

Supplemental Table 1. Baseline characteristics by reported low bone density (1995)

| | No low bone density (N=73,633) | Low bone density (N=422) |
|---|-----------------------------------|-----------------------------|
| Age (years) | 40 (5) | 43 (4) |
| Race, white | 71,237 (97%) | 410 (97%) |
| Body mass index (kg/m ²) | 25.6 (5.8) | 24.2 (5.7) |
| Post-Menopausal | 5,557 (8%) | 119 (28%) |
| History of hypertension | 6,962 (9%) | 42 (10%) |
| History of diabetes | 833 (1%) | 11 (3%) |
| Family history of kidney stones | 10,400 (14%) | 70 (17%) |
| Thiazide use | 1,725 (2%) | 12(3%) |
| Fluid intake (L/day) | 2.0 (0.8) | 1.9 (0.8) |
| Dietary calcium intake (mg/day) | 839 (402) | 801 (398) |
| Dietary potassium intake (mg/day) | 3,121 (1044) | 3,114 (1046) |
| Supplemental calcium (mg/d) median (25%, 75%) | 0 (0, 200) | 0 (0, 200) |
| Total vitamin D intake (IU) | 371 (254) | 407 (303) |

Abbreviations: SD, standard deviation

*Data are presented as N (%) unless otherwise indicated. Dietary intake and urinary factors are presented as mean and standard deviation (SD) unless otherwise indicated.

Supplemental Table 2. Multivariable adjusted differences in 24-hour oxalate excretion, citrate excretion, calcium oxalate relative supersaturation for participants with history of low bone density who were on a bisphosphonate (N=68) compared with participants who were not on a bisphosphonate (N=390)

| 24-hour urinary parameter | Difference | 95% CI | P |
|---|------------|----------------|------|
| Oxalate excretion ^a | -1 mg/day | -3, 2 mg/day | 0.66 |
| Citrate excretion ^b | 22 mg/day | -38, 83 mg/day | 0.47 |
| Calcium oxalate relative supersaturation ^c | 0.35 | -0.46, 1.15 | 0.40 |

^aAge, body mass index, thiazide use, supplemental calcium intake, dietary calcium intake, total vitamin D intake, menopausal status, 24-hour urinary factors (volume, sodium, magnesium, citrate, potassium, sulfate, phosphorus, creatinine)

^bAge, body mass index, thiazide use, supplemental calcium intake, dietary calcium intake, total vitamin D intake, menopausal status, 24-hour urinary factors (volume, sodium, magnesium, potassium, sulfate, phosphorus, creatinine)

^cAge, body mass index, thiazide use, supplemental calcium intake, dietary calcium intake, total vitamin D intake, menopausal status, 24-hour urinary factors (sodium, magnesium, potassium, sulfate, phosphorus, creatinine)