

**Anthropometric and adiposity indicators and risk of type 2 diabetes: systematic review and dose-response meta-analysis of cohort studies**

*Ahmad Jayedi, Sepideh Soltani, Sheida Zeraat-talab Motlagh, Alireza Emadi, Hosein Shahinfar, Hanieh Moosavi, Sakineh Shab-Bidar*

**Appendix 1: Text S1, Tables S1-S9, and Figures S1-S27**

**Text S1.** Detailed description of GRADE domains and how to judge each domain.

We evaluated the certainty of evidence for each association using the updated Grading of Recommendations Assessment, Development and Evaluations (GRADE) tools, which integrates the application of ROBINS-I. <sup>1</sup> GRADE rates the certainty of evidence as high, moderate, low, or very low. <sup>2</sup> In the updated GRADE tool, observational studies also start at a high certainty of evidence level. The criteria used to downgrade evidence include study limitations as assessed by ROBINS-I tool, <sup>3</sup> inconsistency (substantial unexplained between-study heterogeneity,  $I^2 \geq 50\%$  and  $P_{\text{heterogeneity}} < 0.10$ ), <sup>4</sup> indirectness (presence of population, intervention or comparator factors that limit the generalizability of the results), <sup>5</sup> imprecision (the 95% CIs are wide, the optimal information size was not met, or the point estimate does not surpass the minimally important difference), <sup>6</sup> and compelling evidence of publication bias. <sup>7</sup> To determine the presence of imprecision, we first considered the optimal information size (the number of cases included in the review compared with the number required by a conventional sample size calculation for a single adequately powered trial. On the basis of a 5 % event rate in the control group and a 25 % relative risk reduction, we calculated the optional information size to be 400 cases. <sup>6</sup> The outcome was also downgraded for imprecision if the optimal information size criterion was met but the 95 % CI included 1.00 and failed to exclude important harm ( $RR > 1.25$ ) and benefit ( $RR < 0.75$ ).

The criteria used to upgrade evidence include a dose-response gradient and large effect size. Large and very large effect sizes were defined as  $RR > 2.00$  and  $> 5.00$ , respectively. <sup>8</sup> The evidence was upgraded to two levels if the effect sizes surpassed the threshold settled as very large effect size ( $RR > 5.00$ ) either in the linear or non-linear dose-response meta-analyses. We upgraded to two levels if the effect sizes surpassed 5.00 at any specific dose of exposure in the non-linear dose-response meta-analyses.

Supplementary Materials

**Table S1.** Search strategy to find potential relevant articles for inclusion in the meta-analysis of anthropometric measures and risk of type 2 diabetes.

<b>PubMed (53,033)</b>
1. obesity [All fields] OR adiposity [All fields] OR fatness [All fields] OR overweight [All fields] OR “waist circumference” [All fields] OR “hip circumference” [All fields] OR “thigh circumference” [All fields]
2. “waist-to-hip ratio” [All fields] OR “waist-to-height ratio” [All fields] OR “waist-to-thigh ratio” [All fields] OR “body adiposity index” [All fields] OR “body shape index” [All fields] OR “body mass index” [All fields]
3. WC [All fields] OR WHR [All fields] OR WHtR [All fields] OR WTR [All fields] BAI [All fields] OR ABSI [All fields] OR BMI
4. “fat mass” [All fields] OR “fat free mas” [All fields] OR “body fat” [All fields] OR “body fat percentage” [All fields] OR “lean mass” [All fields]
5. “visceral fat” [All fields] OR “subcutaneous fat” [All fields] OR “body composition” [All fields]
6. prospective* [All fields] OR longitudinal [All fields] OR retrospective [All fields] observation [All fields] OR observational [All fields] OR cohort* [All fields]
7. follow-up [All fields] OR nested [All fields] OR “relative risk” [All fields] OR “hazard ratio” [All fields] OR “odds ratio” [All fields]
8. diabet* [Title/Abstract] OR Diabetes Mellitus [Mesh] OR Diabetes Mellitus, Type 2 [Mesh]
9. maternal [Title] OR pregnancy [Title] OR pregnant [Title] OR mother* [Title] OR child* [Title] OR gestation* [Title]
10. 1 OR 2 OR 3 OR 4 OR 5
11. 6 OR 7
12. 8 AND 10 AND 11
13. 12 AND NOT 9
<b>Scopus (65,078)</b>
<b>Web of Science (10,135)</b>
<b>All: 119246</b>

## Supplementary Materials

**Table S2.** List of studies excluded via full-text assessment and studies included in the analyses.

<b>Excluded</b>
<b>Not relevant exposure (n=569)</b> <sup>9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118 119 120 121 122 123 124 125 126 127 128 129 130 131 132 133 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170 171 172 173 174 175 176 177 178 179 180 181 182 183 184 185 186 187 188 189 190 191 192 193 194 195 196 197 198 199 200 201 202 203 204 205 206 207 208 209 210 211 212 213 214 215 216 217 218 219 220 221 222 223 224 225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243 244 245 246 247 248 249 250 251 252 253 254 255 256 257 258 259 260 261 262 263 264 265 266 267 268 269 270 271 272 273 274 275 276 277 278 279 280 281 282 283 284 285 286 287 288 289 290 291 292 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 310 311 312 313 314 315 316 317 318 319 320 321 322 323 324 325 326 327 328 329 330 331 332 333 334 335 336 337 338 339 340 341 342 343 344 345 346 347 348 349 350 351 352 353 354 355 356 357 358 359 360 361 362 363 364 365 366 367 368 369 370 371 372 373 374 375 376 377 378 379 380 381 382 383 384 385 386 387 388 389 390 391 392 393 394 395 396 397 398 399 400 401 402 403 404 405 406 407 408 409 410 411 412 413 414 415 416 417 418 419 420 421 422 423 424 425 426 427 428 429 430 431 432 433 434 435 436 437 438 439 440 441 442 443 444 445 446 447 448 449 450 451 452 453 454 455 456 457 458 459 460 461 462 463 464 465 466 467 468 469 470 471 472 473 474 475 476 477 478 479 480 481 482 483 484 485 486 487 488 489 490 491 492 493 494 495 496 497 498 499 500 501 502 503 504 505 506 507 508 509 510 511 512 513 514 515 516 517 518 519 520 521 522 523 524 525 526 527 528 529 530 531 532 533 534 535 536 537 538 539 540 541 542 543 544 545 546 547 548 549 550 551 552 553 554 555 556 557 558 559 560 561 562 563 564 565 566 567 568 569 570 571 572 573 574 575 576 577</sup>
<b>Duplicate (n=70)</b> <sup>578 579 580 581 582 583 584 585 586 587 588 589 590 591 592 593 594 595 596 597 598 599 600 601 602 603 604 605 606 607 608 609 610 611 612 613 614 615 616 617 618 619 620 621 622 623 624 625 626 627 628 629 630 631 632 633 634 635 636 637 638 639 640 641 642 643 644 645 646 647</sup>
<b>Not sufficient information (n=77)</b> <sup>648 649 650 651 652 653 654 655 656 657 658 659 660 661 662 663 664 665 666 667 668 669 670 671 672 673 674 675 676 677 678 679 680 681 682 683 684 685 686 687 688 689 690 691 692 693 694 695 696 697 698 699 700 701 702 703 704 705 706 707 708 709 710 711 712 713 714 715 716 717 718 719 720 721 722 723 724</sup>
<b>No risk estimate (n=36)</b> <sup>725 726 727 728 729 730 731 732 733 734 735 736 737 738 739 740 741 742 743 744 745 746 747 748 749 750 751 752 753 754 755 756 757 758 759 760</sup>
<b>Self-reported anthropometry (n = 30)</b> <sup>761 762 763 764 765 766 767 768 769 770 771 772 773 774 775 776 777 778 779 780 781 782 783 784 785 786 787 788 789 790</sup>
<b>Cross-sectional (n=25)</b> <sup>791 792 793 794 795 796 797 798 799 800 801 802 803 804 805 806 807 808 809 810 811 812 813 814 815</sup>
<b>In adolescences (n=18)</b> <sup>816 817 818 819 820 821 822 823 824 825 826 827 828 829 830 831 832 833</sup>
<b>Review study (n=14)</b> <sup>834 835 836 837 838 839 840 841 842 843 844 845 846 847</sup>
<b>Case-control study (n=13)</b> <sup>848 849 850 851 852 853 854 855 856 857 858 859 860</sup>
<b>Not relevant outcome (n=11)</b> <sup>861 862 863 864 865 866 867 868 869 870 871</sup>
<b>In patients with pre-diabetes (n=9)</b> <sup>872 873 874 875 876 877 878 879 880</sup>
<b>No 95% CI (n=6)</b> <sup>881 882 883 884 885 886</sup>
<b>In diseased populations (n=4)</b> <sup>887 888 889 890</sup>
<b>Nested case-control study (n=3)</b> <sup>891 892 893</sup>
<b>Case-cohort study (n=2)</b> <sup>894 895</sup>
<b>Letter (n=2)</b> <sup>896 897</sup>
<b>In athletes (n=1)</b> <sup>898</sup>
<b>Included</b>
<b>All cohort studies (n=212 publications with 216 cohorts)</b> <sup>899 900 901 902 903 904 905 906 907 908 909 910 911 912 913 914 915 916 917 918 919 920 921 922 923 924 925 926 927 928 929 930 931 932 933 934 935 936 937 938 939 940 941 942 943 944 945 946 947 948 949 950 951 952 953 954 955 956 957 958 959 960 961 962 963 964 965 966 967 968 969 970 971 972 973 974 975 976 977 978 979 980 981 982 983 984 985 986 987 988 989 990 991 992 993 994 995 996 997 998 999 1000 1001 1002 1003 1004 1005 1006 1007 1008 1009 1010 1011 1012 1013 1014 1015 1016 1017 1018 1019 1020 1021 1022 1023 1024 1025 1026 1027 1028 1029 1030 1031 1032 1033 1034 1035 1036 1037 1038 1039 1040 1041 1042 1043 1044 1045 1046 1047 1048 1049 1050 1051 1052 1053 1054 1055 1056 1057 1058 1059 1060 1061 1062 1063 1064 1065 1066 1067 1068 1069 1070 1071 1072 1073 1074 1075 1076 1077 1078 1079 1080 1081 1082 1083 1084 1085 1086 1087 1088 1089 1090 1091 1092 1093 1094 1095 1096 1097 1098 1099 1100 1101 1102 1103 1104 1105 1106 1107 1108 1109 1110</sup>
<b>Body mass index (n=178 publications with 182 cohorts)</b> <sup>900 901 902 903 904 905 906 907 908 909 910 911 912 915 917 918 919 921 922 923 924 926 927 928 929 930 931 933 935 937 938 939 941 942 943 944 945 946 947 949 950 951 952 954 955 956 957 958 959 960 961 962 963 964 965 966 967 968 969 970 971 972 974 978 979 980 981 982 983 984 985 988 990 991 992 993 994 995 997 998 999 1001 1002 1003 1004 1005 1006 1007 1008 1010 1011 1012 1015 1016 1017 1018 1019 1020 1021 1023 1024 1025 1027 1028 1029 1030 1031 1032 1033 1034 1036 1037 1038 1039 1040 1043 1044 1045 1046 1048 1049 1050 1051 1052 1053 1054 1055 1056 1057 1058 1059 1060 1061 1062 1063 1064 1065 1066 1067 1069 1071 1073 1074 1075 1076 1077 1078 1079 1080 1081 1082 1083 1084 1085 1087 1088 1090 1091 1092 1093 1094 1095 1097 1098 1099 1102 1103 1104 1105 1106 1107 1109 1110</sup>
<b>Waist circumference (n=74 publications with 78 cohorts)</b> <sup>899 904 906 907 909 914 915 916 920 923 924 925 930 937 941 944 949 950 953 955 956 958 959 966 967 973 974 985 986 994 996 997 1001 1006 1007 1008 1011 1013 1014 1015 1018 1022 1023 1026 1034 1035 1037 1040 1042 1043 1047 1048 1052 1053 1058 1064 1066 1067 1072 1075 1077 1080 1083 1088 1093 1094 1098 1099 1100 1101 1103 1105 1106</sup>
<b>Waist-to-hip ratio (n=34)</b> <sup>899 909 923 926 930 950 952 953 956 958 966 974 985 1001 1005 1006 1008 1010 1015 1018 1030 1034 1040 1053 1064 1067 1075 1077 1088 1093 1098 1105 1106</sup>

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Waist-to-height ratio (n=25)	909 923 924 937 941 950 952 953 955 956 958 966 974 977 997 1001 1034 1053 1063 1066 1075 1098 1103 1105 1106
Hip circumference (n=13 publications with 14 cohorts)	930 936 950 966 973 974 1000 1042 1043 1058 1064 1075 1093
Visceral adiposity index (n=8 publications with 9 cohorts)	913 924 976 982 989 1086 1096 1106
Body fat percentage (n=6)	915 932 994 997 1075 1105
Thigh circumference (n=2)	1064 1075
A body shape index (n=5)	955 956 959 1041 1108
Body adiposity index (n=3 publications with 4 cohorts)	934 956 1058

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**Table S3.** Characteristics of cohort studies included in the meta-analysis of anthropometric measures and risk of type 2 diabetes.

Author, year, Country	Study name	Follow-up duration (years)	Gender	Participants/cases	Age range (mean), years	Outcome identification method	Exposures	Adjustments
Adegbija, <sup>899</sup> 2015 Australia	Aboriginal community in Australia's Northern Territory	20	W/M	803/110	18-76 (33.5)	Hospitalization records	WC	Age, smoking status, alcohol drinking status
Aekplakom, <sup>900</sup> 2006 Thailand	Electric Generation Authority of Thailand	12	W/M	2677/361	35-55 (42.4)	According to the ADA criteria (FPG or OGTT), as well as diagnosis and/or receipt of diabetes medication during the follow-up period	BMI, WC	Age, BMI, WC, hypertension, sibling or parent having diabetes, impaired fasting glucose, triglycerides, HDL cholesterol.
Alam, <sup>901</sup> 2020 Canada	Saskatchewan Rural Health Study (SRHS)	5	W/M	4330/119	18-74 (55)	Physician-, or primary caregiver-diagnosed, or self-reported diabetes status	BMI	Age, sex, residence type, people living at home, marital status, education level, education level, smoking, alcohol drinking status, exercise, comorbidity.
Appleton, <sup>902</sup> 2013 Australia	The North West Adelaide Health Study	7.9	W/M	4,056/112	18-84 (51)	Doctor-diagnosed or FPG $\geq 7.0$ mmol/L	BMI	Age, sex, smoking, household income, highest education and physical activity, LDL cholesterol.
Ärnlov, <sup>903</sup> 2011 Sweden	Uppsala Longitudinal Study of Adults Men (ULSAM)	20	M	1,675/160	(50)	According to current WHO criteria (FPG $\geq 6.1$ mmol/l at the baseline and 10-year, FPG $\geq 7.0$ mmol/l) or FPG $\geq 7.0$ mmol/l at the 20-year) or the use of antidiabetes medication	BMI	Age, smoking status, and level of physical activity
Asghar, <sup>904</sup> 2011 Bangladesh	Dhaka city called "Chandra"	5	W/M	2800/165	20-59 (41.2)	Fasting whole blood glucose level $> 7$ mmol/L	BMI, WC, WHR	Age, sex, physical activity, blood pressure, monthly expenses, education
Bae, <sup>905</sup> 2020 Korea	The Korean Genome and Epidemiology Study-Ansan and Ansung study	8.1	W/M	8,900/1,258	40-69 (52.3)	Subjects who had any one of the following: (i) fasting plasma glucose $\geq 126$ mg/dL; (ii) postprandial 2-h plasma glucose $\geq 200$ mg/dL after a 75-g OGTT; and (iii) HbA1c $\geq 6.5\%$	BMI	Age, smoking, alcohol intake, regular exercise.

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Balkau, <sup>906</sup> 2011 France	DESIR cohort	9	W/M	3,818/203	30-65 (47)	Treatment and/or FPG $\geq 7.0$ mmol/L	BMI, WC	Age, sex, family history of diabetes, alcohol drinking, physical activity, hypertension, lipid treatment, waist circumference
Bancks, <sup>907</sup> 2017 US	CARDIA	24.5	W/M	4,251/504	18-30 (25)	Fasting glucose $\geq 126$ mg/dL, postchallenge (75 g) glucose $\geq 200$ mg/dL, HbA1c greater $\geq 6.5\%$ , or use of diabetes medications	BMI, WC	Age, field center, mother's and father's educational attainment, and updated data for the participants' education, current employment status, paying for basic essentials, marital status, G statistic for racial segregation, tract-level percentage of population living in poverty, CES-Depression score, regular alcohol consumption, smoking status, diet score from the American Heart Association's a Life's Simple, regular physical activity, fasting glucose, body mass index, waist circumference, parental history of diabetes, triglycerides to high-density lipoprotein cholesterol ratio, forced vital capacity, systolic blood pressure, blood pressure-lowering medication use.
Berkowitz, <sup>908</sup> 2016 US	Eastern Massachusetts	11	W/M	3,174/200	(47)	Using data from an electronic health data repository or defined validated algorithm	BMI	Age, sex, education status, refugee, immigration, income, insurance.
Biggs, <sup>909</sup> 2010 US	The Cardiovascular Health Study	12.4	W/M	4,193/339	65-85 (72.6)	Used insulin or oral hypoglycemic agents, or had a fasting glucose level $\geq 126$ mg/dL	BMI, WC, WHR, WHtR,	Age, race, current smoking, physical activity, diet score, and alcohol consumption.
Bjerregaard, <sup>910</sup> 2020	DynaHEALTH consortium	18.8	W/M	25,283/8,359	30-85	Plasma glucose $\geq 7$ mmol/L and 2-h plasma glucose $\geq 11.1$ mmol/L in a 2-h	BMI	Age, BMI, educational attainment, smoking, physical activity.

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Demark and Finland						75-g OGTT or HbA1c $\geq 6.5\%$ or 48 mmol/mol		
Bjørnholt, <sup>911</sup> 2000 Norway	Working in five companies	22.5	M	1,947/143	40-59	According to the 1985 WHO criteria that doctor affirmed	BMI	Age, sex, fasting blood glucose, family history of diabetes, fitness, triglycerides, cholesterol, systolic blood pressure.
Bonora, <sup>912</sup> 2004 Italy	The Bruneck Study	10	W/M	919/64	40-79	At baseline and at the 5-year follow-up, fasting glucose was $\geq 7$ mmol/l (126 mg/dl) or when 2-h OGTT glucose was $\geq 11.1$ mmol/l (200 mg/dl) or when the participants had a clinical diagnosis of the disease and treatment was ongoing (diet, drugs). At the 10-year follow-up fasting glucose was $\geq 7$ mmol/l or when the individuals had a known clinical diagnosis of the disease	BMI	Age, sex, alcohol, smoking, physical activity, family history of diabetes, hypertension, dyslipidemia, hyperuricemia, impaired glucose test.
Bozorgmanesh, <sup>913</sup> 2011 Iran	Tehran Lipid and Glucose Study (TLGS)	6	W/M	5,964/369	(42.01)	FPG $\geq 7$ mmol.l <sup>-1</sup> , or 2h-PCPG $\geq 11.1$ mmol.l <sup>-1</sup> or taking anti-diabetic medication	VAI	Age, sex, hypertension, family history of diabetes, smoking, physical activity, fasting plasma glucose, waist circumference, BMI, TG, HDL
Bragg, <sup>914</sup> 2018 China	China Kadoorie Biobank	9.2	W/M	512,891/13,416	30-79	Disease surveillance system for diabetes, and through diabetes diagnoses	WC	Stratified by age and study area and adjusted for education, income, occupation, smoking, alcohol consumption, physical activity, family history of diabetes
Brahimaj, <sup>915</sup> 2019 Netherlands	The Rotterdam Study	6.5	W/M	9,564/899	(64.7)	FPG $\geq 7.0$ mmol/l, non-FPG $\geq 11.1$ mmol/l (when fasting samples were unavailable) or use of blood glucose-lowering medication	BMI, WC, BF%	Age, systolic BP, treatment for hypertension, smoking and prevalent CVD, HDL-cholesterol, TG and serum lipid-reducing agents, fasting plasma glucose
Burke, <sup>916</sup> 2007 Australia	Australian Aborigines	12.9	W/M	514/104	15-88	Interview then confirmed with reference to medical records	WC	Age, sex, BMI, alcohol drinking.



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Caerphilly collaborative group, <sup>917</sup> UK	Caerphilly Prospective Study (CaPS)	4.7	M	2034/99	(56.6)	Validated self-reported	BMI	Age, sex, physical activity, alcohol drinking, smoking status, family history of diabetes
Cameron, <sup>918</sup> 2021 US	Multi-Ethnic Study of Atherosclerosis (MESA)	9.2	W/M	4,200/486	45-84 (61)	Incident DM was defined as any observed DM case (untreated or treated) through examination 5 assessed at each follow-up visit	BMI	Age, sex, race/ethnicity, study site, physical activity, diet, annual family income, education level.
Carlsson, <sup>919</sup> 2007 Norway	Nord-Trøndelag Health Survey	11	W/M	38,800/738	18-79	Fasting blood glucose measured together with levels of C-peptide and anti-GAD antibody	BMI	Age, sex, smoking.
Carvalho, <sup>920</sup> 2020 Brazil	ELSA-Brasil study	3.7	W/M	4,463/366	35-74	Started receiving oral hypoglycemic agents or insulin; or (2) Self-reported information and laboratory measurements	WC	Age, sex, hypertension, dyslipidaemia, prior coronary artery disease, prior stroke, alcohol intake, lipid-lowering therapy, parental history of diabetes, creatinine clearance, waist circumference, blood pressure, HbA1c, hsCRP, fasting blood TG, HDL-cholesterol, LDLcholesterol.
Chan, <sup>921</sup> 2018 Singapore	SiMES, 2004–2006, SiMES-2, 2011–2013, and SINDI, 2007–2009, SINDI-2, 2012–2015	6	W/M	4,101/1320	(56.5)	Physician’s diagnosis, use of insulin, use of oral hypoglycaemia medications or random plasma glucose $\geq 200$ mg/dL or HbA1c $\geq 6.5\%$ (48 mmol/mol)	BMI	Age, sex, ethnicity, family history of diabetes, income, education, current smoking status, systolic blood pressure, HbA1c, total cholesterol, HDL cholesterol, diabetes duration.
Chang, <sup>922</sup> 2016 Korea	The Kangbuk Samsung Health Study	4.1	W/M	74,509/472	(36.2)	Diabetes was defined either as a FPG $\geq 126$ mg/dL, HbA1c $\geq 6.5\%$ , or the use of blood glucose-lowering agents	BMI	Age, sex, center, year of screening exam, smoking status, alcohol intake, exercise habits, family history of diabetes, education level at baseline, glucose, systolic blood pressure, triglycerides, high-density lipoprotein cholesterol, homeostasis model assessment of insulin resistance, high-sensitivity C-reactive protein.

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Chei, <sup>923</sup> 2007 Japan	Minami-Takayasu in two communities	10	W/M	5,617/550	40-69	FPG $\geq$ 126 mg/dL, or a 2-hour postload glucose level of $\geq$ 200 mg/dL or use of medication for diabetes	BMI, WC, WHR, WHtR	Age, sex, systolic blood pressure levels, alcohol intake, smoking status.
Chen, <sup>924</sup> 2014 China	The study of Prevention of Multiple Metabolic Disorders and Metabolic Syndrome in Jiangsu Province	5.8	W/M	3,461/160	35-74	FPG $\geq$ 7 mmol/L (or 126 mg/dL), or have been diagnosed as diabetes by a county-level hospital or above	BMI, WC, WHtR, VAI	Age, gender, SBP, DBP, smoking, alcohol drinking, family history of diabetes
Chen, <sup>925</sup> 2017 Taiwan	Healthy Aging Longitudinal Study (HALST)	3.1	W/M	5,349/247	55-64	Hospitalization for diabetes-related illness or prescription of antidiabetic drugs during follow-up; at least 1 prescription of oral antidiabetic agents and 1 ambulatory visit for diabetes-related illness within 1 year or at least 3 ambulatory visits for diabetes-related illness within 1 year	WC	SBP, TC, medication for high SBP
Chen, <sup>926</sup> 2003 Taiwan	Penghu	3	W/M	600/26	40-79 (57.4)	FPG $\geq$ 126 mg/dl (7.0 mmol/l)	BMI, WHR	Age, sex.
Chen, <sup>927</sup> 2018 China	Pinggu district of Beijing, China	1.7	W/M	2,225/112	25-75	FBG levels $\geq$ 7.0 mmol/L and/or 2-h plasma glucose (2-hPG) levels $\geq$ 11.1 mmol/L; impaired glucose tolerance was defined as FBG levels	BMI	Age, sex, body mass index, waist circumference, mean arterial pressure, hemoglobin A1c, total cholesterol, high-density lipoprotein cholesterol, fasting blood glucose, fasting insulin, alanine transaminase and triglyceride levels, family history of diabetes mellitus, education, household income, neutrophil/lymphocyte ratio, frequency of pork consumption.
Chen, <sup>928</sup> 2018 China	Rich Healthcare Group in China	3.1	W/M	211,833/4,174	20-80 (42.1)	FPG $\geq$ 7.00mmol/L and/or self-reported diabetes during the follow-up period	BMI	Age, sex, smoking status, drinking status, family history of diabetes.
Chung, <sup>929</sup> 2020 Japan	Japanese National Health Insurance System	3.9 (Kawauchi village) and	W/M	937/71	(68.4)	FBG $\geq$ 126 mg/dL or HbA1c $\geq$ 6.5% or hospital visit for DM or usage of diabetic medication	BMI	Age, sex, smoking status, drinking status, physical

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		3.6 (Ono town)						activity, restful sleep, lifestyle change score.
Conway, <sup>930</sup> 2011 China	Shanghai Men's Health Study and the Shanghai Women's Health Study	5.9	W/M	124,373/2,754	40-74	FPG $\geq 7$ mmol/L or $\geq 11.1$ mmol/L on an OGTT, and/or reporting use of a hypoglycemic agent	WHR, WHtR, HC	Sex, education, income, occupational status, energy intake, physical activity, current smoker status, alcohol consumption, hypertension, family history of type 2 diabetes.
Cugati, <sup>931</sup> 2007 Australia	The Blue Mountains Eye Study	10		3,654/163	$\geq 49$	Self-reported diabetes history and current use of diabetic medications, or FPG $\geq 7.0$ mmol/L	BMI	Age, sex, family history of diabetes, smoking, hypertension, fasting plasma glucose, hypercholesterolaemia, hypertriglyceridemia, low serum HDL level
Dai, <sup>932</sup> 2019 China	China Kadoorie Biobank study	5	W/M	16,407/647	30-44	Physician diagnosis of diabetes or screen-detected diabetes 1) a fasting blood glucose level $\geq 7.0$ mmol/L; (2) a random blood glucose level $\geq 11.1$ mmol/L and a fasting time $< 8$ h; (3) a random blood glucose level $\geq 7.0$ mmol/L and a fasting time $> 8$ h	BF%	Age, WHR
Dawson, <sup>933</sup> 2003 UK	Aberdeen Study of Cardiovascular Health in Women	20	W	1,257/60	28-48	Doctor's diagnosis of diabetes or a random glucose value greater than 11.0 mmol/l at follow-up examination or taking medication for diabetes	BMI	Age, sex, BMI at follow-up.
de Oliveira, <sup>934</sup> 2019 Brazil	The Baependi Heart Study cohort	5	W/M	1,121/75	18-102	FPG $\geq 126$ mg/dL or antidiabetic drug use	BAI	Age, sex, physical activity, TG, HDL.
DeJesus, <sup>935</sup> 2016 US	Three primary care clinics	5	W/M	106,821/1845	20-85	FPG $\geq 126$ mg/dL or an HbA1c $\geq 6.5$	BMI	Age, sex, race/ ethnicity, baseline glucose.
Derakhshan, <sup>936</sup> 2014 Iran	TLGS	9	W/M	8,400/736	20-99	FPG $\geq 7$ mmol/L, or 2-h postload glucose $\geq 11.1$ mmol/L or taking anti-diabetic medication	HC	Age, sex, BMI, WC, fasting plasma glucose, WHtR, SBP, DBP, TG, HDL, TC, smoking, activity,

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Ding, <sup>937</sup> 2020 China	the Jinchang Cohort Study	2.2	W/M	30,649/1,150	(45.5)	FPG $\geq 7.0$ mmol/l or self-report clinical diagnosis of T2D, or self-report of use of anti-diabetes drugs	BMI, WC, WHtR	Age, sex, educational level, smoking and alcohol consumption history, occupational history, family history of type 2 diabetes, systolic blood pressure, TG/HDL
Dotevall, <sup>938</sup> 2003 Sweden	The Göteborg BEDA study	18	W	1,351/63	39-65	Examination plasma glucose with a standard hexokinase method	BMI	Age, sex, BMI, triglycerides, systolic blood pressure, physical activity.
Dunstan, <sup>939</sup> 2002 Australia	The Australian Diabetes, Obesity and Lifestyle study (AusDiab)	4.3	W/M	4327/130	(47.1)	ADA criteria	BMI	Age, sex, smoking, alcohol drinking, physical activity
Ebrahimi, <sup>940</sup> 2016 Iran	Shahroud eye cohort study	5	W/M	5,190/637	45-69	Non-FBG levels were $\geq 200$ and/or they were taking blood glucose-lowering drugs	BMI	Age, sex, education, blood pressure, smoking, marital status, insurance, economic status
Fan, <sup>941</sup> 2020 China	Tianjin Medical University General Hospital Health Management Center	2.8	W/M	10,419/805	20-80 (46.2)	1) Self-reported doctor-diagnosed diabetes, 2) fasting plasma glucose $\geq 7.0$ mmol/L, 3) 2-h plasma glucose $\geq 11.1$ mmol/L, or 4) HbA1c $\geq 6.5\%$	BMI, WC, WHR	Age, sex, family history of diabetes, smoking, alcohol drinking, baseline waist circumference (in the analyses of BMI), and baseline BMI (in the analyses of waist circumference and waist-height ratio).
Feng, <sup>942</sup> 2018 Canada	National Child Development Study	12	W/M	15,043/341	>50	Self-reported diabetes	BMI	Sex, birth weight, cumulative obesity dose, myocardial infarction.
Feng, <sup>943</sup> 2021 China	Shanghai Men's and Women's Health Studies	9.2 (men) and 13.9 (women)	W/M	127,540/9,240	40-74	FBG $\geq 7$ mmol/L or blood glucose 2 hours after meal $\geq 11.1$ mmol/L or use of insulin or hypoglycemic agents or had symptoms of diabetes	BMI, WC	Age, sex, occupation, family history of diabetes, income, educational level, energy intake, physical activity, BMI, smoking, alcohol drinking, hypertension and menopause status.

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Feng, <sup>944</sup> 2020 China	Binhai Health Screening Program in Tianjin	4	W/M	49,702/1,043	63-71 (66)	FPG $\geq$ 126 mg/dL, or a 2-hour postload glucose level of $\geq$ 200 mg/dL or if the 2-hour postload value was missing; diabetes was also indicated if the physician diagnosed the participant with diabetes and/or the participant used diabetes medication	BMI	Age, sex, smoking, alcohol consumption, vegetable and meat consumption, and physical exercise, ALT, AST, BUN, serum creatinine, total cholesterol.
Fingeret, <sup>945</sup> 2018 Switzerland	CoLaus study	10.9	W/M	3,038/76	(49.9)	PFG $\geq$ 7.0 mmol/L and/or anti-diabetic drug treatment	BMI	Age, sex, smoking status, education, physical activity.
Ford, <sup>946</sup> 1997 US	the National Health and Nutrition Examination Survey Epidemiologic Follow-up Study	10	W/M	8,545/487	25-74	Death certificates, hospitalization and nursing home records, and self-report	BMI	Age
Fujita, <sup>947</sup> 2008 Japan	the Chiba and Kashiwa Cohorts	5 (Chiba) and 12 (Kashiwa)	W/M	64,523/4,570	40-79	FBG $\geq$ 126 mg/dl and/or HbA1c $\geq$ 6.5%	BMI	Age, sex, smoking habit, family history of diabetes mellitus, alcohol consumption and baseline glucose, HbA1c.
Fukuda, <sup>948</sup> 2016 Japan	NAGALA	12.8	W/M	4,629/351	(41.5)	HbA1c $\geq$ 6.5% or FPG $\geq$ 126 mg/dl	BMI	Age, sex, parental history of diabetes, lifestyle parameters, former smoker, HbA1c.
Gil-Montalbán, <sup>949</sup> 2015 Spain	PREDIMERC cohort	6.4	W.M	2,048/44	30-74 (46.9)	WHO criteria	BMI, WC	Age, sex, social class, fasting plasma glucose, HbA1c, family history of diabetes, hypertension, hypercholesterolemia, hypertriglyceridemia, smoking, activity
Diabetes Prevention Program, <sup>950</sup> 2006 US	Diabetes Prevention Program (DPP)	3.2	W/M	3,234/500	(53.8)	Physician-diagnosed diabetes	BMI, WC, HC, WHR, WHtR	Age, sex, self-reported race/ethnicity.
Hackett, <sup>951</sup> 2020 UK	English Longitudinal Study of Ageing	10	W/M	4,112/264	(65.02)	Self-reported diabetes	BMI	Age, sex, wealth, ethnicity, smoking, physical activity,

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								alcohol consumption, BMI, hypertension, CVD, HbA1c.
Hadaegh, <sup>952</sup> 2009 Iran	TLGS	3.5	W	2,801/114	(45.2)	Current use of hypoglycemic agent or FPG $\geq 126$ mg/dL and/or 2-hour postload glucose $\geq 200$ mg/dL	BMI, WC, WHR, WHtR	Age, sex, hypertension, family history of diabetes and triglycerides, abnormal glucose tolerance.
Hadaegh, <sup>953</sup> 2006 Iran	TLGS	3.6	M	1,852/69	(45.1)	FBS $\geq 126$ mg/dl and/or 2-hour postload glucose $\geq 200$ mg/dl	BMI, WC, WHR, WHtR	Age, sex, hypertension, family history of diabetes and triglycerides, abnormal glucose tolerance.
Haffner, <sup>954</sup> 1991 US	The San Antonio Heart Study	8	W/M	620/43	25-64	FPG $\geq 7.8$ mmol/L or blood glucose 2 hours after meal $\geq 11.1$ mmol/L	BMI	Sex, BMI.
Han, <sup>955</sup> 2017 China	The Rural Chinese Cohort Study	6.01	W/M	11,687/749	18-74	Currently using antidiabetic agents, or FPG level $\geq 7.0$ mmol/l	BMI, WC, WHR, ABSI, BAI	Age, sex, smoking, alcohol consumption, physical activity, systolic and diastolic blood pressure and total cholesterol, triglycerides, HDL-cholesterol.
Hardy, <sup>956</sup> 2016 US	Atherosclerosis Risk In Communities (ARIC) study	11.85	W/M	12,121/1,359	45-64 (54)	FBG $\geq 126$ mg/dL, non-FBG $\geq 200$ mg/dL, self-reported diabetes diagnosis, or taking diabetes medications	BAI, ABSI, WHR, WHtR	Age, sex, ethnicity /race.
Hart, <sup>957</sup> 2006 UK	Renfrew/Paisley and the Collaborative occupational study	29 (Renfrew/Paisley)and 32 (Collaborative occupational)	W/M	19,147/967	45-64	Acute hospital discharge data and from death certificates	BMI	Age, sex, social class, smoking, systolic blood pressure, cholesterol.
Hartwig <sup>958</sup> 2015, German	Four German Cohorts	12.1	W/M	10,258/595	50.5-62.2 (55.5)	Physician-diagnosed diabetes or self-reported current intake of antidiabetic medication	BMI, WC, WHR, WHtR	Sex, study region, education, alcohol consumption, smoking, sports activities, nutritional score.
He, <sup>959</sup> 2013 China	Chengdu, Sichuan province, China	15	W/M	711/74	(48.1)	self-reported history or FPG $\geq 7.0$ mmol/L	ABSI, BMI, WC	Age, sex, total cholesterol, LDL-C, HDL-C, triglycerides, fasting plasma glucose, prevalence of hypertension

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Heianza, <sup>960</sup> 2012 Japan	The Toranomon Hospital Health Management Center Study	4	M	5,346/214	(48.6)	FPG $\geq$ 126 mg/dL, self-reported clinician-diagnosed diabetes, or HbA1c $\geq$ 6.5%	BMI	Age, sex, parental history of diabetes, physical activity, smoking status, BMI, hypertension, log-transformed triglycerides, HDL-cholesterol.
Hinnouho, <sup>961</sup> 2015 UK	Whitehall II cohort study	17.4	W/M	7,122/798	39-63	a 2-h OGTT $\geq$ 200 mg/dL ( $\geq$ 11.1 mmol/L) or, if the 2-h post-load value was missing, FPG 126 mg/dL ( $\geq$ 7.0 mmol/L) or physician diagnosed diabetes and/or use of diabetes medication	BMI	Sex, socioeconomic status, marital status, ethnicity physical activity, smoking, alcohol, fruits and vegetables consumption, CVD medication.
Hjerkind, <sup>962</sup> 2016 Norway	HUNT study	11	W/M	38,231/957	20-85 (45.2)	Blood glucose after 2 hours was $\geq$ 11.0 mmol/L	BMI	Age, sex, education, alcohol frequency in the past 2 weeks, smoking, BP medication use, prevalent CVD, BMI, physical activity.
Holtermann, <sup>963</sup> 2006 Denmark	The Copenhagen Male Study	44	M	4,988/518	(48.7)	ICD-8: 249–250; ICD-10: E10-E11; E13-E14	BMI	Age, sex, smoking status, grams of tobacco per day, systolic and diastolic blood pressure, self-reported physical activity, alcohol consumption, social class, BMI, cardiorespiratory fitness.
Hu, <sup>964</sup> 2006 Finland	North Karelia and Kuopio Study	13.4	W/M	21,385/964	35-74	FPG $\geq$ 7.8 mmol/l ( $\geq$ 7.0 mmol/l) or OGTT $\geq$ 11.1 mmol/l or treatment with a hypoglycemic drug (oral antidiabetic agents or insulin)	BMI	Age, sex, study year, education, SBP, bread consumption, frequency of vegetable consumption, frequency of fruit consumption, frequency of sausage consumption, coffee consumption, tea consumption, alcohol consumption, smoking, physical activity, BMI.
Hu, <sup>965</sup> 2017 Japan	J-ECOH	7	W/M	51,777/3,465	30-59 (45.3)	HbA1c $\geq$ 6.5%, FPG $\geq$ 126 mg/dl, random plasma glucose $\geq$ 200 mg/dl, or currently under medical treatment for diabetes	BMI	Age, sex, worksite, baseline age, hypertension, dyslipidemia, smoking, fasting plasma glucose, HbA1c.

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Huerta, <sup>966</sup> 2013 Spain	Spanish EPIC	12.1	W/M	37,733/2,513	30-65	2-hour post-load glycaemia value $\geq$ 200 mg/dl after a 75-g OGTT, HbA1c $>$ 7%, FPG $\geq$ 126 mg/dl, non-fasting glycaemia $\geq$ 200 mg/dl, diabetes related medical visit	BMI, WC, HC, HWR, WHtR	Age, sex, smoking status, alcohol intake, family history, and baseline value of fasting blood glucose.
Hwang, <sup>967</sup> 2015 US	Japanese American Community Diabetes Study	10	W/M	406/91	34-75 (51.6)	FPG $\geq$ 7.0 mmol/L or treatment involving oral hypoglycemic agents or insulin therapy or 2-h post glucose load $\geq$ 11.1 mmol/L	BMI, WC	Age, sex, family history of diabetes, alcohol drinking, physical activity, Lipid-lowering medication, blood pressure, fasting plasma glucose, TC, TG, LDL, HDL
Ishikawa-Takata, <sup>968</sup> 2002 Japan	Male employees of a company	4	M	4,747/662	18-59 (37.6)	FBG $\geq$ 126 mg/dl or by taking medication for diabetes	BMI	Age (1 y categories), smoking status (never, past, current), alcohol intake (never, less than three times per week, more than three times per week), family history, and baseline value of systolic blood pressure
Jackson, <sup>969</sup> 2015 US	The MOVE! programme	8	W/M	238,540/90,096	(53.6)	ICD-9 or prescription of a diabetes drug	BMI	Age, marital status, additional comorbidities, Charlson comorbidity index, sleep apnoea, chronic obstructive pulmonary disease, and drug abuse.
Jacobsen, <sup>970</sup> 2002 Norway	The Tromsø study	7	W/M	10,055/73	20-54 (37.5)	Validated self-reported diabetes	BMI	Age, sex, non-fasting glucose, Non-fasting serum triglycerides, serum HDL cholesterol, systolic blood pressure, treatment for hypertension, physical activity.
Jacobs-van der Bruggen, <sup>971</sup> 2010 Netherlands	The Doetinchem Cohort Study	5	W/M	4,259/124	20-59	Self-reported diabetes	BMI	Age, sex.
Jae, <sup>972</sup> 2016 Korea	The Samsung Medical Center, Seoul	5	M	3,770/170	20-76 (47)	HbA1c $\geq$ 6.5% and/or FPG $\geq$ 126 mg/dl or physician diagnosis	BMI	Age, sex, fasting glucose, systolic blood pressure, total cholesterol, HDL cholesterol, LDL cholesterol, TG, uric acid,



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								resting heart rate, cigarette smoking, alcohol consumption, peak oxygen uptake.
Jafari-Koshki, <sup>973</sup> 2016 Iran	Isfahan Endocrine and Metabolism Research Center	8	W/M	1319/102	21-73 (43.12)	Baseline and follow-up OGTTs according to American Diabetes Association criteria or FPG $\geq$ 200 mg/dl (11.1 mmol/l) or pharmacological treatment	WC, HC, WHR	Age, WC, HC, and WHR
Janghorbani, <sup>974</sup> 2010 Iran	The Isfahan diabetes prevention study	2.3	W/M	704/72	20-70 (42.7)	FPG $\geq$ 200 mg/dl (11.1 mmol/l) or pharmacological treatment	BMI, WC, WHR, WHtR	Age, sex.
Janghorbani, <sup>975</sup> 2012 Iran	The Isfahan diabetes prevention study	5.5	W/M	1,092/102	(42.8)	FPG $\geq$ 200 mg/dl (11.1 mmol/l) or pharmacological treatment	HC	Age, sex.
Janghorbani, <sup>976</sup> 2016 Iran	The Isfahan diabetes prevention study	7	W/M	1,720/256	30-70 (43)	FPG $\geq$ 11.1 mmol/L or pharmacologic treatment	VAI	Age, sex.
Jia, <sup>977</sup> 2011 China	the Kailuan Company in Tangshan city	2	W/M	61,703/2,991	18-85 (50.4)	FPG $\geq$ 7.0 mmol/L on two occasions or current use of insulin or oral hypoglycemic agents or a positive response to the question, "Has a doctor ever told you that you have diabetes?"	WHtR	Age, smoking, alcohol intake, regular physical exercise, family history of diabetes, SBP, IgHDL, IgTG and IgBS
Jung, <sup>978</sup> 2016 Korea	Promotion Center of the Asan Medical Center	3	W/M	34,258/580	20-88 (47.4)	FPG $\geq$ 7.0 mmol/L or HbA1c $\geq$ 6.5% (48 mmol/mol)	BMI	Age, sex, baseline drinking, smoking, exercise habits, family history of diabetes, HbA1c, total cholesterol, LDL-C, uric acid, AST, and ALT
Jung, <sup>979</sup> 2017 Korea	The National Health Insurance database of Korean individuals	10	W/M	850,282/73,756	40-79 (50)	$\geq$ 90 total prescription days of insulin and oral hypoglycemic agents or fasting glucose levels $\geq$ 126 mg/dL at least twice during biennial blood tests	BMI	Age, family history of diabetes, income level, physical exercise, and alcohol consumption
Jung, <sup>980</sup> 2014 Korea	Comprehensive health examinations at Kangbuk Samsung Hospital Total Healthcare Centers	5.1	W/M	34,999/889	30-59 (37)	FPG $\geq$ 126 mg/dl, a glycated hemoglobin $\geq$ 6.5%, or the use of blood glucose lowering agents	BMI	Age, sex, smoking status, alcohol intake, and regular exercise.

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Kametani, <sup>981</sup> 2002 Japan	Health Examination Center of Kouseiren Takaoka Hospital	9	W/M	7,222/114	18-85	FPG $\geq$ 126 mg/dl	BMI	Age, obesity, hypertension, hypertriglyceridemia
Kanaya, <sup>982</sup> 2006 US	Health, Aging, and Body Composition Study	5	W/M	2,356/143	70-79	FPG $\geq$ 126 mg/dl	BMI, VAI	Age, sex, race, abdominal obesity, adiponectin, leptin, fasting glucose, insulin, HDL cholesterol, TG, hypertension.
Kaneto, <sup>983</sup> 2013 Japan	MY Health Up Study	5	W/M	13,700/408	(47.5)	FPG $\geq$ 126 mg/dl	BMI	BMI at age 20 years, sex, job type, family history of diabetes, hypertension, exercise, hours of sleep.
Kang, <sup>984</sup> 2020 China	National Free Physical Examination Program in the Chadian of Hangu area, Tianjin, China	3	W/M	1,057/39	60-86 (67.4)	FPG $\geq$ 126 mg/dL or the use of insulin or oral hypoglycemic agents, reexamination of FPG, OGTT or glycated hemoglobin level	BMI	Age, sex, widowed, hypertension, hyperlipidemia, gout, educational level, smoking and drinking habits, fasting blood glucose, physical activity, depression.
Katzmarzyk, <sup>985</sup> 2007 Canada	The physical activity longitudinal study	15.5	W/M	1,543/78	(37.2)	Self-reported diagnosis of diabetes	BMI, WC, WHR	Age, sex, smoking status, alcohol consumption and parental history of diabetes.
Kim, <sup>986</sup> 2019 Korea	The Health Screening and Promotion Center of the Asan Medical Center	5.5	W/M	17,280/771	20-49 (48.1)	FPG $\geq$ 7.0 mmol/L or HbA1c $\geq$ 6.5% (48 mmol/mol) or if anti-diabetic medications	WC, FMI	Age, sex, HbA1c, HOMA-IR, HOMA-beta, physical activity, smoking, alcohol drinking, family history of diabetes, systolic blood pressure, serum cholesterol, triglycerides, HDL- cholesterol.
Kittithaworn, <sup>987</sup> 2019 Thailand	Sanam Chai Khet, Chachoengsao Province, central Thailand	7	W/M	1,358/122	30-50 (49.4)	FPG $\geq$ 7 mmol/L (126 mg/dL) or when the individuals had a known clinical diagnosis of the disease	WC	Age, sex, blood pressure, waist circumference, impaired fasting plasma blood glucose.
Klein, <sup>988</sup> 2002 US	Beaver Dam, Wisconsin	5	W/M	4,423/114	43-84	Treated with insulin and/or oral hypoglycemic agents and/or diet) or hyperglycemia	BMI	Age, sex.
Koloverou, <sup>989</sup> 2019 Greece	ATTICA study	10	W/M	3,042/133	18-89 (45.5)	FPG $\geq$ 126 mg/dL or use of antidiabetic medication	VAI	Age, sex, years of school, physical activity and adherence to the Mediterranean diet,

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								smoking, hypertension and hyper-cholesterolemia, family history of diabetes
Kotronen, <sup>990</sup> 2013 Finland	Mini-Finland Health Survey	15	W/M	4,517/217	40-79	Medical certificate from an attending physician describing the diagnostic criteria	BMI	Age, sex, education, activity, alcohol drinking, smoking status, blood pressure, TG, HDL, fasting plasma glucose,
Kulick, <sup>991</sup> 2015 US	The Northern Manhattan Study	11	W/M	2,430/449	(69)	Self-reported diabetes	BMI	Age, sex, education, race, alcohol drinking, smoking, physical activity, hypertension, HDL, C-reactive protein
Kuwabara, <sup>992</sup> 2017 Japan	Japanese Cohort Study	5	W/M	9,721/765	30-85 (48.5)	DM on medication and/or HbA1c $\geq 6.5\%$	BMI	Age, sex, smoking and drinking habits, chronic kidney disease, body mass index and metabolic syndrome category (lean/normal and overweight/obesity with and without metabolic syndrome), and hyperuricemia (or serum uric acid).
Lamichhane, <sup>993</sup> 2020 US	ARIC	9	W/M	12,672/1,501	45-64 (53.6)	(1) FPG $\geq 126$ mg/dL, (2) nonfasting glucose $\geq 200$ mg/dL, (3) self-reported physician diagnosis of diabetes, or (4) use of antidiabetes medications, including oral agents and insulin	BMI	Education, smoking status, alcohol consumption, and height at examination 1, smoking status at age 25 years, and age and physical activity measured from visit 1 through visit 4.
Lee, <sup>994</sup> 2009 US	Cooper Clinic in Dallas, Texas	32	M	14,006/477	20-79	FPG $\geq 7.0$ mmol/l	BMI, WC, BF%	Age, examination year, parental diabetes, current smoking, alcohol consumption, systolic and diastolic blood pressure, total cholesterol, fasting plasma glucose
Lee, <sup>995</sup> 2016 Korea	the Health Promotion Center of Kangbuk Samsung Hospital, Sungkyunkwan	4	W/M	2,900/101	(44.3)	FPG $\geq 126$ mg/dL or HbA1c $\geq 6.5\%$ and/or the current use of anti-hyperglycemic medications	BMI	Age, sex, smoking, alcohol drinking, activity

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	University, Seoul, Korea							
Lee, <sup>996</sup> 2020 Korea	South Korean National Health Insurance Service	5.13	W/M	19,475,643/ 1,906,963	(50.26)	(ICD)-10 codes E11, E12, E13, or E14, the prescription of antidiabetes medication, and/or FPG level $\geq 126$ mg/dL	WC	Age, race, family history of diabetes, alcohol consumption, calorie intake, smoking, physical activity, dietary factors in quintiles (trans fat, polyunsaturated fat to saturated fat ratio, cereal fiber, whole grain, and glycemic load). For women, additionally adjusted for menopausal status (pre or post) and post-menopausal hormone use
Ley, <sup>997</sup> 2009 Canada	The Sandy Lake Health and Diabetes Project	10	W/M	540/86	10-59 (28.45)	FPG $\geq 7.0$ mmol/L, or a 2-hour postload plasma glucose $\geq 11.1$ mmol/L on an OGTT; current use of insulin or oral hypoglycemic agents; or a positive response to the question Have you ever been diagnosed with diabetes by a nurse (practitioner) or a doctor?	BMI, WC, WHtR, BF%	Age, sex
Li, <sup>998</sup> 2015 China	Nanjing Provincial Units	4	W/M	4,837/380	(52.70)	WHO diagnostic criteria	BMI	Age, sex, blood pressure, lipids, alanine aminotransferase, uric acid, and creatinine.
Li, <sup>999</sup> 2012 Japan	Aichi Prefecture	6	W/M	3008/164	35-66 (47.3)	FPG $\geq 126$ mg/dL or self-reported diabetes	BMI	Age, sex, smoking status, physical activity, alcohol drinking, ln-CRP, glucose and ln-insulin
Lissner, <sup>1000</sup> 2001 Sweden	Gothenburg Women's Health Study	24	W	1405/77	38-60 (46.8)	Searches in the national mortality and local hospital registries	HC	Age, smoking status, BMI, and waist circumference at baseline.
Liu, <sup>1001</sup> 2013 China	Chinese Multi-provincial Cohort Study	15	W/M	687/74	35-64	FPG $\geq 7.0$ mmol/L, or a positive response to the question, "Has a doctor ever told you that you have diabetes?", or current use of insulin or oral hypoglycemic agents	BMI, WC, WHR, WHtR	Age, smoking status, BMI, and waist circumference at baseline.

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Liu, <sup>1002</sup> 2020 US	The Beijing Health Management Cohort	7	W/M	43,404/2,623	18-80 (36.79)	Self-reported history of a diabetes diagnosis, the use of antidiabetic medicine, or a measured FPG $\geq 7.0$ mmol/L	BMI, WHR	Age, education, family history of diabetes, sleep duration, fasting plasma glucose,
Liu, <sup>1003</sup> 2020 China	Rich Healthcare Group in China	2.98	W/M	82,938/5,905	(44.99)	FPG $\geq 7.0$ mmol/L or a self-reported presence of DM	BMI	Age (count), FPG, TC, TG, and family history of diabetes
Liu, <sup>1004</sup> 2016 China	The BLSA study	20	W/M	1,857/144	55-96	Self-reported history of diabetes diagnosis, taking antidiabetic medicine, or FPG $\geq 7.0$ mmol/L	BMI	Age, sex, physical activity, smoking, fasting plasma glucose, alcohol drinking, depression, blood pressure, blood lipids, diet
Liu, <sup>1005</sup> 2020 China	The Tianjin Brain Study	23	W/M	971/105	30-59 (46.12)	FPG levels $\geq 7.0$ mmol/L, a previous diabetes diagnosis, or using insulin or oral antidiabetic drugs	BMI	Age, sex, education, smoking status, hypertension
Lorenzo, <sup>1006</sup> 2009 US	The San Antonio Heart Study	7.4	W/M	2,511/1734	25-64 (43.2)	FPG $\geq 7.0$ mmol/L, 2-hour glucose $\geq 11.1$ mmol/L	BMI, WC, WHR, WHtR	Age and ethnicity
Luo, <sup>1007</sup> 2015 China	The Prevention of MS and Multi-metabolic Disorders in Jiangsu Province of China Study (PMMJS)	4	W/M	3,598/160	35-74	Medical history	BMI, WC	Age, sex, alcohol consumption, and family history of diabetes
Luo, <sup>1008</sup> 2015 China	Shanghai communities—Shanghai Diabetes Study	3.7	W/M	2,764/100	30-90 (60.3)	FPG $\geq 7$ mmol/L and/or 2 h plasma glucose Endocrine 123 $\geq 7.8$ mmol/L and/or diabetes mellitus having been diagnosed and currently receiving therapy	BF%	Age, total cholesterol (TC), triglyceride (TG) and family history of diabetes
Luo, <sup>1009</sup> 2018 US	Women's Health Initiative	14.6	W	136,112/18,706	50-79	Self-report by a positive report of a new diagnosis of diabetes treated with insulin or oral drugs during follow-up	BMI, WC, WHR, BF%	Age, race/ethnicity, education, family history of diabetes, different study cohorts, smoking, alcohol intake, physical activity, HEI-2005 score, high cholesterol requiring medicine
Lv, <sup>1010</sup> 2017 China	China Kadoorie Biobank	7.2	W/M	461,211/8,784	30-79	E11 and E14 codes	BMI, WHR	Age, sex, education, marital status and family history of diabetes. Lifestyle factors

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								including smoking, alcohol consumption, physical activity and intakes of vegetables and fruits, red meat and wheat were included simultaneously in the same model
Lyssenko, <sup>1011</sup> 2011 Denmark	the Inter99 and Botnia studies	15	W/M	6,552/215	40-55 (48.1)	FPG $\geq$ 7.0 mmol/L or 2-h glucose $\geq$ 11.1 mmol/L during an OGTT	BMI, WC	Age, sex, blood pressure,
Ma, <sup>1012</sup> 2020 China	Harbin People's Health Study (HPHS) and Nutrition and Chronic Non-communicable Diseases (HDNNCDS)	6	W/M	8,735/825	20-74	FPG $\geq$ 126mg/dL or 2hPG $\geq$ 200mg/dL or HbA1c $\geq$ 6.5%, or taking medication	BMI	Age, systolic blood pressure, alcohol use, smoking history, education, regular exercise, family history of diabetes and prediabetes status at baseline, and follow-up years, in each strata
Magliano, <sup>1013</sup> 2008 Australia	The Australian Diabetes, Obesity and Lifestyle Study	5	W/M	5,842/224	25-88 (50.9)	FPG $\geq$ 7.0 mmol/l or 2-hour post glucose load $\geq$ 11.1 mmol/l or current treatment with insulin or oral hypoglycemic agents	WC	Age, sex, smoke, education, activity, hypertension, family history of diabetes
Marott, <sup>1014</sup> 2016 Denmark	Copenhagen General Population Study	6	W/M	95,756/1,823	20-100	WHO and ICD	WC	Age, gender, physical activity, pack years in smokers, alcohol consumption, education, income, waist circumference, triglyceride level, HDL-C level, systolic and diastolic BP, and glucose level.
McDermott, <sup>1015</sup> 2010 Australia	Indigenous communities in Far North Queensland	6	W/M	1,814/554	25-54	Medical records, or a 2- hour OGTT result (blood glucose level $>$ 11.1 mmol/L 2-hour post glucose load), or fasting blood glucose level ( $>$ 7 mmol/L)	BMI, WC, WHR	Age, sex, ethnicity, smoking, alcohol-drinking and physical activity
Mehlig, <sup>1016</sup> 2014 Sweden	The Prospective Population Study of Women in Gothenburg	34	W	1,448/139	38-60	Physician, if she was on antidiabetic medication or if two FPG $\geq$ 7.0 mmol/l	BMI	Age, education, smoking, consumption of alcohol, triglycerides, hypertension,

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								obesity, inactivity, and obesity × inactivity, at start of observation
Meigs, <sup>1017</sup> 2006 US	Framingham Offspring Study	7	W/M	2902/141	(53)	FPG ≥7.0 mmol/l or 2-hour post glucose load ≥11.1 mmol/l or oral hypo-glycemic agents	BMI	Age, sex, LDL-C, and smoking
Meisinger, <sup>1018</sup> 2006 Denmark	The Monitoring Trends and Determinants on Cardiovascular Diseases (MONICA)/ Cooperative Health Research in the Region of Augsburg (KORA) Augsburg Cohort Study	9.2	W/M	6,012/243	35-74	Self-reported clinically diagnosed type 2 diabetes	BMI, WC, WHR	Age, sex, survey, education, parental history of diabetes, hypertension, dyslipidemia, smoking, alcohol intake, and physical activity
Miller, <sup>1019</sup> 1996 Trinidad	the St James survey	5.47	W/M	2,491/153	35-69	FPG ≥7.8 mmol/l or 2-hour glucose ≥7.0 mmol/l or current antidiabetic therapy	BMI	Age, ethnic group, SBP, DBP
Mitsuhashi, <sup>1020</sup> 2017 Japan	Oike Clinick	5	W/M	2,263/286	(59.1)	FPG ≥7.0 mmol/l or self-reported clinician-diagnosed diabetes or HbA1c ≥6.5%	BMI	Age, sex, alcohol drinking, physical activity, smoking status, family history of diabetes
Monterrosa, <sup>1021</sup> 1995 US	San Antonio Heart Study	8	W/M	844/57	25-64	FPG ≥140 mg/dl or 2-h post-glucose load plasma glucose >200 mg/dl	BMI	Age, SES, and structural assimilation
Mukai, <sup>1022</sup> 2009 Japan	The Hisayama study	11.8	W/M	1,935/286	40-79 (56.5)	FPG ≥7.0 mmol/l and/or 2-h postload glucose concentrations of ≥11.1 mmol/l and/or the use of antidiabetes medication	WC	Age, family history of diabetes, total cholesterol, alcohol intake, smoking habits, and regular exercise.
Mustafina, <sup>1023</sup> 2021 Eastern Europe	The HAPIEE project	14	W/M	7,739/915	45-69	FPG ≥7.0 mmol/L or current treatment with insulin or oral hypo-glycaemic agents	BMI, WC	Age, sex, a family history of diabetes mellitus, fasting hyperglycaemia, a history of cardiovascular disease, hypertension, abdominal obesity, high TG level, low HDL-C concentration, education level,

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								smoking, low PA, and fruit and vegetable consumption
Nagaya, <sup>1024</sup> 2004 Japan	Gifu Prefectural Centre for Health Check and Health Promotion	7.4 (M) 7.1 (W)	W/M	25,199/1,093	30-59	FPG $\geq$ 7.00 mmol/l (126 mg/dl) and/or under medical treatment for diabetes mellitus by questionnaire	BMI	Age, smoking, drinking, exercise and education
Nakanishi, <sup>1025</sup> 2003 Japan	Employees of Company A, one of the largest building contractors in Japan	7	M	6,182/436	35-59	FPG $\geq$ 7.0 mmol/l or receipt of hypoglycemic medications	BMI	Age, family history of diabetes, alcohol consumption, cigarette smoking, and all other components of the metabolic syndrome at study entry
Namayandeh, <sup>1026</sup> 2019 Iran	Yazd Healthy Heart Cohort	10	W/M	1,641/98	20-74	Taking antidiabetic drugs and having fasting blood glucose levels $\geq$ 126 mg/d	BMI	Age, family history of diabetes, TG, serum uric acid
Narayan, <sup>1027</sup> 2020 India, Pakistan and US	Cardiometabolic Risk Reduction in South Asia Study (CARRS) and Pima Indians of Arizona	4.8 and 6.7	W/M	4,988/971	20-44	FPG $\geq$ 7.00mmol/L (126mg/dL), HbA1c $\geq$ 6.5% (48 mmol/mol), or self-reported/physician diagnosed diabetes or glucose lowering medication use	BMI	Age, sex
Narisada, <sup>1028</sup> 2021 Japan	The Aichi Health Promotion Study	4.8 (M) 4.7 (W)	W/M	19,633/876	30-64 (47.8)	HbA1c $\geq$ 6.5%, random plasma glucose $\geq$ 200 mg/dL, FPG $\geq$ 126 mg/dL or self-reported receipt of antidiabetic treatment	BMI	Age, smoking status, alcohol consumption, physical activity, family history of diabetes, hypertension and dyslipidemia
Navarro-González, <sup>1029</sup> 2016 Spain	The Vascular-Metabolic CUN cohort	9	W/M	4,340/262	18-90	Symptoms of diabetes plus random plasma glucose concentration $\geq$ 200 mg/dL, or FPG $\geq$ 126 mg/dL, or 2-h postload glucose $\geq$ 200 mg/dL during an OGTT	BMI	Age, sex, cigarette smoking (never, current, and former smokers), daily alcohol intake (yes/no), lifestyle pattern (physically active/sedentary behavior), cardiovascular disease, anti-aggregation therapy, LDL-cholesterol, hypertension, HDL-cholesterol, and triglycerides



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Nemesure, <sup>1030</sup> 2008 US	The Barbados Eye Studies	9	W/M	4,631/444	40-84 (59)	Self-reported history of physician-diagnosed diabetes and/or a HbA <sub>1c</sub> level >10%	BMI, WHR	Age, sex, and another anthropometric measure
Nichols, <sup>1031</sup> 2008 US	Kaiser Permanente Northwest	6.7	W/M	46,578/1,854	(57.5)	ICD, 9th Revision-Clinical Modification diagnosis 250.xx or FPG >125 mg/dL	BMI	Age, sex, fasting plasma glucose, SBP, TG, HDL, LDL, smoking, hypertension, and cardiovascular disease
Njølstad, <sup>1032</sup> 1998 Norway	The Finnmark Study	12	W/M	11,654/162	35-52	WHO criteria	BMI	Age, diastole blood pressure, high density lipoprotein cholesterol, glucose, smoking, height, antihypertensive treatment, physical activity, and ethnicity
Novak, <sup>1033</sup> 2012 Sweden	The Multifactor Primary Prevention Trial Study	35	M	7,251/899	47-56	ICD codes	BMI	Age, sex
Nyamdorj, <sup>1034</sup> 2008 Mauritius	Mauritius is an island in the Indian Ocean	5	W/M	3,945/628	25-74	FPG $\geq$ 7.0 mmol/l or 2 h 75 g postchallenge plasma glucose of $\geq$ 11.1 mmol/l or self-report of drug treatment for type 2 diabetes	BMI, WC, WHR, WHtR	Fasting glucose, cohort, triglyceride, family history of diabetes, blood pressure, and socioeconomic status
Oh, <sup>1035</sup> 2021 Korea	Korean Genome and Epidemiology Study	10	W/M	8,740/910	40-69	FPG levels $\geq$ 126 mg/dL or 2-h postprandial levels $\geq$ 200 mg/dL or HbA <sub>1c</sub> levels $\geq$ 6.5%	WC	Age, sex, region, smoking, blood pressure, family history of diabetes
Okada, <sup>1036</sup> 2021 Japan	Panasonic cohort study	3	W/M	19,412/416	(42.16)	FPG $\geq$ 126mg/dL, having a self-reported history of diabetes and/or the use of antidiabetic medication	BMI	Age, sex, blood pressure, HDL, LDL, TG, fasting plasma glucose, smoking, physical activity, alcohol drinking
Okamura, <sup>1037</sup> 2019 Japan	Murakami Memorial Hospital	5.1	W/M	15,464/373	(43.7)	HbA <sub>1c</sub> $\geq$ 6.5%, FPG $\geq$ 7 mmol/L or self-reported	WC	Age, grade of alcohol consumption, smoking status, exercise and fasting plasma glucose
Onat, <sup>1038</sup> 2010 Turkey	The Turkish Adult Risk Factor Study	7.4	W/M	2,111/222	(49)	FPG $\geq$ 7 mmol/L (or 2-h postprandial glucose $\geq$ 11.1 mmol/L) and/or the current use of diabetes medication	BMI	Age, sex, and lipid lowering drugs-adjustments
Ould Setti <sup>1039</sup> 2019 Finland	Kuopio Ischaemic Heart Disease Risk Factor Study (KIHD)	4.2	M	1087/55	(51.7)	Validated self-reported diabetes	BMI	Age, smoking, physical activity, alcohol drinking

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Pajunen, <sup>1040</sup> 2013 Finland	Health 2000 study	8.1	W/M	5,168/222	(50)	ICD-10 codes E10 to E14 in at least one of three registers	BMI, WC, WHR	Age, sex, education, smoking, alcohol consumption, physical exercise
Park, <sup>1041</sup> 2018 Korea	The Korean National Health Insurance Cohort	5.61	W/M	465,629/23,808	>20	FPG $\geq$ 126 mg/dl or disease codes	ABSI	Age and sex
Parker, <sup>1042</sup> 2008 US	ARIC	8.8	W/M	10,767/1,172	45-64	Had a FPG $\geq$ 126 mg/dL or had a nonfasting glucose level of $\geq$ 200 mg/dL, or reported having been told by a physician that they had diabetes, or reported taking medications for diabetes	WC, HC	Age, race, sex, clinical center, level of education, current smoking status at baseline and pack-years of cigarette smoking, alcohol consumption, family history of diabetes, baseline menopausal status and baseline hormone use by women, Keys' score, cereal fiber, fruit and vegetable intake, and physical activity
Poljičanin, <sup>1043</sup> 2012 Croatia	Croatian adult population	5	W/M	2,909/163	20-79 (55)	Self-reported diabetes	BMI, WC, HC	Age, sex, financial status, physical activity, healthy diet
Rathmann, <sup>1044</sup> 2009 Germany	KORA S4/ F4 cohort study	7	W/M	1,353/93	55-74	Self-reported physician diagnosis, or newly diagnosed diabetes $\geq$ 7.0 mmol/L fasting or $\geq$ 11.1 mmol/L 2-h glucose	BMI	Age, sex
Regmi, <sup>1045</sup> 2020 UAE	Tawam Hospital	8.7	W/M	362/47	18-75 (53)	HbA <sub>1c</sub> levels $\geq$ 6.5% or physician diagnosed	BMI	Age, sex, history of hypertension, dyslipidemia, smoking status, vascular disease, HbA <sub>1c</sub>
Ronaldsson, <sup>1045</sup> 2001 Sweden	Community of Lycksele in the county of Västerbotten	8	W/M	2,278/42	30-60	FPG $\geq$ 7.8 mmol/L or 2-h p-glucose $\geq$ 12.2 mmol/L	BMI	Age, sex, fasting plasma glucose
Ryu, <sup>1047</sup> 2004 Korea	University of Seol	2.4	W/M	24,212/11,183	30-80 (41.7)	FPG $\geq$ 7.00 mmol/l (126 mg/dl)	WC	Age, baseline blood glucose,
Sakurai, <sup>1048</sup> 2009 Japan	Toyama Prefecture	8	W/M	3992/218	35-55	FPG concentration $\geq$ 7.0 mmol/l; or 2-h glucose level	BMI	Age, sex, family history of diabetes, smoking, alcohol drinking and habitual exercise,

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						≥ 11.1 mmol/l in a 75-g OGTT; or treatment with insulin or oral glucose-lowering agents.		hypertension, hyperlipidemia, fasting plasma glucose level.
Salminen, <sup>1049</sup> 2015 Finland	The municipality of Lieto in south-western Finland	9	M	430/30	40-70	ICD-10 codes E10–14	BMI	Age, smoking status, physical activity, blood glucose, cardiovascular disease
Sanada, <sup>1050</sup> 2012 Japan	Fukushima Prefecture, Japan	10	W/M	1,554/135	23-80 (50.5)	FPG ≥126 mg/dL, 2-h glucose level in a 75 g-OGTT ≥200 mg/dL and/or received medical treatment	BMI	Age, sex, SBP, DPB, TC, HDLC, TG, UA, FPG, 2h-PG and HOMA-IR
Sans, <sup>1051</sup> 2013 Spain	The ADIPOCAT study	10	M	1,1011/85	35-69	≥7.0 mmol/L or diagnosed diabetes	BMI	Age, DBP, HDL-cholesterol, log-triglycerides,
Sares-Jäske, <sup>1052</sup> 2020 Finland	The cohort sample used was based on the Health 2000 Survey (BRIF8901)	15	W/M	4,270/417	30-69	Physician diagnosed	BMI	Sex, age, education, BMI, physical activity, alcohol consumption, smoking, energy intake, AHEI, sleep duration, waist circumference, elevated blood pressure, serum HDL cholesterol, serum triglycerides and fasting serum glucose.
Sargeant, <sup>1053</sup> 2002 Jamaica	Spanish Town	4	W/M	728/51	25-74	FPG ≥7 mM and/or 2-hour postchallenge glucose ≥11.1 mM	BMI, WC, WHR, WHtR	Age, sex, smoking status, alcohol drinking, hypertension, family history of diabetes, income,
Sasai, <sup>1054</sup> 2010 Japan	The Ibaraki Prefectural Health Study	5.5	W/M	61,415/4,429	40-79	FPG ≥126 mg/dL, 2-h glucose level in a 75 g-OGTT ≥200 mg/dL and/or received medical treatment	BMI	Age, blood glucose, fasting status, systolic blood pressure, antihypertensive medication use, total cholesterol, high-density lipoprotein cholesterol, log-transformed triglycerides, lipid medication use, smoking status, alcohol intake (none, occasionally, and BMI change from baseline to the end of the year follow-up

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Sattar, <sup>1055</sup> 2003 Scotland	West of Scotland Coronary Prevention Study	4.9	M	5,974/645	(55.15)	FPG $\geq$ 126 mg/dL and at least 1 post randomization fasting glucose measurement $>$ 36 mg/dL above baseline glucose or commencement of hypoglycemic drugs	BMI	Age, blood lipids, blood pressure, smoking
Sawada, <sup>1056</sup> 2010 Japan	Tokyo Gas Company	7	M	4,187/274	22-40 (32)	FPG $\geq$ 7.0 mmol/l or 2-h glucose level $\geq$ 11.1 mmol/l in a 75-g OGTT or treatment with insulin or oral glucose- lowering agents	BMI	Age, blood pressure, smoking status, alcohol drinking, and family history of diabetes
Schmidt, <sup>1057</sup> 2013 Denmark	The Danish National Health Service	33	M	6,502/316	18-55	ICD and ATC codes	BMI	Cognitive test score and years of education
Schulze, <sup>1058</sup> 2012 Germany	(EPIC)-Potsdam	7	W/M	25,167/849	25-74 (50)	Medical record or self-reported validated by physician or taking glucose-lowering drug	BMI, WC, HC, BAI	Age, survey (KORA only), education, smoking, alcohol consumption and physical activity
Seclen, <sup>1059</sup> 2017 Peru	PERUDIAB	3.8	W/M	662/49	25-85	FPG $\geq$ 126mg/dL or receiving medical diabetes treatment (oral anti-diabetes drugs and/or insulin)	BMI	Age, sex, education, family history of diabetes, physical activity, smoking status, alcohol drinking, hypertension
Shani, <sup>1060</sup> 2017 Israel	Clalit Health Services, the largest health maintenance organization in Israel	10	W/M	30,302/792	40-70	FBG $\geq$ 126 mg/dL and/or post- challenge glucose $\geq$ 200 mg/dL.	BMI	Baseline serum uric acid, age, SES, smoking, baseline eGFR, and baseline glucose
Simchoni, <sup>1061</sup> 2020 Israel	Israeli National Diabetes Registry	27.4	W/M	93,806/305	16-20	HbA1c $\geq$ 6.5% or serum glucose concentrations of $\geq$ 200 mg/dL in two tests performed at an interval of at least one month or $\geq$ 3 purchases of glucose lowering medications in different months	BMI	Birth year, age at study entry, education level, and cognitive score) in men and women
Sinn, <sup>1062</sup> 2019 Korea	The Samsung Medical Center Health Promotion Center in Seoul	4	W/M	51,463/5,370	(48.7)	FPG $\geq$ 126mg/dL, a self-reported history of diabetes or current use of anti-diabetic medications	BMI	Age, sex, smoking, and alcohol
Sloan, <sup>1063</sup> 2018 Japan	National Institutes of Biomedical Innovation, Health and Nutrition (NIBIOHN)	5.3	M	5,014/351	18-64 (48.5)	FPG $\geq$ 7.0 mmol/L (126 mg/dL)	BMI, WHtR	Age, systolic blood pressure, drinking habit, smoking habit, and family history of diabetes

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Snijder, <sup>1064</sup> 2003 Netherlands	The Hoorn Study	6	W/M	1,357/132	50-75	Physician diagnosed	BMI, WC, HC, TC, WHR, WTR	Age, sex
Someya, <sup>1065</sup> 2019 Japan	Juntendo University Alumni Study	32	M	661/56	55 (50– 59)	Self-administered questionnaires	BMI	Age, year of graduation, and smoking
Son, <sup>1066</sup> 2015 Korea	Kangbuk Samsung Health Study	4	W/M	2,900/101	(44.3)	Self-questionnaires and FPG criteria outlined by ADA	BMI	Age, sex, glucose level, homeostatic model of the assessment of insulin resistance, total cholesterol level, triglyceride level, fat mass, hypertension status, smoking history, alcohol consumption, and vigorous exercise
Soriguer, <sup>1067</sup> 2008 Spain	Pizarra Study	6	W/M	714/81	18-65	Capillary blood glucose level >110 mg dL <sup>-1</sup> or post OGTT blood glucose level >200 mg dL <sup>-1</sup>	BMI, WC, WHR	Age, sex, obesity, increase in BMI, IRHOMA, family history of diabetes, increase in waist circumference, a high waist-to-hip ratio, hypertension and dyslipidaemia
Stolk, <sup>1068</sup> 1993 Netherlands	Zoetermeer	11.5	W/M	5,700/65	20-65 (50.4)	Use of oral hypoglycemic drugs and/or insulin	BMI	Age, sex, smoking, blood pressure
Sui, <sup>1069</sup> 2008 US	Cooper Clinic in Dallas, Texas	17	W	6,249/143	20-79	FPG ≥7 mmol/l (126 mg/dl)	BMI	Age, current smoking, alcohol intake, hypertension, family history of diabetes, survey response pattern, and BMI. §Adjusted for age, current smoking, alcohol intake, and hypertension, family history of diabetes, survey response pattern, and treadmill test duration.
Sung, <sup>1070</sup> 2001 Korea	Asan Medical Center in Seoul	5.95	W/M	2,531/117	17-80	Medical examination or a physician's diagnosis of diabetes in hospital records	BMI	Age, sex, family history of diabetes, smoking status, education

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Tatsumi, <sup>1071</sup> 2013 Japan	Rural area of Nagano Prefecture in Japan	10.3	W	4,725/392	30-69	FPG $\geq 7.0$ mmol/L (126 mg/dL) or 2-h post-prandial plasma glucose $\geq 11.1$ mmol/L (200 mg/dL)	BMI	Age, blood glucose level, fasting status (yes, no), systolic blood pressure, total cholesterol and log transformed triglycerides, family history of diabetes, smoking status (current, ex- and non-smoker), habitual drinker (yes, no) and exercise habit (yes, no).
Ting, <sup>1072</sup> 2018 Taiwan	Department of Health Promotion and Examination of Chang Gung Memorial Hospital	8.87	W/M	8,450/2,068	18-91 (51)	ADA guideline	WC	Age, sex, education, marital status, occupation, hypertension
Tirosh, <sup>1073</sup> 2011 Israel	The MELANY study	17.4	M	37,674/1,173	17	FPG $\geq 126$ mg per deciliter (7.0 mmol per liter)	BMI	Age, family history of diabetes, blood pressure, physical activity level, fasting glucose level, and triglyceride level
Tso, <sup>1074</sup> 2007 China	Population-based Hong Kong Cardiovascular Risk Factor Prevalence Study	10	W/M	544/96	51	WHO criteria	BMI	Sex, age, baseline BMI, 2-h post-OGTT glucose, HOMA-IR, adiponectin, hsCRP, and A-FABP in sex-specific median.
Tulloch-Reid, <sup>1075</sup> 2003 India	Pima Indian	5.25	W/M	1,614/322	>18	Medical records or FPG $\geq 7.0$ mmol/l or 2-h blood glucose after a 75-g OGTT $\geq 11$	BMI, HC, WC, WHR, WHtR, WTR, BF%	Age, sex
Urrutia, <sup>1076</sup> 2021 Spain	Basque Country	7	W/M	517/43	18-99 (52.3)	2-h post-prandial plasma glucose $\geq 11.1$ mmol/L (200 mg/dL)	BMI	Age, sex, TG, HDL, family history of diabetes
Vaidya, <sup>1077</sup> 2016 China	The Kailuan study	4	W/M	100,279/4,867	18-98	FPG $\geq 7$ mmol/L, self-reported history, or active treatment with insulin or any oral hypoglycemic agent	BMI, WC, WHtR	Age, education, working environment, family history of diabetes, smoking, alcohol drinking, hypertension, and fasting plasma glucose

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Valdes, <sup>1078</sup> 2007 Spain	The Asturias Study	6.3	W/M	700/44	30-75	FPG $\geq$ 126 mg/dl and/or 2-h plasma glucose $\geq$ 200 mg/dl	BMI	Age, sex
Verschuren, <sup>1079</sup> 2008 Netherlands	Doetinchem Cohort Study	5.6	W/M	3401/67	(46.7)	Validated self-reported	BMI	Age, sex, smoking status, physical activity, alcohol drinking, physical activity
Vijayakumar, <sup>1080</sup> 2019 India	Kerala State	10	W/M	869/190	44-74 (54.50)	Current use of hypoglycemic medication and/or FPG $\geq$ 126 mg/dL	BMI, WC	Age, sex, family history of diabetes, physical activity, hypertension, Hypercholesterolemia
Von Eckardesten, <sup>1081</sup> 2000 Germany	Prospective Cardiovascular Münster Study	6.3	M	3,737/200	36-60	FPG $\geq$ 7.0 mmol/l	BMI	Age, sex, blood pressure, TG, TC, LDL, HDL.
Wang, <sup>1082</sup> 2018 China	China MUCA and China Cardiovascular Health Study	8	W/M	15,680/536	35-74 (47.9)	FPG $\geq$ 7.0 mmol/L or the use of insulin or oral hypoglycemic agents, and/or a self-reported diabetes	BMI	Sex, cigarette smoking, alcohol drinking, geographic region, urbanization, work-related physical activity, educational level, family history of diabetes.
Wang, <sup>1083</sup> 2015 China	Chinese Multi-provincial Cohort Study	15	W/M	687/74	(48.1)	FPG $\geq$ 7.0 mmol/L or self-reported history or current use of insulin or oral hypoglycemic agents	BMI, WC, VAI	Age, sex
Wang, <sup>1084</sup> 2012 Taiwan	Taiwan's Kaohsiung County	8	W/M	3,446/337	35-79	FPG $\geq$ 126 mg/dL, a nonfasting glucose level $\geq$ 200 mg/dL, or using hypoglycemic drugs	BMI	Age, sex, education, smoking status, alcohol drinking
Wang, <sup>1085</sup> 2010 US	The Strong Heart Study	7.8	W/M	1,677/477	45-74	FPG $\geq$ 126 mg/dL, 2-h PG $\geq$ 200 mg/dL, or receiving insulin and/or hypoglycaemic agent treatment, or history of diabetes indicated via questionnaire	BMI, WC	Age, sex, body mass index (BMI), waist circumference, albuminuria (yes/no), smoking (current, past and never), family history of diabetes (yes/no), and quartiles of physical activity; additionally adjusted for gender for both sexes
Wang, <sup>1086</sup> 2015 China	The Kailuan prospective study	5.35	W/M	73,987/4,726	(49.76)	Taking of anti-diabetic medicine, or FPG $\geq$ 7.0mmol/L (126mg/dL)	BMI	Cigarette smoking, alcohol drinking, geographic region, urbanization, work-related physical activity, educational

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								level and family history of diabetes
Wang, <sup>1087</sup> 2010 Australia	Aboriginal community in Australia's Northern Territory	11	W/M	686/124	20-74	Hospital and outpatient clinical records	BMI	Age, sex, fasting plasma glucose,
Wannamethee, <sup>1088</sup> 2010 UK	British Regional Heart Study (WC and WHR) and the British Women's Heart and Health Study	7	W/M	6,923/297	60-79	Doctor-diagnosed diabetes	BMI, WC, WHR	Age, sex, smoking, physical activity, alcohol intake, parental history of diabetes, pre-existing CHD, systolic blood pressure, HDL-C, log blood glucose.
Waring, <sup>1089</sup> 2010 US	Framingham Heart Study	10	W/M	1,476/217	40	FPG $\geq$ 200 mg/dL (11.1 mmol/L) and/or reported treatment with insulin or an oral hypoglycemic agent	BMI	Age, sex, weight status at age 25 years, ever use of hormones, alcohol consumption, smoking, education.
Watanabe, <sup>1090</sup> 2002 Japan	Japanese insurance company	5.7	W/M	5,636/264	(44)	FPG $\geq$ 7.0 mmol/L	BMI	Age, smoking, physical activity, alcohol intake, parental history of diabetes, pre-existing CHD, systolic blood pressure, HDL-C, log blood glucose
Wei, <sup>1091</sup> 2011 US	The San Antonio Heart Study	7.2	W/M	721/105	25-64	FPG $\geq$ 140 mg/dL and/or 2-hour post-load glucose $\geq$ 200 mg/dL	BMI, WC, HC, WHR	Age, sex, race.
Wei, <sup>1092</sup> 2020 China	The North Carolina State University Libraries	6	W/M	14,482/356	(43.7)	FPG $\geq$ 7.00 mmol/L and/or HbA1c $\geq$ 6.5% and/or self-reported diabetes previously diagnosed by a physician and/or current use of anti-hyperglycemic agents	BMI	Age, sex, hypertension
Wei, <sup>1093</sup> 1997 US	Framingham Heart Study	8.9	W/M	10,893/1,029	35-54	FPG $\geq$ 126 mg/dL, casual blood glucose $\geq$ 200 mg/dL, or using insulin or oral hypoglycemic medication	BMI	Age, sex
Wei, <sup>1094</sup> 2020 China	China Kadoorie Biobank	10	W/M	482,413/16,479	30-79	E11 and E12 codes	BMI, WC	Race, BMI, fasting glucose, HDL, triglycerides.
Wiroj, <sup>1095</sup> 2005 Thailand	The Chulalongkorn Memorial Hospital	1.67	W/M	6,924/136	35-60	FPG level was > 126 mg/dl (7.0 mmol/l)	BMI	Age, sex, physical activity, fasting plasma glucose.



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Wu, <sup>1096</sup> 2017 China	Community-based study long term program for the incidence of metabolic diseases	5	W/M	2,383/350	25-90	FPG $\geq 7.0$ mmol/L, 2-h plasma glucose $\geq 11.1$ mmol/L, self-reported history, or current use of diabetes medication	VAI	Age, sex, hypertension, fasting plasma glucose.
Xia, <sup>1097</sup> 2018 China	The Changfeng Study		W/M	2,558/645	55-70 (61)	FPG $\geq 7.0$ mmol/L and/or the use of insulin or oral hypoglycemic agents and/or a self-reported history of diabetes	BMI, WC, VAI	Age, sex, smoking status, alcohol consumption, blood pressure, HbA1c, triglycerides, HDL-c
Xu, <sup>1098</sup> 2010 China	Nanjing City	3	W/M	3,031/260	(54.3)	FPG $\geq 7.0$ mmol/L	BMI, WC, WHR, WHtR	Age, residence area, and educational attainment, family history of diabetes, cigarette smoking, alcohol drinking, TV viewing, physical activity, vegetables intake, meat intake, self-reported hypertension.
Xu, <sup>1099</sup> 2017 China	Guangzhou Biobank Cohort Study	3.6	W/M	15,752/1,812	50-95 (61)	FPG $\geq 7.0$ mmol/l, glucose after 2-h OGTT $\geq 11.1$ mmol/l, and/or self-reported physician-diagnosed diabetes	BMI, WC	Age, sex, occupation, physical activity, smoking and drinking.
Xu, <sup>11000</sup> 2020 China	Wujin District of Changzhou City, Jiangsu Province, China	7.77	W/M	15,717/867	(52.70)	FPG $\geq 7.0$ mmol/l) or self-reported diabetes or the use of antidiabetic medication (oral agents or insulin) or a diagnosis of diabetes in the medical records	WC	Age, smoking status, drinking status, physical activity, family history of diabetes, family income, and education; adjusted for sex in the total population at the same time
Xue, <sup>1101</sup> 2015 China	China MUCA	8	W/M	24,996/1,101	35-74	FPG $\geq 7.0$ mmol/L and/or the use of insulin or oral hypoglycemic agents and/or a self-reported history of diabetes	WC	Region (north vs south), urbanization (urban vs rural), education level, cigarette smoking, alcohol consumption, work-related physical activity, family history of diabetes, hypertension, dyslipidemia, and impaired fasting glucose
Yamazaki, <sup>1102</sup> 2020 Japan	Keijinkai Maruyama Clinic, Sapporo		6.19	W/M	1,478/61	43-58 (52)	FPG $\geq 126$ mg/dL, HbA1c $\geq 6.5\%$ (48 mmol/mol), or having a prescription for any anti-diabetes medication	BMI

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Yang, <sup>1103</sup> 2018 China	Dongfeng-Tongji cohort	4.6	W/M	9,962/614	(66.63)	Physician-diagnosed diabetes or taking diabetes medications (oral hypoglycemic agent or insulin) or FBG $\geq 7.0$ mmol/L	BMI, WC, WHR, VAI, ABSI	Age, smoking, drinking, physical activity, education level, hypertension, hyperlipidemia, fasting plasma glucose and family history of diabetes
Yokomichi, <sup>1104</sup> 2016 Japan	Yamanashi Prefecture	10	W/M	30,378/602	45-64	Commencement of diabetic therapies or HbA1c $\geq 6.5\%$ (48 mmol/mol)	BMI	Age, weight change from the age of 20, BMI, smoking habits, alcohol consumption and physical activity, urbanization.
Zafra-Tanaka, <sup>1105</sup> 2020 Peru	CRONICAS Cohort Study	2.5	W/M	2,510/121	44.6-63.5 (54.1)	Taking specific medication for DM or FPG $\geq 126$ mg/dl	BMI, WC, WHR, WHtR, BF%	Age, sex, study site, smoking, alcohol dependence and physical activity, history of hypertension, plasma glucose levels at baseline and family history of diabetes.
Zhang, <sup>1106</sup> 2016 China	Health Education Guidance Center of Heping District, Tianjin, China	4	W/M	4,078/241	(52.85)	FPG $\geq 126$ mg/dl	BMI, WC, WHR, WHtR, VAI	Age, SBP, TC and LDL.
Zhang, <sup>1107</sup> 2016 China	Inner Mongolians	10	W/M	1,729/658	20-84	$\geq 7.0$ mmol/L fasting or $\geq 11.1$ mmol/l 2-h glucose) or validated physician diagnosis or the use of antidiabetic medication or medical records or death certificate	BMI	Age, sex
Zhao, <sup>1108</sup> 2020 Japan	NAGALA Study	5.4	W/M	15,462/373	18-79 (43.71)	FPG $\geq 7.0$ mmol/L, HbA1c $\geq 6.5\%$	ABSI	Age, sex, smoking status, alcohol intake, BMI, fatty liver, systolic blood pressure, fasting blood glucose, HbA1c, HDL-cholesterol, triglycerides.
Zhou, <sup>1109</sup> 2021 UK	UK Biobank Study	11.2	W/M	381,363/4442	>20	ICD-10 code E11	BMI	Age, sex, smoking status, alcohol intake, BMI, fatty liver, SBP
Xu, <sup>1110</sup> 2019 China	The Tongxiang China Kadoorie Biobank prospective cohort study	6.9	W/M	53,817/1,766	(52.8)	FPG $\geq 7.00$ mmol/L and/or reports of undergoing type 2 diabetes mellitus treatment	BMI	Geographic region, urbanization, education level, cigarette smoking, alcohol consumption, work-related

## Supplementary Materials

									physical activity, family history of diabetes, hypertension, dyslipidemia, and impaired fasting glucose
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**Abbreviations:** ADIPOCAT, ADIPOsity in MONICA Catalonia; ALSWH, Australian Longitudinal Study on Women’s Health; ALT, alanine aminotransferase; ARIC, Atherosclerosis Risk in Communities; ABSI, a body shape index; ADA, American Diabetes Association; AST, aspartate aminotransferase; BG, blood glucose; BLSA, Beijing Longitudinal Study on Aging; BMI, body mass index; BAI, body adiposity index; BF, body fat; BRHS, Biopsychosocial Religion and Health Study; BUN, blood urea nitrogen; China MUCA, China Multicenter Collaborative Study of Cardiovascular Epidemiology; BP, blood pressure; BS, blood sugar; CAAR, Center for Cardiometabolic Risk Reduction in South Asia Study; CPT-4, Current Procedural Terminology; CARDIA, The Coronary Artery Risk Development in Young Adults; CRP, c-reactive protein; CVD, cardiovascular disease; DBP, diastolic blood pressure; DPP, Diabetes Prevention Program; DM, diabetes mellitus; DESIR, Epidemiological Study on the Insulin Resistance Syndrome; EXTEDD45, EXamining ouTcomEs in chroNc Disease in the 45 and Up Study; EPIC, European Prospective Investigation into Cancer and Nutrition cohorts; ELSA-Brasil, Brazilian Longitudinal Study of Adult Health; FM, fat mass; FMI, fat mass index; FBG, fasting blood glucose; FPG, fasting plasma glucose; HPFS, Health Professionals Follow-up Study; HAPIEE, Health, Alcohol, and Psychosocial Factors in Eastern Europe; HALST, healthy aging longitudinal study in Taiwan; HEI, healthy eating index; HDL, high density lipoprotein cholesterol; HUNT, Nord-Trøndelag Health Study; HPHS, Harbin People’s Health Study; HDNNCDS, Harbin Cohort Study on Diet, Nutrition and Chronic Non-communicable Diseases; HbA1c, hemoglobin A1c; HC, hip circumference; ICD-9-CM, International Classification of Diseases, 9th Revision Clinical Modification; JPHC, Japan Public Health Center-based prospective study on cancer and cardiovascular diseases; J-ECOH, Japan Epidemiology Collaboration on Occupational Health Study; KORA, Cooperative Health Research in the Region of Augsburg; LDL, low density lipoprotein cholesterol; MONICA, Monitoring Trends and Determinants on Cardiovascular Diseases; MESA, Multi-Ethnic Study of Atherosclerosis; MELANY, Metabolic, Lifestyle, and Nutrition Assessment in Young Adults; MCBS, Medicare Current Beneficiary Survey; M, men; NAGALA, NIBIOHN, National Institutes of Biomedical Innovation, Health and Nutrition; NAFLD in Gifu Area, Longitudinal Analysis; NHS, Nurses’ Health Study; OGTT, oral glucose tolerance test; PA, physical activity; PMMJS, Prevention of MS and Multi-metabolic Disorders in Jiangsu Province of China Study; REACTION, Risk Evaluation of cAncers in Chinese diabeTic Individuals: a IONgitudinal; SAT, subcutaneous adipose tissue; SINDI, Singapore Indian Eye Study; SiMES, the Singapore Malay Eye Study; SAFHS, San Antonio Family Heart Study; SES, socio-economic status; SBP, systolic blood pressure; SWHS, Shanghai Women’s Health Study; SRHS, The Saskatchewan Rural Health Study; TG, triglycerides; TLGS, The Tehran Lipid and Glucose Study; UA, uric acid; ULSAM, The community-based Uppsala Longitudinal Study of Adult Men; VAT, visceral adipose tissue; VAI, visceral adiposity index; WC, waist circumference; WHR, waist-hip ratio; WHtR, waist-height ratio; WHO, World Health Organization; WTR, waist to thigh ratio; W, women.

## Supplementary Materials

**Table S4:** ROBINS-I judgement for each domain and overall.

Study	Bias due to confounding	Bias due to selection of participants	Bias due to exposure assessment	Bias due to misclassification during follow-up	Bias due to missing data	Bias due to measurement of the outcome	Bias due to selective reporting of the results	Overall judgement
Adegbija, <sup>899</sup> 2015 Australia	Serious	Serious	Low	Moderate	Low	Low	Low	Serious
Aekplakom, <sup>900</sup> 2006 Thailand	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate
Alam, <sup>901</sup> 2020 Canada	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate
Appleton, <sup>902</sup> 2013 Australia	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Ärnlov, <sup>903</sup> 2011 Sweden	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate
Asghar, <sup>904</sup> 2011 Bangladesh	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate
Bae, <sup>905</sup> 2020 Korea	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate
Balkau, <sup>906</sup> 2011 France	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate
Bancks, <sup>907</sup> 2017 US	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate
Berkowitz, <sup>908</sup> 2016 US	Serious	Moderate	Low	Moderate	Low	Low	Low	Moderate
Biggs, <sup>909</sup> 2010	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate

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US								
Bjerregaard, <sup>910</sup> 2020 Denmark and Finland	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Bjørnholt, <sup>911</sup> 2000 Norway	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate
Bonora, <sup>912</sup> 2004 Italy	Moderate	Moderate	Low	Moderate	Moderate	Low	Low	Moderate
Bozorgmanesh, <sup>913</sup> 2011 Iran	Moderate	Moderate	Low	Moderate	Moderate	Low	Low	Moderate
Bragg, <sup>914</sup> 2018 China	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Brahimaj, <sup>915</sup> 2019 Netherlands	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate
Burke, <sup>916</sup> 2007 Australia	Moderate	Moderate	Low	Moderate	Moderate	Low	Low	Moderate
Caerphilly collaborative group, <sup>917</sup> UK	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Cameron, <sup>918</sup> 2021 US	Moderate	Moderate	Low	Moderate	Moderate	Low	Low	Moderate
Carlsson, <sup>919</sup> 2007 Norway	Serious	Low	Low	Moderate	Moderate	Low	Low	Serious
Carvalho, <sup>920</sup> 2020 Brazil	Moderate	Moderate	Low	Moderate	Moderate	Low	Low	Moderate
Chan, <sup>921</sup> 2018 Singapore	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate

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Chang, <sup>922</sup> 2016 Korea	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Chei, <sup>923</sup> 2007 Japan	Moderate	Moderate	Low	Moderate	Moderate	Low	Low	Moderate
Chen, <sup>924</sup> 2014 China	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Chen, <sup>925</sup> 2017 Taiwan	Serious	Low	Low	Moderate	Moderate	Low	Low	Serious
Chen, <sup>926</sup> 2003 Taiwan	Serious	Serious	Low	Moderate	Low	Low	Low	Serious
Chen, <sup>927</sup> 2017 China	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Chen, <sup>927</sup> 2018 China	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Chung, <sup>929</sup> 2020 Japan	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Conway, <sup>930</sup> 2011 China	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Cugati, <sup>931</sup> 2007 Australia	Moderate	Moderate	Low	Moderate	Low	Serious	Low	Serious
Dai, <sup>932</sup> 2019 China	Serious	Low	Low	Moderate	Low	Low	Low	Serious
Dawson, <sup>933</sup> 2003 UK	Serious	Moderate	Low	Moderate	Low	Low	Low	Serious
de Oliveira, <sup>934</sup> 2019	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate

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Brazil								
DeJesus, <sup>935</sup> 2016 US	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Derakhshan, <sup>936</sup> 2014 Iran	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Ding, <sup>937</sup> 2020 China	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Dotevall, <sup>938</sup> 2003 Sweden	Moderate	Moderate	Low	Moderate	Moderate	Low	Low	Moderate
Dunstan, <sup>939</sup> 2002 Australia	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Ebrahimi, <sup>940</sup> 2016 Iran	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Fan, <sup>941</sup> 2020 China	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Feng, <sup>942</sup> 2018 Canada	Serious	Low	Low	Moderate	Low	Serious	Low	Serious
Feng, <sup>943</sup> 2021 China	Serious	Low	Low	Moderate	No information	Low	Low	Serious
Feng, <sup>944</sup> 2020 China	Serious	Low	Low	Moderate	No information	Low	Low	Serious
Fingeret, <sup>945</sup> 2018 Switzerland	Serious	Low	Low	Moderate	Low	Low	Low	Serious
Ford, <sup>946</sup> 1997 US	Serious	Low	Low	Moderate	Low	Low	Low	Serious

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Fujita, <sup>947</sup> 2008 Japan	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Fukuda, <sup>948</sup> 2016 Japan	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Gil-Montalbán, <sup>949</sup> 2015 Spain	Moderate	Moderate	Low	Moderate	Moderate	Low	Low	Moderate
Diabetes Prevention Program, <sup>950</sup> 2006 US	Serious	Serious	Low	Moderate	Low	Low	Low	Serious
Hackett, <sup>951</sup> 2020 UK	Moderate	Low	Low	Moderate	Low	Serious	Low	Serious
Hadaegh, <sup>952</sup> 2009 Iran	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Hadaegh, <sup>953</sup> 2006 Iran	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate
Haffner, <sup>954</sup> 1991 US	Serious	Serious	Low	Moderate	Moderate	Low	Low	Serious
Han, <sup>955</sup> 2017 China	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Hardy, <sup>956</sup> 2016 US	Serious	Low	Low	Moderate	Moderate	Low	Low	Serious
Hart, <sup>957</sup> 2006 UK	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Hartwig <sup>958</sup> 2015, German	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
He, <sup>959</sup> 2013	Moderate	Serious	Low	Moderate	No information	Low	Low	Moderate



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China								
Heianza, <sup>960</sup> 2012 Japan	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Hinnouho, <sup>961</sup> 2015 UK	Moderate	Low	Low	Moderate	No information	Low	Low	Moderate
Hjerkind, <sup>962</sup> 2016 Norway	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Holtermann, <sup>963</sup> 2006 Denmark	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate
Hu, <sup>964</sup> 2006 Finland	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Hu, <sup>965</sup> 2017 Japan	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Huerta, <sup>966</sup> 2013 Spain	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Hwang, <sup>967</sup> 2015 US	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Ishikawa-Takata, <sup>968</sup> 2002 Japan	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Jackson, <sup>969</sup> 2015 US	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Jacobsen, <sup>970</sup> 2002 Norway	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Jacobs-van der Bruggen, <sup>971</sup> 2010 Netherlands	Serious	Moderate	Low	Moderate	Low	Moderate	Low	Serious

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Jae, <sup>972</sup> 2016 Korea	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate
Jafari-Koshki, <sup>973</sup> 2016 Iran	Serious	Moderate	Low	Moderate	Low	Low	Low	Serious
Janghorbani, <sup>974</sup> 2010 Iran	Serious	Serious	Low	Moderate	Low	Low	Low	Serious
Janghorbani, <sup>975</sup> 2012 Iran	Serious	Moderate	Low	Moderate	Low	Low	Low	Serious
Janghorbani, <sup>976</sup> 2016 Iran	Serious	Moderate	Low	Moderate	Low	Low	Low	Serious
Jia, <sup>977</sup> 2011 China	Moderate	Low	Low	Moderate	No information	Low	Low	Moderate
Jung, <sup>978</sup> 2016 Korea	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Jung, <sup>979</sup> 2017 Korea	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Jung, <sup>980</sup> 2014 Korea	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Kametani, <sup>981</sup> 2002 Japan	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Kanaya, <sup>982</sup> 2006 US	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate
Kaneto, <sup>983</sup> 2013 Japan	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Kang, <sup>984</sup> 2020	Moderate	Moderate	Low	Moderate	No information	Low	Low	Moderate

Supplementary Materials

China								
Katzmarzyk, <sup>985</sup> 2007 Canada	Moderate	Moderate	Low	Moderate	Low	Serious	Low	Moderate
Kim, <sup>986</sup> 2019 Korea	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Kittithaworn, <sup>987</sup> 2019 Thailand	Moderate	Moderate	Low	Moderate	Moderate	Low	Low	Moderate
Klein, <sup>988</sup> 2002 US	Serious	Low	Low	Moderate	Moderate	Low	Low	Serious
Koloverou, <sup>989</sup> 2019 Greece	Moderate	Low	Low	Moderate	No information	Low	Low	Moderate
Kotronen, <sup>990</sup> 2013 Finland	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Kulick, <sup>991</sup> 2015 US	Moderate	Moderate	Low	Moderate	Low	Serious	Low	Serious
Kuwabara, <sup>992</sup> 2017 Japan	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Lamichhane, <sup>993</sup> 2020 US	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Lee, <sup>994</sup> 2009 US	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Lee, <sup>995</sup> 2016 Korea	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Lee, <sup>996</sup> 2020 Korea	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate

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Ley, <sup>997</sup> 2009 Canada	Serious	Serious	Low	Moderate	Low	Low	Low	Serious
Li, <sup>998</sup> 2015 China	Moderate	Low	Low	Moderate	No information	Low	Low	Moderate
Li, <sup>999</sup> 2012 Japan	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Lissner, <sup>1000</sup> 2001 Sweden	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate
Liu, <sup>1001</sup> 2013 China	Moderate	Moderate	Low	Moderate	No information	Low	Low	Moderate
Liu, <sup>1002</sup> 2020 US	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Liu, <sup>1003</sup> 2020 China	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Liu, <sup>1004</sup> 2016 China	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Liu, <sup>1005</sup> 2020 China	Moderate	Serious	Low	Moderate	Moderate	Serious	Low	Serious
Lorenzo, <sup>1006</sup> 2009 US	Serious	Low	Low	Moderate	Low	Low	Low	Serious
Luo, <sup>1007</sup> 2015 China	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Luo, <sup>1008</sup> 2015 China	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Luo, <sup>1009</sup> 2018	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate

Supplementary Materials

US								
Lv, <sup>1010</sup> 2017 China	Moderate	Low	Low	Moderate	No information	Low	Low	Moderate
Lyssenko, <sup>1011</sup> 2011 Denmark	Serious	Low	Low	Moderate	Low	Low	Low	Serious
Ma, <sup>1012</sup> 2020 China	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Magliano, <sup>1013</sup> 2008 Australia	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Marott, <sup>1014</sup> 2016 Denmark	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
McDermott, <sup>1015</sup> 2010 Australia	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate
Mehlig, <sup>1016</sup> 2014 Sweden	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate
Meigs, <sup>1017</sup> 2006 US	Serious	Moderate	Low	Moderate	Moderate	Low	Low	Serious
Meisinger, <sup>1018</sup> 2006 Denmark	Moderate	Low	Low	Moderate	Moderate	Serious	Low	Serious
Miller, <sup>1019</sup> 1996 Trinidad	Serious	Low	Low	Moderate	Low	Low	Low	Serious
Mitsuhashi, <sup>1020</sup> 2017 Japan	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Monterrosa, <sup>1021</sup> 1995 US	Moderate	Serious	Low	Moderate	Low	Low	Low	Moderate

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Mukai, <sup>1022</sup> 2009 Japan	Moderate	Moderate	Low	Moderate	Moderate	Low	Low	Moderate
Mustafina, <sup>1023</sup> 2021 Eastern Europe	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Nagaya, <sup>1024</sup> 2004 Japan	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Nakanishi, <sup>1025</sup> 2003 Japan	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Namayandeh, <sup>1026</sup> 2019 Iran	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate
Narayan, <sup>1027</sup> 2020 India, Pakistan and US	Serious	Low	Low	Moderate	Low	Low	Low	Serious
Narisada, <sup>1028</sup> 2021 Japan	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Navarro-González, <sup>1029</sup> 2016 Spain	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Nemesure, <sup>1030</sup> 2008 US	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Nichols, <sup>1031</sup> 2008 US	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Njølstad, <sup>1032</sup> 1998 Norway	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Novak, <sup>1033</sup> 2012 Sweden	Serious	Low	Low	Moderate	Low	Low	Low	Serious
Nyamdorj, <sup>1034</sup> 2008	Moderate	Moderate	Low	Moderate	No information	Low	Low	Moderate

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Mauritius								
Oh, <sup>1035</sup> 2021 Korea	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Okada, <sup>1036</sup> 2021 Japan	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Okamura, <sup>1037</sup> 2019 Japan	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Onat, <sup>1038</sup> 2010 Turkey	Moderate	Low	Low	Moderate	No information	Low	Low	Moderate
Ould Setti <sup>1039</sup> 2019 Finland	Moderate	Moderate	Low	Moderate	Moderate	Low	Low	Moderate
Pajunen, <sup>1040</sup> 2013 Finland	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Park, <sup>1041</sup> 2018 Korea	Serious	Low	Low	Moderate	Low	Low	Low	Serious
Parker, <sup>1042</sup> 2008 US	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Poljičanin, <sup>1043</sup> 2012 Croatia	Moderate	Low	Low	Moderate	No information	Serious	Low	Moderate
Rathmann, <sup>1044</sup> 2009 Germany	Serious	Moderate	Low	Moderate	Low	Serious	Low	Serious
Regmi, <sup>1045</sup> 2020 UAE	Moderate	Moderate	Low	Moderate	Moderate	Low	Low	Moderate
Ronaldsson, <sup>1046</sup> 2001 Sweden	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate

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Ryu, <sup>1047</sup> 2004 Korea	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Sakurai, <sup>1048</sup> 2009 Japan	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Salminen, <sup>1049</sup> 2015 Finland	Moderate	Serious	Low	Moderate	Moderate	Low	Low	Serious
Sanada, <sup>1050</sup> 2012 Japan	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate
Sans, <sup>1051</sup> 2013 Spain	Moderate	Moderate	Low	Moderate	Moderate	Low	Low	Moderate
Sares-Jäske, <sup>1052</sup> 2020 Finland	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Sargeant, <sup>1053</sup> 2002 Jamaica	Moderate	Serious	Low	Moderate	No information	Low	Low	Serious
Sasai, <sup>1054</sup> 2010 Japan	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Sattar, <sup>1055</sup> 2003 Scotland	Serious	Low	Low	Moderate	Low	Low	Low	Serious
Sawada, <sup>1056</sup> 2010 Japan	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Schmidt, <sup>1057</sup> 2013 Denmark	Serious	Low	Low	Moderate	Low	Low	Low	Serious
Schulze, <sup>1058</sup> 2012 Germany	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Seclen, <sup>1059</sup> 2017	Moderate	Serious	Low	Moderate	Low	Low	Low	Serious



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Peru								
Shani, <sup>1060</sup> 2017 Israel	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Simchoni, <sup>1061</sup> 2020 Israel	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Sinn, <sup>1062</sup> 2019 Korea	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Sloan, <sup>1063</sup> 2018 Japan	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Snijder, <sup>1064</sup> 2003 Netherlands	Serious	Moderate	Low	Moderate	Low	Low	Low	Serious
Someya, <sup>1065</sup> 2019 Japan	Moderate	Serious	Low	Moderate	Low	Serious	Low	Serious
Son, <sup>1066</sup> 2015 Korea	Moderate	Moderate	Low	Moderate	Low	Serious	Low	Serious
Soriguer, <sup>1067</sup> 2008 Spain	Moderate	Serious	Low	Moderate	Low	Low	Low	Serious
Stolk, <sup>1068</sup> 1993 Netherlands	Moderate	Low	Low	Moderate	Low	Serious	Low	Serious
Sui, <sup>1069</sup> 2008 US	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Sung, <sup>1070</sup> 2001 Korea	Moderate	Moderate	Low	Moderate	Moderate	Low	Low	Moderate
Tatsumi, <sup>1071</sup> 2013 Japan	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate

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Ting, <sup>1072</sup> 2018 Taiwan	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Tirosh, <sup>1073</sup> 2011 Israel	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Tso, <sup>1074</sup> 2007 China	Moderate	Serious	Low	Moderate	Low	Low	Low	Serious
Tulloch-Reid, <sup>1075</sup> 2003 India	Serious	Moderate	Low	Moderate	Low	Low	Low	Moderate
Urrutia, <sup>1076</sup> 2021 Spain	Moderate	Serious	Low	Moderate	Low	Low	Low	Serious
Vaidya, <sup>1077</sup> 2016 China	Moderate	Low	Low	Moderate	No information	Low	Low	Moderate
Valdes, <sup>1078</sup> 2007 Spain	Serious	Serious	Low	Moderate	Low	Low	Low	Serious
Verschuren, <sup>1079</sup> 2008 Netherlands	Moderate	Low	Low	Moderate	Moderate	Serious	Low	Serious
Vijayakumar, <sup>1080</sup> 2019 India	Moderate	Serious	Low	Moderate	Moderate	Low	Low	Serious
Von Eckardesten, <sup>1081</sup> 2000 Germany	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Wang, <sup>1082</sup> 2018 China	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Wang, <sup>1083</sup> 2015 China	Serious	Serious	Low	Moderate	Low	Low	Low	Serious
Wang, <sup>1084</sup> 2012	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate

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Taiwan								
Wang, <sup>1085</sup> 2010 US	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate
Wang, <sup>1086</sup> 2015 China	Moderate	Low	Low	Moderate	No information	Low	Low	Moderate
Wang, <sup>1087</sup> 2010 Australia	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Wannamethee, <sup>1088</sup> 2010 UK	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Waring, <sup>1089</sup> 2010 US	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate
Watanabe, <sup>1090</sup> 2002 Japan	Moderate	Moderate	Low	Moderate	Low	Low	Low	Moderate
Wei, <sup>1091</sup> 2011 US	Serious	Serious	Low	Moderate	Low	Low	Low	Serious
Wei, <sup>1092</sup> 2020 China	Serious	Low	Low	Moderate	Low	Low	Low	Serious
Wei, <sup>1093</sup> 1997 US	Serious	Low	Low	Moderate	Low	Low	Low	Serious
Wei, <sup>1094</sup> 2020 China	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Wiroj, <sup>1095</sup> 2005 Thailand	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Wu, <sup>1096</sup> 2017 China	Moderate	Moderate	Low	Moderate	Moderate	Low	Low	Moderate

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Xia, <sup>1097</sup> 2018 China	Moderate	Moderate	Low	Moderate	Moderate	Low	Low	Moderate
Xu, <sup>1098</sup> 2010 China	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Xu, <sup>1099</sup> 2017 China	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Xu, <sup>1100</sup> 2020 China	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Xue, <sup>1101</sup> 2015 China	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Yamazaki, <sup>1102</sup> 2020 Japan	Moderate	Moderate	Low	Moderate	Moderate	Low	Low	Moderate
Yang, <sup>1103</sup> 2018 China	Moderate	Low	Low	Moderate	No information	Low	Low	Moderate
Yokomichi, <sup>1104</sup> 2016 Japan	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate
Zafra-Tanaka, <sup>1105</sup> 2020 Peru	Moderate	Moderate	Low	Moderate	No information	Low	Low	Moderate
Zhang, <sup>1106</sup> 2016 China	Serious	Moderate	Low	Moderate	Moderate	Low	Low	Serious
Zhang, <sup>1107</sup> 2016 China	Serious	Low	Low	Moderate	Moderate	Low	Low	Serious
Zhao, <sup>1108</sup> 2020 Japan	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate
Zhou, <sup>1109</sup> 2021	Moderate	Low	Low	Moderate	Low	Low	Low	Moderate

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UK								
Xu, <sup>1100</sup> 2019 China	Moderate	Low	Low	Moderate	Moderate	Low	Low	Moderate

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**Table S5.** Subgroup analysis of waist circumference (10 cm higher) and risk of type 2 diabetes.

	<b>n</b>	<b>Relative risk (95%CI)</b>	<b>I<sup>2</sup> (%), P<sub>heterogeneity</sub><sup>1</sup></b>	<b>Tau-squared</b>	<b>P<sub>between</sub><sup>2</sup></b>
<b>All studies</b>	78	1.61 (1.52, 1.70)	99%, <0.001	0.0492	-
<b>Sex</b>					0.90
Men	38	1.68 (1.54, 1.82)	95%, <0.001	0.0562	
Women	38	1.68 (1.56, 1.81)	98%, 0.0476		
<b>Age (years)</b>					-
>60 years	6	1.46 (1.20, 1.78)	92%, <0.001	0.0535	
<b>Region</b>					<0.001
North America	14	1.69 (1.48, 1.93)	98%, <0.001	0.0555	
Europe	17	2.00 (1.79, 2.45)	93%, <0.001	0.0425	
East Asia	32	1.51 (1.37, 1.66)	99%, <0.001	0.0634	
South Asia	3	1.26 (1.18, 1.34)	11%, 0.32	0.0006	
Southeast Asia	-	-	-	-	
Middle East	4	1.38 (1.10, 1.73)	72%, 0.01	0.0387	
Australia	4	1.53 (1.25, 1.86)	79%, 0.003	0.0301	
South America	3	1.34 (1.26, 1.43)	0%, 0.54	0.0000	
Africa	1	1.45 (1.32, 1.60)	-	-	
<b>Race</b>					0.62
White	2	1.50 (1.26, 1.78)	85%, 0.01	0.0134	
Black	3	1.60 (1.15, 2.23)	99%, <0.001	0.0807	
Hispanic	1	1.44 (1.38, 1.50)	-	-	
<b>Number of cases</b>					0.82
<500	49	1.61 (1.50, 1.73)	91%, <0.001	0.0479	
500-1000	11	1.54 (1.26, 1.87)	99%, <0.001	0.1061	
1000-5000	12	1.61 (1.39, 1.87)	98%, <0.001	0.0650	
>5000	6	1.76 (1.46, 2.12)	99%, <0.001	0.0450	
<b>Follow-up duration (years)</b>					<0.001
<5	17	1.34 (1.24, 1.44)	88%, <0.001	0.0167	
5-10	33	1.59 (1.45, 1.75)	99%, <0.001	0.0691	
10-15	17	1.74 (1.53, 1.97)	98%, <0.001	0.0614	
15-20	8	2.50 (1.90, 3.30)	78%, 0.001	0.1165	
>20	3	1.50 (1.14, 1.98)	95%, <0.001	0.0556	
<b>Exclusion of pre-existing diseases</b>					0.09
Yes	13	1.43 (1.33, 1.53)	98%, <0.001	0.0117	
No	65	1.67 (1.53, 1.82)	99%, <0.001	0.1117	
<b>Risk of bias</b>					0.40
Low	-	-	-	-	-
Moderate	61	1.59 (1.50, 1.68)	99%, <0.001	0.1058	
Serious	17	1.70 (1.44, 2.00)	91%, <0.001	0.1024	
<b>Study design</b>					0.13
Prospective cohort	74	1.63 (1.53, 1.73)	99%, <0.001	0.0138	
Retrospective cohort	4	1.56 (1.30, 1.74)	90%, 0.001	0.0115	
<b>Exposure assessment</b>					0.19
Baseline assessment	65	1.57 (1.48, 1.67)	99%, <0.001	0.0496	
Repeated measurement	13	1.78 (1.52, 2.08)	97%, <0.001	0.0469	
<b>Case ascertainment</b>					0.01

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Blood measurement	22	1.52 (1.40, 1.63)	91%, <0.001	0.0250
Self-reported	4	1.86 (1.58, 2.06)	99%, <0.001	0.1655
Registries	5	1.90 (1.75, 2.06)	86%, <0.001	0.0023
Mixed methods	47	1.57 (1.45, 1.70)	98%, <0.001	0.0677
<b>Adjustments for confounders</b>				
<b>Age</b>				<b>0.75</b>
Yes	75	1.60 (1.52, 1.69)	99%, <0.001	0.0474
No	3	1.72 (1.42, 2.10)	93%, <0.001	0.0252
<b>Sex</b>				<b>0.04</b>
Yes	71	1.63 (1.54, 1.72)	98%, <0.001	0.0498
No	7	1.42 (1.27, 1.60)	82%, <0.001	0.0204
<b>Smoking status</b>				<b>0.01</b>
Yes	52	1.64 (1.54, 1.75)	98%, <0.001	0.0526
No	26	1.49 (1.39, 1.59)	87%, <0.001	0.0187
<b>Alcohol drinking</b>				<b>0.87</b>
Yes	51	1.61 (1.52, 1.70)	99%, <0.001	0.0515
No	27	1.59 (1.46, 1.72)	92%, <0.001	0.0358
<b>Physical activity</b>				<b>&lt;0.001</b>
Yes	43	1.61 (1.52, 1.70)	99%, <0.001	0.0532
No	35	1.46 (1.38, 1.55)	89%, <0.001	0.0223
<b>Family history of diabetes</b>				<b>0.20</b>
Yes	41	1.64 (1.52, 1.78)	99%, <0.001	0.0580
No	37	1.56 (1.46, 1.66)	94%, <0.001	0.0306
<b>All abovementioned confounders</b>				<b>0.07</b>
Yes	24	1.70 (1.53, 1.88)	97%, <0.001	0.0591
No	54	1.55 (1.47, 1.64)	98%, <0.001	0.0321
<b>Adjustments for intermediates</b>				
<b>Blood glucose</b>				<b>0.35</b>
Yes	27	1.68 (1.52, 1.70)	97%, <0.001	0.0836
No	51	1.58 (1.48, 1.69)	99%, <0.001	0.0484
<b>Blood pressure</b>				<b>0.19</b>
Yes	40	1.66 (1.48, 1.87)	98%, <0.001	0.0344
No	38	1.57 (1.48, 1.67)	99%, <0.001	0.0318
<b>Blood glucose and blood pressure</b>				<b>0.44</b>
Yes	25	1.68 (1.51, 1.93)	99%, <0.001	0.0508
No	57	1.61 (1.51, 1.71)	99%, <0.001	0.0853
<b>Adjustment for all abovementioned confounders and intermediates</b>				<b>0.45</b>
Yes	11	1.68 (1.38, 2.04)	91%, <0.001	0.1015
No	67	1.60 (1.51, 1.69)	99%, <0.001	0.0486

<sup>1</sup> p for heterogeneity within each subgroup

<sup>2</sup> p for heterogeneity between subgroups using meta-regression analyses

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**Table S6.** Subgroup analysis of waist-to-hip ratio (0.1 unit higher) and risk of type 2 diabetes

	<b>n</b>	<b>Relative risk (95%CI)</b>	<b>I<sup>2</sup> (%), P<sub>heterogeneity</sub><sup>1</sup></b>	<b>Tau-squared</b>	<b>P<sub>between</sub><sup>2</sup></b>
<b>All studies</b>	34	1.63 (1.50, 1.78)	99%, <0.001	0.0535	-
<b>Sex</b>					0.89
Men	21	1.67 (1.47, 1.90)	83%, <0.001	0.0602	
Women	22	1.71 (1.54, 1.90)	98%, <0.001	0.0473	
<b>Age (years)</b>					-
>60 years	3	1.57 (1.08, 2.90)	92%, <0.001	0.0985	
<b>Region</b>					<0.001
North America	7	1.53 (1.31, 1.75)	94%, <0.001	0.0322	
Europe	7	2.05 (1.75, 2.38)	77%, <0.001	0.0218	
East Asia	10	1.73 (1.24, 2.43)	99%, <0.001	0.2784	
South Asia	1	1.65 (1.35, 2.02)	-	-	
Southeast Asia	-	-	-	-	
Middle East	4	1.21 (1.04, 1.42)	8%, 0.34	0.0021	
Australia	2	1.50 (1.01, 2.18)	84%, <0.001	0.0660	
South America	2	1.10 (1.04, 1.16)	0%, 1.0	0.0000	
Africa	1	1.45 (1.30, 1.61)	-	-	
<b>Race</b>					0.40
White	3	1.55 (0.98, 2.76)	94%, <0.001	0.0712	
Black	2	1.46 (1.01, 2.14)	94%, <0.001	0.1428	
Hispanic	1	1.23 (1.19, 1.27)	-	-	
<b>Number of cases</b>					0.82
<500	24	1.62 (1.43, 1.83)	88%, <0.001	0.0725	
500-1000	3	1.53 (0.92, 2.55)	98%, <0.001	0.1341	
1000-5000	4	1.98 (1.75, 2.23)	81%, <0.001	0.0146	
>5000	3	1.41 (1.13, 1.75)	99%, <0.001	0.0386	
<b>Follow-up duration (years)</b>					<0.001
<5	10	1.47 (1.21, 1.76)	82%, <0.001	0.0661	
5-10	13	1.74 (1.52, 1.98)	99%, <0.001	0.0546	
10-15	8	1.57 (1.32, 1.88)	83%, <0.001	0.0506	
15-20	3	1.80 (1.27, 2.54)	82%, 0.01	0.0761	
>20	-	-	-	-	
<b>Exclusion of pre-existing diseases</b>					0.09
Yes	8	1.65 (1.32, 2.06)	93%, <0.001	0.0864	
No	26	1.64 (1.48, 1.81)	98%, <0.001	0.0548	
<b>Risk of bias</b>					0.35
Low	-	-	-	-	
Moderate	28	1.65 (1.51, 1.80)	97%, <0.001	0.0501	
Serious	6	1.60 (1.41, 1.82)	91%, <0.001	0.1142	
<b>Study design</b>					-
Prospective cohort	34	1.63 (1.50, 1.78)	99%, <0.001	0.0535	
Retrospective cohort	-	-	-	-	
<b>Exposure assessment</b>					0.19
Baseline assessment	27	1.61 (1.41, 1.77)	97%, <0.001	0.3018	
Repeated measurement	7	1.79 (1.18, 2.71)	95%, <0.001	0.0524	



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<b>Case ascertainment</b>					0.01
Blood measurement	14	1.66 (1.38, 1.92)	95%, <0.001	0.1030	
Self-reported	4	2.00 (1.41, 2.74)	99%, <0.001	0.1224	
Registries	-	-	-	-	
Mixed methods	16	1.54 (1.32, 1.79)	97%, <0.001	0.0830	
<b>Adjustments for confounders</b>					
<b>Age</b>					0.75
Yes	30	1.65 (1.50, 1.82)	98%, <0.001	0.0543	
No	4	1.82 (1.25, 2.64)	98%, <0.001	0.1427	
<b>Sex</b>					0.04
Yes	29	1.60 (1.47, 1.73)	98%, <0.001	0.0357	
No	5	1.77 (1.24, 2.53)	90%, <0.001	0.0596	
<b>Smoking status</b>					0.01
Yes	17	1.69 (1.42, 2.02)	96%, <0.001	0.1221	
No	17	1.61 (1.39, 1.86)	91%, <0.001	0.0794	
<b>Alcohol drinking</b>					0.87
Yes	19	1.79 (1.49, 2.15)	97%, <0.001	0.1500	
No	15	1.70 (1.50, 1.91)	92%, <0.001	0.0505	
<b>Physical activity</b>					<0.001
Yes	16	1.76 (1.45, 2.13)	96%, <0.001	0.1360	
No	18	1.57 (1.36, 1.80)	98%, <0.001	0.0760	
<b>Family history of diabetes</b>					0.20
Yes	15	1.67 (1.48, 1.88)	91%, <0.001	0.0390	
No	19	1.62 (1.34, 1.96)	99%, <0.001	0.1656	
<b>All abovementioned confounders</b>					0.08
Yes	7	1.90 (1.50, 2.40)	84%, <0.001	0.0808	
No	27	1.58 (1.43, 1.74)	99%, <0.001	0.0515	
<b>Adjustments for intermediates</b>					
<b>Blood glucose</b>					0.35
Yes	8	1.80 (1.40, 2.32)	93%, <0.001	0.1047	
No	26	1.61 (1.39, 1.87)	97%, <0.001	0.1374	
<b>Blood pressure</b>					0.19
Yes	12	1.57 (1.39, 1.77)	92%, <0.001	0.0316	
No	22	1.69 (1.41, 2.02)	97%, <0.001	0.1693	
<b>Blood glucose and blood pressure</b>					0.33
Yes	7	1.77 (1.35, 2.32)	93%, <0.001	0.1059	
No	27	1.62 (1.40, 1.88)	98%, <0.001	0.1381	
<b>Adjustment for all abovementioned confounders and intermediates</b>					0.45
Yes	2	2.41 (1.96, 2.96)	0%, 0.72	0.0000	
No	32	1.60 (1.46, 1.75)	98%, <0.001	0.0526	

<sup>1</sup> p for heterogeneity within each subgroup

<sup>2</sup> p for heterogeneity between subgroups using meta-regression analyses

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**Table S7.** Subgroup analysis of waist-to-height ratio (0.1 unit higher) and risk of type 2 diabetes.

	<b>n</b>	<b>Relative risk (95% CI)</b>	<b>I<sup>2</sup> (%), P<sub>heterogeneity</sub><sup>1</sup></b>	<b>Tau-squared</b>	<b>P<sub>between</sub><sup>2</sup></b>
<b>All studies</b>	25	1.73 (1.51, 1.98)	97%, <0.001	0.0996	-
<b>Sex</b>					0.86
Men	16	1.74 (1.62, 1.90)	82%, <0.001	0.0430	
Women	15	1.72 (1.61, 1.86)	86%, <0.001	0.0413	
<b>Region</b>					<0.001
North America	4	1.79 (1.39, 2.31)	96%, <0.001	0.0588	
Europe	2	2.42 (2.21, 2.64)	0%, 1.0	0.0000	
East Asia	12	1.62 (1.35, 1.95)	93%, <0.001	0.0844	
South Asia	1	1.58 (1.38, 1.80)	-	-	
Southeast Asia	-	-	-	-	
Middle East	3	1.72 (1.25, 2.36)	27%, 0.08	0.0244	
Australia	-	-	-	-	
South America	2	1.71 (1.30, 2.27)	8%, 0.30	0.0034	
Africa	1	1.51 (1.33, 1.72)	-	-	
<b>Race</b>					
White	1	2.04 (1.95, 2.14)	-	-	<0.001
Black	2	1.58 (1.50, 1.67)	0%, 0.42		
<b>Number of cases</b>					0.83
<500	7	1.68 (1.29, 2.17)	98%, <0.001	0.0097	
>500	18	1.71 (1.59, 1.85)	5%, 0.008	0.1167	
<b>Follow-up duration (years)</b>					0.02
<5	12	1.66 (1.49, 1.89)	75%, <0.001	0.0290	
5-10	6	1.51 (1.11, 2.07)	98%, <0.001	0.1416	
>10	7	2.01 (1.79, 2.26)	56%, <0.001	0.0112	
<b>Exclusion of pre-existing diseases</b>					0.88
Yes	7	1.77 (1.62, 1.93)	0%, 0.78	0.0000	
No	18	1.73 (1.48, 2.04)	98%, <0.001	0.1030	
<b>Risk of bias</b>					0.61
Low	-	-	-	-	-
Moderate	18	1.74 (1.40, 2.12)	90%, <0.001	0.0825	
Serious	7	1.62 (1.39, 1.86)	97%, <0.001	0.0902	
<b>Study design</b>					0.25
Prospective cohort	24	1.71 (1.49, 1.97)	98%, <0.001	0.0993	
Retrospective cohort	1	2.31 (1.48, 3.62)	-	-	
<b>Exposure assessment</b>					0.75
Baseline assessment	21	1.72 (1.48, 2.00)	98%, <0.001	0.1005	
Repeated measurement	4	1.79 (1.54, 2.13)	43%, 0.15	0.0133	
<b>Case ascertainment</b>					0.42
Blood measurement	9	1.62 (1.30, 2.00)	87%, <0.001	0.0699	
Self-reported	1	1.87 (1.47, 2.28)	-	-	
Registries	1	1.42 (0.95, 2.13)	-	-	
Mixed methods	14	1.82 (1.67, 1.99)	76%, <0.001	0.0149	
<b>Adjustments for confounders</b>					
<b>Age</b>					<0.001

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Yes	24	1.70 (1.49, 1.94)	97%, <0.001	0.0878	
No	1	2.45 (2.21, 2.72)	-	-	
<b>Sex</b>					0.28
Yes	24	1.74 (1.51, 2.00)	97%, <0.001	0.1025	
No	1	1.58 (1.38, 1.80)	-	-	
<b>Smoking status</b>					0.21
Yes	16	1.76 (1.43, 2.17)	97%, <0.001	0.1599	
No	9	1.64 (1.41, 1.90)	90%, <0.001	0.0344	
<b>Alcohol drinking</b>					0.21
Yes	16	1.76 (1.43, 2.17)	97%, <0.001	0.1599	
No	9	1.64 (1.41, 1.90)	90%, <0.001	-	
<b>Physical activity</b>					0.053
Yes	11	1.86 (1.41, 2.44)	98%, <0.001	0.1950	
No	14	1.60 (1.43, 1.79)	85%, <0.001	0.0286	
<b>Family history of diabetes</b>					0.15
Yes	12	1.63 (1.51, 1.76)	28%, 0.17	0.0046	
No	13	1.83 (1.50, 2.23)	98%, <0.001	0.1129	
<b>All abovementioned confounders</b>					0.67
Yes	6	1.79 (1.64, 1.95)	0%, 0.73	0.0000	
No	19	1.72 (1.47, 2.02)	98%, <0.001	0.1024	
<b>Adjustments for intermediates</b>					
<b>Blood glucose</b>					0.15
Yes	9	1.61 (1.44, 1.80)	47%, 0.06	0.0115	
No	16	1.75 (1.47, 2.10)	98%, <0.001	0.1083	
<b>Blood pressure</b>					0.04
Yes	14	1.60 (1.36, 1.88)	92%, <0.001	0.0720	
No	11	1.88 (1.62, 2.17)	93%, <0.001	0.0473	
<b>Blood glucose and blood pressure</b>					0.15
Yes	8	1.58 (1.41, 1.77)	35%, 0.15	0.0083	
No	17	1.77 (1.47, 2.13)	98%, <0.001	0.1107	
<b>Adjustment for all abovementioned confounders and intermediates</b>					0.84
Yes	4	1.77 (1.61, 1.94)	0%, 0.49	0.0000	
No	21	1.74 (1.49, 2.02)	98%, <0.001	0.1022	

<sup>1</sup> p for heterogeneity within each subgroup

<sup>2</sup> p for heterogeneity between subgroups using meta-regression analyses

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**Table S8.** Subgroup analysis of visceral adiposity index (1 unit higher) and risk of type 2 diabetes.

	<b>n</b>	<b>Relative risk (95%CI)</b>	<b>I<sup>2</sup> (%), P<sub>heterogeneity</sub><sup>1</sup></b>	<b>Tau-squared</b>	<b>P<sub>between</sub><sup>2</sup></b>
<b>All studies</b>	9	1.42 (1.27, 1.58)	84%, <0.001	0.0222	-
<b>Sex</b>					0.97
Men	2	1.62 (1.39, 1.89)	0%, 0.69	0.0000	
Women	2	1.63 (1.40, 1.88)	0%, 0.72	0.0000	
<b>Region</b>					0.26
North America	1	1.19 (0.95, 1.49)	-	-	
Europe	1	1.25 (1.12, 1.40)	-	-	
East Asia	5	1.57 (1.28, 1.92)	89%, <0.001	0.0461	
South Asia	-	-	-	-	
Southeast Asia	-	-	-	-	
Middle East	2	1.33 (1.08, 1.63)	87%, 0.005	0.0195	
Australia	-	-	-	-	
South America	-	-	-	-	
Africa	-	-	-	-	
<b>Follow-up duration (years)</b>					0.01
<5	1	1.68 (1.35, 2.09)	-	-	
5-10	6	1.47 (1.27, 1.70)	84%, <0.001	0.0268	
>10	2	1.22 (1.14, 1.31)	0%, 0.57	0.0000	
<b>Exclusion of pre-existing diseases</b>					0.12
Yes	1	1.25 (1.12, 1.40)	-	-	
No	8	1.45 (1.28, 1.64)	85%, <0.001	0.0258	
<b>Risk of bias</b>					0.45
Low	-	-	-	-	-
Moderate	7	1.33 (1.20, 1.50)	78%, <0.001	0.0204	
Serious	2	1.49 (1.09, 2.00)	92%, <0.001	0.0405	
<b>Study design</b>					-
Prospective cohort	9	1.42 (1.27, 1.58)	84%, <0.001	0.0222	
Retrospective cohort	-	-	-	-	
<b>Exposure assessment</b>					-
Measured	9	1.42 (1.27, 1.58)	84%, <0.001	0.0222	
Self-reported	-	-	-	-	
Both	-	-	-	-	
Exposure assessment					-
<b>Baseline assessment</b>	9	1.42 (1.27, 1.58)	84%, <0.001	0.0222	
Repeated measurement	-	-	-	-	0.09
Case ascertainment					
<b>Blood measurement</b>	1	1.60 (1.42, 1.81)	-	-	
Self-reported	-	-	-	-	
Registries	-	-	-	-	
Mixed methods	8	1.39 (1.24, 1.57)	83%, <0.001	0.0217	
<b>Adjustments for confounders</b>					
<b>Age</b>					-
Yes	9	1.42 (1.27, 1.58)	84%, <0.001	0.0222	
No	-	-	-	-	

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<b>Sex</b>					-
Yes	9	1.42 (1.27, 1.58)	84%, <0.001	0.0222	
No	-	-	-	-	
<b>Smoking status</b>					0.88
Yes	5	1.43 (1.17, 1.75)	88%, <0.001	0.0077	
No	4	1.42 (1.28, 1.58)	68%, 0.02	0.0445	
<b>Alcohol drinking</b>					0.51
Yes	5	1.37 (1.23, 1.53)	80%, <0.001	0.0124	
No	4	1.52 (1.13, 2.04)	90%, <0.001	0.0817	
<b>Physical activity</b>					0.54
Yes	4	1.37 (1.20, 1.56)	85%, <0.001	0.0148	
No	5	1.49 (1.19, 1.86)	86%, <0.001	0.0553	
<b>Family history of diabetes</b>					0.51
Yes	5	1.37 (1.23, 1.53)	80%, <0.001	0.0124	
No	4	1.52 (1.13, 2.04)	90%, <0.001	0.0817	
<b>All abovementioned confounders</b>					0.96
Yes	3	1.43 (1.25, 1.63)	78%, 0.01	0.0106	
No	6	1.42 (1.20, 1.68)	85%, <0.001	0.0362	
<b>Adjustments for intermediates</b>					
<b>Blood glucose</b>					0.67
Yes	6	1.40 (1.22, 1.61)	85%, <0.001	0.0239	
No	3	1.46 (1.16, 1.83)	86%, 0.001	0.0338	
<b>Blood pressure</b>					0.005
Yes	6	1.56 (1.37, 1.77)	74%, <0.001	0.0182	
No	3	1.21 (1.14, 1.29)	0%, 0.80	0.0000	
<b>Blood glucose and blood pressure</b>					0.41
Yes	4	1.53 (1.24, 1.88)	83%, <0.001	0.0357	
No	5	1.35 (1.18, 1.53)	82%, <0.001	0.0170	
<b>Adjustment for all abovementioned confounders and intermediates</b>					0.59
Yes	1	1.47 (1.35, 1.61)	-	-	
No	8	1.41 (1.24, 1.61)	85%, <0.001	0.0274	

<sup>1</sup> p for heterogeneity within each subgroup

<sup>2</sup> p for heterogeneity between subgroups using meta-regression analyses

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**Table S9.** GRADE evidence table for the association of adiposity measures and risk of type 2 diabetes.

Certainty assessment							No of patients		Effect		Certainty	Importance
No of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Participants	Cases (event rate)	Relative (95% CI)	Absolute (95% CI)		
<b>Body mass index</b>												
182	observational studies	serious <sup>a</sup>	serious <sup>b</sup>	not serious	not serious	Publication bias very strong association dose response gradient	5,585,850	228,695 (4.09%)	<b>RR 1.72</b> (1.65 to 1.81)	<b>64 more per 1,000</b> (from 58 more to 72 more)	⊕⊕⊕⊕ High	CRITICAL
<b>Waist circumference</b>												
78	observational studies	serious <sup>c</sup>	serious <sup>d</sup>	not serious	not serious	publication bias strongly suspected very strong association dose response gradient	21,459,955	2,006,648 (9.35%)	<b>RR 1.61</b> (1.52 to 1.70)	<b>54 more per 1,000</b> (from 46 more to 62 more)	⊕⊕⊕⊕ High	CRITICAL
<b>Hip circumference</b>												
14	observational studies	serious <sup>e</sup>	serious <sup>f</sup>	not serious	serious <sup>g</sup>	dose response gradient	231,410	9623 (4.2%)	<b>RR 1.11</b> (0.98 to 1.27)	<b>10 more per 1,000</b> (from 2 fewer to 24 more)	⊕⊕○○ Low	CRITICAL
<b>Waist-to-hip ratio</b>												

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Certainty assessment							No of patients		Effect		Certainty	Importance
No of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Participants	Cases (event rate)	Relative (95% CI)	Absolute (95% CI)		
34	observational studies	serious <sup>h</sup>	serious <sup>i</sup>	not serious	not serious	publication bias strongly suspected very strong association dose response gradient	934,589	46,763 (5%)	<b>RR 1.63</b> (1.50 to 1.78)	<b>56 more per 1,000</b> (from 44 more to 69 more)	⊕⊕⊕⊕ High	CRITICAL

### Waist-to-height ratio

25	observational studies	serious <sup>j</sup>	not serious <sup>k</sup>	not serious	not serious	publication bias strongly suspected strong association dose response gradient	210,053	12,352 (5.9%)	<b>RR 1.73</b> (1.51 to 1.98)	<b>64 more per 1,000</b> (from 45 more to 87 more)	⊕⊕⊕⊕ High	CRITICAL
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### Visceral adiposity index

9	observational studies	serious <sup>l</sup>	serious <sup>m</sup>	not serious	not serious	strong association dose response gradient	75,145	2158 (2.9%)	<b>RR 1.42</b> (1.27 to 1.58)	<b>37 more per 1,000</b> (from 24 more to 51 more)	⊕⊕⊕⊕ High	CRITICAL
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### Body fat percentage

6	observational studies	serious <sup>n</sup>	serious <sup>o</sup>	not serious	not serious	strong association dose response gradient	44,593	2558 (5.7%)	<b>RR 2.05</b> (1.41 to 2.98)	<b>93 more per 1,000</b> (from 36 more to 175 more)	⊕⊕⊕⊕ High	CRITICAL
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Certainty assessment							No of patients		Effect		Certainty	Importance
No of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Participants	Cases (event rate)	Relative (95% CI)	Absolute (95% CI)		

### Thigh circumference

2	observational studies	very serious <sup>p</sup>	serious <sup>q</sup>	serious <sup>r</sup>	serious <sup>s</sup>	none	2971	454 (15.3%)	<b>RR 1.11</b> (0.86 to 1.42)	<b>10 more per 1,000</b> (from 12 fewer to 37 more)	⊕○○○ Very low	CRITICAL
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### A body shape index

5	observational studies	serious <sup>t</sup>	serious <sup>u</sup>	not serious	not serious	strong association dose response gradient	481,870	26,364 (5.5%)	<b>RR 1.09</b> (1.05 to 1.13)	<b>8 more per 1,000</b> (from 4 more to 11 more)	⊕⊕⊕⊕ High	CRITICAL
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### Body adiposity index

5	observational studies	serious <sup>v</sup>	serious <sup>w</sup>	not serious	not serious	strong association dose response gradient	60,790	3576 (5.9%)	<b>RR 2.55</b> (1.59 to 4.10)	<b>137 more per 1,000</b> (from 52 more to 274 more)	⊕⊕⊕⊕ High	CRITICAL
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CI: confidence interval; RR: relative risk

## Explanations

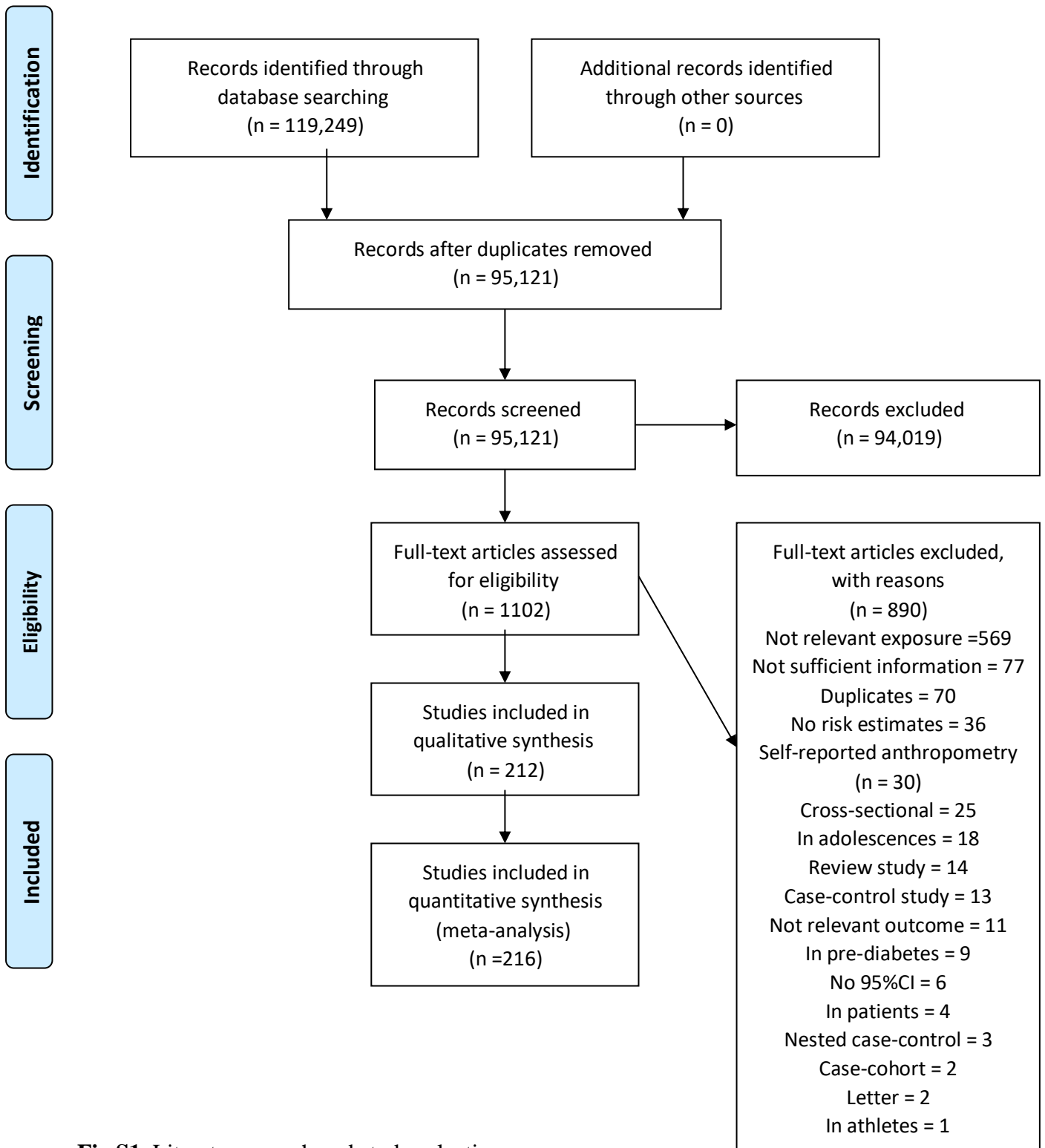
a. Downgraded since 70 studies with low weighting (35%) judged as serious risk of bias based on ROBINS-I was included in the meta-analysis and residual confounding cannot be ruled out.



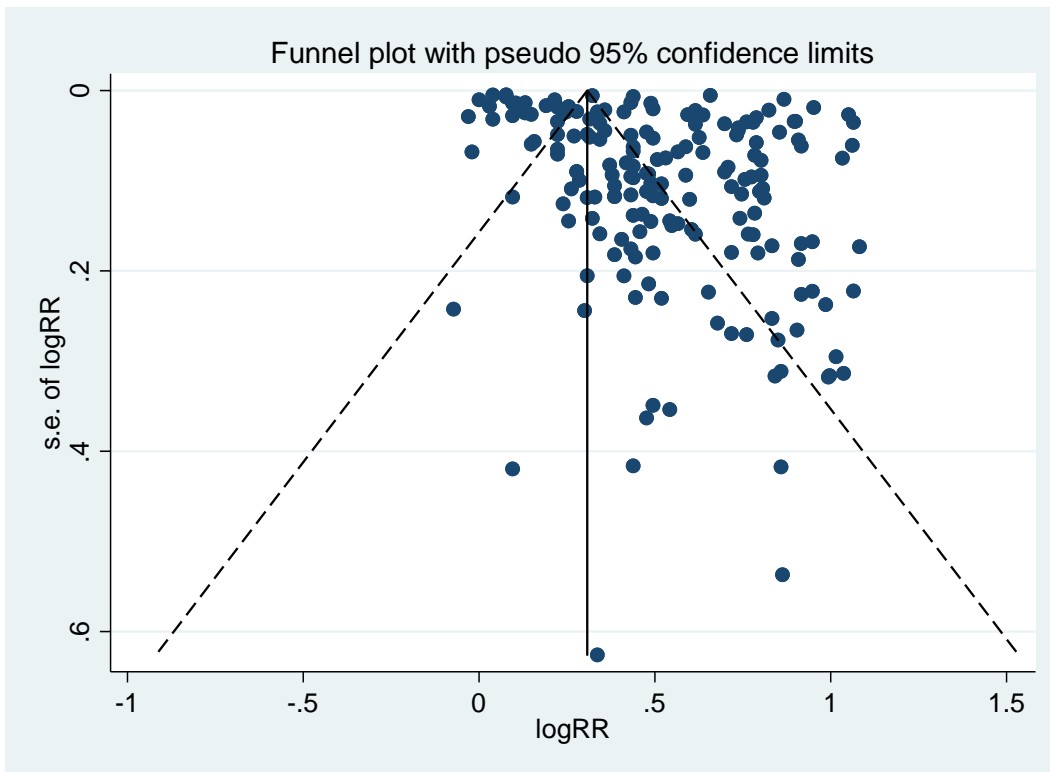
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- b. Serious inconsistency since  $I^2 = 99\%$ ,  $P_{het} < 0.001$ , that was largely unexplained in pre-specified subgroup and sensitivity analyses. Downgraded.
- c. Downgraded since 28 studies with low weighting (34%) judged as serious risk of bias based on ROBINS-I was included in the meta-analysis and residual confounding cannot be ruled out.
- d. Serious inconsistency since  $I^2 = 99\%$ ,  $P_{het} < 0.001$ , that was largely unexplained in pre-specified subgroup and sensitivity analyses. Downgraded.
- e. Downgraded since 4 studies with low weighting (28%) judged as serious risk of bias based on ROBINS-I was included in the meta-analysis and residual confounding cannot be ruled out.
- f. Serious inconsistency since  $I^2 = 98\%$ ,  $P_{het} < 0.001$ , that was largely unexplained in pre-specified subgroup and sensitivity analyses. Downgraded.
- g. Serious imprecision since the 95% confidence intervals includes no effect (RR of 1.00), but fails to exclude important harm (RR of  $>1.25$ ). Downgraded.
- h. Downgraded since 10 studies with low weighting (30%) judged as serious risk of bias based on ROBINS-I was included in the meta-analysis and residual confounding cannot be ruled out.
- i. Serious inconsistency since  $I^2 = 99\%$ ,  $P_{het} < 0.001$ , that was largely unexplained in pre-specified subgroup and sensitivity analyses. Downgraded.
- j. Downgraded since 7 studies with low weighting (30%) judged as serious risk of bias based on ROBINS-I was included in the meta-analysis and residual confounding cannot be ruled out.
- k. Serious inconsistency since  $I^2 = 97\%$ . However, a pre-specified subgroup analysis indicated similar result with the main analysis in studies that excluded those with pre-existing diseases (RR: 1.77, 95%CI: 1.62, 1.93;  $I^2 = 0\%$ ,  $n = 7$ ). Not downgraded.
- l. Downgraded since 2 studies with low weighting (20%) judged as serious risk of bias based on ROBINS-I was included in the meta-analysis and residual confounding cannot be ruled out.
- m. Serious inconsistency since  $I^2 = 84\%$ ,  $P_{het} < 0.001$ , that was largely unexplained in pre-specified subgroup and sensitivity analyses. Downgraded.
- n. Downgraded since 2 studies with low weighting (32%) judged as serious risk of bias based on ROBINS-I was included in the meta-analysis and residual confounding cannot be ruled out.
- o. Serious inconsistency since  $I^2 = 91\%$ ,  $P_{het} < 0.001$ . Downgraded.
- p. Very serious risk of bias since both studies were rated to have serious risk of bias. Downgraded by two levels.
- q. Serious inconsistency since  $I^2 = 85\%$ ,  $P_{het} < 0.001$ . Downgraded.
- r. Serious indirectness since only two small cohort studies in Europe and Asia were included in the analysis. Downgraded.
- s. Serious imprecision since the 95% confidence intervals includes no effect (RR of 1.00), but fails to exclude important harm (RR of  $>1.25$ ). Downgraded.
- t. Downgraded since 2 studies with low weighting (34%) judged as serious risk of bias based on ROBINS-I was included in the meta-analysis and residual confounding cannot be ruled out.
- u. Serious inconsistency since  $I^2 = 85\%$ ,  $P_{het} < 0.001$ . Downgraded.
- v. Downgraded since 1 study with low weighting (21%) judged as serious risk of bias based on ROBINS-I was included in the meta-analysis and residual confounding cannot be ruled out.
- w. Serious inconsistency since  $I^2 = 98\%$ ,  $P_{het} < 0.001$ . Downgraded.

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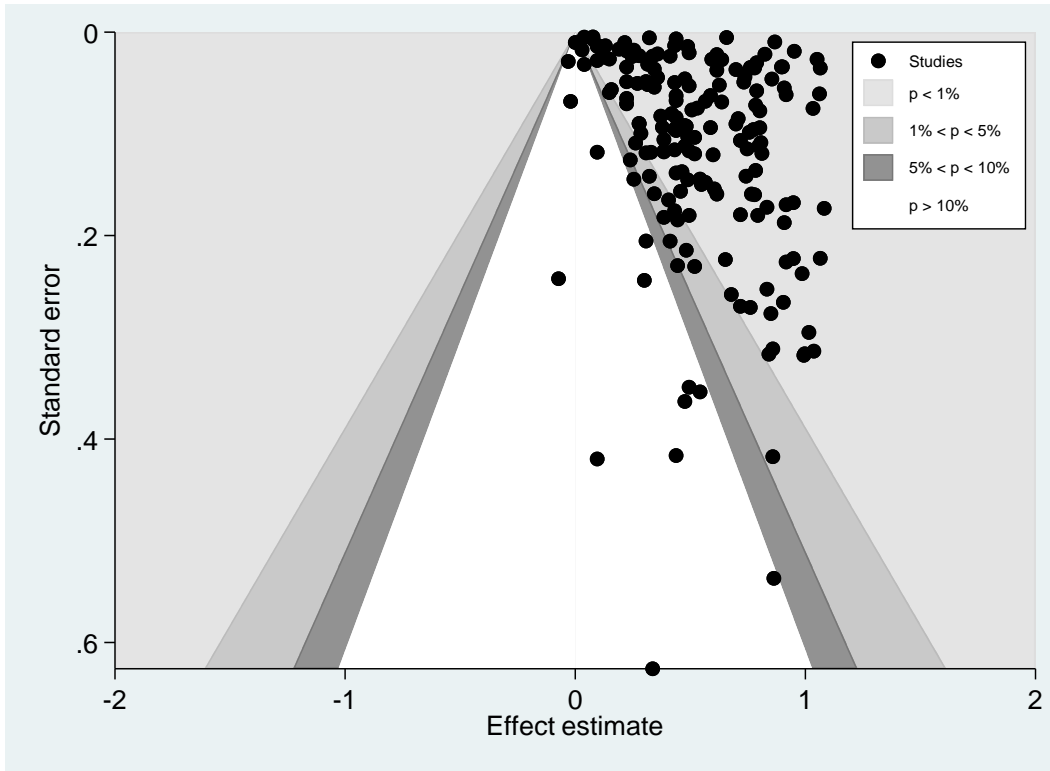


**Fig S1.** Literature search and study selection process.



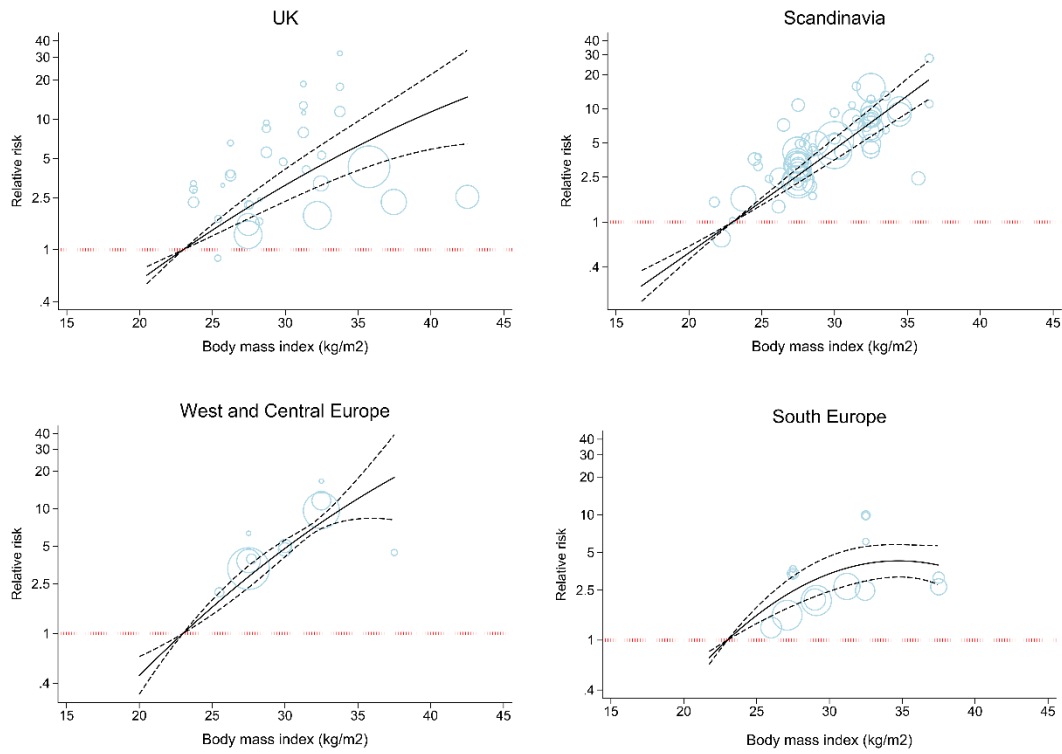
**Figure S2.** Funnel plot of the relative risks of 182 studies on body mass index (5 unit) and the risk of type 2 diabetes. Begg's test  $P=0.21$ , Egger's test  $P=0.01$ . Log RR: natural logarithm of relative risk. s.e: standard error.

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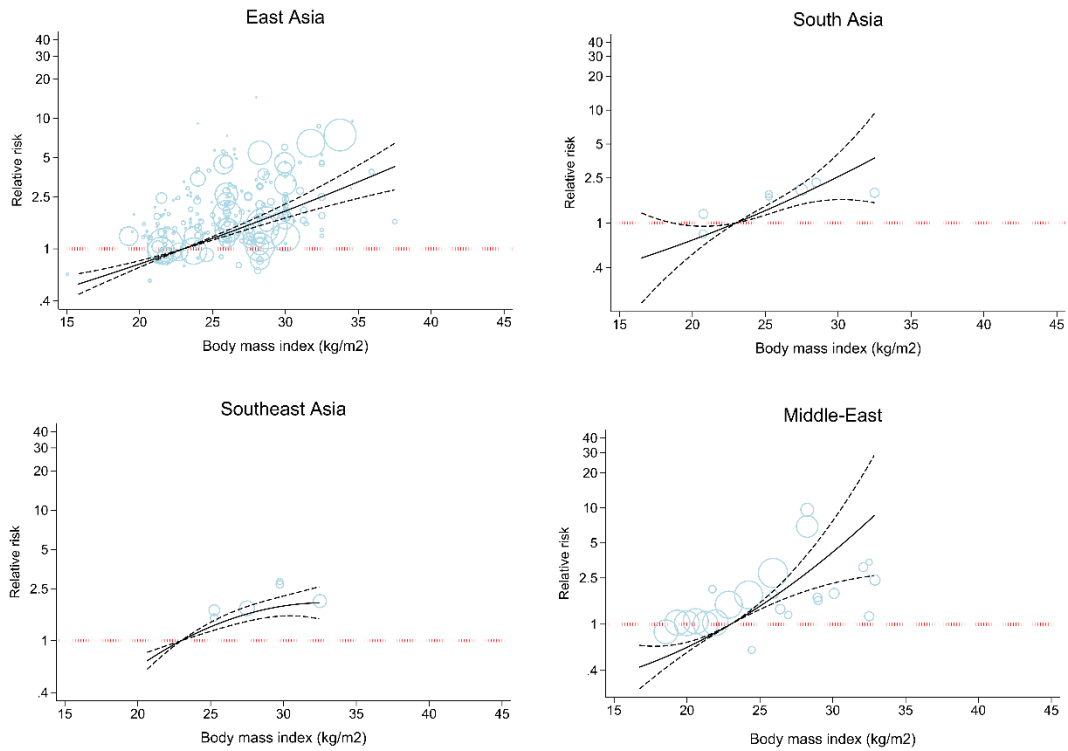
**Figure S3.** Contour-enhanced funnel plot of the relative risks of 182 studies on body mass index (5 unit) and the risk of type 2 diabetes.

## Supplementary Materials



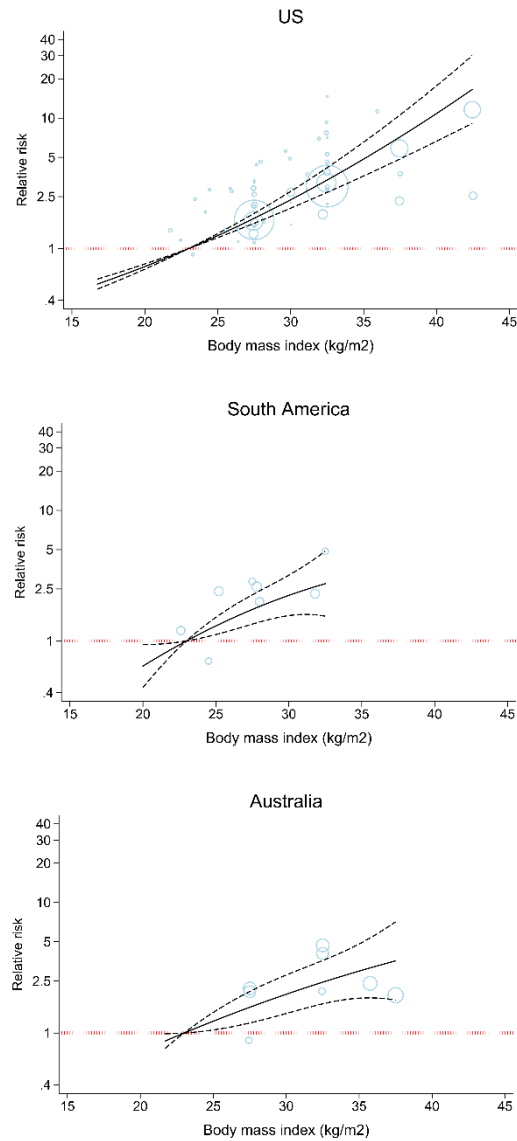
**Fig S4.** Dose-response association of body mass index and risk of type 2 diabetes in UK ( $P_{\text{non-linearity}} = 0.01$ ,  $P_{\text{dose-response}} = 0.24$ ;  $n = 7$ ), Scandinavia ( $P_{\text{non-linearity}} = 0.76$ ,  $P_{\text{dose-response}} < 0.001$ ;  $n = 20$ ), West and Central Europe ( $P_{\text{non-linearity}} = 0.48$ ,  $P_{\text{dose-response}} < 0.001$ ;  $n = 6$ ), and South Europe ( $P_{\text{non-linearity}} < 0.001$ ,  $P_{\text{dose-response}} < 0.001$ ;  $n = 6$ ). The solid line represents the non-linear dose response and the dotted lines represent the 95% confidence interval. The circles represent the relative risk point estimates for adiposity categories from each study with the size of the circle proportional to the inverse of the standard error.

## Supplementary Materials



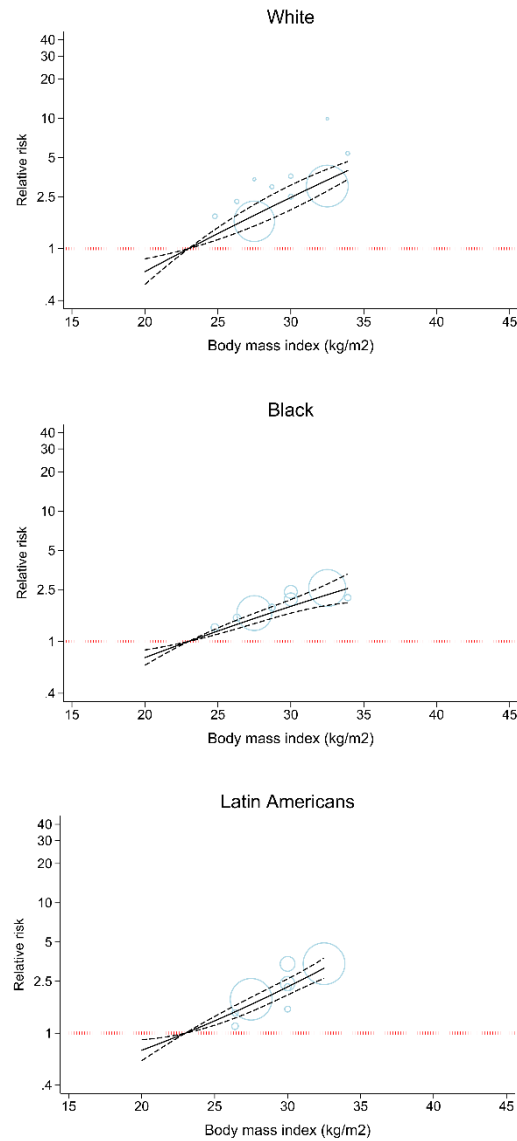
**Fig S5.** Dose-response association of body mass index with the risk of type 2 diabetes in East Asia ( $P_{\text{non-linearity}} = 0.53$ ,  $P_{\text{dose-response}} < 0.001$ ;  $n = 49$ ), South Asia ( $P_{\text{non-linearity}} = 0.80$ ,  $P_{\text{dose-response}} < 0.001$ ;  $n = 3$ ), Southeast Asia ( $P_{\text{non-linearity}} = 0.95$ ,  $P_{\text{dose-response}} = 0.03$ ;  $n = 3$ ), and Middle East ( $P_{\text{non-linearity}} = 0.11$ ,  $P_{\text{dose-response}} < 0.001$ ;  $n = 6$ ). The solid line represents the non-linear dose response and the dotted lines represent the 95% confidence interval. The circles represent the relative risk point estimates for adiposity categories from each study with the size of the circle proportional to the inverse of the standard error.

## Supplementary Materials



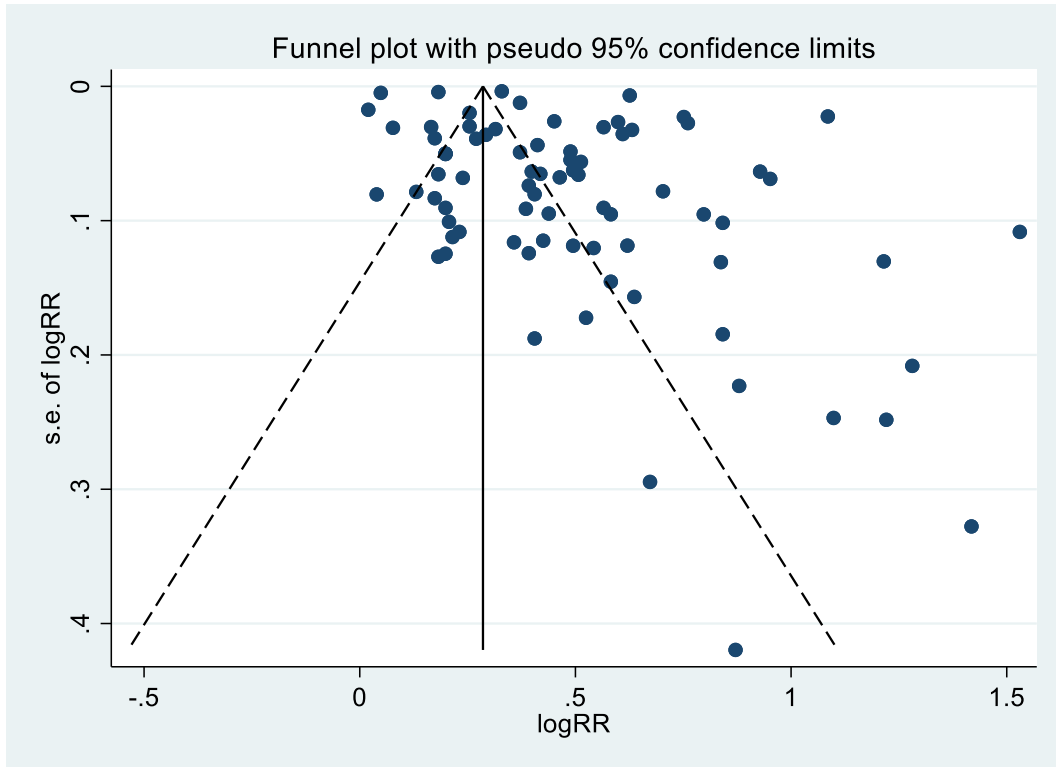
**Fig S6.** Dose-response association of body mass index with the risk of type 2 diabetes in in the North America ( $P_{\text{non-linearity}} < 0.001$ ,  $P_{\text{dose-response}} < 0.001$ ;  $n = 14$ ), South America ( $P_{\text{non-linearity}} = 0.58$ ,  $P_{\text{dose-response}} < 0.001$ ;  $n = 2$ ), and Australia ( $P_{\text{non-linearity}} = 0.73$ ,  $P_{\text{dose-response}} < 0.001$ ;  $n = 5$ ) The solid line represents the non-linear dose response and the dotted lines represent the 95% confidence interval. The circles represent the relative risk point estimates for adiposity categories from each study with the size of the circle proportional to the inverse of the standard error.

## Supplementary Materials



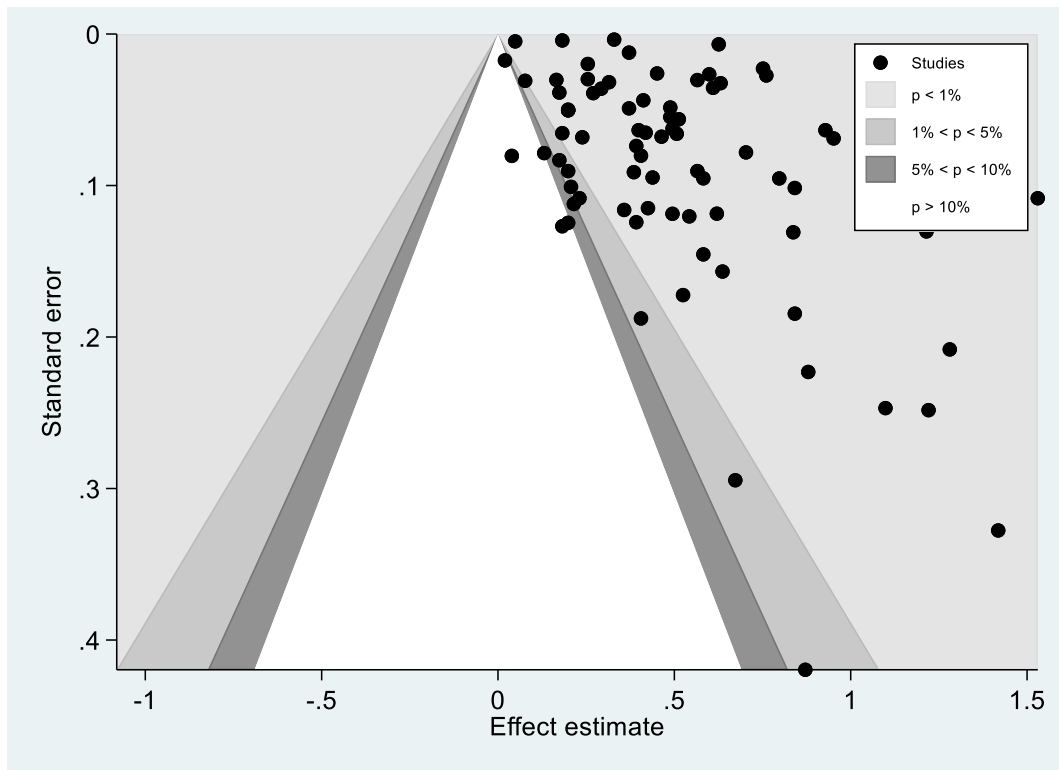
**Fig S7.** Dose-response association of body mass index with the risk of type 2 diabetes in White ( $P_{\text{non-linearity}} = 0.77$ ,  $P_{\text{dose-response}} < 0.001$ ;  $n = 4$ ), Black ( $P_{\text{non-linearity}} = 0.72$ ,  $P_{\text{dose-response}} < 0.001$ ;  $n = 4$ ), and Latin individuals ( $P_{\text{non-linearity}} = 0.53$ ,  $P_{\text{dose-response}} < 0.001$ ;  $n = 3$ ). The solid line represents the non-linear dose response and the dotted lines represent the 95% confidence interval. The circles represent the relative risk point estimates for adiposity categories from each study with the size of the circle proportional to the inverse of the standard error.





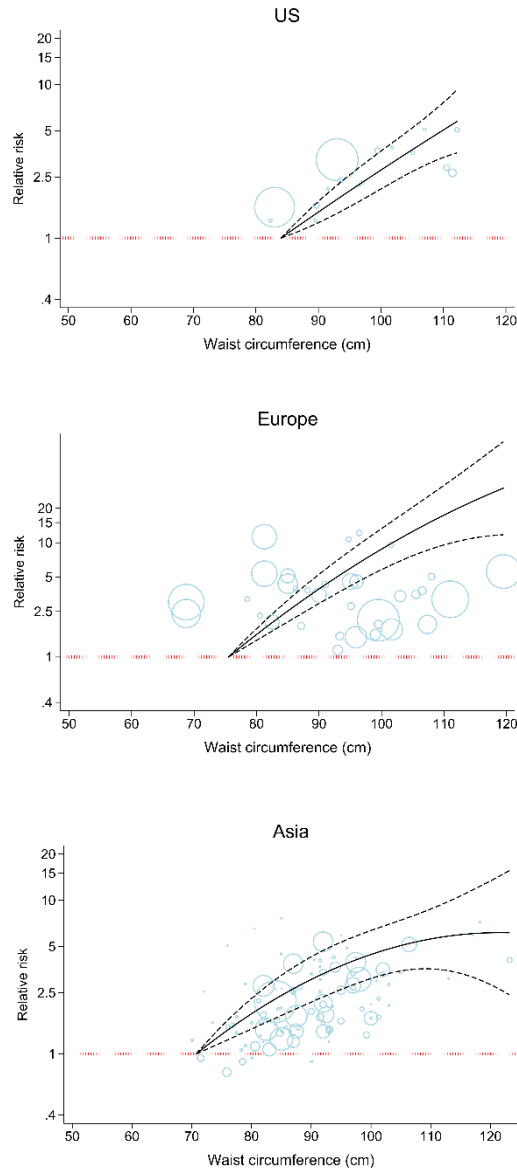
**Figure S8.** Funnel plot of the relative risks of 78 studies on waist circumference (10 cm) and the risk of type 2 diabetes. Begg's test  $P=0.18$ , Egger's test  $P=0.01$ . Log RR: natural logarithm of relative risk. s.e: standard error.

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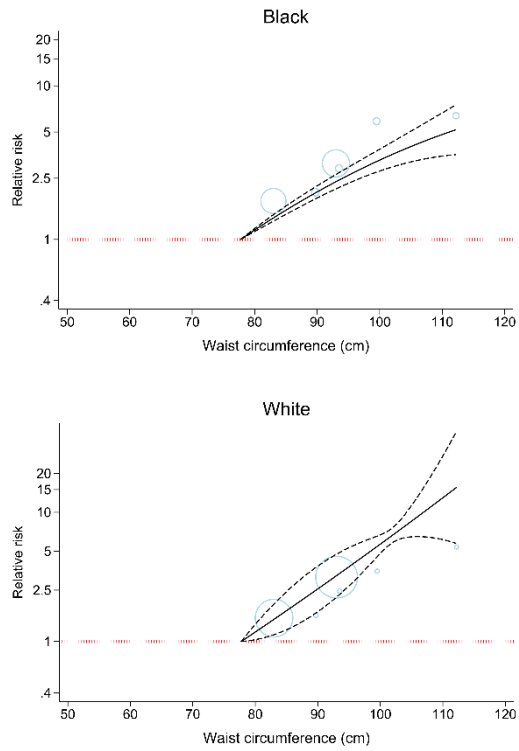
**Figure S9.** Contour-enhanced Funnel plot of the relative risks of 78 studies on waist circumference (10 cm) and the risk of type 2 diabetes.

## Supplementary Materials



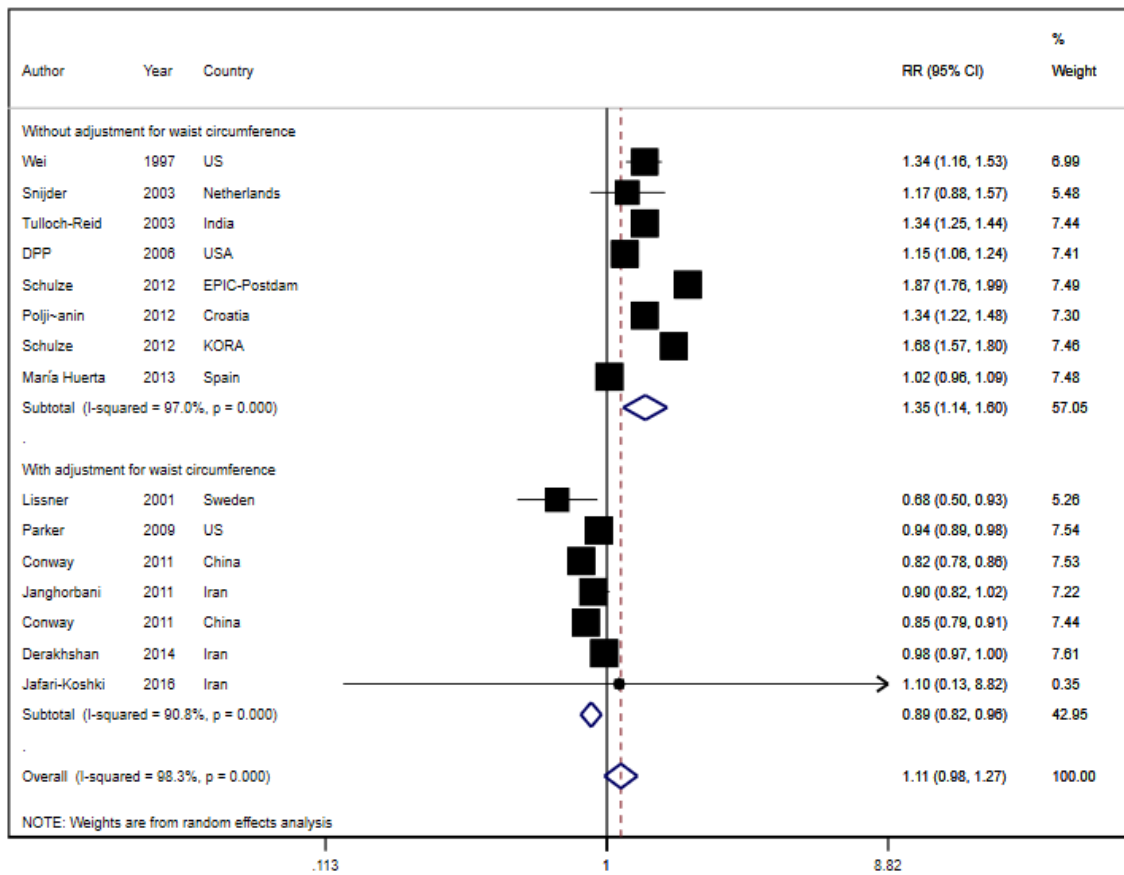
**Fig S10.** Dose-response association of waist circumference with the risk of type 2 diabetes in the US ( $P_{\text{non-linearity}} = 0.83$ ;  $n = 4$ ), Europe ( $P_{\text{non-linearity}} = 0.18$ ;  $n = 10$ ), and Asian countries ( $P_{\text{non-linearity}} = 0.28$ ;  $n = 28$ ). The solid line represents the non-linear dose response and the dotted lines represent the 95% confidence interval. The circles represent the relative risk point estimates for adiposity categories from each study with the size of the circle proportional to the inverse of the standard error.

## Supplementary Materials



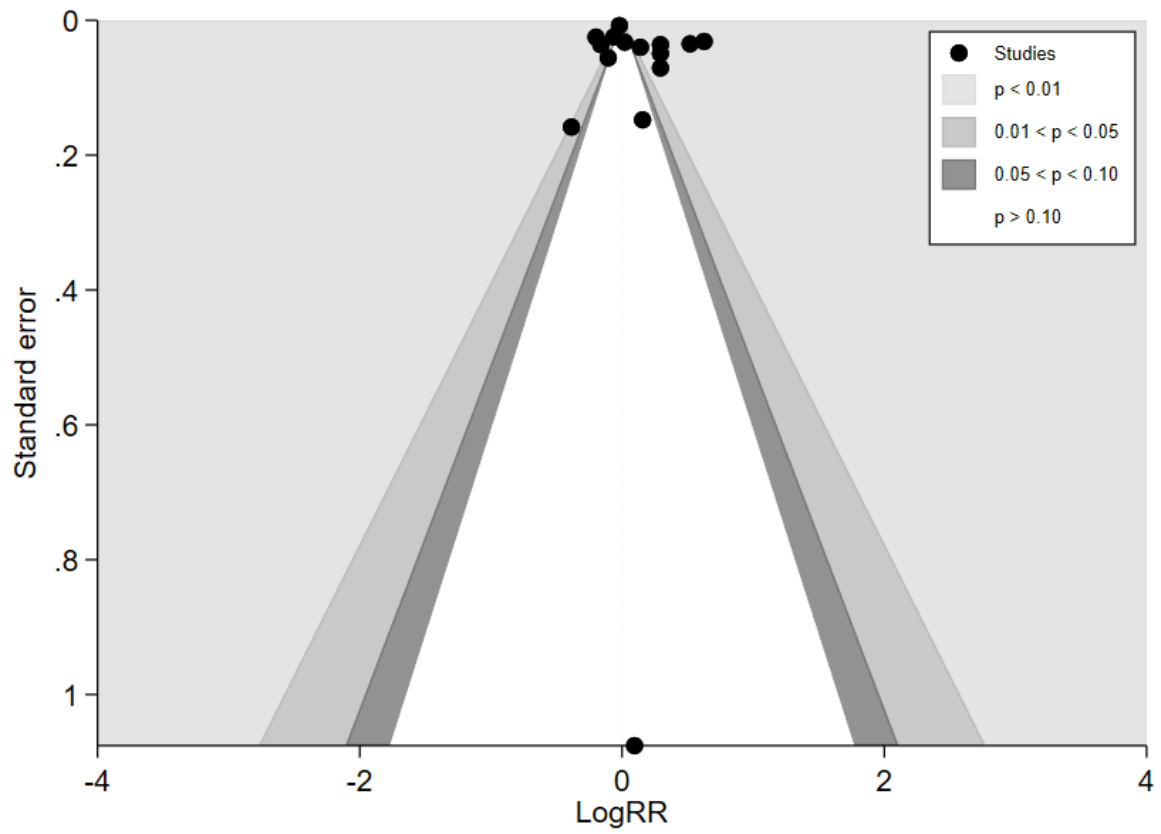
**Fig S11.** Dose-response association of waist circumference with the risk of type 2 diabetes in Black ( $P_{\text{non-linearity}} = 0.32$ ;  $n = 2$ ) and White individuals ( $P_{\text{non-linearity}} = 0.92$ ;  $n = 2$ ). The solid line represents the non-linear dose response and the dotted lines represent the 95% confidence interval. The circles represent the relative risk point estimates for adiposity categories from each study with the size of the circle proportional to the inverse of the standard error.

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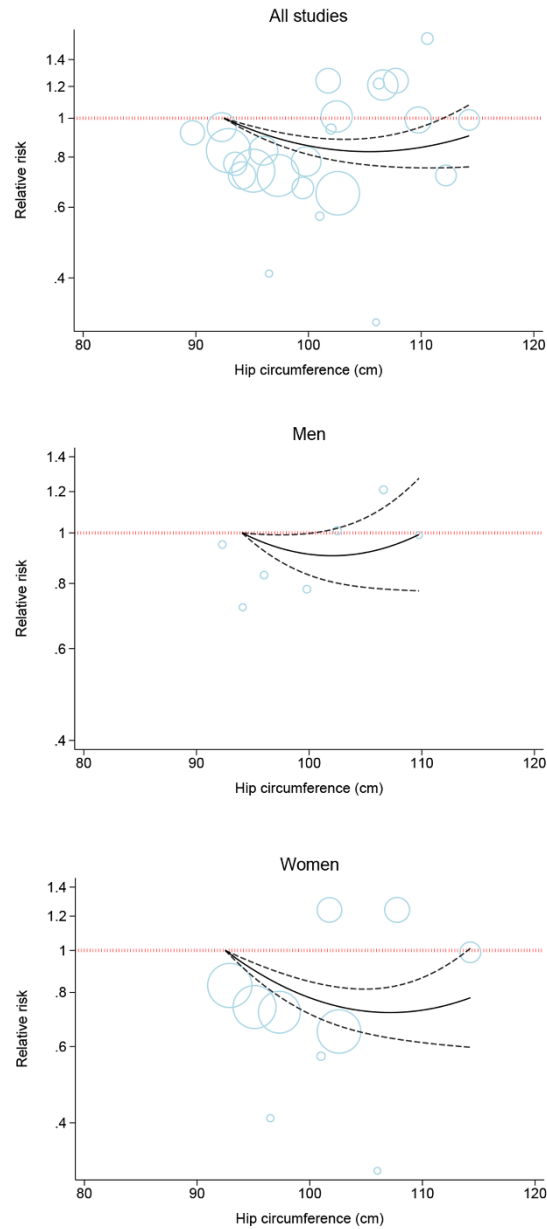
**Fig S12.** Relative risk of type 2 diabetes for a 10 cm higher hip circumference. RR; relative risk.

Supplementary Materials



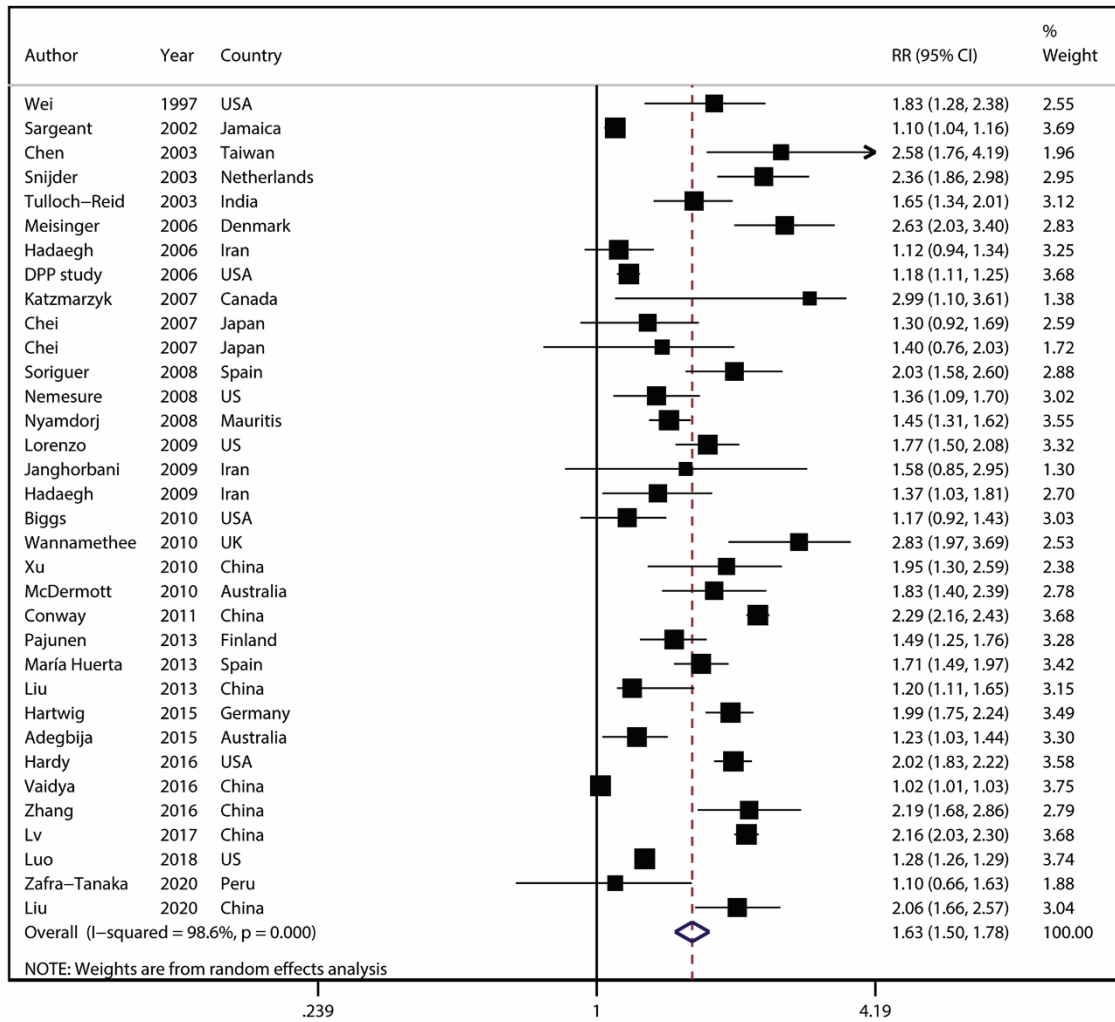
**Figure S13.** Funnel plot of the relative risks of 14 studies on hip circumference (10 cm) and the risk of type 2 diabetes. Begg's test  $P=0.68$ , Egger's test  $P=0.24$ . Log RR: natural logarithm of relative risk. s.e: standard error.

## Supplementary Materials



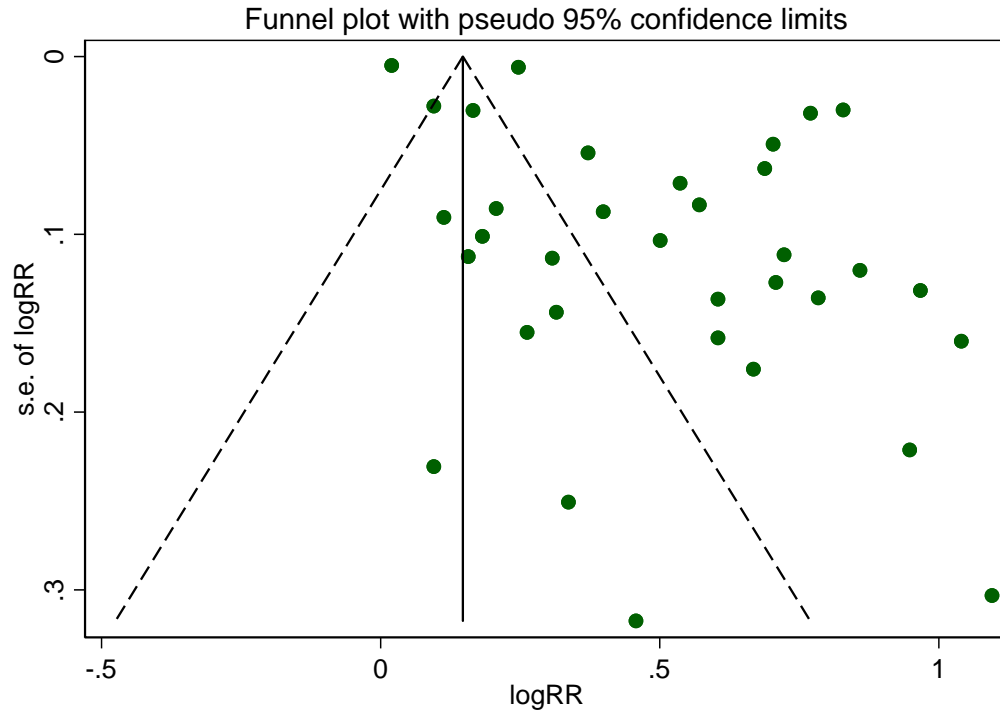
**Fig S14.** Dose-response association of hip circumference with the risk of type 2 diabetes in all individuals ( $P_{\text{non-linearity}} < 0.001$ ;  $n = 3$ ), men ( $P_{\text{non-linearity}} < 0.001$ ;  $n = 2$ ), and women ( $P_{\text{non-linearity}} < 0.001$ ;  $n = 2$ ). The solid line represents the non-linear dose response and the dotted lines represent the 95% confidence interval. The circles represent the relative risk point estimates for adiposity categories from each study with the size of the circle proportional to the inverse of the standard error.

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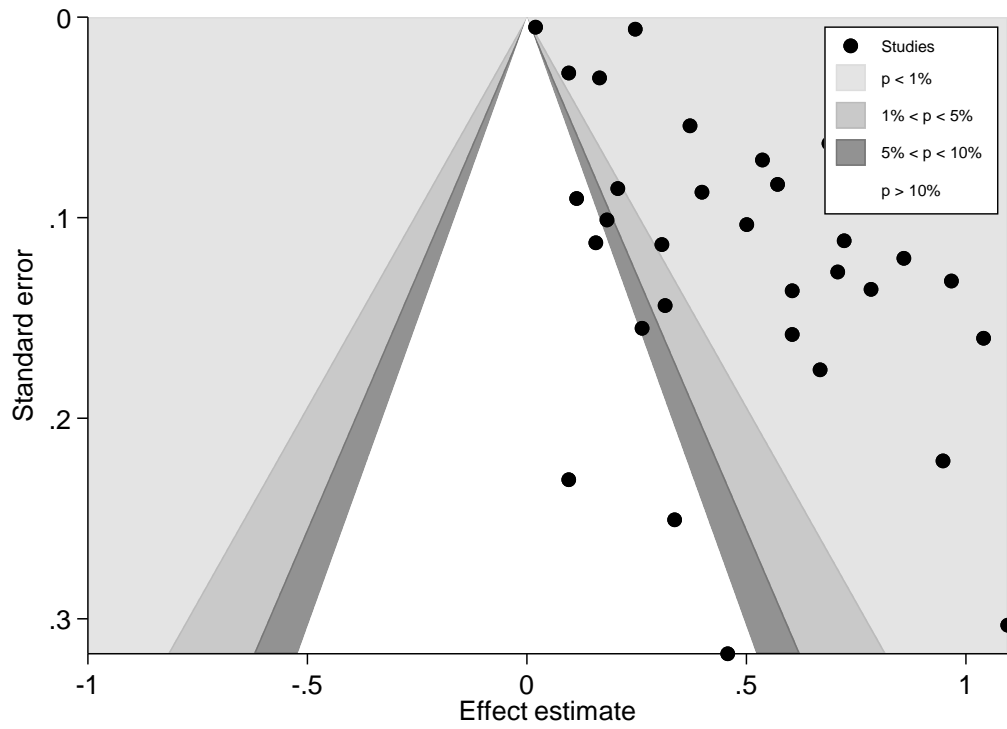
**Fig S15.** Relative risk of type 2 diabetes for a 0.1 unit higher waist-to-hip ratio. RR, relative risk.





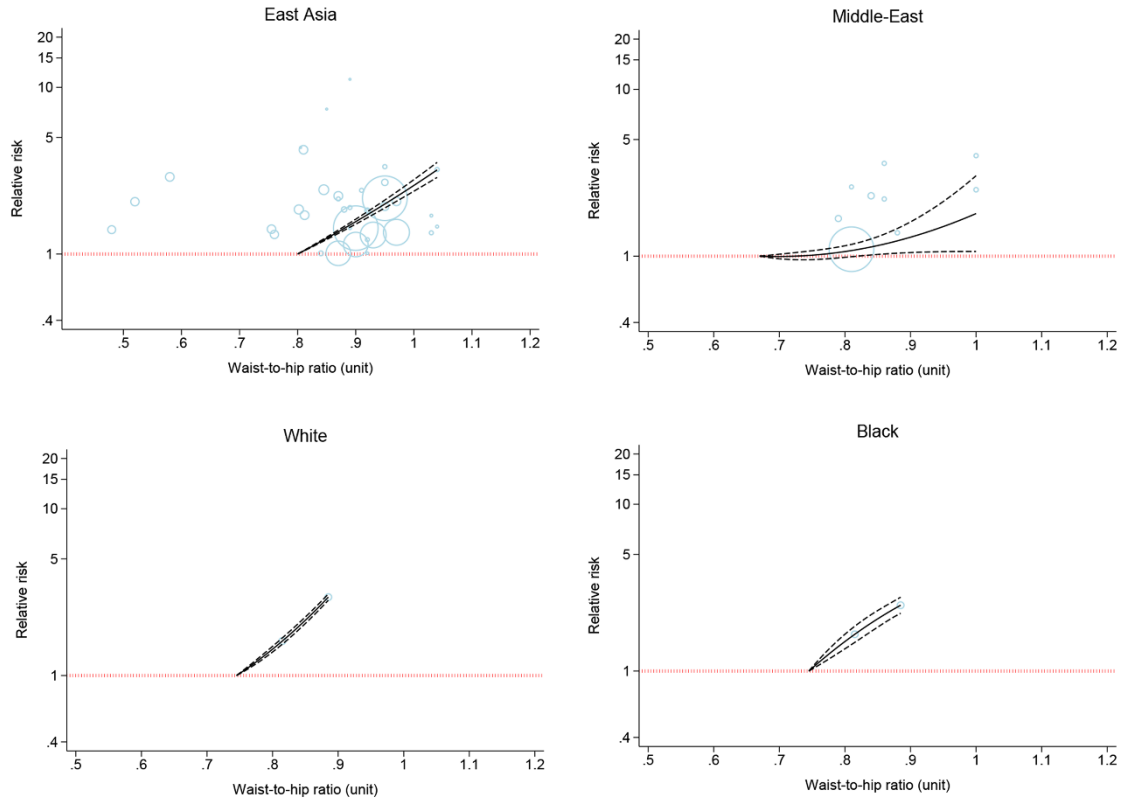
**Figure S16.** Funnel plot of the relative risks of 34 studies on waist-to-hip ratio (0.1 unit) and the risk of type 2 diabetes. Begg's test  $P=0.21$ , Egger's test  $P=0.02$ . Log RR: natural logarithm of relative risk. s.e: standard error.

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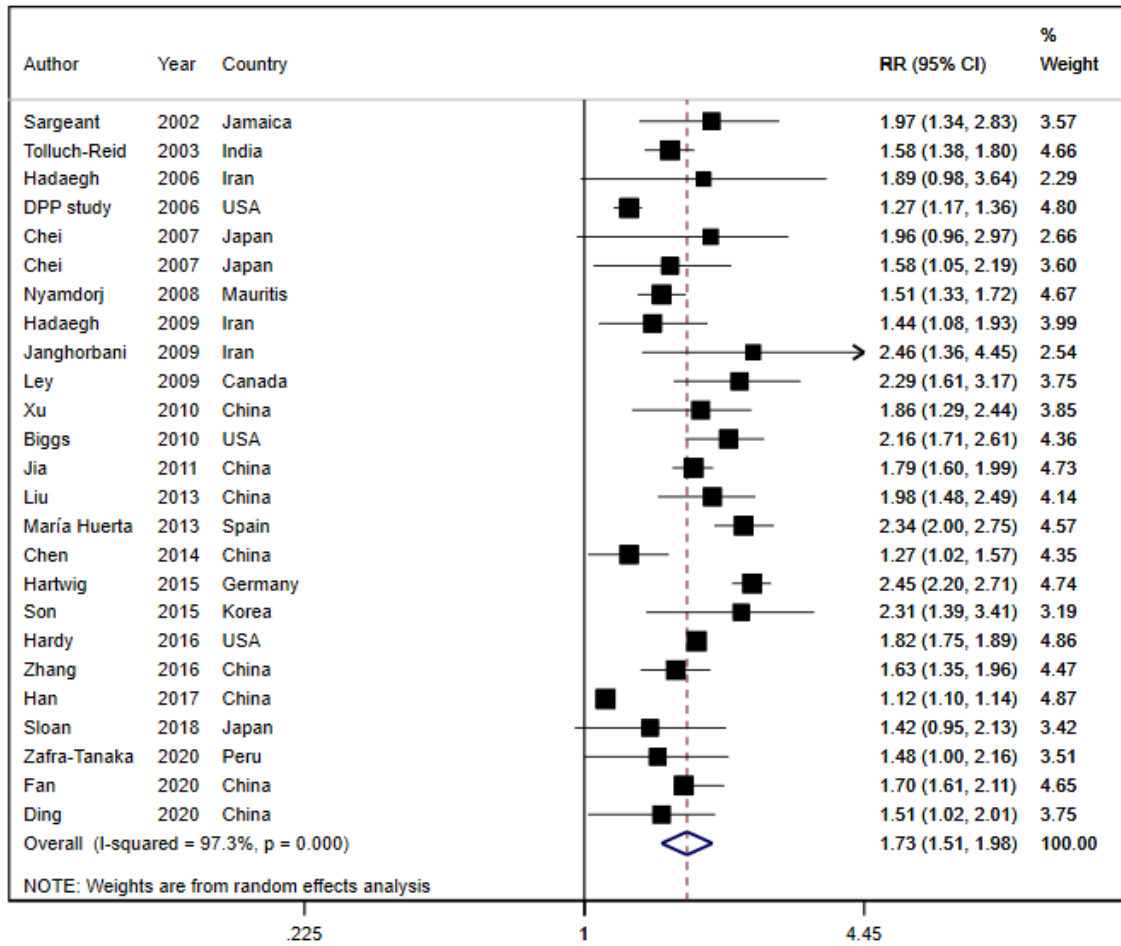
**Figure S17.** Contour-enhanced funnel plot of the relative risks of 34 studies on waist-to-hip ratio (0.1 unit) and the risk of type 2 diabetes.

## Supplementary Materials



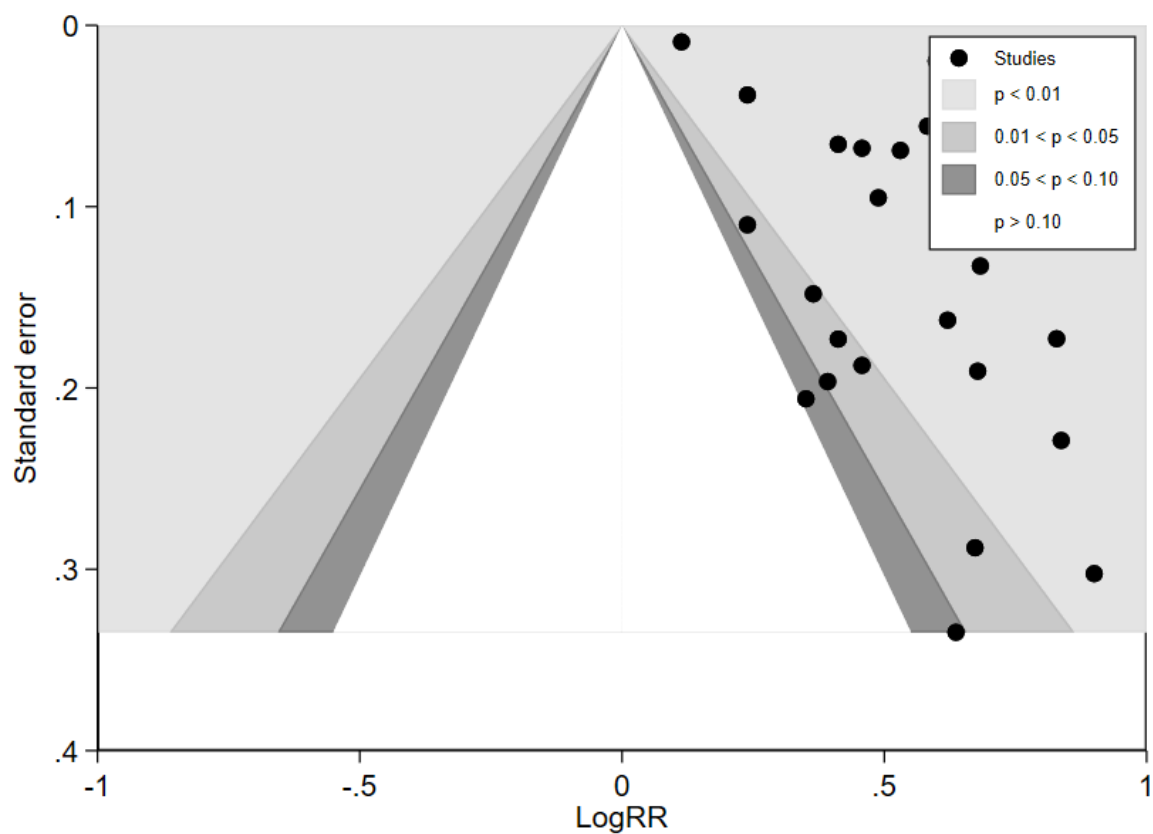
**Fig S18.** Dose-response association of waist-to-hip ratio with the risk of type 2 diabetes in the Middle East ( $P_{\text{non-linearity}} = 0.11$ ,  $P_{\text{dose-response}} < 0.001$ ;  $n = 3$ ), East Asia ( $P_{\text{non-linearity}} = 0.84$ ,  $P_{\text{dose-response}} < 0.001$ ;  $n = 7$ ), White ( $P_{\text{non-linearity}} = 0.61$ ,  $P_{\text{dose-response}} < 0.001$ ;  $n = 1$ ) and Black individuals ( $P_{\text{non-linearity}} = 0.24$ ,  $P_{\text{dose-response}} < 0.001$ ;  $n = 1$ ). The solid line represents the non-linear dose response and the dotted lines represent the 95% confidence interval. The circles represent the relative risk point estimates for adiposity categories from each study with the size of the circle proportional to the inverse of the standard error.

Supplementary Materials



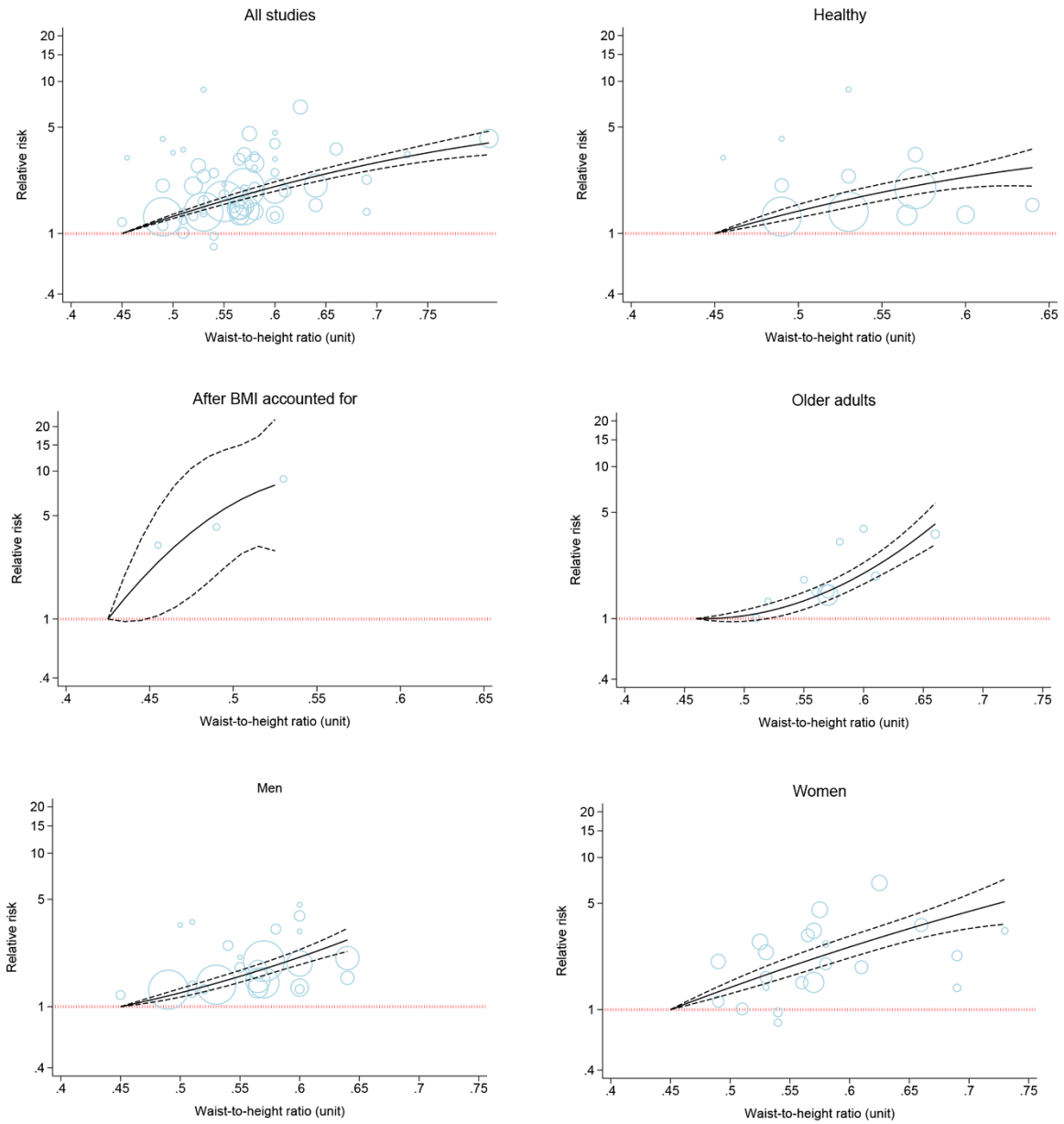
**Fig S19.** Relative risk of type 2 diabetes for a 0.1 unit higher waist-to-height ratio. RR, relative risk.

Supplementary Materials



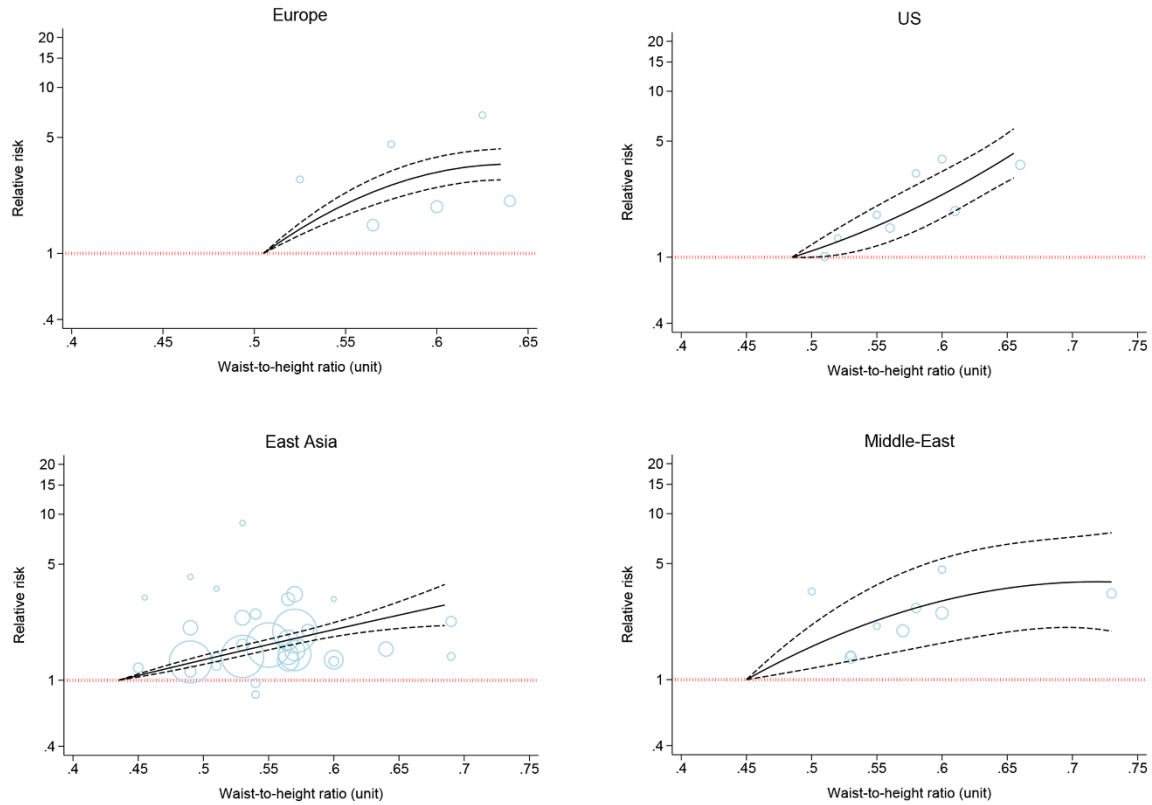
**Figure S20.** Funnel plot of the relative risks of 25 studies on waist-to-height ratio (0.1 unit) and the risk of type 2 diabetes. Begg's test  $P=0.08$ , Egger's test  $P=0.01$ . Log RR: natural logarithm of relative risk. s.e: standard error.

## Supplementary Materials



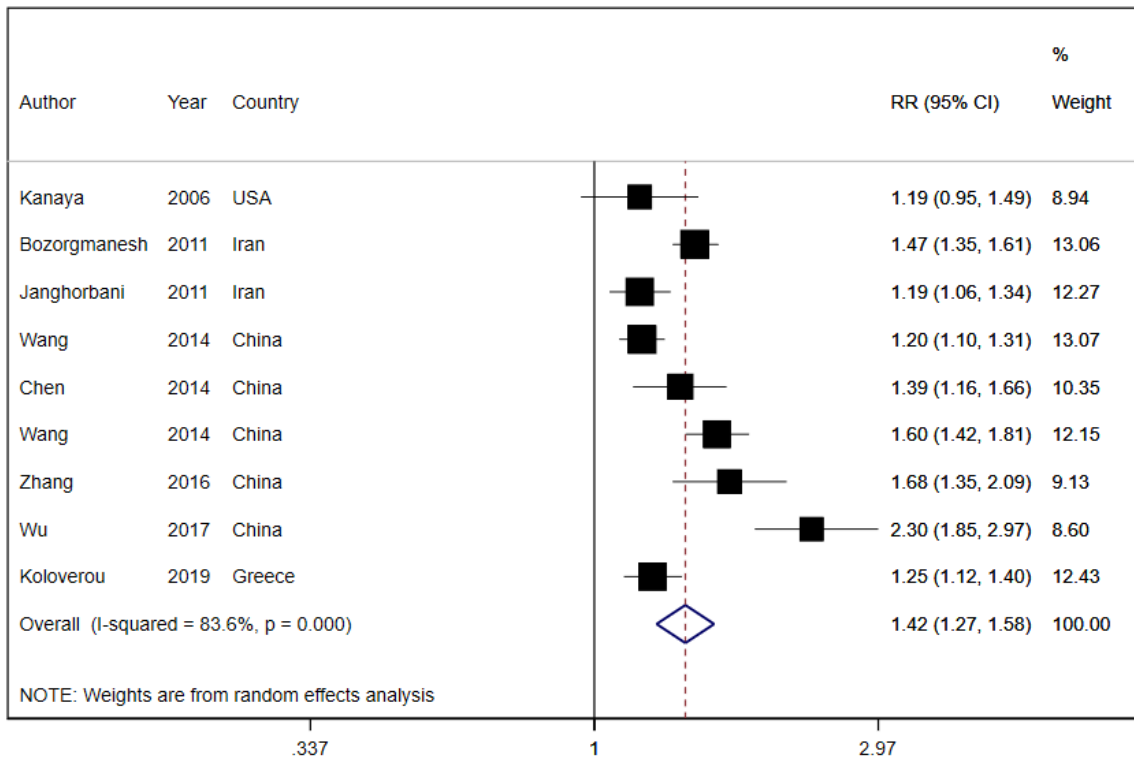
**Fig S21.** Dose-response association of waist-to-height ratio with the risk of type 2 diabetes in the main analysis ( $P_{\text{non-linearity}} < 0.001$ ,  $P_{\text{dose-response}} < 0.001$ ;  $n = 14$ ), healthy individuals ( $P_{\text{non-linearity}} = 0.29$ ;  $n = 3$ ), after body mass index accounted for ( $P_{\text{non-linearity}} = 0.57$ ;  $n = 1$ ), older adults ( $P_{\text{non-linearity}} < 0.001$ ;  $n = 2$ ), men ( $P_{\text{non-linearity}} = 0.24$ ;  $n = 8$ ) and women ( $P_{\text{non-linearity}} = 0.56$ ;  $n = 7$ ). The solid line represents the non-linear dose response and the dotted lines represent the 95% confidence interval. The circles represent the relative risk point estimates for adiposity categories from each study with the size of the circle proportional to the inverse of the standard error.

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**Fig S22.** Dose-response association of waist-to-height ratio with the risk of type 2 diabetes in the US ( $P_{\text{non-linearity}} = 0.08$ ,  $n = 1$ ), Europe ( $P_{\text{non-linearity}} < 0.001$ ,  $n = 1$ ), Middle East ( $P_{\text{non-linearity}} = 0.13$ ,  $n = 3$ ), and East Asia ( $P_{\text{non-linearity}} = 0.20$ ,  $n = 10$ ). The solid line represents the non-linear dose response and the dotted lines represent the 95% confidence interval. The circles represent the relative risk point estimates for adiposity categories from each study with the size of the circle proportional to the inverse of the standard error.

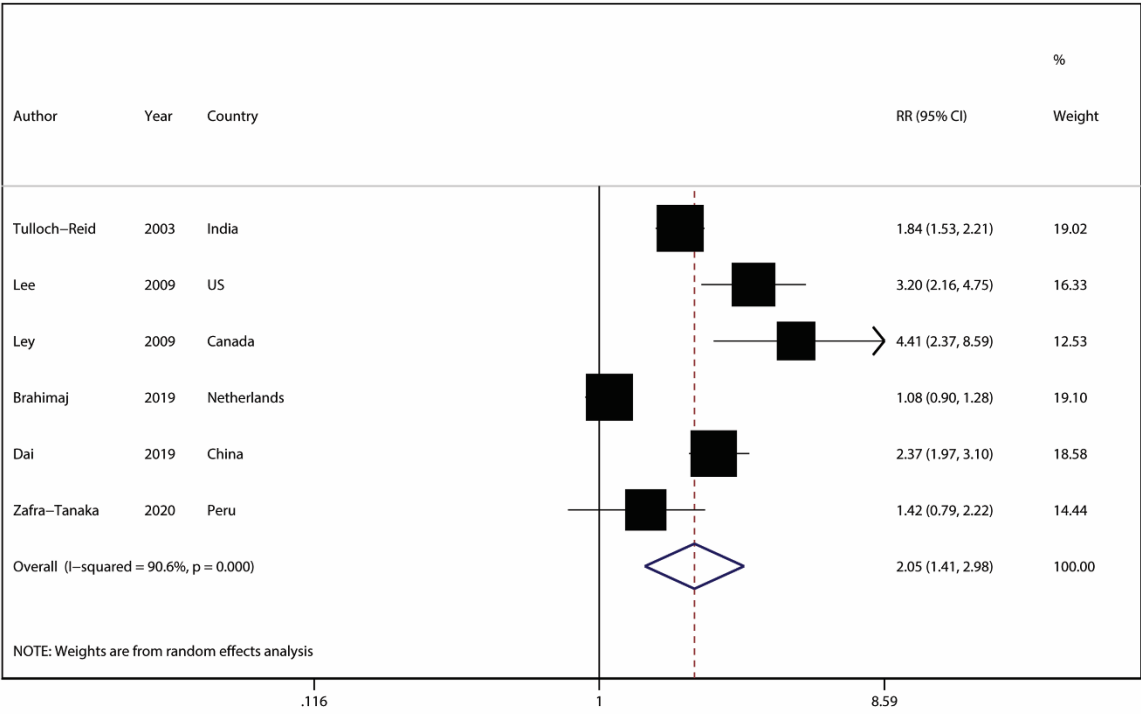
Supplementary Materials



**Fig S23.** Relative risk of type 2 diabetes for a 1 unit higher visceral adiposity index. RR, relative risk.

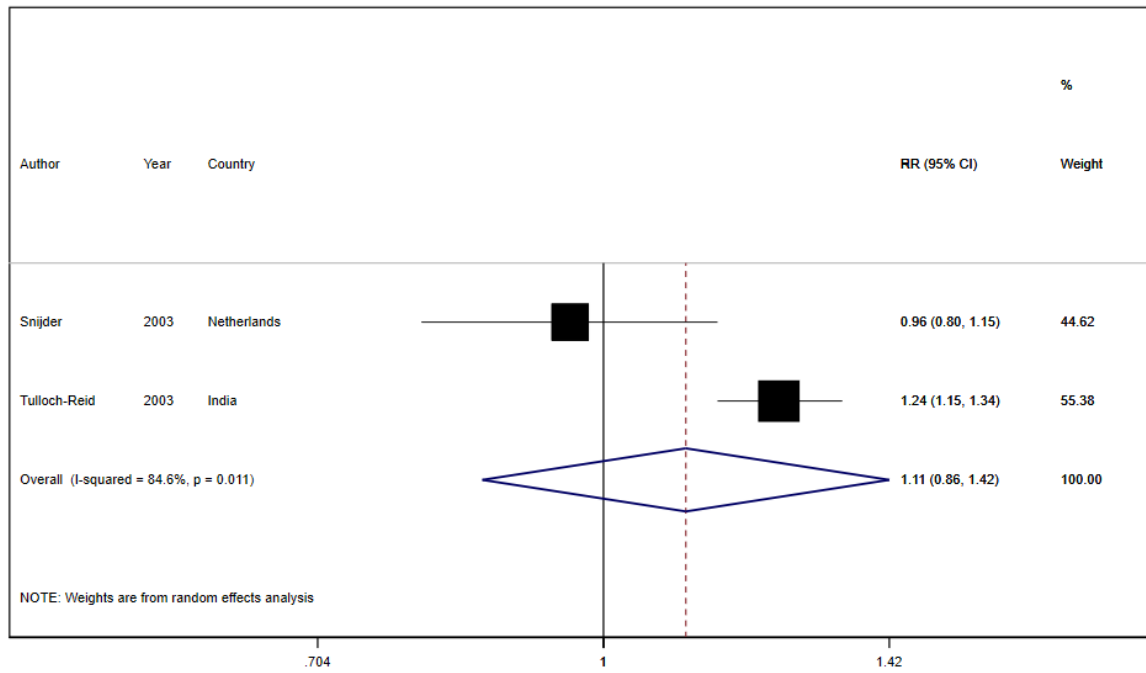


Supplementary Materials



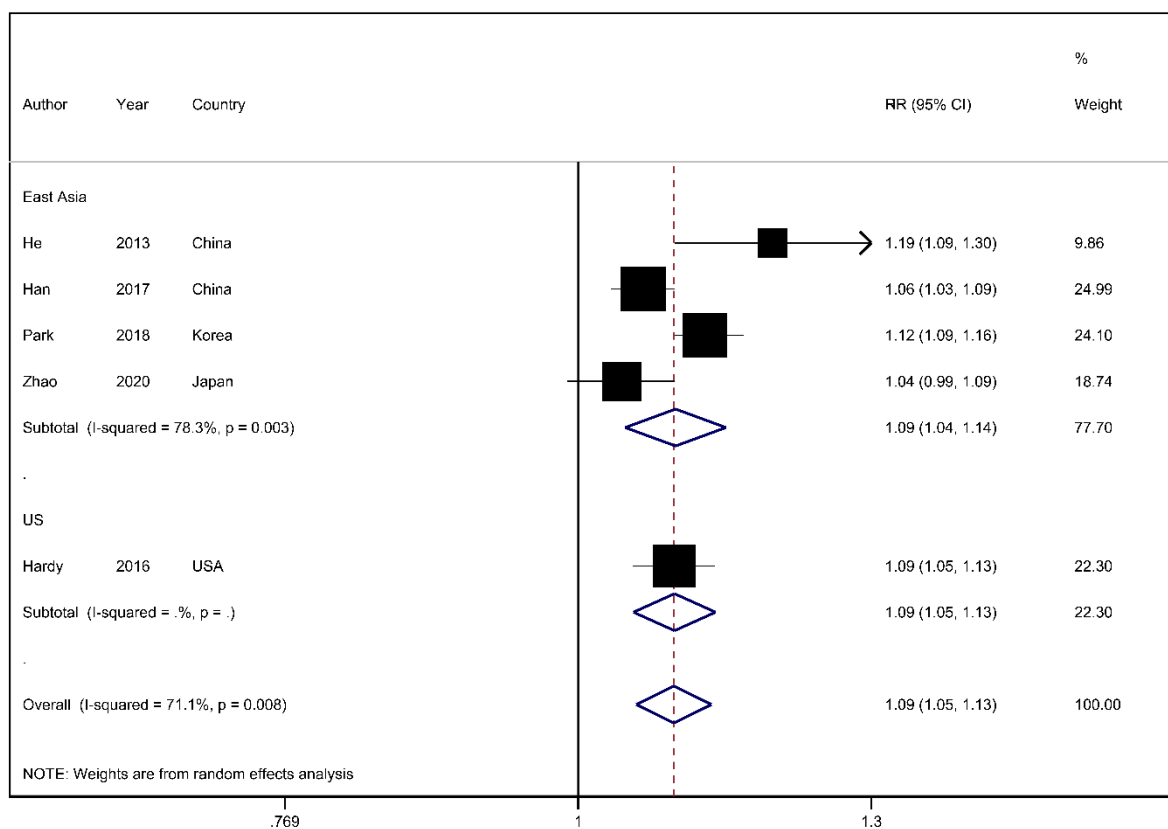
**Fig S24.** Relative risk of type 2 diabetes for a 10% higher body fat percentage. RR, relative risk.

## Supplementary Materials



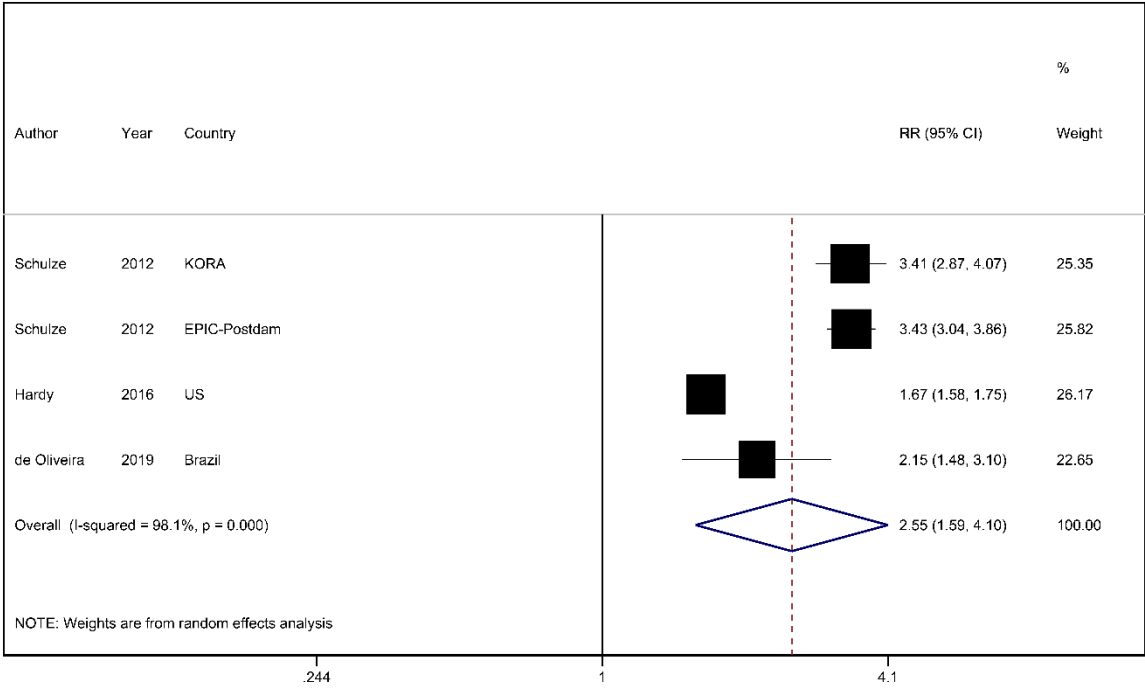
**Fig S25.** Relative risk of type 2 diabetes for a 5 cm larger thigh circumference and type 2 diabetes. RR, relative risk.

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**Fig S26.** Relative risk of type 2 diabetes for a 0.005 unit higher A body shape index. RR, relative risk.

Supplementary Materials



**Fig S27.** Relative risk of type 2 diabetes for a 10% higher body adiposity index. RR, relative risk.

**Supplementary references:**

1. Schünemann HJ, Cuello C, Akl EA, et al. GRADE guidelines: 18. How ROBINS-I and other tools to assess risk of bias in nonrandomized studies should be used to rate the certainty of a body of evidence. *Journal of clinical epidemiology* 2019;111:105-14.
2. Langer G, Meerpohl JJ, Perleth M, et al. GRADE guidelines: 1. Introduction—GRADE evidence profiles and summary of findings tables. *Zeitschrift für Evidenz, Fortbildung und Qualität im Gesundheitswesen* 2012;106:357-68.
3. Sterne JA, Hernán MA, Reeves BC, et al. ROBINS-I: a tool for assessing risk of bias in non-randomised studies of interventions. *bmj* 2016;355.
4. Guyatt GH, Oxman AD, Kunz R, et al. GRADE guidelines: 7. Rating the quality of evidence— inconsistency. *Journal of clinical epidemiology* 2011;64:1294-302.
5. Guyatt GH, Oxman AD, Kunz R, et al. GRADE guidelines: 8. Rating the quality of evidence— indirectness. *Journal of clinical epidemiology* 2011;64:1303-10.
6. Guyatt GH, Oxman AD, Kunz R, et al. GRADE guidelines 6. Rating the quality of evidence— imprecision. *Journal of clinical epidemiology* 2011;64:1283-93.
7. Guyatt GH, Oxman AD, Montori V, et al. GRADE guidelines: 5. Rating the quality of evidence— publication bias. *Journal of clinical epidemiology* 2011;64:1277-82.
8. Schünemann H, Brożek J, Guyatt G, Oxman A. Handbook for grading the quality of evidence and the strength of recommendations using the GRADE approach. *Updated October 2013*;2013.
9. Abbasi A, Bakker SJ, Corpeleijn E, et al. Liver function tests and risk prediction of incident type 2 diabetes: evaluation in two independent cohorts. *PloS one* 2012;7:e51496.
10. Abbasi A, Corpeleijn E, Gansevoort RT, et al. Circulating peroxiredoxin 4 and type 2 diabetes risk: the Prevention of Renal and Vascular Endstage Disease (PREVEND) study. *Diabetologia* 2014;57:1842-49.
11. Abdullah A, Stoelwinder J, Shortreed S, et al. The duration of obesity and the risk of type 2 diabetes. *Public health nutrition* 2011;14:119-26.
12. Adams LA, Waters OR, Knuiman MW, Elliott RR, Olynyk JK. NAFLD as a risk factor for the development of diabetes and the metabolic syndrome: an eleven-year follow-up study. *Official journal of the American College of Gastroenterology| ACG* 2009;104:861-67.
13. Agardh EE, Lundin A, Lager A, et al. Alcohol and type 2 diabetes: The role of socioeconomic, lifestyle and psychosocial factors. *Scandinavian journal of public health* 2019;47:408-16.
14. Ahmed A, Lager A, Fredlund P, Elinder LS. Consumption of fruit and vegetables and the risk of type 2 diabetes: a 4-year longitudinal study among Swedish adults. *Journal of nutritional science* 2020;9.
15. Ahola-Olli AV, Mustelin L, Kalimeri M, et al. Circulating metabolites and the risk of type 2 diabetes: a prospective study of 11,896 young adults from four Finnish cohorts. *Diabetologia* 2019;62:2298-309.
16. Akter S, Kuwahara K, Matsushita Y, et al. Serum 25-hydroxyvitamin D3 and risk of type 2 diabetes among Japanese adults: the Hitachi Health Study. *Clinical Nutrition* 2020;39:1218-24.
17. Akter S, Nanri A, Kuwahara K, et al. Circulating ferritin concentrations and risk of type 2 diabetes in Japanese individuals. *Journal of diabetes investigation* 2017;8:462-70.
18. Al-Nozah M, Al-Daghri N, Bartlett W, et al. Serum homocysteine concentration is related to diabetes mellitus, but not to coronary heart disease, in Saudi Arabians. *Diabetes, Obesity and Metabolism* 2002;4:118-23.
19. Altevers J, Lukaschek K, Baumert J, et al. Poor structural social support is associated with an increased risk of type 2 diabetes mellitus: findings from the MONICA/KORA Augsburg cohort study. *Diabetic Medicine* 2016;33:47-54.
20. Amutha A, Ali MK, Unnikrishnan R, et al. Insulin sensitivity and secretion in youth onset type 2 diabetes with and without visceral adiposity. *Diabetes research and clinical practice* 2015;109:32-39.

## Supplementary Materials

21. André P, Balkau B, Born C, et al. Hepatic markers and development of type 2 diabetes in middle aged men and women: a three-year follow-up study: the DESIR Study (Data from an Epidemiological Study on the Insulin Resistance syndrome). *Diabetes & metabolism* 2005;31:542-50.
22. André P, Proctor G, Driollet B, et al. The role of overweight in the association between the Mediterranean diet and the risk of type 2 diabetes mellitus: a mediation analysis among 21 585 UK biobank participants. *International Journal of Epidemiology* 2020;49:1582-90.
23. Arroyo C, Hu FB, Ryan LM, et al. Depressive symptoms and risk of type 2 diabetes in women. *Diabetes care* 2004;27:129-33.
24. Atasoy S, Johar H, Fang X, Kruse J, Ladwig K. Cumulative effect of depressed mood and obesity on type II diabetes incidence: Findings from the MONICA/KORA cohort study. *Journal of psychosomatic research* 2018;115:66-70.
25. Au B, Smith KJ, Gariépy G, Schmitz N. C-reactive protein, depressive symptoms, and risk of diabetes: results from the English Longitudinal Study of Ageing (ELSA). *Journal of psychosomatic research* 2014;77:180-86.
26. Bacon KL, Stuver SO, Cozier YC, et al. Perceived racism and incident diabetes in the Black Women's Health Study. *Diabetologia* 2017;60:2221-25.
27. Balkau B, Lange C, Fumeron F, Bonnet F. Nine-year incident diabetes is predicted by fatty liver indices: the French DESIR study. *BMC gastroenterology* 2010;10:1-9.
28. Ballin M, Nordström P, Niklasson J, et al. Daily step count and incident diabetes in community-dwelling 70-year-olds: a prospective cohort study. *BMC public health* 2020;20:1-10.
29. Bardenheier BH, Gregg EW, Zhuo X, Cheng YJ, Geiss LS. Association of functional decline with subsequent diabetes incidence in US adults aged 51 years and older: the Health and Retirement Study 1998–2010. *Diabetes Care* 2014;37:1032-38.
30. Bardugo A, Bendor CD, Zucker I, et al. Adolescent Nonalcoholic Fatty Liver Disease and Type 2 Diabetes in Young Adulthood. *The Journal of Clinical Endocrinology & Metabolism* 2021;106:e34-e44.
31. Beihl DA, Liese AD, Haffner SM. Sleep duration as a risk factor for incident type 2 diabetes in a multiethnic cohort. *Annals of epidemiology* 2009;19:351-57.
32. Bellettiere J, LaMonte MJ, Healy GN, et al. Sedentary Behavior and Diabetes Risk Among Women Over the Age of 65 Years: The OPACH Study. *Diabetes care* 2021;44:563-70.
33. Bendor CD, Bardugo A, Zucker I, et al. Childhood pancreatitis and risk for incident diabetes in adulthood. *Diabetes care* 2020;43:145-51.
34. Bertone-Johnson ER, Virtanen JK, Niskanen L, et al. Association of follicle-stimulating hormone levels and risk of type 2 diabetes in older postmenopausal women. *Menopause* 2017;24:796-802.
35. Bertoni AG, Burke GL, Owusu JA, et al. Inflammation and the incidence of type 2 diabetes: the Multi-Ethnic Study of Atherosclerosis (MESA). *Diabetes care* 2010;33:804-10.
36. Beulens J, van der Schouw YT, Bergmann MM, et al. Alcohol consumption and risk of type 2 diabetes in European men and women: influence of beverage type and body sizeThe EPIC–InterAct study. *Journal of internal medicine* 2012;272:358-70.
37. Beulens JW, Rimm EB, Hu FB, Hendriks HF, Mukamal KJ. Alcohol consumption, mediating biomarkers, and risk of type 2 diabetes among middle-aged women. *Diabetes Care* 2008;31:2050-55.
38. Beulens JW, Stolk RP, Van Der Schouw YT, et al. Alcohol consumption and risk of type 2 diabetes among older women. *Diabetes care* 2005;28:2933-38.
39. Bidulescu A, Dinh PC, Sarwary S, et al. Associations of leptin and adiponectin with incident type 2 diabetes and interactions among African Americans: the Jackson heart study. *BMC endocrine disorders* 2020;20:1-11.

## Supplementary Materials

40. Bielinski SJ, Pankow JS, Boerwinkle E, et al. Lack of association between uncoupling protein-2 Ala55Val polymorphism and incident diabetes in the atherosclerosis risk in communities study. *Acta diabetologica* 2008;45:179.
41. Bjerregaard M, Philipsen A, Jørgensen ME, et al. Association of self-perceived body image with body mass index and type 2 diabetes—The ADDITION-PRO study. *Preventive medicine* 2015;75:64-69.
42. Bjerregaard LG, Jensen BW, Baker JL. Height at ages 7–13 years in relation to developing type 2 diabetes throughout adult life. *Paediatric and perinatal epidemiology* 2017;31:284-92.
43. Bjerregaard LG, Pedersen DC, Mortensen EL, Sørensen TI, Baker JL. Breastfeeding duration in infancy and adult risks of type 2 diabetes in a high-income country. *Maternal & child nutrition* 2019;15:e12869.
44. Bombelli M, Quarti-Trevano F, Tadic M, et al. Uric acid and risk of new-onset metabolic syndrome, impaired fasting glucose and diabetes mellitus in a general Italian population: data from the Pressioni Arteriose Monitorate E Loro Associazioni study. *Journal of hypertension* 2018;36:1492-98.
45. Booth GL, Creatore MI, Luo J, et al. Neighbourhood walkability and the incidence of diabetes: an inverse probability of treatment weighting analysis. *J Epidemiol Community Health* 2019;73:287-94.
46. Bouchard DR, Porneala B, Janssen I, et al. Risk of type 2 diabetes and cumulative excess weight exposure in the Framingham Offspring Study. *Journal of Diabetes and its Complications* 2013;27:214-18.
47. Bouillon K, Kivimäki M, Hamer M, et al. Diabetes risk factors, diabetes risk algorithms, and the prediction of future frailty: the Whitehall II prospective cohort study. *Journal of the American Medical Directors Association* 2013;14:851. e1-51. e6.
48. Brahimaj A, Muka T, Kavousi M, et al. Serum dehydroepiandrosterone levels are associated with lower risk of type 2 diabetes: the Rotterdam Study. *Diabetologia* 2017;60:98-106.
49. Brand JS, Van Der Schouw YT, Onland-Moret NC, et al. Age at menopause, reproductive life span, and type 2 diabetes risk: results from the EPIC-InterAct study. *Diabetes care* 2013;36:1012-19.
50. Bressler J, Kao WL, Pankow JS, Boerwinkle E. Risk of type 2 diabetes and obesity is differentially associated with variation in FTO in whites and African-Americans in the ARIC study. *PloS one* 2010;5:e10521.
51. Brutsaert EF, Biggs ML, Delaney JA, et al. Longitudinal assessment of N-terminal pro-B-type natriuretic peptide and risk of diabetes in older adults: the cardiovascular health study. *Metabolism* 2016;65:1489-97.
52. Burchfiel CM, Sharp DS, Curb JD, et al. Physical activity and incidence of diabetes: the Honolulu Heart Program. *American journal of epidemiology* 1995;141:360-68.
53. Cai X, Qiu S, Liu S, et al. Body-weight fluctuation and risk of diabetes in older adults: The China Health and Retirement Longitudinal Study (CHARLS). *Diabetes Research and Clinical Practice* 2020;169:108419.
54. Cameron AJ, Magliano DJ, Zimmet PZ, et al. The metabolic syndrome as a tool for predicting future diabetes: the AusDiab study. *Journal of internal medicine* 2008;264:177-86.
55. Carlsson S, Hammar N, Grill V, Kaprio J. Alcohol consumption and the incidence of type 2 diabetes: a 20-year follow-up of the Finnish twin cohort study. *Diabetes care* 2003;26:2785-90.
56. Carnethon MR, Biggs ML, Barzilay JI, et al. Longitudinal association between depressive symptoms and incident type 2 diabetes mellitus in older adults: the cardiovascular health study. *Archives of internal medicine* 2007;167:802-07.
57. Carnethon MR, Jacobs DR, Sidney S, Liu K. Influence of autonomic nervous system dysfunction on the development of type 2 diabetes: the CARDIA study. *Diabetes care* 2003;26:3035-41.
58. Carnethon MR, Palaniappan LP, Burchfiel CM, Brancati FL, Fortmann SP. Serum insulin, obesity, and the incidence of type 2 diabetes in black and white adults: the atherosclerosis risk in communities study: 1987–1998. *Diabetes care* 2002;25:1358-64.

## Supplementary Materials

59. Carnethon MR, Yan L, Greenland P, et al. Resting heart rate in middle age and diabetes development in older age. *Diabetes care* 2008;31:335-39.
60. Chaput J-P, Després J-P, Bouchard C, Astrup A, Tremblay A. Sleep duration as a risk factor for the development of type 2 diabetes or impaired glucose tolerance: analyses of the Quebec Family Study. *Sleep medicine* 2009;10:919-24.
61. Chen H, Burnett RT, Kwong JC, et al. Risk of incident diabetes in relation to long-term exposure to fine particulate matter in Ontario, Canada. *Environmental health perspectives* 2013;121:804-10.
62. Chen N, Muhammad IF, Li Z, Nilsson PM, Borné Y. Sex-Specific Associations of Circulating Uric Acid with Risk of Diabetes Incidence: A Population-Based Cohort Study from Sweden. *Diabetes, Metabolic Syndrome and Obesity: Targets and Therapy* 2020;13:4323.
63. Chen Y, Lin H, Qin L, et al. Fasting Serum Fructose Levels Are Associated With Risk of Incident Type 2 Diabetes in Middle-Aged and Older Chinese Population. *Diabetes Care* 2020;43:2217-25.
64. Cheng P, Neugaard B, Foulis P, Conlin PR. Hemoglobin A1c as a predictor of incident diabetes. *Diabetes care* 2011;34:610-15.
65. Cheung C-L, Kung AW, Tan KC. Serum follicle stimulating hormone is associated with reduced risk of diabetes in postmenopausal women: The Hong Kong Osteoporosis Study. *Maturitas* 2018;114:41-45.
66. Cho NH, Jang HC, Choi SH, et al. Abnormal liver function test predicts type 2 diabetes: a community-based prospective study. *Diabetes care* 2007;30:2566-68.
67. Cho SMJ, Lee H, Shim J-S, Kim HC. Association of snoring with prediabetes and type 2 diabetes mellitus: the cardiovascular and metabolic diseases etiology research center cohort. *Diabetes & metabolism journal* 2020;44:687.
68. Chow LS, Odegaard AO, Bosch TA, et al. Twenty year fitness trends in young adults and incidence of prediabetes and diabetes: the CARDIA study. *Diabetologia* 2016;59:1659-65.
69. Cirera L, Huerta JM, Chirlaque MD, et al. Life-course social position, obesity and diabetes risk in the EPIC-Spain Cohort. *The European Journal of Public Health* 2016;26:439-45.
70. Conen D, Ridker PM, Mora S, Buring JE, Glynn RJ. Blood pressure and risk of developing type 2 diabetes mellitus: the Women's Health Study. *European heart journal* 2007;28:2937-43.
71. Consortium I. The association between dietary energy density and type 2 diabetes in Europe: results from the EPIC-InterAct Study. *Plos one* 2013;8:e59947.
72. Consortium I. Association between dietary meat consumption and incident type 2 diabetes: the EPIC-InterAct study. *Diabetologia* 2013;56:47-59.
73. Coogan PF, White LF, Yu J, et al. Long term exposure to NO<sub>2</sub> and diabetes incidence in the Black Women's Health Study. *Environmental research* 2016;148:360-66.
74. Cooper AJ, Sharp SJ, Luben RN, et al. The association between a biomarker score for fruit and vegetable intake and incident type 2 diabetes: the EPIC-Norfolk study. *European journal of clinical nutrition* 2015;69:449-54.
75. Cornelis MC, Qi L, Zhang C, et al. Joint effects of common genetic variants on the risk for type 2 diabetes in US men and women of European ancestry. *Annals of internal medicine* 2009;150:541-50.
76. Cuthbertson DJ, Bell JA, Ng SY, et al. Dynapenic obesity and the risk of incident Type 2 diabetes: the English Longitudinal Study of Ageing. *Diabetic Medicine* 2016;33:1052-59.
77. Dabelea D, Hanson RL, Lindsay RS, et al. Intrauterine exposure to diabetes conveys risks for type 2 diabetes and obesity: a study of discordant sibships. *Diabetes* 2000;49:2208-11.
78. D'AGOSTINO RB, MYKKANEN L, WAGENKNECHT LE, HAMMAN R, HAFFNER S. Cardiovascular Disease Risk Factors Predict the Development of Type 2 Diabetes. *Diabetes* 1999;48:SA130-SA30.
79. Dai F, Cai H, Li H, et al. Association of sleep duration and incidence of diabetes modified by tea consumption: a report from the Shanghai men's health study. *Sleep medicine* 2017;38:135-41.



## Supplementary Materials

80. Dai H, Sun Q, Zhang C, et al. Associations between benign cutaneous nevi and risk of Type 2 diabetes mellitus in men and women: results from two prospective cohort studies. *Diabetic Medicine* 2017;34:925-33.
81. Dallmeier D, Larson MG, Wang N, et al. Addition of inflammatory biomarkers did not improve diabetes prediction in the community: the framingham heart study. *Journal of the American Heart Association* 2012;1:e000869.
82. de Lauzon-Guillain B, Balkau B, Charles M-A, et al. Birth weight, body silhouette over the life course, and incident diabetes in 91,453 middle-aged women from the French Etude Epidemiologique de Femmes de la Mutuelle Generale de l'Education Nationale (E3N) Cohort. *Diabetes care* 2010;33:298-303.
83. de Oliveira CM, Viater Tureck L, Alvares D, et al. Relationship between marital status and incidence of type 2 diabetes mellitus in a Brazilian rural population: The Baependi Heart Study. *Plos one* 2020;15:e0236869.
84. DeBoer MD, Gurka MJ, Morrison JA, Woo JG. Inter-relationships between the severity of metabolic syndrome, insulin and adiponectin and their relationship to future type 2 diabetes and cardiovascular disease. *International journal of obesity* 2016;40:1353-59.
85. Dehghan A, Van Hoek M, Sijbrands EJ, Hofman A, Witteman JC. High serum uric acid as a novel risk factor for type 2 diabetes. *Diabetes care* 2008;31:361-62.
86. Demakakos P, Pierce MB, Hardy R. Depressive symptoms and risk of type 2 diabetes in a national sample of middle-aged and older adults: the English longitudinal study of aging. *Diabetes care* 2010;33:792-97.
87. Díaz-López A, Bulló M, Martínez-González MA, et al. Dairy product consumption and risk of type 2 diabetes in an elderly Spanish Mediterranean population at high cardiovascular risk. *European journal of nutrition* 2016;55:349-60.
88. Díaz-López A, Iglesias-Vázquez L, Pallejà-Millán M, et al. Association between Iron Status and Incident Type 2 Diabetes: A Population-Based Cohort Study. *Nutrients* 2020;12:3249.
89. Djoussé L, Biggs ML, Mukamal KJ, Siscovick DS. Alcohol consumption and type 2 diabetes among older adults: the Cardiovascular Health Study. *Obesity* 2007;15:1758-65.
90. Djousse L, Driver J, Gaziano J, Buring J, Lee I. Association between modifiable lifestyle factors and residual lifetime risk of diabetes. *Nutrition, Metabolism and Cardiovascular Diseases* 2013;23:17-22.
91. Doi Y, Kiyohara Y, Kubo M, et al. Elevated C-reactive protein is a predictor of the development of diabetes in a general Japanese population: the Hisayama Study. *Diabetes care* 2005;28:2497-500.
92. Doi Y, Kubo M, Yonemoto K, et al. Liver enzymes as a predictor for incident diabetes in a Japanese population: the Hisayama study. *Obesity* 2007;15:1841-50.
93. Dominguez LJ, Bes-Rastrollo M, Basterra-Gortari FJ, et al. Association of a dietary score with incident type 2 diabetes: the dietary-based diabetes-risk score (DDS). *Plos one* 2015;10:e0141760.
94. Donat-Vargas C, Bergdahl IA, Tornevi A, et al. Perfluoroalkyl substances and risk of type II diabetes: A prospective nested case-control study. *Environment international* 2019;123:390-98.
95. Dragsbæk K, Neergaard JS, Laursen JM, et al. Metabolic syndrome and subsequent risk of type 2 diabetes and cardiovascular disease in elderly women: challenging the current definition. *Medicine* 2016;95.
96. Duncan BB, Schmidt MI, Pankow JS, et al. Low-grade systemic inflammation and the development of type 2 diabetes: the atherosclerosis risk in communities study. *Diabetes* 2003;52:1799-805.
97. Duncan BB, Schmidt MI, Pankow JS, et al. Adiponectin and the development of type 2 diabetes: the atherosclerosis risk in communities study. *Diabetes* 2004;53:2473-78.
98. Duprez DA, Forbang NI, Allison MA, et al. Association of C2, a derivative of the radial artery pressure waveform, with new onset of type 2 diabetes mellitus: the MESA study. *Cardiovascular diabetology* 2019;18:1-7.

## Supplementary Materials

99. Ebong IA, Watson KE, Hairston KG, et al. Body fat distribution, menopausal hormone therapy and incident type 2 diabetes in postmenopausal women of the MESA study. *Maturitas* 2016;91:147-52.
100. Edwards MK, Addoh O, Sng E, et al. Physical activity, body mass index and waist circumference change, and normal-range glycosylated hemoglobin on incident diabetes: Jackson Heart Study. *Postgraduate medicine* 2017;129:842-48.
101. Effoe VS, Correa A, Chen H, Lacy ME, Bertoni AG. High-sensitivity C-reactive protein is associated with incident type 2 diabetes among African Americans: the Jackson Heart Study. *Diabetes Care* 2015;38:1694-700.
102. Eliasson M, Lindahl B, Lundberg V, Stegmayr B. Diabetes and obesity in Northern Sweden: occurrence and risk factors for stroke and myocardial infarction. *Scandinavian journal of public health* 2003;31:70-77.
103. Elks CE, Ong KK, Scott RA, et al. Age at menarche and type 2 diabetes risk: the EPIC-InterAct study. *Diabetes care* 2013;36:3526-34.
104. Engström G, Smith J, Persson M, et al. Red cell distribution width, haemoglobin A1c and incidence of diabetes mellitus. *Journal of internal medicine* 2014;276:174-83.
105. Eriksson A-K, Van Den Donk M, Hilding A, Östenson C-G. Work stress, sense of coherence, and risk of type 2 diabetes in a prospective study of middle-aged Swedish men and women. *Diabetes care* 2013;36:2683-89.
106. Eshak ES, Iso H, Maruyama K, Muraki I, Tamakoshi A. Associations between dietary intakes of iron, copper and zinc with risk of type 2 diabetes mellitus: A large population-based prospective cohort study. *Clinical nutrition* 2018;37:667-74.
107. Esteghamati A, Alamdari A, Zandieh A, et al. Serum visfatin is associated with type 2 diabetes mellitus independent of insulin resistance and obesity. *Diabetes research and clinical practice* 2011;91:154-58.
108. Everett BM, Cook NR, Chasman DI, et al. Prospective evaluation of B-type natriuretic peptide concentrations and the risk of type 2 diabetes in women. *Clinical chemistry* 2013;59:557-65.
109. Fagerberg B, Kellis D, Bergström G, Behre C. Adiponectin in relation to insulin sensitivity and insulin secretion in the development of type 2 diabetes: a prospective study in 64-year-old women. *Journal of internal medicine* 2011;269:636-43.
110. Fagherazzi G, Gusto G, El Fatouhi D, et al. Mentally tiring work and type 2 diabetes in women: a 22-year follow-up study. *European journal of endocrinology* 2019;180:257-63.
111. Fagherazzi G, Vilier A, Affret A, et al. The association of body shape trajectories over the life course with type 2 diabetes risk in adulthood: a group-based modeling approach. *Annals of epidemiology* 2015;25:785-87.
112. Feig DS, Shah BR, Lipscombe LL, et al. Preeclampsia as a risk factor for diabetes: a population-based cohort study. *PLoS Med* 2013;10:e1001425.
113. Feldman AL, Griffin SJ, Ahern AL, et al. Impact of weight maintenance and loss on diabetes risk and burden: a population-based study in 33,184 participants. *BMC Public Health* 2017;17:1-10.
114. Ferrannini E, Massari M, Nannipieri M, et al. Plasma glucose levels as predictors of diabetes: the Mexico City diabetes study. *Diabetologia* 2009;52:818-24.
115. Ferrie JE, Kivimäki M, Akbaraly TN, et al. Change in sleep duration and type 2 diabetes: the Whitehall II Study. *Diabetes care* 2015;38:1467-72.
116. Ford ES. Leukocyte count, erythrocyte sedimentation rate, and diabetes incidence in a national sample of US adults. *American journal of epidemiology* 2002;155:57-64.
117. Ford ES, Schulze MB, Kroeger J, et al. Television watching and incident diabetes: findings from the European Prospective Investigation into Cancer and Nutrition—Potsdam Study. *Journal of diabetes* 2010;2:23-27.
118. Forouhi N, Harding A, Allison M, et al. Elevated serum ferritin levels predict new-onset type 2 diabetes: results from the EPIC-Norfolk prospective study. *Diabetologia* 2007;50:949-56.

## Supplementary Materials

119. Fretts AM, Howard BV, Kriska AM, et al. Physical activity and incident diabetes in American Indians: the Strong Heart Study. *American journal of epidemiology* 2009;170:632-39.
120. Fretts AM, Howard BV, McKnight B, et al. Modest levels of physical activity are associated with a lower incidence of diabetes in a population with a high rate of obesity: the strong heart family study. *Diabetes care* 2012;35:1743-45.
121. Fuhrman BJ, Smit E, Crespo CJ, Garcia-Palmieri MR. Coffee intake and risk of incident diabetes in Puerto Rican men: results from the Puerto Rico Heart Health Program. *Public health nutrition* 2009;12:842-48.
122. Fujita M, Ueno K, Hata A. Association of gamma-glutamyltransferase with incidence of type 2 diabetes in Japan. *Experimental Biology and Medicine* 2010;235:335-41.
123. Fuse K, Kadota A, Kondo K, et al. Liver fat accumulation assessed by computed tomography is an independent risk factor for diabetes mellitus in a population-based study: SESSA (Shiga Epidemiological Study of Subclinical Atherosclerosis). *Diabetes research and clinical practice* 2020;160:108002.
124. Gaeini Z, Bahadoran Z, Mirmiran P, Djazayeri A. The association between dietary fat pattern and the risk of type 2 diabetes. *Preventive nutrition and food science* 2019;24:1.
125. Gagnon C, Lu ZX, Magliano DJ, et al. Serum 25-hydroxyvitamin D, calcium intake, and risk of type 2 diabetes after 5 years: results from a national, population-based prospective study (the Australian Diabetes, Obesity and Lifestyle study). *Diabetes care* 2011;34:1133-38.
126. Gangwisch JE, Heymsfield SB, Boden-Albala B, et al. Sleep duration as a risk factor for diabetes incidence in a large US sample. *Sleep* 2007;30:1667-73.
127. Gariani K, Marques-Vidal P, Waeber G, Vollenweider P, Jornayvaz FR. Salivary cortisol is not associated with incident insulin resistance or type 2 diabetes mellitus. *Endocrine connections* 2019;8:870-77.
128. Gautier A, Balkau B, Lange C, Tichet J, Bonnet F. Risk factors for incident type 2 diabetes in individuals with a BMI of < 27 kg/m<sup>2</sup>: the role of  $\gamma$ -glutamyltransferase. Data from an Epidemiological Study on the Insulin Resistance Syndrome (DESIR). *Diabetologia* 2010;53:247-53.
129. Gilbert-Ouimet M, Ma H, Glazier R, et al. Adverse effect of long work hours on incident diabetes in 7065 Ontario workers followed for 12 years. *BMJ Open Diabetes Research and Care* 2018;6:e000496.
130. Gokulakrishnan K, Velmurugan K, Ganesan S, Mohan V. Circulating levels of insulin-like growth factor binding protein-1 in relation to insulin resistance, type 2 diabetes mellitus, and metabolic syndrome (Chennai Urban Rural Epidemiology Study 118). *Metabolism* 2012;61:43-46.
131. Golden SH, Williams JE, Ford DE, et al. Depressive symptoms and the risk of type 2 diabetes: the Atherosclerosis Risk in Communities study. *Diabetes care* 2004;27:429-35.
132. Gomez-Peralta F, Lecube A, Fernández-Mariño A, et al. Interindividual differences in the clinical effectiveness of liraglutide in Type 2 diabetes: a real-world retrospective study conducted in Spain. *Diabetic Medicine* 2018;35:1605-12.
133. Goto M, Goto A, Morita A, et al. Low-molecular-weight adiponectin and high-molecular-weight adiponectin levels in relation to diabetes. *Obesity* 2014;22:401-07.
134. Green MJ, Espie CA, Popham F, Robertson T, Benzeval M. Insomnia symptoms as a cause of type 2 diabetes Incidence: a 20 year cohort study. *BMC psychiatry* 2017;17:1-8.
135. Gress TW, Nieto FJ, Shahar E, Wofford MR, Brancati FL. Hypertension and antihypertensive therapy as risk factors for type 2 diabetes mellitus. *New England Journal of Medicine* 2000;342:905-12.
136. Grunstein RR, Stenlöf K, Hedner JA, et al. Two year reduction in sleep apnea symptoms and associated diabetes incidence after weight loss in severe obesity. *Sleep* 2007;30:703-10.

## Supplementary Materials

137. Guinter MA, Merchant AT, Tabung FK, et al. Adiposity does not modify the effect of the dietary inflammatory potential on type 2 diabetes incidence among a prospective cohort of men. *Journal of nutrition & intermediary metabolism* 2019;16:100095.
138. Gunderson EP, Lewis CE, Tsai A-L, et al. A 20-year prospective study of childbearing and incidence of diabetes in young women, controlling for glycemia before conception: the Coronary Artery Risk Development in Young Adults (CARDIA) Study. *Diabetes* 2007;56:2990-96.
139. Guo VW, Yu ET, Wong CH, et al. Hypertriglyceridaemic–waist phenotype and risk of diabetes in people with impaired fasting glucose in primary care: a cohort study. *Diabetic Medicine* 2018;35:576-82.
140. Gutiérrez-Repiso C, Soriguer F, Rubio-Martín E, et al. Night-time sleep duration and the incidence of obesity and type 2 diabetes. Findings from the prospective Pizarra study. *Sleep medicine* 2014;15:1398-404.
141. Haffner SM. Sex hormone-binding protein, hyperinsulinemia, insulin resistance and noninsulin-dependent diabetes. *Hormone Research in Paediatrics* 1996;45:233-37.
142. Hamman RF, Wing RR, Edelstein SL, et al. Effect of weight loss with lifestyle intervention on risk of diabetes. *Diabetes care* 2006;29:2102-07.
143. Hanley AJ, Wagenknecht LE, Norris JM, et al. Adiponectin and the incidence of type 2 diabetes in Hispanics and African Americans: the IRAS Family Study. *Diabetes care* 2011;34:2231-36.
144. Hansen AB, Stayner L, Hansen J, Andersen ZJ. Night shift work and incidence of diabetes in the Danish Nurse Cohort. *Occupational and environmental medicine* 2016;73:262-68.
145. Hansen BC, Newcomb JD, Chen R, Linden EH. Longitudinal dynamics of body weight change in the development of type 2 diabetes. *Obesity* 2013;21:1643-49.
146. Hara H, Egusa G, Yamakido M. Incidence of non-insulin-dependent diabetes mellitus and its risk factors in Japanese-Americans living in Hawaii and Los Angeles. *Diabetic medicine* 1996;13:133-42.
147. Harada PH, Demler OV, Dugani SB, et al. Lipoprotein insulin resistance score and risk of incident diabetes during extended follow-up of 20 years: the women's health study. *Journal of clinical lipidology* 2017;11:1257-67. e2.
148. Hartwig S, Greiser KH, Medenwald D, et al. Association of change of anthropometric measurements with incident type 2 diabetes mellitus: a pooled analysis of the prospective population-based CARLA and SHIP cohort studies. *Medicine* 2015;94.
149. Hashimoto Y, Okamura T, Hamaguchi M, et al. Creatinine to body weight ratio is associated with incident diabetes: population-based cohort study. *Journal of clinical medicine* 2020;9:227.
150. Hayashi T, Tsumura K, Suematsu C, et al. High normal blood pressure, hypertension, and the risk of type 2 diabetes in Japanese men. The Osaka Health Survey. *Diabetes Care* 1999;22:1683-87.
151. He C, Zhang C, Hunter DJ, et al. Age at menarche and risk of type 2 diabetes: results from 2 large prospective cohort studies. *American journal of epidemiology* 2010;171:334-44.
152. He X, Rebholz CM, Daya N, Lazo M, Selvin E. Alcohol consumption and incident diabetes: the Atherosclerosis Risk in Communities (ARIC) study. *Diabetologia* 2019;62:770-78.
153. Hedén Stahl C, Novak M, Hansson PO, et al. Incidence of Type 2 diabetes among occupational classes in Sweden: a 35-year follow-up cohort study in middle-aged men. *Diabetic medicine* 2014;31:674-80.
154. Heianza Y, Kato K, Kodama S, et al. Risk of the development of Type 2 diabetes in relation to overall obesity, abdominal obesity and the clustering of metabolic abnormalities in Japanese individuals: does metabolically healthy overweight really exist? The Niigata Wellness Study. *Diabetic Medicine* 2015;32:665-72.
155. Heidemann C, Niemann H, Paprott R, et al. Residential traffic and incidence of type 2 diabetes: the German Health Interview and Examination Surveys. *Diabetic medicine* 2014;31:1269-76.

## Supplementary Materials

156. Heidemann C, Sun Q, van Dam RM, et al. Total and high-molecular-weight adiponectin and resistin in relation to the risk for type 2 diabetes in women. *Annals of internal medicine* 2008;149:307-16.
157. Hendryx M, Nicholson W, Manson JE, et al. Social relationships and risk of type 2 diabetes among postmenopausal women. *The Journals of Gerontology: Series B* 2020;75:1597-608.
158. Heraclides AM, Chandola T, Witte DR, Brunner EJ. Work stress, obesity and the risk of Type 2 Diabetes: Gender-specific bidirectional effect in the Whitehall II study. *Obesity* 2012;20:428-33.
159. Herder C, Brunner EJ, Rathmann W, et al. Elevated levels of the anti-inflammatory interleukin-1 receptor antagonist precede the onset of type 2 diabetes: the Whitehall II study. *Diabetes care* 2009;32:421-23.
160. Hingle MD, Wertheim BC, Neuhauser ML, et al. Association between dietary energy density and incident type 2 diabetes in the women's health initiative. *Journal of the Academy of Nutrition and Dietetics* 2017;117:778-85. e1.
161. Hippisley-Cox J, Coupland C, Robson J, Sheikh A, Brindle P. Predicting risk of type 2 diabetes in England and Wales: prospective derivation and validation of QDScore. *Bmj* 2009;338.
162. Hjort R, Löfvenborg JE, Ahlqvist E, et al. Interaction between overweight and genotypes of HLA, TCF7L2, and FTO in relation to the risk of latent autoimmune diabetes in adults and type 2 diabetes. *The Journal of Clinical Endocrinology & Metabolism* 2019;104:4815-26.
163. Hodge A, English D, O'dea K, Giles G. Alcohol intake, consumption pattern and beverage type, and the risk of Type 2 diabetes. *Diabetic Medicine* 2006;23:690-97.
164. Hodge AM, English DR, O'Dea K, Giles GG. Glycemic index and dietary fiber and the risk of type 2 diabetes. *Diabetes care* 2004;27:2701-06.
165. Holden S, Barnett AH, Peters JR, et al. The incidence of type 2 diabetes in the United Kingdom from 1991 to 2010. *Diabetes, Obesity and Metabolism* 2013;15:844-52.
166. Hong K-W, Kim SH, Zhang X, Park S. Interactions among the variants of insulin-related genes and nutrients increase the risk of type 2 diabetes. *Nutrition Research* 2018;51:82-92.
167. Hoogeveen R, Ballantyne C, Bang H, et al. Circulating oxidised low-density lipoprotein and intercellular adhesion molecule-1 and risk of type 2 diabetes mellitus: the Atherosclerosis Risk in Communities Study. *Diabetologia* 2007;50:36-42.
168. Hsieh C-H, Wu C-Z, Hsiao F-C, et al. The impact of metabolic syndrome on insulin sensitivity, glucose sensitivity, and acute insulin response after glucose load in early-onset type 2 diabetes mellitus: Taiwan Early-Onset Type 2 Diabetes Cohort Study. *Metabolism* 2008;57:1615-21.
169. Hu C, Mu Y, Wan Q, et al. Association between birth weight and diabetes: role of body mass index and lifestyle in later life. *Journal of diabetes* 2020;12:10-20.
170. Hu FB, Meigs JB, Li TY, Rifai N, Manson JE. Inflammatory markers and risk of developing type 2 diabetes in women. *Diabetes* 2004;53:693-700.
171. Hu G, Jousilahti P, Tuomilehto J, et al. Association of serum C-reactive protein level with sex-specific type 2 diabetes risk: a prospective finnish study. *The Journal of Clinical Endocrinology & Metabolism* 2009;94:2099-105.
172. Hu G, Lakka TA, Barengo NC, Tuomilehto J. Physical activity, physical fitness, and risk of type 2 diabetes mellitus. *Metabolic syndrome and related disorders* 2005;3:35-44.
173. Hu G, Qiao Q, Silventoinen K, et al. Occupational, commuting, and leisure-time physical activity in relation to risk for Type 2 diabetes in middle-aged Finnish men and women. *Diabetologia* 2003;46:322-29.
174. Hu H, Kurotani K, Sasaki N, et al. Optimal waist circumference cut-off points and ability of different metabolic syndrome criteria for predicting diabetes in Japanese men and women: Japan Epidemiology Collaboration on Occupational Health Study. *BMC public health* 2016;16:1-10.

## Supplementary Materials

175. Hu H, Nakagawa T, Honda T, et al. Low serum creatinine and risk of diabetes: the Japan Epidemiology Collaboration on Occupational Health Study. *Journal of diabetes investigation* 2019;10:1209-14.
176. Hu T, Jacobs DR, Sinaiko AR, et al. Childhood BMI and fasting glucose and insulin predict adult type 2 diabetes: the international childhood cardiovascular cohort (i3C) consortium. *Diabetes care* 2020;43:2821-29.
177. Hu X, Yu W, Yang L, et al. Inverse association between physical activity and blood glucose is independent of sex, menopause status and first-degree family history of diabetes. *Journal of diabetes investigation* 2019;10:1502-09.
178. Hu Y, Bhupathiraju SN, de Koning L, Hu FB. Duration of obesity and overweight and risk of type 2 diabetes among US women. *Obesity* 2014;22:2267-73.
179. Huang C-Y, Wu C-L, Yang Y-C, et al. Association between Dioxin and diabetes mellitus in an endemic area of exposure in Taiwan: a population-based study. *Medicine* 2015;94.
180. Huang H-L, Pan C-C, Hsiao Y-F, et al. Associations of body mass index and diabetes with hip fracture risk: a nationwide cohort study. *BMC public health* 2018;18:1-12.
181. Huang Sf, Yu Yl, Cui Yf, et al. Association between serum prostate-specific antigen concentrations and the risk of developing type 2 diabetes mellitus in Chinese men: A cohort study. *Journal of Diabetes Investigation* 2021.
182. Huang T, Qi Q, Zheng Y, et al. Genetic predisposition to central obesity and risk of type 2 diabetes: two independent cohort studies. *Diabetes Care* 2015;38:1306-11.
183. Hunt K, Hansis-Diarte A, Shipman K, et al. Impact of parental smoking on diabetes, hypertension and the metabolic syndrome in adult men and women in the San Antonio Heart Study. *Diabetologia* 2006;49:2291-98.
184. Hur NW, Kim HC, Mo Nam C, et al. Smoking cessation and risk of type 2 diabetes mellitus: Korea Medical Insurance Corporation Study. *European Journal of Preventive Cardiology* 2007;14:244-49.
185. Huth C, Beuerle S, Zierer A, et al. Biomarkers of iron metabolism are independently associated with impaired glucose metabolism and type 2 diabetes: the KORA F4 study. *Eur J Endocrinol* 2015;173:643-53.
186. Huth C, Thorand B, Baumert J, et al. Job strain as a risk factor for the onset of type 2 diabetes mellitus: findings from the MONICA/KORA Augsburg cohort study. *Psychosomatic medicine* 2014;76:562-68.
187. Hwang YC, Ahn HY, Yu SH, Park SW, Park CY. Atherogenic dyslipidaemic profiles associated with the development of Type 2 diabetes: a 3.1-year longitudinal study. *Diabetic medicine* 2014;31:24-30.
188. Hwang Y-C, Jee J-H, Jeong I-K, et al. Circulating osteocalcin level is not associated with incident type 2 diabetes in middle-aged male subjects: mean 8.4-year retrospective follow-up study. *Diabetes care* 2012;35:1919-24.
189. Hwang Y-C, Jun JE, Hong W-J, et al. Baseline level and change in serum albumin concentration and the risk of incident type 2 diabetes. *Journal of diabetes and its complications* 2018;32:61-66.
190. Iliadou A, Cnattingius S, Lichtenstein P. Low birthweight and Type 2 diabetes: a study on 11 162 Swedish twins. *International journal of epidemiology* 2004;33:948-53.
191. Iwasaki M, Kudo A, Asahi K, et al. Fast walking is a preventive factor against new-onset diabetes mellitus in a large cohort from a Japanese general population. *Scientific reports* 2021;11.
192. Jääskeläinen T, Paananen J, Lindström J, et al. Genetic predisposition to obesity and lifestyle factors—the combined analyses of twenty-six known BMI-and fourteen known waist: hip ratio (WHR)-associated variants in the Finnish Diabetes Prevention Study. *British journal of nutrition* 2013;110:1856-65.

## Supplementary Materials

193. Jaliseh HK, Tehrani FR, Behboudi-Gandevani S, et al. Polycystic ovary syndrome is a risk factor for diabetes and prediabetes in middle-aged but not elderly women: a long-term population-based follow-up study. *Fertility and sterility* 2017;108:1078-84.
194. Jalovaara K, Santaniemi M, Timonen M, et al. Low serum adiponectin level as a predictor of impaired glucose regulation and type 2 diabetes mellitus in a middle-aged Finnish population. *Metabolism* 2008;57:1130-34.
195. James-Todd T, Wise L, Boggs D, et al. Preterm birth and subsequent risk of type 2 diabetes in black women. *Epidemiology (Cambridge, Mass)* 2014;25:805.
196. Janghorbani M, Amini M. Utility of serum lipid ratios for predicting incident type 2 diabetes: the Isfahan diabetes prevention study. *Diabetes/metabolism research and reviews* 2016;32:572-80.
197. Janghorbani M, Soltanian N, Amini M, Aminorroaya A. Low-density lipoprotein cholesterol and risk of type 2 diabetes: The Isfahan diabetes prevention study. *Diabetes & Metabolic Syndrome: Clinical Research & Reviews* 2018;12:715-19.
198. Janson J, Laedtke T, Parisi JE, et al. Increased risk of type 2 diabetes in Alzheimer disease. *Diabetes* 2004;53:474-81.
199. Jefferis BJ, Whincup PH, Lennon L, Wannamethee SG. Longitudinal associations between changes in physical activity and onset of type 2 diabetes in older British men: the influence of adiposity. *Diabetes care* 2012;35:1876-83.
200. Jeffreys M, Lawlor D, Galobardes B, et al. Lifecourse weight patterns and adult-onset diabetes: the Glasgow Alumni and British Women's Heart and Health studies. *International journal of obesity* 2006;30:507-12.
201. Jensen TM, Witte DR, Pieragostino D, et al. Association between protein signals and type 2 diabetes incidence. *Acta diabetologica* 2013;50:697-704.
202. Jeon J, Jung KJ, Jee SH. Waist circumference trajectories and risk of type 2 diabetes mellitus in Korean population: the Korean genome and epidemiology study (KoGES). *BMC public health* 2019;19:1-11.
203. Jiamjarasrangi W, Sangwatanaroj S, Lohsoonthorn V, Lertmaharit S. Increased alanine aminotransferase level and future risk of type 2 diabetes and impaired fasting glucose among the employees in a university hospital in Thailand. *Diabetes & metabolism* 2008;34:283-89.
204. Jiang J, Cui J, Wang A, et al. Association between age at natural menopause and risk of type 2 diabetes in postmenopausal women with and without obesity. *The Journal of Clinical Endocrinology & Metabolism* 2019;104:3039-48.
205. Jiang R, Manson JE, Meigs JB, et al. Body iron stores in relation to risk of type 2 diabetes in apparently healthy women. *Jama* 2004;291:711-17.
206. Jimba S, Nakagami T, Oya J, et al. Increase in  $\gamma$ -glutamyltransferase level and development of established cardiovascular risk factors and diabetes in Japanese adults. *Metabolic syndrome and related disorders* 2009;7:411-18.
207. Johnson ST, Eurich DT, Lytvyak E, et al. Walking and type 2 diabetes risk using CANRISK scores among older adults. *Applied Physiology, Nutrition, and Metabolism* 2017;42:33-38.
208. Joosten MM, Chiuev SE, Mukamal KJ, et al. Changes in alcohol consumption and subsequent risk of type 2 diabetes in men. *Diabetes* 2011;60:74-79.
209. Joosten MM, Grobbee DE, Van Der A DL, et al. Combined effect of alcohol consumption and lifestyle behaviors on risk of type 2 diabetes. *The American journal of clinical nutrition* 2010;91:1777-83.
210. Joseph JJ, Echouffo-Tcheugui JB, Carnethon MR, et al. The association of ideal cardiovascular health with incident type 2 diabetes mellitus: the Multi-Ethnic Study of Atherosclerosis. *Diabetologia* 2016;59:1893-903.
211. Josphipura KJ, Muñoz-Torres FJ, Dye BA, et al. Longitudinal association between periodontitis and development of diabetes. *Diabetes research and clinical practice* 2018;141:284-93.

## Supplementary Materials

212. Jung C, Lee W, Hwang J, et al. Assessment of the fatty liver index as an indicator of hepatic steatosis for predicting incident diabetes independently of insulin resistance in a Korean population. *Diabetic medicine* 2013;30:428-35.
213. Jung CH, Lee MJ, Kang YM, et al. The risk of incident type 2 diabetes in a Korean metabolically healthy obese population: the role of systemic inflammation. *The Journal of Clinical Endocrinology & Metabolism* 2015;100:934-41.
214. Juraschek SP, Blaha MJ, Blumenthal RS, et al. Cardiorespiratory fitness and incident diabetes: the FIT (Henry Ford Exercise Testing) project. *Diabetes Care* 2015;38:1075-81.
215. Kadiki O, Reddy M, Marzouk A. Incidence of insulin-dependent diabetes (IDDM) and non-insulin-dependent diabetes (NIDDM)(0–34 years at onset) in Benghazi, Libya. *Diabetes research and clinical practice* 1996;32:165-73.
216. Kalyani RR, Metter EJ, Xue Q-L, et al. The relationship of lean body mass with aging to the development of diabetes. *Journal of the Endocrine Society* 2020;4:bvaa043.
217. Kaneko K, Yatsuya H, Li Y, et al. Association of gamma-glutamyl transferase and alanine aminotransferase with type 2 diabetes mellitus incidence in middle-aged Japanese men: 12-year follow up. *Journal of diabetes investigation* 2019;10:837-45.
218. Kanerva N, Rissanen H, Knekt P, et al. The healthy Nordic diet and incidence of type 2 diabetes — 10-year follow-up. *Diabetes research and clinical practice* 2014;106:e34-e37.
219. Kanmani S, Kwon M, Shin M-K, Kim MK. Association of C-reactive protein with risk of developing type 2 diabetes mellitus, and role of obesity and hypertension: a large population-based Korean cohort study. *Scientific reports* 2019;9:1-8.
220. Kartschmit N, Sutcliffe R, Sheldon MP, et al. Walkability and its association with prevalent and incident diabetes among adults in different regions of Germany: results of pooled data from five German cohorts. *BMC endocrine disorders* 2020;20:1-9.
221. Kashima S, Inoue K, Matsumoto M, Akimoto K. Low serum creatinine is a type 2 diabetes risk factor in men and women: The Yuport Health Checkup Center cohort study. *Diabetes & metabolism* 2017;43:460-64.
222. Katanoda K, Noda M, Goto A, et al. Impact of birth weight on adult-onset diabetes mellitus in relation to current body mass index: The Japan Nurses' Health Study. *Journal of epidemiology* 2017;27:428-34.
223. Kelly LA, Lane CJ, Weigensberg MJ, et al. Parental history and risk of type 2 diabetes in overweight Latino adolescents: a longitudinal analysis. *Diabetes care* 2007;30:2700-05.
224. Kendzerska T, Gershon AS, Hawker G, Tomlinson G, Leung RS. Obstructive sleep apnea and incident diabetes. A historical cohort study. *American journal of respiratory and critical care medicine* 2014;190:218-25.
225. Kendzerska T, King LK, Lipscombe L, et al. The impact of hip and knee osteoarthritis on the subsequent risk of incident diabetes: a population-based cohort study. *Diabetologia* 2018;61:2290-99.
226. Kettunen J, Joensuu A, Hagnäs M, et al. Associations of increased physical performance and change in body composition with molecular pathways of heart disease and diabetes risk. *American Journal of Physiology-Endocrinology and Metabolism* 2019;316:E221-E29.
227. Khaloo P, Hasheminia M, Tohidi M, et al. Impact of 3-year changes in lipid parameters and their ratios on incident type 2 diabetes: Tehran lipid and glucose study. *Nutrition & metabolism* 2018;15:1-10.
228. Kim CH, Kim HK, Kim EH, Bae SJ, Park JY. Association between changes in body composition and risk of developing type 2 diabetes in Koreans. *Diabetic Medicine* 2014;31:1393-98.
229. Kim CH, Park JY, Lee KU, Kim JH, Kim HK. Fatty liver is an independent risk factor for the development of Type 2 diabetes in Korean adults. *Diabetic Medicine* 2008;25:476-81.
230. Kim CH, Park JY, Lee KU, Kim JH, Kim HK. Association of serum  $\gamma$ -glutamyltransferase and alanine aminotransferase activities with risk of type 2 diabetes mellitus independent of fatty liver. *Diabetes/metabolism research and reviews* 2009;25:64-69.



## Supplementary Materials

231. Kim C-H, Kim H-K, Kim E-H, et al. Association of restrictive ventilatory dysfunction with the development of prediabetes and type 2 diabetes in Koreans. *Acta diabetologica* 2015;52:357-63.
232. Kim ES, Jeong JS, Han K, et al. Impact of weight changes on the incidence of diabetes mellitus: a Korean nationwide cohort study. *Scientific reports* 2018;8:1-7.
233. Kim JA, Da Hye Kim SMK, Park YG, et al. Impact of the dynamic change of metabolic health status on the incident type 2 diabetes: A Nationwide Population-Based Cohort Study. *Endocrinology and Metabolism* 2019;34:406.
234. Kim M-J, Lim N-K, Choi S-J, Park H-Y. Hypertension is an independent risk factor for type 2 diabetes: the Korean genome and epidemiology study. *Hypertension Research* 2015;38:783-89.
235. Kim SY, Woo HW, Lee Y-H, et al. Association of dietary glycaemic index, glycaemic load, and total carbohydrates with incidence of type-2 diabetes in adults aged  $\geq 40$  years: The Multi-Rural Communities Cohort (MRCohort). *Diabetes research and clinical practice* 2020;160:108007.
236. Kim YG, Han K-D, Choi J-I, et al. The impact of body weight and diabetes on new-onset atrial fibrillation: a nationwide population based study. *Cardiovascular diabetology* 2019;18:1-9.
237. Kochar J, Djoussé L, Gaziano JM. Breakfast cereals and risk of type 2 diabetes in the Physicians' Health Study I. *Obesity* 2007;15:3039-44.
238. Koloverou E, Panagiotakos D, Pitsavos C, et al. Adherence to Mediterranean diet and 10-year incidence (2002–2012) of diabetes: correlations with inflammatory and oxidative stress biomarkers in the ATTICA cohort study. *Diabetes/metabolism research and reviews* 2016;32:73-81.
239. Koo BK, Kim SW, Yi KH, Moon MK. Low economic status is identified as an emerging risk factor for diabetes mellitus in Korean men aged 30 to 59 years in Korean National Health and Nutrition Examination Survey 2008 to 2010. *Diabetes & metabolism journal* 2015;39:137.
240. Kowall B, Rathmann W, Strassburger K, et al. Association of passive and active smoking with incident type 2 diabetes mellitus in the elderly population: the KORA S4/F4 cohort study. *European journal of epidemiology* 2010;25:393-402.
241. Krakoff J, Funahashi T, Stehouwer CD, et al. Inflammatory markers, adiponectin, and risk of type 2 diabetes in the Pima Indian. *Diabetes care* 2003;26:1745-51.
242. Kramer CK, Von Mühlen D, Jassal SK, Barrett-Connor E. Serum uric acid levels improve prediction of incident type 2 diabetes in individuals with impaired fasting glucose: the Rancho Bernardo Study. *Diabetes care* 2009;32:1272-73.
243. Krishnan S, Coogan PF, Boggs DA, Rosenberg L, Palmer JR. Consumption of restaurant foods and incidence of type 2 diabetes in African American women. *The American journal of clinical nutrition* 2010;91:465-71.
244. Krishnan S, Cozier YC, Rosenberg L, Palmer JR. Socioeconomic status and incidence of type 2 diabetes: results from the Black Women's Health Study. *American journal of epidemiology* 2010;171:564-70.
245. Kriska AM, Saremi A, Hanson RL, et al. Physical activity, obesity, and the incidence of type 2 diabetes in a high-risk population. *American journal of epidemiology* 2003;158:669-75.
246. Kumaran K, Lubree H, Bhat DS, et al. Birth weight, childhood and adolescent growth and diabetes risk factors in 21-year-old Asian Indians: the Pune Children's Study. *Journal of Developmental Origins of Health and Disease* 2021;12:474-83.
247. Kurotani K, Miyamoto T, Kochi T, et al. Metabolic syndrome components and diabetes incidence according to the presence or absence of impaired fasting glucose: The Japan Epidemiology Collaboration on Occupational Health Study. *Journal of epidemiology* 2017;27:408-12.
248. Kuwahara K, Honda T, Nakagawa T, et al. Body mass index trajectory patterns and changes in visceral fat and glucose metabolism before the onset of type 2 diabetes. *Scientific reports* 2017;7:1-9.

## Supplementary Materials

249. Kwon YH, Kim S-K, Cho JH, et al. The association between persistent hypertriglyceridemia and the risk of diabetes development: the Kangbuk Samsung Health Study. *Endocrinology and Metabolism* 2018;33:55.
250. Laaksonen D, Lakka T, Lakka HM, et al. Serum fatty acid composition predicts development of impaired fasting glycaemia and diabetes in middle-aged men. *Diabetic Medicine* 2002;19:456-64.
251. Laaksonen D, Niskanen L, Nyysönen K, et al. C-reactive protein and the development of the metabolic syndrome and diabetes in middle-aged men. *Diabetologia* 2004;47:1403-10.
252. Lacoppidan SA, Kyrø C, Loft S, et al. Adherence to a healthy Nordic food index is associated with a lower risk of type-2 diabetes—The Danish diet, cancer and health cohort study. *Nutrients* 2015;7:8633-44.
253. Lainampetch J, Panprathip P, Phosat C, et al. Association of tumor necrosis factor alpha, interleukin 6, and C-reactive protein with the risk of developing type 2 diabetes: a retrospective cohort study of rural thais. *Journal of diabetes research* 2019;2019.
254. Laine MK, Wasenius NS, Lohi H, et al. Association between dog ownership and type 2 diabetes in later life: the Helsinki birth cohort study. *International journal of circumpolar health* 2019;78:1611328.
255. Lajous M, Tondeur L, Fagherazzi G, et al. Childhood and adult secondhand smoke and type 2 diabetes in women. *Diabetes care* 2013;36:2720-25.
256. Lakshman R, Forouhi N, Luben R, et al. Association between age at menarche and risk of diabetes in adults: results from the EPIC-Norfolk cohort study. *Diabetologia* 2008;51:781-86.
257. Lapidus L, Andersson SW, Bengtsson C, et al. Weight and length at birth and their relationship to diabetes incidence and all-cause mortality—a 32-year follow-up of the population study of women in Gothenburg, Sweden. *Primary care diabetes* 2008;2:127-33.
258. Lapidus L, Bengtsson C, Bergfors E, et al. Alcohol intake among women and its relationship to diabetes incidence and all-cause mortality: the 32-year follow-up of a population study of women in Gothenburg, Sweden. *Diabetes Care* 2005;28:2230-35.
259. Lawlor D, Patel R, Fraser A, Smith GD, Ebrahim S. The association of life course socio-economic position with diagnosis, treatment, control and survival of women with diabetes: findings from the British Women's Heart and Health Study. *Diabetic medicine* 2007;24:892-900.
260. Le Boudec J, Marques-Vidal P, Cornuz J, Clair C. Smoking cessation and the incidence of pre-diabetes and type 2 diabetes: a cohort study. *Journal of Diabetes and its Complications* 2016;30:43-48.
261. LeCroy M, Hua S, Kaplan R, et al. Associations of changes in fat free mass with risk for type 2 diabetes: Hispanic Community Health Study/Study of Latinos. *Diabetes research and clinical practice* 2021;171:108557.
262. Lee CC, Haffner SM, Wagenknecht LE, et al. Insulin clearance and the incidence of type 2 diabetes in Hispanics and African Americans: the IRAS Family Study. *Diabetes care* 2013;36:901-07.
263. Lee DH, Silventoinen K, Jacobs Jr DR, Jousilahti P, Tuomileto J.  $\gamma$ -Glutamyltransferase, obesity, and the risk of type 2 diabetes: observational cohort study among 20,158 middle-aged men and women. *The Journal of Clinical Endocrinology & Metabolism* 2004;89:5410-14.
264. Lee D-H, Ha M-H, Kim J-H, et al. Gamma-glutamyltransferase and diabetes—a 4 year follow-up study. *Diabetologia* 2003;46:359-64.
265. Lee D-H, Jacobs Jr DR, Gross M, et al.  $\gamma$ -glutamyltransferase is a predictor of incident diabetes and hypertension: the Coronary Artery Risk Development in Young Adults (CARDIA) Study. *Clinical chemistry* 2003;49:1358-66.
266. Lee J, Lee H, Lee Y. Lung function as a predictor of incident type 2 diabetes in community-dwelling adults: A longitudinal finding over 12 years from the Korean Genome and Epidemiology Study. *Diabetes & metabolism* 2020;46:392-99.

## Supplementary Materials

267. Lee M-K, Han K, Kwon H-S. Age-specific diabetes risk by the number of metabolic syndrome components: a Korean nationwide cohort study. *Diabetology & metabolic syndrome* 2019;11:1-8.
268. Lee S-H, Kwon H-S, Park Y-M, et al. Predicting the development of diabetes using the product of triglycerides and glucose: the Chungju Metabolic Disease Cohort (CMC) study. *PLoS One* 2014;9:e90430.
269. Lee S-H, Yang HK, Ha H-S, et al. Changes in metabolic health status over time and risk of developing type 2 diabetes: a prospective cohort study. *Medicine* 2015;94.
270. Lee TC, Glynn RJ, Peña JM, et al. Socioeconomic status and incident type 2 diabetes mellitus: data from the Women's Health Study. *PloS one* 2011;6:e27670.
271. Lee WY, Kwon CH, Rhee EJ, et al. The effect of body mass index and fasting glucose on the relationship between blood pressure and incident diabetes mellitus: a 5-year follow-up study. *Hypertension Research* 2011;34:1093-97.
272. Lee YB, Kim DH, Kim SM, et al. Risk of type 2 diabetes according to the cumulative exposure to metabolic syndrome or obesity: A nationwide population-based study. *Journal of diabetes investigation* 2020;11:1583-93.
273. Leung RY, Cheung BM, Tan KC, Kung AW, Cheung C-L. 25-Hydroxyvitamin D and the risk of incident diabetes in Hong Kong Chinese. *Public health nutrition* 2020;23:1201-07.
274. Ley S, Harris S, Connelly P, et al. Utility of non-high-density lipoprotein cholesterol in assessing incident type 2 diabetes risk. *Diabetes, Obesity and Metabolism* 2012;14:821-25.
275. Ley SH, Harris SB, Connelly PW, et al. Adipokines and incident type 2 diabetes in an Aboriginal Canadian population: the Sandy Lake Health and Diabetes Project. *Diabetes care* 2008;31:1410-15.
276. Li M, Campbell S, McDermott RA. Six year weight change and type 2 diabetes among Australian Indigenous adults. *Diabetes research and clinical practice* 2010;88:203-08.
277. Li S, Zhao J, Luan J, et al. Genetic predisposition to obesity leads to increased risk of type 2 diabetes. *Diabetologia* 2011;54:776-82.
278. Li S-n, Cui Y-f, Luo Z-y, et al. Association between blood urea nitrogen and incidence of type 2 diabetes mellitus in a Chinese population: a cohort study. *Endocrine Journal* 2021:EJ20-0794.
279. Li X, Li G, Cheng T, et al. Association between triglyceride-glucose index and risk of incident diabetes: a secondary analysis based on a Chinese cohort study. *Lipids in health and disease* 2020;19:1-11.
280. Li Y, Gao X, Winkelman JW, et al. Association between sleeping difficulty and type 2 diabetes in women. *Diabetologia* 2016;59:719-27.
281. Li Y, Ley SH, Tobias DK, et al. Birth weight and later life adherence to unhealthy lifestyles in predicting type 2 diabetes: prospective cohort study. *bmj* 2015;351.
282. Li Y, Qi Q, Workalemahu T, Hu FB, Qi L. Birth weight, genetic susceptibility, and adulthood risk of type 2 diabetes. *Diabetes care* 2012;35:2479-84.
283. Liang Y, Hou D, Zhao X, et al. Childhood obesity affects adult metabolic syndrome and diabetes. *Endocrine* 2015;50:87-92.
284. Lidfeldt J, Li TY, Hu FB, Manson JE, Kawachi I. A prospective study of childhood and adult socioeconomic status and incidence of type 2 diabetes in women. *American journal of epidemiology* 2007;165:882-89.
285. Lim CC, Hayes RB, Ahn J, et al. Association between long-term exposure to ambient air pollution and diabetes mortality in the US. *Environmental research* 2018;165:330-36.
286. Lim J, Lee H, Kim E, Yi K, Hwang J. Early menarche increases the risk of type 2 diabetes in young and middle-aged Korean women. *Diabetic Medicine* 2015;32:521-25.
287. Lin C-S, Lee W-J, Lin S-Y, et al. Predicting New-Onset Diabetes Mellitus by Component Combinations of Premorbid Metabolic Syndrome Among Older Adults in Taiwan. *The journal of nutrition, health & aging* 2020;24:650-58.

## Supplementary Materials

288. Lindi VI, Uusitupa MI, Lindström J, et al. Association of the Pro12Ala polymorphism in the PPAR- $\gamma$ 2 gene with 3-year incidence of type 2 diabetes and body weight change in the Finnish Diabetes Prevention Study. *Diabetes* 2002;51:2581-86.
289. Lindsay RS, Funahashi T, Hanson RL, et al. Adiponectin and development of type 2 diabetes in the Pima Indian population. *The Lancet* 2002;360:57-58.
290. Lipska KJ, Inzucchi SE, Van Ness PH, et al. Elevated HbA1c and fasting plasma glucose in predicting diabetes incidence among older adults: are two better than one? *Diabetes care* 2013;36:3923-29.
291. Liu E-q, Weng Y-p, Zhou A-m, Zeng C-l. Association between Triglyceride-Glucose Index and Type 2 Diabetes Mellitus in the Japanese Population: A Secondary Analysis of a Retrospective Cohort Study. *BioMed Research International* 2020;2020.
292. Liu H, Yan S, Chen G, et al. Association of the Ratio of Triglycerides to High-Density Lipoprotein Cholesterol Levels with the Risk of Type 2 Diabetes: A Retrospective Cohort Study in Beijing. *Journal of Diabetes Research* 2021;2021.
293. Liu J, Semiz S, van der Lee SJ, et al. Metabolomics based markers predict type 2 diabetes in a 14-year follow-up study. *Metabolomics* 2017;13:1-11.
294. Liu J-J, Wong MD, Toy WC, et al. Lower circulating irisin is associated with type 2 diabetes mellitus. *Journal of Diabetes and its Complications* 2013;27:365-69.
295. Liu M, Tang J, Zeng J, He Y. Higher serum albumin was related with diabetes incidence and the impact of BMI changes: Based on cohort study of 18,384 Chinese male elderly. *Journal of Diabetes and its Complications* 2017;31:1663-68.
296. Liu X, Bragg F, Yang L, et al. Smoking and smoking cessation in relation to risk of diabetes in Chinese men and women: a 9-year prospective study of 0.5 million people. *The Lancet Public Health* 2018;3:e167-e76.
297. Liu X, Cui L, Wang A, et al. Cumulative exposure to ideal cardiovascular health and incident diabetes in a Chinese population: the Kailuan study. *Journal of the American Heart Association* 2016;5:e004132.
298. Liu X, Shi J, Wang A, et al. Changes in ideal cardiovascular health status and risk of new-onset type 2 diabetes: The Kailuan prospective study. *Medicine* 2016;95.
299. Löfvenborg JE, Andersson T, Carlsson PO, et al. Coffee consumption and the risk of latent autoimmune diabetes in adults—results from a Swedish case–control study. *Diabetic Medicine* 2014;31:799-805.
300. Longenberger A, Lim JY, Brown TT, et al. Low physical function as a risk factor for incident diabetes mellitus and insulin resistance. *Future virology* 2011;6:439-49.
301. Longo-Mbenza B, Kasiam Lasi On'kin J, Nge Okwe A, Kangola Kabangu N, Mbungu Fuele S. Metabolic syndrome, aging, physical inactivity, and incidence of type 2 diabetes in general African population. *Diabetes and Vascular Disease Research* 2010;7:28-39.
302. Looker HC, Knowler WC, Hanson RL. Changes in BMI and weight before and after the development of type 2 diabetes. *Diabetes care* 2001;24:1917-22.
303. López-Ríos L, Nóvoa FJ, Chirino R, et al. Interaction between cholesteryl ester transfer protein and hepatic lipase encoding genes and the risk of type 2 diabetes: results from the Telde study. *PLoS One* 2011;6:e27208.
304. Lorenzo C, Hanley AJ, Rewers MJ, Haffner SM. Calcium and phosphate concentrations and future development of type 2 diabetes: the Insulin Resistance Atherosclerosis Study. *Diabetologia* 2014;57:1366-74.
305. Lorenzo C, Hazuda HP, Haffner SM. Insulin resistance and excess risk of diabetes in Mexican-Americans: the San Antonio Heart Study. *The Journal of Clinical Endocrinology & Metabolism* 2012;97:793-99.
306. Lorenzo C, Nath S, Hanley A, et al. Risk of type 2 diabetes among individuals with high and low glomerular filtration rates. *Diabetologia* 2009;52:1290-97.

## Supplementary Materials

307. Low S, Khoo KCJ, Wang J, et al. Development of a metabolic syndrome severity score and its association with incident diabetes in an Asian population—results from a longitudinal cohort in Singapore. *Endocrine* 2019;65:73-80.
308. Lu J, Li M, Xu Y, et al. Early life famine exposure, ideal cardiovascular health metrics, and risk of incident diabetes: Findings from the 4C study. *Diabetes care* 2020;43:1902-09.
309. Luft VC, Pereira M, Pankow JS, et al. Retinol binding protein 4 and incident diabetes the Atherosclerosis Risk in Communities Study (ARIC Study). *Revista brasileira de epidemiologia* 2013;16:388-97.
310. Luo J, Hodge A, Hendryx M, Byles JE. Age of obesity onset, cumulative obesity exposure over early adulthood and risk of type 2 diabetes. *Diabetologia* 2020;63:519-27.
311. Luo J, Manson JE, Weitlauf JC, et al. Personality traits and diabetes incidence among postmenopausal women. *Menopause* 2019;26:629-36.
312. Lv J, Fan B, Wei M, et al. Trajectories of early to mid-life adulthood BMI and incident diabetes: the China Health and Nutrition Survey. *BMJ Open Diabetes Research and Care* 2020;8:e000972.
313. Ma SH, Park B-Y, Yang JJ, et al. Interaction of body mass index and diabetes as modifiers of cardiovascular mortality in a cohort study. *Journal of Preventive Medicine and Public Health* 2012;45:394.
314. Mahendran Y, Vangipurapu J, Cederberg H, et al. Association of ketone body levels with hyperglycemia and type 2 diabetes in 9,398 Finnish men. *Diabetes* 2013;62:3618-26.
315. Mamtani M, Kulkarni H, Wong G, et al. Lipidomic risk score independently and cost-effectively predicts risk of future type 2 diabetes: results from diverse cohorts. *Lipids in health and disease* 2016;15:1-12.
316. Manini TM, LaMonte MJ, Seguin RA, et al. Modifying effect of obesity on the association between sitting and incident diabetes in post-menopausal women. *Obesity* 2014;22:1133-41.
317. Manschot A, van Oostrom S, Smit H, Verschuren W, Picavet H. Diagnosis of diabetes mellitus or cardiovascular disease and lifestyle changes—the Doetinchem Cohort Study. *Preventive medicine* 2014;59:42-46.
318. Manson JE, Ajani UA, Liu S, Nathan DM, Hennekens CH. A prospective study of cigarette smoking and the incidence of diabetes mellitus among US male physicians. *The American journal of medicine* 2000;109:538-42.
319. Manson JE, Rimm EB, Colditz GA, et al. Parity and incidence of non-insulin-dependent diabetes mellitus. *The American journal of medicine* 1992;93:13-18.
320. Manson JE, Stampfer M, Colditz G, et al. Physical activity and incidence of non-insulin-dependent diabetes mellitus in women. *The Lancet* 1991;338:774-78.
321. Martínez-González MÁ, De la Fuente-Arrillaga C, Nunez-Cordoba J, et al. Adherence to Mediterranean diet and risk of developing diabetes: prospective cohort study. *Bmj* 2008;336:1348-51.
322. Maskarinec G, Jacobs S, Amshoff Y, et al. Sleep duration and incidence of type 2 diabetes: the Multiethnic Cohort. *Sleep health* 2018;4:27-32.
323. McCance DR, Pettitt DJ, Hanson RL, et al. Birth weight and non-insulin dependent diabetes: thrifty genotype, thrifty phenotype, or surviving small baby genotype? *Bmj* 1994;308:942-45.
324. McDowell-Larsen S. FUELING THE BRAIN: FROM EXHAUSTED TO ENERGIZED.
325. McGrath R, Vincent BM, Al Snih S, Markides KS, Peterson MD. The association between muscle weakness and incident diabetes in older Mexican Americans. *Journal of the American Medical Directors Association* 2017;18:452. e7-52. e12.
326. McNaughton SA, Mishra GD, Brunner EJ. Dietary patterns, insulin resistance, and incidence of type 2 diabetes in the Whitehall II Study. *Diabetes care* 2008;31:1343-48.
327. Mcneely MJ, Boyko EJ, Weigle DS, et al. Association between baseline plasma leptin levels and subsequent development of diabetes in Japanese Americans. *Diabetes Care* 1999;22:65-70.

## Supplementary Materials

328. Meigs JB, Hu FB, Rifai N, Manson JE. Biomarkers of endothelial dysfunction and risk of type 2 diabetes mellitus. *Jama* 2004;291:1978-86.
329. Meisinger C, Döring A, Thorand B, Löwel H. Association of cigarette smoking and tar and nicotine intake with development of type 2 diabetes mellitus in men and women from the general population: the MONICA/KORA Augsburg Cohort Study. *Diabetologia* 2006;49:1770-76.
330. Meisinger C, Heier M, Löwel H. Sleep disturbance as a predictor of type 2 diabetes mellitus in men and women from the general population. *Diabetologia* 2005;48:235-41.
331. Meisinger C, Kandler U, Ladwig K-H. Living alone is associated with an increased risk of type 2 diabetes mellitus in men but not women from the general population: the MONICA/KORA Augsburg Cohort Study. *Psychosomatic Medicine* 2009;71:784-88.
332. Meisinger C, Löwel H, Heier M, et al. Serum  $\gamma$ -glutamyltransferase and risk of type 2 diabetes mellitus in men and women from the general population. *Journal of internal medicine* 2005;258:527-35.
333. Meisinger C, Löwel H, Thorand B, Döring A. Leisure time physical activity and the risk of type 2 diabetes in men and women from the general population. *Diabetologia* 2005;48:27-34.
334. Meyer KA, Kushi LH, Jacobs DR, Folsom AR. Dietary fat and incidence of type 2 diabetes in older Iowa women. *Diabetes care* 2001;24:1528-35.
335. Meyer KA, Kushi LH, Jacobs Jr DR, et al. Carbohydrates, dietary fiber, and incident type 2 diabetes in older women. *The American journal of clinical nutrition* 2000;71:921-30.
336. Mi B, Wu C, Gao X, et al. Long-term BMI change trajectories in Chinese adults and its association with the hazard of type 2 diabetes: evidence from a 20-year China Health and Nutrition Survey. *BMJ Open Diabetes Research and Care* 2020;8:e000879.
337. Mielke GI, Bailey TG, Burton NW, Brown WJ. Participation in sports/recreational activities and incidence of hypertension, diabetes, and obesity in adults. *Scandinavian Journal of Medicine & Science in Sports* 2020;30:2390-98.
338. Miyawaki A, Toyokawa S, Inoue K, Miyoshi Y, Kobayashi Y. Self-reported periodontitis and incident type 2 diabetes among male workers from a 5-year follow-up to MY health up study. *PLoS One* 2016;11:e0153464.
339. Modin D, Møgelvang R, Jørgensen PG, et al. Left ventricular concentric geometry predicts incident diabetes mellitus independent of established risk factors in the general population: the Copenhagen City Heart Study. *Cardiovascular diabetology* 2019;18:1-13.
340. Montonen J, Boeing H, Steffen A, et al. Body iron stores and risk of type 2 diabetes: results from the European Prospective Investigation into Cancer and Nutrition (EPIC)-Potsdam study. *Diabetologia* 2012;55:2613-21.
341. Montonen J, Knekt P, Järvinen R, Reunanen A. Dietary antioxidant intake and risk of type 2 diabetes. *Diabetes care* 2004;27:362-66.
342. Mora S, Kamstrup PR, Rifai N, et al. Lipoprotein (a) and risk of type 2 diabetes. *Clinical chemistry* 2010;56:1252-60.
343. Mora S, Otvos JD, Rosenson RS, et al. Lipoprotein particle size and concentration by nuclear magnetic resonance and incident type 2 diabetes in women. *Diabetes* 2010;59:1153-60.
344. Morikawa Y, Nakagawa H, Ishizaki M, et al. Ten-year follow-up study on the relation between the development of non-insulin-dependent diabetes mellitus and occupation. *American journal of industrial medicine* 1997;31:80-84.
345. Morimoto A, Ohno Y, Tatsumi Y, et al. Impact of smoking cessation on incidence of diabetes mellitus among overweight or normal-weight Japanese men. *diabetes research and clinical practice* 2012;96:407-13.
346. Morrison JA, Glueck CJ, Wang P. Childhood risk factors predict cardiovascular disease, impaired fasting glucose plus type 2 diabetes mellitus, and high blood pressure 26 years later at a mean age of 38 years: the Princeton–lipid research clinics follow-up study. *Metabolism* 2012;61:531-41.

## Supplementary Materials

347. Moslehi N, Shab-Bidar S, Mirmiran P, Sadeghi M, Azizi F. Associations between dairy products consumption and risk of type 2 diabetes: Tehran lipid and glucose study. *International journal of food sciences and nutrition* 2015;66:692-99.
348. Motta M, Bennati E, Cardillo E, et al. A combination of glycosylated hemoglobin, impaired fasting glucose and waist circumference is effective in screening for individuals at risk for future type 2 diabetes. *Archives of gerontology and geriatrics* 2010;50:105-09.
349. Mozaffarian D, Cao H, King IB, et al. Circulating palmitoleic acid and risk of metabolic abnormalities and new-onset diabetes. *The American journal of clinical nutrition* 2010;92:1350-58.
350. Mtintsilana A, Micklesfield LK, Chorell E, et al. Adiposity mediates the association between the dietary inflammatory index and markers of type 2 diabetes risk in middle-aged black South African women. *Nutrients* 2019;11:1246.
351. Mueller N, Mueller N, Odegaard A, et al. Higher parity is associated with an increased risk of type-II diabetes in Chinese women: the Singapore Chinese Health Study. *BJOG: An International Journal of Obstetrics & Gynaecology* 2013;120:1483-89.
352. Mueller NT, Koh W-P, Odegaard AO, et al. Asthma and the risk of type 2 diabetes in the Singapore Chinese Health Study. *Diabetes research and clinical practice* 2013;99:192-99.
353. Muka T, Aslanaj E, Avazverdi N, et al. Age at natural menopause and risk of type 2 diabetes: a prospective cohort study. *Diabetologia* 2017;60:1951-60.
354. Mullican DR, Lorenzo C, Haffner SM. Is prehypertension a risk factor for the development of type 2 diabetes? *Diabetes care* 2009;32:1870-72.
355. Nagaya T, Yoshida H, Takahashi H, Kawai M. Incidence of type-2 diabetes mellitus in a large population of Japanese male white-collar workers. *Diabetes research and clinical practice* 2006;74:169-74.
356. Nagaya T, Yoshida H, Takahashi H, Kawai M. Resting heart rate and blood pressure, independent of each other, proportionally raise the risk for type-2 diabetes mellitus. *International journal of epidemiology* 2010;39:215-22.
357. Nagayoshi M, Punjabi NM, Selvin E, et al. Obstructive sleep apnea and incident type 2 diabetes. *Sleep medicine* 2016;25:156-61.
358. Nakanishi N, Kashiwakura Y, Nishina K, et al. Metabolic syndrome and risk of isolated ST-T abnormalities and type 2 diabetes in Japanese male office workers. *Industrial health* 2005;43:269-76.
359. Nakanishi N, Nakamura K, Matsuo Y, Suzuki K, Tatara K. Cigarette smoking and risk for impaired fasting glucose and type 2 diabetes in middle-aged Japanese men. *Annals of internal medicine* 2000;133:183-91.
360. Nakanishi N, Nishina K, Li W, et al. Serum  $\gamma$ -glutamyltransferase and development of impaired fasting glucose or type 2 diabetes in middle-aged Japanese men. *Journal of internal medicine* 2003;254:287-95.
361. Nakanishi N, Nishina K, Okamoto M, et al. Clustering of components of the metabolic syndrome and risk for development of type 2 diabetes in Japanese male office workers. *Diabetes research and clinical practice* 2004;63:185-94.
362. Nakanishi N, Okamoto M, Yoshida H, et al. Serum uric acid and risk for development of hypertension and impaired fasting glucose or Type II diabetes in Japanese male office workers. *European journal of epidemiology* 2003;18:523-30.
363. Nakanishi N, Suzuki K, Tatara K. Alcohol consumption and risk for development of impaired fasting glucose or type 2 diabetes in middle-aged Japanese men. *Diabetes care* 2003;26:48-54.
364. Nakanishi S, Yamane K, Kamei N, Okubo M, Kohno N. Elevated C-reactive protein is a risk factor for the development of type 2 diabetes in Japanese Americans. *Diabetes care* 2003;26:2754-57.

## Supplementary Materials

365. Nan H, Qiao Q, Söderberg S, et al. Serum uric acid and incident diabetes in Mauritian Indian and Creole populations. *Diabetes research and clinical practice* 2008;80:321-27.
366. Nannipieri M, Gonzales C, Baldi S, et al. Liver enzymes, the metabolic syndrome, and incident diabetes: the Mexico City diabetes study. *Diabetes care* 2005;28:1757-62.
367. Nano J, Dhana K, Asllanaj E, et al. Trajectories of BMI before diagnosis of type 2 diabetes: the rotterdam study. *Obesity* 2020;28:1149-56.
368. Nanri A, Mizoue T, Takahashi Y, et al. Association of weight change in different periods of adulthood with risk of type 2 diabetes in Japanese men and women: the Japan Public Health Center-Based Prospective Study. *J Epidemiol Community Health* 2011;65:1104-10.
369. Napoli N, Schafer AL, Lui L-Y, et al. Serum 25-hydroxyvitamin D level and incident type 2 diabetes in older men, the Osteoporotic Fractures in Men (MrOS) study. *Bone* 2016;90:181-84.
370. Neamat-Allah J, Barrdahl M, Hüsing A, et al. Weight cycling and the risk of type 2 diabetes in the EPIC-Germany cohort. *Diabetologia* 2015;58:2718-25.
371. Nelson T, Biggs M, Kizer J, et al. Lipoprotein-associated phospholipase A2 (Lp-PLA2) and future risk of type 2 diabetes: results from the Cardiovascular Health Study. *The Journal of Clinical Endocrinology* 2012;97:1695-701.
372. Neville CE, Patterson CC, Linden GJ, et al. The relationship between adipokines and the onset of type 2 diabetes in middle-aged men: The PRIME study. *Diabetes research and clinical practice* 2016;120:24-30.
373. Nicholson WK, Asao K, Brancati F, et al. Parity and risk of type 2 diabetes: the Atherosclerosis Risk in Communities Study. *Diabetes care* 2006;29:2349-54.
374. Noale M, Maggi S, Marzari C, et al. Components of the metabolic syndrome and incidence of diabetes in elderly Italians: the Italian Longitudinal Study on Aging. *Atherosclerosis* 2006;187:385-92.
375. Noh J-W, Chang Y, Park M, Kwon YD, Ryu S. Self-rated health and the risk of incident type 2 diabetes mellitus: a cohort study. *Scientific reports* 2019;9:1-8.
376. Norris SA, Osmond C, Gigante D, et al. Size at birth, weight gain in infancy and childhood, and adult diabetes risk in five low-or middle-income country birth cohorts. *Diabetes care* 2012;35:72-79.
377. Noto D, Cefalu AB, Barbagallo CM, et al. Prediction of incident type 2 diabetes mellitus based on a twenty-year follow-up of the Ventimiglia heart study. *Acta diabetologica* 2012;49:145-51.
378. Nuyujukian DS, Beals J, Huang H, et al. Sleep duration and diabetes risk in American Indian and Alaska native participants of a lifestyle intervention project. *Sleep* 2016;39:1919-26.
379. Nyberg ST, Fransson EI, Heikkilä K, et al. Job strain as a risk factor for type 2 diabetes: a pooled analysis of 124,808 men and women. *Diabetes care* 2014;37:2268-75.
380. O'Connor LE, Hu EA, Steffen LM, Selvin E, Rebholz CM. Adherence to a Mediterranean-style eating pattern and risk of diabetes in a US prospective cohort study. *Nutrition & diabetes* 2020;10:1-9.
381. Oba S, Nagata C, Nakamura K, et al. Consumption of coffee, green tea, oolong tea, black tea, chocolate snacks and the caffeine content in relation to risk of diabetes in Japanese men and women. *British Journal of Nutrition* 2010;103:453-59.
382. Oda E. Low vital capacity was associated with incident diabetes in a Japanese health screening population in whom obesity was not prevalent. *Canadian journal of diabetes* 2016;40:143-48.
383. Odegaard AO, Jacobs DR, Sanchez OA, et al. Oxidative stress, inflammation, endothelial dysfunction and incidence of type 2 diabetes. *Cardiovascular diabetology* 2016;15:1-12.
384. Oh TJ, Moon JH, Choi SH, et al. Body-weight fluctuation and incident diabetes mellitus, cardiovascular disease, and mortality: a 16-year prospective cohort study. *The Journal of Clinical Endocrinology & Metabolism* 2019;104:639-46.
385. Öhlund M, Fall T, Ström Holst B, et al. Incidence of diabetes mellitus in insured Swedish cats in relation to age, breed and sex. *Journal of veterinary internal medicine* 2015;29:1342-47.



## Supplementary Materials

386. Ohnishi H, Saitoh S, Akasaka H, et al. Impact of longitudinal status change in metabolic syndrome defined by two different criteria on new onset of type 2 diabetes in a general Japanese population: the Tanno–Sobetsu Study. *Diabetology & metabolic syndrome* 2016;8:1-9.
387. Okada K, Hayashi T, Tsumura K, et al. Leisure-time physical activity at weekends and the risk of Type 2 diabetes mellitus in Japanese men: the Osaka Health Survey. *Diabetic Medicine* 2000;17:53-58.
388. Olson NC, Doyle MF, Sitlani CM, et al. Associations of innate and adaptive immune cell subsets with incident type 2 diabetes risk: the MESA study. *The Journal of Clinical Endocrinology & Metabolism* 2020;105:e848-e57.
389. Olsson GM, Hulting A-L, Montgomery SM. Cognitive function in children and subsequent type 2 diabetes. *Diabetes Care* 2008;31:514-16.
390. Olsson K, Ramne S, González-Padilla E, Ericson U, Sonestedt E. Associations of carbohydrates and carbohydrate-rich foods with incidence of type 2 diabetes. *British Journal of Nutrition* 2020:1-27.
391. Onat A, Ademoğlu E, Can G, et al. Lower circulating migration inhibitory factor protein is associated with metabolic syndrome and diabetes. *Biomarkers in medicine* 2017;11:557-68.
392. Onat A, Hergenc G, Sari I, Karabulut A, Can G. Elevated LDL-Cholesterol Level Predicts Diabetes in Centrally Obese Women but Not Men Relative Roles of Insulin Resistance and Central Obesity. *Circulation journal* 2007;71:1463-67.
393. Oya J, Nakagami T, Kurita M, et al. Association of birthweight with diabetes and insulin sensitivity or secretion in the Japanese general population. *Journal of diabetes investigation* 2015;6:430-35.
394. Pan A, Lucas M, Sun Q, et al. Bidirectional association between depression and type 2 diabetes mellitus in women. *Archives of internal medicine* 2010;170:1884-91.
395. Pan A, Teng GG, Yuan J-M, Koh W-P. Bidirectional association between diabetes and gout: the Singapore Chinese Health Study. *Scientific reports* 2016;6:1-8.
396. Pankow J, Decker P, Berardi C, et al. Circulating cellular adhesion molecules and risk of diabetes: the Multi-Ethnic Study of Atherosclerosis (MESA). *Diabetic Medicine* 2016;33:985-91.
397. Pankow JS, Duncan BB, Schmidt MI, et al. Fasting plasma free fatty acids and risk of type 2 diabetes: the atherosclerosis risk in communities study. *Diabetes care* 2004;27:77-82.
398. Papier K, D'Este C, Bain C, et al. Consumption of sugar-sweetened beverages and type 2 diabetes incidence in Thai adults: results from an 8-year prospective study. *Nutrition & diabetes* 2017;7:e283-e83.
399. Park B, Lee HS, Lee Y-J. Triglyceride glucose (TyG) index as a predictor of incident type 2 diabetes among nonobese adults: a 12-year longitudinal study of the Korean Genome and Epidemiology Study cohort. *Translational Research* 2021;228:42-51.
400. Park J-M, Lee HS, Park J-Y, Jung D-H, Lee J-W. White Blood Cell Count as a Predictor of Incident Type 2 Diabetes Mellitus Among Non-Obese Adults: A Longitudinal 10-Year Analysis of the Korean Genome and Epidemiology Study. *Journal of Inflammation Research* 2021;14:1235.
401. Park S, Kim B, Kang S. Interaction effect of PGC-1 $\alpha$  rs10517030 variants and energy intake in the risk of type 2 diabetes in middle-aged adults. *European journal of clinical nutrition* 2017;71:1442-48.
402. Park S, Liu M, Kang S. Alcohol intake interacts with CDKAL1, HHEX, and OAS3 genetic variants, associated with the risk of type 2 diabetes by lowering insulin secretion in Korean adults. *Alcoholism: Clinical and Experimental Research* 2018;42:2326-36.
403. Paynter NP, Yeh H-C, Voutilainen S, et al. Coffee and sweetened beverage consumption and the risk of type 2 diabetes mellitus: the atherosclerosis risk in communities study. *American journal of epidemiology* 2006;164:1075-84.
404. Petersen CB, Bauman A, Tolstrup JS. Total sitting time and the risk of incident diabetes in Danish adults (the DANHES cohort) over 5 years: a prospective study. *British journal of sports medicine* 2016;50:1382-87.

## Supplementary Materials

405. Pierce M, Kuh D, Hardy R. The role of BMI across the life course in the relationship between age at menarche and diabetes, in a British Birth Cohort. *Diabetic Medicine* 2012;29:600-03.
406. Podmore C, Meidtner K, Schulze MB, et al. Association of multiple biomarkers of iron metabolism and type 2 diabetes: the EPIC-InterAct study. *Diabetes care* 2016;39:572-81.
407. Pougnet R, Uguen M, Verdier G, et al. Predicted nine-year risk of diabetes among professional divers: a prospective study. *International maritime health* 2015;66:87-92.
408. Poulsen P, Grunnet LG, Pilgaard K, et al. Increased risk of type 2 diabetes in elderly twins. *Diabetes* 2009;58:1350-55.
409. Power C, Pereira SMP, Law C, Ki M. Obesity and risk factors for cardiovascular disease and type 2 diabetes: investigating the role of physical activity and sedentary behaviour in mid-life in the 1958 British cohort. *Atherosclerosis* 2014;233:363-69.
410. Pradhan AD, Manson JE, Meigs JB, et al. Insulin, proinsulin, proinsulin: insulin ratio, and the risk of developing type 2 diabetes mellitus in women. *The American journal of medicine* 2003;114:438-44.
411. Qi L, Zhang C, Greenberg A, Hu FB. Common variations in perilipin gene, central obesity, and risk of type 2 diabetes in US women. *Obesity* 2008;16:1061-65.
412. Qu X, Wang H, Zhou S, et al. Association between age at first childbirth and type 2 diabetes in Chinese women. *Journal of diabetes investigation* 2020;11:223-31.
413. Rajpathak SN, Wylie-Rosett J, Gunter M, et al. Biomarkers of body iron stores and risk of developing type 2 diabetes. *Diabetes, obesity and metabolism* 2009;11:472-79.
414. Ram J, Selvam S, Snehalatha C, et al. Improvement in diet habits, independent of physical activity helps to reduce incident diabetes among prediabetic Asian Indian men. *Diabetes research and clinical practice* 2014;106:491-95.
415. Ram J, Snehalatha C, Nanditha A, et al. Hypertriglyceridaemic waist phenotype as a simple predictive marker of incident diabetes in Asian-Indian men with prediabetes. *Diabetic medicine* 2014;31:1542-49.
416. Rasouli B, Andersson T, Carlsson P-O, et al. Alcohol and the risk for latent autoimmune diabetes in adults: results based on Swedish ESTRID study. *European journal of endocrinology* 2014;171:535.
417. Rathmann W, Kowall B, Heier M, et al. Prediction models for incident type 2 diabetes mellitus in the older population: KORA S4/F4 cohort study. *Diabetic medicine* 2010;27:1116-23.
418. Ray JG, Mohllajee AP, van Dam RM, Michels KB. Breast size and risk of type 2 diabetes mellitus. *Cmaj* 2008;178:289-95.
419. Reincke M, Meisinger C, Holle R, et al. Is primary aldosteronism associated with diabetes mellitus? Results of the German Conn's Registry. *Hormone and Metabolic Research* 2010;42:435-39.
420. Reis JP, Hankinson AL, Loria CM, et al. Duration of abdominal obesity beginning in young adulthood and incident diabetes through middle age: the CARDIA study. *Diabetes care* 2013;36:1241-47.
421. Rhee E-J, Cho J-H, Kwon H, et al. Relation between baseline height and new diabetes development: a nationwide population-based study. *Diabetes & metabolism journal* 2019;43:794.
422. Rho YH, Lu N, Peloquin CE, et al. Independent impact of gout on the risk of diabetes mellitus among women and men: a population-based, BMI-matched cohort study. *Annals of the rheumatic diseases* 2016;75:91-95.
423. Rich-Edwards JW, Colditz GA, Stampfer MJ, et al. Birthweight and the risk for type 2 diabetes mellitus in adult women. *Annals of internal medicine* 1999;130:278-84.
424. Rimm EB, Chan J, Stampfer MJ, Colditz GA, Willett WC. Prospective study of cigarette smoking, alcohol use, and the risk of diabetes in men. *Bmj* 1995;310:555-59.
425. Rimm EB, Manson JE, Stampfer MJ, et al. Cigarette smoking and the risk of diabetes in women. *American Journal of Public Health* 1993;83:211-14.

## Supplementary Materials

426. Robinson JG, Manson JE, Larson J, et al. Lack of association between 25 (OH) D levels and incident type 2 diabetes in older women. *Diabetes care* 2011;34:628-34.
427. Rolando L, Byrne DW, McGown PW, et al. Health risk factor modification predicts incidence of diabetes in an employee population: results of an 8-year longitudinal cohort study. *Journal of occupational and environmental medicine/American College of Occupational and Environmental Medicine* 2013;55:410.
428. Rosengren A, Dotevall A, Wilhelmsen L, Thelle D, Johansson S. Coffee and incidence of diabetes in Swedish women: a prospective 18-year follow-up study. *Journal of internal medicine* 2004;255:89-95.
429. Ruiz PL, Stene LC, Bakken IJ, et al. Decreasing incidence of pharmacologically and non-pharmacologically treated type 2 diabetes in Norway: a nationwide study. *Diabetologia* 2018;61:2310-18.
430. Ruiz-Estigarribia L, Martínez-González MA, Díaz-Gutiérrez J, et al. Lifestyle behavior and the risk of type 2 diabetes in the Seguimiento Universidad de Navarra (SUN) cohort. *Nutrition, Metabolism and Cardiovascular Diseases* 2020;30:1355-64.
431. Ruiz-Narváez EA, Palmer JR, Gerlovin H, et al. Birth weight and risk of type 2 diabetes in the black women's health study: does adult BMI play a mediating role? *Diabetes care* 2014;37:2572-78.
432. Ryckman KK, Rillamas-Sun E, Spracklen CN, et al. Ethnic differences in the relationship between birth weight and type 2 diabetes mellitus in postmenopausal women. *Diabetes & metabolism* 2014;40:379-85.
433. Sakurai M, Nakamura K, Miura K, et al. Dietary carbohydrate intake, presence of obesity and the incident risk of type 2 diabetes in Japanese men. *Journal of diabetes investigation* 2016;7:343-51.
434. Salazar-Martinez E, Willett WC, Ascherio A, et al. Coffee consumption and risk for type 2 diabetes mellitus. *Annals of internal medicine* 2004;140:1-8.
435. Sandeep S, Velmurugan K, Deepa R, Mohan V. Serum visfatin in relation to visceral fat, obesity, and type 2 diabetes mellitus in Asian Indians. *Metabolism* 2007;56:565-70.
436. Sawada SS, Gando Y, Kawakami R, et al. Combined aerobic and resistance training, and incidence of diabetes: A retrospective cohort study in Japanese older women. *Journal of diabetes investigation* 2019;10:997-1003.
437. Saydah SH, Brancati FL, Golden SH, Fradkin J, Harris MI. Depressive symptoms and the risk of type 2 diabetes mellitus in a US sample. *Diabetes/metabolism research and reviews* 2003;19:202-08.
438. Schafer A, Napoli N, Lui L, et al. Serum 25-hydroxyvitamin D concentration does not independently predict incident diabetes in older women. *Diabetic Medicine* 2014;31:564-69.
439. Schipf S, Haring R, Friedrich N, et al. Low total testosterone is associated with increased risk of incident type 2 diabetes mellitus in men: results from the Study of Health in Pomerania (SHIP). *The Aging Male* 2011;14:168-75.
440. Schmid D, Willett WC, Forman MR, Ding M, Michels KB. TV viewing during childhood and adult type 2 diabetes mellitus. *Scientific reports* 2021;11:1-9.
441. Schmidt M, Duncan B, Vigo A, et al. Leptin and incident type 2 diabetes: risk or protection? *Diabetologia* 2006;49:2086-96.
442. Schmidt MI, Watson RL, Duncan BB, et al. Clustering of dyslipidemia, hyperuricemia, diabetes, and hypertension and its association with fasting insulin and central and overall obesity in a general population. *Metabolism* 1996;45:699-706.
443. Schulze M, Fritsche A, Boeing H, Joost H. Fasting plasma glucose and Type 2 diabetes risk: a non-linear relationship. *Diabetic medicine* 2010;27:473-76.
444. Schulze MB, Schulz M, Heidemann C, et al. Carbohydrate intake and incidence of type 2 diabetes in the European Prospective Investigation into Cancer and Nutrition (EPIC)-Potsdam Study. *British journal of nutrition* 2008;99:1107-16.

## Supplementary Materials

445. Schwarz EB, Brown JS, Creasman JM, et al. Lactation and maternal risk of type 2 diabetes: a population-based study. *The American journal of medicine* 2010;123:863. e1-63. e6.
446. Seki A, Takigawa T, Ito T, et al. Obesity and the risk of diabetes mellitus in middle-aged Japanese men. *Acta Medica Okayama* 2002;56:255-60.
447. Shamshirgaran SM, Jorm L, Bambrick H, Hennessy A. Independent roles of country of birth and socioeconomic status in the occurrence of type 2 diabetes. *BMC public health* 2013;13:1-6.
448. Shankar A, Sabanayagam C, Kalidindi S. Serum 25-hydroxyvitamin d levels and prediabetes among subjects free of diabetes. *Diabetes care* 2011;34:1114-19.
449. Shen J, Fang Y, Zhu H, Ge W. Plasma interleukin-22 levels are associated with prediabetes and type 2 diabetes in the Han Chinese population. *Journal of diabetes investigation* 2018;9:33-38.
450. Shibata M, Kihara Y, Taguchi M, Tashiro M, Otsuki M. Nonalcoholic fatty liver disease is a risk factor for type 2 diabetes in middle-aged Japanese men. *Diabetes care* 2007;30:2940-44.
451. Shimizu Si, Kawata Y, Kawakami N, Aoyama H. Effects of changes in obesity and exercise on the development of diabetes and return to normal fasting plasma glucose levels at one-year follow-up in middle-aged subjects with impaired fasting glucose. *Environmental health and preventive medicine* 2001;6:127-31.
452. Sieverdes JC, Sui X, Lee D-c, et al. Physical activity, cardiorespiratory fitness and the incidence of type 2 diabetes in a prospective study of men. *British journal of sports medicine* 2010;44:238-44.
453. Silva-Costa A, Rotenberg L, Toivanen S, et al. Lifetime night work exposure and the risk of type 2 diabetes: results from the longitudinal study of adult health (ELSA-Brasil). *Chronobiology International* 2020;37:1344-47.
454. Sjöström CD, Peltonen M, Wedel H, Sjöström L. Differentiated long-term effects of intentional weight loss on diabetes and hypertension. *Hypertension* 2000;36:20-25.
455. Sluijs I, Beulens JW, Van Der A DL, et al. Plasma uric acid is associated with increased risk of type 2 diabetes independent of diet and metabolic risk factors. *The Journal of nutrition* 2013;143:80-85.
456. Sluik D, Jankovic N, Hughes M, et al. Alcoholic beverage preference and diabetes incidence across Europe: the Consortium on Health and Ageing Network of Cohorts in Europe and the United States (CHANCES) project. *European journal of clinical nutrition* 2017;71:659-68.
457. Smith L, Hamer M. Television viewing time and risk of incident diabetes mellitus: the English Longitudinal Study of Ageing. *Diabetic Medicine* 2014;31:1572-76.
458. Snijder MB, Heine RJ, Seidell JC, et al. Associations of adiponectin levels with incident impaired glucose metabolism and type 2 diabetes in older men and women: the hoorn study. *Diabetes care* 2006;29:2498-503.
459. Soedamah-Muthu SS, Masset G, Verberne L, Geleijnse JM, Brunner EJ. Consumption of dairy products and associations with incident diabetes, CHD and mortality in the Whitehall II study. *British journal of nutrition* 2013;109:718-26.
460. Son JW, Lee SS, Kim SR, et al. Low muscle mass and risk of type 2 diabetes in middle-aged and older adults: findings from the KoGES. *Diabetologia* 2017;60:865-72.
461. Song Y, Klevak A, Manson JE, Buring JE, Liu S. Asthma, chronic obstructive pulmonary disease, and type 2 diabetes in the Women's Health Study. *Diabetes research and clinical practice* 2010;90:365-71.
462. Sørensen M, Andersen ZJ, Nordsborg RB, et al. Long-term exposure to road traffic noise and incident diabetes: a cohort study. *Environmental health perspectives* 2013;121:217-22.
463. Sosenko JM, Hu D, Welty T, et al. Albuminuria in recent-onset type 2 diabetes: the Strong Heart Study. *Diabetes care* 2002;25:1078-84.
464. Spranger J, Kroke A, Möhlig M, et al. Inflammatory cytokines and the risk to develop type 2 diabetes: results of the prospective population-based European Prospective Investigation into Cancer and Nutrition (EPIC)-Potsdam Study. *Diabetes* 2003;52:812-17.

## Supplementary Materials

465. Stahl CH, Novak M, Lappas G, et al. High-normal blood pressure and long-term risk of type 2 diabetes: 35-year prospective population based cohort study of men. *BMC cardiovascular disorders* 2012;12:1-8.
466. Strausz S, Havulinna AS, Tuomi T, et al. Obstructive sleep apnoea and the risk for coronary heart disease and type 2 diabetes: a longitudinal population-based study in Finland. *BMJ open* 2018;8:e022752.
467. Stringhini S, Tabak AG, Akbaraly TN, et al. Contribution of modifiable risk factors to social inequalities in type 2 diabetes: prospective Whitehall II cohort study. *Bmj* 2012;345.
468. Sujana C, Seissler J, Jordan J, et al. Associations of cardiac stress biomarkers with incident type 2 diabetes and changes in glucose metabolism: KORA F4/FF4 study. *Cardiovascular diabetology* 2020;19:1-12.
469. Sun L, Zong G, Pan A, et al. Elevated plasma ferritin is associated with increased incidence of type 2 diabetes in middle-aged and elderly Chinese adults. *The Journal of nutrition* 2013;143:1459-65.
470. Sun Q, van Dam RM, Meigs JB, et al. Leptin and soluble leptin receptor levels in plasma and risk of type 2 diabetes in US women: a prospective study. *Diabetes* 2010;59:611-18.
471. Sung K-C, Kim SH. Interrelationship between fatty liver and insulin resistance in the development of type 2 diabetes. *The Journal of Clinical Endocrinology & Metabolism* 2011;96:1093-97.
472. Sung K-C, Lee MY, Kim Y-H, et al. Obesity and incidence of diabetes: Effect of absence of metabolic syndrome, insulin resistance, inflammation and fatty liver. *Atherosclerosis* 2018;275:50-57.
473. Sung K-c, Ryu S, Sung J-w, et al. Inflammation in the prediction of type 2 diabetes and hypertension in healthy adults. *Archives of medical research* 2017;48:535-45.
474. Sung K-C, Seo D-C, Lee S-J, et al. Non alcoholic fatty liver disease and risk of incident diabetes in subjects who are not obese. *Nutrition, Metabolism and Cardiovascular Diseases* 2019;29:489-95.
475. Tabak A, Brunner E, Miller M, et al. Low serum adiponectin predicts 10-year risk of type 2 diabetes and HbA1c independently of obesity, lipids and inflammation—Whitehall II study. *Hormone and metabolic research= Hormon-und Stoffwechselforschung= Hormones et metabolisme* 2009;41:626.
476. Tabak A, Kivimäki M, Brunner E, et al. Changes in C-reactive protein levels before type 2 diabetes and cardiovascular death: the Whitehall II study. *European journal of endocrinology* 2010;163:89-95.
477. Tait CA, L'Abbé MR, Smith PM, et al. Adherence to predefined dietary patterns and risk of developing type 2 diabetes in the Canadian adult population. *Canadian journal of diabetes* 2020;44:175-83. e2.
478. Takeuchi M, Imano H, Muraki I, et al. Serum creatinine levels and risk of incident type 2 diabetes mellitus or dysglycemia in middle-aged Japanese men: a retrospective cohort study. *BMJ Open Diabetes Research and Care* 2018;6.
479. Taniguchi Y, Hayashi T, Tsumura K, et al. Serum uric acid and the risk for hypertension and Type 2 diabetes in Japanese men: The Osaka Health Survey. *Journal of hypertension* 2001;19:1209-15.
480. Tapp RJ, O'Neil A, Shaw JE, et al. Is there a link between components of health-related functioning and incident impaired glucose metabolism and type 2 diabetes?: the Australian Diabetes Obesity and Lifestyle (AusDiab) study. *Diabetes Care* 2010;33:757-62.
481. Tatsumi Y, Morimoto A, Miyamatsu N, et al. Effect of body mass index on insulin secretion or sensitivity and diabetes. *American journal of preventive medicine* 2015;48:128-35.
482. Tatsumi Y, Watanabe M, Nakai M, et al. Changes in waist circumference and the incidence of type 2 diabetes in community-dwelling men and women: The Suita Study. *Journal of epidemiology* 2015;JE20140160.
483. Teymoori F, Farhadnejad H, Moslehi N, et al. The association of dietary insulin and glycemic indices with the risk of type 2 diabetes. *Clinical Nutrition* 2021;40:2138-44.

## Supplementary Materials

484. Then C, Gar C, Thorand B, et al. Proinsulin to insulin ratio is associated with incident type 2 diabetes but not with vascular complications in the KORA F4/FF4 study. *BMJ Open Diabetes Research and Care* 2020;8:e001425.
485. Then C, Then H, Meisinger C, et al. Serum uromodulin is associated with but does not predict type 2 diabetes in elderly KORA F4/FF4 study participants. *The Journal of Clinical Endocrinology & Metabolism* 2019;104:3795-802.
486. Thorand B, Kolb H, Baumert J, et al. Elevated levels of interleukin-18 predict the development of type 2 diabetes: results from the MONICA/KORA Augsburg Study, 1984–2002. *Diabetes* 2005;54:2932-38.
487. Tillin T, Hughes AD, Godsland IF, et al. Insulin resistance and truncal obesity as important determinants of the greater incidence of diabetes in Indian Asians and African Caribbeans compared with Europeans: the Southall And Brent REvisited (SABRE) cohort. *Diabetes care* 2013;36:383-93.
488. Tinker LF, Sarto GE, Howard BV, et al. Biomarker-calibrated dietary energy and protein intake associations with diabetes risk among postmenopausal women from the Women's Health Initiative. *The American journal of clinical nutrition* 2011;94:1600-06.
489. Tirosh A, Shai I, Tekes-Manova D, et al. Normal fasting plasma glucose levels and type 2 diabetes in young men. *New England Journal of Medicine* 2005;353:1454-62.
490. Tseng C-H, Tseng C-P, Chong C-K, et al. Increasing incidence of diagnosed type 2 diabetes in Taiwan: analysis of data from a national cohort. *Diabetologia* 2006;49:1755-60.
491. Tsumura K, Hayashi T, Suematsu C, et al. Daily alcohol consumption and the risk of type 2 diabetes in Japanese men: the Osaka Health Survey. *Diabetes care* 1999;22:1432-37.
492. Tuomilehto J, Hu G, Bidel S, Lindström J, Jousilahti P. Coffee consumption and risk of type 2 diabetes mellitus among middle-aged Finnish men and women. *Jama* 2004;291:1213-19.
493. Twig G, Shina A, Afek A, et al. Sleep quality and risk of diabetes and coronary artery disease among young men. *Acta diabetologica* 2016;53:261-70.
494. Uchimoto S, Tsumura K, Hayashi T, et al. Impact of cigarette smoking on the incidence of Type 2 diabetes mellitus in middle-aged Japanese men: the Osaka Health Survey. *Diabetic medicine* 1999;16:951-55.
495. Uemura M, Yatsuya H, Hilawe EH, et al. Breakfast skipping is positively associated with incidence of type 2 diabetes mellitus: evidence from the Aichi Workers' Cohort Study. *Journal of epidemiology* 2015;25:351-58.
496. UKICUem-eca. Physical activity reduces the risk of incident type 2 diabetes in general and in abdominally lean and obese men and women: the EPIC-InterAct Study. *Diabetologia* 2012;55:1944-52.
497. Van Dam RM, Feskens EJ. Coffee consumption and risk of type 2 diabetes mellitus. *The Lancet* 2002;360:1477-78.
498. Van Dam RM, Willett WC, Manson JE, Hu FB. Coffee, caffeine, and risk of type 2 diabetes: a prospective cohort study in younger and middle-aged US women. *Diabetes care* 2006;29:398-403.
499. Van Dam RM, Willett WC, Rimm EB, Stampfer MJ, Hu FB. Dietary fat and meat intake in relation to risk of type 2 diabetes in men. *Diabetes care* 2002;25:417-24.
500. Van Dieren S, Uiterwaal C, Van der Schouw Y, et al. Coffee and tea consumption and risk of type 2 diabetes. *Diabetologia* 2009;52:2561-69.
501. van Exel E, Gussekloo J, de Craen AJ, et al. Low production capacity of interleukin-10 associates with the metabolic syndrome and type 2 diabetes: the Leiden 85-Plus Study. *Diabetes* 2002;51:1088-92.
502. Vang A, Singh PN, Lee JW, Haddad EH, Brinegar CH. Meats, processed meats, obesity, weight gain and occurrence of diabetes among adults: findings from Adventist Health Studies. *Annals of Nutrition and Metabolism* 2008;52:96-104.

## Supplementary Materials

503. Vanhala P, Vanhala M, Kumpusalo E, Keinanen-Kiukaanniemi S. The quantitative insulin sensitivity check index QUICKI predicts the onset of type 2 diabetes better than fasting plasma insulin in obese subjects: a 5-year follow-up study. *The Journal of Clinical Endocrinology & Metabolism* 2002;87:5834-37.
504. van't Riet E, Dekker JM, Sun Q, et al. Role of adiposity and lifestyle in the relationship between family history of diabetes and 20-year incidence of type 2 diabetes in US women. *Diabetes care* 2010;33:763-67.
505. Veronese N, Sergi G, De Rui M, et al. Serum 25-hydroxyvitamin D and incidence of diabetes in elderly people: the PRO. VA study. *The Journal of Clinical Endocrinology & Metabolism* 2014;99:2351-58.
506. Vgontzas AN, Liao D, Pejovic S, et al. Insomnia with objective short sleep duration is associated with type 2 diabetes: a population-based study. *Diabetes care* 2009;32:1980-85.
507. Vikan T, Schirmer H, Njølstad I, Svartberg J. Low testosterone and sex hormone-binding globulin levels and high estradiol levels are independent predictors of type 2 diabetes in men. *European journal of endocrinology* 2010;162:747.
508. Villegas R, Shu XO, Gao Y-T, et al. The association of meat intake and the risk of type 2 diabetes may be modified by body weight. *International journal of medical sciences* 2006;3:152.
509. Vimalananda VG, Palmer JR, Gerlovin H, et al. Night-shift work and incident diabetes among African-American women. *Diabetologia* 2015;58:699-706.
510. Vimalananda VG, Palmer JR, Gerlovin H, et al. Depressive symptoms, antidepressant use, and the incidence of diabetes in the Black Women's Health Study. *Diabetes Care* 2014;37:2211-17.
511. Vujosevic S, Borozan S, Radojevic N, Aligrudic S, Bozovic D. Relationship between 25-hydroxyvitamin D and newly diagnosed type 2 diabetes mellitus in postmenopausal women with osteoporosis. *Medical Principles and Practice* 2014;23:229-33.
512. Wakabayashi I. Influence of age and gender on lipid accumulation product and its relation to diabetes mellitus in Japanese. *Clinica Chimica Acta* 2014;431:221-26.
513. Walford GA, Ma Y, Clish C, et al. Metabolite profiles of diabetes incidence and intervention response in the diabetes prevention program. *Diabetes* 2016;65:1424-33.
514. Waller K, Kaprio J, Lehtovirta M, et al. Leisure-time physical activity and type 2 diabetes during a 28 year follow-up in twins. *Diabetologia* 2010;53:2531-37.
515. Walther D, Curjuric I, Dratva J, et al. Hypertension, diabetes and lifestyle in the long-term—Results from a swiss population-based cohort. *Preventive medicine* 2017;97:56-61.
516. Wang C, Yatsuya H, Tamakoshi K, et al. Association between parental history of diabetes and the incidence of type 2 diabetes mellitus differs according to the sex of the parent and offspring's body weight: A finding from a Japanese worksite-based cohort study. *Preventive medicine* 2015;81:49-53.
517. Wang C, Yatsuya H, Tamakoshi K, et al. Positive association between high-sensitivity C-reactive protein and incidence of type 2 diabetes mellitus in Japanese workers: 6-year follow-up. *Diabetes/metabolism research and reviews* 2013;29:398-405.
518. Wang H, Chen L, Shen D, et al. Association of daytime napping in relation to risk of diabetes: evidence from a prospective study in Zhejiang, China. *Nutrition & metabolism* 2021;18:1-8.
519. Wang J-j, Qiao Q, Miettinen ME, et al. The metabolic syndrome defined by factor analysis and incident type 2 diabetes in a Chinese population with high postprandial glucose. *Diabetes care* 2004;27:2429-37.
520. Wang L, Liu S, Manson JE, et al. The consumption of lycopene and tomato-based food products is not associated with the risk of type 2 diabetes in women. *The Journal of nutrition* 2006;136:620-25.
521. Wang M, Jin Y, Dai T, et al. Association between ambient particulate matter (PM10) and incidence of diabetes in northwest of China: A prospective cohort study. *Ecotoxicology and Environmental Safety* 2020;202:110880.

## Supplementary Materials

522. Wang T, Lu J, Shi L, et al. Association of insulin resistance and  $\beta$ -cell dysfunction with incident diabetes among adults in China: a nationwide, population-based, prospective cohort study. *The Lancet Diabetes & Endocrinology* 2020;8:115-24.
523. Wang TJ, Larson MG, Vasani RS, et al. Metabolite profiles and the risk of developing diabetes. *Nature Medicine* 2011;17:448-53.
524. Wang TT, Bo L, Cui WX, et al. Clustering of Cardiovascular Risk Factors and Diabetes: A Prospective Cohort Study on the Inner Mongolian Population in China. *Biomedical and Environmental Sciences* 2018;31:749-56.
525. Association of muscular strength and incidence of type 2 diabetes. *Mayo Clinic Proceedings*; 2019. Elsevier.
526. Wang Z, Hoy WE. C-reactive protein and the risk of developing type 2 diabetes in Aboriginal Australians. *Diabetes Research and Clinical Practice* 2007;76:37-43.
527. Wannamethee S, Shaper A, Perry I, Alberti K. Alcohol consumption and the incidence of type II diabetes. *Journal of Epidemiology & Community Health* 2002;56:542-48.
528. Wannamethee SG, Lowe GD, Rumley A, et al. Adipokines and risk of type 2 diabetes in older men. *Diabetes Care* 2007;30:1200-05.
529. Wannamethee SG, Welsh P, Papacosta O, et al. C-peptide, insulin resistance, and risk of incident diabetes in older men. *The Journal of Clinical Endocrinology & Metabolism* 2015;100:3332-39.
530. Wei J-N, Sung F-C, Li C-Y, et al. Low birth weight and high birth weight infants are both at an increased risk to have type 2 diabetes among schoolchildren in Taiwan. *Diabetes Care* 2003;26:343-48.
531. Wei M, Gibbons LW, Mitchell TL, Kampert JB, Blair SN. Alcohol intake and incidence of type 2 diabetes in men. *Diabetes Care* 2000;23:18-22.
532. Weinmayr G, Hennig F, Fuks K, et al. Long-term exposure to fine particulate matter and incidence of type 2 diabetes mellitus in a cohort study: effects of total and traffic-specific air pollution. *Environmental Health* 2015;14:1-8.
533. Welsh P, Murray HM, Buckley BM, et al. Leptin predicts diabetes but not cardiovascular disease: results from a large prospective study in an elderly population. *Diabetes Care* 2009;32:308-10.
534. Wennberg P, Rolandsson O, Spijkerman AM, et al. Self-rated health and type 2 diabetes risk in the European Prospective Investigation into Cancer and Nutrition-InterAct study: a case-cohort study. *BMJ Open* 2013;3.
535. Williams ED, Tapp RJ, Magliano D, et al. Health behaviours, socioeconomic status and diabetes incidence: the Australian Diabetes Obesity and Lifestyle Study (AusDiab). *Diabetologia* 2010;53:2538-45.
536. Wilson PW, D'Agostino RB, Parise H, Sullivan L, Meigs JB. Metabolic syndrome as a precursor of cardiovascular disease and type 2 diabetes mellitus. *Circulation* 2005;112:3066-72.
537. Winkler C, Bonifacio E, Grallert H, et al. BMI at age 8 years is influenced by the type 2 diabetes susceptibility genes HHEX-IDE and CDKAL1. *Diabetes* 2010;59:2063-67.
538. Wu IH, Heredia N, Dong Q, et al. Sleep duration and type 2 diabetes risk: A prospective study in a population-based Mexican American cohort. *Sleep Health* 2021;7:168-76.
539. Wu W-C, Wei J-N, Chen S-C, et al. Progression of insulin resistance: A link between risk factors and the incidence of diabetes. *Diabetes Research and Clinical Practice* 2020;161:108050.
540. Xia Q, Cai H, Xiang YB, et al. Prospective cohort studies of birth weight and risk of obesity, diabetes, and hypertension in adulthood among the Chinese population: 出生体重与成年期肥胖, 2型糖尿病及高血压风险关联的前瞻性队列研究. *Journal of Diabetes* 2019;11:55-64.
541. Xu F, Wang Y, Ware RS, et al. Physical activity, family history of diabetes and risk of developing hyperglycaemia and diabetes among adults in Mainland China. *Diabetic Medicine* 2012;29:593-99.
542. Xu L, Jiang C, Schooling C, et al. Liver enzymes and incident diabetes in China: a prospective analysis of 10 764 participants in the Guangzhou Biobank Cohort Study. *J Epidemiol Community Health* 2015;69:1040-44.



## Supplementary Materials

543. Yadav D, Choi E, Ahn SV, et al. Fatty liver index as a simple predictor of incident diabetes from the KoGES-ARIRANG study. *Medicine* 2016;95.
544. Yamada T, Fukatsu M, Suzuki S, et al. Fatty liver predicts impaired fasting glucose and type 2 diabetes mellitus in Japanese undergoing a health checkup. *Journal of gastroenterology and hepatology* 2010;25:352-56.
545. Yamamoto S, Matsushita Y, Nakagawa T, et al. Circulating adiponectin levels and risk of type 2 diabetes in the Japanese. *Nutrition & diabetes* 2014;4:e130-e30.
546. Yang L, Li L, Peters SA, et al. Age at menarche and incidence of diabetes: a prospective study of 300,000 women in China. *American journal of epidemiology* 2018;187:190-98.
547. Yang X, Chen J, Pan A, et al. Association between Higher Blood Pressure and Risk of Diabetes Mellitus in Middle-Aged and Elderly Chinese Adults. *Diabetes & metabolism journal* 2019;44:436-45.
548. Yary T, Virtanen JK, Ruusunen A, Tuomainen T-P, Voutilainen S. Serum zinc and risk of type 2 diabetes incidence in men: The Kuopio Ischaemic Heart Disease Risk Factor Study. *Journal of Trace Elements in Medicine and Biology* 2016;33:120-24.
549. Ye M, Robson PJ, Eurich DT, et al. Changes in body mass index and incidence of diabetes: a longitudinal study of Alberta's tomorrow project cohort. *Preventive medicine* 2018;106:157-63.
550. Ye M, Robson PJ, Eurich DT, et al. Anthropometric changes and risk of diabetes: are there sex differences? A longitudinal study of Alberta's Tomorrow Project. *BMJ open* 2019;9:e023829.
551. Yeh H-C, Duncan BB, Schmidt MI, Wang N-Y, Brancati FL. Smoking, smoking cessation, and risk for type 2 diabetes mellitus: a cohort study. *Annals of internal medicine* 2010;152:10-17.
552. Yeh H-C, Punjabi NM, Wang N-Y, et al. Vital capacity as a predictor of incident type 2 diabetes: the Atherosclerosis Risk in Communities study. *Diabetes care* 2005;28:1472-79.
553. Yokoyama M, Saito I, Ueno M, et al. Low birthweight is associated with type 2 diabetes mellitus in Japanese adults: The Toon Health Study. *Journal of diabetes investigation* 2020;11:1643-50.
554. Yoo S, Jung J, Kim H, et al. Predictive Performance of Glycated Hemoglobin for Incident Diabetes Compared with Glucose Tolerance Test According to Central Obesity. *Endocrinology & Metabolism* 2020;35.
555. Yu H, Wang T, Zhang R, et al. Alcohol consumption and its interaction with genetic variants are strongly associated with the risk of type 2 diabetes: a prospective cohort study. *Nutrition & metabolism* 2019;16:1-8.
556. Yuan J, Hu YJ, Zheng J, et al. Long-term use of antibiotics and risk of type 2 diabetes in women: a prospective cohort study. *International Journal of Epidemiology* 2020;49:1572-81.
557. YunXia Z, Zhang M, XuHong H, et al. Cigarette smoking increases risk for incident metabolic syndrome in Chinese men—Shanghai diabetes study. *Biomedical and Environmental Sciences* 2011;24:475-82.
558. Zaccardi F, Kurl S, Pitocco D, Ronkainen K, Laukkanen JA. Serum fructosamine and risk of type 2 diabetes mellitus among middle-age Finnish men: a 23-year population-based prospective study. *Acta diabetologica* 2015;52:161-66.
559. Zaccardi F, O'Donovan G, Webb DR, et al. Cardiorespiratory fitness and risk of type 2 diabetes mellitus: A 23-year cohort study and a meta-analysis of prospective studies. *Atherosclerosis* 2015;243:131-37.
560. Zaccardi F, Webb D, Carter P, et al. Association between direct measurement of active serum calcium and risk of type 2 diabetes mellitus: a prospective study. *Nutrition, Metabolism and Cardiovascular Diseases* 2015;25:562-68.
561. Zamani F, Bakhtiyari M, Mansournia MA, et al. Is incident type 2 diabetes associated with cumulative excess weight and abdominal adiposity? Tehran Lipid and Glucose Study. *Diabetes research and clinical practice* 2018;136:134-42.
562. Zhang L, Wang B, Wang C, et al. High pulse pressure is related to risk of type 2 diabetes mellitus in Chinese middle-aged females. *International journal of cardiology* 2016;220:467-71.

## Supplementary Materials

563. Zhang M, Gao Y, Chang H, et al. Hypertriglyceridemic-waist phenotype predicts diabetes: a cohort study in Chinese urban adults. *BMC Public Health* 2012;12:1-9.
564. Zhang M, Wang B, Liu Y, et al. Cumulative increased risk of incident type 2 diabetes mellitus with increasing triglyceride glucose index in normal-weight people: the Rural Chinese Cohort Study. *Cardiovascular diabetology* 2017;16:1-11.
565. Zhang M, Zhou J, Liu Y, et al. Risk of type 2 diabetes mellitus associated with plasma lipid levels: The rural Chinese cohort study. *Diabetes research and clinical practice* 2018;135:150-57.
566. Zhang N, Hu X, Zhang Q, et al. Non-high-density lipoprotein cholesterol: High-density lipoprotein cholesterol ratio is an independent risk factor for diabetes mellitus: Results from a population-based cohort study: 非高密度脂蛋白胆固醇与高密度脂蛋白胆固醇的比值是糖尿病的独特危险因素: 来自一项基于人群的队列研究的结论. *Journal of diabetes* 2018;10:708-14.
567. Zhang P, Brown MB, Bilik D, et al. Health utility scores for people with type 2 diabetes in US managed care health plans: results from Translating Research Into Action for Diabetes (TRIAD). *Diabetes care* 2012;35:2250-56.
568. Zhang T, Li Y, Zhang H, et al. Insulin-sensitive adiposity is associated with a relatively lower risk of diabetes than insulin-resistant adiposity: the Bogalusa Heart Study. *Endocrine* 2016;54:93-100.
569. Zhang T, Xu J, Li S, et al. Trajectories of childhood BMI and adult diabetes: the Bogalusa Heart Study. *Diabetologia* 2019;62:70-77.
570. Zhang X, Shu X-O, Xiang Y-B, et al. Resting heart rate and risk of type 2 diabetes in women. *International journal of epidemiology* 2010;39:900-06.
571. Zhang Y, Lee ET, Cowan LD, Fabsitz RR, Howard BV. Coffee consumption and the incidence of type 2 diabetes in men and women with normal glucose tolerance: the Strong Heart Study. *Nutrition, Metabolism and Cardiovascular Diseases* 2011;21:418-23.
572. Zhao F, Pan A, Yang X, et al. Bidirectional association between depressive symptoms and type 2 diabetes mellitus: The China Health and Retirement Longitudinal Study. *Journal of Diabetes and its Complications* 2019;33:107387.
573. Zhao J, Zhu Y, Hyun N, et al. Novel metabolic markers for the risk of diabetes development in American Indians. *Diabetes care* 2015;38:220-27.
574. Zhao T, Lin Z, Zhu H, Wang C, Jia W. Impact of body fat percentage change on future diabetes in subjects with normal glucose tolerance. *IUBMB life* 2017;69:947-55.
575. Zhu N, Pankow JS, Ballantyne CM, et al. High-molecular-weight adiponectin and the risk of type 2 diabetes in the ARIC study. *The Journal of Clinical Endocrinology & Metabolism* 2010;95:5097-104.
576. Zimmet P, Collins V, Dowse G, Knight L. Hyperinsulinaemia in youth is a predictor of type 2 (non-insulin-dependent) diabetes mellitus. *Diabetologia* 1992;35:534-41.
577. Zong G, Sun Q, Yu D, et al. Dairy consumption, type 2 diabetes, and changes in cardiometabolic traits: a prospective cohort study of middle-aged and older Chinese in Beijing and Shanghai. *Diabetes care* 2014;37:56-63.
578. Beleigoli AM, Appleton SL, Gill TK, Hill CL, Adams RJ. Association of metabolic phenotypes, grip strength and diabetes risk: The 15-year follow-up of The North West Adelaide Health Study, Australia. *Obesity Research & Clinical Practice* 2020;14:536-41.
579. Bozorgmanesh M, Hadaegh F, Ghaffari S, Harati H, Azizi F. A simple risk score effectively predicted type 2 diabetes in Iranian adult population: population-based cohort study. *The European Journal of Public Health* 2011;21:554-59.
580. Bozorgmanesh M, Hadaegh F, Zabetian A, Azizi F. Impact of hip circumference and height on incident diabetes: results from 6-year follow-up in the Tehran Lipid and Glucose Study. *Diabetic Medicine* 2011;28:1330-36.
581. Bray GA, Jablonski KA, Fujimoto WY, et al. Relation of central adiposity and body mass index to the development of diabetes in the Diabetes Prevention Program. *The American journal of clinical nutrition* 2008;87:1212-18.

## Supplementary Materials

582. Cameron A, Zimmet P, Soderberg S, et al. The metabolic syndrome as a predictor of incident diabetes mellitus in Mauritius. *Diabetic medicine* 2007;24:1460-69.
583. Carnethon MR, Sternfeld B, Schreiner PJ, et al. Association of 20-year changes in cardiorespiratory fitness with incident type 2 diabetes: the coronary artery risk development in young adults (CARDIA) fitness study. *Diabetes care* 2009;32:1284-88.
584. Chan JM, Rimm EB, Colditz GA, Stampfer MJ, Willett WC. Obesity, fat distribution, and weight gain as risk factors for clinical diabetes in men. *Diabetes care* 1994;17:961-69.
585. Colditz GA, Willett WC, Rotnitzky A, Manson JE. Weight gain as a risk factor for clinical diabetes mellitus in women. *Annals of internal medicine* 1995;122:481-86.
586. Colditz GA, Willett WC, Stampfer MJ, et al. Weight as a risk factor for clinical diabetes in women. *American journal of epidemiology* 1990;132:501-13.
587. Čukić I, Weiss A. Personality and diabetes mellitus incidence in a national sample. *Journal of psychosomatic research* 2014;77:163-68.
588. Cullen MW, Ebbert JO, Vierkant RA, Wang AH, Cerhan JR. No interaction of body mass index and smoking on diabetes mellitus risk in elderly women. *Preventive medicine* 2009;48:74-78.
589. de Mutsert R, Sun Q, Willett WC, Hu FB, van Dam RM. Overweight in early adulthood, adult weight change, and risk of type 2 diabetes, cardiovascular diseases, and certain cancers in men: a cohort study. *American journal of epidemiology* 2014;179:1353-65.
590. Ding D, Chong S, Jalaludin B, Comino E, Bauman AE. Risk factors of incident type 2-diabetes mellitus over a 3-year follow-up: Results from a large Australian sample. *Diabetes research and clinical practice* 2015;108:306-15.
591. Feller S, Boeing H, Pischon T. Body mass index, waist circumference, and the risk of type 2 diabetes mellitus: implications for routine clinical practice. *Deutsches Ärzteblatt international* 2010;107:470.
592. Field AE, Manson JE, Laird N, et al. Weight cycling and the risk of developing type 2 diabetes among adult women in the United States. *Obesity research* 2004;12:267-74.
593. Freeman DJ, Norrie J, Caslake MJ, et al. C-reactive protein is an independent predictor of risk for the development of diabetes in the West of Scotland Coronary Prevention Study. *Diabetes* 2002;51:1596-600.
594. Fretts AM, Howard BV, McKnight B, et al. Life's simple 7 and incidence of diabetes among American Indians: the Strong Heart Family Study. *Diabetes care* 2014;37:2240-45.
595. Granados A, Gebremariam A, Gidding SS, et al. Association of abdominal muscle composition with prediabetes and diabetes: The CARDIA study. *Diabetes, Obesity and Metabolism* 2019;21:267-75.
596. Grimnes G, Emaus N, Joakimsen R, et al. Baseline serum 25-hydroxyvitamin D concentrations in the Tromsø Study 1994–95 and risk of developing type 2 diabetes mellitus during 11 years of follow-up. *Diabetic Medicine* 2010;27:1107-15.
597. Gurka MJ, Golden SH, Musani SK, et al. Independent associations between a metabolic syndrome severity score and future diabetes by sex and race: the Atherosclerosis Risk In Communities Study and Jackson Heart Study. *Diabetologia* 2017;60:1261-70.
598. Ha KH, Lee Y-h, Song SO, et al. Development and validation of the Korean diabetes risk score: a 10-year national cohort study. *Diabetes & metabolism journal* 2018;42:402.
599. Haffner SM, Hazuda HP, Mitchell BD, Patterson JK, Stern MP. Increased incidence of type II diabetes mellitus in Mexican Americans. *Diabetes Care* 1991;14:102-08.
600. Haghightdoost F, Amini M, Feizi A, Iraj B. Are body mass index and waist circumference significant predictors of diabetes and prediabetes risk: Results from a population based cohort study. *World journal of diabetes* 2017;8:365.
601. Harati H, Hadaegh F, Saadat N, Azizi F. Population-based incidence of Type 2 diabetes and its associated risk factors: results from a six-year cohort study in Iran. *BMC public health* 2009;9:1-8.

## Supplementary Materials

602. Heianza Y, Arase Y, Tsuji H, et al. Metabolically healthy obesity, presence or absence of fatty liver, and risk of type 2 diabetes in Japanese individuals: Toranomon Hospital Health Management Center Study 20 (TOPICS 20). *The Journal of Clinical Endocrinology & Metabolism* 2014;99:2952-60.
603. Hosseinpanah F, Rambod M, Azizi F. Population attributable risk for diabetes associated with excess weight in Tehranian adults: a population-based cohort study. *BMC Public Health* 2007;7:1-8.
604. Hu FB, Manson JE, Stampfer MJ, et al. Diet, lifestyle, and the risk of type 2 diabetes mellitus in women. *New England journal of medicine* 2001;345:790-97.
605. Hu FB, Manson JE, Stampfer MJ, et al. Diet, lifestyle, and the risk of type 2 diabetes mellitus in women. *Obstetrical & gynecological survey* 2002;57:162-64.
606. Hu G, Lindström J, Valle TT, et al. Physical activity, body mass index, and risk of type 2 diabetes in patients with normal or impaired glucose regulation. *Archives of internal medicine* 2004;164:892-96.
607. Hu H, Wang J, Han X, et al. Prediction of 5-year risk of diabetes mellitus in relatively low risk middle-aged and elderly adults. *Acta diabetologica* 2020;57:63-70.
608. Kanaya AM, Harris T, Goodpaster BH, Tyllavsky F, Cummings SR. Adipocytokines attenuate the association between visceral adiposity and diabetes in older adults. *Diabetes care* 2004;27:1375-80.
609. Kaye SA, Folsom AR, Sprafka JM, Prineas RJ, Wallace RB. Increased incidence of diabetes mellitus in relation to abdominal adiposity in older women. *Journal of clinical epidemiology* 1991;44:329-34.
610. Kim C, Edelstein SL, Crandall JP, et al. Menopause and risk of diabetes in the Diabetes Prevention Program. *Menopause (New York, NY)* 2011;18:857.
611. Kim NH, Seo JA, Cho H, et al. Risk of the development of diabetes and cardiovascular disease in metabolically healthy obese people: the Korean Genome and Epidemiology Study. *Medicine* 2016;95.
612. Koh-Banerjee P, Wang Y, Hu FB, et al. Changes in body weight and body fat distribution as risk factors for clinical diabetes in US men. *American journal of epidemiology* 2004;159:1150-59.
613. Krishnan E, Pandya BJ, Chung L, Hariri A, Dabbous O. Hyperuricemia in young adults and risk of insulin resistance, prediabetes, and diabetes: a 15-year follow-up study. *American journal of epidemiology* 2012;176:108-16.
614. Kuwahara K, Uehara A, Kurotani K, et al. Association of cardiorespiratory fitness and overweight with risk of type 2 diabetes in Japanese men. *PLoS One* 2014;9:e98508.
615. Lajous M, Bijon A, Fagherazzi G, et al. Body mass index, diabetes, and mortality in French women: explaining away a “paradox”. *Epidemiology (Cambridge, Mass)* 2014;25:10.
616. Lim N-K, Park S-H, Choi S-J, Lee K-S, Park H-Y. A Risk Score for Predicting the Incidence of Type 2 Diabetes in a Middle-Aged Korean Cohort—The Korean Genome and Epidemiology Study—. *Circulation Journal* 2012;76:1904-10.
617. Long G, Johansson I, Rolandsson O, et al. Healthy behaviours and 10-year incidence of diabetes: a population cohort study. *Preventive medicine* 2015;71:121-27.
618. Man RE, Charumathi S, Gan ATL, et al. Cumulative incidence and risk factors of prediabetes and type 2 diabetes in a Singaporean Malay cohort. *Diabetes research and clinical practice* 2017;127:163-71.
619. Mishra GD, Carrigan G, Brown WJ, Barnett AG, Dobson AJ. Short-term weight change and the incidence of diabetes in midlife: results from the Australian Longitudinal Study on Women's Health. *Diabetes care* 2007;30:1418-24.
620. Modan M, Karasik A, Halkin H, et al. Effect of past and concurrent body mass index on prevalence of glucose intolerance and type 2 (non-insulin-dependent) diabetes and on insulin response. *Diabetologia* 1986;29:82-89.

## Supplementary Materials

621. Morimoto A, Ohno Y, Tatsumi Y, et al. Risk of smoking and body mass index for incidence of diabetes mellitus in a rural Japanese population. *Preventive medicine* 2012;54:341-44.
622. Mozaffarian D, Kamineni A, Carnethon M, et al. Lifestyle risk factors and new-onset diabetes mellitus in older adults: the cardiovascular health study. *Archives of internal medicine* 2009;169:798-807.
623. Norberg M, Eriksson JW, Lindahl B, et al. A combination of HbA1c, fasting glucose and BMI is effective in screening for individuals at risk of future type 2 diabetes: OGTT is not needed. *Journal of internal medicine* 2006;260:263-71.
624. Norberg M, Stenlund H, Lindahl B, et al. Components of metabolic syndrome predicting diabetes: no role of inflammation or dyslipidemia. *Obesity* 2007;15:1875-85.
625. Onat A, Can G, Kaya H, Hergenç G. "Atherogenic index of plasma" (log<sub>10</sub> triglyceride/high-density lipoprotein- cholesterol) predicts high blood pressure, diabetes, and vascular events. *Journal of clinical lipidology* 2010;4:89-98.
626. Owen CG, Kapetanakis VV, Rudnicka AR, et al. Body mass index in early and middle adult life: prospective associations with myocardial infarction, stroke and diabetes over a 30-year period: the British Regional Heart Study. *BMJ open* 2015;5:e008105.
627. Papier K, Jordan S, Catherine DE, et al. Incidence and risk factors for type 2 diabetes mellitus in transitional Thailand: results from the Thai cohort study. *BMJ open* 2016;6:e014102.
628. Ramezankhani A, Guity K, Azizi F, Hadaegh F. Sex differences in the association between spousal metabolic risk factors with incidence of type 2 diabetes: a longitudinal study of the Iranian population. *Biology of sex differences* 2019;10:1-8.
629. Rana JS, Li TY, Manson JE, Hu FB. Adiposity compared with physical inactivity and risk of type 2 diabetes in women. *Diabetes care* 2007;30:53-58.
630. Ren Y, Liu Y, Sun X, et al. Cohort study to determine the waist circumference cutoffs for predicting type 2 diabetes mellitus in rural China. *Diabetes/metabolism research and reviews* 2018;34:e3007.
631. Resnick HE, Valsania P, Halter JB, Lin X. Relation of weight gain and weight loss on subsequent diabetes risk in overweight adults. *Journal of Epidemiology & Community Health* 2000;54:596-602.
632. Rubio-Martín E, Soriguer F, Gutiérrez-Repiso C, et al. C-reactive protein and incidence of type 2 diabetes in the Pizarra study. *European journal of clinical investigation* 2013;43:159-67.
633. Salehinia F, Abdi H, Hadaegh F, et al. Abdominal obesity phenotypes and incident diabetes over 12 years of follow-up: The Tehran Lipid and glucose study. *Diabetes research and clinical practice* 2018;144:17-24.
634. Schienkiewitz A, Schulze MB, Hoffmann K, Kroke A, Boeing H. Body mass index history and risk of type 2 diabetes: results from the European Prospective Investigation into Cancer and Nutrition (EPIC)-Potsdam Study-. *The American journal of clinical nutrition* 2006;84:427-33.
635. Shai I, Jiang R, Manson JE, et al. Ethnicity, obesity, and risk of type 2 diabetes in women: a 20-year follow-up study. *Diabetes care* 2006;29:1585-90.
636. Skarfors ET, Selinus KI, Lithell HO. Risk factors for developing non-insulin dependent diabetes: a 10 year follow up of men in Uppsala. *British medical journal* 1991;303:755-60.
637. Tian Z, Li Y, Li L, et al. Gender-specific associations of body mass index and waist circumference with type 2 diabetes mellitus in Chinese rural adults: The Henan Rural Cohort Study. *Journal of Diabetes and its Complications* 2018;32:824-29.
638. Twig G, Afek A, Derazne E, et al. Diabetes risk among overweight and obese metabolically healthy young adults. *Diabetes care* 2014;37:2989-95.
639. Wang B, Zhang M, Wang S, et al. Dynamic status of metabolically healthy overweight/obesity and metabolically unhealthy and normal weight and the risk of type 2 diabetes mellitus: a cohort study of a rural adult Chinese population. *Obesity research & clinical practice* 2018;12:61-71.
640. Wang W, Lee ET, Howard BV, et al. Fasting plasma glucose and hemoglobin A1c in identifying and predicting diabetes: the strong heart study. *Diabetes Care* 2011;34:363-68.

## Supplementary Materials

641. Wannamethee SG, Shaper AG. Weight change and duration of overweight and obesity in the incidence of type 2 diabetes. *Diabetes care* 1999;22:1266-72.
642. Wannamethee SG, Shaper AG, Walker M. Overweight and obesity and weight change in middle aged men: impact on cardiovascular disease and diabetes. *Journal of Epidemiology & Community Health* 2005;59:134-39.
643. Wei GS, Coady SA, Reis JP, et al. Duration and degree of weight gain and incident diabetes in younger versus middle-aged black and white adults: ARIC, CARDIA, and the Framingham Heart Study. *Diabetes Care* 2015;38:2042-49.
644. Wei Y, Wang J, Han X, et al. Metabolically healthy obesity increased diabetes incidence in a middle-aged and elderly Chinese population. *Diabetes/metabolism research and reviews* 2020;36:e3202.
645. Weir CJ, Murray GD, Dyker AG, Lees KR. Is hyperglycaemia an independent predictor of poor outcome after acute stroke? Results of a long term follow up study. *Bmj* 1997;314:1303.
646. Zafari N, Lotfaliany M, Mansournia MA, et al. Optimal cut-points of different anthropometric indices and their joint effect in prediction of type 2 diabetes: results of a cohort study. *BMC public health* 2018;18:1-12.
647. Zethelius B, Hales CN, Lithell HO, Berne C. Insulin resistance, impaired early insulin response, and insulin propeptides as predictors of the development of type 2 diabetes: a population-based, 7-year follow-up study in 70-year-old men. *Diabetes care* 2004;27:1433-38.
648. Andersohn F, Schade R, Suissa S, Garbe E. Long-term use of antidepressants for depressive disorders and the risk of diabetes mellitus. *American Journal of Psychiatry* 2009;166:591-98.
649. Arellano-Campos O, Gómez-Velasco DV, Bello-Chavolla OY, et al. Development and validation of a predictive model for incident type 2 diabetes in middle-aged Mexican adults: the metabolic syndrome cohort. *BMC endocrine disorders* 2019;19:1-10.
650. Barkas F, Liamis G, Elisaf M, Anastasiou G, Liberopoulos E. Metabolically healthy obesity and risk of incident type 2 diabetes in 1077 statin-treated individuals: A six-year retrospective study. *European journal of preventive cardiology* 2020:2047487319899191.
651. Bjerregaard LG, Damborg ML, Osler M, Sørensen TI, Baker JL. Body mass index and height in relation to type 2 diabetes by levels of intelligence and education in a large cohort of Danish men. *European journal of epidemiology* 2020;35:1167-75.
652. Bjerregaard LG, Jensen BW, Ängquist L, et al. Change in overweight from childhood to early adulthood and risk of type 2 diabetes. *New England Journal of Medicine* 2018.
653. Boyko EJ, Fujimoto WY, Leonetti DL, Newell-Morris L. Visceral adiposity and risk of type 2 diabetes: a prospective study among Japanese Americans. *Diabetes care* 2000;23:465-71.
654. Cabrera de León A, Domínguez Coello S, Almeida González D, et al. Impaired fasting glucose, ancestry and waist-to-height ratio: main predictors of incident diagnosed diabetes in the Canary Islands. *Diabetic medicine* 2012;29:399-403.
655. Cassano PA, Rosner B, Vokonas PS, Weiss ST. Obesity and body fat distribution in relation to the incidence of non-Insulin-dependent diabetes mellitus: A prospective cohort study of men in the normative aging study. *American journal of epidemiology* 1992;136:1474-86.
656. Chiu C-J, Li S-L, Wu C-H, Du Y-F. BMI trajectories as a harbinger of pre-diabetes or underdiagnosed diabetes: an 18-year retrospective cohort study in Taiwan. *Journal of general internal medicine* 2016;31:1156-63.
657. Chiu M, Austin PC, Manuel DG, Shah BR, Tu JV. Deriving ethnic-specific BMI cutoff points for assessing diabetes risk. *Diabetes care* 2011;34:1741-48.
658. De Sousa AGP, Pereira AC, Marquezine GF, et al. Derivation and external validation of a simple prediction model for the diagnosis of type 2 diabetes mellitus in the Brazilian urban population. *European journal of epidemiology* 2009;24:101.
659. Dereziński T, Zozulińska-Ziółkiewicz D, Uruska A, Dąbrowski M. Abdominal aorta diameter as a novel marker of diabetes incidence risk in elderly women. *Scientific Reports* 2020;10:1-8.

## Supplementary Materials

660. Doi Y, Ninomiya T, Hata J, et al. Two risk score models for predicting incident Type 2 diabetes in Japan. *Diabetic Medicine* 2012;29:107-14.
661. Fernandez C, Surma MA, Klose C, et al. Plasma Lipidome and Prediction of Type 2 Diabetes in the Population-Based Malmö Diet and Cancer Cohort. *Diabetes care* 2020;43:366-73.
662. Feskens EJ, Kromhout D. Cardiovascular risk factors and the 25-year incidence of diabetes mellitus in middle-aged men. *American journal of epidemiology* 1989;130:1101-08.
663. Ford ES, Schulze MB, Pischon T, et al. Metabolic syndrome and risk of incident diabetes: findings from the European Prospective Investigation into Cancer and Nutrition-Potsdam Study. *Cardiovascular diabetology* 2008;7:1-8.
664. Fujita M, Sato Y, Nagashima K, Takahashi S, Hata A. Predictive power of a body shape index for development of diabetes, hypertension, and dyslipidemia in Japanese adults: a retrospective cohort study. *PLoS One* 2015;10:e0128972.
665. Gouveia LA, Maria de Fátima NM, Lebrao ML, Duarte YAO. Association between waist circumference (WC) values and hypertension, heart disease (HD) and diabetes, reported by the elderly–SABE survey: Health, wellness and aging, 2000 and 2006. *Archives of gerontology and geriatrics* 2014;59:62-68.
666. Guasch-Ferré M, Bulló M, Costa B, et al. A risk score to predict type 2 diabetes mellitus in an elderly Spanish Mediterranean population at high cardiovascular risk. *PLoS One* 2012;7:e33437.
667. Haffner SM, Stern MP, Hazuda HP, et al. Role of obesity and fat distribution in non-insulin-dependent diabetes mellitus in Mexican Americans and non-Hispanic whites. *Diabetes care* 1986;9:153-61.
668. Haffner SM, Stern MP, Mitchell BD, Hazuda HP, Patterson JK. Incidence of type II diabetes in Mexican Americans predicted by fasting insulin and glucose levels, obesity, and body-fat distribution. *Diabetes* 1990;39:283-88.
669. Han KJ, Lee SY, Kim NH, et al. Increased risk of diabetes development in subjects with the hypertriglyceridemic waist phenotype: a 4-year longitudinal study. *Endocrinology and metabolism* 2014;29:514.
670. Han SJ, Kim HJ, Kim DJ, Lee KW, Cho NH. Incidence and predictors of type 2 diabetes among Koreans: a 12-year follow up of the Korean Genome and Epidemiology Study. *Diabetes research and clinical practice* 2017;123:173-80.
671. Han X, Wang J, Li Y, et al. Development of a new scoring system to predict 5-year incident diabetes risk in middle-aged and older Chinese. *Acta diabetologica* 2018;55:13-19.
672. Han Y, Zhang S, Chen S, et al. Incidence and risk factors of type 2 diabetes mellitus in individuals with different fasting plasma glucose levels. *Therapeutic Advances in Endocrinology and Metabolism* 2020;11:2042018820928844.
673. Hjellvik V, Sakshaug S, Strøm H. Body mass index, triglycerides, glucose, and blood pressure as predictors of type 2 diabetes in a middle-aged Norwegian cohort of men and women. *Clinical epidemiology* 2012;4:213.
674. Hodge AM, English DR, O’Dea K, Giles GG. Increased diabetes incidence in Greek and Italian migrants to Australia: how much can be explained by known risk factors? *Diabetes care* 2004;27:2330-34.
675. Hwang L-C, Chen C-J, Lin BJ. Obesity and changes in body weight related to 10-year diabetes incidence in women in Taiwan (1993-2003). *Asia Pacific journal of clinical nutrition* 2007;16.
676. Jackson SH, Bellatorre A, McNeel T, Nápoles AM, Choi K. Longitudinal Associations between Obesity, Inflammation, and the Incidence of Type 2 Diabetes Mellitus among US Black and White Adults in the CARDIA Study. *Journal of diabetes research* 2020;2020.
677. Jung D-H, Byun Y-S, Kwon Y-J, Kim G-S. Microalbuminuria as a simple predictor of incident diabetes over 8 years in the Korean Genome and Epidemiology Study (KoGES). *Scientific reports* 2017;7:1-7.

## Supplementary Materials

678. Kerr WC, Williams E, Li L, et al. Alcohol use patterns and risk of diabetes onset in the 1979 National Longitudinal Survey of Youth Cohort. *Preventive medicine* 2018;109:22-27.
679. Koloverou E, Panagiotakos DB, Pitsavos C, et al. 10-year incidence of diabetes and associated risk factors in Greece: the ATTICA study (2002-2012). *The review of diabetic studies: RDS* 2014;11:181.
680. Kumari M, Head J, Marmot M. Prospective study of social and other risk factors for incidence of type 2 diabetes in the Whitehall II study. *Archives of internal medicine* 2004;164:1873-80.
681. Laaksonen DE, Lakka H-M, Niskanen LK, et al. Metabolic syndrome and development of diabetes mellitus: application and validation of recently suggested definitions of the metabolic syndrome in a prospective cohort study. *American journal of epidemiology* 2002;156:1070-77.
682. Lee S, Lacy ME, Jankowich M, Correa A, Wu W-C. Association between obesity phenotypes of insulin resistance and risk of type 2 diabetes in African Americans: The Jackson Heart Study. *Journal of clinical & translational endocrinology* 2020;19:100210.
683. Lerner N, Shani M, Vinker S. Predicting type 2 diabetes mellitus using haemoglobin A1c: A community-based historic cohort study. *The European journal of general practice* 2014;20:100-06.
684. Lillioja S, Mott DM, Spraul M, et al. Insulin resistance and insulin secretory dysfunction as precursors of non-insulin-dependent diabetes mellitus: prospective studies of Pima Indians. *New England Journal of Medicine* 1993;329:1988-92.
685. Liu S-J, Guo Z-R, Hu X-S, et al. Risks for type-2 diabetes associated with the metabolic syndrome and the interaction between impaired fasting glucose and other components of metabolic syndrome: the study from Jiangsu, China of 5 years follow-up. *Diabetes research and clinical practice* 2008;81:117-23.
686. Lorenzo C, Lee R, Haffner SM. Impaired glucose tolerance and obesity as effect modifiers of ethnic disparities of the progression to diabetes: the San Antonio Heart Study. *Diabetes care* 2012;35:2548-52.
687. Luft VC, Schmidt MI, Pankow JS, et al. Chronic inflammation role in the obesity-diabetes association: a case-cohort study. *Diabetology & metabolic syndrome* 2013;5:1-8.
688. Luo W, Guo Z, Hu X, et al. 2 years change of waist circumference and body mass index and associations with type 2 diabetes mellitus in cohort populations. *Obesity research & clinical practice* 2013;7:e290-e96.
689. MacKay MF, Haffner SM, Wagenknecht LE, D'Agostino RB, Hanley AJ. Prediction of type 2 diabetes using alternate anthropometric measures in a multi-ethnic cohort: the insulin resistance atherosclerosis study. *Diabetes care* 2009;32:956-58.
690. Magnussen CG, Koskinen J, Chen W, et al. Pediatric metabolic syndrome predicts adulthood metabolic syndrome, subclinical atherosclerosis, and type 2 diabetes mellitus but is no better than body mass index alone: the Bogalusa Heart Study and the Cardiovascular Risk in Young Finns Study. *Circulation* 2010;122:1604-11.
691. Mamtani M, Kulkarni H, Dyer TD, et al. Waist circumference independently associates with the risk of insulin resistance and type 2 diabetes in Mexican American families. *PloS one* 2013;8:e59153.
692. Möhlig M, Boeing H, Spranger J, et al. Body mass index and C-174G interleukin-6 promoter polymorphism interact in predicting type 2 diabetes. *The Journal of Clinical Endocrinology & Metabolism* 2004;89:1885-90.
693. Nakashima R, Kamei N, Yamane K, et al. Decreased total and high molecular weight adiponectin are independent risk factors for the development of type 2 diabetes in Japanese-Americans. *The Journal of Clinical Endocrinology & Metabolism* 2006;91:3873-77.
694. Nusrianto R, Ayundini G, Kristanti M, et al. Visceral adiposity index and lipid accumulation product as a predictor of type 2 diabetes mellitus: the Bogor cohort study of non-communicable diseases risk factors. *diabetes research and clinical practice* 2019;155:107798.



## Supplementary Materials

695. Ohlson L-O, Larsson B, Björntorp P, et al. Risk factors for type 2 (non-insulin-dependent) diabetes mellitus. Thirteen and one-half years of follow-up of the participants in a study of Swedish men born in 1913. *Diabetologia* 1988;31:798-805.
696. Ohlsson C, Bygdell M, Nethander M, Rosengren A, Kindblom JM. BMI change during puberty is an important determinant of adult type 2 diabetes risk in men. *The Journal of Clinical Endocrinology & Metabolism* 2019;104:1823-32.
697. Okura T, Nakamura R, Fujioka Y, et al. Body mass index  $\geq 23$  is a risk factor for insulin resistance and diabetes in Japanese people: a brief report. *Plos one* 2018;13:e0201052.
698. Onat A, Hergenç G, Keleş İ, et al. Sex difference in development of diabetes and cardiovascular disease on the way from obesity and metabolic syndrome: prospective study of a cohort with normal glucose metabolism. *Metabolism* 2005;54:800-08.
699. Onat A, Hergenç G, Uyarel H, Can G, Ozhan H. Prevalence, incidence, predictors and outcome of type 2 diabetes in Turkey. *Anadolu Kardiyol Derg* 2006;6:314-21.
700. Patja K, Jousilahti P, Hu G, et al. Effects of smoking, obesity and physical activity on the risk of type 2 diabetes in middle-aged Finnish men and women. *Journal of internal medicine* 2005;258:356-62.
701. Perry IJ, Wannamethee SG, Walker MK, et al. Prospective study of risk factors for development of non-insulin dependent diabetes in middle aged British men. *Bmj* 1995;310:560-64.
702. Raghavan S, Pachucki MC, Chang Y, et al. Incident type 2 diabetes risk is influenced by obesity and diabetes in social contacts: a social network analysis. *Journal of general internal medicine* 2016;31:1127-33.
703. Ren Y, Liu Y, Sun X, et al. Hypertriglyceridemia-waist and risk of developing type 2 diabetes: the Rural Chinese Cohort Study. *Scientific reports* 2017;7:1-8.
704. Rhee E-J, Cho JH, Kwon H, et al. Increased risk of diabetes development in individuals with weight cycling over 4 years: the Kangbuk Samsung Health study. *Diabetes research and clinical practice* 2018;139:230-38.
705. Rodriguez L, Bradshaw P, Shiboski S, et al. Examining if the relationship between BMI and incident type 2 diabetes among middle–older aged adults varies by race/ethnicity: evidence from the Multi-Ethnic Study of Atherosclerosis (MESA). *Diabetic Medicine* 2021;38:e14377.
706. Rostambeigi N, Shaw JE, Atkins RC, et al. Waist circumference has heterogeneous impact on development of diabetes in different populations: longitudinal comparative study between Australia and Iran. *Diabetes research and clinical practice* 2010;88:117-24.
707. Sadeghi M, Talaei M, Parvaresh Rizi E, et al. Determinants of incident prediabetes and type 2 diabetes in a 7-year cohort in a developing country: The Isfahan Cohort Study: 在一个发展中国家为期 7 年的有关糖尿病前期与 2 型糖尿病影响因素的队列研究: 伊斯法罕队列研究. *Journal of diabetes* 2015;7:633-41.
708. Sakurai Y, Teruya K, Shimada N, Nakamura K. Relation between obesity in young adulthood and risk of non-insulin-dependent diabetes mellitus. *International journal of obesity* 1997;21:686-90.
709. Santos CESd, Rech CR, Antes DL, et al. Incidence and prevalence of diabetes self-reported on elderly in south of Brazil: results of EpiFloripa Ageing Study. *Ciencia & saude coletiva* 2019;24:4191-200.
710. Sawada SS, Lee I-M, Muto T, Matuszaki K, Blair SN. Cardiorespiratory fitness and the incidence of type 2 diabetes: prospective study of Japanese men. *Diabetes care* 2003;26:2918-22.
711. Scherrer JF, Salas J, Lustman PJ, et al. The role of obesity in the association between posttraumatic stress disorder and incident diabetes. *JAMA psychiatry* 2018;75:1189-98.
712. Schmidt MI, Duncan BB, Canani LH, Karohl C, Chambless L. Association of waist-hip ratio with diabetes mellitus: strength and possible modifiers. *Diabetes care* 1992;15:912-14.

## Supplementary Materials

713. Söderberg S, Zimmet P, Tuomilehto J, et al. Leptin predicts the development of diabetes in Mauritian men, but not women: a population-based study. *International journal of obesity* 2007;31:1126-33.
714. Talaie M, Sadeghi M, Marshall T, et al. Anthropometric indices predicting incident type 2 diabetes in an Iranian population: the Isfahan Cohort Study. *Diabetes & metabolism* 2013;39:424-31.
715. Tanaka S-i, Fujioka Y, Tsujino T, Ishida T, Hirata K-i. Impact of serum cholesterol esterification rates on the development of diabetes mellitus in a general population. *Lipids in health and disease* 2018;17:1-8.
716. Taylor AE, Ebrahim S, Ben-Shlomo Y, et al. Comparison of the associations of body mass index and measures of central adiposity and fat mass with coronary heart disease, diabetes, and all-cause mortality: a study using data from 4 UK cohorts. *The American journal of clinical nutrition* 2010;91:547-56.
717. uk ICrsm-eca. The link between family history and risk of type 2 diabetes is not explained by anthropometric, lifestyle or genetic risk factors: the EPIC-InterAct study. *Diabetologia* 2013;56:60-69.
718. Vanderpump M, Tunbridge W, French J, et al. The Incidence of Diabetes Mellitus in an English Community: A 20-year Follow-up of the Whickham Survey. *Diabetic medicine* 1996;13:741-47.
719. Wang ET, Calderon-Margalit R, Cedars MI, et al. Polycystic ovary syndrome and risk for long-term diabetes and dyslipidemia. *Obstetrics and gynecology* 2011;117:6.
720. Wei M, Gibbons LW, Mitchell TL, et al. The association between cardiorespiratory fitness and impaired fasting glucose and type 2 diabetes mellitus in men. *Annals of internal medicine* 1999;130:89-96.
721. Wilson PW, Meigs JB, Sullivan L, et al. Prediction of incident diabetes mellitus in middle-aged adults: the Framingham Offspring Study. *Archives of internal medicine* 2007;167:1068-74.
722. Wu Y, Hu H, Cai J, et al. Applying latent class analysis to risk stratification of incident diabetes among Chinese adults. *Diabetes Research and Clinical Practice* 2021;174:108742.
723. Xu S, Ming J, Jia A, et al. Normal weight obesity and the risk of diabetes in Chinese people: a 9-year population-based cohort study. *Scientific reports* 2021;11:1-8.
724. Zhang F, Wan Q, Cao H, et al. Identical anthropometric characteristics of impaired fasting glucose combined with impaired glucose tolerance and newly diagnosed type 2 diabetes: anthropometric indicators to predict hyperglycaemia in a community-based prospective cohort study in southwest China. *BMJ open* 2018;8.
725. Adegbiya O, Hoy WE, Wang Z. Corresponding waist circumference and body mass index values based on 10-year absolute type 2 diabetes risk in an Australian Aboriginal community. *BMJ Open Diabetes Research and Care* 2015;3.
726. Allen H, Allen J, Boyd L, Alston-Mills B. Can anthropometric measurements and diet analysis serve as useful tools to determine risk factors for insulin-resistant diabetes type 2 among white and black Americans? *Nutrition* 2003;19:584-88.
727. Casanova R, Saldana S, Simpson SL, et al. Prediction of incident diabetes in the Jackson Heart Study using high-dimensional machine learning. *PloS one* 2016;11:e0163942.
728. Chatterjee R, Brancati FL, Shafi T, et al. Non-traditional risk factors are important contributors to the racial disparity in diabetes risk: the atherosclerosis risk in communities study. *Journal of general internal medicine* 2014;29:290-97.
729. Cheung N. Is parity associated with earlier diagnosis of type 2 diabetes? *Diabetes research and clinical practice* 2004;66:287-91.
730. Chien K, Cai T, Hsu H, et al. A prediction model for type 2 diabetes risk among Chinese people. *Diabetologia* 2009;52:443-50.
731. Choi K, Lee J, Lee K, et al. Serum adiponectin concentrations predict the developments of type 2 diabetes and the metabolic syndrome in elderly Koreans. *Clinical endocrinology* 2004;61:75-80.

## Supplementary Materials

732. Choi Y, Larson N, Gallaher DD, et al. A Shift Toward a Plant-Centered Diet From Young to Middle Adulthood and Subsequent Risk of Type 2 Diabetes and Weight Gain: The Coronary Artery Risk Development in Young Adults (CARDIA) Study. *Diabetes care* 2020;43:2796-803.
733. Dahlén EM, Bjarnegård N, Länne T, Nystrom FH, Östgren CJ. Sagittal abdominal diameter is a more independent measure compared with waist circumference to predict arterial stiffness in subjects with type 2 diabetes-a prospective observational cohort study. *Cardiovascular diabetology* 2013;12:1-8.
734. Engström G, Janzon L. Risk of developing diabetes is inversely related to lung function: a population-based cohort study. *Diabetic medicine* 2002;19:167-70.
735. Fazeli Farsani S, van der Aa MP, Knibbe CA, de Boer A, van der Vorst MM. A Follow-up Study on BMI-SDS and Insulin Resistance in Overweight and Obese Children at Risk for Type 2 Diabetes Mellitus. *Global pediatric health* 2015;2:2333794X14568451.
736. Følling IS, Solbjør M, Midthjell K, Kulseng B, Helvik A-S. Exploring lifestyle and risk in preventing type 2 diabetes-a nested qualitative study of older participants in a lifestyle intervention program (VEND-RISK). *BMC public health* 2016;16:1-9.
737. Han T, Meng X, Shan R, et al. Temporal relationship between hyperuricemia and obesity, and its association with future risk of type 2 diabetes. *International Journal of Obesity* 2018;42:1336-44.
738. Hartz AJ, Rupley Jr DC, Kalkhoff RD, Rimm AA. Relationship of obesity to diabetes: influence of obesity level and body fat distribution. *Preventive medicine* 1983;12:351-57.
739. Hulsegge G, Spijkerman A, Van Der Schouw Y, et al. Trajectories of metabolic risk factors and biochemical markers prior to the onset of type 2 diabetes: the population-based longitudinal Doetinchem study. *Nutrition & diabetes* 2017;7:e270-e70.
740. Kaukua J, Turpeinen A, Uusitupa M, Niskanen L. Clustering of cardiovascular risk factors in type 2 diabetes mellitus: prognostic significance and tracking. *Diabetes, Obesity and Metabolism* 2001;3:17-23.
741. Knowler WC, Pettitt DJ, Savage PJ, Bennett PH. Diabetes incidence in Pima Indians: contributions of obesity and parental diabetes. *American journal of epidemiology* 1981;113:144-56.
742. Ko GT, Chan JC, Chow CC, et al. Effects of obesity on the conversion from normal glucose tolerance to diabetes in Hong Kong Chinese. *Obesity research* 2004;12:889-95.
743. Kriketos A, Carey D, Jenkins A, et al. Central fat predicts deterioration of insulin secretion index and fasting glycaemia: 6-year follow-up of subjects at varying risk of Type 2 diabetes mellitus. *Diabetic medicine* 2003;20:294-300.
744. Lee I-T, Chiu Y-F, Hwu C-M, et al. Central obesity is important but not essential component of the metabolic syndrome for predicting diabetes mellitus in a hypertensive family-based cohort. Results from the Stanford Asia-pacific program for hypertension and insulin resistance (SAPPHIRE) Taiwan follow-up study. *Cardiovascular diabetology* 2012;11:1-8.
745. Lewitt M, Hilding A, Östenson C-G, et al. Insulin-like growth factor-binding protein-1 in the prediction and development of type 2 diabetes in middle-aged Swedish men. *Diabetologia* 2008;51:1135-45.
746. Libby A, Meier J, Lopez J, Swislocki AL, Siegel D. The effect of body mass index on fasting blood glucose and development of diabetes mellitus after initiation of extended-release niacin. *Metabolic syndrome and related disorders* 2010;8:79-84.
747. Mainous AG, Diaz VA, Everett CJ. Assessing risk for development of diabetes in young adults. *The Annals of Family Medicine* 2007;5:425-29.
748. Mamtani M, Kulkarni H, Dyer T, et al. Waist circumference is genetically correlated with incident Type 2 diabetes in Mexican-American families. *Diabetic medicine* 2014;31:31-35.
749. Manjoo P, Dannenbaum D, Joseph L, Torrie J, Dasgupta K. Utility of current obesity thresholds in signaling diabetes risk in the James Bay Cree of Eeyou Istchee. *BMJ Open Diabetes Research and Care* 2015;3:e000114.

## Supplementary Materials

750. Maral I, Tütüncü NB, Bakar C, et al. The 5-Year Incidence of Type 2 Diabetes Mellitus in Women Older Than 15 Years in Ankara, Turkey: A Population-Based Study. *Journal of Investigative Medicine* 2010;58:796-800.
751. Owei I, Umekwe N, Provo C, Wan J, Dagogo-Jack S. Insulin-sensitive and insulin-resistant obese and non-obese phenotypes: role in prediction of incident pre-diabetes in a longitudinal biracial cohort. *BMJ Open Diabetes Research and Care* 2017;5.
752. Rahman M, Simmons RK, Harding A-H, Wareham NJ, Griffin SJ. A simple risk score identifies individuals at high risk of developing Type 2 diabetes: a prospective cohort study. *Family practice* 2008;25:191-96.
753. Schubert CM, Sun SS, Burns TL, Morrison JA, Huang TT-K. Predictive ability of childhood metabolic components for adult metabolic syndrome and type 2 diabetes. *The Journal of pediatrics* 2009;155:S6. e1-S6. e7.
754. Silverwood RJ, Pierce M, Hardy R, et al. Low birth weight, later renal function, and the roles of adulthood blood pressure, diabetes, and obesity in a British birth cohort. *Kidney international* 2013;84:1262-70.
755. Thomas C, Hyppönen E, Power C. Obesity and type 2 diabetes risk in midadult life: the role of childhood adversity. *Pediatrics* 2008;121:e1240-e49.
756. Tillin T, Sattar N, Godsland I, et al. Ethnicity-specific obesity cut-points in the development of Type 2 diabetes—a prospective study including three ethnic groups in the United Kingdom. *Diabetic Medicine* 2015;32:226-34.
757. Vistisen D, Witte DR, Tabák AG, et al. Patterns of obesity development before the diagnosis of type 2 diabetes: the Whitehall II cohort study. *PLoS medicine* 2014;11:e1001602.
758. Xu L, Jiang CQ, Schooling CM, et al. Liver enzymes as mediators of association between obesity and diabetes: the Guangzhou Biobank Cohort Study. *Annals of epidemiology* 2017;27:204-07.
759. Yaggi HK, Araujo AB, McKinlay JB. Sleep duration as a risk factor for the development of type 2 diabetes. *Diabetes care* 2006;29:657-61.
760. Ye X, Zong G, Liu X, et al. Development of a new risk score for incident type 2 diabetes using updated diagnostic criteria in middle-aged and older chinese. *PLoS One* 2014;9:e97042.
761. Almdal T, Scharling H, Jensen JS, Vestergaard H. Higher prevalence of risk factors for type 2 diabetes mellitus and subsequent higher incidence in men. *European journal of internal medicine* 2008;19:40-45.
762. Asamsama OH, Lee JW, Morton KR, Tonstad S. Bidirectional longitudinal study of type 2 diabetes and depression symptoms in black and white church going adults. *Journal of Diabetes & Metabolic Disorders* 2015;14:1-7.
763. Calle EE, Rodriguez C, Jacobs EJ, et al. The American cancer society cancer prevention study II nutrition cohort: rationale, study design, and baseline characteristics. *Cancer: Interdisciplinary International Journal of the American Cancer Society* 2002;94:2490-501.
764. Carey VJ, Walters EE, Colditz GA, et al. Body fat distribution and risk of non-insulin-dependent diabetes mellitus in women: the Nurses' Health Study. *American journal of epidemiology* 1997;145:614-19.
765. Conway BN, Han X, Munro HM, et al. The obesity epidemic and rising diabetes incidence in a low-income racially diverse southern US cohort. *PLoS one* 2018;13:e0190993.
766. Eguaras S, Bes-Rastrollo M, Ruiz-Canela M, et al. May the Mediterranean diet attenuate the risk of type 2 diabetes associated with obesity: The Seguimiento Universidad de Navarra (SUN) cohort. *British Journal of Nutrition* 2017;117:1478-85.
767. Folsom AR, Kushi LH, Anderson KE, et al. Associations of general and abdominal obesity with multiple health outcomes in older women: the Iowa Women's Health Study. *Archives of internal medicine* 2000;160:2117-28.
768. Gray N, Picone G, Sloan F, Yashkin A. The relationship between BMI and onset of diabetes mellitus and its complications. *Southern medical journal* 2015;108:29.

## Supplementary Materials

769. Gurwitz JH, Field TS, Glynn RJ, et al. Risk factors for non-insulin-dependent diabetes mellitus requiring treatment in the elderly. *Journal of the American Geriatrics Society* 1994;42:1235-40.
770. Kakoly NS, Earnest A, Teede HJ, Moran LJ, Joham AE. The impact of obesity on the incidence of type 2 diabetes among women with polycystic ovary syndrome. *Diabetes Care* 2019;42:560-67.
771. Krishnan S, Rosenberg L, Djoussé L, Cupples LA, Palmer JR. Overall and central obesity and risk of type 2 diabetes in US black women. *Obesity* 2007;15:1860-66.
772. Lee DH, Keum N, Hu FB, et al. Comparison of the association of predicted fat mass, body mass index, and other obesity indicators with type 2 diabetes risk: two large prospective studies in US men and women. *European journal of epidemiology* 2018;33:1113-23.
773. Leslie WD, Ludwig SM, Morin S. Abdominal fat from spine dual-energy x-ray absorptiometry and risk for subsequent diabetes. *The Journal of Clinical Endocrinology & Metabolism* 2010;95:3272-76.
774. Nguyen B, Bauman A, Ding D. Incident type 2 diabetes in a large Australian cohort study: does physical activity or sitting time alter the risk associated with body mass index? *Journal of Physical Activity and Health* 2017;14:13-19.
775. Odegaard AO, Koh W-P, Vazquez G, et al. BMI and diabetes risk in Singaporean Chinese. *Diabetes care* 2009;32:1104-06.
776. Oguma Y, Sesso HD, Paffenbarger Jr RS, Lee IM. Weight change and risk of developing type 2 diabetes. *Obesity research* 2005;13:945-51.
777. Papier K, D'Este C, Bain C, et al. Body mass index and type 2 diabetes in Thai adults: defining risk thresholds and population impacts. *BMC public health* 2017;17:1-10.
778. Poulsen K, Cleal B, Clausen T, Andersen LL. Work, diabetes and obesity: a seven year follow-up study among Danish health care workers. *PLoS one* 2014;9:e103425.
779. Rajaobelina K, Dow C, Romana Mancini F, et al. Population attributable fractions of the main type 2 diabetes mellitus risk factors in women: findings from the French E3N cohort. *Journal of diabetes* 2019;11:242-53.
780. Ratliff S, Mezuk B. Depressive symptoms, psychiatric medication use, and risk of type 2 diabetes: results from the Health and Retirement Study. *General hospital psychiatry* 2015;37:420-26.
781. Reis JP, Loria CM, Sorlie PD, et al. Lifestyle factors and risk for new-onset diabetes: a population-based cohort study. *Annals of internal medicine* 2011;155:292-99.
782. Sheikh MA, Lund E, Braaten T. The predictive effect of body mass index on type 2 diabetes in the Norwegian women and cancer study. *Lipids in health and disease* 2014;13:1-8.
783. Siegel LC, Sesso HD, Bowman TS, et al. Physical activity, body mass index, and diabetes risk in men: a prospective study. *The American journal of medicine* 2009;122:1115-21.
784. Sun W, Shi L, Ye Z, et al. Association between the change in body mass index from early adulthood to midlife and subsequent type 2 diabetes mellitus. *Obesity* 2016;24:703-09.
785. Waki K, Noda M, Sasaki S, et al. Alcohol consumption and other risk factors for self-reported diabetes among middle-aged Japanese: a population-based prospective study in the JPHC study cohort I. *Diabetic medicine* 2005;22:323-31.
786. Wang Y, Rimm EB, Stampfer MJ, Willett WC, Hu FB. Comparison of abdominal adiposity and overall obesity in predicting risk of type 2 diabetes among men. *The American journal of clinical nutrition* 2005;81:555-63.
787. Weinstein AR, Sesso HD, Lee IM, et al. Relationship of physical activity vs body mass index with type 2 diabetes in women. *Jama* 2004;292:1188-94.
788. Xu H, Kuja-Halkola R, Chen X, et al. Higher body mass index is associated with incident diabetes and chronic kidney disease independent of genetic confounding. *Kidney international* 2019;95:1225-33.

## Supplementary Materials

789. Yeung E, Qi L, Hu FB, Zhang C. Novel abdominal adiposity genes and the risk of type 2 diabetes: findings from two prospective cohorts. *International journal of molecular epidemiology and genetics* 2011;2:138.
790. Zhang H, Rogers K, Sukkar L, et al. Prevalence, incidence and risk factors of diabetes in Australian adults aged  $\geq 45$  years: A cohort study using linked routinely-collected data. *Journal of clinical & translational endocrinology* 2020;22:100240.
791. Araneta MRG, Barrett-Connor E. Ethnic differences in visceral adipose tissue and type 2 diabetes: Filipino, African-American, and white women. *Obesity research* 2005;13:1458-65.
792. Bawadi H, Abouwatfa M, Alsaeed S, Kerkadi A, Shi Z. Body shape index is a stronger predictor of diabetes. *nutrients* 2019;11:1018.
793. Berber A, Gomez-Santos R, Fanghänel G, Sanchez-Reyes L. Anthropometric indexes in the prediction of type 2 diabetes mellitus, hypertension and dyslipidaemia in a Mexican population. *International journal of obesity* 2001;25:1794-99.
794. Chang Y, Guo X, Chen Y, et al. A body shape index and body roundness index: two new body indices to identify diabetes mellitus among rural populations in northeast China. *BMC Public health* 2015;15:1-8.
795. Chao C-Y, Wu J-S, Yang Y-C, et al. Sleep duration is a potential risk factor for newly diagnosed type 2 diabetes mellitus. *Metabolism* 2011;60:799-804.
796. Chen P, Hou X, Hu G, et al. Abdominal subcutaneous adipose tissue: a favorable adipose depot for diabetes? *Cardiovascular diabetology* 2018;17:1-11.
797. Corbin LJ, Richmond RC, Wade KH, et al. BMI as a modifiable risk factor for type 2 diabetes: refining and understanding causal estimates using Mendelian randomization. *Diabetes* 2016;65:3002-07.
798. Daniel M, Paquet C, Kelly S, et al. Hypertriglyceridemic waist and newly-diagnosed diabetes among remote-dwelling Indigenous Australians. *Annals of human biology* 2013;40:496-504.
799. Feng R-N, Zhao C, Wang C, et al. BMI is strongly associated with hypertension, and waist circumference is strongly associated with type 2 diabetes and dyslipidemia, in northern Chinese adults. *Journal of epidemiology* 2012;22:317-23.
800. Flowers E, Lin F, Kandula NR, et al. Body composition and diabetes risk in South Asians: findings from the MASALA and MESA studies. *Diabetes care* 2019;42:946-53.
801. Hall TR, Hickey ME, Young TB. The relationship of body fat distribution to non-insulin-dependent diabetes mellitus in a Navajo community. *American journal of human biology* 1991;3:119-26.
802. Hardy DS, Stallings DT, Garvin JT, et al. Anthropometric discriminators of type 2 diabetes among White and Black American adults: 在白种以及黑种美国成年人中可以鉴别 2 型糖尿病的人体测量学指标. *Journal of diabetes* 2017;9:296-307.
803. Koo BK. The differential association between muscle strength and diabetes mellitus according to the presence or absence of obesity. *Journal of obesity & metabolic syndrome* 2019;28:46.
804. Li S, Xiao J, Ji L, et al. BMI and waist circumference are associated with impaired glucose metabolism and type 2 diabetes in normal weight Chinese adults. *Journal of diabetes and its complications* 2014;28:470-76.
805. Lin WY, Xavier Pi-Sunyer F, Chen CC, et al. Coffee consumption is inversely associated with type 2 diabetes in Chinese. *European journal of clinical investigation* 2011;41:659-66.
806. Nabipour I, Vahdat K, JAFARI SM, et al. Elevated high sensitivity C-reactive protein is associated with type 2 diabetes mellitus: the Persian Gulf Healthy Heart Study. *Endocrine journal* 2008:0804240105-05.
807. ó Hartaigh B, Jiang CQ, Bosch JA, et al. Independent and combined associations of abdominal obesity and seated resting heart rate with type 2 diabetes among older Chinese: the Guangzhou Biobank Cohort Study. *Diabetes/metabolism research and reviews* 2011;27:298-306.
808. Pramyothin P, Limpattanachart V, Dawilai S, et al. Fat-free mass, metabolically healthy obesity, and type 2 diabetes in severely obese asian adults. *Endocrine Practice* 2017;23:915-22.

## Supplementary Materials

809. Snijder M, Zimmet PZ, Visser M, et al. Independent and opposite associations of waist and hip circumferences with diabetes, hypertension and dyslipidemia: the AusDiab Study. *International journal of obesity* 2004;28:402-09.
810. Soflaei SS, Darroudi S, Tayefi M, et al. Hookah smoking is strongly associated with diabetes mellitus, metabolic syndrome and obesity: a population-based study. *Diabetology & metabolic syndrome* 2018;10:1-6.
811. Warren TY, Wilcox S, Dowda M, Baruth M. Peer Reviewed: Independent association of waist circumference with hypertension and diabetes in African American women, South Carolina, 2007–2009. *Preventing chronic disease* 2012;9.
812. Xu Z, Qi X, Dahl A, Xu W. Waist-to-height ratio is the best indicator for undiagnosed Type 2 diabetes. *Diabetic Medicine* 2013;30:e201-e07.
813. Yasuoka M, Muraki I, Imano H, et al. Joint impact of muscle mass and waist circumference on type 2 diabetes in Japanese middle-aged adults: The Circulatory Risk in Communities Study (CIRCS). *Journal of diabetes* 2020;12:677-85.
814. Yong-Cheng R, Liu Y, Sun X-Z, et al. Prevalence and relationship of hypertriglyceridaemic–waist phenotype and type 2 diabetes mellitus among a rural adult Chinese population. *Public health nutrition* 2019;22:1361-66.
815. Zhou H, Li Y, Liu X, et al. Development and evaluation of a risk score for type 2 diabetes mellitus among middle-aged Chinese rural population based on the RuralDiab Study. *Scientific reports* 2017;7:1-8.
816. Abbasi A, Juszczak D, van Jaarsveld CH, Gulliford MC. Body mass index and incident type 1 and type 2 diabetes in children and young adults: a retrospective cohort study. *Journal of the Endocrine Society* 2017;1:524-37.
817. Al Mamun A, Cramb SM, O'callaghan MJ, Williams GM, Najman JM. Childhood overweight status predicts diabetes at age 21 years: a follow-up study. *Obesity* 2009;17:1255-61.
818. Asghari G, Hasheminia M, Heidari A, et al. Adolescent metabolic syndrome and its components associations with incidence of type 2 diabetes in early adulthood: Tehran lipid and glucose study. *Diabetology & Metabolic Syndrome* 2021;13:1-9.
819. Eriksson JG, Forsen T, Tuomilehto J, Osmond C, Barker DJ. Early adiposity rebound in childhood and risk of Type 2 diabetes in adult life. *Diabetologia* 2003;46:190-94.
820. Franks PW, Hanson RL, Knowler WC, et al. Childhood predictors of young-onset type 2 diabetes. *Diabetes* 2007;56:2964-72.
821. Hudda MT, Aarestrup J, Owen CG, et al. Association of Childhood Fat Mass and Weight With Adult-Onset Type 2 Diabetes in Denmark. *JAMA Network Open* 2021;4:e218524-e24.
822. Lammi N, Moltchanova E, Blomstedt P, et al. Childhood BMI trajectories and the risk of developing young adult-onset diabetes. *Diabetologia* 2009;52:408-14.
823. Lee JM, Gebremariam A, Vijan S, Gurney JG. Excess body mass index–years, a measure of degree and duration of excess weight, and risk for incident diabetes. *Archives of pediatrics & adolescent medicine* 2012;166:42-48.
824. Mendelson M, Cloutier J, Spence L, et al. Obesity and type 2 diabetes mellitus in a birth cohort of First Nation children born to mothers with pediatric-onset type 2 diabetes. *Pediatric diabetes* 2011;12:219-28.
825. Morrison JA, Friedman LA, Wang P, Glueck CJ. Metabolic syndrome in childhood predicts adult metabolic syndrome and type 2 diabetes mellitus 25 to 30 years later. *The Journal of pediatrics* 2008;152:201-06.
826. Morrison JA, Glueck CJ, Horn PS, Wang P. Childhood predictors of adult type 2 diabetes at 9-and 26-year follow-ups. *Archives of pediatrics & adolescent medicine* 2010;164:53-60.
827. Nguyen QM, Srinivasan SR, Xu J-H, Chen W, Berenson GS. Influence of childhood parental history of type 2 diabetes on the pre-diabetic and diabetic status in adulthood: the Bogalusa Heart Study. *European journal of epidemiology* 2009;24:537-39.

## Supplementary Materials

828. Nianogo RA, Arah OA. Investigating the role of childhood adiposity in the development of adult type 2 diabetes in a 64-year follow-up cohort: an application of the parametric G-formula within an agent-based simulation Study. *Epidemiology* 2019;30:S101-S09.
829. POLLOCK BD, Wei C, HARVILLE EW, et al. Differential sex effects of systolic blood pressure and LDL-C on Type 2 diabetes: Life-course data from the Bogalusa Heart Study. *Journal of diabetes* 2018;10:449.
830. Sabin MA, Magnussen CG, Juonala M, et al. Insulin and BMI as predictors of adult type 2 diabetes mellitus. *Pediatrics* 2015;135:e144-e51.
831. Stovitz SD, Banack HR, Kaufman JS. Paediatric obesity appears to lower the risk of diabetes if selection bias is ignored. *J Epidemiol Community Health* 2018;72:302-08.
832. Tanamas SK, Reddy SP, Chambers MA, et al. Effect of severe obesity in childhood and adolescence on risk of type 2 diabetes in youth and early adulthood in an American Indian population. *Pediatric diabetes* 2018;19:622-29.
833. Zimmermann E, Bjerregaard LG, Gamborg M, et al. Childhood body mass index and development of type 2 diabetes throughout adult life—A large-scale Danish cohort study. *Obesity* 2017;25:965-71.
834. Abdullah A, Peeters A, de Courten M, Stoelwinder J. The magnitude of association between overweight and obesity and the risk of diabetes: a meta-analysis of prospective cohort studies. *Diabetes research and clinical practice* 2010;89:309-19.
835. Babu GR, Murthy G, Ana Y, et al. Association of obesity with hypertension and type 2 diabetes mellitus in India: A meta-analysis of observational studies. *World journal of diabetes* 2018;9:40.
836. Chen X, Wu Z, Chen Y, et al. Risk score model of type 2 diabetes prediction for rural Chinese adults: the Rural Deqing Cohort Study. *Journal of endocrinological investigation* 2017;40:1115-23.
837. Cloostermans L, Wendel-Vos W, Doornbos G, et al. Independent and combined effects of physical activity and body mass index on the development of Type 2 Diabetes—a meta-analysis of 9 prospective cohort studies. *International Journal of Behavioral Nutrition and Physical Activity* 2015;12:1-11.
838. Forouhi NG. Association between consumption of dairy products and incident type 2 diabetes—insights from the European Prospective Investigation into Cancer study. *Nutrition reviews* 2015;73:15-22.
839. Gupta P, Lanca C, Gan AT, et al. The association between body composition using dual energy X-ray absorptiometry and type-2 diabetes: a systematic review and meta-analysis of observational studies. *Scientific reports* 2019;9:1-10.
840. Hanley AJ, Wagenknecht LE. Abdominal adiposity and diabetes risk: the importance of precise measures and longitudinal studies. *Diabetes* 2008;57:1153-55.
841. Kodama S, Horikawa C, Fujihara K, et al. Comparisons of the strength of associations with future type 2 diabetes risk among anthropometric obesity indicators, including waist-to-height ratio: a meta-analysis. *American journal of epidemiology* 2012;176:959-69.
842. Lotta LA, Abbasi A, Sharp SJ, et al. Definitions of metabolic health and risk of future type 2 diabetes in BMI categories: a systematic review and network meta-analysis. *Diabetes Care* 2015;38:2177-87.
843. Qin L, Knol MJ, Corpeleijn E, Stolk RP. Does physical activity modify the risk of obesity for type 2 diabetes: a review of epidemiological data. *European journal of epidemiology* 2010;25:5-12.
844. Seo D-C, Choe S, Torabi MR. Is waist circumference  $\geq 102/88$  cm better than body mass index  $\geq 30$  to predict hypertension and diabetes development regardless of gender, age group, and race/ethnicity? Meta-analysis. *Preventive medicine* 2017;97:100-08.
845. Stern MP, Haffner SM. Body fat distribution and hyperinsulinemia as risk factors for diabetes and cardiovascular disease. *Arteriosclerosis: An Official Journal of the American Heart Association, Inc* 1986;6:123-30.



## Supplementary Materials

846. Zhang Y, Pan X-F, Chen J, et al. Combined lifestyle factors and risk of incident type 2 diabetes and prognosis among individuals with type 2 diabetes: a systematic review and meta-analysis of prospective cohort studies. *Diabetologia* 2020;63:21-33.
847. Zou H, Yin P, Liu L, et al. Association between weight cycling and risk of developing diabetes in adults: A systematic review and meta-analysis. *Journal of diabetes investigation* 2021;12:625-32.
848. Alarslan P, Unal Kocabas G, Demir I, et al. Increased urocortin 3 levels are associated with the risk of having type 2 diabetes mellitus. *Journal of diabetes* 2020;12:474-82.
849. Andreassen CH, Mogensen MS, Borch-Johnsen K, et al. Lack of association between PKLR rs3020781 and NOS1AP rs7538490 and type 2 diabetes, overweight, obesity and related metabolic phenotypes in a Danish large-scale study: case-control studies and analyses of quantitative traits. *BMC medical genetics* 2008;9:1-8.
850. Anjana M, Sandeep S, Deepa R, et al. Visceral and central abdominal fat and anthropometry in relation to diabetes in Asian Indians. *Diabetes care* 2004;27:2948-53.
851. Black E, Holst C, Astrup A, et al. Long-term influences of body-weight changes, independent of the attained weight, on risk of impaired glucose tolerance and Type 2 diabetes. *Diabetic medicine* 2005;22:1199-205.
852. Li L, Wang J, Ping Z, et al. Interaction analysis of gene variants of TCF7L2 and body mass index and waist circumference on type 2 diabetes. *Clinical Nutrition* 2020;39:192-97.
853. Li X, Song F, Jiang H, et al. A genetic variation in the fat mass-and obesity-associated gene is associated with obesity and newly diagnosed type 2 diabetes in a Chinese population. *Diabetes/metabolism research and reviews* 2010;26:128-32.
854. Lv X, Zhang L, Sun J, et al. Interaction between peroxisome proliferator-activated receptor gamma polymorphism and obesity on type 2 diabetes in a Chinese Han population. *Diabetology & metabolic syndrome* 2017;9:1-6.
855. Paul SK, Owusu Adjah ES, Samanta M, et al. Comparison of body mass index at diagnosis of diabetes in a multi-ethnic population: A case-control study with matched non-diabetic controls. *Diabetes, Obesity and Metabolism* 2017;19:1014-23.
856. Ren Y, Zhang M, Zhao J, et al. Association of the hypertriglyceridemic waist phenotype and type 2 diabetes mellitus among adults in China. *Journal of diabetes investigation* 2016;7:689-94.
857. Rosenthal A, Jin F, Shu X, et al. Body fat distribution and risk of diabetes among Chinese women. *International journal of obesity* 2004;28:594-99.
858. Shim U, Oh J-Y, Lee HJ, Hong YS, Sung Y-A. Long menstrual cycle is associated with type 2 diabetes mellitus in Korean women. *Diabetes & metabolism journal* 2011;35:384.
859. Villegas R, Delahanty R, Gao Y-T, et al. Joint effect of genetic and lifestyle risk factors on type 2 diabetes risk among Chinese men and women. *PloS One* 2012;7:e49464.
860. Zhu T, Cui J, Goodarzi MO. Polycystic Ovary Syndrome and Risk of Type 2 Diabetes, Coronary Heart Disease, and Stroke. *Diabetes* 2021;70:627-37.
861. Bruno G, Runzo C, Cavallo-Perin P, et al. Incidence of type 1 and type 2 diabetes in adults aged 30–49 years: the population-based registry in the province of Turin, Italy. *Diabetes care* 2005;28:2613-19.
862. Han L, Tang L, Wang C, et al. Fat mass and obesity? associated gene rs11642015 polymorphism is significantly associated with prediabetes and type 2 diabetes subsequent to adjustment for body mass index. *Biomedical reports* 2014;2:681-86.
863. Henninger J, Hammarstedt A, Rawshani A, Eliasson B. Metabolic predictors of impaired glucose tolerance and type 2 diabetes in a predisposed population—A prospective cohort study. *BMC endocrine disorders* 2015;15:1-11.
864. Jee SH, Ahn CW, Park JS, et al. Serum adiponectin and type 2 diabetes: a 6-year follow-up cohort study. *Diabetes & metabolism journal* 2013;37:252.
865. Jeong SM, Han K, Kim D, et al. Body mass index, diabetes, and the risk of Parkinson's disease. *Movement Disorders* 2020;35:236-44.

## Supplementary Materials

866. Jerant A, Franks P. Body mass index, diabetes, hypertension, and short-term mortality: a population-based observational study, 2000–2006. *The Journal of the American Board of Family Medicine* 2012;25:422-31.
867. Kobashi G, Washio M, Okamoto K, et al. High body mass index after age 20 and diabetes mellitus are independent risk factors for ossification of the posterior longitudinal ligament of the spine in Japanese subjects: a case-control study in multiple hospitals. *Spine* 2004;29:1006-10.
868. Sridhar G, Putcha V. Sleep and body weight in diabetes mellitus: a large retrospective analysis from South India. *Diabetes research and clinical practice* 2006;72:209-11.
869. Tait S, Pacheco JM, Gao F, et al. Body mass index, diabetes, and triple-negative breast cancer prognosis. *Breast cancer research and treatment* 2014;146:189-97.
870. Tsur A, Feldman BS, Feldhammer I, et al. Decreased serum concentrations of 25-hydroxycholecalciferol are associated with increased risk of progression to impaired fasting glucose and diabetes. *Diabetes Care* 2013;36:1361-67.
871. Twig G, Tirosh A, Leiba A, et al. BMI at age 17 years and diabetes mortality in midlife: a nationwide cohort of 2.3 million adolescents. *Diabetes Care* 2016;39:1996-2003.
872. Bannasar-Veny M, Fresneda S, López-González A, et al. Lifestyle and Progression to Type 2 Diabetes in a Cohort of Workers with Prediabetes. *Nutrients* 2020;12:1538.
873. Bodicoat DH, Khunti K, Srinivasan B, et al. Incident Type 2 diabetes and the effect of early regression to normoglycaemia in a population with impaired glucose regulation. *Diabetic Medicine* 2017;34:396-404.
874. Chia DB, Wong LY, Liu DYK, Toh MPHS. Predictive factors of developing type 2 diabetes mellitus, acute myocardial infarction and stroke in a cohort with impaired fasting glucose in Singapore. *Diabetes research and clinical practice* 2017;132:59-67.
875. Eriksson K-F, Saltin B, Lindgärde F. Increased skeletal muscle capillary density precedes diabetes development in men with impaired glucose tolerance: a 15-year follow-up. *Diabetes* 1994;43:805-08.
876. Gautier A, Roussel R, Ducluzeau PH, et al. Increases in waist circumference and weight as predictors of type 2 diabetes in individuals with impaired fasting glucose: influence of baseline BMI: data from the DESIR study. *Diabetes care* 2010;33:1850-52.
877. Lao XQ, Deng H-B, Liu X, et al. Increased leisure-time physical activity associated with lower onset of diabetes in 44 828 adults with impaired fasting glucose: a population-based prospective cohort study. *British journal of sports medicine* 2019;53:895-900.
878. LeBlanc ES, Smith NX, Nichols GA, Allison MJ, Clarke GN. Insomnia is associated with an increased risk of type 2 diabetes in the clinical setting. *BMJ Open Diabetes Research and Care* 2018;6.
879. Lee J, Cho YK, Kang YM, et al. The impact of NAFLD and waist circumference changes on diabetes development in prediabetes subjects. *Scientific reports* 2019;9:1-8.
880. Wang J-J, Hu G, Miettinen ME, Tuomilehto J. The metabolic syndrome and incident diabetes: assessment of four suggested definitions of the metabolic syndrome in a Chinese population with high post-prandial glucose. *Hormone and metabolic research* 2004;36:708-15.
881. Burke JP, Williams K, Gaskill SP, et al. Rapid rise in the incidence of type 2 diabetes from 1987 to 1996: results from the San Antonio Heart Study. *Archives of Internal Medicine* 1999;159:1450-56.
882. Hanson RL, Imperatore G, Bennett PH, Knowler WC. Components of the “metabolic syndrome” and incidence of type 2 diabetes. *Diabetes* 2002;51:3120-27.
883. Lipton RB, Uao Y, Cao G, Cooper RS, McGee D. Determinants of Incident Non-Insulin-dependent Diabetes Mellitus among Blacks and Whites in a National Sample: The NHANES I Epidemiologic Follow-up Study. *American journal of epidemiology* 1993;138:826-39.
884. Lönn M, Mehlige K, Bengtsson C, Lissner L. Adipocyte size predicts incidence of type 2 diabetes in women. *The FASEB journal* 2010;24:326-31.

## Supplementary Materials

885. Marley TL, Metzger MW. Peer Reviewed: A Longitudinal Study of Structural Risk Factors for Obesity and Diabetes Among American Indian Young Adults, 1994–2008. *Preventing chronic disease* 2015;12.
886. Pinto G, Beltrán-Sánchez H. Prospective study of the link between overweight/obesity and diabetes incidence among Mexican older adults: 2001-2012. *Salud publica de Mexico* 2015;57:15-21.
887. De Mello VD, Lindström J, Eriksson J, et al. Insulin secretion and its determinants in the progression of impaired glucose tolerance to type 2 diabetes in impaired glucose-tolerant individuals: the Finnish Diabetes Prevention Study. *Diabetes Care* 2012;35:211-17.
888. Izzo R, De Simone G, Chinali M, et al. Insufficient control of blood pressure and incident diabetes. *Diabetes Care* 2009;32:845-50.
889. Ollila M-M, West S, Keinänen-Kiukaanniemi S, et al. Overweight and obese but not normal weight women with PCOS are at increased risk of Type 2 diabetes mellitus—a prospective, population-based cohort study. *Human Reproduction* 2017;32:423-31.
890. Sattar N, Scherbakova O, Ford I, et al. Elevated alanine aminotransferase predicts new-onset type 2 diabetes independently of classical risk factors, metabolic syndrome, and C-reactive protein in the west of Scotland coronary prevention study. *Diabetes* 2004;53:2855-60.
891. Chen R, Song Y, Hu Z, Brunner EJ. Predictors of diabetes in older people in urban China. *PloS one* 2012;7:e50957.
892. Ganz ML, Wintfeld N, Li Q, et al. The association of body mass index with the risk of type 2 diabetes: a case-control study nested in an electronic health records system in the United States. *Diabetology & metabolic syndrome* 2014;6:1-8.
893. Norberg M, Stenlund H, Lindahl B, et al. Work stress and low emotional support is associated with increased risk of future type 2 diabetes in women. *Diabetes research and clinical practice* 2007;76:368-77.
894. Consortium I. Long-term risk of incident type 2 diabetes and measures of overall and regional obesity: the EPIC-InterAct case-cohort study. *PLoS Med* 2012;9:e1001230.
895. Schnurr TM, Jakupović H, Carrasquilla GD, et al. Obesity, unfavourable lifestyle and genetic risk of type 2 diabetes: A case-cohort study. *Diabetologia* 2020;63:1324-32.
896. Baker CF, Overvad K, Dahm CC. Lean body mass and risk of type 2 diabetes—a Danish cohort study. *Journal of Diabetes & Metabolic Disorders* 2019;18:445-51.
897. Schulze MB, Heidemann C, Schienkiewitz A, et al. Comparison of anthropometric characteristics in predicting the incidence of type 2 diabetes in the EPIC-Potsdam study. *Diabetes care* 2006;29:1921-23.
898. Someya Y, Kawai S, Kohmura Y, Aoki K, Daida H. Cardiorespiratory fitness and the incidence of type 2 diabetes: a cohort study of Japanese male athletes. *BMC public health* 2014;14:1-6.
899. Adegbija O, Hoy W, Wang Z. Predicting absolute risk of type 2 diabetes using age and waist circumference values in an aboriginal Australian community. *PloS one* 2015;10:e0123788.
900. Aekplakorn W, Bunnag P, Woodward M, et al. A risk score for predicting incident diabetes in the Thai population. *Diabetes care* 2006;29:1872-77.
901. Alam MS, Dyck R, Janzen B, et al. Risk factors, incidence, and prevalence of diabetes among rural farm and non-farm residents of Saskatchewan, Canada; a population-based longitudinal cohort study. *Journal of Diabetes & Metabolic Disorders* 2020:1-20.
902. Appleton SL, Seaborn CJ, Visvanathan R, et al. Diabetes and cardiovascular disease outcomes in the metabolically healthy obese phenotype: a cohort study. *Diabetes care* 2013;36:2388-94.
903. Ärnlöv J, Sundström J, Ingelsson E, Lind L. Impact of BMI and the metabolic syndrome on the risk of diabetes in middle-aged men. *Diabetes care* 2011;34:61-65.
904. Asghar S, Khan AKA, Ali SMK, et al. Incidence of diabetes in Asian-Indian subjects: a five year follow-up study from Bangladesh. *Primary care diabetes* 2011;5:117-24.

## Supplementary Materials

905. Bae JC, Cho NH, Kim JH, et al. Association of Body Mass Index with the Risk of Incident Type 2 Diabetes, Cardiovascular Disease, and All-Cause Mortality: A Community-Based Prospective Study. *Endocrinology and Metabolism* 2020;35:416-24.
906. Balkau B, Soulimane S, Lange C, et al. Are the same clinical risk factors relevant for incident diabetes defined by treatment, fasting plasma glucose, and HbA1c? *Diabetes Care* 2011;34:957-59.
907. Bancks MP, Kershaw K, Carson AP, et al. Association of modifiable risk factors in young adulthood with racial disparity in incident type 2 diabetes during middle adulthood. *Jama* 2017;318:2457-65.
908. Berkowitz SA, Fabreau GE, Raghavan S, et al. Risk of developing diabetes among refugees and immigrants: a longitudinal analysis. *Journal of community health* 2016;41:1274-81.
909. Biggs ML, Mukamal KJ, Luchsinger JA, et al. Association between adiposity in midlife and older age and risk of diabetes in older adults. *Jama* 2010;303:2504-12.
910. Bjerregaard LG, Wasenius N, Nedelec R, et al. Possible modifiers of the association between change in weight status from child through adult ages and later risk of type 2 diabetes. *Diabetes care* 2020;43:1000-07.
911. Bjørnholt J, Erikssen G, Liestøl K, et al. Prediction of Type 2 diabetes in healthy middle-aged men with special emphasis on glucose homeostasis. Results from 22.5 years' follow-up. *Diabetic medicine* 2001;18:261-67.
912. Bonora E, Kiechl S, Willeit J, et al. Population-based incidence rates and risk factors for type 2 diabetes in white individuals: the Bruneck study. *Diabetes* 2004;53:1782-89.
913. Bozorgmanesh M, Hadaegh F, Azizi F. Predictive performance of the visceral adiposity index for a visceral adiposity-related risk: type 2 diabetes. *Lipids in Health and Disease* 2011;10:1-9.
914. Bragg F, Tang K, Guo Y, et al. Associations of general and central adiposity with incident diabetes in Chinese men and women. *Diabetes care* 2018;41:494-502.
915. Brahimaj A, Rivadeneira F, Muka T, et al. Novel metabolic indices and incident type 2 diabetes among women and men: the Rotterdam Study. *Diabetologia* 2019;62:1581-90.
916. Burke V, Zhao Y, Lee AH, et al. Predictors of type 2 diabetes and diabetes-related hospitalisation in an Australian Aboriginal cohort. *Diabetes research and clinical practice* 2007;78:360-68.
917. Caerphilly T, Group SC. Caerphilly and Speedwell collaborative heart disease studies. *Journal of Epidemiology and Community Health (1979-)* 1984;259-62.
918. Cameron NA, Petito LC, McCabe M, et al. Quantifying the sex-race/ethnicity-specific burden of obesity on incident diabetes mellitus in the United States, 2001 to 2016: MESA and NHANES. *Journal of the American Heart Association* 2021;10:e018799.
919. Carlsson S, Midthjell K, Tesfamarian M, Grill V. Age, overweight and physical inactivity increase the risk of latent autoimmune diabetes in adults: results from the Nord-Trøndelag health study. *Diabetologia* 2007;50:55-58.
920. Carvalho LSF, Benseñor IM, Nogueira AC, et al. Increased particle size of triacylglycerol-enriched remnant lipoproteins, but not their plasma concentration or lipid content, augments risk prediction of incident type 2 diabetes. *Diabetologia* 2021;64:385-96.
921. Chan JCY, Chee ML, Tan NYQ, et al. Differential effect of body mass index on the incidence of diabetes and diabetic retinopathy in two Asian populations. *Nutrition & diabetes* 2018;8:1-11.
922. Chang Y, Jung HS, Yun KE, et al. Metabolically healthy obesity is associated with an increased risk of diabetes independently of nonalcoholic fatty liver disease. *Obesity* 2016;24:1996-2003.
923. Chei C-L, Iso H, Yamagishi K, et al. Body fat distribution and the risk of hypertension and diabetes among Japanese men and women. *Hypertension Research* 2008;31:851-57.
924. Chen C, Xu Y, Guo Z-r, et al. The application of visceral adiposity index in identifying type 2 diabetes risks based on a prospective cohort in China. *Lipids in health and disease* 2014;13:1-8.

## Supplementary Materials

925. Chen C-C, Liu K, Hsu C-C, et al. Healthy lifestyle and normal waist circumference are associated with a lower 5-year risk of type 2 diabetes in middle-aged and elderly individuals: Results from the healthy aging longitudinal study in Taiwan (HALST). *Medicine* 2017;96.
926. Chen K-T, Chen C-J, Gregg EW, Imperatore G, Narayan K. Impaired fasting glucose and risk of diabetes in Taiwan: follow-up over 3 years. *Diabetes research and clinical practice* 2003;60:177-82.
927. Chen L, Li Y, Zhang F, et al. Elevated serum ferritin concentration is associated with incident type 2 diabetes mellitus in a Chinese population: A prospective cohort study. *Diabetes research and clinical practice* 2018;139:155-62.
928. Chen Y, Zhang X-P, Yuan J, et al. Association of body mass index and age with incident diabetes in Chinese adults: a population-based cohort study. *BMJ open* 2018;8:e021768.
929. Chung Y-S, Harada KH, Igari K, Ishizuka J, Koizumi A. The incidence of diabetes among the non-diabetic residents in Kawauchi village, Fukushima, who experienced evacuation after the 2011 Fukushima Daiichi nuclear power plant disaster. *Environmental health and preventive medicine* 2020;25:1-10.
930. Conway B, Xiang Y-B, Villegas R, et al. Hip circumference and the risk of type 2 diabetes in middle-aged and elderly men and women: the Shanghai women and Shanghai men's health studies. *Annals of epidemiology* 2011;21:358-66.
931. Cugati S, Wang JJ, Rochtchina E, Mitchell P. Ten-year incidence of diabetes in older Australians: the Blue Mountains Eye Study. *Medical journal of Australia* 2007;186:131-35.
932. Dai N, Shi Q, Hua Y, et al. Internal fat mediates the impact of age on diabetes onset in chinese people between 30 and 44 years old. *Endocrinología, Diabetes y Nutrición (English ed)* 2020;67:594-601.
933. Dawson S, Smith W, Watson M, et al. A cohort study of reproductive risk factors, weight and weight change and the development of diabetes mellitus. *Diabetes, Obesity and Metabolism* 2003;5:244-50.
934. de Oliveira CM, Pavani J, Krieger JE, et al. Body adiposity index in assessing the risk of type 2 diabetes mellitus development: the Baependi Heart Study. *Diabetology & metabolic syndrome* 2019;11:1-4.
935. DeJesus RS, Breitkopf CR, Rutten LJ, et al. Incidence rate of prediabetes progression to diabetes: modeling an optimum target group for intervention. *Population health management* 2017;20:216-23.
936. Derakhshan A, Sardarinia M, Khalili D, et al. Sex specific incidence rates of type 2 diabetes and its risk factors over 9 years of follow-up: Tehran Lipid and Glucose Study. *PLoS one* 2014;9:e102563.
937. Ding J, Chen X, Bao K, et al. Assessing different anthropometric indices and their optimal cutoffs for prediction of type 2 diabetes and impaired fasting glucose in Asians: The Jinchang Cohort Study. *Journal of diabetes* 2020;12:372-84.
938. Dotevall A, Johansson S, Wilhelmsen L, Rosengren A. Increased levels of triglycerides, BMI and blood pressure and low physical activity increase the risk of diabetes in Swedish women. A prospective 18-year follow-up of the BEDA\* study. *Diabetic Medicine* 2004;21:615-22.
939. Dunstan DW, Zimmet PZ, Welborn TA, et al. The Australian diabetes, obesity and lifestyle study (AusDiab)—methods and response rates. *Diabetes research and clinical practice* 2002;57:119-29.
940. Ebrahimi H, Emamian MH, Hashemi H, Fotouhi A. High incidence of diabetes mellitus among a middle-aged population in Iran: a longitudinal study. *Canadian journal of diabetes* 2016;40:570-75.
941. Fan Y, Wang R, Ding L, et al. Waist circumference and its changes are more strongly associated with the risk of type 2 diabetes than body mass index and changes in body weight in Chinese adults. *The Journal of nutrition* 2020;150:1259-65.

## Supplementary Materials

942. Feng C, Osgood ND, Dyck RF. Low birth weight, cumulative obesity dose, and the risk of incident type 2 diabetes. *Journal of diabetes research* 2018;2018.
943. Feng G-S, Li H-L, Shen Q-M, et al. Population attributable risk of excess weight, abdominal obesity and physical inactivity for type 2 diabetes in Chinese men and women. *Annals of Translational Medicine* 2021;9.
944. Feng S, Gong X, Liu H, et al. The diabetes risk and determinants of transition from metabolically healthy to unhealthy phenotypes in 49,702 older adults: 4-year cohort study. *Obesity* 2020;28:1141-48.
945. Fingeret M, Marques-Vidal P, Vollenweider P. Incidence of type 2 diabetes, hypertension, and dyslipidemia in metabolically healthy obese and non-obese. *Nutrition, Metabolism and Cardiovascular Diseases* 2018;28:1036-44.
946. Ford ES, Williamson DF, Liu S. Weight change and diabetes incidence: findings from a national cohort of US adults. *American journal of epidemiology* 1997;146:214-22.
947. Fujita M, Ueno K, Hata A. Effect of obesity on incidence of type 2 diabetes declines with age among Japanese women. *Experimental biology and medicine* 2009;234:750-57.
948. Fukuda T, Hamaguchi M, Kojima T, et al. The impact of non-alcoholic fatty liver disease on incident type 2 diabetes mellitus in non-overweight individuals. *Liver International* 2016;36:275-83.
949. Gil-Montalbán E, Martín-Ríos M, Ortiz-Marrón H, et al. Incidence of type 2 diabetes and associated factors in the adult population of the community of Madrid. PREDIMERC cohort. *Revista Clínica Española (English Edition)* 2015;215:495-502.
950. Group DPPR. Relationship of body size and shape to the development of diabetes in the diabetes prevention program. *Obesity* 2006;14:2107-17.
951. Hackett RA, Hudson JL, Chilcot J. Loneliness and type 2 diabetes incidence: findings from the English Longitudinal Study of Ageing. *Diabetologia* 2020;63:2329-38.
952. Hadaegh F, Shafiee G, Azizi F. Anthropometric predictors of incident type 2 diabetes mellitus in Iranian women. *Annals of Saudi medicine* 2009;29:194-200.
953. Hadaegh F, Zabetian A, Harati H, Azizi F. Waist/height ratio as a better predictor of type 2 diabetes compared to body mass index in Tehranian adult men-a 3.6-year prospective study. *Experimental and clinical endocrinology & diabetes* 2006;114:310-15.
954. Haffner SM, Mitchell BD, Hazuda HP, Stern MP. Greater influence of central distribution of adipose tissue on incidence of non-insulin-dependent diabetes in women than men. *The American journal of clinical nutrition* 1991;53:1312-17.
955. Han C, Liu Y, Sun X, et al. Prediction of a new body shape index and body adiposity estimator for development of type 2 diabetes mellitus: The Rural Chinese Cohort Study. *British Journal of Nutrition* 2017;118:771-76.
956. Hardy DS, Stallings DT, Garvin JT, Xu H, Racette SB. Best anthropometric discriminators of incident type 2 diabetes among white and black adults: A longitudinal ARIC study. *PloS one* 2017;12:e0168282.
957. Hart C, Hole D, Lawlor D, Davey Smith G. How many cases of Type 2 diabetes mellitus are due to being overweight in middle age? Evidence from the Midspan prospective cohort studies using mention of diabetes mellitus on hospital discharge or death records. *Diabetic Medicine* 2007;24:73-80.
958. Hartwig S, Kluttig A, Tiller D, et al. Anthropometric markers and their association with incident type 2 diabetes mellitus: which marker is best for prediction? Pooled analysis of four German population-based cohort studies and comparison with a nationwide cohort study. *BMJ open* 2016;6.
959. He S, Chen X. Could the new body shape index predict the new onset of diabetes mellitus in the Chinese population? *PloS one* 2013;8:e50573.
960. Low lung function and risk of type 2 diabetes in Japanese men: the Toranomon Hospital Health Management Center Study 9 (TOPICS 9). Mayo Clinic Proceedings; 2012. Elsevier.

## Supplementary Materials

961. Hinnouho G-M, Czernichow S, Dugravot A, et al. Metabolically healthy obesity and the risk of cardiovascular disease and type 2 diabetes: the Whitehall II cohort study. *European heart journal* 2015;36:551-59.
962. Hjerkind KV, Stenehjem JS, Nilsen TI. Adiposity, physical activity and risk of diabetes mellitus: prospective data from the population-based HUNT study, Norway. *BMJ open* 2017;7:e013142.
963. Holtermann A, Gyntelberg F, Bauman A, Jensen MT. Cardiorespiratory fitness, fatness and incident diabetes. *Diabetes research and clinical practice* 2017;134:113-20.
964. Hu G, Jousilahti P, Peltonen M, Bidel S, Tuomilehto J. Joint association of coffee consumption and other factors to the risk of type 2 diabetes: a prospective study in Finland. *International journal of obesity* 2006;30:1742-49.
965. Hu H, Nagahama S, Nanri A, et al. Duration and degree of weight change and risk of incident diabetes: Japan Epidemiology Collaboration on Occupational Health Study. *Preventive medicine* 2017;96:118-23.
966. Huerta JM, Tormo M-J, Chirlaque M-D, et al. Risk of type 2 diabetes according to traditional and emerging anthropometric indices in Spain, a Mediterranean country with high prevalence of obesity: results from a large-scale prospective cohort study. *BMC endocrine disorders* 2013;13:1-13.
967. Hwang Y-C, Hayashi T, Fujimoto WY, et al. Differential association between HDL subclasses and the development of type 2 diabetes in a prospective study of Japanese Americans. *Diabetes care* 2015;38:2100-05.
968. Ishikawa-Takata K, Ohta T, Moritaki K, Gotou T, Inoue S. Obesity, weight change and risks for hypertension, diabetes and hypercholesterolemia in Japanese men. *European journal of clinical nutrition* 2002;56:601-07.
969. Jackson SL, Long Q, Rhee MK, et al. Weight loss and incidence of diabetes with the Veterans Health Administration MOVE! lifestyle change programme: an observational study. *The lancet Diabetes & endocrinology* 2015;3:173-80.
970. Jacobsen BK, Børnaa KH, Njølstad I. Cardiovascular risk factors, change in risk factors over 7 years, and the risk of clinical diabetes mellitus type 2: the Tromsø study. *Journal of clinical epidemiology* 2002;55:647-53.
971. Jacobs-van Der Bruggen MA, Spijkerman A, Van Baal PH, et al. Weight change and incident diabetes: addressing an unresolved issue. *American journal of epidemiology* 2010;172:263-70.
972. Jae SY, Franklin BA, Choo J, et al. Fitness, body habitus, and the risk of incident type 2 diabetes mellitus in Korean men. *The American journal of cardiology* 2016;117:585-89.
973. Jafari-Koshki T, Mansourian M, Hosseini SM, Amini M. Association of waist and hip circumference and waist-hip ratio with type 2 diabetes risk in first-degree relatives. *Journal of Diabetes and its Complications* 2016;30:1050-55.
974. Janghorbani M, Amini M. Comparison of body mass index with abdominal obesity indicators and waist-to-stature ratio for prediction of type 2 diabetes: The Isfahan diabetes prevention study. *Obesity Research & Clinical Practice* 2010;4:e25-e32.
975. Janghorbani M, Amini M. Associations of hip circumference and height with incidence of type 2 diabetes: the Isfahan diabetes prevention study. *Acta diabetologica* 2012;49:107-14.
976. Janghorbani M, Amini M. The visceral adiposity index in comparison with easily measurable anthropometric markers did not improve prediction of diabetes. *Canadian journal of diabetes* 2016;40:393-98.
977. Jia Z, Zhou Y, Liu X, et al. Comparison of different anthropometric measures as predictors of diabetes incidence in a Chinese population. *Diabetes research and clinical practice* 2011;92:265-71.
978. Jung CH, Kang YM, Jang JE, et al. Fatty liver index is a risk determinant of incident type 2 diabetes in a metabolically healthy population with obesity. *Obesity* 2016;24:1373-79.
979. Jung HH, Park JI, Jeong JS. Incidence of diabetes and its mortality according to body mass index in South Koreans aged 40–79 years. *Clinical epidemiology* 2017;9:667.

## Supplementary Materials

980. Jung HS, Chang Y, Eun Yun K, et al. Impact of body mass index, metabolic health and weight change on incident diabetes in a Korean population. *Obesity* 2014;22:1880-87.
981. Kametani T, Koshida H, Nagaoka T, Miyakoshi H. Hypertriglyceridemia is an independent risk factor for development of impaired fasting glucose and diabetes mellitus: a 9-year longitudinal study in Japanese. *Internal medicine* 2002;41:516-21.
982. Kanaya AM, Fyr CW, Vittinghoff E, et al. Adipocytokines and incident diabetes mellitus in older adults: the independent effect of plasminogen activator inhibitor 1. *Archives of Internal Medicine* 2006;166:350-56.
983. Kaneto C, Toyokawa S, Miyoshi Y, Suyama Y, Kobayashi Y. Long-term weight change in adulthood and incident diabetes mellitus: MY Health Up Study. *Diabetes research and clinical practice* 2013;102:138-46.
984. Kang L, Jia L, Han P, et al. Combined effect of obesity and mobility limitation with incidence of type 2 diabetes and mortality in Chinese elderly. *Rejuvenation research* 2017;20:375-82.
985. Katzmarzyk P, Craig C, Gauvin L. Adiposity, physical fitness and incident diabetes: the physical activity longitudinal study. *Diabetologia* 2007;50:538-44.
986. Kim H-K, Lee MJ, Kim E-H, et al. Longitudinal changes of body composition phenotypes and their association with incident type 2 diabetes mellitus during a 5-year follow-up in Koreans. *Diabetes & metabolism journal* 2019;43:627.
987. Kittithaworn A, Dy R, Hatthachote P, et al. Incidence and associated factors of Type 2 diabetes: a community-based cohort study in the central region of rural community in Thailand. *Asia Pacific Journal of Public Health* 2019;31:72-83.
988. Klein BE, Klein R, Lee KE. Components of the metabolic syndrome and risk of cardiovascular disease and diabetes in Beaver Dam. *Diabetes care* 2002;25:1790-94.
989. Koloverou E, Panagiotakos DB, Kyrou I, et al. Visceral adiposity index outperforms common anthropometric indices in predicting 10-year diabetes risk: Results from the ATTICA study. *Diabetes/metabolism research and reviews* 2019;35:e3161.
990. Kotronen A, Laaksonen MA, Heliövaara M, et al. Fatty liver score and 15-year incidence of type 2 diabetes. *Hepatology international* 2013;7:610-21.
991. Kulick ER, Moon YP, Cheung K, et al. Racial-ethnic disparities in the association between risk factors and diabetes: The Northern Manhattan Study. *Preventive medicine* 2016;83:31-36.
992. Kuwabara M, Kuwabara R, Hisatome I, et al. "Metabolically Healthy" obesity and hyperuricemia increase risk for hypertension and diabetes: 5-year Japanese Cohort Study. *Obesity* 2017;25:1997-2008.
993. Lamichhane AP, Couper D, Jenkins GP, Stevens J. Longitudinal Associations Between Body Mass Index During Young Adulthood, Subsequent Weight Change, and Incident Diabetes During Mid-and Older-Adulthood in Non-Hispanic White and African American Populations: The Atherosclerosis Risk in Communities Study. *Metabolic Syndrome and Related Disorders* 2020;18:313-20.
994. Lee D-c, Sui X, Church TS, Lee I-M, Blair SN. Associations of cardiorespiratory fitness and obesity with risks of impaired fasting glucose and type 2 diabetes in men. *Diabetes care* 2009;32:257-62.
995. Lee DY, Lee ES, Kim JH, et al. Predictive value of triglyceride glucose index for the risk of incident diabetes: a 4-year retrospective longitudinal study. *PLoS one* 2016;11:e0163465.
996. Lee M-K, Han K, Kim MK, et al. Combinations of metabolic syndrome components and the risk of type 2 diabetes mellitus: A nationwide cohort study. *Diabetes Research and Clinical Practice* 2020;165:108237.
997. Ley SH, Harris SB, Mamakeesick M, et al. Metabolic syndrome and its components as predictors of incident type 2 diabetes mellitus in an Aboriginal community. *Cmaj* 2009;180:617-24.
998. Li W-D, Fu K-F, Li G-M, et al. Comparison of effects of obesity and non-alcoholic fatty liver disease on incidence of type 2 diabetes mellitus. *World Journal of Gastroenterology: WJG* 2015;21:9607.



## Supplementary Materials

999. Li Y, Yatsuya H, Iso H, Toyoshima H, Tamakoshi K. Inverse relationship of serum adiponectin concentration with type 2 diabetes mellitus incidence in middle-aged Japanese workers: six-year follow-up. *Diabetes/metabolism research and reviews* 2012;28:349-56.
1000. Lissner L, Björkelund C, Heitmann BL, Seidell JC, Bengtsson C. Larger hip circumference independently predicts health and longevity in a Swedish female cohort. *Obesity research* 2001;9:644-46.
1001. Liu K, He S, Hong B, et al. Over time, do anthropometric measures still predict diabetes incidence in Chinese Han nationality population from Chengdu community? *International journal of endocrinology* 2013;2013.
1002. Liu Q, Yuan J, Bakeyi M, et al. Development and Validation of a Nomogram to Predict Type 2 Diabetes Mellitus in Overweight and Obese Adults: A Prospective Cohort Study from 82938 Adults in China. *International Journal of Endocrinology* 2020;2020.
1003. Liu W, Liu J, Shao S, et al. Obesity at a young age is associated with development of diabetes mellitus: A prospective cohort study in rural China. *Postgraduate Medicine* 2020;132:709-13.
1004. Liu X, Fine JP, Chen Z, et al. Prediction of the 20-year incidence of diabetes in older Chinese: application of the competing risk method in a longitudinal study. *Medicine* 2016;95.
1005. Liu X, Li Z, Zhang J, et al. A novel risk score for type 2 diabetes containing sleep duration: a 7-year prospective cohort study among Chinese participants. *Journal of diabetes research* 2020;2020.
1006. Lorenzo C, Williams K, Stern MP, Haffner SM. Height, ethnicity, and the incidence of diabetes: the San Antonio Heart Study. *Metabolism* 2009;58:1530-35.
1007. Luo D, Liu F, Li X, et al. Comparison of the effect of 'metabolically healthy but obese' and 'metabolically abnormal but not obese' phenotypes on development of diabetes and cardiovascular disease in Chinese. *Endocrine* 2015;49:130-38.
1008. Luo J, Hendryx M, Laddu D, et al. Racial and ethnic differences in anthropometric measures as risk factors for diabetes. *Diabetes Care* 2019;42:126-33.
1009. Luo W, Guo Z, Wu M, et al. Interaction of smoking and obesity on type 2 diabetes risk in a Chinese cohort. *Physiology & behavior* 2015;139:240-43.
1010. Lv J, Yu C, Guo Y, et al. Adherence to a healthy lifestyle and the risk of type 2 diabetes in Chinese adults. *International journal of epidemiology* 2017;46:1410-20.
1011. Lyssenko V, Jørgensen T, Gerwien RW, et al. Validation of a multi-marker model for the prediction of incident type 2 diabetes mellitus: combined results of the Inter99 and Botnia studies. *Diabetes and Vascular Disease Research* 2012;9:59-67.
1012. Ma H, Wu X, Guo X, et al. Optimal body mass index cut-off points for prediction of incident diabetes in a Chinese population. *Journal of diabetes* 2018;10:926-33.
1013. Magliano DJ, Barr EL, Zimmet PZ, et al. Glucose indices, health behaviors, and incidence of diabetes in Australia: the Australian Diabetes, Obesity and Lifestyle Study. *Diabetes care* 2008;31:267-72.
1014. Marott SC, Nordestgaard BG, Tybjaerg-Hansen A, Benn M. Components of the metabolic syndrome and risk of type 2 diabetes. *The Journal of Clinical Endocrinology & Metabolism* 2016;101:3212-21.
1015. McDermott RA, Li M, Campbell SK. Incidence of type 2 diabetes in two Indigenous Australian populations: a 6-year follow-up study. *Medical Journal of Australia* 2010;192:562-65.
1016. Mehlig K, Skoog I, Waern M, et al. Physical activity, weight status, diabetes and dementia: a 34-year follow-up of the population study of women in Gothenburg. *Neuroepidemiology* 2014;42:252-59.
1017. Meigs JB, Wilson PW, Fox CS, et al. Body mass index, metabolic syndrome, and risk of type 2 diabetes or cardiovascular disease. *The Journal of Clinical Endocrinology & Metabolism* 2006;91:2906-12.
1018. Meisinger C, Döring A, Thorand B, Heier M, Löwel H. Body fat distribution and risk of type 2 diabetes in the general population: are there differences between men and women? The

## Supplementary Materials

- MONICA/KORA Augsburg cohort study. *The American journal of clinical nutrition* 2006;84:483-89.
1019. Miller GJ, Maude GH, Beckles G. Incidence of hypertension and non-insulin dependent diabetes mellitus and associated risk factors in a rapidly developing Caribbean community: the St James survey, Trinidad. *Journal of Epidemiology & Community Health* 1996;50:497-504.
1020. Mitsuhashi K, Hashimoto Y, Tanaka M, et al. Combined effect of body mass index and waist-height ratio on incident diabetes; a population based cohort study. *Journal of clinical biochemistry and nutrition* 2017;61:118-22.
1021. Monterrosa AE, Haffner SM, Stern MP, Hazuda HP. Sex difference in lifestyle factors predictive of diabetes in Mexican-Americans. *Diabetes care* 1995;18:448-56.
1022. Mukai N, Doi Y, Ninomiya T, et al. Impact of metabolic syndrome compared with impaired fasting glucose on the development of type 2 diabetes in a general Japanese population: the Hisayama study. *Diabetes Care* 2009;32:2288-93.
1023. Mustafina SV, Rymar OD, Shcherbakova LV, et al. The Risk of Type 2 Diabetes Mellitus in a Russian Population Cohort According to Data from the HAPIEE Project. *Journal of Personalized Medicine* 2021;11:119.
1024. Nagaya T, Yoshida H, Takahashi H, Kawai M. Increases in body mass index, even within non-obese levels, raise the risk for Type 2 diabetes mellitus: a follow-up study in a Japanese population. *Diabetic medicine* 2005;22:1107-11.
1025. Nakanishi N, Takatorige T, Fukuda H, et al. Components of the metabolic syndrome as predictors of cardiovascular disease and type 2 diabetes in middle-aged Japanese men. *Diabetes research and clinical practice* 2004;64:59-70.
1026. Namayandeh SM, Karimi A, Fallahzadeh H, et al. The incidence rate of diabetes mellitus (type II) and its related risk factors: A 10-year longitudinal study of Yazd Healthy Heart Cohort (YHHC), Iran. *Diabetes & Metabolic Syndrome: Clinical Research & Reviews* 2019;13:1437-41.
1027. Narayan KV, Kondal D, Kobes S, et al. Incidence of diabetes in South Asian young adults compared to Pima Indians. *BMJ Open Diabetes Research and Care* 2021;9:e001988.
1028. Narisada A, Shibata E, Hasegawa T, et al. Sex differences in the association between fatty liver and type 2 diabetes incidence in non-obese Japanese: a retrospective cohort study. *Journal of Diabetes Investigation*.
1029. Navarro-González D, Sánchez-Íñigo L, Fernández-Montero A, Pastrana-Delgado J, Alfredo Martínez J. Are all metabolically healthy individuals with obesity at the same risk of diabetes onset? *Obesity* 2016;24:2615-23.
1030. Nemesure B, Wu S-Y, Hennis A, Leske MC, Group BS. The relationship of body mass index and waist-hip ratio on the 9-year incidence of diabetes and hypertension in a predominantly African-origin population. *Annals of epidemiology* 2008;18:657-63.
1031. Nichols GA, Hillier TA, Brown JB. Normal fasting plasma glucose and risk of type 2 diabetes diagnosis. *The American journal of medicine* 2008;121:519-24.
1032. Njølstad I, Amesen E, Lund-Larsen P. Sex differences in risk factors for clinical diabetes mellitus in a general population: a 12-year follow-up of the Finnmark Study. *American journal of Epidemiology* 1998;147:49-58.
1033. Novak M, Björck L, Giang KW, et al. Perceived stress and incidence of Type 2 diabetes: a 35-year follow-up study of middle-aged Swedish men. *Diabetic medicine* 2013;30:e8-e16.
1034. Nyamdorj R, Qiao Q, Söderberg S, et al. BMI compared with central obesity indicators as a predictor of diabetes incidence in Mauritius. *Obesity* 2009;17:342-48.
1035. Oh TJ, Moon JH, Choi SH, et al. Development of a clinical risk score for incident diabetes: A 10-year prospective cohort study. *Journal of diabetes investigation* 2021;12:610-18.
1036. Okada H, Hamaguchi M, Habu M, et al. Association between variability in body mass index and development of type 2 diabetes: Panasonic cohort study. *BMJ Open Diabetes Research and Care* 2021;9:e002123.

## Supplementary Materials

1037. Okamura T, Hashimoto Y, Hamaguchi M, et al. Ectopic fat obesity presents the greatest risk for incident type 2 diabetes: a population-based longitudinal study. *International journal of obesity* 2019;43:139-48.
1038. Onat A, Hergenç G, Bulur S, et al. The paradox of high apolipoprotein AI levels independently predicting incident type-2 diabetes among Turks. *International journal of cardiology* 2010;142:72-79.
1039. Ould Setti M. Health behaviors, comorbidities, and life expectancy in middle-aged men: The KIHJ study. Itä-Suomen yliopisto, 2019.
1040. Pajunen P, Rissanen H, Laaksonen MA, et al. Sagittal abdominal diameter as a new predictor for incident diabetes. *Diabetes care* 2013;36:283-88.
1041. Park Y, Kim NH, Kwon TY, Kim SG. A novel adiposity index as an integrated predictor of cardiometabolic disease morbidity and mortality. *Scientific reports* 2018;8:1-8.
1042. Parker ED, Pereira MA, Stevens J, Folsom AR. Association of hip circumference with incident diabetes and coronary heart disease: the Atherosclerosis Risk in Communities study. *American journal of epidemiology* 2009;169:837-47.
1043. Poljičanin T, Šekerija M, Boras J, et al. Cumulative incidence of self-reported diabetes in Croatian adult population in relation to socioeconomic status and lifestyle habits. *Collegium antropologicum* 2012;36:41-46.
1044. Rathmann W, Strassburger K, Heier M, et al. Incidence of Type 2 diabetes in the elderly German population and the effect of clinical and lifestyle risk factors: KORA S4/F4 cohort study. *Diabetic Medicine* 2009;26:1212-19.
1045. Regmi D, Al-Shamsi S, Govender RD, Al Kaabi J. Incidence and risk factors of type 2 diabetes mellitus in an overweight and obese population: a long-term retrospective cohort study from a Gulf state. *BMJ open* 2020;10:e035813.
1046. Rolandsson O, Hägg E, Nilsson M, et al. Prediction of diabetes with body mass index, oral glucose tolerance test and islet cell autoantibodies in a regional population. *Journal of internal medicine* 2001;249:279-88.
1047. Ryu S-H, Beck S-H, Kim D-I, et al. Abdominal obesity in relation to the incidence of type 2 diabetes mellitus and impaired fasting glucose among some Korean adults: a retrospective cohort study. *Journal of Preventive Medicine and Public Health* 2004;37:359-65.
1048. Sakurai M, Miura K, Takamura T, et al. J-shaped relationship between waist circumference and subsequent risk for Type 2 diabetes: an 8-year follow-up of relatively lean Japanese individuals. *Diabetic medicine* 2009;26:753-59.
1049. Salminen M, Vahlberg T, Rähä I, et al. Sex hormones and the risk of type 2 diabetes mellitus: A 9-year follow up among elderly men in F inland. *Geriatrics & gerontology international* 2015;15:559-64.
1050. Sanada H, Yokokawa H, Yoneda M, et al. High body mass index is an important risk factor for the development of type 2 diabetes. *Internal Medicine* 2012;51:1821-26.
1051. Sans S, Padro T, Tuomilehto J, Badimon L. Incidence of diabetes and serum adipokines in Catalonian men. The ADIPOCAT study. *Annals of medicine* 2013;45:97-102.
1052. Sares-Jäske L, Knekt P, Eranti A, et al. Intentional weight loss as a predictor of type 2 diabetes occurrence in a general adult population. *BMJ Open Diabetes Research and Care* 2020;8:e001560.
1053. Sargeant LA, Bennett FI, Forrester TE, Cooper RS, Wilks RJ. Predicting incident diabetes in Jamaica: the role of anthropometry. *Obesity research* 2002;10:792-98.
1054. Relationship between obesity and incident diabetes in middle-aged and older Japanese adults: the Ibaraki Prefectural Health Study. Mayo Clinic Proceedings; 2010. Elsevier.
1055. Sattar N, Gaw A, Scherbakova O, et al. Metabolic syndrome with and without C-reactive protein as a predictor of coronary heart disease and diabetes in the West of Scotland Coronary Prevention Study. *Circulation* 2003;108:414-19.

## Supplementary Materials

1056. Sawada SS, Lee I-M, Naito H, et al. Long-term trends in cardiorespiratory fitness and the incidence of type 2 diabetes. *Diabetes care* 2010;33:1353-57.
1057. Schmidt M, Johannesdottir SA, Lemeshow S, et al. Obesity in young men, and individual and combined risks of type 2 diabetes, cardiovascular morbidity and death before 55 years of age: a Danish 33-year follow-up study. *BMJ open* 2013;3.
1058. Schulze M, Thorand B, Fritsche A, et al. Body adiposity index, body fat content and incidence of type 2 diabetes. *Diabetologia* 2012;55:1660-67.
1059. Seclen SN, Rosas ME, Arias AJ, Medina CA. Elevated incidence rates of diabetes in Peru: report from PERUDIAB, a national urban population-based longitudinal study. *BMJ Open Diabetes Research and Care* 2017;5.
1060. Shani M, Vinker S, Dinour D, et al. High normal uric acid levels are associated with an increased risk of diabetes in lean, normoglycemic healthy women. *The Journal of Clinical Endocrinology & Metabolism* 2016;101:3772-78.
1061. Simchoni M, Hamiel U, Pinhas-Hamiel O, et al. Adolescent BMI and early-onset type 2 diabetes among Ethiopian immigrants and their descendants: a nationwide study. *Cardiovascular diabetology* 2020;19:1-11.
1062. Sinn DH, Kang D, Cho SJ, et al. Lean non-alcoholic fatty liver disease and development of diabetes: a cohort study. *European journal of endocrinology* 2019;181:185-92.
1063. Sloan RA, Sawada SS, Lee I-M, et al. The association of fit-fat index with incident diabetes in Japanese men: a prospective cohort study. *Scientific reports* 2018;8:1-6.
1064. Snijder MB, Dekker JM, Visser M, et al. Associations of hip and thigh circumferences independent of waist circumference with the incidence of type 2 diabetes: the Hoorn Study. *The American journal of clinical nutrition* 2003;77:1192-97.
1065. Someya Y, Tamura Y, Kohmura Y, et al. A body mass index over 22 kg/m<sup>2</sup> at college age is a risk factor for future diabetes in Japanese men. *Plos one* 2019;14:e0211067.
1066. Son YJ, Kim J, Park H-J, et al. Association of waist-height ratio with diabetes risk: a 4-year longitudinal retrospective study. *Endocrinology and Metabolism* 2016;31:127.
1067. Soriguer F, Rojo-Martínez G, Almaraz M, et al. Incidence of type 2 diabetes in southern Spain (Pizarra Study). *European journal of clinical investigation* 2008;38:126-33.
1068. Stolk R, Van Splunder I, Schouten JS, et al. High blood pressure and the incidence of non-insulin dependent diabetes mellitus: findings in a 11.5 year follow-up study in The Netherlands. *European journal of epidemiology* 1993;9:134-39.
1069. Sui X, Hooker SP, Lee I-M, et al. A prospective study of cardiorespiratory fitness and risk of type 2 diabetes in women. *Diabetes care* 2008;31:550-55.
1070. Sung EJ, Sunwoo S, Kim SW, Kim YS. Obesity as a risk factor for non-insulin-dependent diabetes mellitus in Korea. *Journal of Korean medical science* 2001;16:391.
1071. Tatsumi Y, Ohno Y, Morimoto A, et al. Age differences in the risk of diabetes incidence according to body mass index level in Japanese women: BMI and diabetes in women. *Obesity research & clinical practice* 2013;7:e455-e63.
1072. Ting M-K, Liao P-J, Wu I-W, et al. Predicting type 2 diabetes mellitus occurrence using three-dimensional anthropometric body surface scanning measurements: a prospective cohort study. *Journal of diabetes research* 2018;2018.
1073. Tirosh A, Shai I, Afek A, et al. Adolescent BMI trajectory and risk of diabetes versus coronary disease. *New England Journal of Medicine* 2011;364:1315-25.
1074. Tso AW, Xu A, Sham PC, et al. Serum adipocyte fatty acid-binding protein as a new biomarker predicting the development of type 2 diabetes: A 10-year prospective study in a Chinese cohort. *Diabetes care* 2007;30:2667-72.
1075. Tulloch-Reid MK, Williams DE, Looker HC, Hanson RL, Knowler WC. Do measures of body fat distribution provide information on the risk of type 2 diabetes in addition to measures of general obesity?: comparison of anthropometric predictors of Type 2 diabetes in Pima Indians. *Diabetes care* 2003;26:2556-61.

## Supplementary Materials

1076. Urrutia I, Martín-Nieto A, Martínez R, et al. Incidence of diabetes mellitus and associated risk factors in the adult population of the Basque country, Spain. *Scientific Reports* 2021;11:1-8.
1077. Vaidya A, Cui L, Sun L, et al. A prospective study of impaired fasting glucose and type 2 diabetes in China: the Kailuan study. *Medicine* 2016;95.
1078. Valdés S, Botas P, Delgado E, Álvarez F, Cadórniga FD. Population-based incidence of type 2 diabetes in northern Spain: the Asturias Study. *Diabetes care* 2007;30:2258-63.
1079. Verschuren W, Blokstra A, Picavet H, Smit H. Cohort profile: the Doetinchem cohort study. *International journal of epidemiology* 2008;37:1236-41.
1080. Vijayakumar G, Manghat S, Vijayakumar R, et al. Incidence of type 2 diabetes mellitus and prediabetes in Kerala, India: results from a 10-year prospective cohort. *BMC public health* 2019;19:1-10.
1081. von Eckardstein A, Schulte H, Assmann G. Risk for diabetes mellitus in middle-aged Caucasian male participants of the PROCAM study: implications for the definition of impaired fasting glucose by the American Diabetes Association. *The Journal of Clinical Endocrinology & Metabolism* 2000;85:3101-08.
1082. Wang B, Zhang M, Liu Y, et al. Utility of three novel insulin resistance-related lipid indices for predicting type 2 diabetes mellitus among people with normal fasting glucose in rural China. *Journal of diabetes* 2018;10:641-52.
1083. Wang C, Li J, Xue H, et al. Type 2 diabetes mellitus incidence in Chinese: contributions of overweight and obesity. *Diabetes research and clinical practice* 2015;107:424-32.
1084. Wang C-S, Chang T-T, Yao W-J, Wang S-T, Chou P. Impact of increasing alanine aminotransferase levels within normal range on incident diabetes. *Journal of the Formosan Medical Association* 2012;111:201-08.
1085. Wang H, Shara NM, Calhoun D, et al. Incidence rates and predictors of diabetes in those with prediabetes: the Strong Heart Study. *Diabetes/metabolism research and reviews* 2010;26:378-85.
1086. Wang Y, He S, He J, et al. Predictive value of visceral adiposity index for type 2 diabetes mellitus. *Herz* 2015;40:277-81.
1087. Wang Z, Hoy WE, Si D. Incidence of type 2 diabetes in Aboriginal Australians: an 11-year prospective cohort study. *BMC public health* 2010;10:1-5.
1088. Wannamethee S, Papacosta O, Whincup P, et al. Assessing prediction of diabetes in older adults using different adiposity measures: a 7 year prospective study in 6,923 older men and women. *Diabetologia* 2010;53:890-98.
1089. Waring ME, Eaton CB, Lasater TM, Lapane KL. Incident diabetes in relation to weight patterns during middle age. *American journal of epidemiology* 2010;171:550-56.
1090. Watanabe M, Barzi F, Neal B, et al. Alcohol consumption and the risk of diabetes by body mass index levels in a cohort of 5,636 Japanese. *Diabetes research and clinical practice* 2002;57:191-97.
1091. Wei GS, Coady SA, Goff DC, et al. Blood pressure and the risk of developing diabetes in african americans and whites: ARIC, CARDIA, and the framingham heart study. *Diabetes care* 2011;34:873-79.
1092. Wei L, Cheng X, Luo Y, et al. Lean non-alcoholic fatty liver disease and risk of incident diabetes in a euglycaemic population undergoing health check-ups: A cohort study. *Diabetes & Metabolism* 2021;47:101200.
1093. Wei M, Gaskill SP, Haffner SM, Stern MP. Waist circumference as the best predictor of noninsulin dependent diabetes mellitus (NIDDM) compared to body mass index, waist/hip ratio and other anthropometric measurements in Mexican Americans—a 7-year prospective study. *Obesity research* 1997;5:16-23.
1094. Wei Y, Zheng B, Fan J, et al. Habitual snoring, adiposity measures and risk of type 2 diabetes in 0.5 million Chinese adults: a 10-year cohort. *BMJ Open Diabetes Research and Care* 2020;8:e001015.

## Supplementary Materials

1095. Wiroj Jiamjarasrangsri M, Wichai Aekplakorn M. Incidence and predictors of type 2 diabetes among professional and office workers in Bangkok, Thailand. *J Med Assoc Thai* 2005;88:1896-904.
1096. Wu J, Gong L, Li Q, et al. A Novel Visceral Adiposity Index for Prediction of Type 2 Diabetes and Pre-diabetes in Chinese adults: A 5-year prospective study. *Scientific reports* 2017;7:1-9.
1097. Xia MF, Lin HD, Chen LY, et al. Association of visceral adiposity and its longitudinal increase with the risk of diabetes in Chinese adults: A prospective cohort study. *Diabetes/metabolism research and reviews* 2018;34:e3048.
1098. Xu F, Wang YF, Lu L, et al. Comparison of anthropometric indices of obesity in predicting subsequent risk of hyperglycemia among Chinese men and women in Mainland China. *Asia Pacific journal of clinical nutrition* 2010;19:586.
1099. Xu L, Lam T, Jiang C, et al. Adiposity and incident diabetes within 4 years of follow-up: The Guangzhou Biobank Cohort Study. *Diabetic Medicine* 2017;34:1400-06.
1100. Xu M, Huang M, Qiang D, et al. Hypertriglyceridemic Waist Phenotype and Lipid Accumulation Product: Two Comprehensive Obese Indicators of Waist Circumference and Triglyceride to Predict Type 2 Diabetes Mellitus in Chinese Population. *Journal of Diabetes Research* 2020;2020.
1101. Xue H, Wang C, Li Y, et al. Incidence of type 2 diabetes and number of events attributable to abdominal obesity in China: A cohort study. *Journal of diabetes* 2016;8:190-98.
1102. Yamazaki H, Tauchi S, Wang J, et al. Longitudinal association of fatty pancreas with the incidence of type-2 diabetes in lean individuals: a 6-year computed tomography-based cohort study. *Journal of gastroenterology* 2020;55:712-21.
1103. Yang J, Wang F, Wang J, et al. Using different anthropometric indices to assess prediction ability of type 2 diabetes in elderly population: a 5 year prospective study. *BMC geriatrics* 2018;18:1-9.
1104. Yokomichi H, Ohde S, Takahashi O, et al. Weight cycling and the subsequent onset of type 2 diabetes mellitus: 10-year cohort studies in urban and rural Japan. *BMJ open* 2017;7.
1105. Zafra-Tanaka JH, Miranda JJ, Gilman RH, et al. Obesity markers for the prediction of incident type 2 diabetes mellitus in resource-poor settings: The CRONICAS Cohort Study. *Diabetes Research and Clinical Practice* 2020;170:108494.
1106. Zhang M, Zheng L, Li P, et al. 4-year trajectory of visceral adiposity index in the development of type 2 diabetes: a prospective cohort study. *Annals of Nutrition and Metabolism* 2016;69:142-49.
1107. Zhang SY, Wu JH, Zhou JW, et al. Overweight, resting heart rate and prediabetes/diabetes: a population-based prospective cohort study among inner Mongolians in China. *Scientific reports* 2016;6:1-6.
1108. Zhao W, Tong J-J, Cao Y-T, Li J-H. A Linear Relationship Between a Body Shape Index and Risk of Incident Type 2 Diabetes: A Secondary Analysis Based on a Retrospective Cohort Study in Japan. *Diabetes, Metabolic Syndrome and Obesity: Targets and Therapy* 2020;13:2139.
1109. Zhou Z, Macpherson J, Gray SR, et al. Are people with metabolically healthy obesity really healthy? A prospective cohort study of 381,363 UK Biobank participants. *Diabetologia* 2021:1-10.
1110. Xu C, Zhong J, Zhu H, et al. Independent and interactive associations of heart rate and body mass index or blood pressure with type 2 diabetes mellitus incidence: A prospective cohort study. *Journal of diabetes investigation* 2019;10:1068-74.