

Appendix sTable 1. Diseases or risk factors classification and corresponding International Classification of Disease (ICD) codes, in alphabetical order.

INDICATION	ICD TITLE	ICD 10 CODE	ICD 9 CODE
Diagnoses indicative of a cardiovascular disease endpoint – Primary outcome			
Ischemic heart disease	Angina pectoris	I20	413
	Acute myocardial infarction	I21	410, 434.91
	Subsequent myocardial infarction	I22	412
	Other acute ischaemic heart diseases	I24	411
	Chronic ischaemic heart disease	I25	414
	Cardiac arrest	Cardiac arrest	I46
Heart failure	Heart failure	I50	428
Cerebral infarction	Cerebral infarction	I63	433, 434, 435
	Stroke	I64	437.0, 437.1, 437.3
Diagnoses indicative of a cardiovascular disease risk factor – Secondary Outcome			
Diabetes	Diabetes	E11	250
Hyperlipidemia	Dyslipidemia	E78	272.3, 272.5, 272.6
			272.6
Hyperlipidemia	Pure hypercholesterolaemia	E78.0	272.0
	Pure hyperglyceridaemia	E78.1	272.1
	Mixed hyperlipidaemia	E78.2	272.2
	Hyperlipidaemia, unspecified	E78.5	272.4
Hypertension	Essential (primary) hypertension	I10	401, 459.3
	Hypertensive heart disease	I11	402

	Hypertensive renal disease	I12	403
	Hypertensive heart and renal disease	I13	404
Diagnoses leading to exclusion from the cohort			
Cardiomyopathy	Endocardial fibroelastosis	I42.4	425.3
	Endomyocardial disease	I42.3	425.0
	Congenital cardiomyopathy	I42.8	Not applicable
	Familial cardiomyopathy	I42.9	425.9
Congenital malformation of circulatory system	Congenital malformations of the circulatory system	Q20 to Q28	745, 746, 747, 759.9
		E84	277.0
Cystic fibrosis	Cystic fibrosis	E84	277.0
Ineligible diagnoses (not considered as outcome, but did not warrant exclusion of the participant)			
Other cardiovascular problems (eg cause is viral, genetic, alcoholic, etc.)	Other cardiovascular problems	E78.7,	424.9, 425.2,
		E78.8	425.5, 425.7, 425.8, 425.9
Arrhythmia*	Cardiac dysrhythmias	I49	427 excluding 427.5 (see Cardiac arrest)
	Abnormalities of heart beat	R00 to 03	785.3

*Arrhythmias were ineligible because their definition in administrative databases has not yet been validated and a local pediatric cardiologist informed us that most dysrhythmia diagnoses or referrals would not be considered cardiovascular disease or risk.