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Supplemental Material

Per- and Polyfluoroalkyl Substance Plasma Concentrations and Bone Mineral Density in Midchildhood: A Cross-Sectional Study (Project Viva, United States)

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Table S1. Characteristics of Project Viva participants who attended the midchildhood visit (n=1,116) and who were included (n=576) versus excluded (n=540) from this analysis.

Table S2. Variables that did not confound the PFAS-aBMD association, overall (n=576) and by quartiles of perfluorooctanoate (PFOA) plasma concentration in midchildhood.

Table S3. Per- and polyfluoroalkyl substance (PFAS) plasma concentration distributions and Spearman correlation coefficients.

Table S4. Associations of per- and polyfluoroalkyl substance (PFAS) plasma concentrations with areal bone mineral density (aBMD) Z-score in midchildhood in (1) single PFAS models, (2) with further adjustment for maternal plasma PFAS concentration, and (3) by sex. β (95% CIs) represent difference in aBMD Z-score per doubling of PFAS plasma concentration.

Figure S1. Comparison of effect estimates from single per- and polyfluoroalkyl substance (PFAS) models examining associations between PFAS plasma concentrations and aBMD Z-score in midchildhood, with and without additional adjustment for variables that were considered but not included in the primary analysis.

Figure S2. Single PFAS models showing adjusted associations of per- and polyfluoroalkyl substance (PFAS) plasma concentrations with bone mineral content (BMC) Z-score in midchildhood (n=531).