

Electronic Supplementary Material (ESM) to

“Screening for type 2 diabetes: do screen-detected cases fare better?”

By Feldman AL, *et al.*

ESM Table 1. International Classification of Diseases (ICD) codes used to identify health outcome events in the Swedish Cause of Death and National Patient Register (including inpatient and outpatient hospital records).				
Type of event		ICD-9	ICD-10	Description
Cardiovascular disease (CVD)	Myocardial infarction	410	I21	Acute myocardial infarction
			I22	Subsequent myocardial infarction
			I23	Certain current complications following acute myocardial infarction
		411	I24	Other acute (and subacute) forms of ischemic heart disease
	Heart failure	428	I50	Heart failure
		402A/01	I11.0	Hypertensive heart disease with (congestive) heart failure
	Stroke	430	I60	Subarachnoid haemorrhage
		431	I61	Intracerebral haemorrhage
		432	I62	Other and unspecified intracranial haemorrhage
			I63	Cerebral infarction
			I64	Stroke, not specified as haemorrhage or infarction
		433	I65	Occlusion (and stenosis) of precerebral arteries
	Peripheral arterial disease	434	I66	Occlusion (and stenosis) of cerebral arteries
		250G/7	E11.5 E13.5 E14.5	Diabetes with peripheral circulatory disorders
		440C/2	I70.2	Atherosclerosis of arteries of extremities
		443X/9	I73.9	Peripheral vascular disease, unspecified
	Renal disease	443W/8	I79.2	Peripheral angiopathy in diseases classified elsewhere
403A/01		I12.0	Hypertensive renal disease with renal failure	
404		I13	Hypertensive heart and renal disease	
584		N17	Acute renal failure	
585		N18	Chronic kidney disease (CKD)	
586		N19	Renal failure, unspecified	
Retinopathy	250D/4	E11.2 E13.2 E14.2	Diabetes with renal manifestations	
	362D/3	H34	Retinal vascular occlusions	
	362B/1	H35.0	Background retinopathy and retinal vascular changes	
	362G/6	H35.4	Peripheral retinal degeneration	
	362W/8	H35.6	Retinal haemorrhage	
	362X/9	H35.9	Retinal disorder, unspecified	
	362A/0	H36.0	Diabetic retinopathy	
250E/5	E11.3 E13.3 E14.3	Diabetes with ophthalmic manifestations		

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ESM table 2. Sensitivity analyses among screening participants only: Associations between mode of detection of diabetes and death, incident CVD events, renal complications, or retinal complications. Västerbotten Intervention Programme 1992-2013.

	All-cause mortality		CVD events		Renal Disease		Retinopathy	
	HR	95% CI	HR	95% CI	HR	95% CI	HR	95% CI
Main analysis adjusted for prior CVD event status	1.65	1.28, 2.12	1.16	0.95, 1.41	1.83	1.30, 2.58	1.39	1.07, 1.82
Main analysis adjusted for prior CVD event status, time between previous screening and detection, biomarkers measured at previous screening	1.42	1.05, 1.92	1.01	0.79, 1.28	1.51	1.00, 2.29	1.07	0.77, 1.49

HRs are for incident clinically detected individuals with diabetes who were screening participants vs. screen-detected individuals (reference).

HRs adjusted for calendar time in time-scale and the co-variables age at diabetes detection, calendar year of diabetes detection, sex, and socioeconomic status reported in the 1990 census in addition to variables specified above. Biomarkers at previous screening were BMI, systolic and diastolic blood pressure, total serum cholesterol and self-reported overall bad health.

Socioeconomic status imputed for n=1,565 individuals who had missing information.

CI: Confidence interval, CVD: Cardiovascular disease, HR: Hazard ratio, OGTT: Oral glucose tolerance test.