

Supplementary Table 1: Diabetes-related acute and chronic complications

Complications	ICD-9-CM disease codes	ICD-9-CM procedure codes	NHI procedure codes
CVD (cardiovascular disease and cerebrovascular disease)^{a,b}			
Acute myocardial infarction	410, 412*	---	---
Ischemic heart disease	411, 413, 414, V45.81, V45.82	00.66, 36.0, 36.1, 36.2, 36.3, 36.9, 88.5	---
Heart failure	428	---	---
Stroke	430-437, 438*, V12.54	00.61, 00.63, 38.11, 38.12	---
Cardiogenic shock	785.51	---	---
Sudden cardiac arrest	V12.53	---	---
Arteriosclerotic cardiovascular disease	429.2	---	---
Arrhythmia	426, 427	---	---
Microvascular complications^{a,c}			
Nephropathy	250.4, 403, 404, 580, 581, 582, 583, 584, 585, 586, 587, 588, 593, 791.0, V13.03, V42.0, V45.1, V56	38.95, 39.27, 39.42, 39.95, 54.98, 55.4, 55.5, 55.6	---
Renal failure (dialysis or transplantation) ^d	V45.1, V56	39.95, 54.98, 55.6	---
Retinopathy	250.5, 361, 362, 364, 365, 366, 368, 369, 377, 379.2	12.41, 12.73, 14.23, 14.24, 14.25, 14.33, 14.34, 14.35, 14.53, 14.54, 14.55, 16.92, 16.99	86206B, 86207B, 60001C, 60002C*, 60003C, 60004C*
Proliferative retinopathy ^d	362.02	---	60001C, 60002C*, 60003C, 60004C*
Sight-threatening diabetic retinopathy ^e	---	---	86206B, 86207B, 60001C, 60002C*, 60003C, 60004C*
Neuropathy	250.6, 302.72, 337.1, 354, 355, 357.2, 358.1, 607.84, 713.5, 729.2	---	---
Metabolic complications			
Diabetic ketoacidosis ^a	250.1	---	---
Hypoglycemia ^{a,f}	251.0, 251.1, 251.2, 270.3, 775.0, 775.6	---	---

*For identifying prevalent cases only. a: *Nutr Metab Cardiovasc Dis.* 2014;24(1):10-7. b: *Pharmacoepidemiol Drug Saf.* 2009;18(6):497-503. c: *Diabetes Care.* 2008;31(3):596-615. d: *Diabetes.* 2006;55(5):1463-9. e: *JAMA Ophthalmol.* 2014;132(8):922-928. f: *BMC Endocr Disord.* 2008;8:4. Abbreviations: ICD-9-CM: International Classification of Diseases, Ninth Revision, Clinical Modification, NHI: Taiwan National Health Insurance.

Supplementary Table 2: Incidence density of hospitalized hypoglycemia among patients with incident type 1 diabetes diagnosed between 1999 and 2013 (using primary diagnosis to define hospitalization for hypoglycemia)

	Overall patients	Male subgroup			Female subgroup		
		Overall male [‡]	Male early-onset (0-12 years) [‡]	Male late-onset (≥13 years)	Overall female	Female early-onset (0-12 years) [‡]	Female late-onset (≥13 years)
No. of cases*	4,001	1,903	719	1,184	2,098	777	1,321
No. of cases with event	36	12	4	8	24	6	18
Follow-up time (person-years) [†]	27,374	13,205	5,327	7,878	14,169	5,890	8,280
Incidence density (1,000 person-years) (95% CI)	1.32 (0.9-1.8)	0.91 (0.5-1.6)	0.75 (0.2-1.9)	1.02 (0.4-2.0)	1.69 (1.1-2.5)	1.02 (0.4-2.2)	2.17 (1.3-3.4)

* No. of cases refers to the number of patients who had no complication event of interest before type 1 diabetes was confirmed.

† Cumulative follow-up time (person-years) was calculated as the sum of follow-up years during observation period.

Note: Patients with type 1 diabetes were retrieved from incidence cases from 2000 to 2012. Follow-up time started from the first diagnosis date to the time the event occurred, death, discontinued enrollment from Taiwan's National Health Insurance Program, or the end of 2013, whichever came first.

‡ 95% CI of incidence density difference for male vs. female was [-1.6 to 0.1]; in male subgroup, early vs. late-onset was [-1.3 to 0.8]; and in female subgroup, early vs. late-onset was [-2.5 to 0.2].

Abbreviations: STDR: sight-threatening diabetic retinopathy, CVD: cardiovascular disease, DKA: diabetic ketoacidosis, CI: confidence interval.