, Khoo TK, Coleman SY, et al. The incidence of Parkinson's disease in the North-East of England. Age Ageing 2014;43:257-63.
- S11. Foltynie T, Brayne CE, Robbins TW, Barker RA. The cognitive ability of an incident cohort of Parkinson's patients in the UK. The CamPaIGN study. Brain 2004;127:550-60.
- S12. Foltynie T, Matthews FE, Ishihara L, Brayne C. The frequency and validity of self-reported diagnosis of Parkinson's Disease in the UK elderly: MRC CFAS cohort. BMC Neurol 2006;6:29.:29.
- S13. Granieri E, Carreras M, Casetta I et al. Parkinson's disease in Ferrara, Italy, 1967 through 1987. Arch Neurol 1991;48:854-7.
- S14. de Lau LM, Giesbergen PC, de Rijk MC, Hofman A, Koudstaal PJ, Breteler MM. Incidence of parkinsonism and Parkinson disease in a general population: the Rotterdam Study. Neurology 2004;63:1240-4.
- S15. Linder J, Stenlund H, Forsgren L. Incidence of Parkinson's disease and parkinsonism in northern Sweden: a population-based study. Mov Disord 2010;25:341-8.
- S16. Marttila RJ, Rinne UK. Epidemiology of Parkinson's disease in Finland. Acta Neurol Scand 1976;53:81-102.
- S17. Mayeux R, Marder K, Cote LJ et al. The frequency of idiopathic Parkinson's disease by age, ethnic group, and sex in northern Manhattan, 1988-1993. Am J Epidemiol 1995;142:820-7.
- S18. Morioka S, Sakata K, Yoshida S et al. Incidence of Parkinson disease in Wakayama, Japan. J Epidemiol 2002;12:403-7.
- S19. Tan LC, Venketasubramanian N, Jamora RD, Heng D. Incidence of Parkinson's disease in Singapore. Parkinsonism Relat Disord 2007;13:40-3.
- S20 . Taylor KS, Counsell CE, Harris CE, Gordon JC, Smith WC. Pilot study of the incidence and prognosis of degenerative Parkinsonian disorders in Aberdeen, United Kingdom: methods and preliminary results. Mov Disord 2006;21:976-82.
- S21. Van Den Eeden SK, Tanner CM, Bernstein AL et al. Incidence of Parkinson's disease: variation by age, gender, and race/ethnicity. Am J Epidemiol 2003;157:1015-22.
- S22. Winter Y, Bezdolnyy Y, Katunina E et al. Incidence of Parkinson's disease and atypical parkinsonism: Russian population-based study. Mov Disord 2010;25:349-56.
- S23. Pringsheim T, Jette N, Frolkis A, et al. The prevalence of Parkinson's disease: A systematic review and meta-analysis. Mov Disord 2014;29:1583-90.