

## SUPPLEMENTARY APPENDICES

### Supplementary appendix 1. Newcastle-Ottawa quality assessment scale for case control studies

Note: A study can be awarded a maximum of one star for each numbered item within the Selection and Exposure categories. A maximum of two stars can be given for Comparability.

#### Selection

1) Is the case definition adequate?

- a) yes, with independent validation \*
- b) yes, eg record linkage or based on self-reports
- c) no description

2) Representativeness of the cases

- a) consecutive or obviously representative series of cases \*
- b) potential for selection biases or not stated

3) Selection of Controls

- a) community controls \*
- b) hospital controls
- c) no description

4) Definition of Controls

- a) no history of disease (endpoint) \*
- b) no description of source

#### Comparability

1) Comparability of cohorts on the basis of the design or analysis

- a) study controls for 1-2 factors (eg age and gender) \*
- b) study controls for any additional factor \*

#### Exposure

1) Ascertainment of exposure

- a) secure record (eg medical records) \*
- b) structured interview where blind to case/control status \*
- c) interview not blinded to case/control status
- d) written self-report or medical record only
- e) no description

2) Same method of ascertainment for cases and controls

- a) yes \*
- b) no

3) Non-Response rate

- a) same rate for both groups \*
- b) non respondents described
- c) rate different and no designation

## Supplementary appendix 2. Newcastle-Ottawa quality assessment scale for cohort studies

Note: A study can be awarded a maximum of one star for each numbered item within the Selection and Outcome categories. A maximum of two stars can be given for Comparability

### Selection

- 1) Representativeness of the exposed cohort
  - a) truly representative of older persons in primary care \*
  - b) somewhat representative of older persons in primary care \*
  - c) selected group of users eg nurses, volunteers
  - d) no description of the derivation of the cohort
  
- 2) Selection of the non-exposed cohort
  - a) drawn from the same community as the exposed cohort \*
  - b) drawn from a different source
  - c) no description of the derivation of the non-exposed cohort
  
- 3) Ascertainment of exposure
  - a) secure record (eg medical records) \*
  - b) structured interview \*
  - c) written self-report
  - d) no description
  
- 4) Demonstration that outcome of interest was not present at start of study
  - a) yes \*
  - b) no

### Comparability

- 1) Comparability of cohorts on the basis of the design or analysis
  - a) study controls for 1-2 factors (eg age and gender) \*
  - b) study controls for any additional factor \*

### Outcome

- 1) Assessment of outcome
  - a) independent blind assessment \*
  - b) record linkage \*
  - c) self report
  - d) no description
  
- 2) Was follow-up long enough for outcomes to occur
  - a) yes (select an adequate follow up period for outcome of interest) \*
  - b) no
  
- 3) Adequacy of follow up of cohorts
  - a) complete follow up - all subjects accounted for \*
  - b) subjects lost to follow up unlikely to introduce bias - small number lost - > 70% (select an adequate %) follow up, or description provided of those lost) \*
  - c) follow up rate < 70% (select an adequate %) and no description of those lost
  - d) no statement

### **Supplementary appendix 3. Newcastle-Ottawa quality assessment scale, modified for cross-sectional association studies**

Note: A study can be awarded a maximum of one star for each numbered item within the Selection and Outcome categories. A maximum of two stars can be given for Comparability

#### **Selection**

- 1) Representativeness of the exposed cohort
  - a) truly representative of older persons in primary care \*
  - b) somewhat representative of older persons in primary care \*
  - c) selected group of users eg nurses, volunteers
  - d) no description of the derivation of the cohort
  
- 2) Selection of the non-exposed cohort
  - a) drawn from the same community as the exposed cohort \*
  - b) drawn from a different source
  - c) no description of the derivation of the non-exposed cohort
  
- 3) Ascertainment of exposure
  - a) secure record (eg medical records) \*
  - b) structured interview \*
  - c) written self-report
  - d) no description

#### **Comparability**

- 1) Comparability of cohorts on the basis of the design or analysis
  - a) study controls for 1-2 factors (eg age and gender) \*
  - b) study controls for any additional factor \*

#### **Associated factor**

- 1) Assessment of associated factor
  - a) independent blind assessment \*
  - b) record linkage \*
  - c) self-report
  - d) no description

#### **Supplementary appendix 4. Newcastle-Ottawa quality assessment scale, modified for cross-sectional prevalence studies**

Note: A study can be awarded a maximum of one star for each numbered item within the Selection and Outcome categories.

##### **Selection**

- 1) Representativeness of the exposed cohort
  - a) truly representative of older persons in primary care \*
  - b) somewhat representative of older persons in primary care \*
  - c) selected group of users eg nurses, volunteers
  - d) no description of the derivation of the cohort
  
- 2) Selection of the non-exposed cohort
  - a) drawn from the same community as the exposed cohort \*
  - b) drawn from a different source
  - c) no description of the derivation of the non-exposed cohort
  
- 3) Ascertainment of exposure
  - a) secure record (eg medical records) \*
  - b) structured interview \*
  - c) written self-report
  - d) no description