Supplementary Files

Contents

Supplementary File 1: Used Cohort Studies	2
Supplementary File 1: Results Additional Analyses	4
Supplementary File 1: TRIPOD Checklist	5
Supplemental file 2: data harmonization guide	8
Supplementary File 3: Table 1	99
Supplementary File 3: Table 2	104
Supplementary File 3: Table 3	111
Supplementary File 3: Figure 1	112
Supplementary File 3: Table 4	113
Supplementary File 3: Table 5	114
Supplementary File 3: Figure 2	115
Supplementary File 3: Table 6	116
Supplementary File 3: Table 7	118
Supplementary File 3: Table 8	119
Supplementary File 3: Table 9	121

Supplementary File 1: Used Cohort Studies

LASA is an ongoing cohort study that focuses on the determinants, trajectories and consequences of physical, cognitive, emotional and social functioning in older adults in the Netherlands. Data collection started in 1992-1993 ¹. A sample of participants aged 55 years and over was drawn from eleven municipalities across three regions. Sampling was performed at random and stratified by age, sex, urbanization grade and expected 5-years mortality rate. For the main analyses, we used data from wave C (1995/1996) which had 1509 participants, aged 65 years and older as of January 1, 1996. Of these, we included 1433 participants in the main analyses for whom follow-up and medication data was available.

B-PROOF is a multicenter, randomized, placebo-controlled, double-blind trial investigating the efficacy of vitamin B12 and folic acid supplementation on the prevention of fracture-incidence in individuals aged 65 years and over with an elevated plasma homocysteine concentration ². Additional inclusion criteria were: compliance to tablet intake in a period prior to start of the trial and competence to make own decisions. Participants that were bedridden or wheelchair bound, that were diagnosed with cancer, or that had high serum creatinine levels were excluded. A total of 2919 participants were recruited across three centers in the Netherlands between 2008 and 2011. Results of B-PROOF showed no effect of the intervention on the time to first or second fall and the number of falls experienced during follow-up ³. Therefore, we treated B-PROOF as a prospective cohort study in the context of the present paper. For the main analyses, we used baseline and one-year follow-up data of 2912 participants for whom medication and follow-up data was available.

ActiFE Ulm is a German population-based cohort study among community-dwelling people living in the greater Ulm, Neu-Ulm and Alb-Donau-Kreis areas. Recruitment started in 2009 and finished in 2010 ⁴. Inclusion criteria for: age between 65 and 90 years, could provide informed consent, and ability to walk through their own room. People with severe deficits in cognition, vision or hearing were excluded from participation. A total of 1506 participants were sampled randomly and according to sex and age strata. We included baseline and one-year follow-up data from 1366 participants in the main analyses for whom follow-up and medication data was available.

For details regarding the three cohorts with only retrospective data on fall incidents we refer to their respective cohort profiles ^{1,5,6}. In brief, wave 3B of LASA was conducted between 2012 and 2013. The Rotterdam Study is an ongoing Dutch, prospective cohort study that started in 1990. The harmonized cohort dataset included data from measurements conducted between 2009 and 2014, which were collected as part of the fifth examination cycle of the first cohort, the third examination cycle of the second cohort and the second examination cycle of the third cohort. TILDA is an ongoing cohort study in Ireland. The harmonized cohort dataset contained data from the baseline measurements conducted between 2009 and 2011.

Participants from all cohorts in the ADFICE_IT harmonized cohort dataset provided informed consent and all cohort studies were approved by their institutional ethics committees.

References

- 1. Hoogendijk EO, Deeg DJH, Breij S De, Klokgieters SS, Kok AAL. The Longitudinal Aging Study Amsterdam: cohort update 2019 and additional data collections. *Eur J Epidemiol*. 2019;(0123456789). doi:10.1007/s10654-019-00541-2
- 2. Wijngaarden V, Van Wijngaarden JP, Dhonukshe-Rutten RA, et al. Rationale and design of the B-PROOF study, a randomized controlled trial on the effect of supplemental intake of vitamin B12 and folic acid on fracture incidence Rationale and design of the B-PROOF study, a randomized controlled trial on the effect of sup. *BMC Geriatr*. 2011;11(December). doi:10.1186/1471-2318-11-80
- 3. van Wijngaarden JP, Swart KMA, Enneman AW, et al. Effect of daily vitamin B-12 and folic acid supplementation on fracture incidence in elderly individuals with an elevated plasma homocysteine concentration: B-PROOF, a randomized controlled trial. *Am J Clin Nutr*. 2014;100(6):1578-1586. doi:10.3945/ajcn.114.090043
- 4. Denkinger MD, Franke S, Rapp K, et al. Accelerometer-based physical activity in a large observational cohort Study protocol and design of the activity and function of the elderly in Ulm (ActiFE Ulm) study. *BMC Geriatr*. 2010;10. doi:10.1186/1471-2318-10-50
- 5. Donoghue OA, McGarrigle CA, Foley M, Fagan A, Meaney J, Kenny RA. Cohort profile update: The Irish Longitudinal study on ageing (TILDA). *Int J Epidemiol*. 2018;47(5):1398-1398L. doi:10.1093/ije/dyy163
- 6. Ikram MA, Brusselle G, Ghanbari M, et al. Objectives, design and main findings until 2020 from the Rotterdam Study. *Eur J Epidemiol*. 2020;35(5):483-517. doi:10.1007/s10654-020-00640-5

Supplementary File 1: Results Additional Analyses

A number of additional analyses were conducted. First, we developed an additional set of models for predicting any fall and recurrent falls using only candidate predictors that are easily obtainable in clinical practice. The model for predicting any fall developed using this subset of candidate predictors contained 14 predictors, which largely overlap with those included in the model for predicting any fall in the main analysis (Supplementary Table 4). In comparison with the model in the main analysis, the model contained the predictors gait speed, fear of falling, and use of calcium channel blockers instead of verbal fluency. With an average C-statistic of 0.65 (range 0.61-0.67), the discriminative performance of the model was similar to that of the model for any fall in the main analysis (Supplementary Table 5). Visual inspection of the calibration plot for the model showed observed and predicted risks largely overlapped in the three cohorts (Supplementary Figure 2). The final model for predicting recurrent falls contained the same 10 predictors as the final model for recurrent falls in the main analysis (results not shown).

Second, we explored an approach in which we developed prediction models for any fall within groups of medication user groups with the aim of exploring possible differences in the selected predictors for these groups. The number of predictors for the different medication user groups varied between 2 and 8 predictors. Of the 15 predictors that were selected in one or more of the models, 6 predictors were included in more than one model, i.e., educational status, able to perform tandem stand, history of at least one fall, history of at least two falls, use of calcium channel blockers, and use of antiepileptics. The final models are presented in Supplementary Table 6. Discriminative performance of the models varied with optimismadjusted C-statistic measures ranging from 0.61 to 0.69 (Supplementary Table 7).

Finally, we examined whether a pooled analysis of a larger retrospective dataset comprised of all six cohorts within the harmonized cohort dataset could yield a model with better discriminative properties. After the backward elimination procedure, 26 predictors remained significant in relation to a fall in the past year. Among these 26 predictors were 8 variables that were also included as a predictor in the models in the main analyses (Supplementary Table 8). Discriminative performance of the model across the six cohorts was lower when compared to the models in the main analyses with an average C-statistic of 0.64 (range 0.60-0.67; Supplementary Table 9).

Supplementary File 1: TRIPOD Checklist

		RIPOD Checklist Checklist Item	
Title and abstr			
Title	1	Identify the study as developing and/or validating a multivariable prediction model, the target population, and the outcome to be predicted.	✓
Abstract	2	Provide a summary of objectives, study design, setting, participants, sample size, predictors, outcome, statistical analysis, results, and conclusions.	√
Introduction			
Background and objectives	3a	Explain the medical context (including whether diagnostic or prognostic) and rationale for developing or validating the multivariable prediction model, including references to existing models.	✓
objectives	3b	Specify the objectives, including whether the study describes the development or validation of the model or both.	✓
Methods			
Source of data	4a	Describe the study design or source of data (e.g., randomized trial, cohort, or registry data), separately for the development and validation data sets, if applicable.	✓
uata	4b	Specify the key study dates, including start of accrual; end of accrual; and, if applicable, end of follow-up.	✓
Participants	5a	Specify key elements of the study setting (e.g., primary care, secondary care, general population) including number and location of centres.	√
1	5b	Describe eligibility criteria for participants.	✓
	5c	Give details of treatments received, if relevant.	✓
Outcome	6a	Clearly define the outcome that is predicted by the prediction model, including how and when assessed.	✓
Outcome	6b	Report any actions to blind assessment of the outcome to be predicted.	*
Predictors	7a	Clearly define all predictors used in developing or validating the multivariable prediction model, including how and when they were measured.	✓
	7b	Report any actions to blind assessment of predictors for the outcome and other predictors.	**
Sample size	8	Explain how the study size was arrived at.	✓
Missing data	9	Describe how missing data were handled (e.g., complete-case analysis, single imputation, multiple imputation) with details of any imputation method.	✓
	10a	Describe how predictors were handled in the analyses.	✓
Statistical analysis	10b	Specify type of model, all model-building procedures (including any predictor selection), and method for internal validation.	✓
methods	10d	Specify all measures used to assess model performance and, if relevant, to compare multiple models.	✓
Risk groups	11	Provide details on how risk groups were created, if done.	NA
Results			
Participants	13a	Describe the flow of participants through the study, including the number of participants with and without the outcome and, if applicable, a summary of the follow-up time. A diagram may be helpful.	***

13b	Describe the characteristics of the participants (basic demographics, clinical features, available predictors), including the number of participants with missing data for predictors and outcome.	~
14a	Specify the number of participants and outcome events in each analysis.	✓
14b	If done, report the unadjusted association between each candidate predictor and outcome.	NA
15a	Present the full prediction model to allow predictions for individuals (i.e., all regression coefficients, and model intercept or baseline survival at a given time point).	✓
15b	Explain how to the use the prediction model.	****
16	Report performance measures (with CIs) for the prediction model.	✓
18	Discuss any limitations of the study (such as nonrepresentative sample, few events per predictor, missing data).	✓
19b	Give an overall interpretation of the results, considering objectives, limitations, and results from similar studies, and other relevant evidence.	\
20	Discuss the potential clinical use of the model and implications for future research.	✓
tion		
21	Provide information about the availability of supplementary resources, such as study protocol, Web calculator, and data sets.	✓
22	Give the source of funding and the role of the funders for the present study.	✓
	14a 14b 15a 15b 16 18 19b 20 tion 21	clinical features, available predictors), including the number of participants with missing data for predictors and outcome. Specify the number of participants and outcome events in each analysis. If done, report the unadjusted association between each candidate predictor and outcome. Present the full prediction model to allow predictions for individuals (i.e., all regression coefficients, and model intercept or baseline survival at a given time point). Explain how to the use the prediction model. Report performance measures (with CIs) for the prediction model. Biocuss any limitations of the study (such as nonrepresentative sample, few events per predictor, missing data). Give an overall interpretation of the results, considering objectives, limitations, and results from similar studies, and other relevant evidence. Discuss the potential clinical use of the model and implications for future research. Towns the provide information about the availability of supplementary resources, such as study protocol, Web calculator, and data sets. Give the source of funding and the role of the funders for the present

* Report any actions to blind assessment of the outcome to be predicted

Falls as an outcome requires no interpretation and blinding is therefore not relevant.

** Report any actions to blind assessment of predictors for the outcome and other predictors

Predictor values were almost entirely derived from objective measures and blinding is therefore not relevant.

*** Describe the flow of participants through the study, including the number of participants with and without the outcome and, if applicable, a summary of the follow-up time. A diagram may be helpful.

The median follow-up period was 52 weeks (IQR 52-52).

**** Explain how to the use the prediction model

A risk score can be calculated for any fall and recurrent falls by multiplying the value for each predictor with its respective regression coefficient and by then summing all values. The sum of these values (LP) can be converted into a risk probability using the following formula: p = 100% * (1/(1 + exp(-LP))).

Supplemental File 2: Data Harmonization Guide

ADFICE_IT harmonized cohort data

Data harmonization guide

Version October 2021

Introduction

Data were harmonized from six cohort studies, including The Irish Longitudinal Study on Ageing (TILDA) (public wave 1), the Longitudinal Aging Study Amsterdam (LASA) (waves C and 3B), the ActiFE Ulm Study (baseline wave), the B-PROOF study (baseline wave) and Rotterdam Study (ERGO-5). This data harmonisation guide describes how the variables were computed.

The variables were selected based on known risk factors of falls from previous studies focusing on demographic, health, lifestyle and environmental factors. Only those variables that were available in at least 3 of the 6 cohorts were harmonised. This guide describes for each of the variables [i] which relevant original items were available in each of the cohorts, [ii] the algorithm used to harmonise each of the variables, and [iii] the variable names, range and labels of the harmonised variables. The core principle of harmonisation is to capture the largest (most informative) common denominator.

A list of the variables ordered by theme and with hyperlinks is provided on page 5.

The cohorts

The **Longitudinal Ageing Study Amsterdam** (LASA) is an ongoing interdisciplinary cohort study on predictors and consequences of changes in physical, cognitive, emotional, and social functioning in men and women aged 55-85 years at baseline in 1992-93 (wave B). A random sample stratified for age, sex, and expected 5-year mortality was drawn from the population registries of 11 municipalities in the Netherlands.^{3,4} New cohorts were initiated in 2002/2003 (wave 2B) and in 2012-13 (wave 3B) in persons aged 55-65 years. Measurement waves took place approximately every three years in all the three cohorts. For the current study, data from 1995/1996 (wave C, first cohort, n = 2545) and 2012-2013 (wave 3B, third cohort, n = 1023) were used. For both cohorts, it was asked whether the participant had fallen in the year before baseline. In addition, falls were recorded weekly on a fall calendar during three years starting at wave C.

The study on **Activity and Function in the Elderly in Ulm** (ActiFE Ulm) is embedded in a European funded study on the prevalence of COPD and asthma (Indicators for Monitoring COPD and Asthma - IMCA). A random sample of 7460 persons aged 65 years and over was selected from the population registers in Ulm, Neu-Ulm and Alb-Donau-Kreis. The recruitment phase started in February 2009 and finished in April 2010. In total, 1506 persons agreed to participate in the study. The primary focus is physical activity (as measured by sensor technology) and the consequences of physical activity for cognitive, emotional and social functioning.

The **Irish Longitudinal Study on Ageing** (TILDA) is an ongoing cohort study designed to achieve a representative sample of community-dwelling people aged 50 years or older in Ireland. A random sample of 25600 residential addresses in Ireland were selected with stratification for socioeconomic status, age and geography. Each address was provided with study information and visited by field staff. All persons aged 50 years and over (primary respondents) and their spouses or partners of any age (secondary respondents) were eligible. Enrolled participants completed a computer-assisted questionnaire, self-completion questionnaire and a health assessment. Baseline data from the 8504 primary and secondary participants were collected between October 2009 and July 2011.

The **B-PROOF** study (B vitamins for PRevention Of Osteoporotic Fractures) is a 2-year randomized double-blind placebo-controlled trial, including 2,919 people aged 65 years or older, independently living or institutionalized, with an elevated homocysteine concentration (≥ 12 μmol/L). As the intervention was not effective, B-PROOF can be used as a cohort. Participants were recruited via registries of municipalities and elderly homes in the area of the research centres (Rotterdam, Amsterdam, Wageningen). One group received a daily tablet with 500 μg vitamin B12 and 400 μg folic acid and the other group received a placebo tablet. Both tablets included 15 μg (600 IU) vitamin D. The primary outcome of B-PROOF is time to first osteoporotic fracture. Falls were recorded weekly, on the research calendar. Baseline measurements took place between October 2008 and March 2011.

The **Rotterdam Study** is a prospective cohort study in the Ommoord district in the city of Rotterdam, the Netherlands, that started in 1990. The main objectives of the Rotterdam Study were to investigate the risk factors of cardiovascular, neurological, ophthalmological and endocrine diseases in the elderly. Up till now, the Rotterdam Study consists of three cohorts, for which the overall response figure at baseline was 72.0 %. Examinations were repeated every 3-4 years in potentially changing characteristics. Since the baseline cohort (RS-I-1), which included 7983 participants 55 years of age or over, four follow-up measurements were conducted. The most recent re-examination of the original cohort members was RS-I-6. Between 2009 and 2013, RS-I-5 (n=2147) was conducted as one project (i.e. 'ERGO-5') together with the third examination of the second cohort (RS-III-2, n=3122).

General instructions per cohort

LASA – The relevant data collection waves are wave C (1995-6) and 3B (i.e. the baseline assessment for the 3rd cohort completed in 2012-13). The data collection involves a face-to-face main interview, a face-to-face medical interview and a self-completed questionnaire. LASA stores its variables in separate files for each theme and each data collection wave. Details on data collection, cleaning and coding can be found for each of the variables on the LASA website (http://lasa-vu.nl/themes/navigator.htm). File names are structured as LASAC161 or LAS3B161, with 'C' referring to cohort 1 wave C and '3B' referring to cohort 3 wave B, respectively, and the number referring to the theme (e.g. '161' is anthropometry). Wave C includes prospective data on falls (i.e. fall calendars) for a period of 3 years as well as retrospective data for the past 12 months. For wave 3B data on retrospective falls for the past 12 months were available.

ActiFE Ulm – The relevant data collection wave is de baseline assessment (2009/2010). This was obtained by sending a data-analysis proposal to the ActiFE Ulm team and filling in the data request forms/contracts. ActiFE Ulm has been harmonised before in de EPOSA study, the data harmonisation guide of EPOSA (https://static-content.springer.com/esm/art%3A10.1186%2F1471-2474-12-272/MediaObjects/12891_2011_1300_MOESM1_ESM.PDF). The baseline wave includes retrospective fall data, but also a one-year follow-up calendar is available for both the medication and fall data.

TILDA – Survey 1 (2009-2011) is the relevant survey for the ADFICE_IT harmonisation. Survey 1 involves a self-completed questionnaire (SCQ), a computer-assisted personal interview (CAPI), and a health assessment (HAC). As the health assessment was done in the clinic, participants who were older, frailer and/or lived more remote were less likely to complete the health assessment. Sample weights are available to account for the selective drop-out. For survey 1, all variables (except medication use) are stored in one file per wave. For later surveys, variables of the CAPI and SCQ are stored in one file and the HAC data are stored in separate files for clinic (HAC) and home (HOME) assessments. Variables codes can be found in the questionnaire (available upon request) and the derived variables codebook (file:///R:/Wave%201/Derived%20Variables%20Codebook.html). Attrition data are stored in a separate file called "AuditTracker". Survey 1 includes retrospective fall data (i.e. fall in the past 12 months).

B-PROOF – The relevant data that will be used is the baseline data, conducted between October 2008 and March 2011. Baseline measurements were performed during a 1.5-2 hour session at one of the research centres or at the participants home. The B-PROOF codebook has been obtained, including information on variables, original questions and data availability (baseline only, follow-up only, baseline and follow-up). Information on medication data is not included in the codebook, but these data can be obtained from a separate access dataset. Data was obtained via B-PROOF contact persons. In B-PROOF falls are measured both prospectively (i.e. fall calendar) and retrospectively (i.e. fall past 12 months).

Rotterdam Study – The relevant cycle is the ERGO-5 cycle, as this is the newest wave with the medication data available. The RS-I-5, RS-II-3 and RS-III-2 examinations share the same project items; participants were interviewed at home and went through an extensive set of examinations in a specially built research facility in the centre of the district, such as bone mineral densitometry, including sample collections for in-depth molecular and genetic analyses. The codebook can be derived by obtaining access to a secluded website. Medication data is accessible via Bruno Stricker. The ERGO includes, both prospective (this concerns serious falls, i.e. falls leading to a hospital admission or leading to a fracture) as well as the retrospective (past 12-month) fall data.

Reference list

- 1. Huisman M, Poppelaars J, van der Horst M, et al. Cohort profile: the longitudinal aging study amsterdam. Int J Epidemiol. 2011;40(4):868-876.
- 2. Hoogendijk EO, Deeg DJ, Poppelaars J, et al. The Longitudinal Aging Study Amsterdam: cohort update 2016 and major findings. Eur J Epidemiol. 2016;31(9):927-945.
- 3. Kearney PM, Cronin H, O'Regan C, et al. Cohort profile: the Irish Longitudinal Study on Ageing. Int J Epidemiol. 2011;40(4):877-884.
- 4. Kriegsman DM, Penninx BW, van Eijk JT, Boeke AJ, Deeg DJ. Self-reports and general practitioner information on the presence of chronic diseases in community dwelling elderly. A study on the accuracy of patients' self-reports and on determinants of inaccuracy. J Clin Epidemiol. 1996;49(12):1407-1417.
- 5. Peeters GM, Alshurafa M, Schaap L, de Vet HC. Diagnostic accuracy of self-reported arthritis in the general adult population is acceptable. J Clin Epidemiol. 2015;68(4):452-459.
- 6. Van Wijngaarden JP, Dhonuskhe-Rutten RA, van Schoor NM, van der Velde N, Swart KM, Enneman AW, van Dijk SC, Brouwer-Brolsma EM, Zilikens MC, van Meurs JB, Brug J, Uitterlinden AG, Lips P, de Groot LC. Rationale and design of the B-PROOF study, a randomized controlled trial on the effect of supplemental intake of vitamin B12 and folic acid on fracture incidence. *BMC Geriatr*. 2011;11:80.
- 7. Schaap LA, Peeters GMEE, Dennison EM, Zambon S, Nikolaus T, Sanchez-Martinez M, Musacchio E, van Schoor NM, Deeg DJH, and the EPOSA research group. European Project on Osteoarthritis (EPOSA): methodological challenges in hamonization of existing data from five European population-based cohorts on aging. *BMC Musculoskelet Disord*. 2011;12:272.
- 8. Ikram MA, Brusselle GGO, Murad SD, van Duijn CM, Franco OH, Goedegebure A, Klaver CCW, Nijsten TEC, Peeters RP, Stricker BH, Tiemeier H, Uitterlinden AG, Vernooij MW, Hofman A. The Rotterdam Study: 2018 update on objectives, design and main results.
- 9. Denkinger, MD, Franke S, Rapp, Kilian R, Weinmayr G, Duran-Tauleria E, Nikolaus T, Peter R, ActiFE Ulm Study Group. Accelerometer-based physical activity in a large observational cohort study protocol and design of the activity and function of the elderly in Ulm (ActiFE Ulm) study. *BMC Geriatrics.* 2010;10(50).

List of variables by theme

Generic variables	Chronic conditions	Cognitive functioning	General health and symptoms	Blood markers
Cohort	Anxiety	Executive function	Blood pressure	CRP
ID number	<u>Arthritis</u>	Memory	Body mass index (BMI)	<u>Vitamin D</u>
Year of data collection	Cancer	MMSE	<u>Dizziness</u>	Vitamin B12
	<u>Cardiovascular disease</u>	Reaction time	<u>Functional limitations</u>	Creatinine
Socio-demographic	<u>Arrhythmia</u>	Speed of processing	Hearing	
Age	Angina pectoris		<u>Height</u>	Medication
Education	Myocardial infarction	Physical Performance / physical	<u>Pain</u>	Number of medications
		functioning		
Income	<u>Heart failure</u>	Walking aid	Pulse rate	Medication use
Marital status	<u>Stroke</u>	<u>Balance</u>	Self-rated health	Anticholinergic
				medication
Number of people in household	<u>Depression</u>	Grip strength	Sleep	Medication for
				hypertension
Occupation and retirement	<u>Diabetes</u>	Gait speed	<u>Urinary incontinence</u>	
<u>Urbanisation</u>	<u>Heart disease</u>		<u>Visual problems</u>	
Sex	<u>Hypertension</u>	Lifestyle	Waist circumference	
	<u>Lung disease</u>	Alcohol use	Weight	
Falls	Number of chronic conditions	Smoking	Weight loss	
<u>Faller</u>	Parkinson's disease	Physical activity	Genetic variants	
Number of falls			Quality of life	
Fear of falls				
Injurious falls				
Falls in Follow-up (time to first fall)				

Cohort	Original items (variable name)	Range or category labels	Harmonisation algorithm	Harmonised variable details
Age				
LASA	Age at LASA main/telephone interview (bage, cage)	bage: 54.95-65.55 yrs cage: 57.94-88.85 yrs	Round to lower integer (e.g. 57.7 \rightarrow 57) to remove decimals. If age >= 80 \rightarrow age = 80	Variable name: age
ActiFE Ulm	age at visit 1 (age_BL_v1)	Range 65.3-91.4	Round to lower integer (e.g. 57.7 \rightarrow 57) to remove decimals. If age >= 80 \rightarrow age = 80	agemax80
TILDA	Age at interview assuming DOB is 1st of specified month (age) *) Note that the sampling frame was set up to target residents aged 50+, but partners were also invited to participate, which resulted in the inclusion of 329 participants aged <50 at baseline.	Range 29-105 yrs* Ages <50 and 80+ are all '49' and '80', respectively. So: the actual age range in the public Tilda data is missing (maximum age=80, minimum=49)?	Use as is.	Variable label: Age in years Age in years max value is 80 For TILDA, respondents below the age of 50 or whose age was missing were excluded (n=341).
B-PROOF	Age of participant at baseline, based on date of birth and date baseline interview (Age).	Range 63 - 98 years	Use as is. If age >= 80 → age = 80	
Rotterdam Study	Date of birth and interview date (Date_of_birth, e5_3493)	Range interview date: Date >= today 01-JAN-1582 = default/missing	Age = e5_3493 - Date_of_birth If age >= 80 → age = 80	
Alcohol use				
LASA	Do you drink alcohol? (cmvar24, BMALCOHU)	1= no 2= yes	quantity of alcohol consumed n/a 1 2-3 4-5 6-7 8-10 11+ no alcohol 0 1 1 1 1 1 1 1	Variable name: 1. alcohol 2. alcoholyn
	How many consumptions do you drink each time? (cmvar28,	1= every day 2= 5-6 days/week 3= 3-4 days/week 4= 1-2 days/week 5= 1-3 days/month 6= < 1 day/month 1= 11+ drinks 2= 8-10 drinks 3= 6-7 drinks 4= 4-5 drinks	1 day/month 1 2 2 2 2 2 2 3 3 3 4 <t< td=""><td>3. alcoholfr Variable label: 1. Alcohol intake 2. Do you drink alcohol? 3. Frequency of alcohol use Value labels: alcohol 0=non-drinker 1=rarely drinks 2=low risk (≤14 per week) 3=risky (15-28 per week)</td></t<>	3. alcoholfr Variable label: 1. Alcohol intake 2. Do you drink alcohol? 3. Frequency of alcohol use Value labels: alcohol 0=non-drinker 1=rarely drinks 2=low risk (≤14 per week) 3=risky (15-28 per week)
	BMALCOHN)	5= 2-3 drinks 6= 1 drink 1= Every day 2= 5-6 days/week 3= 3-4 days/week	alcoholfr, wave C: if cmvar24 = 1 \rightarrow alcoholfr = 0 if cmvar25a = 6 \rightarrow alcoholfr = 1 if cmvar25a = 5 \rightarrow alcoholfr = 2 if cmvar25a = 3 or cmvar25a = 4 \rightarrow alcoholfr = 3 if cmvar25a = 1 or cmvar25a = 2 \rightarrow alcoholfr = 4	4=high risk (>28 per week) alcoholyn 0=no 1=yes alcoholfr 0=non-drinker
	Number of times six glasses or more? (cmvar29, BMALCOH6)	4= 1-2 days/week 5= 1-3 days/month 6= <1 day/month	alcoholfr, wave 3B: if BMALCOHU = 1 → alcoholfr = 0 if BMALCOHD = 6 → alcoholfr = 1 if BMALCOHD = 5 → alcoholfr = 2 if BMALCOHD = 3 or BMALCOHD = 4 → alcoholfr = 3 if BMALCOHD = 1 or BMALCOHD = 2 → alcoholfr = 4	1=less than once a month 2=1-3 times a month 3=1-4 days a week 4=(almost) daily

ActiFE Ulm	Frequency of alcohol use (alcohol_freq_BL)	1 = daily	alcohol	Notes: (1) More info on the alcohol tables is
		2 = several times a week	Not harmonized; average quantity was not measured.	provided in appendix 3. (2) For alcoholfr, there
	Average quantity was not measured.	3 = several times a month		are slight differences in the cut-off values for
		4 = less than once in a month	alcoholyn	the harmonization algorithms of the different
		5 = never	if alcohol_freq_BL=5 → alcoholyn=0	algorithms. For example, one a month or less in
			if alcohol_freq_BL>=1 and alcohol_freq_BL<=4 → alcoholyn=1	the Rotterdam study was harmonized as less
				than once a month.
			alcoholfr	
			if alcohol_freq_BL =5 → alcoholfr=0	
			if alcohol_freq_BL =4 → alcoholfr=1	
			if alcohol_freq_BL =3 → alcoholfr=2	
			if alcohol_freq_BL =2 → alcoholfr=3	
			if alcohol_freq_BL =1 → alcoholfr=4	
TILDA	Do you drink alcohol? (SCQAlcohol)	1= yes	alcohol	
		2= no	Frequency of drinking was based on SCQAlcoFreq and quantity of drinking was based on	
	In the last 6 months, how often have you had drinks containing		SCQAlcoNo2.	
	alcohol? (SCQAlcoFreq)*	1= almost every day*	quantity of alcohol consumed	
		2= 5-6 days/week*	. 0 1-2 3-4 5-6 7-8 9+ not at all 0 0 1 1 1 1 1 1	
		3= 3-4 days/week*	<1 day/month 1 1 1 1 1	
		4= 1-2 days/week*	1-2 days/month 2 2 2 2 2 2	
		5= 1-2 days/month*	1-2 day/week 2 2 2 3 3 3 3-4 days/week 2 3 3 3 4	
		6= < 1 day/month*	5-6 days/week 2 3 4 4 4	
		7= not at all in the last 6 months*	almost every day 2 3 4 4 4	
		Range 0-10	alcoholyn	
		(10=10+ glasses)	if SCQAlcohol=2 → alcoholyn=0	
			if SCQAlcohol=1 → alcoholyn=1	
	How many drinks consumed on days drink taken? (SCQAlcoNo2)			
			alcoholfr	
	*) Note that some participants ticked two adjacent boxes, in which		if SCQAlcoFreq =7 or SCQAlcohol = 2 → alcoholfr=0	
	case the higher frequency was used (e.g. if 3-4 days/week and 5-6		if SCQAlcoFreq =6 → alcoholfr=1	
	days/week were ticked, 5-6 days/week was used).		if SCQAlcoFreq =5 → alcoholfr=2	
			if SCQAlcoFreq =4 or SCQAlcoFreq =3→ alcoholfr=3	
			if SCQAlcoFreq =2 or SCQAlcoFreq =1 → alcoholfr=4	

D DDOOL	De veu cometimes drink alachel? (alachel)	0 - no	alaahal	
B-PROOF	Do you sometimes drink alcohol? (alcohol)	0 = no	alcohol quantity of alcohol consumed	
		1 = yes	n/a 1 2-3 4-5 6-7 8-10 11+	
	Did you drink alcohol last year? (alcohol_last_year)		no alcohol 0 1 1 1 1 1 1	
		1 = daily	<1 day/month 1 1 1 1 1 1 1	
		2 = 5-6 days per week	1-3 days/month 2 2 2 2 2 2 2	
		3 = 3-4 days per week	1-2 days 2 2 2 2 3 3 3-4 days 2 2 3 3 4 4	
		4 = 1-2 days per week	5-6 days 2 3 4 4 4 4	
		5 = 1-3 days per month	every day 2 3 4 4 4 4	
		6 = < 1 day per month		
		/ '	alcoholyn*	
		1 = 11+ glasses	if alcohol=0 → alcoholyn=0	
		2 = 8-10 glasses	if alcohol=1 → alcoholyn=1	
		3 = 6-7 glasses		
	When you drink alcohol, how many glasses do you have?	4 = 4-5 glasses	alcoholfr*	
	(alcohol_amount)	5 = 2-3 glasses	if alcohol=0 → alcoholfr=0	
	(alcohol_amount)		if alcohol_last_year =6 → alcoholfr=1	
		6 = 1 glass	if alcohol_last_year =5 → alcoholfr=2	
			if alcohol_last_year =4 or alcohol_last_year =3 → alcoholfr=3	
		1 = everyday	if alcohol_last_year =2 or alcohol_last_year =1 → alcoholfr=4	
		2 = 5-6 days per week	II alconol_last_year =2 or alconol_last_year =1 7 alconolir=4	
	How often did you drink more than 6 glasses in one day?	3 = 3-4 days per week	*\ alaskakas and alaskalfa waa asaa akada a'aa ka kha ka waa a'aa dalaskal wa'akka	
	(alcohol_large_amount)	4 = 1-2 days per week	*) alcoholyn and alcoholfr were computed prior to the harmonized alcohol variable.	
		5 = 1-3 days per month		
		6 = < 1 day per month		
Rotterdam	How often did you use alcohol in the past year? (e5_EIAUDIT1)	0=never	Quantity of alcohol consumed alcohol	
Study	, , , ,	1=one a month or less	1- 3- 5- 7- 10+ *non-drinker.	
		2=2-4 times a month	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	
		3=2-3 times a week	never 0 1 1 1 1 1 1 —	
		4=4 of more times a week		
		7=don't know	2-4 2 2 2 3 if e5 FIAUDIT1=0 and e5 FIAUDIT2>=0 and	
		9=no answer	times/month	
		3-110 driswer	2-3 times/week if e5_EIAUDIT2<=4 → alconol=1 if e5_EIAUDIT1=1 and e5_EIAUDIT2>=0 and	
		0=1 or 2	4+ 2 3 4 4 4 4 as SIAUDITA 4 2 alashal 1	
		1=3 or 4	times/week es_EIAUDI12<=4 → alconoi=1	
		2=5 or 6	*love side	
	Have many places did you drink an ana day 2 (at. FIAUDIT2)		*low risk.	
	How many glasses did you drink on one day? (e5_EIAUDIT2)	3=7 to 9	if e5_EIAUDIT1=2 and e5_EIAUDIT2>=0 and e5_EIAUDIT2<=3 → alcohol=2	
		4=10 or more	if e5_EIAUDIT1=3 and e5_EIAUDIT2>=0 and e5_EIAUDIT2<=1 → alcohol=2	
		7=don't know	if e5_EIAUDIT1=4 and e5_EIAUDIT2=0 → alcohol=2	
		9=no answer		
			*risky.	
		0=never	if e5_EIAUDIT1=2 and e5_EIAUDIT2=4 → alcohol=3	
		1=less than monthly	if e5_EIAUDIT1=3 and (e5_EIAUDIT2=2 or e5_EIAUDIT2=3) → alcohol=3	
	How often do you drink six glasses or more on one occasion?	2=monthly (1-3 times a month)	if e5_EIAUDIT1=4 and e5_EIAUDIT2=1 alcohol=3	
	(e5_EIAUDIT3)	3=weekly (1-3 times a week)		
		4= (almost) daily (4 or more times	*high risk.	
		a week)	if e5_EIAUDIT1=3 and e5_EIAUDIT2=4 alcohol=4	
		7=don't know	if e5_EIAUDIT1=4 and e5_EIAUDIT2>=2 and e5_EIAUDIT2<=4 → alcohol=4	
		9=no answer		
			alcoholyn	
			if e5_EIAUDIT1=0 → alcoholyn=0	
			if e5_EIAUDIT1>=1 and e5_EIAUDIT1<=4 → alcoholyn=1	
			alcoholfr	
			if e5_EIAUDIT1 =0 → alcoholfr=0	
			if e5_EIAUDIT1 =1 → alcoholfr=1	
<u> </u>	1	1	I =	

Anviety LSS MOST Avaiety scale LSS MOST Avaiety scale Assert process from the process from the scale of the process from			T	le = ======	
Apricity LSA INDSA Anxiety state Summary some (basels), causell feet reson or wound up (basels), causell feet restricts (baseled), c				if e5_EIAUDIT1 =2 → alcoholfr=2	
Anotety LASA HADS-A Annesty scale Summary score; (East-ord, Cannott)				if e5_EIAUDIT1 =3 → alcoholfr=3	
Anotety LASA HADS-A Annesty scale Summary score; (East-ord, Cannott)				if e5 EIAUDIT1 =4 → alcoholfr=4	
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin				_	
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin					
LASA HADS-A Anxiety scale Summary score: (banxint, canxint) - feel tense or wound up (banxiet1, canxiet3) - feel tense or wound up (banxiet4, canxiet4) - frightened feeling (banxiet2, canxiet5) - feel resters or wound up (sCQAnxiety1)* - feel resters of rought (sDAnxiet3) - feel resters of feeling so for feeling (sOAnxiety2)* - frightened feeling so for feeling so feeling so feeling so feeling so feeling so for feeling so feelin	Anxiety				
Summary score: (banxint, canxint) -feel tense or wound up (banxiet1, canxiet1) -freel tense or wound up (banxiet2, canxiet2) -worrying thoughts (banxiet3, canxiet3) -l feel relaxed: positive (banxiet4, canxiet4) -frightened feeling (banxiet4, canxiet4) -frightened in stomach (banxiet5, canxiet5) -feel restless (banxiet6, canxiet6) -sudden feelings of panic (banxiet7, canxiet7) ActiFE Ulm HADS-A score (anxiet9 subscale) (HADS_A_score_BL) TILDA HADS-A score (anxiety subscale) (HADS_A_score_BL) TILDA HADS-A score (in stomach (banxiet7)) -feel restless (banxiet6, canxiet6) -sudden feelings of panic (banxiet7, canxiet7) ActiFE Ulm HADS-A Anxiety scale (in HADS_A_score_BL) TILDA HADS-A Anxiety scale (in Hadsa): -feel tense or wound up (SCQAnxiety1)* -frightened feeling as if something awful is about to happen (SCQAnxiety2)* -worrying thoughts (SCQAnxiety3)* -is at ease and feel relaxed (SCQAnxiety4)* -is at ease and feel relaxed (SCQAnxiety4)* -iget a sort of frightened feeling like "butterflies" in the stomach (SCQAnxiety5)* -if feel restless as if I have to be on the move (SCQAnxiety6)* HADSA=HADS_A_score_BL HADSA=HADS_A_score_BL HADSA=HADS_A_score_BL HADSA=MHhadsa HADSA=MHhadsa All cohorts include the HADS Anxiety scale, except for B-PROOF. -if the Institute of the indication of the indi		HADS A Aprioty scale	Pango 0.21	HADSA-hanvint	Variable name:
-feel tense or wound up (banxiet1, canxiet1) -frightened feeling (banxiet2, canxiet2) -worrying thoughts (banxiet3, canxiet3) -i feel relaxed: positive (banxiet4, canxiet4) -frightened in stomach (banxiet5, canxiet5) -feel restless (banxiet6, canxiet6) -sudden feelings of panic (banxiet7, canxiet7) ActiFE Ulm HADS-A score (anxiety subscale) (HADS_A score_BL) TILDA HADS-A score (anxiety scale (MHhadsa): -feel tense or wound up (banxiet7, canxiet7) -fightened feeling as if something awful is about to happen (SCQAnxiety2)* - sit at ease and feel relaxed (SCQAnxiety3)* - if eel restless sa if I have to be on the move (SCQAnxiety6)* - If feel restless sa if I have to be on the move (SCQAnxiety6)* - If eel restless as if I have to be on the move (SCQAnxiety6)*	LASA		Natige 0-21	TIADSA-Dalixiit	
-frightened feeling (banxiet2, canxiet2) -worrying thoughts (banxiet3, canxiet3) -ifeel relaxed: positive (panxiet4, canxiet4) -frightened in stomach (banxiet5, canxiet5) -feel restless (banxiet6, canxiet6) -feel restless of anxiet9 yscale (MHhadsa): -feel tense or wound up (SCQAnxiety4)* -worrying thoughts (SCQAnxiety4)* -sit at ease and feel relaxed (SCQAnxiety4)* -ifeel restless as if I have to be on the move (SCQAnxiety6)* -ifeel restless as if I have to be on the move (SCQAnxiety6)* -ifeel restless as if I have to be on the move (SCQAnxiety6)* -ifeel restless as if I have to be on the move (SCQAnxiety6)* -ifeel restless as if I have to be on the move (SCQAnxiety6)* -ifeel restless as if I have to be on the move (SCQAnxiety6)* -ifeel restless as if I have to be on the move (SCQAnxiety6)* -ifeel restless as if I have to be on the move (SCQAnxiety6)* -ifeel restless as if I have to be on the move (SCQAnxiety6)* -ifeel restless as if I have to be on the move (SCQAnxiety6)* -ifeel restless as if I have to be on the move (SCQAnxiety6)*					HADSA
-worrying thoughts (banxiet3, canxiet3) -I feel relaxed: positive (banxiet4, canxiet4) -frightened in stomach (banxiet5, canxiet5) -feel restless (banxiet6, canxiet6) -sudden feelings of panic (banxiet7, canxiet7) ActiFE Ulm HADS-A score (anxiety subscale) (HADS_A score_BL) TILDA HADS-A Anxiety scale (MHhadsa): - feel tense or wound up (SCQAnxiety1)* - fiel restless or wound up (SCQAnxiety3)* - sit at ease and feel relaxed (SCQAnxiety4)* - I get a sort of frightened feeling like "butterflies" in the stomach (SCQAnxiety5)* - I feel restless as if I have to be on the move (SCQAnxiety6)* - I feel restless as if I have to be on the move (SCQAnxiety6)* HADS-A anxiety score (range 0-21) - Value label: - O = low (minimum) - Bacut-off 21			1=some of the		
-worrying thoughts (banxiet3, canxiet3) -I feel relaxed: positive (banxiet4, canxiet4) -frightened in stomach (banxiet5, canxiet5) -feel restless (banxiet6, canxiet6) -sudden feelings of panic (banxiet7, canxiet7) ActiFE Ulm HADS-A score (anxiety subscale) (HADS_A score_BL) TILDA HADS-A Anxiety scale (MHhadsa): - feel tense or wound up (SCQAnxiety1)* - fiel restless or wound up (SCQAnxiety3)* - sit at ease and feel relaxed (SCQAnxiety4)* - I get a sort of frightened feeling like "butterflies" in the stomach (SCQAnxiety5)* - I feel restless as if I have to be on the move (SCQAnxiety6)* - I feel restless as if I have to be on the move (SCQAnxiety6)* HADS-A anxiety score (range 0-21) - Value label: - O = low (minimum) - Bacut-off 21		-frightened feeling (banxiet2, canxiet2)	Time		Variable label:
-I feel relaxed: positive (banxiet4, canxiet4) -frightened in stomach (banxiet5, canxiet5) -feel restless (banxiet6, canxiet6) -sudden feelings of panic (banxiet7, canxiet7) ActiFE Ulm HADS-A score (anxiety subscale) (HADS_A_score_BL) TILDA HADS-A Anxiety scale (MHhadsa): -feel tense or wound up (SCQAnxiety1)* -fightened feeling as if something awful is about to happen (SCQAnxiety2)* - worrying thoughts (SCQAnxiety3)* - it at ease and feel relaxed (SCQAnxiety4)* - I get a sort of frightened feeling like "butterflies" in the stomach (SCQAnxiety5)* - if feel relaxed: positive (banxiet5, canxiet5) - always JValue label: 0 = low (minimum) 8 = cut-off HADSA=HADS_A_score_BL 21= high (maximum) All cohorts include the HADS Anxiety scale, except for B-PROOF. - freel tense or wound up (SCQAnxiety3)* - sit at ease and feel relaxed (SCQAnxiety4)* - liget a sort of frightened feeling like "butterflies" in the stomach (SCQAnxiety5)* - if feel relaxed (SCQAnxiety6)*			2=occasionally		HADS-Anxiety score (range 0-21)
-frightened in stomach (banxiet5, canxiet5) -feel restless (banxiet6, canxiet6) -sudden feelings of panic (banxiet7, canxiet7) ActiFE Ulm HADS-A score (anxiety subscale) (HADS_A_score_BL) Summary score: 0-21 HADSA=HADS_A_score_BL TILDA HADS-A Anxiety scale (MHhadsa): - feel tense or wound up (SCQAnxiety1)* - frightened feeling as if something awful is about to happen (SCQAnxiety2)* - worrying thoughts (SCQAnxiety3)* - sit at ease and feel relaxed (SCQAnxiety4)* - I get a sort of frightened feeling like "butterflies" in the stomach (SCQAnxiety5)* - I feel restless as if I have to be on the move (SCQAnxiety6)* ActiFE Ulm HADSA=Anxiety scale (MHhadsa): - feel tense or wound up (SCQAnxiety1)* - sit at ease and feel relaxed (SCQAnxiety4)* - I feel restless as if I have to be on the move (SCQAnxiety6)* All cohorts include the HADS Anxiety scale, except for B-PROOF. HADSA=MHhadsa HADSA=MHhadsa All cohorts include the HADS Anxiety scale, except for B-PROOF.			-		
-feel restless (banxiet6, canxiet6) -sudden feelings of panic (banxiet7, canxiet7) ActiFE Ulm HADS-A score (anxiety subscale) (HADS_A_score_BL) Summary score: 0-21 HADSA=HADS_A_score_BL TILDA HADS-A Anxiety scale (MHhadsa): - feel tense or wound up (SCQAnxiety1)* - frightened feeling as if something awful is about to happen (SCQAnxiety2)* - sit at ease and feel relaxed (SCQAnxiety4)* - liget a sort of frightened feeling like "butterflies" in the stomach (SCQAnxiety5)* - I feel restless as if I have to be on the move (SCQAnxiety6)* - feel restless (banxiety, canxiet7) Butterflies a sort of frightened feeling like "butterflies" in the stomach (SCQAnxiety6)*					Value labels
-sudden feelings of panic (banxiet7, canxiet7) ActiFE Ulm HADS-A score (anxiety subscale) (HADS_A_score_BL) Summary score: 0-21 HADSA=HADS_A_score_BL TILDA HADS-A Anxiety scale (MHhadsa): - feel tense or wound up (SCQAnxiety1)* - frightened feeling as if something awful is about to happen (SCQAnxiety2)* - worrying thoughts (SCQAnxiety3)* - sit at ease and feel relaxed (SCQAnxiety4)* - I get a sort of frightened feeling like "butterflies" in the stomach (SCQAnxiety5)* - I feel restless as if I have to be on the move (SCQAnxiety6)* - summary score: 0-21 - HADSA=MHhadsa HADSA=MHhadsa HADSA=MHhadsa All cohorts include the HADS Anxiety scale, except for B-PROOF. - summary score: 0-21 - tell tense or wound up (SCQAnxiety3)* - summary score: 0-21 - except for B-PROOF. - summary score: 0-21 - tell tense or wound up (SCQAnxiety4)* - sit at ease and feel relaxed (SCQAnxiety4)* - l feel restless as if I have to be on the move (SCQAnxiety6)*			always		
ActiFE Ulm HADS-A score (anxiety subscale) (HADS_A_score_BL) Summary score: 0-21 HADSA=HADS_A_score_BL 21= high (maximum) All cohorts include the HADS Anxiety scale, except for B-PROOF. All cohorts include the HADS Anxiety scale, except for B-PROOF. Summary score: 0-21 1=very often indeed* 2=quite a lot* 3=not very often* 4=not at all* 1= feel restless as if I have to be on the move (SCQAnxiety6)*					
TILDA HADS-A Anxiety scale (MHhadsa): - feel tense or wound up (SCQAnxiety1)* - frightened feeling as if something awful is about to happen (SCQAnxiety2)* - worrying thoughts (SCQAnxiety3)* - sit at ease and feel relaxed (SCQAnxiety4)* - I get a sort of frightened feeling like "butterflies" in the stomach (SCQAnxiety5)* - I feel restless as if I have to be on the move (SCQAnxiety6)* HADSA=MHhadsa HADSA=MHhadsa HADSA=MHhadsa HADSA=MHhadsa All cohorts include the HADS Anxiety scale, except for B-PROOF.		-sudden feelings of panic (banxiet7, canxiet7)			8= cut-off
TILDA HADS-A Anxiety scale (MHhadsa): - feel tense or wound up (SCQAnxiety1)* - frightened feeling as if something awful is about to happen (SCQAnxiety2)* - worrying thoughts (SCQAnxiety3)* - sit at ease and feel relaxed (SCQAnxiety4)* - I get a sort of frightened feeling like "butterflies" in the stomach (SCQAnxiety5)* - I feel restless as if I have to be on the move (SCQAnxiety6)* HADSA=MHhadsa HADSA=MHhadsa HADSA=MHhadsa HADSA=MHhadsa All cohorts include the HADS Anxiety scale, except for B-PROOF.	ActiFE Ulm	HADS-A score (anxiety subscale) (HADS_A_score_BL)	Summary score: 0-21	HADSA=HADS A score BL	21= high (maximum)
- feel tense or wound up (SCQAnxiety1)* - frightened feeling as if something awful is about to happen (SCQAnxiety2)* - worrying thoughts (SCQAnxiety3)* - sit at ease and feel relaxed (SCQAnxiety4)* - I get a sort of frightened feeling like "butterflies" in the stomach (SCQAnxiety5)* - I feel restless as if I have to be on the move (SCQAnxiety6)*			,		
- feel tense or wound up (SCQAnxiety1)* - frightened feeling as if something awful is about to happen (SCQAnxiety2)* - worrying thoughts (SCQAnxiety3)* - sit at ease and feel relaxed (SCQAnxiety4)* - I get a sort of frightened feeling like "butterflies" in the stomach (SCQAnxiety5)* - I feel restless as if I have to be on the move (SCQAnxiety6)*					All cohorts include the HADS Anvioty scale
- frightened feeling as if something awful is about to happen (SCQAnxiety2)* - worrying thoughts (SCQAnxiety3)* - sit at ease and feel relaxed (SCQAnxiety4)* - I get a sort of frightened feeling like "butterflies" in the stomach (SCQAnxiety5)* - I feel restless as if I have to be on the move (SCQAnxiety6)* Jevery often indeed* 2=quite a lot* 3=not very often* 4=not at all*	TILDA			HADSA=MHhadsa	· ·
- frightened feeling as if something awful is about to happen (SCQAnxiety2)* - worrying thoughts (SCQAnxiety3)* - sit at ease and feel relaxed (SCQAnxiety4)* - I get a sort of frightened feeling like "butterflies" in the stomach (SCQAnxiety5)* - I feel restless as if I have to be on the move (SCQAnxiety6)*		- feel tense or wound up (SCQAnxiety1)*	Summary score: 0-21		except for B-PKOOF.
(SCQAnxiety2)* - worrying thoughts (SCQAnxiety3)* - sit at ease and feel relaxed (SCQAnxiety4)* - I get a sort of frightened feeling like "butterflies" in the stomach (SCQAnxiety5)* - I feel restless as if I have to be on the move (SCQAnxiety6)* 2=quite a lot* 3=not very often* 4=not at all*					
- worrying thoughts (SCQAnxiety3)* - sit at ease and feel relaxed (SCQAnxiety4)* - I get a sort of frightened feeling like "butterflies" in the stomach (SCQAnxiety5)* - I feel restless as if I have to be on the move (SCQAnxiety6)* 3=not very often* 4=not at all*					
- sit at ease and feel relaxed (SCQAnxiety4)* - I get a sort of frightened feeling like "butterflies" in the stomach (SCQAnxiety5)* - I feel restless as if I have to be on the move (SCQAnxiety6)* 4=not at all* 4=not at all*					
- I get a sort of frightened feeling like "butterflies" in the stomach (SCQAnxiety5)* - I feel restless as if I have to be on the move (SCQAnxiety6)*					
(SCQAnxiety5)* - I feel restless as if I have to be on the move (SCQAnxiety6)*			4=not at all*		
(SCQAnxiety5)* - I feel restless as if I have to be on the move (SCQAnxiety6)*		- I get a sort of frightened feeling like "butterflies" in the stomach			
- I feel restless as if I have to be on the move (SCQAnxiety6)*					
- I get sudden reelings of panic (SCQAnxiety/)*					
		- I get sudden feelings of panic (SCQAnxiety7)*			
	1				

		T		
B-PROOF	No anxiety scale present. Item from Euroquol about mood (depression/anxiety) (Euroqol_5)	Range 1-3: 1 = not depressed/scared 2 = a bit depressed/scared 3 = severely depressed/scared 0 = no 1 = yes	Not harmonized.	
	Items from SF12: - During the past four weeks, have you accomplished less than you would like to as a result of any emotional problems, such as feeling depressed or anxious? (SF12_6) - During the past four weeks, did you not do work or other regular activities as carefully as usual as a result of any emotional problems such as feeling depressed or anxious? (SF12_7)			
Rotterdam Study	Anxiety disorders were assessed using a slightly adapted version of the Munich Composite International Diagnostic Interview, to obtain DSM-IV diagnoses of generalized anxiety disorder, panic disorder, agoraphobia, social phobia and specific phobia. Obsessive compulsive disorder and post-traumatic stress disorder were not included	0 = no 1 = yes 7 = don't know 9 = no answer	For item 1, 3, 5, 11, 13: categories are recoded, e.g.: if (e5_EIHADS01=0) hads1=3. if (e5_EIHADS01=1) hads1=2. if (e5_EIHADS01=2) hads1=1. if (e5_EIHADS01=3) hads1=0.	
	Furthermore; the HADS-A Anxiety scale was used: - feel tense or wound up (e5_EIHADS01)* - frightened feeling as if something awful is about to happen (e5_EIHADS03)* - worrying thoughts (e5_EIHADS05)* - sit at ease and feel relaxed (e5_EIHADS07)* - I get a sort of frightened feeling like "butterflies" in the stomach (e5_EIHADS09)*		Finally, the original item 7 and 9 and the recoded items 1, 3, 5, 11, 13 are all summed up and computed as HADSA. For n=78: at least one of the single items was missing.	
	- I feel restless as if I have to be on the move (e5_EIHADS11)* - I get sudden feelings of panic (e5_EIHADS13)*	Range 0-21 0=most of the time 1=often 2=sometimes 3=never 7=don't know 9=no answer		
		*Order of categories (0-3 or 3-0) differs per question; item 7 and 9 are reverse of anxious. Item 7: 0=certainly 1=most of the time 2=not often 3=not at all 7=don't know 9=no answer		
		Item 9: 0=not at all 1=sometimes 2=quite often 3=very often 7=don't know 9=no answer		

Arthritis				
LASA	Do you have joint damage or osteoarthritis of the knees, hips or	<u>3B:</u>	Arthritis, wave 3B:	Variable name:
	hands? (BRHEUM01, CRHEUM01)	1=no	If BRHEUM01=2 or BRHEUM02=2 → arthritis =1	1. arthritis
	Do you have joint inflammation meaning chronic rheumatism or	2=yes	If BRHEUM01=1 and BRHEUM02=1 → arthritis =0*	2. osteoarthritis
	rheumatoid arthritis? (BRHEUM02, CRHEUM02)			3. rheumatoid
		<u>c:</u>	Arthritis, wave C:	
		0=no, never	if crheum01=1 or chreum01=2 or chreum01=3 or crheum02=1 or	Variable label:
		1=no, but at wave B yes	crheum02=2 or crheum02=3 → arthritis=1	1. Arthritis: OA, RA or other
		2=yes, but at wave B no	if crheum01=0 and crheum02=0 → arthritis=0*	2. Osteoarthritis
		3=yes, and at wave B yes		3. Rheumatoid arthritis
			Osteoarthritis, wave 3B:	
			If BRHEUM01=2 → osteoarthritis=1	Value labels:
			If BRHEUM01=1 → osteoarthritis=0	0=no
				1=yes
			Osteoarthritis, wave C:	
			if crheum01=1 or crheum01=2 or crheum01=3 → osteoarthritis=1	Notes:
			if crheum01=0 → osteoarthritis=0	The distribution of RA in the Rotterdam Study
				differs greatly from that of the other cohorts.
			Rheumatoid, wave 3B:	,
			If BRHEUM02=2 → rheumatoid =1	
			If BRHEUM02=1 → rheumatoid =0	
			Rheumatoid, wave C:	
			if crheum02=1 or crheum02=2 or crheum02=3 → rheumatoid=1	
			if crheum02=0 → rheumatoid=0	
			*) There were no cases in which only one of the two variables were missing.	
ActiFE Ulm	arthritis until baseline (C_arthritis_BL)	0=no	arthritis	
		1=yes	If C_arthritis_BL =1 → arthritis=1 or	
	rheumatism until baseline (C_rheuma_BL)	- ,55	If C_rheuma_BL =1 → arthritis=1	
	Rheumatism was determined using the following question: has a		If C_arthritis_BL =0 and	
	doctor ever told you that you have Rheumatic diseases? Such as classic		If C_rheuma_BL =0 → arthritis=0	
	rheumatism or lupus (not osteoarthritis / arthritis).			
			osteoarthritis	
	No data for osteoarthritis.		Not harmonized.	
			rheumatoid	
			If C_rheuma_BL=1 → rheumatoid=1	
			If C_rheuma_BL =0 → rheumatoid=0	
TILDA	Has a doctor ever told you that you have any of the following	0=no	arthritis	-
	conditions: arthritis (including osteoarthritis or rheumatism)	1=yes	If ph301_03=1 \rightarrow arthritis=1	
	(ph301_03)	There are no missing cases for	If ph301 03=0 → arthritis=0	
	If yes, which type or types of arthritis do you have:	ph301_03.		
	-osteoarthritis (ph304_1)	p501_05.	osteoarthritis	
	-rheumatoid arthritis (ph304_2)	-1= n/a (in case ph301_03 =0)	If ph304_1=1 → osteoarthritis=1	
	-some other kind of arthritis (ph304_3)	0=no	If ph304_1<=0 → osteoarthritis=0	
	-don't know (ph304_4)	1=yes	In phoof_10 / ostcoartificis-0	
	don't know (phoos_s)	1-763	rheumatoid	
			If ph304 2=1 → rheumatoid=1	
			If ph304_2<=0 → rheumatoid=0	
B-PROOF	No data available.		Not harmonized.	_
B-FROOF	INO Gata available.	l	NOT HAITHOUIZEU.	

Rotterdam	Were you ever diagnosed with rheumatoid arthritis by a	0 = no	arthritis	
Study	rheumatologist? (e5_EIRAA)	1 = yes	if e5_EI3ZG5=0 or e5_EI3ZG5=4 or e5_EI3ZG5=8 → arthritis=0	
		7 = don't know	if e5 El3ZG5=1 or e5 El3ZG5=2 or e5 El3ZG5=3 or e5 El3ZG5=5 or e5 El3ZG5=6→	
		9 = no answer	arthritis=1	
		3 - 110 diliswei		
	When was rheumatoid arthritis diagnosed for the first time?		osteoarthritis	
	(e5_eiraayr)	Date	Not harmonized.	
	(co_ciradyr)	Date	Not narmonized.	
	Have you ever gotten any medication for reumatoid arthritis?		rheumatoid	
	(e5_EIRAATX)		if e5_EI3ZG5=0 or e5_EI3ZG5=1 or (e5_EI3ZG5>=3 and e5_EI3ZG5<=6) or e5_EIRAA =0 \rightarrow	
		0 = no	rheumatoid=0	
		1 = yes	if e5_EI3ZG5=2 or e5_EIRAA =1 → rheumatoid=1	
		7 = don't know		
		8= n.a.		
	Have you ever experienced any pain or other complaints in your	9 = no answer		
	knees, back, hips or hand joints? (e5_EI3_00)			
	Do you experience any pain or stiffness in your knees? (e5_EI3KN01B)	0 = no		
	, , , , , , , , , , , , , , , , , , , ,	1 = yes		
		7 = don't know		
		9 = no answer		
		0 = no		
	Have you been to your general practitioner for your joint complaints?	1 = yes, pain		
	(e5_El3ZG1)	2 = yes, stiffness		
		3 = yes, pain and stiffness		
		7 = don't know		
		9 = no answer		
	Have you been to a specialist for your joint complaints? If yes, what			
	specialist? (e5_EI3ZG4)	0 = no		
		1 = yes		
		7 = don't know		
	Do you know what it is that you have? Did your general practitioner or	8= n.a.		
	the specialist tell you what it is? (e5_EI3ZG5)	9 = no answer		
	No data for osteoarthritis.	0 = no		
		1 = yes		
		7 = don't know		
		8= n.a.		
		9 = no answer		
		0 = no		
		1 = arthrose (worn joint)		
		2 = reumatoid arthritis (chronic)		
		3 = gout		
		4 = spit or sciatica		
		5 = Bekhterev's disease		
		6 = other		
		7 = don't know		
		8 = n.a.		
		9 = no answer		
	1	1	1	

Balance				
LASA	Tandem stance (up to 10 sec in C and up to 30 sec in 3B): -Time in seconds (btandem2, ctandem2) -Able to perform tandem stand test (btandem1, ctandem1)	Range 0-10/30 seconds 1=normal test 2=not capable 3=falls almost direct 4=stops within 3 sec 5=refusal 6=physically impossible	balance, wave C: If (ctandem1>=2 and ctandem1<=4) or ctandem1=6 → balance=0 If ctandem2>=3 and ctandem2<=9 → balance=1 If ctandem2>=10 → balance=2 balanceyn, wave C: If ctandem1>=2 and ctandem1<=4 or ctandem1=6 → balanceyn=0 If ctandem2>=3 and ctandem2<=9 → balanceyn=0 If ctandem2>=10 → balanceyn=1 balance, wave 3B: If (btandem1>=2 and btandem1<=4) or btandem1=6 → balance=0 If btandem2>=3 and btandem2<=9 → balance=1 If btandem2>=10 → balance=2 balanceyn, wave 3B: If btandem1>=2 and btandem1<=4 or btandem1=6 → balanceyn=0 If btandem2>=3 and btandem2<=9 → balanceyn=0 If btandem2>=3 and btandem2<=9 → balanceyn=0 If btandem2>=3 and btandem2<=9 → balanceyn=0 If btandem2>=10 → balanceyn=1	Variable name: 1.balance 2.balanceyn Variable label: 1.Ability to perform tandem test 2. Ability to perform tandem test (yes/no) Value label: balance: 0=unable 1=3-9 sec: poor performance 2=10+ sec: good performance balanceyn: 0=unable <10s 1=able >10s
ActiFE Ulm	As part of the SPPB, a semitandam stand, side-by-side stand, and a tandem stand were done. The combined results of these tests were reported using a five-point scale. SPPB typically uses the following instructions for these tests: "Begin with a semitandem stand (heel of one foot placed by the big toe of the other foot). Individuals unable to hold this position should try the side-by-side position. Those able to stand in the semitandem position should be tested in the full tandem position. Once you have completed time measures, complete ordinal scoring." Balance test (SPPB_b_cat_BL)	0 = side by side 0-9 sec or unable 1 = side by side 10, <10 sec semitandem 2 = semitandem 10 sec, tandem 0- 2 sec 3 = semitandem 10 sec, tandem 3- 9 sec 4 = tandem 10 sec	balance if SPPB_b_cat_BL = 0 or SPPB_b_cat_BL = 1 or SPPB_b_cat_BL = 2 → balance = 0 if SPPB_b_cat_BL = 3 → balance = 1 if SPPB_b_cat_BL = 4 → balance = 2 balanceyn if SPPB_b_cat_BL >= 0 and SPPB_b_cat_BL <= 3 → balanceyn = 0 if SPPB_b_cat_BL = 4 → balanceyn = 1	
TILDA	We are interested in your steadiness when walking, standing or getting up from a chair. -When walking, do you feel: (PH411) -When standing, do you feel: (PH412) -When getting up from a chair, do you feel: (PH413)	 very steady, slightly steady, slightly unsteady, very unsteady DK RF 	Not harmonized; no objective test performed (only TUG, which was used for mobility variable).	

B-PROOF	Subjective measure:		Balance:	
	Subjective 2yr change in balance. (FU1_physicalfunc_balance)	1 = much better	If PP_tandem=0 → balance=0	
		2 = somewhat better	If PP_tandem=2 → balance=1	
		3 = no change	If PP_tandem=4 → balance=2	
		4 = Somewhat worse		
		5 = much worse	Balanceyn:	
			If PP_tandem=0 or PP_tandem=2 → balanceyn=0	
	Objective measures:		If PP_tandem=4 → balanceyn=1	
	Tandem test:			
	- Tandem score (PP26)	1 = normal test		
		2 = not capable		
	NB: PP26 is assigned by the interviewer, but might be incorrect.	3 = falls almost direct		
	Tandem score was calculated again by PP_tandem, via PP_time (see	4 = stops within 3 sec		
	sumscores)	5 = refusal		
		6 = physical impossible		
	-Time in seconds (PP_time)			
	-Able to perform tandem stand test (PP_tandem)	Time of tandem stand		
		Tandem score:		
		0 = unable		
		2 = able to hold 3-9 seconds		
		4 = able to hold at least 10 seconds		
		PP23		
		0 = not possible		
		1 = position feet: shoulder width		
		2 = position feet: closed		
	Romberg: position (pp23)	3 = position feet: stride stand		
		4 = position feet: tightrope walker		
		1 = eyes open		
		2 = eyes closed		
		Time of Romberg position		
	Romberg: eyes open/closed (pp24)			
	Romberg: time in seconds (pp25)			
<u> </u>		1	•	

Rotterdam	Standing, eyes opened (e5_16385): Standing position. Can you stand on one foot? If not, can you stand in tandem position (one foot before the other). If this is not possible, can you stand with your feet right next to eachother? Natural position; can your stand in a comfortable position? Standing, eyes opened.	0 = normal, standing on one foot >10s. 1 = feet together, not one foot >10s. 2 = feet together, not in tandem position. 3 = feet not together, natural position. 4 = without support, natural position, with correction. 5 = natural position with support of one arm 6 = cannot stand 8 = not applicable/default 9 = missing 1 = normal 2 = declined 3 = not judgeable 9 = missing 8 = not applicable/default 0 = normal	Balance: Not harmonized; no data on duration of tandem test. Balanceyn: If e5_16385=0 or e5_16385=1 → balanceyn=1 If e5_16385>=2 and e5_16385<=6 → balanceyn=0	
	PD – Body swing with feet together, eyes opened PD - Body swing with feet together, eyes closed	1 = a little unsteady 2 = some unsteadiness (head<10cm) 3 = very unsteady (head>10cm) 4 = falling directly 9 = missing 8 = not applicable/default		
Blood press	ure			
LASA	Blood pressure measured in duplicate in 3B on the upper arm while	In mmHg	BPsys/BPdias, wave C:	Variable name:
LASA	sitting using an automatic Omron device (left arm, if not possible right). In LASA C, blood pressure was first measured once using the respondents finger. Then, blood pressure was measured once in sitting position, in lying position and in standing position. Systolic, finger (cmvar9) Diastolic, finger (cmvar10) Systolic, sitting (bmarmss1, bmarmss2, cmvar800) Diastolic, sitting (bmarmds1, bmarmds2, cmvar801) Systolic, lying (cmvar803) Diastolic, lying (cmvar804) Systolic, standing (cmvar806) Diastolic, standing (cmvar807) Blood pressure measurements using a finger cuff are considered to be relatively inaccurate (https://www.ncbi.nlm.nih.gov/pubmed/17280997).	Missing wave C: n=36 Missing wave 3B: 1: n=26 2: n=35	if (cmvar800>0 and cmvar803<=0 and cmvar806<=0) → BPsys=cmvar800 if (cmvar801>0 and cmvar804<=0 and cmvar807<=0) → BPdias=cmvar801 if (cmvar800>0 and cmvar803>0 and cmvar806<=0) → BPsys=min(cmvar800, cmvar803) if (cmvar801>0 and cmvar804>0 and cmvar807<=0) → BPdias=min(cmvar801, cmvar804) if (cmvar800>0 and cmvar803<=0 and cmvar806>0) → BPsys=min(cmvar800, cmvar806) if (cmvar801>0 and cmvar804<=0 and cmvar807>0) → BPdias=min(cmvar801, cmvar807) if (cmvar800<=0 and cmvar803>0 and cmvar806>0) → BPsys=min(cmvar803, cmvar806) if (cmvar801<=0 and cmvar804>0 and cmvar807>0) → BPdias=min(cmvar804, cmvar807) if (cmvar800<=0 and cmvar803>0 and cmvar806<=0) → BPsys=cmvar803 if (cmvar801<=0 and cmvar804>0 and cmvar806<=0) → BPsys=cmvar804 if (cmvar801<=0 and cmvar803<=0 and cmvar806>0) → BPsys=cmvar806 if (cmvar801<=0 and cmvar804<=0 and cmvar807>0) → BPdias=cmvar806 if (cmvar801<=0 and cmvar803>0 and cmvar807>0) → BPdias=cmvar807 if (cmvar801>0 and cmvar803>0 and cmvar807>0) → BPdias=cmvar807 if (cmvar801>0 and cmvar803>0 and cmvar806>0) → BPsys=min(cmvar800, cmvar803, cmvar806) if (cmvar801>0 and cmvar804>0 and cmvar807>0) → BPdias=min(cmvar801, cmvar804, cmvar807) BPsysm/BPdiasm, wave C:	BPsys BPdias Variable labels: Lowest blood pressure – systolic (mmHg) Lowest blood pressure – diastolic (mmHg) Note: in case there were more than one measurements for a cohort, the mean measure was taken (arm, sitting position) to have more data, as only lowest values were available for B-PROOF. If for some participants the second was not available, the first measure was taken. Variable name: BPsysm BPdiasm

	T	T		Tr 11 1 1
			if (cmvar800>0 and cmvar803<=0 and cmvar806<=0) → BPsysm=cmvar800	Variable labels: :
			if (cmvar801>0 and cmvar804<=0 and cmvar807<=0) → BPdiasm=cmvar801	Mean blood pressure – systolic (mmHg)
			if (cmvar800>0 and cmvar803>0 and cmvar806<=0) → BPsysm=mean(cmvar800,	Mean blood pressure – diastolic (mmHg)
			cmvar803)	
			if (cmvar801>0 and cmvar804>0 and cmvar807<=0) → BPdiasm=mean(cmvar801,	
			cmvar804)	
			if (cmvar800>0 and cmvar803<=0 and cmvar806>0) → BPsysm=mean(cmvar800,	
			cmvar806)	
			if (cmvar801>0 and cmvar804<=0 and cmvar807>0) → BPdiasm=mean(cmvar801,	
			cmvar807)	
			if (cmvar800<=0 and cmvar803>0 and cmvar806>0) → BPsysm=mean(cmvar803,	
			cmvar806)	
			if (cmvar801<=0 and cmvar804>0 and cmvar807>0) → BPdiasm=mean(cmvar804,	
			cmvar807)	
			if (cmvar800<=0 and cmvar803>0 and cmvar806<=0) → BPsysm=cmvar803	
			if (cmvar801<=0 and cmvar804>0 and cmvar807<=0) → BPdiasm=cmvar804	
			if (cmvar800<=0 and cmvar803<=0 and cmvar806>0) → BPsysm=cmvar806	
			if (cmvar801<=0 and cmvar804<=0 and cmvar807>0) → BPdiasm=cmvar807	
			if (cmvar800>0 and cmvar803>0 and cmvar806>0) → BPsysm=mean(cmvar800, cmvar803,	
			cmvar806)	
			if (cmvar801>0 and cmvar804>0 and cmvar807>0) → BPdiasm=mean(cmvar801,	
			cmvar804, cmvar807)	
			BPsys/BPdias, wave 3B:	
			if (BMARMSS1>0 and BMARMSS2>0) → BPsys=min(BMARMSS1, BMARMSS2)	
			if (BMARMSS2<0 and BMARMSS1>0) → BPsys=BMARMSS1	
			if (BMARMSS1<0 and BMARMSS2>0) → BPsys=BMARMSS2	
			if (BMARMDS1>0 and BMARMDS2>0) → BPdias=min(BMARMDS1, BMARMDS2)	
			if (BMARMDS2<0 and BMARMDS1>0) → BPdias=BMARMDS1	
			if (BMARMDS1<0 and BMARMDS2>0) → BPdias=BMARMDS2	
			BPsysm/BPdiasm, wave 3B:	
			if (BMARMSS1>0 and BMARMSS2>0) → BPsysm=mean(BMARMSS1, BMARMSS2)	
			if (BMARMSS2<0 and BMARMSS1>0) → BPsysm=Inean(BMARMSS1, BMARMSS2)	
			if (BMARMSS1<0 and BMARMSS2>0) → BPsysm=BMARMSS2	
			II (DIVINITIVISOT NO GITA DIVINITIVISOZ NO DE SYSTII-DIVINITIVISOZ	
			if (BMARMDS1>0 and BMARMDS2>0) → BPdiasm=mean(BMARMDS1, BMARMDS2)	
			if (BMARMDS2<0 and BMARMDS1>0) → BPdiasm=BMARMDS1	
			if (BMARMDS1<0 and BMARMDS2>0) → BPdiasm=BMARMDS2	
ActiFE Ulm	Blood pressure measured (BP was measured three times, using Blood	Missing: n=5	BPsys/BPdias	1
	Pressure Monitor UA-767BT from A&D Medical):		BPsys=min(syst_1_BL, syst_2_BL, syst_3_BL)	
	Systolic (syst_1_BL, syst_2_BL, syst_3_BL)		BPdias=min(diast_1_BL, diast_2_BL, diast_3_BL)	
	Diastolic (diast_1_BL, diast _2_BL, diast _3_BL)		DD /DD.dia ama	
			BPsysm/BPdiasm	
			BPsysm=mean(syst_1_BL, syst_2_BL, syst_3_BL)	1
			BPdiasm=mean(diast_1_BL, diast _2_BL, diast _3_BL)	

TILDA	Blood pressure measured in duplicate on the upper arm while sitting		BPsys	
	using an Omron M10-IT, Omron Inc., Kyoto, Japan)		if BPseatedsystolic1>0 and BPseatedsystolic2>0 → BPsys=min(BPseatedsystolic1,	1
	Systolic (BPseatedsystolic1, BPseatedsystolic2,		BPseatedsystolic2)	
	BPseateddiastolicmean)		if sysmis(BPseatedsystolic2) → BPsys=BPseatedsystolic1	
	Diastolic (BPseateddiastolic1, BPseateddiastolic2,		if sysmis(BPseatedsystolic1) → BPsys=BPseatedsystolic2	
	BPseatedsystolicmean)	Range 75-222		1
			BPdias	
	Note: standing blood pressure measurements have also been taken.		if (BPseateddiastolic1>0 and BPseateddiastolic2>0) BPdias=min(BPseateddiastolic1,	1
		Range 46-132	BPseateddiastolic2)	
			if sysmis(BPseateddiastolic2) →	1
			BPdias=BPseateddiastolic1	
			if sysmis(BPseateddiastolic1) → BPdias=BPseateddiastolic2	
			BPsysm	
			if BPseatedsystolic1>0 and BPseatedsystolic2>0 → BPsysm=mean(BPseatedsystolic1,	
			BPseatedsystolic2)	
			if sysmis(BPseatedsystolic2) → BPsysm=BPseatedsystolic1	
			if sysmis(BPseatedsystolic1) → BPsysm=BPseatedsystolic2	1
			BPdiasm	1
			if (BPseateddiastolic1>0 and BPseateddiastolic2>0) BPdiasm=mean(BPseateddiastolic1,	1
			BPseateddiastolic2)	1
			if sysmis(BPseateddiastolic2) → BPdiasm=BPseateddiastolic1	
			if sysmis(BPseateddiastolic1) → BPdiasm=BPseateddiastolic2	
				1

	T	1		
B-PROOF	Blood pressure is measured in duplicate using an Omron M1 plus blood pressure device (Omron Healthcare Europe). Sitting or	In mmHg. No information on range.	BPsys/BPdias if (BP_systolic>0) → BPsys=BP_systolic	
	standing?	n= 1,798: no data for 1 and 2	if (BP_diastolic>0) → BPdias=BP_diastolic	
		(EMC).		
	mmHg), BP_systolic_1, BP_systolic_2)		BPsysm/BPdiasm	
	Diastolic blood pressure (BP_diastolic (lowest diastolic blood pressure	*If both BP measurements are	If (BP_systolic_1 > 0 AND BP_systolic_2 >0) → BPsysm = mean(BP_systolic_1,	
	in mmHg) BP_diastolic_1, BP_diastolic_2)	missing the EMC data is taken	BP_systolic_2)	
	NB: BP_systolic_1, BP_diastolic_1, BP_systolic_2 and BP_diastolic_2	(=lowest value: BP_systolic or	If SYSMIS(BPsysm) → BPsysm = BP_systolic	
	are missing for all EMC data at baseline, because at EMC only the	BP_diastolic).	If (BP_diastolic_1 > 0 AND BP_diastolic_2 > 0) → BPdysm = mean(BP_diastolic_1,	
	lowest systolic blood pressure was reported. Follow-up includes data	>n=557 missing, so for these cases		
	of all three centers.	no EMC data is available.	If SYSMIS(BPdysm) → BPdysm = BP_diastolic	
	What is the blood pressure status? (BP_status)			
		Range		
		1 = complete and reliable		
		2 = not reliable and incomplete		
		3 = technical problems		
		4 = not motivated 5 = physical limitations		
	Blood pressure is measured during vascular measurements, non-	6 = pain		
	invasively in two of the research centres (which?) using a datascoop	7 = other limitations		
	(which device?):	8 = participant did not follow		
	Systolic blood pressure (SBP_datascoop)	instructions		
	Diastolic blood pressure (DBP_datascoop)	9 = measurement not performed		
	Mean arterial pressure (MAP_datascoop)			
		In mmHg.		
	Ambulatory blood pressure monitoring (24-h) is performed using Oscar 2 ambulatory blood pressure monitor (SunTech Medical, North	No information on range.		
	Carolina, USA):			
	Systolic blood pressure (SBP_total_ABPM, SBP_total_ABPM_SD,			
	SBP_day_ABPM, SBP_day_ABPM_SD, SBP_night_ABPM,			
	SBP_night_ABPM_SD)			
	Diastolic blood pressure (DBP_total_ABPM, DBP_total_ABPM_SD,			
	DBP_day_ABPM, DBP_day_ABPM_SD, DBP_night_ABPM,			
	DBP_night_ABPM_SD)			
	Mean arterial pressure (MAP_total_ABPM, MAP_total_ABPM_SD,			
	MAP_day_ABPM, MAP_day_ABPM_SD, MAP_night_ABPM, MAP_night_ABPM_SD)			
	MAY THEIR VOLIM 201			

Rotterdam Study	Blood pressure was measured at the right brachial artery with the participant in sitting position. Systolic bloodpressure 1 in sitting position (in mmHg) (e5_15637) Diastolic bloodpressure 1 in sitting position (in mmHg) (e5_15638) Systolic bloodpressure 2 in sitting position (in mmHg) (e5_15639) Diastolic bloodpressure 2 in sitting position (in mmHg) (e5_15640) Mean of two measurements: Systolic blood pressure (e5_15641) Diastolic blood pressure (e5_15642)	Range 888=missing	BPsys if e5_15637>0 and e5_15637<888 and e5_15639>0 and e5_15639<888 → BPsys = min(e5_15637, e5_15639) if not missing(e5_15637) and missing(e5_15639) → BPsys = e5_15637 if missing(e5_15637) and not missing(e5_15639) → BPsys = e5_15639 BPdias if e5_15638>0 and e5_15638<888 and e5_15640>0 and e5_15640<888 → BPdias = min(e5_15638, e5_15640) if not missing(e5_15638) and missing(e5_15640) → BPdias = e5_15638 if missing(e5_15638) and not missing(e5_15640) → BPdias = e5_15640 BPsysm if e5_15641>0 and e5_15641<888 → BPsysm = e5_15641 BPdiasm	
Dad	n des (DAAI)		if e5_15642>0 and e5_15642<888 → BPdiasm = e5_15642	
Body mass in				
LASA	BMI calculated from measured height (BMED150, CMED150) and weight (BMED153, CMED153)		Wave C: bmi= CMED153/(CMED150/100) ² If CMED150=missing or CMED153=missing → bmi=missing Wave 3B: bmi= BMED153/(BMED150/100) ² If BMED150=missing or BMED153=missing → bmi=missing	Variable name: bmi Variable label: BMI
ActiFE Ulm	BMI (BMI_BL) calculated from measured height (Length_BL) and weight (Weight_BL)	Kg/m ²	Use as is. bmi=BMI_BL	
TILDA	BMI calculated from measured height (height) and weight (weight) and presented in the variable labelled FRbmi	Weight: 45-135 kg Height: 145-185 cm	Can be used as is. Only needs to be renamed. bmi= FRbmi	
B-PROOF	BMI (BMI) calculated from measured height (Length) and weight (Weight)	Kg/m ²	Can be used as is. If bmi<=0 → bmi=missing	
Rotterdam Study	BMI calculated from measured height in cm (e5_229) and weight in kg (e5_230)	Range height: 100.0-250.0 cm Range weight: 30.0-160.0 kg 999.9=missing 888.8=not appropriate-default	If e5_230 >888 or e5_229 >888 → bmi=missing bmi= e5_230 / (e5_229/100) ²	
Cancer				·
LASA	Do/did you have: cancer (BCANCER1, CCANCER1)	3B: 1=no 2=yes C: 0=no, never 1=no, but at wave B yes 2=yes, but at wave B no 3=yes, and at wave B yes	Wave C: If ccancer1=0 → cancer=0 If ccancer1=1 or ccancer1=2 or ccancer1=3 → cancer=1 Wave 3B: If BCANCER1=1 → cancer=0 If BCANCER1=2 → cancer=1	Variable name: cancer Variable label: History of cancer Value label: 0=no 1=yes

		1		
ActiFE Ulm	cancer until baseline (C_cancer_BL)	0=no	Use as is.	
		1=yes	Cancer= C_cancer_BL	
TILDA	Has a doctor ever told you that you have any of the following	0=no	Use as is.	
	conditions?	1=yes	Cancer=ph301_05	
	-Cancer or malignant tumor (ph301_05)			
B-PROOF	No data: includes data on adverse events (including cancer) from the follow-up measurements and during follow-up, but about lifetime		Not harmonized.	
	cancer			
Rotterdam	Heeft u sinds datum interview ERGO-4/ErgoPlus-2/ErgoJong-1 kanker	0 = No	if e5_EIMC31 = 0 or ep_pimc31 = 0 or e4_dimc31 = 0 or e3_camama = 0 or e3_capros = 0	
Study	gehad? (e5_EIMC31)	1 = Yes	or e3_cacol = 0 or e2_b2casev = $0 \rightarrow$ cancer = 0.	
	Heeft u ooit kanker gehad? (ep_pimc31)	7 = Don't know	if e5_EIMC31 = 1 or ep_pimc31 = 1 or e4_dimc31 = 1 or e3_camama = 1 or e3_capros = 1	
	Heeft u sinds (ERGO 3/plus) datum kanker gehad? (e4_dimc31)	9 = No answer	or e3_cacol = 1 or e2_b2casev = 1 \rightarrow cancer = 1.	
	Heeft u ooit borstkanker gehad? (e3_camama)			
	Heeft u ooit prostaatkanker gehad? (e3_capros)			
	Heeft u ooit dikke darmkanker gehad? (e3_cacol)			
	Ever diagnosed for cancer? (e2_b2casev)			
Cardiovascu	lar disease			
LASA	See appendix 5.			See appendix 5.
ActiFE Ulm				It makes more sense to use the CVD variables
				individually as the cohorts differ with respect to
TILDA	1			the conditions that were reported on.
B-PROOF	-			1
Rotterdam	-			
study				
Arrhythmia				
LASA	self report surgery: pacemaker (b/c_surARI)	-1 = missing	Wave C:	Variable name:
	use of antiarrhythmics (b/c_mARI)	0 = no	If $c_{alg} ARI = 0 \rightarrow arrhythmia = 0$	arrhythmia
	gp diagnosis: cardiac arrhythmia (b/c_gpARI)	1 = yes	If c_alg_ARI = 1 → arrhythmia = 1	, c
	8p 4148.10001 001 0100 0111/1011110 (2) 0_8p. 411/	2 = possible		Variable label:
			Wave 3B:	History of arrhythmia
	Algorithm for determining presence of arrhythmia (see LASA website	-1 = missing	If b3_ARI = 0 → arrhythmia = 0	, ,
	for the complete algorithm) (c_alg_ARI / b3_ARI)	0 = no	If b3 ARI = 1 \rightarrow arrhythmia = 1	Value label:
	7 7 7 52 7 2 7	1 = definitive		0=no
		2 = possible		1=yes
		3 = contradictory		,
		-		Note that for LASA there was only a self-report
TILDA	Has a doctor ever told you that you have any of the following	0=no	Can be used as is. Only needs to be renamed.	for having a pacemaker. Therefore we used
	conditions:	1=yes	arrhythmia=ph201_10	LASA's algorithm for determining history of
	-angina (ph201_02)			arrhythmia.
	-heart attack (ph201_03)			
	-heart failure (ph201_04)			
	-heart murmur (ph201_09)			
	-abnormal heart rhythm (ph201_10)			
	-other heart trouble (ph201_11)			

B-PROOF	Which type of CVD does participant have? (CVdisease)	1 = arrhythmia 2 = angina pectoris 3 = myocardial infarction 4 = heart failure 5 = atrial septum defect 6 = pericarditis 7 = aneurysm 8 = pulmonal hypertension 678 missing (23,2%)	If CVdisease not 1 → arrhythmia =0 If CVdisease =1 → arrhythmia =1	
ERGO	No data		Not harmonized.	
ActiFE Ulm	No data		Not harmonized.	
Angina pect	oris			
LASA	self report: angina pectoris (b3_srAP/c_srAP) gp diagnosis: angina pectoris (b3_gpAP/c_gpAP) use of nitratess (b3_mAP /c_mAP)	-1 = missing 0 = no 1 = yes 2 = possible	Wave C: If c_srAP = 0 → anginap= 0 If c_srAP = 1 → anginap= 1 Wave 3B:	Variable name: anginap Variable label: History of angina pectoris
	Algorithm for determining presence of angina pectoris (c_alg_AP / b3_AP)	-1 = missing 0 = no 1 = definitive 2 = possible 3 = contradictory	If $b3_srAP = 0 \rightarrow anginap = 0$ If $b3_srAP = 1 \rightarrow anginap = 1$	Value label: 0=no 1=yes
TILDA	Has a doctor ever told you that you have any of the following conditions: -angina (ph201_02) -heart attack (ph201_03) -heart failure (ph201_04) -heart murmur (ph201_09) -abnormal heart rhythm (ph201_10) -other heart trouble (ph201_11)	0=no 1=yes	anginap= ph201_02	
B-PROOF	Which type of CVD does participant have? (CVdisease)	1 = arrhythmia 2 = angina pectoris 3 = myocardial infarction 4 = heart failure 5 = atrial septum defect 6 = pericarditis 7 = aneurysm 8 = pulmonal hypertension	If CVdisease not 2 → anginap =0 If CVdisease =2 → anginap =1	
ERGO	No data		Not harmonized.	
ActiFE Ulm	No data		Not harmonized.	

Myocardial	infarction			
LASA	self report: myocardial infarction (b3_srMI/c_srMI) gp diagnosis: MI (b3_gpMI/c_gpMI)	-1 = missing 0 = no 1 = yes 2 = possible	Wave C: If c_srMI = 0 → myocardinf = 0 If c_srMI = 1 → myocardinf = 1 Wave 3B:	Variable name: myocardinf Variable label: History of myocardial infarction
	Algorithm for determining presence of MI (c_alg_MI / b3_MI)	-1 = missing 0 = no 1 = definitive 2 = possible 3 = contradictory	If b3_srMI = 0 → myocardinf = 0 If b3_srMI = 1 → myocardinf = 1	Value label: 0=no 1=yes
TILDA	Has a doctor ever told you that you have any of the following conditions: -angina (ph201_02) -heart attack (ph201_03) -heart failure (ph201_04) -heart murmur (ph201_09) -abnormal heart rhythm (ph201_10) -other heart trouble (ph201_11)	0=no 1=yes	myocardinf= ph201_03	
B-PROOF	Which type of CVD does participant have? (CVdisease)	1 = arrhythmia 2 = angina pectoris 3 = myocardial infarction 4 = heart failure 5 = atrial septum defect 6 = pericarditis 7 = aneurysm 8 = pulmonal hypertension	If CVdisease not 3 → Myocardinf =0 If CVdisease =3 → Myocardinf =1	
ERGO	Heeft u na (datum interview ERGO-4/ErgoPlus-2/ErgoJong-1) wel eens een hartinfarct doorgemaakt ? (e5_EIMI) Heeft u ooit een hartinfarct doorgemaakt? (EP_pimc9) Heeft u na (datum interview ERGO-3/Plus) wel eens een hartinfarct doorgemaakt ? (e4_dimi) Heeft u na (datum interview ERGO-1) wel eens een hartinfarct doorgemaakt ? (e3_cimi) Myocardial infarction after Ergo1? (e2_b1mi) Did you ever experience a heart attack? (e1_aimi)	0=nee 1=ja	if e5_EIMI = 0 or EP_pimc9 = 0 or e4_dimi = 0 or e3_cimi = 0 or e2_b1mi = 0 or e1_aim = 0 → myocardinf = 0. if e5_EIMI = 1 or EP_pimc9 = 1 or e4_dimi = 1 or e3_cimi = 1 or e2_b1mi = 1 or e1_aim = 1 → myocardinf = 1.	
ActiFE Ulm	myocardial infarction until baseline (C_myocardinf_BL)	0=no 1=yes	myocardinf= C_myocardinf_BL	

Heart failure				
LASA	self reported diagnosis of congestive heart failure (b3_srCHF/c_srCHF)	-1 = missing	Wave C:	Variable name:
		0 = no	If $c_srCHF = 0 \rightarrow heartf = 0$	heartf
	medication for congestive heart failure (b3_mCHF/c_mCHF)	1 = yes	If $c_{srCHF} = 1 \rightarrow heartf = 1$	
		2 = possible		Variable label:
	Algorithm for determing presence of congestive heart failure	-	Wave 3B:	History of heart failure
	(c_alg_CHF / b3_CHF)		If b3_srCHF = 0 \rightarrow heartf = 0	
			If b3_srCHF = 1 → heartf = 1	Value label:
				0=no
				1=yes
		-1 = missing		
		0 = no		
		1 = definitive		
		2 = possible		
		3 = contradictory		
TILDA	Has a doctor ever told you that you have any of the following	0=no	heartf= ph201_04	
	conditions:	1=yes		
	-angina (ph201_02)			
	-heart attack (ph201_03)			
	-heart failure (ph201_04)			
	-heart murmur (ph201_09)			
	-abnormal heart rhythm (ph201_10)			
	-other heart trouble (ph201_11)			
B-PROOF	Which type of CVD does participant have? (CVdisease)	1 = arrhythmia	If CVdisease not 4 → heartf =0	
BINOOI	which type of evalues participant have: (evaluese)	2 = angina pectoris	If CVdisease =4 → heartf =1	
		3 = myocardial infarction	iii evalsease = 7 / ileara = 1	
		4 = heart failure		
		5 = atrial septum defect		
		6 = pericarditis		
		7 = aneurysm		
		8 = pulmonal hypertension		
ERGO	No data		Not harmonized	_
ActiFE Ulm	heart failure until baseline (C_heartf_BL)	0=no	heartf C_heartf_BL	
ACTIFE OIIII	Theart failure until baseline (C_hearti_bb)	1=yes		
		1-yes		
Cohort				
LASA C			cohort=1	Variable name:
LASA 3B			cohort=2	cohort
ActiFE Ulm			cohort=3	
TILDA			cohort=4	Value labels: — 1=LASA C
B-PROOF			cohort=5	
Rotterdam			cohort=6	3=ActiFE Ulm
study				4=TILDA
				5=B-PROOF
				6=Rotterdam study
				- Notterdam study

Creatinine				
LASA	Blood/Serum: creatinine uMOL/L (cmcreati/bmcreat)	-1 = missing	Wave C: If (cmcreati>0) creatinine = cmcreati GFRe variable created.	Variable name: 1. creatinine 2. eGFR
			Wave 3B: If (bmcreat>0) creatinine = bmcreat GFRe variable created.	Variable label: Creatinine (μmol/l) eGFR (Cockcroft and Gault formula)
ActiFE Ulm	Serum creatinine (μmol/l) (LAB_Creatinine_BL)		LAB_Creatinine_BL=creatinine GFRe variable created.	GFR can be estimated as follows: eGFR = ((140 – age (years)) × weight (kg) × (1.23male + 1.05females)) /serum
TILDA	No data in public dataset.		Not harmonized.	creatinine(µmol/L)
B-PROOF	Serum creatinine level (micromol/l) (Creatinine)		Use as is. GFRe variable created.	Note: The Cockcroft and Gault formula is generally not considered to be the most
Rotterdam study	Creatinine in serum (µmol/l) (e5_15751)	8888=not applicable/default	e5_15751=creatinine	accurate formulate for estimating GFR since it does not take into account ethnicity. However,
,			GFRe variable created.	most cohorts lack data on ethnicity.
CRP level				
LASA	cmhscrp, bmhscrp	Range (in mg/L) -2= no data, n.a1= no valid data	Wave C: If (cmhscrp>0)CRP = cmhscrp	Variable name: CRP
			Wave 3B: If (bmhscrp >0) CRP = bmhscrp	Variable label: CRP (mg/l)
ActiFE Ulm	LAB_CRP_BL	Range (in mg/l)	Use as is. CRP = LAB_CRP_BL	
TILDA	CRP_W1	Range (in mg/l)	Use as is. $CRP = CRP_W1$	
B-PROOF	CRP	Range (in mg/l)	Use as is.	
Rotterdam study	No data available.		Not harmonized.	
Depression				
LASA	20-item Center for Epidemiologic Studies Depression Scale (CES-D) (bcesdint, ccesdint) Reference:	Range 0-60 (scores >16 are indicative of clinical depression)	Wave C: If ccesdint <16 → depression=0 If ccesdint >=16 → depression=1 Zdepression variable created	Variable name: 1. depression 2. zdepression
	Radloff LS, Teri L. Use of the CES-D with older adults. Clin Gerontol. 1986; 5, 119-36.		Wave 3B: If bcesdint <16 → depression=0 If bcesdint >=16 → depression=1 Zdepression variable created	Variable labels: 1. Clinical depression (Yes/No) 2. Z-score depression Value label depression: 0=no clinically relevant depression

ActiFE Ulm	HADS-Depression (HADS_D_score_BL)	Range 0-21	If HADS_D_score_BL < 8 → depression = 0	1=clinically relevant depression
			If HADS_D_score_BL >= 8 → depression = 1	
	Cut-off score of 8 appears to be optimal, and is commonly used.			Ref CESD cut-offs:
			Zdepression variable created	https://edge.edx.org/assets/courseware/v1/f61
	Reference:			7df004b9ff814249a98b79773cd6e/asset-
	Bjelland, L. The validity of the Hospital Anxiety and Depression Scale.			v1:GeorgetownX+CCHD+2016+type@asset+bloc
	An updated literature review. Journal of Psychosomatic Research.			k/CESD.pdf
	2002; 52 (2), 69-77			Ref GDS:
				https://econtent.hogrefe.com/doi/full/10.1024/
				<u>1662-9647/a000101</u>
TILDA	20-item Center for Epidemiologic Studies Depression Scale (CES-D)	Range 0-60	If MHcesd_capi<16 → depression=0	
	(MHcesd_capi)	(scores >16 are indicative of	If MHcesd_capi>=16 → depression=1	
		clinical depression)		Note: in accordance with total scores
			Zdepression variable created	constructed in TILDA and LASA; when one of the
				items was missing, no total cesd score was
B-PROOF	Geriatric Depression Scale (GDS) is used (GDS_score)	Score GDS, Range 0-15	If GDS score<6 → depression=0	developed for ERGO (same approach as for
D I NOO!	definitive pelpression scale (abs) is used (abs_scale)	Score >= 6 possible/clinically	If GDS score>=6 → depression=1	HADS-Anxiety).
		relevant depression	11 655_556167 0 7 depression 1	
		relevant depression	Zdepression variable created	
		1 = not depressed/scared	Zuepression variable created	
		2 = a bit depressed/scared		
	Sub items from SF and Eurogol scales about depression:	3 = severe depressed/scared		
	Euroqol_5 (mood)	severe depressed, seared		
		1 = all of the time		
		2 = most of the time		
		3 = a good bit of the time		
		4 = some of the time		
		5 = a little of the time		
		6 = none of the time		
		o none or the time		
	SF12_11: How much time during the past 4 weeks have you felt			
	down?			

Rotterdam	Subjects are screened with the Center for Epidemiologic Studies	Range 0-60	For items 1-3, 5-7, 9-11, 13-15, 17-20 the scoring is $0 \rightarrow 3$.	
Study	Depression Scale (CESD) during the home interview (20 items).	(scores >16 are indicative of	For items 4, 8, 12 and 16 the scoring is $3 \rightarrow 0$ (reverse).	
'	(e5_EICESD01 e5_EICESD20)	clinical depression)		
		,	First, the four items are recoded, next, the scores of all items are added up (cesd_score).	
		Answer categories:		
		0 = seldom or never (0-1 da y)	if (cesd_score<16) depression=0.	
		1 = sometimes (1-2 days)	if (cesd_score>=16) depression=1.	
		2 = regularly (3-4 days)	11 (0000 <u>1</u> 00010. 10) depression 11	
		3 = most of the time (5-7 days)		
		7 = don't know	For n=416 >> at least one of the single CESD items is missing.	
		9 = no answer	In total n=8196 missing >> no CESD score (of in total n=14926 cases).	
		3 - 110 diliswei	In total 11–0130 missing >> no class score (b) in total 11–14320 cases).	
		0 = most of the time	Zdepression variable created	
		1 = often	Zacpi cssion variable dicated	
		2 = sometimes		
		3 = never		
	Another questionnaire used is based on the Hospital Anxiety and	7 = don't know		
	Depression Scale (HADS), with the aim to assess depressive disorders:	l .		
		9 – 110 aliswei		
	I feel tense lately. (e5_EIHADS01)	0 = vary true		
		0 = very true		
		1 = yes, but not that much		
	Last an agricus facilias that as mathing to will be agreed and	2 = a little, no concerns		
	I get an anxious feeling that something terrible will happen any	3 = not at all		
	moment. (e5_EIHADS03)	7 = don't know		
		9 = no answer		
		0 = very often		
		1 = often		
		2 = now and then		
	I am worried lately. (e5_EIHADS05)	3 = seldom or never		
		7 = don't know		
		9 = no answer		
		0 = certainly		
		1 = most of the time		
		2 = not often		
	I can sit peacefully and relax lately. (e5_EIHADS07)	3 = not true		
		7 = don't know		
		9 = no answer		
		0 = not true		
		1 = sometimes		
		2 = regularly		
	Lately I get sort of a tense feeling in M (e5_EIHADS09)	3 = very often		
		7 = don't know		
		9 = no answer		
		0 = very much		
		1 = quite a lot		
		2 = not that much		
	I feel restless lately (e5_EIHADS11)	3 = not true		
		7 = don't know		
		9 = no answer		
		0 = very often		
		1 = regularly		
				22

Lately I get sudden feelings of anxiety or panic (e5_EIHADS13)	2 = not very often 3 = not true 7 = don't know	
	9 = no answer	

Diabetes	Diabetes					
LASA ActiFE Ulm	Has a doctor ever told you that you have any of the following.	C: 0=no, never 1=no, but at wave B yes 2=yes, but at wave B no 3=yes, and at wave B yes 3B: 1=no 2=yes 0=no 1=yes	Wave C: If cdiabe01=0 → diabetes=0 If cdiabe01=1 or cdiabe01=2 or cdiabe01=3 → diabetes=1 Wave 3B: If BDIABE01=1 → diabetes=0 If BDIABE01=2 → diabetes=1 Use as is. diabetes = C_diab_BL	Variable name: diabetes Value labels: 0=no 1=yes		
TILDA	Has a doctor ever told you that you have any of the following conditions: diabetes or high blood sugar (ph201_05)	0=no 1=yes	Use as is. Ph201_05=diabetes			
B-PROOF	Does the participant have diabetes? (diabetes)	0 = no 1 = yes 662 missing responses (22.7%)	Use as is.			
Rotterdam Study	Do you have diabetes? (e5_EIDM)	0 = No 1 = Yes 7 = don't know 9 = no answer	if e5_EIDM < 7 → diabetes= e5_EIDM			
Dizziness						
LASA	Dizzy: regular? (BMVAR700, CMVAR700) If yes, the following follow-up questions were asked: -dizzy when getting up? (BMVAR701, CMVAR701) -dizzy when turning head? (BMVAR702, CMVAR702) -dizzy when looking up? (BMVAR703, CMVAR703) -dizzy, other? (BMVAR704, CMVAR704)	1=no 2=yes 0=not mentioned 1=mentioned	Wave C: If CMVAR700=1 → dizzy=0 If CMVAR700=2 → dizzy=1 Wave 3B: If BMVAR700=1 → dizzy=0 If BMVAR700=2 → dizzy=1	Variable name: dizzy Variable label: Regular dizziness Value labels: 0=no		
ActiFE Ulm	dizziness (dizziness_BL)	0=none 1=rare 2=sometimes 3=frequently 4=permanent)	dizziness_BL=0 or dizziness_BL=1 → dizzy=0 dizziness_BL=2 or dizziness_BL=3 or dizziness_BL=4 → dizzy=1	1=yes		
TILDA	No data available		Not harmonized.			
B-PROOF	No data available		Not harmonized.			

D = 44	And we will disput of the man (sleep will apply	0	If a FINNOS 2 and a FINNOS 4 A 2 days 4	
Rotterdam	Are you dizzy often? (dcam20)	0 = not or seldom	If e5_EIKNO6 >= 2 and e5_EIKNO6 <= 4 → dizzy=1	
Study		1 = >1 times a week	If e5_EIKNO6 = 0 or e5_EIKNO6 = 1 \rightarrow dizzy=0	
		8 = no answer/don't know		
		9 = not applicable/missing		
		0 = no		
		1 = almost never		
		2 = sometimes		
		3 = yes, all the time		
		7 = don't know		
	Are you ever dizzy? (e5_EIKNO6)	9 = no answer		
	(00			
		0 = no		
		1 = yes		
		7 = don't know		
		8 = n.a.		
		9 = no answer		
	Do you get dizzy without moving, i.e. when sitting still, standing still, or lying still? (e5_EIKNO6B1)			
	Do you get dizzy when: moving your head? (e5_EIKNO6B2)			
	Do you get dizzy when: watching moving images (i.e. on film,			
	computer etc.)? (e5_EIKNO6B3)			
	Do you get dizzy when: getting up? (e5_EIKNO6B4)			
	Do you get dizzy when: looking up? (e5_EIKNO6B5)			
	Do you get dizzy when: turning in bed? (e5_EIKNO6B6)			
	Do you get dizzy when: other? (e5_EIKNOnumbe rof 6B7)			
	bo you get uizzy when other: (es_Entronambe for oby)			
	In case of other, in what situations do you get dizzy? (e5_EIKNO6B8)			
Education				
LASA	Education level attained (aeducat)	1=elementary not completed (5	If aeducat=1 or aeducat=2 or aeducat=3 or aeducat=4 → edu =1	Variable name:
		yrs)		Edu
		2=elementary (6 yrs)	If aeducat=7 or aeducat=8 or aeducat=9 → edu =3	200
		3=lower vocational (9 yrs)		Variable label:
		4=general intermediate (10 yrs)		Education level
		1 -		Luucation levei
		5=intermediate vocational (11 yrs)		Makua labala
		6=general secondary (12 yrs)		Value labels:
		7=higher vocational (15 yrs)		1= Low (ISCED level 0,1 and 2)
		8=college (16 yrs)		2= Average (ISCED level 3 and 4)
		9=university (18 yrs)		3= High (ISCED level 5 through 8)
ActiFE Ulm	education reached (education)	1=no graduation	If education=1 or education=2 or education=3→ edu =1	
		2=9 years		Education was harmonised in accordance with
		3=10-11 year	If education=5 → edu =3	the ISCED 2011 mappings.
		4>=12 years		
		5=University		
		J-Offiversity		
		ı	1	

TILDA	What is the highest level of education you have completed? (dm001)	1=some primary (not complete) 2=primary or equivalent 3=intermediate/junior/group cert 4=leaving cert or equivalent 5=diploma/cert 6=primary degree 7=postgraduate/higher degree 96=none	If dm001=96 or dm001=1 or dm001=2 or dm001=3 → edu =1 If dm001=4 → edu =2 If dm001=5 dm001=6 or dm001=7 → edu =3	
B-PROOF	What is the highest level of education completed? (education) How many years of education (dependent on previous variable)? (Edu_years)	1 = primary school (5 yrs) 2 = lower education (6 yrs) 3 = MULO, ULO, MAVO (9 yrs) 4 = secondary education (10 yrs) 5 = MMS, HBS, Lyceum, Atheneum, Gymnasium to 3rd year (included) (11 yrs) 6 = MMS, HBS, Lyceum, Atheneum, Gymnasium completed (12 yrs) 7 = higher education (15 yrs) 8 = university or college, until examination (16 yrs) 9 = university or college, fully completed (18 yrs)	If education=1 or education=2 or education=3 or education=4 or education=5 → edu =1 If education=6 → edu =2 If education=7 or education=8 or education=9 → edu =3	
Rotterdam Study	Highest level of education RS-I-1 (recoded), RS-II-1 and RS-III-1 – UNESCO classification (ses_UNESCO_recode)	0 = primary education (5 yrs) 1 = lower vocational/intermediate general education (5-9 yrs) 2 = intermediate vocational education OR general secondary education (10-14 yrs) 3 = higher vocational education (15-18 yrs) 99 = missing	If ses_UNESCO_recode=0 or ses_UNESCO_recode=1→ edu=1 If ses_UNESCO_recode=2 → edu=2 If ses_UNESCO_recode=3 → edu=3	
Executive fu				
LASA	Verbal fluency* -words with letter 'D' (bmDWcor) -animal naming (bmAcor) *Executive functioning was only measured in wave 3B.	No. of words correct: Range 0-30 Range 0-50	semanticfl semanticfl =bmAcor zverbfl Create Z-score ZbmAcor; ZbmAcor=zverbfl	Variable name: zverbfl Variable label: Z-score verbal fluency
ActiFE Ulm	Verbal fluency animals (0-15 sec) (fluency1_BL) Verbal fluency animals (15-30 sec) (fluency2_BL) Verbal fluency animals (30-45 sec) (fluency3_BL) Verbal fluency animals (45-60 sec) (fluency4_BL)	No. of named animals: Range 0 – 19	semanticfl semanticfl = fluency1_BL + fluency2_BL + fluency3_BL + fluency4_BL Create Z-score of summed fluency scores zverblf	zverbfl is a combination of both semantic (LASA, TILDA, ERGO, ActiFE Ulm) and phonetic (B-PROOF) fluency and includes all cohorts, as a Z-score is calculated.

TILDA	Colour trail 2 test	Range 0-50	semanticfl=ph125	
	Verbal fluency (ph125)			
	Visual reasoning		Create Z-score Zph125;	
			Zph125=zverbfl	
B-PROOF	Trail Making Test (TMT) item A en B (Time_sec_TMT_A,	Time in seconds spent on test	Create Z-score ZFluency_mean	
	TMT_A_corrections, Time_sec_TMT_B, TMT_B_corrections)	(max. 300 s) and # of corrections	ZFluency_mean=zverbfl	
		made by interviewer		
	Stroop colour test (card 1 (words), 2 (colours), 3 (words & colours)	Time in seconds spent on test		
	(Time_sec_Stroop_Card1, Stroop_Card1_corrections,	(max. 300 s) and # of corrections		
	Time_sec_Stroop_Card2, Stroop_Card2_corrections,	made by interviewer		
	Time_sec_Stroop_Card3, Stroop_Card3_corrections)			
	Letter Fluency test (items named with first, second, third letter, and			
	mean) (Let_flu_tot_1st_letter, Let_flu_tot_2nd_letter, Let_flu_tot_3rd_letter, Fluency_mean)	# items named (range 0-30)		
	Let_na_tot_sta_letter, ridency_meany	" items named (range o 50)		
Rotterdam	Number of attempts fluency task (e5_2751)	Range	semanticfl=e5_2750	
Study	Correct answers fluency task (e5_2750)	= 0 - 50 99 = missing	Create Z-score zverbfl	
		88 = not applicable/default	Create 2-score averbin	
Faller in nac	t 12 months	,		
LASA	Did you fall in the past year? (BMVAR706, CMVAR706)	1=no	faller	Variable name:
LASA	bid you fall in the past year: (bivivalvoo, civivalvoo)	2=yes	If CMVAR706/BMVAR706=1 → faller=0	1. faller
	How often did you fall in the past year? (BMVAR707, CMVAR707)	'	If CMVAR706/BMVAR706=2 → faller=1	2. nfalls1
		3B: Range 1-20		3. nfalls2
		C: Range 1-100	Nfalls1	
			If CMVAR706/BMVAR706=1 → nfalls1=0 If CMVAR707/BMVAR707=1 → nfalls1=1	Variable label:
			If CMVAR707/BMVAR707>=2 → nfalls1=2	 Fall in the past 12 months Number of falls in the past 12 months
			I divinition is a final series of the series	(0=none, 1=1 fall, 2=2+ falls)
				3. Number of falls in the past 12 months
			If CMVAR706/BMVAR706=1 → nfalls2=0	(0=none, 1=1-2 times, 2=3-9 times, 3=10+
			If CMVAR707/BMVAR707=1 or CMVAR707/BMVAR707=2 → nfalls2=1	times)
			If CMVAR707/BMVAR707>=3 & CMVAR707/BMVAR707<=9 → nfalls2=2 If CMVAR707/BMVAR707>=10 → nfalls2=3	Value label:
			II CHIVAIN O// DIVIVAIN O/ Z=10 / IIIulisz=3	faller:
				0=no
				1=yes
				Nfalls1:
				0=none 1=1 fall
				2=2+ falls
				L L. IVIIJ

ActiFE Ulm	fall within 12 months prior to baseline (FH_fall_12_BL) frequency of falling within 12 months prior to baseline [fall history] (FH_fall_12_freq_imp3_BL) Note that FH_fall_12_freq_imp3_BL includes data from another item related to falls in the last 3 months before baseline.	0=no 1=yes Range 1-300	Use as is. faller = FH_fall_12_BL Nfalls1: if FH_fall_12_BL = 0 → nfalls1 = 0 if FH_fall_12_freq_imp3_BL = 1 → nfalls1 = 1 if FH_fall_12_freq_imp3_BL >= 2 → nfall1 = 2 Nfalls2: If FH_fall_12_BL = 0 → nfalls2=0. If FH_fall_12_freq_imp3_BL = 1 or FH_fall_12_freq_imp3_BL = 2 → nfalls2 = 1 If FH_fall_12_freq_imp3_BL >= 3 & FH_fall_12_freq_imp3_BL <= 9 → nfalls2=2 If FH_fall_12_freq_imp3_BL >= 10 → nfalls2=3	Nfalls2: 0=none 1=1-2 times 2=3-9 times 3=10+ times Note: no data on no. of falls >2 for B-PROOF. Also, nfalls2 could not be generated for ERGO.
TILDA	Any fall in the past year (ph401) Number of falls in the past year (ph402) (only asked if responded 'yes' to ph401)	1=yes 5=no Range 1-10 10 = 10+ falls	Faller: If ph401=5 \rightarrow faller=0 If ph401=1 \rightarrow faller=1 Nfalls1: if ph401=5 \rightarrow nfalls1=0 if ph402=1 \rightarrow nfalls1=1 if ph402>=2 \rightarrow nfalls2=0. If ph401=5 \rightarrow nfalls2=0. If ph402=1 or ph402=2 \rightarrow nfalls2=1 If ph402>=3 & ph402<=9 \rightarrow nfalls2=2 If ph402>=10 \rightarrow nfalls2=3	
B-PROOF	How often did you fall in the past 12 months? (falls_frequency)	Fall frequency 12 months before baseline: 0 = no falls 1 = one fall 2 = two or more falls	Faller If falls_frequency=0 → faller=0 If falls_frequency=1 or falls_frequency=2 → faller=1 Nfalls1 falls_frequency=nfalls1 Nfalls2 No data available.	
Rotterdam Study	Did you fall in the past 12 months? (If yes, ask): How often did you fall in the past 12 months? (e5_EIMC27)	0 = no 1 = yes, < 1 time per month 2 = yes, >=1 times per month, 3 = yes, >= 1 times per week 4 = daily 7 = don't know 9 = no answer	Faller If e5_EIMC27=0 → faller=0 If e5_EIMC27=1 or e5_EIMC27=2 or e5_EIMC27=3 or e5_EIMC27=4 → faller=1 Nfalls cannot be harmonized.	

Falls in Foll	low-up (time to first fall)			
LASA	LASA 3B no data		fallyearone	Variable name:
			if fall1 = 0 → fallyearone=0	1. fallyearone
			if fall1 = 1 and TTF1 >52→ fallyearone=0	2. timetofirstfall
	In addition to the retrospective falls, during LASA C, a three-year		if fall1 = 1 and TTF1 <=52 → fallyearone=1	3. followup
	prospective fall calendar was used. At the end of LASA wave C			4. recfallsyearone
	(1995/1996), respondents received a 'fall calendar' and were asked to		timetofirstfall	
	record fall events weekly until the medical interview at wave D		TTF1 = timetofirstfall	Variable labels:
	(1998/1999). Participants were instructed to record weekly whether			Fall within first year of follow-up
	or not they had fallen and if they had fallen inside or outside.		followup	2. Time to first fall in weeks
	Subsequently, they were asked to mail the calendar to the institute at		Follow-up variable created that denotes the number of weeks of follow-up, up until 52	3. followup
	the end of every three-month period. They were contacted by		weeks.	4. Two or more falls within first year of
	telephone if they were not able to complete the 'fall calendar', if no			follow-up
	calendar was returned even after a reminder, or if the calendar was		recfallsyearone	·
	completed incorrectly. Proxies were contacted if participants were		If week052 = -2 → recfallsyearone= missing	Values labels:
	not able to respond. For the respondents, a fall was defined as 'an		If week052 >= 0 → recfallsyearone= SUM(week001, week002, week003, week004,	fallyearone
	unintentional change in position resulting in coming to rest at a lower		week005, week006, week007, week008, week009, week010, week011, week012,	0=no
	level or on the ground' (LASACo00/01/02).		week013, week014, week015, week016, week017, week018, week019, week020,	1=yes
	(2.0.000)		week021, week022, week023, week024, week025, week026, week027, week028,	
	status first fall: yes/no (fall1)		week029, week030, week031, week032, week033, week034, week035, week036,	Note that the week number is used for
	Time to first fall in weeks (TTF1)		week037, week038, week039, week040, week041, week042, week043, week044,	timetofirstfall. For example, if a respondent fell
	Fall this week (week001, week002,)		week045, week046, week047, week048, week049, week050, week051, week052)	two days after baseline, timetofirstfall would
	Tall tills week (weekooz,)			equal 1.
	Note that values for TTF1 do not necessarily indicate a fall occurred. If		If recfallsyearone < 2 → recfallsyearone = 0	'
	fall1=0, then TTF1 represents the observation period. If fall1=1, then	-2 = Not in study anymore	If recfallsyearone >= 2 → recfallsyearone =1	Note that fallyearone is intended for survival
	TTF1 represents the time until first fall.	0 = No	If recfallsyearone = 0 and followup < 52 → recfallsyearone = missing	analyses. If the intention is to use it as a
	TTF1 represents the time until first fall.	1 = Yes		dichotomous outcome measure without the
				time variable, then fallyearone should be coded
				as missing if both the follow-up was shorter
				than 12 months and no fall was recorded for the
				patient within the follow-up period.
ActiFE Ulm	Falls were prospectively measured over 53 weeks after baseline.		Timetofirstfall & fallyearone	
			if FC_first_fall_date_BL=missing and fall_cal_start_BL=not missing → fallyearone = 0	
	Start of fall calender documentation (fall_cal_start_BL)		if FC_first_fall_date_BL=not missing and fall_cal_start_BL=not missing → fallyearone = 1	
			timetofirstfall= round up((FC_first_fall_date_BL - fall_cal_start_BL) / 7)	
	Date of first fall within the observation period following baseline		if timetofirstfall= 53 → fallyearone = 0	
	(FC_first_fall_date_BL)		if fallyearone = 0 → timetofirstfall = round up(FC_fall_obsdays_BL / 7)	
			if timetofirstfall=53 → timetofirstfall=52	
	Observation period (days) of falls following baseline		if timetofirstfall = 0 → timetofirstfall = 1	
	(FC_fall_obsdays_BL)			
			followup	
	Frequency of falling within the observation period following baseline		followup = round((FC_fall_obsdays_BL/7))	
	[fall calendar] (FC_fall_freq_BL)			
			recfallsyearone	
			If FC_fall_freq_BL = 0 OR FC_fall_freq_BL = 1 \rightarrow recfallsyearone = 0	
			If FC_fall_freq_BL > 1 → recfallsyearone = 1	
			If recfallsyearone = 0 AND followup < 52 → recfallsyearone = missing	
TILDA	no data		Not harmonized.	

B-PROOF	Besides the retrospective falls, falls were also measured during the	0= no	timetofirstfall	
	follow-up (2-3 years), using a fall calendar:	1= yes	if FU1_Falls=1 → timetofirstfall= round up(FU1_Time_to_first_fall / 7)	
	Falling during follow-up (FU1_Falls)	,	if FU1 Falls=0 → timetofirstfall= round up(end_date_for_FU - Date_interview)/7)	
			if timetofirstfall = 0 → timetofirstfall = 1	
	Date first, second, third, fourth, fifth fall (FU1_Date_fall1			
	FU1 Date fall5)		followup	
			Follow-up variable created that denotes the number of weeks of follow-up, up until 52	
	FU: Time since baseline to first fall (days) (FU1_Time_to_first_fall)	Date (only including falls within a	weeks.	
		12 months from the baseline		
	end data 2 or fall date, thus sensor data, used for the follow-up time	measurements)	fallyearone	
	(end date for FU)	,	fallyearone= FU1 Falls	
	(cons_mans_ror_ror)		If timetofirstfall > 52 → fallyearone = 0	
	Date of baseline interview (Date interview)		If timetofirstfall > 52 → timetofirstfall = 52	
	bute of buseline interview (bute_interview)		in chileconnotion. SE y chileconnotion. SE	
			recfallsyearone	
			timetosecfall = RND((DATEDIFF(FU1_Date_fall2, Date_interview, 'days')/7) + 0.4999)	
			if timetosecfall <= 52 → recfallsyearone=1	
			if timetosecfall > 52 → recfallsyearone=0	
			if (missing(timetosecfall) AND followup >= 52) recfallsyearone = 0.	
			if (missing(timetosecfall) and followup < 52) recfallsyearone=\$sysmis.	
Rotterdam	Serious falls (i.e. a fall leading to a hospital admission or leading to a		Not harmonized.	-
Study	fracture) were measured prospectively. Serious fall data were		Not namonized.	
Study	obtained from a computerized reporting system of the general			
	practitioners within the Rotterdam Study.			
	practitioners within the Notice dam Study.			
Fear of falls				
LASA	No data available from LASA 3B.	Range 0-5:	Fearfall	Variable name:
		1=not concerned	If (cmvar301=1 or cmvar301=5) and (cmvar302=1 cmvar302=5) and (cmvar303=1 or	fearfall
	LASA C: modified version of the Falls Efficacy Scale (FES) was used. In	2=a little concerned	cmvar303=5) and (cmvar304=1 or cmvar304=5) and (cmvar305=1 or cmvar305=5) and	
	LASA, the participant was asked to score how concerned he/she felt	3=fairly concerned	(cmvar306=1 or cmvar306=5) and (cmvar307=1 or cmvar307=5) and (cmvar308=1 or	Variable label:
	to fall during 10 activities of daily living:	4=very concerned	cmvar308=5) and (cmvar309=1 or cmvar309=5) and (cmvar310=1 or cmvar310=5) →	Fear of falling
	-Cleaning the house (cmvar301)	5=R does not or cannot	fearfall=0	
	-Dress and undress yourself (cmvar302)		If (cmvar301=2 or cmvar301=3) or (cmvar302=2 or cmvar302=3) or (cmvar303=2 or	Value label:
	-The preparation of simple meals (cmvar303)		cmvar303=3) or ((cmvar304=2 or cmvar304=3) or ((cmvar305=2 or cmvar305=3) or	0=not afraid
	-Taking a bath or a shower (cmvar304)		((cmvar306=2 or cmvar306=3) or ((cmvar307=2 or cmvar307=3) or ((cmvar308=2 or	1=somewhat afraid
	-Do some shopping (cmvar305)		cmvar308=3) or ((cmvar309=2 or cmvar309=3) or ((cmvar310=2 or cmvar310=3) →	2=very afraid
	-To get in and out of a chair (cmvar306)		fearfall=1	
	-To climb up and down the stairs (cmvar307)		If cmvar301=4 or cmvar302=4 or cmvar303=4 or cmvar304=4 or cmvar305=4 or	For LASA & ActiFE Ulm it was chosen to code
	-A small walk in the neighbourhood (cmvar308)		cmvar306=4 or cmvar307=4 or cmvar308=4 or	fearfall=0 when all activities are rated as not
	-Deep or low cupboard (cmvar309)		cmvar309=4 or cmvar310=4 → fearfall=2.	concerned, fearfall=1 when at least one of the
	-Answering the phone before it stops (cmvar310)			activities is rated as a little/fairly concerned
	/ morrer mg the phone servic it stops (chival sto)	ı	I	activities is rated as a netic/raility concerned

ActiFE Ulm	FES-I SF7: 1. Getting dressed or undressed (fesi_1_BL) 2. Taking a bath or shower (fesi_2_BL) 3. Getting in or out of a chair (fesi_3_BL) 4. Going up or down stairs (fesi_4_BL) 5. Reaching for something above your head or on the ground (fesi_5_BL) 6. Walking up or down a slope (fesi_6_BL) 7. Going out to a social event (e.g. religious service, family gathering or club meeting) (fesi_7_BL) Sum score (fesi_BL) https://www.ncbi.nlm.nih.gov/pubmed/18032400?dopt=Abstract	Range 0-4: 1=not at all concerned 2=somewhat concerned 3=fairly concerned 4=very concerned	if fesi_1_BL=1 and fesi_2_BL=1 and fesi_3_BL=1 and fesi_4_BL=1 and fesi_5_BL=1 and	(and none of the other activities as >fairly concerned), fearfall=2 when at least one of the activities is rated as very concerned.
	Score of >10 indicates high concern about falling https://academic.oup.com/ageing/article/39/2/210/40898	Range 7 – 28		
TILDA	Are you afraid of falling? (ph408) If yes to ph408, do you feel somewhat afraid or very much afraid of falling? (ph409)	1=yes 5=no 1=somewhat afraid 2=very afraid	if ph408=5 → fearfall=0. if ph409=1 → fearfall=1. if ph409=2 → fearfall=2.	
B-PROOF	No data available		Not harmonized.	
Rotterdam Study	No data available		Not harmonized.	
Functional li	mitations / Activities of daily living (see appendix 6)			
LASA	-Can you walk up and down a staircase of 15 steps without resting? (BADL1A,CADL1A) -Can you dress and undress yourself? (BADL2A, CADL2A) -Can you sit down and stand up from a chair? (BADL3A, CADL3A) -Can you cut your own toenails? (BADL4A, CADL4A) -Can you walk outside during five minutes without stopping? (BADL5A, CADL5A) -Can you use your own or public transportation? (BADL6A, CADL6A) 3B: addition: -Can you take a bath/shower? (BADL7A)	1=No, I cannot 2= Only with help 3= Yes, with much difficulty 4= Yes, with some difficulty 5= Yes, without help	difficulty', 'yes with much difficulty', 'only with help' or 'no I cannot' to the six items: funlimp= BADL1A+BADL2A+ BADL3A+ BADL4A+ BADL5A+ BADL6A+ BADL7A funlim5 If BADL1A >= 1 & BADL1A<=4 → funlim5=funlim5+1 If (BADL2A >= 1 & BADL2A<=4) → funlim5=funlim5+1 If BADL4A >= 1 & BADL4A<=4 → funlim5=funlim5+1 If BADL3A >= 1 & BADL3A<=4 → funlim5=funlim5+1 If BADL3A >= 1 & BADL3A<=4 → funlim5=funlim5+1 If BADL3A >= 1 & BADL3A<=4 → funlim5=funlim5+1 Zfunlim5 Z-score computed.	Variable name: 1. funlimP 2. funlim5 3. zfunlim5 Variable labels: 1. Number of functional limitations: proportionally scaled to number of items counted 2. Number of functional limitations (0-5) 3. Number of functional limitations (0-5) z-score — computed for each cohort individually Value labels: FunlimP: Proportional scaling to account for difference in number of items counted across the cohorts: funlimP= (funlim-MIN)/(MAX-MIN)*10

ActiFE Ulm	How great difficulty do you have a staircase with 15 steps up and to	0= None	funlimP	Funlim5:
Actil E Oilli	go down without taking a break? (ADL_stairs_BL)	1= Some difficulty (<i>light</i> difficulty) 2= moderate	Calculate number of limitations by adding 1 point for each difficulty (some difficulty or more; 1-4)	Range 0-5
	How much difficulty do you have to dress and undress? (ADL_dressing_BL)	3= large 4= not feasible, need help	If ADL_stairs_BL >= 1 → funlimp = funlimp +1 If ADL_dressing_BL >= 1 → funlimp = funlimp +1 If ADL_toenails_BL >= 1 → funlimp = funlimp +1	Activities selected for funlim5 are: 1. climbing stairs 2. dressing
	How much difficulty do you have to cut your toenails? (IADL_toenails_BL)		If ADL_walk_BL >= 1 → funlimp = funlimp +1 If ADL_chair_BL >= 1 → funlimp = funlimp +1 If ADL shower BL >= 1 → funlimp = funlimp +1	3. 'cutting toenails' or 'bending, kneeling, stooping'4. 'walk outside for 5 min' or 'walking 100
	How much trouble do you have to take a five-minute walk without stopping? (ADL_walk_BL)		Funlim5 Calculate number of limitations by adding 1 point for each difficulty (some difficulty or	meters/yards' 5. Get up from chair or toilet
	How much difficulty do you have to sit on a chair and to get up? (ADL_chair_BL)		more; 1-4) If ADL_stairs_BL >= 1 → funlim5 = funlim5 +1 If ADL_dressing_BL >= 1 → funlim5 = funlim5 +1	
	How much difficulty do you have to take a shower or bath? (ADL_shower_BL)		If ADL_toenails_BL >= 1 → funlim5 = funlim5 +1 If ADL_walk_BL >= 1 → funlim5 = funlim5 +1 If ADL_chair_BL >= 1 → funlim5 = funlim5 +1	
			zfunlim5 Z-score computed.	
TILDA	Because of a physical or mental health problem, do you have difficulty doing any of the activities on the card: -Walking 100 meters (100 yards) (fl001_01) -Running or jogging about 1.5 kilometers (1 mile) (fl001_02) -Sitting for about two hours (fl001_03) -Getting up from a chair after sitting for long periods (fl001_04) -Climbing several flights of stairs without resting (fl001_05) -Climbing one flight of stairs without resting (fl001_06) -Stooping, kneeling, or crouching(fl001_07) -Reaching or extending your arms above shoulder level (fl001_08) -Pulling or pushing large objects like a living room chair (fl001_09) -Lifting or carrying weights over 10 pounds/5 kilos, like a heavy bag of groceries (fl001_10) Because of a health or memory problem, do you have difficulty doing any of the activities on this card? -Picking up a small coin from a table (fl001_11) -Dressing, including putting on shoes and socks (fl002_1) -Walking across a room (fl002_2) -Bathing or showering (fl002_3) -Eating, such as cutting up your food (fl002_4) -Getting in or out of bed (fl002_5) -Using the toilet, including getting up or down (fl002_6)	0=no 1=yes	funlimP Calculate number of limitations by adding 1 point for each 'yes' to the following 10 items: funlimP=fl001_01+fl001_02+fl001_03+fl001_04+fl001_05+fl001_06+fl001_07+fl001_08+fl001_09+fl001_10 funlim5: funlim5=fl001_06+fl001_01+fl001_07+fl002_6+fl002_1 zfunlim5 Z-score computed.	

B-PROOF	SF12 physical function subscale:	Range	Includes questions on climbing stairs, walking and self-care, but questions are asked
		1 = limited a lot	differently, and there are no sufficient similar items to harmonize.
	•	2 = limited a little	
		3 = not limited at all	
	- During the past 4 weeks, have you accomplished less than		
	you would like as a result of your physical health? (SF12_4)		
	- During the past 4 weeks, were you limited in the kind of work		
	or other regular activities you do as a result of your physical		
	health? (SF12_5)		
	- During the past four weeks, how much did pain interfere with	0 = no	
	your normal work, including both work outside the home and	1	
	housework? (SF12_8)	,	
	(c. 22_5)		
	- During the past 4 weeks, how much of the time has your	1 = not at all	
	physical health or emotional problems interfered with your	2 = slightly	
	social activities like visiting with friends, relatives etc?	3 = moderately	
	(SF12_12)	4 = quite a bit	
		5 = extremely	
	Items from Euroqol:	1 = all of the time	
		2 = most of the time	
		3 = some of the time	
		4 = a little of the time	
		5 = none of the time	
		Range 1-3:	
		1 = no problem with walking	
		2 = some problems with walking	
		3 = stay in bed most of the time	
		d	
		1 = no problem with washing or	
		getting dressed	
		2 = some problems with washing	
		or getting dressed	
	• • • • • • • • • • • • • • • • • • • •	3 = not able to wash myself or get	
		dressed	
		1 = no problems with daily	
		activities	
		2 = some problems with daily	
		activities	
		3 = not able to perform daily	
		activities	
		detivities	
	•	•	·

Rotterdam Questions e5 EI1 03 to e5 EI1 26 are based on the Stanford Health Study Assessment Questionnaire. Questions e5_EI1_28 to e5_EI1_33 are based on the Instrumental Activities of Daily Living scale: Are you able to get your clothes from closets or drawers, on your own? (e5 EI1 03) Are you able to dress yourself, including doing the buttons, zippers, tying laces, etc. (e5_EI1_04) Are you able to wash your hair on your own? (e5 EI1 05) Are you able to get up from a chair without using your arms as support? (e5 EI1 06) Are you able to get out of your bed on your own? (e5 EI1 07) Do you have trouble eating? Do you have trouble cutting meat or bread, or do you have problems with drinking a full glass of milk? (e5 EI1 08) Are you able to open a new carton of milk on your own? (e5 EI1 09) Are you able to walk outside on a flat terrain on your own? (e5 EI1 10) Are you able to walk 5 steps on the stairs and back on your own? (e5 EI1 11) Are you able to wash and dry your entire body on your own? (e5 EI1 12) Are you able to take a bath or use the shower on your own? (e5 EI1 13) Are you able to open and close the tap of a sink on your own? (e5 EI1 14) Are you able to sit down on and get up from the toilet on your own? (e5 EI1_15) Are you able to comb / style your hair on your own? (e5_EI1_16) Are you able to grab a pack of sugar (1 kg) from a shelf above your head? (e5_EI1_17) Are you able to bend, for example to grab clothes from the floor? (e5 EI1 18) Are you able to open a car door from the outside on your own? (e5 EI1 19) Are you able to open a jar of jam, that has already been opened before? (e5 EI1 20) Are you able to use a pen or pencil? (e5 El1 21) Are you able to do your daily grocery shopping? (e5 El1 22) Are you able to get in and out of a passenger car? (e5_EI1_23) Are you able to travel independently? (e5_EI1_24) Are you able to do small chores in the house? (e5 El1 25) Are you able to run the household on your own? (e5 EI1 26) Are you able to cycle? (e5 EI1 27) Do you have trouble using the telephone (at home or in a cell)? (e5 EI1 28) Do you have trouble cooking a dish? (e5 El1 29) Do you have trouble doing the laundry? (e5_EI1_31) Imagine you would have to use medication, are you able to take care of this yourself? (e5 EI1 32) Do you have trouble arranging your finance? (e5 EI1 33)

1 = without difficulty

(support needed)

7 = don't know

9 = No answer

8 = N.a.

2 = with some difficulty

3 = with a lot of difficulty 4 = cannot do it her/himself

```
funlimP
if funlim=e5_EI1_03+....+e5_EI1_33.
Funlim5
If e5 EI1 11>=2 and e5 EI1 11<=4 → funlim5=funlim5+1
If e5 EI1 18>=2 and e5 EI1 18<=4 \rightarrow funlim5=funlim5+1
If e5 EI1 10>=2 and e5 EI1 10<=4 → funlim5=funlim5+1
If e5 EI1 15>=2 and e5 EI1 15<=4 → funlim5=funlim5+1
If e5 EI1 04>=2 and e5 EI1 04<=4\rightarrow funlim5=funlim5+1
zfunlim5
Z-score computed.
```

Genetic vari	ants			
LASA	See Appendix 7			See Appendix 7
ActiFE Ulm	No data			
TILDA	No data			
B-PROOF	See Appendix 7			
Rotterdam	See Appendix 7			
study				
Grip strengt	h			
LASA	Grip strength dynamometer (wave C: Takei TKK 5001, Takei Scientific Instruments Co. Ltd., Tokyo, Japan. Wave 3B: JAMAR 5030J1 Hydraulic Hand Dynamometer) Two attempts with each hand: -left hand (BMED618, BMED619; CMED618, CMED619) -right hand (BMED616, BMED617; CMED616, CMED617)		grip, wave C: grip=max(CMED618, CMED619, CMED616, CMED617) grip, wave 3B: grip=max(BMED618, BMED619, BMED616, BMED617) zgrip Z-scores created.	Variable name: grip zgrip Variable label: Grip strength (kg) – maximum Z-score of grip strength – computed for each cohort individually
ActiFE Ulm	A JAMAR dynamometer was used to measure grip strength. Grip strength (kg); highest value of means of two measures (gripstrength_BL) Grip strength right hand first try (kg) (gripstrength_r1_BL) Grip strength left hand first try (kg) (gripstrength_l1_BL) Grip strength right hand second try (kg) (gripstrength_r2_BL) Grip strength left hand second try (kg) (gripstrength_l2_BL)	Range 6 – 110 kg	<pre>grip grip = max (gripstrength_r1_BL, gripstrength_l1_BL, gripstrength_r2_BL, gripstrength_l2_BL) zgrip Z-scores created.</pre>	Range 0-79 To my knowledge, there are no papers describing the inter-instrument reliability between the various instruments that were used in the cohorts. Therefore, z-scores were computed (zgrip) using the grip scores of each cohort individually.
TILDA	Grip strength was measured using a Baseline hydraulic hand dynamometer. Two attempts with each hand: -dominant hand (GRIPtest1D, GRIPtest2D) -non-dominant hand (GRIPtest1ND, GRIPtest2ND)	Range 0-68 kg Range 0-81 kg	grip grip=max(GRIPtest1D, GRIPtest2D, GRIPtest1ND, GRIPtest2ND) zgrip Z-scores created.	

B-PROOF	Measured using a strain-gauged dynamometer (Takei, TKK 5401, Takei Scientific Instruments Co. Ltd., Japan, inter observer CV = 5%). Participants were asked to perform two maximum hand grip trials with each hand in standing position with their arms along their body. Maximal hand grip strength was defined as the average of the highest score of the left and right hand: Dominant hand (hgs_dominant_hand)		grip grip=max(hgs_right_1st_attempt, hgs_right_2nd_attempt, hgs_left_1st_attempt, hgs_left_2nd_attempt) zgrip Z-scores created.	
	Hand grip right hand (hgs_right_1st_attempt, hgs_right_2nd_attempt) Hand grip left hand (hgs_left_1st_attempt, hgs_left_2nd_attempt)	1 = right 2 = left In kg		
	Hand grip: position			
	Handgrip: remarks (grip_remarks)	No unit/categories included		
		1 = handicap right hand 2 = handicap left hand 3 = pain Missing = no remark		
Rotterdam Study	Measurement of hand grip strength (in kg) (1) (e5_15813) Measurement of hand grip strength (in kg) (2) (e5_15814) Measurement of hand grip strength (in kg) (3) (e5_15815)	= 1 - 90 99 = missing 88 = not applicable/default	grip If e5_15813<88 and e5_15814<88 and e5_15815<88 → grip=max(e5_15813, e5_15814, e5_15815)	
	Which hand is measured? (e5_15816)	1 = right 2 = left	If e5_15813=missing and e5_15814<88 and e5_15815<88 → grip=max(e5_15814, e5_15815)	
		9 = missing 8 = not applicable/default	If e5_15813<88 and e5_15814=missing and e5_15815<88 → grip=max(e5_15813, e5_15815) If e5_15813<88 and e5_15814<88 and e5_15815=missing → grip=max(e5_15813, e5_15814)	
			If e5_15813=missing and e5_15814= missing and e5_15815<88 \rightarrow grip=e5_15815 If e5_15813<88 and e5_15814=missing and e5_15815=missing \rightarrow grip=e5_15813 If e5_15813= missing and e5_15814<88 and e5_15815= missing \rightarrow grip=e5_15814	
			zgrip Z-scores created.	
Hearing			z-scores createu.	
LASA	R wears hearing aid(s) (HA) how many hours (bsense7b)	-2=no hearing aid -1=missing 1= less than 1 hr a day 2= 1 to 4 hrs a day	hearing, wave C If (csense09=1 or csense09=2) & csense11=1 → hearing=0 If csense09>=3 or csense11>=2 → hearing=1	Variable name: hearing hearingaid
		3= 4 to 8 hrs a day 4= all day	hearing, wave 3B If (bsense09=1 or bsense09=2) & bsense11=1 → hearing=0 If bsense09>=3 or bsense11>=2 → hearing=1	Variable labels: Do you have hearing problems (subjective)? Do you (sometimes) use a hearing aid?
	Can you hear well enough? (bsense08, csense08) Can you follow a conversation in a group of three or four persons	1=Yes, without difficulty 2=Yes, but with some difficulty	hearingaid (only for 3B)	Value labels
	,	3=Yes, but with much difficulty	if bsense7b=-2 → hearingaid =0	0=no
	Can you follow a conversation in a group of three or four persons with a hearing aid? (bsense10, csense10)	1	if bsense7b>=1 → hearingaid=1	1=yes
	Can you follow a conversation with one person? (bsense11, csense11)			Note: The use of a hearing aid is not considered in the hearing variable

	Can you follow a conversation with one person with a hearing aid? (bsense12, csense12)	Additional response option for (sense10 and sense12): 5=Respondent does not have a hearing aid		
ActiFE Ulm	hearing (hear_BL) Measured by interviewers' impression.	0=good 1=bad	Hearing Use as is. hearing=hear_BL	
TILDA	Do you have any of the following aids or appliances to help with your hearing: -hearing aid (all the time) (ph107_1) -hearing aid (some of the time) (ph107_2) - amplifier (ph107_3) is not available in public data -none of the above (ph107_4) Is your hearing with or without a hearing aid (ph108)	0=no 1=yes	hearing If ph108=1 or ph108=2 or ph108=3 \rightarrow hearing=0 If ph108=4 or ph108=5 \rightarrow hearing=1 hearingaid if ph107_1=0 and ph107_2 = 0 \rightarrow hearingaid =0 if ph107_1=1 or ph107_2=1 \rightarrow hearingaid = 1	
	Not in public data wave 1: Can you follow a conversation with one person (with or without a hearing aid)? (ph109) Can you follow a conversation with four people (with or without a hearing aid)? (ph110)	1=excellent 2=very good 3=good 4=fair 5=poor 1=with no difficulty 2=with some difficulty 3=with much difficulty 4=no I cannot		
B-PROOF	No data available		Not harmonized.	

Rotterdam	Do you think you hear less (without any hearing aids)? (e5_EIKNO1)	0 = no, I hear almost everything	hearing	
Study		1 = yes, sometimes I don't hear	If e5_EIKNO1 = 2 or e5_EIKNO1 = 3 → hearing=1	
		what people are saying	If $e5$ _EIKNO1 = 0 or $e5$ _EIKNO1 = 1 \rightarrow hearing=0	
		2 = yes, I often don't hear what people are saying	hearingaid	
			If e5_EIKNO2 = 0 → hearingaid = 0	
		people are saying	If e5_EIKNO2>=1 and e5_EIKNO2<=3 → hearingaid = 1	
		7 = don't know		
		9 = no answer		
	Do you use any hearing aids? (e5_EIKNO2)	0 = no		
	bo you use any nearing dias: (cs_Ennoz)	1 = yes, hearing instrument(s)		
		2 = yes, a BAHA		
		3 = ja, een cochlear implant		
		7 = don't know		
		9 = no answer		
		0 = no, I hear almost everything		
	Do you think you hear less, even when using your hearing aids?	1 = yes, sometimes I don't hear		
	(e5_EIKNO2A)	what people are saying		
		2 = yes, I often don't hear what		
		people are saying 3 = yes, I (almost) never hear what		
		people are saying		
		7 = don't know		
		8 = n.a.		
		9 = no answer		
		0 = (almost) never		
		1 = sometimes		
	Are you able to have a conversation with more than 3 persons?	2 = often		
	(e5_EIKNO3)	3 = almost always		
	Do you avoid certain occasions (e.g. birthdays) because of your hearing? (e5_EIKNO4)	7 = don't know 9 = no answer		
	Hearing: (e3_EINNO4)	3 - 110 allswei		
		0 = no		
		1 = yes, < 1 times a week		
	Do you ever hear sounds in your head or (one of) your ears, such as	2 = yes, >= 1 times a week, but not		
	buzzing, peeping, humming, while there's no clear noise source closeby? (e5_EIKNO5)	daily 3 = yes, everyday		
	Closeby: (ES_LIKNOS)	7 = don't know		
		9 = no answer		
		0 = no		
	If yes, do these sounds hinder your daily activities? (e5_EIKNO5A)	1 = yes 7 = don't know		
		8 = n.a.		
		9 = no answer		

Heart diseas	e e			
LASA	Do you have a heart disease? (BHART01, CHART01)	3B: 1=no 2=yes <u>C:</u>	Wave C: If chart01=0 → heart=0 If chart01=1 or chart01=2 or chart01=3 → heart=1 Wave 3B:	The harmonization algorithms use different conditions for determining history of heart disease. Therefore, individual cardiovascular conditions should be used instead of this harmonized variable.
		0=no, never 1=no, but at wave B yes 2=yes, but at wave B no 3=yes, and at wave B yes	If BHART01=2 → heart=1 If BHART01=1 → heart=0	Variable name: heart
ActiFE Ulm	(C_myocardinf_BL) Myocardial infarction (C_heartf_BL) Heart failure	0=no 1=yes	If C_myocardinf_BL = 0 AND C_heartf_BL = 0 → heart = 0 If C_myocardinf_BL = 1 OR C_heartf_BL = 1 → heart = 1	Variable label: History of heart disease Value labels:
TILDA	Has a doctor ever told you that you have any of the following conditions: -angina (ph201_02) -heart attack (ph201_03) -heart failure (ph201_04) -heart murmur (ph201_09) -abnormal heart rhythm (ph201_10) -other heart trouble (ph201_11)	0=no 1=yes	If ph201_02=1 ph201_03=1 ph201_04=1 ph201_09=1 ph201_10=1 ph201_11=1 → heart=1 If ph201_02=0 & ph201_03=0 & ph201_04=0 & ph201_09=0 & ph201_10=0 & ph201_11=0 → heart=0	0=no 1=yes
B-PROOF	Do/did you have heart problems? (heart_problem) What heart problems do/did you have? (heart_problem_what) Which type of CVD does participant have? (CVdisease)	0 = no 1 = yes String 1 = arrhythmia 2 = angina pectoris 3 = myocardial infarction 4 = heart failure 5 = atrial septum defect 6 = pericarditis 7 = aneurysm 8 = pulmonal hypertension	Heart=heart problem	
Rotterdam Study	After (date interview ERGO-4/ErgoPlus-2/ErgoJong-1), have you ever been treated in the hospital for a narrowing of the blood vessels of the heart? (e5_EIPTCA) After (date interview ERGO-4/ErgoPlus-2/ErgoJong-1), did you experience a heart attack? (e5_EIMI)	0 = No 1 = Yes 7 = Don't know 9 = No answer 0 = no 1 = yes 7 = don't know 9 = no answer	Not harmonized; this is too specific for Heart disease.	
Height		, 		
LASA	Measured height in centimetres (BMED150, CMED150)		height=CMED150/BMED150	Variable name:
ActiFE Ulm	body height (m) (height_BL)		height = height_BL x 100	height
TILDA	Measured height in centimetres (height)	Height: 145-185 cm (NB: 145= '<=145'; 185= '185+')	height=height	Variable label: Height in cm

B-PROOF	Measured height (Length)	In cm, 1 decimal	height=Length	
Rotterdam	Height, standing (in cm) (e5_229)	= 100.0 - 250.0	height=e5_229	
Study		999.9 = missing		
		888.8 = not appropriate-default		
Hypertensio	on			
LASA	Self-reported chronic conditions:	1=no	hypertension:	Variable name:
	-hypertension (BHBD1, CHBD1)	2=yes	If B/CHBD1=2 → hypertension=1	1. hypertension
			If B/CHBD1=1 → hypertension=0	2. hypertensionm
	Follow-up questions only asked to those responding 'yes' to first			3. hypmsr
	question:		hypertensionm:	4. hypmed
	-From which age have you had hypertension? (BHBD2, CHBD2)	Range 0-64	if not missing (BPsys) and not missing (BPdias) → hypertensionm = 0*	
	Assume taking madication for humantancian 2 (DUDD2A)	1	if BPsys >= 140 or BPdias >= 90 → hypertensionm = 1	Variable label:
	-Are you taking medication for hypertension? (BHBD2A, CHBD2A)	1= no 2=yes	*) See blood pressure.	Does the respondent have hypertension? (self-reported)
	-Are you being treated for hypertension by a doctor? (BHBD3, CHBD3)	2-yes) See blood pressure.	2. Does the respondent have hypertension?
	-Are you being treated for hypertension by a doctor: (blibbs, clibbs)	1=no	hypmsr	(measured; based on lowest BP
		2=yes, family physician	if hypertension = 0 or hypertensionm = $0 \rightarrow$ hypmsr = 0	measurements)
		3=yes, specialist	if hypertension = 1 or hypertensionm = $1 \rightarrow$ hypmsr = 1	3. Does the respondent have hypertension?
		, , , , , , , , , , , , , , , , , , , ,		(measured (based on lowest BP
			hypmed:	measurements) OR self-reported)
			If B/CHBD2A=1 → hypmed=0	4. Taking hypertension medication?
			If B/CHBD2A=2 → hypmed=1	
ActiFE Ulm	hypertension until baseline (C_hypert_BL)	0=no	hypertension:	Value label:
		1=yes	Use as is.	0=no
			hypertension = C_hypert_BL	1=yes
			hypertensionm:	Notes:
			if not missing (BPsys) and not missisng(BPdias) → hypertensionm = 0*	According to most national guidelines, the threshold for the diagnosis of hypertension is a
			if BPsys >= 140 or BPdias >= 90 → hypertensionm = 1	systolic blood pressure of at least 140 mm Hg, a
			*) See blood pressure.	diastolic blood pressure of at least 90 mm Hg, or
			Joce blood pressure.	both
			hypmsr	(https://www.sciencedirect.com/science/article
			if hypertension = 0 or hypertensionm = $0 \rightarrow \text{hypmsr} = 0$	/pii/S0140673614614689?via%3Dihub).
			if hypertension = 1 or hypertensionm = $1 \rightarrow$ hypmsr = 1	The lowest measured value was used for
				determining presence of hypertension. This will
			hypmed	likely overestimate the prevalence of
			Not harmonized.	hypertension in LASA C, as BP was only
TILDA	Has a doctor ever told you that you have any of the following	0=no	hypertension:	measured once in this cohort (1509 valid cases).
	conditions: high blood pressure (ph201_01)	1=yes	Use as is.	We chose to use the lowest BP measurements
			ph201_01=hypertension	as opposed to the first BP measurement for
	Are you currently taking any tablets or pills for high blood pressure?	-1=not asked	harman dan dan dan dan dan dan dan dan dan d	determining hypertension, since the very first BP measurements typically are overestimations.
	(ph202a)	1=yes 5=no	hypertensionm: if not missing (BPsys) and not missing(BPdias) → hypertensionm = 0*	Also note that in B-Proof, there are 1243
		3-110	if BPsys >= 140 or BPdias >= 90 \rightarrow hypertensionm = 1	respondents for whom only the lowest measure
			1 bi 3y3 >= 140 0i bi did3 >= 30	was reported.
			*) See blood pressure.	
				Note that for hypmed it may be more
			hypmsr	appropriate to use the dichotomous variables
			if hypertension = 0 or hypertensionm = $0 \rightarrow \text{hypmsr} = 0$	for cardiovascular drugs related to treatment of
			if hypertension = 1 or hypertensionm = 1 → hypmsr = 1	hypertension.
			hypmed:	
			if ph202a=1 → hypmed=1	

			if ph202a=5 → hypmed=0	
B-PROOF		0 = no 1 = yes	<pre>hypertension Use as is. Hypertension=BloodPressure hypertensionm: if not missing (BPsys) and not missing(BPdias) → hypertensionm = 0* if BPsys >= 140 or BPdias >= 90 → hypertensionm = 1 *) See blood pressure. hypmsr if hypertension = 0 or hypertensionm = 0 → hypmsr = 0 if hypertension = 1 or hypertensionm = 1 → hypmsr = 1 hypmed:</pre>	
Rotterdam Study	Are you taking any medication for high blood pressure at the moment? (e5_EIMC8C)	0 = no 1 = yes 7 = don't know 8 = n.a. 9 = no answer	Not harmonized. hypertension Not harmonized. hypertensionm: if not missing (BPsys) and not missing(BPdias) → hypertensionm = 0* if BPsys >= 140 or BPdias >= 90 → hypertensionm = 1 *) See blood pressure. hypmsr if hypertensionm = 0 → hypmsr = 0 if hypertensionm = 1 → hypmsr = 1 hypmed: If e5_EIMC8C=1 → hypmed=1 If e5_EIMC8C=0 → hypmed=0	
ID number			. =	
LASA	Respondent number (respnr)	Range 71000-94138	Wave C: ID=respnr + 100000000 Wave 3B: ID=respnr + 200000000	Variable name: ID Unit: ID number
ActiFE Ulm	study ID (sid)	Range 20034-79997	ID= sid + 300000000	

TUDA	TUDAina ideabition (id)	Dan 01031 40043	id first as a set of the continuity of th	
TILDA	TILDA unique identifier (id)	Range 01021-40942	id was first reconstructed by assigning a random number to each respondent. Then:	
	A unique identifier for each participant is provided (id), along with		ID=id + 40000000	
	identifiers for the household (household) and geographic cluster			
	(cluster) to which they belong. As this variable contains non-numerical			
	information, a new ID variable was constructed.			
B-PROOF	Participant number (participant_ID)	Range 5008-32343	 ID= participant_ID + 500000000	
Rotterdam		Range 1-9604001	ergoid was first reconstructed by assigning a random number to each respondent.	
Study	identification (ergold)	Natige 1-9004001	Then:	
Study			ID= ergoid + 600000000	
Income			The Create Coccoccocc	
LASA	Income of respondent + partner per month (binccat, cinccat)	Wave C:	Wave 3B:	Variable name:
LASA		0=less than 999 guilder (< 453	If binccat>=0 and <=3 → income=1	income
		euro)	If binccat>=4 & binccat<=8 → income=2	meome
		1=1000-1250 guilder (454 - 567)	If binccat>=9 → income=3	Variable label:
		2=1251-1500 guilder (567 - 680)		Annual household income (euro)
		3=1501-1750 guilder (681 - 794)	Wave C:	
		4=1751-2000 guilder (795 - 907)	If cinccat>=0 and <=3 → income=1	Value labels:
		, , ,	If cinccat>=4 & cinccat<=8 → income=2	1= <10,000
		6=2251-2500 guilder (1022 - 1134)		2= 10,000 - 20,000
		7=2501-3000 guilder (1135 - 1361)		3= >20,000
			Note: if resp. had missing data on c/binccat and reported having no income on the follow-	Note: the cut-off values were based on TILDA's
		9=3501-4000 guilder (1589 - 1815) 10=4001-4500 guilder (1816 -	If c/binccat<0 & c/bincf=0 → income=1	value labels.
		2042)	In content of a content	value labels.
		11=4501-5000 guilder (2043 -		
		2269)		
		12=5001 or more (2270 +)		
		Wave 3B:		
		1=454-567 euro		
		2=568-680 euro 3=681-794 euro		
		4=795-907 euro		
		5=908-1021 euro		
		6=1022-1134 euro		
		7=1135-1361 euro		
		8=1362-1588 euro		
		9=1589-1815 euro		
		10=1816-2042 euro		
		11=2043-2269 euro		
		12=2270-2495 euro 13=2496-2722 euro		
		14=2723-2949 euro		
		15=2950-3176 euro		
		16=3177-3403 euro		
		17=3404-3630 euro		
		18=3631-3857 euro		
		19=3858-4084 euro		
		20=4085-4311 euro		

		21=4312-4537 euro		
		22=4538-4991 euro		
		23=4992-5445 euro		
		24=5446 or more		
ActiFE Ulm	No data available.		Not harmonized.	
TILDA	How much income in total have these people received during the last 12 months? (si408)	Range 0-2,000,000	If si408 >=0 and si408 <10,000 \rightarrow income=1 If si408 >=10,000 & si408<20,000 \rightarrow income=2	
		1- 410 000 0000	If si408 >20,000 → income=3	
	Did the household income amount to a total of less than XXXXX, more	l e e e e e e e e e e e e e e e e e e e	If a: 400 mainsing 0 a: 400 4 Ninesans 4	
	than YYYYY? (si409)	2= 10,000 - 20,000 euro 3= 20,000 - 40,000 euro	If $si408 = missing \& si409=1 \rightarrow income=1$	
			If si408 = missing & si409=2 → income=2	
		4= 40,000 - 70,000 euro 5= >70,000 euro	If si408 = missing & (si409=3 si408 = 4 si408 = 5) → income=3	
B-PROOF	No data available		Not harmonized.	1
Rotterdam	No data available for ERGO-5; only data on baseline.		Not harmonized.	_
Study				
Injurious fall				
LASA	No data available on injurious falls.		Not harmonized.	Variable name:
ActiFE Ulm	frequency of injurious falls within the observation period following	Range 0 - 24	If $FC_{fall_BL} = 0 \rightarrow ifalls = 0$	ifalls
	baseline [fall calendar] (FC_injury_fall_BL)		If FC_injury _fall_BL = 0 → ifalls = 0	
			If FC_injury_fall_BL > 0 → ifalls = 1	Variable label:
	Note that these are prospective falls.			In the past 12 months, have you had an
TILDA	Did you injure yourself seriously enough to need medical treatment?	1=yes, and I got treatment	If ph404=1 ph404=2 → ifalls=1	injurious fall requiring medical attention?
	(ph404)	2=yes and I did not get treatment	If ph404=5 ph401=5 → ifalls=0	Value label:
		5=no		0=no
				1=yes
B-PROOF	No data available, but data on fractures after falls in period before baseline:		Should only cover injurious falls in past 12 months, so:	
	Did participant ever sustain fracture? (fractures)	0=no	If cause_fracture = 1 or cause_fracture = 2 or cause_last_but_one_fracture = 1 or	
		1=yes	cause_last_but_one_fracture = 2 → ifalls=1	
			If cause_fracture = 3 or cause_fracture = 4 or cause_last_but_one_fracture = 3 or	
	When did the last fracture occur? (last_fracture_when)	Date	cause_last_but_one_fracture = 4 → ifalls=0	
	Cause of the most recent fracture? (cause_fracture)	1=fall > 'standing height' 2=fall from 'standing height'	year_from_date=XDATE.year(date_interview).	
		3='traffic incident'	diffdate_frac=year_from_date-last_fracture_when	
		4='other'	diffacte_fide year_from_date last_fidetate_when	
	Did participant sustain another fracture? (fractures_2)	0=no		
		1=yes		
	When did last-but-one fracture occur? (last_but_one_fracture_when)	Date		
	Cause of last-but-one fracture? (cause_last_but_one_fracture)	1-fall > 'ctanding haight'		
		1=fall > 'standing height' 2=fall from 'standing height'		
		3='traffic incident'		
		4='other'		

Rotterdam Study Living situation LASA			If e5_EIMC27A=0 or e5_EIMC27A=8 → ifalls=0 If e5_EIMC27A>=1 and e5_EIMC27A<=3 → ifalls=1 If chindep/bhindep=1 → living=0	Variable name:
	C & 3B: type of housing (choustyp/bhoustyp)	1= independent 2= residential home 3= nursing home-somatic 4= nursing home-psychiatric 5= hospital 6= psychiatric hospital 8= monastery (added) Coding in 3B and C differs. 3B: -3=Na, wrong skip -2=Not applicable -1=unknown 1=attached row or semi-detached 2=detached 3=high rise (elevator) 4=high rise (no elevator) 5=ground floor apartment 6=apt build elderly (elevator) 7=home elderly (street level) 8=semi-independent 9=farm/corporate housing 10=houseboat 11=housing with communal facilities 12=other 13=institution 14=monastery	If chindep/bhindep=2 or chindep/bhindep=3 or chindep/bhindep=4 or chindep/bhindep=5 or chindep/bhindep=6 or chindep/bhindep=8 → living=1	
ActiFE Ulm	What kind of house do you live in? (IV3N877) ActiFE Ulm only includes community-dwelling older persons.	1=one family house 2=two family house/row house 3=apartment in apartment building	living = 0	
TILDA	Only info on house type as all respondents are community-dwelling: Now I have a few questions about your place of residence. Is this (hw101)	1=a detached house 2=a semi-detached house 3=a terraced house 4=an apartment/ flat/bedsitter 95=other (specify)	living=0	

B-PROOF	No info on type of house only living situation (living_sit)	1=independent 2=assisted living 3=service flat 4=home for the elderly	If living_sit=1 → living=0 If living_sit=2 or living_sit=3 or living_sit=4 → living=1	
Rotterdam study	How is your living situation? (e5_EIHOME)	1=independent 2=service flat/supported housing/community 3=residential care home 4=nursing home 5=other 7=don't know 9=no answer	If e5_EIHOME=1 → living=0 If e5_EIHOME=2 or e5_EIHOME=3 or e5_EIHOME=4 → living=1	
Lung disease	e			
LASA	Do you have: asthma, chronic bronchitis or emphysema (BCARA01, CCARA01)	3B: 1=no 2=yes C: 0=no, never 1=no, but at wave B yes 2=yes, but at wave B no 3=yes, and at wave B yes	C: If ccara01=0 → lung=0 If ccara01=1 or ccara01=2 or ccara01=3 → lung=1 3B: If BCARA01=1 → lung=0 If BCARA01=2 → lung=1	Variable name: lung Variable label: Lung disease Value label: 0=no 1=yes
ActiFE Ulm	asthma until baseline (C_asthma_BL) chronic obstructive lung disease until baseline (C_copd_BL)	0=no 1=yes	If C_asthma_BL =0 & C_copd_BL =0 → lung=0 If C_asthma_BL =1 C_copd_BL =1 → lung=1	The number of lung disease that are reported on differs between the cohorts. Also, the questions are asked differently; for example in LASA, presence of asthma, chronic bronchitis or
TILDA	Has a doctor ever told you that you have any of the following conditions? -Asthma (ph301_02) -Chronic lung disease such as bronchitis or emphysema (ph301_01)	0=no 1=yes	If ph301_02=0 & ph301_01=0 → lung=0 If ph301_02=1 ph301_01=1 → lung=1	emphysema is all assessed in the same yes/no question.
B-PROOF	No data available.		Not harmonized.	

Rotterdam	Have you ever been diagnosed with house dust mite allergy, hay fever or asthma (no COPD)? (e5_EIALLG) In the last two years, have you been coughing almost daily for three months in a row? (e5_EICARA1) In the last two years, have you been coughing up mucus almost daily for three months in a row? (e5_EICARA2) Have you ever experience wheezing on the chest? (e5_EICARA4) In the last two years, have you experienced this for longer than a week? (e5_EICARA5) Have you ever experienced attacks of asthma? (e5_EICARA6) Do you know whether you have any lung problems? (e5_18424) -Asthma (e5_18425) - COPD (chronic bronchitis / lung emphysema) (e5_18427)	0 = no 1 = yes 7 = don't know 9 = no answer 0 = no 1 = yes 7 = don't know 9 = no answer 0=nee 1=ja 8=not applicable/default 9=missing	If e5_18424=1 and (e5_18425=1 or e5_18427=1) → lung=1 If e5_18424=0 → lung=0	
Marital statu				
LASA ActiFE Ulm	Current marital status (bmarst, cmarst) Marital status (marital_BL)	1=never married (single) 2=married (partner) 3=divorced (sep) 4=widowhood (widow) 5=registered partnership (partner) 1:married, (partner) 2:single, (single) 3:divorced (sep)	C & 3B: If cmarst/bmarst=2 → marital=1 If cmarst/bmarst=5 → marital=1 If cmarst/bmarst=1 → marital=2 If cmarst/bmarst=3 → marital=3 If cmarst/bmarst=4 → marital=4 partner If marital >= 1 and marital <= 4 → partner = 0 If marital = 1 → partner = 1 marital If marital_BL = 1 → marital=1 If marital_BL = 2 → marital=2 If marital_BL = 3 → marital=2	Variable name: marital partner Variable label: Current marital status Living with partner Value labels: 1 = Partnered or (re)married 2= Living apart or single 3 = Separated or divorced 4 = widowed
TILDA	Are you? (cs006)	4:widowed (widow) 5:live apart (single) 1=married (partner) 2=living with a partner as if married (partner) 3=single (never married) (single) 4=separated (sep) 5=divorced (sep) 6=widowed (widow)	If marital_BL =3 → marital=3 If marital_BL =4 → marital=4 If marital_BL =5 → marital= 2 partner If marital >= 1 and marital <= 4 → partner = 0 If marital = 1 → partner = 1 marital If cs006=1 → marital=1 If cs006=2 → marital=1 If cs006=3 → marital=2 If cs006=4 or cs006=5 → marital=3 If cs006=6 → marital=4 partner If marital >= 1 and marital <= 4 → partner = 0 If marital = 1 → partner = 1	

1				
B-PROOF	What is your marital status? (marital_status)	1 = unmarried (single) 2 = living together with a partner	marital If marital status=3 → marital=1	
		(partner)	If marital_status=2 → marital=1	
		3 = married (partner)	If marital status=1 → marital=2	
		4 = widow/widower (widow)	If marital_status=5 → marital=3	
		5 = divorced (sep)	If marital_status=4 → marital=4	
			partner	
			If marital >= 1 and marital <= 4 → partner = 0	
			If marital = 1 → partner = 1	
Rotterdam	What is your marital status? (e5_EICIVIL)	1 = Never been married (single)	marital	
Study		2 = Married/ living together with a	If e5_EICIVIL=2 or e5_EICIVIL=5 → marital=1	
	Note: no registered partnership category.	partner (also: divorced and	If e5_EICIVIL=1 → marital=2	
	Note: widower & then married: falls under the married category now.	remarried) (partner)	If e5 EICIVIL=4 → marital=3	
		3 = widow/widower(widow)	If e5_EICIVIL=3 → marital=4	
		4 = Divorced (sep)		
		5 = widow/widower and remarried	partner	
		(partner)	If marital >= 1 and marital <= 4 → partner = 0	
		9 = No answer	If marital = 1 → partner = 1	
Memory				
LASA	Word list recall (15 words)		irecall= BMWTT1+ BMWTT2	Variable name:
LASA	-trail 1 (BMWTT1, CMWTT1)	Range 0-15	if BMWTT1>10 → irecall=10+BMWTT2	1. irecall
	-trail 2 (BMWTT2, CMWTT2)	Range 0-15	if BMWTT2>10 → irecall=BMWTT1+10	2. drecall
	-trail 3 (BMWTT3, CMWTT3)	Range 0-15	if BMWTT1>10 & BMWTT2>10 → irecall=20	2. diecan
	-trail 3 (Bivivi 113, Civivi 113)	Range 0-13	III BIVW 111210 & BIVIW 112210 7 II eCali-20	Variable labels:
	Delayed recall (BMWTDR, CMWTDR)	Range 0-15	drecall=BMWTDR	1. immediate recall (number of words)
	Delayed recall (DIVIVI DIX, CIVIVI DIX)	Kange 0-13	if drecall>10 → drecall=10	delayed recall (number of words)
			in dietaii>10 7 dietaii=10	2. delayed recall (fidiliber of words)
ActiFE Ulm	No data available.		Not harmonized.	Values:
				1. Range 0-20
TILDA	Word list recall (10 words)		irecall= COGimmediaterecall1+ COGimmediaterecall2	2. Range 0-10
IILDA	-trail 1 (COGimmediaterecall1)	Range 0-10	Codiffice Co	
	-trail 2 (COGimmediaterecall2)	Range 0-10	drecall=COGdelayedrecall	Note: For consistency across the studies:
	-trail 2 (Codiffinediaterecaliz)	Marige 0-10	di ecali-coducia yedi ecali	-the maximum number of words to recall per
	Delayed recall (COGdelayedrecall)	Range 0-10		trail was capped at 10 -only the first 2 trails were used for irecall
B-PROOF	Rey Auditory Verbal Learning Test (RAVLT):		Irecall= RAVLT_1_corr+ RAVLT_2_corr	
	- 1st recall (RAVLT_1_corr, RAVLT_1_incorr, RAVLT_1_double)	Score, max 15	if RAVLT_1_corr >10 → irecall=10+ RAVLT_2_corr	
	- 2 nd recall (RAVLT 2 corr, RAVLT 2 incorr, RAVLT 2 double)		if RAVLT_2_corr >10 → irecall= RAVLT_1_corr +10	
	- 3 rd recall (RAVLT_3_corr, RAVLT_3_incorr, RAVLT_3_double)	Score, max 15	if RAVLT 1 corr >10 & RAVLT 2 corr >10 → irecall=20	
	- 4 th recall (RAVLT 4 corr, RAVLT 4 incorr, RAVLT 4 double)			
	- 5 th recall (RAVLT_5_corr, RAVLT_5_incorr, RAVLT_5_double)	Score, max 15	drecall= RAVLT_DR_corr	
	- Delayed recall (RAVLT_DR_corr, RAVLT_dr_incorr,	,	if drecall>10 → drecall=10	
	RAVLT_dr_double)	Score, max 15		
	 Delayed recognition (RAVLT_del_recogn_score) 	Score, max 15		
		Score, max 15		
		Score, max 30		

Rotterdam	Words Learning Test-15 test	= 0 - 15	Irecall= e5 2697 + e5 2698	
Study	Correct answers 15 WLT trial 1, 2, 3 (e5_2697, e5_2698, e5_2699)	99 = missing	if e5_2697>10 → irecall=10 + e5_2698	
, , , , , , , , , , , , , , , , , , ,	Correct answers 15 WLT delayed recall (e5_2700)	88 = not applicable/default	if e5_2698>10 → irecall=e5_2697 + 10	
	Wrong words 15 WLT trial 1, 2, 3 (e5_15752, e5_15753, e5_15754)	instruction, actually	if e5_2697>10 and e5_2698>10 → irecall=20	
	Wrong words 15 WLT delayed recall (e5_15755)			
	Double words 15 WLT trial 1, 2, 3 (e5_15756, e5_15757, e5_15758)		drecall= e5_2700	
	Double words 15 WLT delayed recall (e5_15759)		if drecall>10 → drecall=10	
	Double wrong words 15 WLT trial 1, 2, 3 (e5_15760, e5_15761,			
	e5_15762)			
	Double wrong words 15 WLT delayed recall (e5_15763)			
	Test status 15 Words Learning Test (e5_13188)			
		1 = complete and reliable		
		2 = technical problems		
		3 = refusal		
		4 = cognitive limitations		
		5 = physical limitations		
		6 = deviation fr.the instrument		
		9 = missing		
	C	8 = not administered/default		
	Correct positive answers 15 WLT recognition task (13191)			
	Incorrect positive answers 15 WLT recognition task (13192)	0.45		
	Incorrect negative answers 15 WLT recognition task (2748)	= 0 - 15		
	T	99 = missing		
	Test status 15 WLT recognition task (13189)	88 = not applicable/default		
		1 = complete and reliable		
		2 = technical problems		
		3 = refusal		
		4 = cognitive limitations		
		5 = physical limitations		
		6 = deviation fr.the instrument		
		9 = missing		
		8 = not administered/default		
		8 - Hot administered/default		
NANACE				
MMSE	AMAGE (Linear Maria 22	Commence Name of Addition	V-d-lile comme
LASA	MMSE (cmmsesc, bmmsesc)	Score Max. 30	Cmmsesc/bmmsesc=MMSE	Variable name:
A -1:55 / · ·	AMAGE (survey DI)	Daniel 17 20	If Cmmsesc/bmmsesc <0 → MMSE=missing	MMSE
ActiFE Ulm	MMSE (mmse_BL)	Range 17-30	Use as is.	W
			mmse_BL = MMSE	Variable label:
TILDA	MMSE (COGmmse_ha)	Range 9-30	Use as is.	Total MMSE score
			COGmmse_ha=MMSE	Danga 0 20
B-PROOF	MMSE (MMSE_score)	Score Max. 30	MMSE_score=MMSE	Range 0-30
			If MMSE_score<0 → MMSE=missing	
Rotterdam	MMSE score (e5_3766)	Score max. 30	E5_3766=MMSE	1
Study		Solic max. 30	25_0,00 1111132	
Juan				

Gait speed				
LASA	Walk test: 2x3 meter walk and turn (as quickly as possible) -time (BWALK04, CWALK04) -reason test not done (BWALK02, CWALK02)	Range 3-64 sec -1= missing -1=See BWALK01 1=Respondent already walked 2=can walk (with aid) 3=can walk with aid not available 4=Cannot walk	gait, wave C: if CWALK02 = 4 → gait = -1 if CWALK04 > 0 and CWALK02 ~= 4 → gait = 6 / CWALK04 gait, wave 3B: if BWALK02 = 4 → gait = -1 if BWALK04 > 0 and BWALK02 ~= 4 → gait = 6 / BWALK04 zgait Z-scores created for nonnegative gait values.	Variable name: gait zgait Variable label: Reported gait speed m/s Z-scores of gait speed m/s – computed for each cohort individually Value label: gait
ActiFE Ulm	Short Physical Performance Battery (SPPB): - Average gait speed (m/s) (SPPB_GS_BL) - balance test (SPPB_b_cat_BL) - time (sec) needed for Five-Chair-Rise test (SPPB_fcr_time_BL) - walking aid (SPPB_walkaid_BL) - gait speed test length (m) (SPPB_gs_length_BL) - gait speed test: time needed for 1st run (sec) (SPPB_1run_BL) - gait speed test: time needed for 2nd run (sec) (SPPB_2run_BL) - gait speed test forerun (0:no forerun) (SPPB_gs_forerun_BL) - gait speed test fastest time of the two runs (SPPB_gs_time_BL) - gait speed test (categorised; 0:unable, 4:top fit) (SPPB_gs_cat_BL) - five-chair-rise test (categorised; 0:unable, 4:top fit) (SPPB_fcr_cat_BL) - SPPB sum score of the 3 categorised tests (SPPB_cat_sum_BL) - SPPB frailty index (0:fit, 1:pre-frail, 2:frail) (SPPB_frailty_BL)	0=not able 4= top fit	gait gait = SPPB_gs_BL if SPPB_gs_cat_BL = 0 → gait = -1 zgait Z-scores created for nonnegative gait values.	-1= Cannot walk Notes: - The instructions and reporting related the gait speed test differs per cohort. LASA and B-PROOF: as fast as possible. ERGO, TILDA, and ActiFE Ulm: normal speed. Z-scores were computed to make the cohorts comparable.
		0=not able 4= top fit 0=not able 4= top fit		

TILDA	Timed up and go – rise, 2x3 meters and turn, sit down	Range 4-105 sec	goit	
TILDA	· · ·	Range 4-105 Sec	gait	
	-time (FRtugTimeSec)		gait = GRTspeed / 100	
			if gaitFileStatedG = "Unable" → gait = -1	
	Not available in public data wave 1:			
	-reason test not done (HOtugunabletocarryoutreason)		zgait	
			Z-scores created for nonnegative gait values.	
	Gait speed was assessed using a computerised mat (active area 4.88			
	m) with embedded pressure sensors (GAITRite®, CIR Systems Inc, New			
	York, USA). Respondents are asked to wear "normal walking shoes"			
	preferably laced-up shoes or trainers. If respondents usually use			
	assistive devices such as canes or walkers, they were advised to use			
	them during the test which is recorded in the results software.			
	Participants were asked to complete two walks along the mat at their			
	usual walking pace. Participants were allowed a practice trial. The			
	walking speeds obtained in the two walks in each condition are			
	averaged to give usual gait speed. As participants started and finished			
	2.5 m before and 2 m after the walkway, it was assumed that the			
	measured section represented steady state gait speed.			
	GRTspeed: Gait speed cm/s (normal timed walk)			
	GRT_Used_walking_aid: Was a walking aid used during the test			
	GRT_Gait_disturb_walk: Was the test interrupted after starting			
	gaitFileStatedG: Reason for GAIT assessment not being completed			
	gaithle stated. Reason for dan assessment not being completed			
	Natar na variable available an reason test not done in public ways 1			
	Note: no variable available on reason test not done in public wave 1.			
B-PROOF	Timed walking test: participants were asked to walk 3 m, turn around	Range 3-90 sec	gait	
	and walk back as quickly as possible. (pp4)	-1=missing	if $pp4 > 0 \rightarrow gait = 6 / pp4$	
	and train back as quickly as possible: (pp 1)	400=measurement failed	if pp2 = 4 or pp12 = $4 \rightarrow$ gait = -1	
	Check walking ability (pp2)		11 ppz - 4 01 ppzz - 4 7 gait - 1	
	Check waiking ability (pp2)		zgoit	
			zgait Z serves greated for non negative gait values	
		a manadasa da un di di	Z-scores created for non-negative gait values.	
		1 = resp already walked		
		2 = can walk (with aid)		
		3 = can walk with aid, not available		
		4 = cannot walk		
	Did R walk alone? (pp3)	0 = no		
		1 = yes		
		2 = terminated		
	Test terminated: reason (pp12)	0 = Not terminated		
	N. 1	1 = Not enough room/time		
		2 = R refused		
		3 = Exercise not safe		
		4 = Physically not capable		
		5 = R did not understand		
1		6 = Other		

Rotterdam Study	Gait assessment with a 5.79-m-long electronic walkway with 1.27-cm-wide pressure sensors (4.88×0.61-m active area) (GAITRite Platinum; CIR systems Inc., Sparta, NJ, USA): 3 items are scored during walking on the mat. Participants may keep on their shoes, except when they have high heels or because of other reasons (no variable names available, only nrs: 16400-16412): ^ A. Can you stand on the mat in the way you are used to? ^ B. Can you walk on the mat and exit the mat at the end? ^ And now the same instruction, but the other direction?		gait = Velocity_first / 100 zgait Z-scores created.	
	Repeat this 3 times. ^ C. Can you walk on the mat again, turn around at the end of the mat and then walk back? ^ D. Can you walk on the straight line (on the mat)? Observe the walk and turn.			
	Centimeters/second (Velocity_second)	Range 21 - 186 Range 14 - 182		
	Walking capacity?			
		0 = normal 1 = almost normal, not in tandem position 2 = without support, abnormal & irregular 3 = without support, wobbling & difficult to turn 4 = not without autonomous support 5 = only possible with walking stick 6 = Only possible with 2 walking sticks or rollator 7 = Only with accompaniment 8 = walking impossible (wheelchair) 99 = missing 88 = not applicable/default		
		1 = yes, everything according to protocol 2 = no, not completely 3 = measurement not done 9 = missing 8 = default		
		String 8 = default		
Number of ch	nronic conditions	- deladit		
LASA	See Appendix 1		nchrdis=diabetes+heart+lung+cancer	Variable name:
	See Appendix 1		The state of the s	nchrdis

TILDA	See Appendix 1		See Appendix 1 for details on how the chronic diseases were selected for creating this	Variable label:
B-PROOF	No data available, only diabetes and heart.		summary score. Please refer to disease specific sections to see how these variables were harmonized.	Number of chronic conditions
Rotterdam Study	See Appendix 1		riease refer to disease specific sections to see now these variables were flamforfized.	Range 0-4
				Use of a summary score is not preferred as the number of measured chronic conditions differs per cohort.
Number of n	nedications			
LASA	Respondents were asked to show their medication containers to the interviewers. Participants were asked to show only the medicines that were prescribed by a physician and that were used currently. The name, dose, frequency of intake, and duration of use of every medicine was recorded. The number of recorded medications (BM#MED, CM#MED)	Range 0-19	nmed variable was created using the number of described medication. if nmed >=8 → nmed = 8 if (nmed<5) → polypharmacy=0 if (nmed>=5) → polypharmacy=1	Variable name: nmed polypharmacy variable label: Number of medications Polypharmacy (more than four types of
ActiFE Ulm	For each participant, every medication in use is described.	0-16	nmed variable was created using the number of described medication. if nmed >=8 → nmed = 8 if (nmed<5) → polypharmacy=0. if (nmed>=5) → polypharmacy=1.	medication) Value label: nmed 8=8 or more types of medication
TILDA	Respondents were asked to show all medications taken; names were copied from the containers by the nurse (MDmeds). Number of reported medications excluding supplements (MDmeds_excl_supps).	Range 0-14 NB: 14+ coded as 14. 82 missing	nmed= MDmeds_excl_supps if nmed >=8 → nmed = 8 if (nmed<5) → polypharmacy=0. if (nmed>=5) → polypharmacy=1.	polypharmacy 0=no 1=yes
B-PROOF	For each participant, every medication in use is described.		nmed variable was created using the number of described medication. if nmed >=8 → nmed = 8 if (nmed<5) → polypharmacy=0. if (nmed>=5) → polypharmacy=1.	Notes: - see appendix for a list of all types of medications. For each of these types, a dichotomous variable will be included in the harmonized dataset. - Supplements were removed from the number
Rotterdam Study	Medication use was registered during the home interview by trained research assistants; During the home interview, participants presented all the medication they used in the past week. Trained research assistants registered drug names, dose, and indication on a structured data entry form. Variable for number of medications cannot be found in the variable list, but it is expected that this is available as medication use was measured for all participants. This should be asked separately.		nmed variable was created using the number of described medication. if nmed >=8 → nmed = 8 if (nmed<5) → polypharmacy=0. if (nmed>=5) → polypharmacy=1.	of medications (see appendix 8).
Number of p	people in household			
LASA	LASA C Number of other persons in household (excl. partner) (cnupers) LASA 3B Number of other persons in household (including partner) (bnupers)	Range 0-6	LASA C If cnupers >=0 → npplhh= cnupers if marital= 1 → npplhh = npplhh + 1* if npplhh >= 3 → npplhh = 3 LASA 3B If bnupers >=0 → npplhh= bnupers	Variable name: npplhh Variable label: Number of other people in the household Value labels:
			If npplhh >=3 → npplhh=3 *) See <u>marital status</u> .	0=none 1=one 2=two 3=three or more

	To a man			
ActiFE Ulm	No data available.		Not harmonized.	
TILDA	Household size (includes partner) (hhsize)	Range 1-8 8+ coded as 8. 13 missing	npplhh= hhsize-1 If npplhh>=3 → npplhh=3	
B-PROOF	No data available.		Not harmonized.	
Rotterdam Study	How many people live in your household ? (e5_EIHOMEAP)	Number 77=don't know 88=not applicable 99=missing	npplhh=e5_EIHOMEAP-1 If e5_EIHOMEW = 1 → npplhh= 0 If npplhh>=3 → npplhh=3	
	With whom are you living? (e5_EIHOMEW, e5_EIHOMEW2, e5_EIHOMEW3, e5_EIHOMEW4)	1 = no one 2 = with partner 3 = with children 4 = with parents 5 = with brothers/sisters 6 = with others 7 = don't know 9 = no answer		
Occupation	and retirement			
LASA	Paid job at present (bjob1, cjob1)	1=no 2=yes	job If bjob1/cjob1=1 → job=0 If bjob1/cjob1=2 → job=1	Variable name job
	Hours per week (bjob6, cjob6)	Range 1-100		Variable label Current job status
	(Partial) early retirement (bretired, cretired)	1=no 2=yes, partly 3=yes, completely		Value label 0=not in paid job
ActiFE Ulm	No data available.		Not harmonized.	1=in paid job
TILDA	Which one of these would you say best describes your current situation? (we001)	1=retired 2=employed 3=self-employed 4=unemployed 5=permanently sick or disabled 6=looking after home or family 7=in education or training 95= other Range 1-4	Job If we001=1 we001=4 we001=5 we001=6 we001=7 we001=95 → job=0 If we001=2 we001=3 → job=1	
	How many jobs do you currently have? (we102)	Range 0-168		
	How many hours a week do you usually work in this job? – most important job (we107) – job 2 (we144_1) – job 3 (we144_2) – job 4 (we144_3) – job 5 (we144_4)			
B-PROOF	No data available		Not harmonized.	_
			1	

Rotterdam Study	What is your current job status? (e5_EISES2)	0 = Payed office 1 = Unemployed (geregistreerd Gab) 2 = House wife/-man 3 = Incapacitated 4 = Rentier 5 = Early retirement 6 = retired (>= 65) 7 = don't know 9 = no answer	Job If e5_EISES2>=1 and e5_EISES2<=6 → job=0 If e5_EISES2=0 → job=1	
	What is your current job? (e5_EIJOBTY)	String		
	How many hours a week do you work? (e5_EIJOBHR)	Hours		
	In which year did you stop working? (e5_EISES2B)	Year		
Pain				
LASA	Nottingham Health Profile questionnaire: I am in pain when I am standing (bqpain1, cqpain1) I find it painful to change position (bqpain2, cqpain2) I am in pain when I am sitting (bqpain3, cqpain3) I am in pain when I walk (bqpain4, cqpain4) I have unbearable pain (bqpain5, cqpain5) I am in constant pain (bqpain6, cqpain6) Follow-up question to the above: Evaluation of pain at present (bqpain, cqpain) SF-12 pain item (only in 3B): During the past 4 weeks, how much did	1=yes 2=no	pain If b/cqpain =5 → pain=0 If b/cqpain >=6 → pain=1 painint If BQQULI08=1→ painint=0 If BQQULI08>=2 → painint=1	Variable name: 1. pain 2. painint Variable labels: 1. Presence of pain 2. Do you experience pain that interferes with your work/normal activities? Value labels 0=no 1=yes Notes: - Pain for ActiFE Ulm pain also includes
	pain interfere with your normal work (including work outside the home and housework)? (BQQULI08)	5=low (no pain) 6 7 8 9 10=high (severe pain) 1=not at all 2=a little bit 3=moderately 4=quite a bit 5=extremely		backpain. With the inclusion of backpain, the harmonized distribution of pain in ActiFE Ulm is more in line with that of the other cohorts. - The distribution of painint of TILDA differs greatly from that of the other cohorts. Unlike the other cohorts, the SF12 was not used in TILDA.

A -4:55 LU	sharata asta satil baselia (C. sasta DI)	0	To a to	
ActiFE Ulm	chronic pain until baseline (C_cpain_BL)	0=no	pain	
	backpain until baseline (C_backpain_BL)	1=yes	If C_cpain_BL = 0 AND C_backpain_BL = 0 → pain = 0	
			If C_cpain_BL = 1 OR C_backpain_BL = 1 → pain = 1	
	SF-12 pain item: During the past 4 weeks, how much did pain interfere	1=not at all		
	with your normal work (including work outside the home and	2=slightly	painint	
	housework)? (SF12_Q8_BL)	3=moderately	If SF12_Q8_BL =1 → painint=0	
	110000 1101 11 12 1 1 1 1 1 1 1 1 1 1 1	4=quite a bit	If SF12_Q8_BL>=2 → painint=1	
			II 3/12_Qo_bt>-2 / paililit-1	
		5=extremely		
TILDA	Are you often troubled with pain? (ph501)	1=yes	pain	
		5=no	If ph501=5 → pain=0	
	How bad is the pain most of the time? Is it (ph502)		If ph501=1 → pain=1	
	(1=mild	n product of the control of the cont	
		2=moderate	painint	
	December as in made it difficult for more to december 199			
		3=severe	If ph504=5 ph501=5 → painint=0	
	as household chores or work? (ph504)		If ph504=1 → painint=1	
		1=yes		
		5=no		
B-PROOF	SF-12 pain item: During the past four weeks, how much did pain	1=not at all	pain	
	interfere with your normal work, including both work outside the	2=a little bit	If Euroqol_4 = 1 → pain =0	
	home and housework? (SF12_8)	3=moderately	If Euroqol_4>=2 → pain = 1	
	nome and nousework: (31 12_0)		Lui 0401_77-2 / paiii - 1	
	Formula the second of the seco	4=quite a bit		
	Euroqol item 4: range 1-3: pain or other complaints. (Euroqol_4)	5=extremely	painint	
	Note that this item is somewhat broad.		If SF12_8=1 painint=0	
			If SF12_8>=2 and SF12_8<=5 → paintint=1	
		1=none		
		2=some		
		3=severe		
		J-364616		

Rotterdam Study	In the past 6 months, did you experience any pain? (e5_EIPIJN) EUR-QoL question 4: pain/complaints (e5_EQOL4) NB: No items on influence of pain on usual activities found.	0 = no 1 = yes, daily 2 = yes, weekly 3 = yes, a few times/ monthly 7 = don't know 9 = missing 1 = no pain or other complaints 2 = some pain or other complaints 3 = a lot of pain or other complaints 7 = no answer 9 = missing	pain	
Parkinson's	disease			
LASA	No data available.		Not harmonized.	
ActiFE Ulm	No data available.			
TILDA	No data available.			
B-PROOF	Data available?			
Rotterdam Study	Data available?			

LASA Physical Activity Questionnaire (LAPAQ) asks about the	1= yes	LTPA	Variable names:
frequency and duration engaged in each activity during the past 2	2= no	*calculated time/week spent in each domain, then sum time spent walking, cycling, and	1. LTPA
weeks.		sports, and dichotomise.	2. physact
In the past two weeks, did you do:		If sum<=10 → LTPA=0	3. physact3
-walking outdoors (BLPHYA07, CLPHYA07)		If sum>10 → LTPA=1	4. zphysact
-cycling (BLPHYA11, CLPHYA11)			
-gardening (BLPHYA17, CLPHYA17)		physact	Variable labels:
-light household (BLPHYA32, CLPHYA32)		*minutes per week are calculated for each domain of activity, then multiplied by its	1. Leisure time physical activity
-heavy household (BLPHYA36, CLPHYA36)		respective MET value and summed.	2. Physical activity (MET.min/week)
-sport 1 (BLPHYA21, CLPHYA21)		physact=(walking*3.5)+(cycling*4.0)+	3. Physical activity level
-sport 2 (BLPHYA26, CLPHYA26)		(heavy household*4.0)+(garden*4.0)+ (sport*6.0)	4. Z-score for MET level
In the past two weeks, how often did you:		physact3	Value labels:
-walking outdoors (BLPHYA08, CLPHYA08)		If (physact)<40 → physact3=0	LTPA:
-cycling (BLPHYA12, CLPHYA12)		If physact>=40 & physact<600 → physact3=1	0=no
-gardening (BLPHYA18, CLPHYA18)		If physact>=600 → physact3=2	1=yes (≥1 time/week)
-light household (BLPHYA33, CLPHYA33)			
-heavy household (BLPHYA37, CLPHYA37)		zphysact	physact:
-sport 1 (BLPHYA23, CLPHYA23)		Z-scores created.	Range= 0- MET.minutes/week
-sport 2 (BLPHYA27, CLPHYA27)			
			physact3:
How much time did you spent doing this activity each time:			0=inactive (<40 MET.min/week)
-walking outdoors (BLPHYA09, CLPHYA09)			1=low level of activity (40-<600 MET.min/wee
-cycling (BLPHYA13, CLPHYA13)			2=high level of activity (≥600 MET.min/week)
-gardening (BLPHYA19, CLPHYA19)			
-light household (BLPHYA34, CLPHYA34)			Note: all cohorts use LAPAQ except for TILDA
-heavy household (BLPHYA38, CLPHYA38)			(i.e. IPAQ). IPAQ includes quite different
-sport 1 (BLPHYA24, CLPHYA24)			activities (walking, moderate and vigorous
-sport 2 (BLPHYA28, CLPHYA28)			activities). IPAQ can be harmonized with the

ActiFE Ulm LASA Physical Activity Questionnaire (LAPAQ) LTPA rest by computing z-scores for the MET scores. * Calculated time/week spent in each domain, then sum time spent walking, cycling, and Note: after merging the files, the z-scores for physical activity: walking (1:yes, 0:no) (LAPAQ_walk_BL) sports, and dichotomise. LAPAQ were computed across all cohorts that daily mean duration (min) of walking (LAPAQ walk daily BL) If sum<=10 → LTPA=0 used the instrument. physical activity: cycling (1:yes, 0:no) (LAPAQ_cycl_BL) If sum>10 \rightarrow LTPA=1 daily mean duration (min) of cycling (LAPAQ_cycl_daily_B) physical activity: gardening (1:yes, 0:no) (LAPAQ_garden_BL) physact daily mean duration (min) of gardening (LAPAQ garden daily BL) *minutes per week are calculated for each domain of activity, then multiplied by its physical activity: to do sports (1:yes, 0:no) (LAPAQ sport 1st BL) respective MET value and summed. daily mean duration (min) of most frequent sport physact=(walking*3.5)+(cycling*4.0)+ (LAPAQ_sport_1st_daily_BL) (heavy household*4.0)+(garden*4.0)+ (sport*6.0) physical activity: to do more sports (1:yes, 0:no) (LAPAQ sport 2nd BL) physact3 daily mean duration (min) of 2nd most frequent sport If (physact)<40 \rightarrow physact3=0 If physact>=40 & physact<600 → physact3=1 (LAPAQ sport 2nd daily BL) physical activity: light housework (1:yes, 0:no) If physact>=600 → physact3=2 (LAPAQ light hwork BL) daily mean duration (min) of light housework zphysact (LAPAQ_light_hwork_daily_BL) Z-scores created. physical activity: heavy housework (1:yes, 0:no) (LAPAQ heavy hwork BL) daily mean duration (min) of heavy housework (LAPAQ_heavy_hwork_daily_BL) daily mean duration (min) spend on physical activity (LAPAQ_totact_BL) daily mean duration (min) spend on physical activity without housework (LAPAQ totact nohwork BL) daily mean duration (min) spend on sports activity (LAPAQ totact sport BL) daily mean duration (min) spend on non-sports activity (LAPAQ totact nosport BL) number of different physical activities (LAPAQ_num_act_BL)

TILDA	The International Physical Activity Questionnaire (IPAQ) (short-form) asks about the frequency and time spent in the following activities during the last week:		*As the vigorous and moderate activity questions may include household and gardening activities, no LTPA variable could be created.	
	During the last 7 days, on how many days did you do this activity -vigorous physical activity like heavy lifting, digging, aerobics, fast		Phyasact & physact3	
	cycling (bh101)	1= Range 1-7	TILDA already includes a variable containing the MET score (IPAQmetminutes). Due to	
	-moderate activities that make you breathe somewhat harder than	5= No I have not done this activity	differences between the IPAQ and LAPAQ I do not think it is appropriate to use MET sores	
	normal, like carrying light loads, cycling at a regular pace or doubles tennis? Do not include walking (bh103)		as cut-off points for levels of activity. Instead, I will create z-scores for the MET scores.	
	-walking, including at work and at home, to travel from place to place		zphysact	
	and other walking you might do for recreation, sport, exercise or leisure (bh105)		Z-scores created.	
	How much time did you usually spend doing this activity on one of those days:			
	-vigorous physical activities (hours: bh102, minutes: bh102a)	Range hours: 0-10		
	-moderate physical activities (hours: bh104, minutes: bh104a) -walking (hours: bh106, minutes: bh106a)	Range minutes: 0-60		

B-PROOF	LASA Physical Activity Questionnaire (LAPAQ): asks about physical		LTPA	
5 1 1.001	activity in general and the frequency and duration engaged in each		*calculated time/week spent in each domain, then sum time spent walking, cycling, and	
	activity during the past 2 weeks.		sports, and dichotomise.	
	detivity during the past 2 weeks.		If sum<=10 → LTPA=0	
	In general, do you do the following activities:	0=no	If sum>10 → LTPA=1	
	-walking outdoors (lapaq_6)	1=yes	II Suite 10 7 Eli / L	
	-cycling (lapaq_10)	1 ,63	physact	
	-gardening (lapaq_14, lapaq_15)	Also: # of months in year	*minutes per week are calculated for each domain of activity, then multiplied by its	
	-light household (lapaq_31)	Also: # of monens in year	respective MET value and summed.	
	-heavy household (lapaq_34)		physact=(walking*3.5)+(cycling*4.5)+	
	-sport 1 (lapa_20)		(heavy household*4.0)+(garden*4.0)+ (sport*6.0)	
	-sport 2 (lapaq_25)		(Heavy Household 4.0) (garden 4.0) (sport 6.0)	
	-sport 2 (lapaq_23)		physact3	
	In the past two weeks, did you do:	0=no	If (physact)<40 → physact3=0	
	-walking outdoors (lapaq_7)	1=yes	If physact>=40 & physact<600 → physact3=1	
	-cycling (lapaq_11)	1-yes	If physact>=40 & physact3=1 If physact>=600 → physact3=2	
	-gardening (lapaq_16)		ii pilysact>=000 / pilysacts=2	
	-sport 1 (LAPAQ_21)		zphysact	
	-sport 2 (LAPA_26)		Z-scores created.	
	-sport 2 (LAPA_20)		Z-scores created.	
	In the past two weeks, how often did you:	# of times/days, range		
	-walking outdoors (LAPAQ_8)	in or annes, anye, range		
	-cycling (LAPAQ_12)			
	-gardening (LAPAQ_17)			
	-light household (LAPAQ_32)			
	-heavy household (LAPAQ_35)			
	-sport 1 (LAPAQ_23)			
	-sport 2 (LAPAQ_28)			
	Special (= mind_es)			
	How much time did you spent doing this activity:	Time in minutes, range		
	-walking outdoors (lapaq_9)	, ,		
	-cycling (lapaq_13)			
	-gardening (lapaq_18)			
	-light household (lapaq_33)			
	-heavy household (lapaq_36)			
	-sport 1 (lapaq_24)			
	-sport 2 (lapaq_29)			
	-sport z (lapaq_z9)			

Dottordore	In EDCO E the LACA Develop Activity Overtion noise was used to	1	LTDA	
Rotterdam	In ERGO-5 the LASA Physical Activity Questionnaire was used to		**************************************	
Study	measure total PA, walking, cycling, domestic work, sports, gardening.		*calculated time/week spent in each domain, then sum time spent walking, cycling, and	
			sports, and dichotomise.	
	In general, do you do the following activities:	0	If sum<=10 → LTPA=0	
	-walking outdoors (e5_15995)	0=no	If sum>10 → LTPA=1	
	-cycling (e5_16000)	1=yes	. .	
	-gardening (e5_16005, e5_16006)	8=default	physact	
	-light household (e5_16091)	9=missing	*minutes per week are calculated for each domain of activity, then multiplied by its	
	-heavy household (e5_16095)		respective MET value and summed.	
	-sport 1 (e5_16012 – e5_16085)		physact=(walking*3.5)+(cycling*4.5)+	
	-sport 2 (e5_16086 - e5_16090)		(heavy household*4.0)+(garden*4.0)+ (sport*6.0)	
	In the past two weeks, did you do:		physact3	
	-walking outdoors (e5_15996)	0=no	If (physact)<40 → physact3=0	
	-cycling (e5_16001)	1=yes	If physact>=40 & physact<600 → physact3=1	
	-gardening (e5_16007)	8=default	If physact>=600 → physact3=2	
	-sport 1 (e5_16012 – e5_16085)	9=missing		
	-sport 2 (e5_16086 - e5_16090)		zphysact	
			Z-scores created.	
	In the past two weeks, how often did you:			
	-walking outdoors (e5_15997)	88=default		
	-cycling (e5_16002)	99=missing		
	-gardening (e5_16008)			
	-light household (e5_16092)			
	-heavy household (e5_16096)			
	-sport 1 (e5_16012 – e5_16085)			
	-sport 2 (e5_16086 - e5_16090)			
	3port 2 (c3_10000			
	How much time did you spent doing this activity:			
	-walking outdoors (e5_15998, e5_15999)	88=default		
	-cycling (e5_16003, e5_16004)	99=missing		
		33-111133111g		
	-gardening (e5_16009, e5_16010)			
	-light household (e5_16093, e5_16094)			
	-heavy household (e5_16097)			
	-sport 1 (e5_16012 – e5_16085)			
	-sport 2 (e5_16086 - e5_16090)			
Pulse rate				
LASA	LASA C	-2/-1 = missing	Wave C	Variable name:
	Pulse rate sitting (arm) (cmvar802)		Use as is.	pulse
	Pulse rate lying (arm) (cmvar805)		If (cmvar802>0) pulse = cmvar802	ľ
	Pulse rate standing (arm) (cmvar808)		7,8-2	Variable label:
			Wave 3B	Pulse rate (beats/min)
	LASA 3B		Use as is.	
	Pretest 1: Pulse rate sitting (arm) (BMARMPS01)		If (BMARMPS01>0) pulse = BMARMPS01	In case of multiple measurements, the first
	Pretest 2: Pulse rate sitting (arm) (BMARMPS02)		III (DIVINITIALI 20120) PRISC - DIVINITIALE 201	measurement was taken. It is unclear from
	Pulse rate 1 sitting (arm) (BMARMPS1)			which position pulse rate was measured in ULM
				and B-Proof. Nonetheless, pulse rate is typically
	Pulse rate 2 sitting (arm) (BMARMPS2)			measured from sitting position.
				measured from sitting position.

ActiFE Ulm	pulse (beats/min) [1. measurement] (pulse_1_BL) pulse (beats/min) [2. measurement] (pulse_2_BL) pulse (beats/min) [3. measurement] (pulse_3_BL)		Use as is. pulse = pulse_1_BL	
TILDA	No data available.		Not harmonized.	
B-PROOF	Heart rate measured with datascoop during vascular measurement (beats / min) (HR_datascoop)		Use as is. pulse = HR_datascoop	
Rotterdam Study	Heart rate 1 in sitting position (in beats/min) (e5_15643) Heart rate 2 in sitting position (in beats/min) (e5_15644)		Use as is. If not missing (e5_15643) pulse = e5_15643	
Quality of lif	fe			<u>'</u>
LASA	In the self-administered LASA questionnaire, an abbreviated version of the GHPQ is included (General Health Perceptions Questionnaire). This version consists of eight questions, four about current health perception, and four about the expectation of future health: In the future I will probably be sick a lot (QHEALTH1) I don't feel well (QHEALTH2) In the future I expect to be healthier than other people I know (QHEALTH3) I am just as healthy as other people I know (QHEALTH4) In the future, I think my health will be worse than now (QHEALTH5) My health is excellent (QHEALTH6) I expect to live a very healthy life (QHEALTH7) I don't feel well the past couple of days (QHEALTH8) LASA 3B: Besides GHPQ, also includes EuroQol (BQEQ5D1 BQEQ5D5 & BQEQVAS) And: Euroquol TTO-method UK or NL index. (bqeqixuk, bqeqixnl) Also includes SF-12 Health Survey (BQQULI01 BQQULI012, BQQULIPS, BQQULIMS, BQQULISF, BPCS12, BMCS12) Physical Component score (SF-12) (BPCS12) → according to official manual (American) Mental Component score (SF-12) (BMCS12) → according to official manual (American)	-1= no answer 1= strongly disagree 2= disagree 3=no agreement/disagreement 4= agree 5= strongly agree Range 1-3: Mobility Self-care Daily activities Pain or other complaints Mood Score your health (0-100) -2=no valid score 1=perfect health status Range, -1=no scale (mv) Range, -1=no scale (mv)	Euroqol If bqeqixnl>0 → euroqol= bqeqixnl MCS If BMCS12>0 → MCS=BMCS12 PCS If BPCS12>0 → MCS=BPCS12	Variable names: 1. euroqol 2. MCS 3. PCS Variable label: 1. Euroqol summary score 2. SF12 - Mental Component Score 3. SF12 - Physical Component Score LASA C only includes the GHPQ and no Euroqol or SF-12, so is not harmonized. TILDA only uses CASP-19. GHPQ and CASP-19 are clearly different measures than SF-12 and Euroqol; GHPQ measures general perception on current and future health, and CASP-19 measures a fuller range of QoL (not only health-related QoL, also control, autonomy, pleasure, self-realization). Both are therefore not comparable with SF-12 and Euroqol. For the scoring of the EQ-5D instrument, the Dutch TTO-method by Lamers et al. (2006) was used. Specifically, we used the regression coefficients of the 'N3', gives additional weight to having at least one EQ-5D dimension at the worst level. Out of the models in Lamers' paper, the N3 model had the best predictive performance.
ActiFE Ulm	SF-12 questionnaire (SF12_Q1_BL SF12_Q12_BL)		Euroqol Not harmonized. MCS & PCS Harmonized using LASA's syntax.	

TILDA	CASP-19 questionnaire	Range 0-57	Not harmonized.	
B-PROOF	Short form 12 health survey (SF-12) is used (SF12_1SF12_12)	nunge o or	Eurogol	
Binooi	310 (10 m 12 mediti 34 ve) (31 12 j i3 43e4 (31 12 1 m 31 12 12 j		Harmonized using LASA's syntax.	
	Also, the EuroQol (EQ-5D) is used (Euroqol_1Euroqol_5 &	Range 1-3:		
	Euroqol_scale)	Mobility	MCS & PCS	
		Self-care	Harmonized using LASA's syntax.	
		Daily activities		
		Pain or other complaints		
		Mood		
		Score your health (0-100)		
			<u> </u>	
Rotterdam	EuroQoL questionnaire (e5_EQOL1, e5_EQOL2, e5_EQOL3, e5_EQOL4,		Euroqol	
	e5_EQOL5)	Mobility	Harmonized using LASA's syntax.	
		Self-care	MCS & PCS	
		Daily activities	Not harmonized.	
		Pain or other complaints Mood	Not narmonized.	
		Mood		
		1=I have no problems with walking		
		2=I have some problems with		
		walking		
		3=I'm immobile (bedlegerig)		
		7=no answer		
		9=missing		
		777=don't know		
	Other 6 th item on QOL: e5_EQOL6, Range 0-100	888=not applicable		
		999=missing		
Reaction tim	e			
LASA	No data available		Not harmonized.	Data not harmonized as there are fewer than 3
ActiFE Ulm	No data available			studies with relevant data.
TILDA	Choice reaction time task: participants were asked to press a NO	Range		
	button if 'no' appeared and a YES button if 'yes' appeared on the			
	screen. The mean response time was taken. (wave 1, 3: CRTcog)			
B-PROOF	No data available			
Rotterdam	No data available			
Study				
		= 0.000 - 70.000		
		99.999 = missing		
		88.888 = not applicable/default		
L		l	1	

Self-rated he	Self-rated health					
LASA ActiFE Ulm	Self-perceived health (bsubhea1, csubhea1) SF-12 item: evaluation of your health in general? (SF12_Q1_BL)	-1=missing 1=excellent 2=good 3=fair 4=sometimes good/ sometimes bad 5=poor 1=excellent 2=very good 3=good 4=fair	SRH if (bsubhea1>0) SRH= bsubhea1 SRHdich If bsubhea1=4 or bsubhea1=5 → SRHdich=1 If bsubhea1=1 or bsubhea1=2 or bsubhea1=3 → SRHdich=0 SRH Use as is. SRH = (SF12_Q1_BL)	Variable name: 1.SRH 2.SRHdich Variable label: 1.Self-rated health (1: excellent; 5: poor) 2.Self-rated health (good versus poor; 0 = good health, 1 = poor health) Value labels		
	self-assessed health (from SF_12) (health_BL)	5=poor 0=good 1=bad	SRHdich If SF12_Q1_BL =4 or SF12_Q1_BL =5 → SRHdich=1 If SF12_Q1_BL =1 or SF12_Q1_BL =2 or SF12_Q1_BL =3 → SRHdich=0	The labelling of the categories differs in LASA from the other cohorts. The distribution also differs. I have left the categories as is for each cohort, but also choose to dichotomise as the lowest 2 (i.e., worst possible ratings) vs. the		
TILDA	Would you say your health is (ph001)	1=excellent 2=very good 3=good 4=fair 5=poor	SRH SRH=ph001 SRHdich If ph001=4 or ph001=5 → SRHdich=1 If ph001=1 or ph001=2 or ph001=3 → SRHdich=0	highest 3 categories (i.e., best possible rating). Note that for ERGO, the VAS of the Euroqol was used. To my knowledge, there is no paper that describes converting the VAS-scale to a five-point or two-point scale for self-rated health.		
B-PROOF	SF-12 item: evaluation of your health in general? (SF12_1) Euroqol item: score your health. (Euroqol_scale)	1=excellent 2=very good 3=good 4=fair 5=poor	SRH SRH=SF12_1 SRHdich If SF12_1=4 or SF12_1=5 → SRHdich=1 If SF12_1=1 or SF12_1=2 or SF12_1=3 → SRHdich=0	Therefore, I decided to not harmonize self-rated health for the Rotterdam Study.		
Rotterdam Study	How do you view your own health on this moment, compared to your peers? (e5_EIGEZLFT) The final question of euroqol asks partcipants to rate their health on a 0-100 scale (e5_EQOL6)	1 = better 2 = the same 3 = worse 7 = don't know	Not harmonized.			
Sex						
LASA	Sex	1=male 2=female	If $sex=1 \rightarrow sex=0$ If $sex=2 \rightarrow sex=1$	Variable name: sex		
ActiFE Ulm	sex	1=male 2=female	If $sex=1 \rightarrow sex=0$ If $sex=2 \rightarrow sex=1$	Variable label:		
TILDA	sex	1=male 2=female	If $sex=1 \rightarrow sex=0$ If $sex=2 \rightarrow sex=1$	0=male 1=female		
B-PROOF	gender	1=men 2=women	If gender=1 → sex=0 If gender=2 → sex=1			

Rotterdam	sex	0=male	Use as is.	
Study		1=female		
Sleep				
LASA	What time do you go to sleep (only 3B) -hour of the day (bqsleeph) -minute (bqsleepm) Total minutes of sleep in 24 hours (bqsleep1, cqsleep1) Do you have problems with falling asleep (bqsleep2, cqsleep2) Do you have problems with continuing sleep (bqsleep3, cqsleep3) Do you have problems with waking too early? (bqsleep4, cqsleep4) Only 3B: How would you rate your sleep quality in the past month (bqsleep5) Derived scale based on 3 categorical questions about sleep problems (bqsleep, cqsleep)	Range 1-24 Range 0-46 Range 180-900 1=almost never 2=some of the time 3=often 4=most of the time 1=very good 2=somewhat good 3=somewhat bad 4=very bad	sleep, wave C: If cqsleep2=1 and cqsleep4=1 → sleepp=0 If (cqsleep2>=2 and cqsleep2<=4) or (cqsleep2>=2 and cqsleep2<=4) → sleepp=1 sleep, wave 3B: If bqsleep2=1 and bqsleep4=1 → sleepp=0 If (bqsleep2>=2 and bqsleep2<=4) or (bqsleep2>=2 and bqsleep2<=4) → sleepp=1	Variable name: sleepp Variable label: Sleeping problems (Waking up too early and/or having difficulty falling asleep) Value labels: 0=no 1=yes
ActiFE Ulm	No data available.	Range 3-12 3=no problems 12=many problems	Not harmonized.	
TILDA	How likely are you to doze off or fall asleep during the day? (bh201)	1=would never doze 2=slight chance of dozing 3=moderate chance of dozing 4=high chance of dozing	If bh203=3 and bh202=3 → sleepp=0 If bh203<=2 or bh202<=2 → sleepp=1	
	How often do you have trouble falling asleep? (bh202)	1=most of the time 2=sometimes 3=rarely or never		
	How often do you have trouble with waking up too early and not being able to fall asleep (bh203)	1=most of the time 2=sometimes 3=rarely or never		
B-PROOF	No data available.		Not harmonized.	_

Rotterdam Study	Subjective sleep quality was assessed with the Pittsburgh Sleep Quality Index (PSQI). The PSQI is a self-rating questionnaire which measures sleep quality and disturbance retrospectively over a 1-month period, resulting in a global score between 0 and 21, with higher scores indicating poorer sleep quality.		If e5_YIPSQ5B=0 & e5_YIPSQ5A=0 → sleepp=0 If (e5_YIPSQ5B=1 or e5_YIPSQ5B=2 or e5_YIPSQ5B=3) or (e5_YIPSQ5A=1 or e5_YIPSQ5A=2 or e5_YIPSQ5A=3) → sleepp=1	
	During the past month; At what time did you go to bed most of the time? (e5_EIPSQ1) How long did it take you to fall asleep most of the time? (in min) (e5_EIPSQ2) At what time did you wake up? (e5_EIPSQ2A) At what time did you get up most of the time? (e5_EIPSQ3)	Time		
	How long do you usually sleep in the night (in hours)? (e5_YIPSQ4) How long do you usually sleep on the day (purposefully nap)? (e5_YIPSQ4A)	Hours		
	In the past year, have you been to your general practitioner for sleeping problems? (e5_YIPSQ5)	0 = no 1 = yes 7 = don't know		
	During the past month, how often did you sleep poorly because: you couldn't fall asleep within 30 minutes (e5_YIPSQ5A) you woke up in the middle of the night? e5_YIPSQ5B) you had to go to the bathroom (e5_YIPSQ5C) you had difficulty breathing (e5_YIPSQ5D) you were coughing or snoring (e5_YIPSQ5E) you were too cold (e5_YIPSQ5F) you were too hot (e5_YIPSQ5G) you had bad dreams (e5_YIPSQ5H) you were in pain (e5_YIPSQ5I) Were there other reasons you slept poorly? (e5_YIPSQ5J)	0 = not once during the past month 1 = < once a week 2 = 1 or 2 times a week 3 = > 2 times a week 7 = don't know 9 = no answer		
	What reasons? (e5_YIPSQ5JX) How would you rate your sleep over the past month? (e5_YIPSQ6)	String 0 = very good 1 = relatively good 2 = relatively bad 3 = very bad 7 = don't know 9 = no answer		
Smoking				
LASA	Do you smoke? (BMVAR31, CMVAR31)	1=no	smoke, wave C	Variable name:
	Did you smoke before? (BMVAR32, CMVAR32)	2=yes	If CMVAR31=1 and CMVAR32=1 → smoke=0 If CMVAR31=1 and CMVAR32=2 → smoke=1 If CMVAR31=2 → smoke=2	smoke smokeyn Variable label:
			smoke, wave 3B	variable label.

ActiFE Ulm	Smoking (smoker_BL)	0=never, 1=former, 2=current	smokeyn, wave C If CMVAR31=1 → smokeyn=0 If CMVAR31=2 → smokeyn=1 smokeyn, wave 3B If BMVAR31=1 → smokeyn=0	Smoking status (never, ex-smoker, current smoker) Do you smoke? (yes/no) Value labels: 0=never smoked 1=ex-smoker 2=current smoker Value labels: 0=no 1=yes
			smokeyn if smoker_BL=0 or smoker_BL=1 → smokeyn=0 if smoker_BL=2→ smokeyn=1	
TILDA	Have you ever smoked cigarettes, cigars, cigarillos or pipe daily for a period of at least 1 year? (bh001) Do you smoke at the present time? (bh002)	1=yes 5=no 1=yes	smoke If $bh001=5 \rightarrow smoke=0$ If $bh001=1 \& bh002=5 \rightarrow smoke=1$ If $bh002=1 \rightarrow smoke=2$	
	25 years and are the present time. (Milosz)	5=no, I have stopped	smokeyn if bh001=5 or bh002=5 → smokeyn=0 if bh002=1 → smokeyn=1	
B-PROOF	Do you smoke cigarettes, cigars, other tabacco? (smoking1)	0=have never smoked 1=smoke now 2=have smoked in the past	smoke If smoking1=0 → smoke=0 If smoking1=1 → smoke=2 If smoking1=2 → smoke=1	
	Do you smoke cigarettes? (smoking_cigarettes)	0=no 1=yes	smokeyn If smoking1=0 or smoking1=2 → smokeyn=0	
	Number of cigarettes a day? (nr_cigarettes)	# of cigarettes	If smoking1=1 → smokeyn=1	
	Do you smoke cigars? (smoking_cigars)	0=no 1=yes		
	Number of cigars? (nr_cigars)	# of cigars		

Dott and - · · ·	De veu smelse signature () (=F FUEC)	0 - no		
	Do you smoke cigarettes? (e5_EILF6)	0 = no	smoke	
Study		1 = yes	If e5_EILF6=0 and e5_EILFE=0 → smoke=0	
		7 = don't know	If e5_EILF6=0 and e5_EILFE=1 → smoke=1	
		9 = no answer	If e5_EILF6=1 → smoke=2	
	Have you smoked cigarettes in the past? (e5_EILFE)	0 = no	smokeyn	
	There yes smelles of all the pasts (ob_all a)	1 = yes	If e5_EILF6=0 → smokeyn=0	
		7 = don't know	If e5_EILF6=1 → smokeyn=1	
			II e5_EILF0=1 7 SITIOKEYII=1	
		8 = n.a.		
		9 = no answer		
	Do you smoke cigars? (If not, ask): Have you never smoked cigars in	0 = no, never		
	the past or have you quit smoking cigars? (e5_EILF4)	1 = no, small cigars in past		
		2 = no, large cigars in past		
		3 = no, small and large cigars in		
		past		
		⁻		
		4 = yes, small cigars		
		5 = yes, large cigars		
		6 = yes, small and large cigars		
		7 = don't know		
		9 = no answer		
		0 = No, never		
		1 = no, but in the past I did		
		I		
	smoked a pipe in the past or have you quit smoking pipe? (e5_EILF5)	2 = yes		
		7 = don't know		
		9 = no answer		
Speed of pro	cessing			
LASA	Coding Task: adjusted version of the Alphabet Coding Task-15	Range 9.33-47.67	Zprocspeed	Variable names:
2,0,1	(Savage, 1984), a letter substitution task described by Piccinin and	1,,	meanproc = -1 * mean (BMVAR47, BMVAR48, BMVAR49 // CMVAR47, CMVAR48,	Zprocspeed
				zprocspeed
	Rabbitt (1999). In this task two rows of characters are shown, each		CMVAR49)	
	character in the upper row belongs to a character in the bottom row.			Variable label:
	The test contains also two rows, one of them containing characters		Create z-scores of meanproc for both waves individually	Z-score processing speed
	and the bottom row is empty. The respondent has to complete as			
	many character combinations as possible, by naming the			Note: there are three cohorts with a coding task
	corresponding character. This was done in three cycles of one minute.			LASA C, 3B and ERGO. These are harmonized.
	The test measures speed of processing/reaction time and working			Section 1.155 and 1.155 and 1.165 an
				The coding/letter digit tasks /LASAC/2D_EDCO\
	memory. The mean score for the three trials is used in the analyses.			The coding/letter-digit tasks (LASAC/3B, ERGO)
	(BMVAR47, BMVAR48, BMVAR49; CMVAR47, CMVAR48, CMVAR49)			is most comparable with the Colour trail 2 test
				(TILDA, B-PROOF), but not a great match. We
ActiFE Ulm	No data available.		Not harmonized.	decided to make a Z-score combining de
				coding/letter-digit task with colour-trail task.
			I	

TILDA	Colour trail 2 test, participants were asked to connect numbers from 1 to 23 in alternating colours in consecutive order as quickly as possible. This test measures visual speed of processing, executive function. (wave 1, 3: COGtrail1time COGtrail2time) Choice reaction time task: participants were asked to press NO if 'no' appeared and YES if 'yes appeared on the screen. The mean cognitive response time was taken. This test measures speed of processing/reaction time. (wave 1, 3: CRTmeancog) Sustained attention to response task (SART): participants were seated in front of a screen that repeatedly displayed the digits 1 to 9 during 4 minutes. Participants were asked to press a key as quickly as possible every time a digit appeared, except when the number 3 appeared. This test measures processing speed and inhibition. (wave 1, 3: COGsartRawMean, COGsartCookedMean)		Zprocspeed Meanproc = mean(COGtrail1time, COGtrail2time) Create z-scores for meanproc	Scores in LASA were inverted by multiplying them by -1, so that scores are comparable across cohorts.age
B-PROOF	Trail Making Test (TMT) item A en B (Time_sec_TMT_A, TMT_A_corrections, Time_sec_TMT_B, TMT_B_corrections) Stroop colour test (card 1 (words), 2 (colours), 3 (words & colours) (Time_sec_Stroop_Card1, Stroop_Card1_corrections, Time_sec_Stroop_Card2, Stroop_Card2_corrections, Time_sec_Stroop_Card3, Stroop_Card3_corrections)	Time in seconds spent on test (max. 300 s) and # of corrections made by interviewer Time in seconds spent on test (max. 300 s) and # of corrections made by interviewer	Zprocspeed Meanproc = mean(Time_sec_TMT_A, Time_sec_TMT_B) Create z-scores for meanproc	
Rotterdam Study	Letter-digit test: Number of attempts Letter-Digit test (e5_2743) Correct answers Letter-Digit test (e5_2744) Stroop test (e5_16505, e5_2720 e5_2727)	= 0 - 80 99 = missing 88 = not admin. – default = 0 - 80 99 = missing 88 = not admin. – default	Zprocspeed Create z scores for sum of stroop test, based on total time needed for stroop test.	
Stroke				
LASA	self report: CVA (b3_srCVA/c_srCVA) gp diagnosis: CVA (b3_gpCVA/c_gpCVA)	-1 = missing 0 = no 1 = yes 2 = possible	C: If $c_srCVA = 0 \rightarrow stroke = 0$ If $c_srCVA = 1 \rightarrow stroke = 1$	Variable name: stroke Variable label: History of stroke
	Algorithm used for determining stroke (see LASA website) (c_alg_CVA / b3_CVA)	-1 = missing 0 = no 1 = definitive 2 = possible 3 = contradictory		Value label: 0=no 1=yes
ActiFE Ulm	stroke until baseline (C_stroke_BL)	0=no 1=yes	Use as is. C_stroke_BL=stroke	
TILDA	Has a doctor ever told you that you have any of the following conditions: stroke (ph201_06)	0=no 1=yes	ph201_06=stroke	

B-PROOF	Did participant ever had a stroke or TIA? (TIA) Note that this variable also includes TIA.	0=no	Use as is. TIA=stroke	
Dottondono		1=yes		
Rotterdam Study	Heeft u na het vorige ERGO interview een beroerte, hersenbloeding, herseninfarct of CVA gehad? (e5_EICVA01) Heeft U ooit een beroerte of hersenbloeding doorgemaakt die door een arts werd vastgesteld? (ep_pimc15) Stroke after Ergo1? (e2_b1cva) Heeft hij/zij ooit een beroerte gehad (e3_3832) Heeft hij/zij ooit een beroerte gehad (ep_3832) Heeft hij/zij ooit een beroerte gehad (e4_3832)	0 = no 1 = yes 7 = don't know 9 = no answer	if e5_EICVA01 = 0 or ep_pimc15 = 0 or e2_b1cva = 0 or e3_3832 = 0 or ep_3832 = 0 or e4_3832 = 0 → stroke = 0. if e5_EICVA01 = 1 or ep_pimc15 = 1 or e2_b1cva = 1 or e3_3832 = 1 or ep_3832 = 1 or e4_3832 = 1 → stroke = 1.	
	From Medical history questionnaire: After the previous ERGO interview, have you had a stroke, cerebral hemorrhage, cerebral infarction or CVA? (e5_EICVA01)			
Urbanisation				
LASA	Level of urbanisation expressed as mean number of addresses per squared kilometre within a 1km radius (Burb, Curb) Data are provided by Statistics Netherlands.	1= not (<500) 2=little (500-1000) 3=somewhat (1000-1500) 4=highly (1500-2500)	If Burb>=3 & Burb<=5 → urban=0 If Burb=1 or burb=2 → urban=1	Variable name: urban Variable label:
ActiFE Ulm	http://www.lasa-vu.nl/themes/demographics/urban-rural.html	5=very highly (>=2500)	Not harmonized	Level of urbanisation
	No data available.		Not harmonized.	Value label: 0=urban
TILDA	Is the dwelling located: (local3)	1=Dublin city or county 2=a city or town in the Republic of Ireland other than Dublin 3=In a rural part of the Republic of Ireland	If local3=1 local3=2 → urban=0 If local3=3 → urban=1	1=rural/remote
B-PROOF	No data available		Not harmonized.	
Rotterdam Study	All urban areas		Urban=0	
Urinary inco	ntinence			
LASA	Do you have incontinence? (BINCON1, CINCON1)	3B: 1=no 2=yes C: 0=no, never	C: If CINCON1=0 → urine=0 or If CINCON1=1 → urine=0 If (CINCON1=2 or CINCON1=3) → urine=1	Variable name urine Variable label: Presence of urinary incontinence
		1=no, but at wave B yes 2=yes, but at wave B no 3=yes, and at wave B yes	3B: If BINCON1= 1 → urine=0 If BINCON1=2 → urine=1	Categories: 0=no 1=yes
	How often do you have loss of urine? (BINCON5, CINCON5)	1=≤2 per month 2=3-4 times per month 3=a few times per week 4=daily		
ActiFE Ulm	urinary incontinence (incontinence_BL)	0=no 1=yes	Used as is. incontinence_BL=urine	

TILDA	PH601: During the last 12 months, have you lost any amount of urine	1=yes	If ph601=1→ urine=1	
HEDA	beyond your control? (ph601)	5=no	If ph601=5 → urine=0	
	PH602: Did this happen more than once during a 1 month period?	3-110	III phood=3 7 drille=0	
	(ph602)			
B-PROOF	No data available		Not harmonized.	-
Rotterdam	Kunt u uw plas goed ophouden (e3_3613)	0 = ja	Not harmonized as there is no data from the ergo-5 wave.	1
Study	Kunt u uw plas goed ophouden (ep_3613)	1 = soms nat	0	
,	Kunt u uw plas goed ophouden (e4_3613)	2 = vaak nat		
	Kunt u uw plas goed ophouden (ej_3613)	8 = geen antwoord/weet niet		
	(-)/	9 = not applicable/missing		
Visual probl	ems			
LASA	LASA C & 3B: self-reported:	1=no	VisionNear	Variable name:
	Usually wears glasses or contact lenses (bsens01, csense01)	2=yes	If bsens01=1 & bsens03=1 → VisionNear=0	1.Visionnear
			If bsens01=2 & bsens04=1 → VisionNear=0	2.Visionfar
		1=yes, without difficulty	If bsens01=1 & bsens03>1 → VisionNear=1	3.Visionsub
	Subjective vision: do you see well enough? (bsens02, csense02)	2=yes, with some difficulty	If bsens01=2 & bsens04>1 → VisionNear=1	
	Can you read small print in a paper without glasses etc? (bsens03,	3=yes, with much difficulty	If bsens01=2 & bsens04=missing & bsens03=1 → VisionNear=0	Variable label:
	csense03)	4=no I cannot	If bsens01=2 & bsens04=missing & bsens03>1 → VisionNear=1	1.Do you see well up close?
	Can you read small print in a paper with glasses etc? (bsens04,			2.Do you see well from a distance?
	csense04)		VisionFar	3.Do you rate your vision as bad? (subjective)
	Can you recognize a face at 4 meters distance without glasses?		If bsens01=1 & bsens05=1 → Visionfar=0	
	(bsens05, csense05)		If bsens01=2 & bsens06=1 → Visionfar=0	Value labels
	Can you recognize a face at 4 meters distance with glasses? (bsens06,		If bsens01=1 & bsens05>1 → Visionfar=1	0=no
	csense06)		If bsens01=2 & bsens06>1 → Visionfar=1	1=yes
			If bsens01=2 & bsens06=missing & bsens05=1 → Visionfar=0	
	Acuity was measured in 3B		If bsens01=2 & bsens06=missing & bsens05>1 → Visionfar=1	
			Visionsub	
			If bsense02= 1 or bsense02= 2 → Visionsub=0	
			If bsense02= 3 or bsense02= 4 → Visionsub=1	
			The Sense of Sense of Asian Sense of	
				_
ActiFE Ulm	visual sense (see_BL)	0=good	Visionsub	
		1=bad	Use as is.	
			see_BL = Visionsub	

TILDA	Do you usually wear glasses or contact lenses? (ph101)	1=yes	VisionNear	
		5=no	If ph104<=3 → VisionNear=0	
	Do you usually wear ordinary glasses, bifocals or contact lenses?	1=glasses	If ph104>=4 → VisionNear=1	
	(ph101a)	2=bifocals	VisionFar	
	(1-1-1-1)	3=contact lenses	If ph103<=3 \rightarrow VisionFar=0	
			If ph103>=4 → VisionFar=1	
	Is your eyesight (using glasses or contact lens if you use them)	1=excellent		
	(ph102)	2=very good	Visionsub	
	How good is your eyesight for seeing things at a distance, like	3=good	If ph102 >=1 AND ph102<=3 → Visionsub=0	
	recognising a friend across the street (using glasses or contact lens if	4=fair	If ph102 >=4 → Visionsub=1	
	you use them)? Would you say it is (ph103)	5=poor		
	How good is your eyesight for seeing things up close, like reading	6=registered or legally blind		
	ordinary newspaper print (using glasses or contact lens if you use them)? Would you say it is (ph104)			
	them; would you say it is (ph104)			
B-PROOF	No data available		Not harmonized.	
Rotterdam	Visual acuity (measured vision)	0-1	Not harmonized.	
Study	From 15 February 2010 onwards, new variables for visual acuity are in	8.88/9.99 = missing		
	use: v16816 and v16817. The previous variables for visual acuity v192 and v194 are not active anymore from this date.			
	and V194 are not active anymore from this date.			
	Visual actuiy was measured using ETDRS charts.			
	, ,			
Vitamin B12	level (blood)			
LASA	LASA C (cmvitb12)	Range in pMOL/L	Use as is.	Variable name:
	LASA 3B: no data?	-2= no data, n.a.	vitb12= b/cmvitb12	vitb12
		-1= no valid data		
ActiFE Ulm	No data available.		Not harmonized.	Variable label:
				Vitamin B12 (pmol/l)
TILDA	No data available.		Not harmonized.	
B-PROOF	VitaminB12	Range pmol/l	Use as is.	
			vitb12= VitaminB12	
	No data available		Not harmonized.	
Vitamin D lev	<u> </u>			
LASA	b/cmvitd25	Nmol/l	Use as is.	Variable name:
			vitd= b/cmvitd25	vitd
ActiFE Ulm	Vitamin D (ng/ml) (LAB_Vitamin_D_BL)	Range in ng/ml:	Use as is.	Variable label:
		2.0 – 67/7	vitd= 2.5 x LAB_Vitamin_D_BL	Serum 25-hydroxy vitamin D (nmol/l)
TILDA	No data available.		Not harmonized.	- Control of the cont
B-PROOF	vitaminD_25OH	Range nmol/l	Use as is.	
		-3= will be repeated	vitd= vitaminD_25OH	
		-2= below 4 nmol/l		
		-1= no determination		
Rotterdam	No data available		Not harmonized.	

Walking aid	used during test			
LASA	Only data available for 3B:	1=no	walkaid	Variable name:
	Walking aid or wheelchair? (BMVAR709)	2=yes	If BWALK06=6 → walkaid=0	walkaid
			If BWALK06>=1 and BWALK06<=3 walkaid=1	walkingaidgen
	If yes:	0=not mentioned		
	-cane (BMV7091)	1=mentioned	If CWALK06=4 → walkaid=0	Variable label:
	-walker (BMV7092)		If CWALK06=1 or CWALK06=2 walkaid=1	Use of walking aid during walking test
	-rollator (BMV7093)			Use of walking aid in general
	-wheelchair (BMV7094)		walkingaidgen	
	-other (BMV7095)		If BMVAR709 = 1 → walkingaidgen = 0	Value label:
			If BMVAR709 = 2 → walkingaidgen = 1	walkaid:
	Both LASA C and B:			0=no
	Walking aids during walking test (C/BWALK06)	<u>3B:</u>		1=yes
		1=walking bar		
		2=stick		walkingaidgen:
		3=rollator		0=no
		4=leaning on objects/interviewer		1=yes
		5=other		
		6=none		Note: includes walking crunches, sticks, frames,
				bars, rollator, and wheelchair. Leaning on
		<u>C:</u>		objects or on interviewer does not count as
		1=walking bar		walking aid.
		2=stick		Nets that well in said son is uniquing for most
		3=other		Note that walkingaidgen is missing for most
Λ at: ΓΓ 1 1 lma	Walking aid (walking aid DI)	4=none	walkaid	participants in TILDA.
ActiFE Ulm	Walking aid (walking_aid_BL)	1 = none 2 = walking aid	If SPPB_walkaid_BL = 0 -> walkaid = 0	
		3 = crutches	If SPPB_walkaid_BL = 1 → walkaid = 1	
		4 = rollator	II SPPD_Wdikdiu_bL - 1 -9 Wdikdiu - 1	
		4 - 10118101	walkingaidgen	
	walking aid [SPPB] (SPPB_walkaid_BL)	0=no	If walking_aid_BL = 1 → walkingaidgen = 0	
	waiking aid [5i i b] (5i i b_waikaid_bt)	1=yes	If walking_aid_BL >= 2 AND walking_aid_BL <= 4 → walkingaidgen = 1	
		1-903	Walking_did_be > = 2 AND Walking_did_be \ \- \ \ \ Walkingdidge - 1	
	I		I	1

TILDA	Do you ever use equipment or devices such as a walking stick or frame	1=yes	walkaid	
	when crossing a room? (fl006)	5=no	walkaid= GRT_Used_walking_aid	
	Which equipment is that?	0=no	walkingaidgen	
	-walking stick (fl007_01) (public data)	1=yes	If $f 006 = 5 \rightarrow walkingaidgen = 0$	
	-Walking frame (fl007_02) (public data)	'	If fl006 = 1 → walkingaidgen = 1	
	Not in public data:			
	-Crutches (fl007_03)			
	-railing (fl007_04)			
	-orthopaedic shoes (fl007_05)			
	-brace (leg or back) (fl007_06)			
	-limb prosthesis (fl007_07)			
	-oxygen/respirator (fl007_08)			
	-Furniture or walls (fl007_09)			
	-wheelchair or cart (fl007_10)			
	-other (fl007_11)			
	Suid: (1.667_22)			
	During gait assessment: use of aid? (GRT_Used_walking_aid)	0=no		
		1=yes		
		- ,55		
B-PROOF	Do you use a walking aid? (walking_aid)	0=no	walkaid	
		1=yes	If pp6>=1 and pp6<=3 → walkaid=1	
			If pp6=4 → walkaid=0	
	Type of first, second, third, fourth walking aid? (walking_aid_type1,	1=stick		
	walking_aid_type2, walking_aid_type3, walking_aid_type4)	2=walking frame	walkingaidgen	
		3=rollator	If walking_aid = 0 → walkingaidgen = 0	
		4=wheelchair	If walking_aid = 1 → walkingaidgen = 1	
		5=other		
	Walking aid during walking test (pp6)			
		1=walking frame		
		2=stick		
		3=other		
		4=no		

Rotterdam	Do you use any walking aids? (e5_EI3_50)	1 = none	walkaid	
Study	be you use any wanting alast (es_lis_se)	2 = walking stick	if e5_16407=5 or e5_16407=6 or e5_16407=8 → walkaid=1	
Study		3 = tripod	if e5_16407=0 or e5_16407=1 or e5_16407=2 or e5_16407=3 or e5_16407=4 or	
		4 = walking frame without wheels	e5_16407=7 → walkaid=0	
		5 = walking frame with wheels		
		6 = crutches	walkingaidgen	
		7 = wheelchair	If e5_EI3_50 = 1 \rightarrow walkingaidgen = 0	
		77 = don't know	If e5_EI3_50 >= 2 AND e5_EI3_50 <= 7 → walkingaidgen = 1	
		99 = no answer		
		33 He diswei		
		0-normal		
		0=normal		
		1=c.norm, niet in tandem pos		
	Loop capaciteit (e5_16407)	2=zond.steun,abnorm.& onregel		
		3=z.st.,wagg.& moeilkh.draai		
		4=niet zonder autonome steun		
		5=alleen mogelijk met stok		
		6=alleen emt 2 stok.of rollat		
		7=alleen met begeleiding		
		8=lopen onmogelijk (rolstoel)		
		88=not applicable/default		
		99=missing		
Waist circun				
LASA	Waist circumference (cm) in duplicate (BMED156 BMED157;	Range 0-150	If CMED156/BMED156>0 and CMED157/BMED157>0 → waist=mean(CMED156/BMED156	Variable name:
	CMED156 CMED157)		CMED157/BMED157)	waist
	· ·		If CMED156/BMED156<0 or CMED157/BMED157<0 → waist= max(CMED156/BMED156,	
			· ·	Variable label:
			CIVIED 137/ DIVIED 137/	Waist circumference (cm)
				waist circumference (cm)
ActiFE Ulm	No data available		Not harmonized.	-
ACTIFE OIIII	NO data available		Not fidiffiditized.	
TUDA	Maist singuraforage (in page) (FD) unieth	Dan 40 463	Weigh EDweigh	-
TILDA	Waist circumference (in cm) (FRwaist)	Range 49-163	Waist=FRwaist	
		N 2207 : :		
		N=2387 missing		
B-PROOF	No data available		Not harmonized.	
Rotterdam	Minimal waist circumference was measured in cm (e5_231)	Range	Waist=e5_231	
Study	, _ ,	40.00-200.00	If e5_231 > 888 → waist=missing	
,		999.99=missing		
		888.88=not appropriate-def		
		Sec. of the appropriate del		
Weight				
LASA	Measured weight in kilograms (BMED153, CMED153)		weight = BMED153, CMED153	Variable name:
ActiFE Ulm	body weight (kg) (weight_BL)		Use as is.	weight
			weight = weight_BL	
	1	ı	<u> </u>	l .

TILDA	Measured weight in kilograms (weight)	Range 45-135	Use as is.	Variable label: Weight in kg
	Note that self-reported weight is available for all waves	NB: <=45 coded as 45; 135+ coded as 135 N=2374 missing		
B-PROOF	Weight of the participant in kg (1 decimal) (Weight)		Use as is.	
Rotterdam Study	Weight (in kg) (e5_230)	= 30.0 - 160.0 999.9 = missing 888.8 = not appropriate-default	Use as is. If e5_230 > 888 → weight=missing	
Weight loss				
LASA	LASA C & 3B: In the past 6 months: (c/bmvar142)	1= weight remain stable 2= gain weight 3= loose weight Range in kg (round up when decimals 0,5)	If c/bmvar142=1 or c/bmvar142=2 → weightloss=0 If c/bmvar142=3 → weightloss=1	Variable name: weightloss Variable label: Weight loss? Value label:
	If 2 or 3; how much weight did you gain/loose? (mvar143)	decimals 0,5)		0= no
ActiFE Ulm	In the past 3 months: weight loss (weight_loss_BL)	weight loss 0=none 1=1-3kg 2=>3kg 3=unknown	If weight_loss_BL = 0 → weightloss = 0 If weight_loss_BL = 1 or 2 → weightloss = 1	1= yes Note: because of different time frames asked in the different studies, and different categories of weight loss (range or categories) we chose to create a simple weight loss (yes/no) variable.
TILDA	In the past year have you lost 10 pounds (4.5 kg) or more in weight when you weren't trying to, for example, because of illness? (ph008)	1= Yes 5= No 98= don't know 99= refused	If ph008=1 → weightloss=1 If ph008=5 → weightloss=0	Note: These questions all differ with respect to time frame and quantity of weight loss
B-PROOF	No data available		Not harmonized.	
Rotterdam Study	Gewichtsverlies gedurende de periode (e5_4355)	0= geen verandering 1= matig verlies (niet 2) 2= meer dan 5% v.gew. in 1 mnd 3= meer dan 15% v.gew 4= als 3, niet aankomen onverw.* 8= not applicable/default** 9= missing *) There are no cases in the data of e5_4355=4		
		**) There are 196 cases of e5_4355=8		
Year of data	collection			
LASA			LASA 3B: year = 2012 LASA C: year = 1995	Variable name:year
ActiFE Ulm	year of data collection (year_BL)		Use as is. year = year_BL year=2009	Unit: Year of data collection
TILDA				Range 1989-2014
B-PROOF	Date of interview (Date_interview)		year = xdate.year(Date_interview)	

Rotterdam Date of interview (e5_3493)		year = xdate.year(e5_3493)				
Study	1					
Medication use						
See Appendix 8.						

Appendix 1

	LA	SA	TIL	DA	Rotterdam	B-PROOF	ActiFE Ulm
	3B (2012)	C (1995)	w1 (2010)	w3 (2014)	ERGO-5 (2009-2013)	Baseline (2008-2011)	Baseline (2009/2010)
Arthritis	1	1	1	1	1		1
Depression			1	1			1
Diabetes	1	1	1	1	1	1	1
Heart disease	1	1	1	1		1	1
Hypertension	1	1	1	1		1	1
Stroke	1	1	1	1	1	1	1
Asthma	1	1	1	1	1		1
Bronchitis/emphysema	1	1	1	1	1		1
Osteoporosis	1	1	1	1	1		1
Cancer	1	1	1	1	1		1
Chronic fatigue syndrome Parkinson's disease			1	1	1		

Derived variable 'number of chronic conditions' includes diabetes, heart disease, lung disease and cancer (range 0-4)

Appendix 2

MET-values were based on overlap in categories between the cohorts and MET values used

	B-PROOF	LASA	ERGO	TILDA	ActiFE Ulm	harmonised
walking	3.5	3.5	3.5	3.3	3.5	
cycling	4.5	4.5	4.5		4.5	
light household	2.5	2.5	2.5		2.5	
heavy household	4.5	4.5	4.5		4.5	
gardening	4.5	4.5	4.5		4.5	
sport/exercise	4.0	4.0	4.0		4.0	
moderate leisure ¹				4.0		
vigorous leisure ²				8.0		

¹ Including activities that make you breathe somewhat harder than normal, like carrying light loads, cycling at a regular pace or doubles tennis? Do not include walking.

Note: Vigorous/heavy house and garden activities are included in the definition of physical activity, as these were counted in the responses to the IPAQ questions for moderate and vigorous activity used in TILDA.

² Including heavy lifting, digging, aerobics, fast cycling.

Appendix 3

Definitions for levels of alcohol intake are typically based on guidelines for recommended alcohol intake. These guidelines are different for the four countries.

Definitions of low risk alcohol intake are:

- Australia: maximum of 2 drinks on any day (http://www.alcohol.gov.au/internet/alcohol/publishing.nsf/Content/guide-adult)
- Netherlands: maximum of 1 drink per day, both for men and women. (https://www.gezondheidsraad.nl/sites/default/files/201524_richtlijnen_goede_voeding_2015.pdf)
- Ireland: maximum of 17 drinks for men and 11 drinks for women, spread out over the course of a week with at least 2-3 alcohol free days (http://alcoholireland.ie/alcohol-and-you/guidelines/)
- UK: maximum of 14 drinks per week spread over 3 or more days (https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/602132/Communicating_2016_CMO_guidelines_Mar_17.pdf)

I was unable to find global/international guidelines. The WHO reports on alcohol use, but does not specify a low risk level. In the Netherlands, the recommended intake was lowered to 1 per day in 2015. At the time the current data were collected (2012/13), the guidelines recommended a maximum of 2 glasses per day, which is in line with the guidelines in Australia and the UK. I therefore used that threshold to define the levels of risk as specified below and in line with the classification used in the Australian NHMRC guidelines. Researchers can decide to use alternative definitions if preferred.

Frequency of drinking alcohol	l don't drink alcohol	1 or 2 drinks	3 or 4 drinks	5 to 8 drinks	9 or more drinks	Missing
I don't drink alcohol	0					0
I rarely drink		1	1	1	1	1
Less than once a week		2	2	2	2	
1 or 2 days		2	2	2	3	
3 or 4 days		2	2	3	4	
5 or 6 days		2	3	4	4	
Every day		2	3	4	4	
Missing	0	2				

0=non-drinker 1=rarely drinks 2=low risk (≤14 per week) 3=risky (15-28 per week) 4=high risk (>28 per week)

Appendix 4

Overview of items included in each of the anxiety scales

		•	Scales		
ITEMS	Goldberg	HADS	GAD	PSF	GHQ
feeling tense, keyed up or on edge	1	1	1	1	1
worrying	1	1	1	1	
irritable	1		1		1
difficulty relaxing	1	1			1
sleeping poorly	1			1	
difficulty falling asleep	1			1	1
headaches or neck aches	1				
trembling, tingling, dizzy, sweating, diarrhoea, passing urine	1			1	
frightened		1			
restless		1	1	1	
sudden panics				1	1
feeling tired			1	1	
difficulty keeping mind on what you are doing			1	1	
tense, sore or aching muscles			1		
feeling something terrible might happen				1	
couldn't do anything because nerves were too bad					1

Appendix 5

Overview of cardiovascular diseases measured in the cohorts

	LASA		TILDA	B-PROOF	Rotterdam study	ActiFE Ulm
	С	3B	Wave 1; public data	Baseline wave	ERGO-5	Baseline wave
Arrhythmia	Х	Х	X	Х		
Angina Pectoris	Х	Х	X	Х		
Myocardial infarction	Х	Х	X	Х	X	х
Heart failure	Х	Х	X	Х		х
Stroke/CVA	Х	Х	X	X (includes TIA)	X	х
Peripheral arterial disease	Х	Х				
(PAD)						

Appendix 6

Overview of items mentioned for functional limitations

ITEMS	LASA-C	LASA-3B	Tilda	B-PROOF	ERGO-5	ActiFE Ulm
Get clothes from closets or drawers					Χ	
Dress and/or undress	Х	Х	Х	Combi with wash	Χ	Х
Wash hair					Χ	
Get up from chair	Х	Х	Х		Without arms	Х
Get out of bed			Х		Χ	
Eating, cutting food, drinking			Х		Χ	
Open new carton of milk					Χ	
Walk (outside)	5 minutes	5 minutes / In general (Euroqol)	100 meter	In general (Euroqol)	Х	5 minutes
Walk stairs without rest	15 steps	15 steps	1 flight of stairs	In general	5 steps	15 steps
Was & dry entire body				Combi with dress	Χ	
Take bath or use shower		X	X		Χ	Χ
Open and close tap					Χ	
Sit down and get up from toilet			X		Χ	
Comb & style hair					Χ	
Grab something from shelf above head			Arms above shoulder		X	
Bend down to pick something from floor			Stoop/kneel/crouch		Χ	
Open car door from outside					Χ	
Open jar of jam that has been opened before					Χ	
Use a pen or pencil					Χ	
Daily grocery shopping					Χ	Χ
Get in and out of passenger car					Χ	
Travel independently/use own or public transport	Χ	X			Χ	Χ
Do small chores in house					Χ	Χ
Run the household					Χ	
Cycle on your own					Χ	
Using telephone					Χ	
Cooking a dish					Χ	
Doing the laundry					Χ	
Taking medication					Χ	Χ
Arranging finance					Χ	
Cut toenails	Χ	X				Χ
Daily activities in general		X (Eurogol)		X (Eurogol)		X (Eurogol)

Overview of relevant genetic variants

		LA	SA	B-PROOF	Rotterdam study
		С	3B	Baseline wave	ERGO-5
CYP2C19	rs4244285				
	rs12248560				
СҮРЗА4	rs35599367				
СҮРЗА5	rs776746				
CYP2D6	rs3892097				
CYP2C9	rs1799853				
	rs1057910				
CYP1A2	rs2069514				
	rs762551				
	rs12720461				
SLCO1B1	rs4149056				
ABCB1	rs1045642				
	rs2032582				
	rs1128503				
CYP2C8	rs1058930				
	rs10509681				
	rs11572080				
CYP1A1	rs4646903				
	rs1048943				

Appendix 8. Medication classes and ATC codes belonging to these groups

Medication classes	ATC codes belonging to
	this group
Proton pump inhibitor	A02BC
	A02BD01
	A02BD02
	A02BD03
	A02BD04
	A02BD05
	A02BD06
	A02BD07
	A02BD09
	A02BD10
	A02BD11
	B01AC56
	M01AE52
blood glucose lowering drugs, excl. insulins	A10B
Insulins and analogues	A10A
Cardiac glycosides	C01A
Antiarrhythmics, class I and III	C01B
Vasodilators used in cardiac diseases	C01DA

Antiadrenergic agents, antihypertensives	C02A
	C02B
	C02C
	C02LA
	C02LB
	C02LC
	C02LE
	C02LF
Diuretic use	C03
	C02L
	C07B
	C07C
	C07D
	C08GA
	C09BA
	C09DA
	C09DX01
	C09DX03
	C09DX06
	C09AX54
	C09AX52
	C09BX03
	C09BX01
I Cale as The authors Case	C10BX13
High-ceiling diuretics	C03C
	C03EB
Low-ceiling diuretics	C03A
	C03B
	C03EA
	C07B
	C07C
	C07D
	C08GA
	C09BA
	C09DA
	C09DX01
	C09DX03
	C09DX06
	C09AX54
	C09AX52
	C09BX03
	C09BX01
	C10BX13
	C02L
Non-selective beta-blocker use	C07AA
THOM GOLOGING BOLD BIOCHOT GOO	C07AG
	C07AG
	C07BG
	C07CA
	C07CG
	C07DA
	C07EA
	C07FX01
	C07FX02
	C07FX06
	C07FA05
	COTTAUS

Selective beta blocker use	C07AB
	C07BB
	C07CB
	C07DB
	C07EB
	C07FB02
	C07FB03
	C07FB07
	C07FB12
	C07FB13
	C07FX03
	C07FX04
	C07FX05
	C09BX02
Calcium channel blockers	C08
	C09BB
	C09DB
	C07FB
	C10BX03
	C10BX07
	C10BX09
	C10BX11
	C10BX14
	C09BX03
	C09BX01
	C09BX02
	C09DX01
	C09DX03
	C09DX06
	C09XA53
	C09XA54
ACE inhibitors	C09A
	C09B
	C10BX04
	C10BX06
	C10BX07
	C10BX11
	C10BX11
	C10BX12 C10BX13
	C10BX14
	C10BX15
Angiotensin II Antagonist	C09C
	C09D
	C10BX10
Statins	C10AA
	C10BA
	C10BX
	A10BH51
December to a contract of the second of the	A10BH52
Drugs for urinary frequency and incontinence	G04BD
	G04CA53
Alpha-adrenoreceptor antagonist used in benign prostatic	G04CA
hypertrophy	
NSAID	M01AA
110/110	
110/112	
	M01AB

	M01AG
	M01AH
	M01AX01
	M01AX02
	M01AX04
	M01AX07
	M01AX13
	M01AX17
	M01AX18
	M01AX22
	M01AX23
	M01AX68
	M01BA02
	N02AJ08
	N02AJ14
	N02AJ19
Opioids	N02A
	N02BE51
	N02BA51
	M01AE51
Antionilantics	N03
Antiepileptics	I .
Anti-parkinson drugs	N04
Antipsychotics	N05A
Non-selective monoamine reuptake inhibitors	N06AA
	N06CA01
	N06CA02
SSRIs	N06AB
	N06CA03
Other Antidepressant	N06AX
	N06AF
	N06AG
Antihistamines	R06
Benzodiazepines Denzodiazepines	N05BA, N05CD
Benzodiazepine-related drugs	N05CF
Anticholinergic medications	A03AA07, A03AB05,
(only includes medicines with ACB score of 3)	A03BA01, A03BA03,
Based on the Anticholinergic cognitive burden scale:	A03BB01, G04BD02,
http://www.miltonkeynesccg.nhs.uk/resources/uploads/ACB_scale	G04BD04, G04BD05,
_legal_size.pdf	G04BD06, G04BD07,
	G04BD08, G04BD09,
	G04BD10, G04BD11,
	M03BA03, M03BC01,
	N04AA01, N04AA02,
	N04AA04, N04AB02,
	N04AC01, N05AA01,
	N05AA03, N05AB03,
	N05AB06, N05AC02,
	N05AH03, N05AH04,
	N05BB01, N05CM05, N06AA,
	N06AB05, R06AA02,
	R06AA04, R06AA08,
	R06AA09, R06AA52,
	R06AB01, R06AB04,
	R06AD02, R06AE05
Supplements that were evaluded from the number of mediastics	
Supplements that were excluded from the <i>number of medications</i>	A11 (all underlying ATC-
variable:	codes), A12 , A13, B03AA,
	B03AB, B03AD, B03AE,

This list is based on Directive 2002/46/EC of the European	B03B, B02BA, C10AX06,
Parliament.	M01AX05, N06DX02, V06,
	homeopathic preparations,
	and herbal supplements

Supplementary Table 1. Complete characteristics of the cohort studies with prospective data on falls

Variable	LASA	B-PROOF	ActiFE Ulm	Total
	(n = 1433)	(n = 2912)	(n = 1377)	(n = 5722)
Outcome variables				
Any fall in follow-up (≥ 1 falls)	468 (33.9)	957 (35.0)	443 (35.1)	1868 (34.7)
Recurrent falls in follow-up (≥ 2 falls)	174 (12.7)	375 (13.8)	162 (13)	711 (13.3)
Sociodemographic variables				
Age (years)	75 [69, 81]	73 [69, 78]	74 [70, 81]	74 [69, 79]
Sex, female	738 (51.5)	1456 (50.0)	591 (42.9)	2785 (48.7)
Educational status				
Low	1038 (72.5)	2006 (68.9)	1069 (78.5)	4113 (72.1)
Middle	219 (15.3)	149 (5.1)	141 (10.4)	509 (8.9)
High	174 (12.2)	755 (25.9)	151 (11.1)	1080 (18.9)
Living situation (institutionalized)	72 (5.0)	36 (3.2)	0 (0.0)	108 (2.7)
Living with partner	779 (54.4)	1839 (63.2)	908 (66.3)	3526 (61.7)
Measures of emotional functioning				
Depressive symptoms ^{a,b}	212 (15.3)	132 (4.6)	140 (10.7)	484 (8.7)
HADS-A score	2 [0, 4]	_	4 [2, 6]	3 [1, 5]
Measures of cognitive functioning		10 == 0.5		10.01
Immediate recall (number of words)			_	10.86 ± 3.42
Delayed recall (number of words)	6 [3, 8]	7 [5, 9]	_	6 [4, 9]
MMSE score	28 [26, 29]	28 [27, 29]	29 [27, 30]	28 [27, 29]
Verbal fluency ^b				
Animals named in test	_	_	21 [17, 25]	21 [17, 25]
Items named in test	_	12 [9, 15]	_	12 [9, 15]
Processing speed ^b				
Score on adjusted Alphabet	23 [18, 28]	_		23 [18, 28]
Coding task-15				
Time spent in seconds on Trail	_	68 [53.50, 87]	_	68 [53.50, 87]
Making Test				
Hearing impairment	308 (21.5)	_	334 (24.7)	642 (23.0)
Visual impairment	102 (7.1)	_	201 (14.8)	303 (10.9)

Symptoms of dizziness	216 (15.1)	_	312 (22.9)	528 (18.9)
Measures of physical functioning				
BMI	26.93 ± 4.28	27.14 ± 3.96	27.56 ± 4.12	27.19 ± 4.08
Weight loss in past 3-6 months	217 (15.2)	_	150 (11.1)	367 (13.2)
Use of walking aid	_	422 (14.6)	15 (1.2)	437 (10.5)
Able to perform tandem stand for 10s	885 (64.5)	1960 (67.5)	1171 (89.6)	4016 (72.0)
Symptoms of pain	370 (31.0)	1347 (46.3)	812 (59.3)	2529 (46.2)
Poor self-rated health	196 (13.7)	380 (13.1)	213 (15.5)	789 (13.8)
Number of functional limitations (0-	1 [0, 2]	_	0 [0, 2]	1 [0, 2]
5) ^b				
Grip strength (kg) ^b	29.23 ± 10.18	32.49 ± 10.84	33.51 ± 11.37	31.91 ± 10.93
Gait speed (m/s) ^b	0.79 ± 0.27	0.94 ± 0.28	1.04 ± 0.32	0.93 ± 0.30
Urinary incontinence	359 (25.1)	_	511 (37.6)	870 (31.2)
Systolic blood pressure (mmHg)	$153.08 \pm$	$148.73 \pm$	142.34 ±	$148.20 \pm$
	23.91	19.68	11.81	19.67
Diastolic blood pressure (mmHg)	83.53 ± 12.16	80.16 ± 12.82	79.51 ± 10.67	80.90 ± 12.20
Pulse rate (beats/min)	69.25 ± 11.60	68.67 ± 13.38	68.61 ± 12.25	68.90 ± 12.12
≥ 1 fall in previous 12 months	458 (32.0)	737 (32.6)	469 (34.5)	1664 (33.0)
≥ 2 falls in previous 12 months	215 (15.1)	268 (11.9)	157 (11.6)	640 (12.7)
Fear of falling				
Not afraid of falling	667 (46.8)	_	829 (60.7)	1496 (53.6)
Somewhat afraid of falling	567 (39.8)	_	489 (35.8)	1056 (37.8)
Very afraid of falling	191 (13.4)	_	47 (3.4)	238 (8.5)
Self-reported chronic conditions				
Cancer ever	183 (12.8)	_	261 (19.0)	444 (15.8)
Diabetes ever	114 (8.0)	233 (10.3)	180 (13.1)	527 (10.4)
Any cardiovascular disease ^c	394 (28.5)	893 (30.7)	568 (41.3)	1855 (32.4)
Heart failure ever	79 (5.6)	85 (3.8)	202 (14.7)	366 (7.3)
Angina pectoris ever	162 (11.4)	61 (2.7)	_	223 (6.1)
Arrhythmia ever	171 (12.2)	183 (8.2)	_	354 (9.7)
Myocardial infarction ever	38 (2.7)	215 (9.6)	124 (9.0)	377 (7.5)
Stroke ever	115 (8.0)	198 (8.8)	73 (5.3)	386 (7.6)
Lung disease ever	230 (16.1)	_	104 (7.6)	334 (12.0)

Arthritis ever	705 (49.2)	_	675 (49.2)	1380 (49.2)
Comorbidity ^c	964 (67.3)	1994 (68.5)	976 (70.9)	3934 (68.8)
Variables related to lifestyle				
Total physical activity (MET/week) ^b	2968.75	3211.25	5131.00	3569.38
	[1630.94,	[2047.00,	[3433.50,	[2190.00,
	4585.62]	4883.12]	7336.00]	5470.50]
Alcohol use				
Non-drinker	358 (25.0)	399 (13.7)	10 (0.7)	767 (13.5)
Drinks less than once a month	161 (11.2)	270 (9.3)	221 (16.3)	652 (11.4)
Drinks 1-3 times a month	175 (12.2)	305 (10.5)	345 (25.5)	825 (14.5)
Drinks 1-4 days a week	343 (24.0)	808 (27.8)	354 (26.2)	1505 (26.4)
Drinks (almost) daily	395 (27.6)	1129 (38.8)	423 (31.3)	1947 (34.2)
Current smoker	265 (18.5)	281 (9.6)	88 (6.4)	634 (11.1)
Biomarkers				
eGFR (mL/min)	61.13 ± 17.67	72.48 ± 20.64	65.99 ± 19.09	68.25 ± 20.17
CRP (mg/l)	6.72 ± 13.52	2.89 ± 5.01	3.35 ± 5.82	3.88 ± 8.10
CRP (mg/l) Vitamin B12 (pmol/l)	6.72 ± 13.52 $338.48 \pm$	2.89 ± 5.01 $285.43 \pm$	3.35 ± 5.82	3.88 ± 8.10 $301.45 \pm$
			3.35 ± 5.82	
	338.48 ±	285.43 ±	3.35 ± 5.82 $ 51.10 \pm 18.52$	301.45 ±
Vitamin B12 (pmol/l)	338.48 ± 578.04	285.43 ± 115.94	_	301.45 ± 332.91
Vitamin B12 (pmol/l)	338.48 ± 578.04	285.43 ± 115.94	_	301.45 ± 332.91
Vitamin B12 (pmol/l) Vitamin D (nmol/l)	338.48 ± 578.04	285.43 ± 115.94	_	301.45 ± 332.91
Vitamin B12 (pmol/l) Vitamin D (nmol/l) Medication use	338.48 ± 578.04 53.44 ± 24.04	285.43 ± 115.94 55.70 ± 24.83		301.45 ± 332.91 54.04 ± 23.31
Vitamin B12 (pmol/l) Vitamin D (nmol/l) Medication use Number of medications	338.48 ± 578.04 53.44 ± 24.04	285.43 ± 115.94 55.70 ± 24.83		301.45 ± 332.91 54.04 ± 23.31
Vitamin B12 (pmol/l) Vitamin D (nmol/l) Medication use Number of medications Cardiovascular drugs	338.48 ± 578.04 53.44 ± 24.04 $2 [0, 3]$	285.43 ± 115.94 55.70 ± 24.83 3 [1, 5]	-51.10 ± 18.52	301.45 ± 332.91 54.04 ± 23.31
Vitamin B12 (pmol/l) Vitamin D (nmol/l) Medication use Number of medications Cardiovascular drugs Antiarrhythmics	338.48 ± 578.04 53.44 ± 24.04 $2 [0, 3]$ $18 (1.3)$	285.43 ± 115.94 55.70 ± 24.83 $3 [1, 5]$ $53 (1.8)$	- 51.10 ± 18.52 3 [1, 5] 24 (1.7)	301.45 ± 332.91 54.04 ± 23.31 3 [1, 5] 95 (1.7)
Vitamin B12 (pmol/l) Vitamin D (nmol/l) Medication use Number of medications Cardiovascular drugs Antiarrhythmics Cardiac glycosides	338.48 ± 578.04 53.44 ± 24.04 2 [0, 3] 18 (1.3) 95 (6.6)	285.43 ± 115.94 55.70 ± 24.83 $3 [1, 5]$ $53 (1.8)$ $64 (2.2)$	- 51.10 ± 18.52 3 [1, 5] 24 (1.7) 40 (2.9)	301.45 ± 332.91 54.04 ± 23.31 3 [1, 5] 95 (1.7) 199 (3.5)
Vitamin B12 (pmol/l) Vitamin D (nmol/l) Medication use Number of medications Cardiovascular drugs Antiarrhythmics Cardiac glycosides Nitrates	338.48 ± 578.04 53.44 ± 24.04 2 [0, 3] 18 (1.3) 95 (6.6) 132 (9.2)	285.43 ± 115.94 55.70 ± 24.83 $3 [1, 5]$ $53 (1.8)$ $64 (2.2)$ $122 (4.2)$	51.10 ± 18.52 3 [1, 5] 24 (1.7) 40 (2.9) 22 (1.6)	301.45 ± 332.91 54.04 ± 23.31 3 [1, 5] 95 (1.7) 199 (3.5) 276 (4.8)
Vitamin B12 (pmol/l) Vitamin D (nmol/l) Medication use Number of medications Cardiovascular drugs Antiarrhythmics Cardiac glycosides Nitrates Antiadrenergic agents	338.48 ± 578.04 53.44 ± 24.04 2 [0, 3] 18 (1.3) 95 (6.6) 132 (9.2) 26 (1.8)	285.43 ± 115.94 55.70 ± 24.83 $3 [1, 5]$ $53 (1.8)$ $64 (2.2)$ $122 (4.2)$ $29 (1.0)$	$-$ 51.10 ± 18.52 $3 [1, 5]$ $24 (1.7)$ $40 (2.9)$ $22 (1.6)$ $29 (2.1)$	301.45 ± 332.91 54.04 ± 23.31 3 [1, 5] 95 (1.7) 199 (3.5) 276 (4.8) 84 (1.5)
Vitamin B12 (pmol/l) Vitamin D (nmol/l) Medication use Number of medications Cardiovascular drugs Antiarrhythmics Cardiac glycosides Nitrates Antiadrenergic agents Diuretics	338.48 ± 578.04 53.44 ± 24.04 2 [0, 3] 18 (1.3) 95 (6.6) 132 (9.2) 26 (1.8) 316 (22.1)	285.43 ± 115.94 55.70 ± 24.83 3 [1, 5] 53 (1.8) 64 (2.2) 122 (4.2) 29 (1.0) 771 (26.5)	$-$ 51.10 ± 18.52 $3 [1, 5]$ $24 (1.7)$ $40 (2.9)$ $22 (1.6)$ $29 (2.1)$ $214 (15.5)$	301.45 ± 332.91 54.04 ± 23.31 3 [1, 5] 95 (1.7) 199 (3.5) 276 (4.8) 84 (1.5) 1301 (22.7)
Vitamin B12 (pmol/l) Vitamin D (nmol/l) Medication use Number of medications Cardiovascular drugs Antiarrhythmics Cardiac glycosides Nitrates Antiadrenergic agents Diuretics Low-ceiling diuretics	338.48 ± 578.04 53.44 ± 24.04 2 [0, 3] 18 (1.3) 95 (6.6) 132 (9.2) 26 (1.8) 316 (22.1) 171 (11.9)	285.43 ± 115.94 55.70 ± 24.83 3 [1, 5] 53 (1.8) 64 (2.2) 122 (4.2) 29 (1.0) 771 (26.5) 617 (21.2)	$-$ 51.10 ± 18.52 $3 [1, 5]$ $24 (1.7)$ $40 (2.9)$ $22 (1.6)$ $29 (2.1)$ $214 (15.5)$ $103 (7.5)$	301.45 ± 332.91 54.04 ± 23.31 3 [1, 5] 95 (1.7) 199 (3.5) 276 (4.8) 84 (1.5) 1301 (22.7) 891 (15.6)

	Non-selective beta-blocking	73 (5.1)	106 (3.6)	41 (3.0)	220 (3.8)
	agents				
	Selective beta-blocking agents	158 (11.0)	649 (22.3)	383 (27.8)	1190 (20.8)
	Calcium channel blockers	103 (7.2)	376 (12.9)	220 (16.0)	699 (12.2)
	ACE inhibitors	156 (10.9)	475 (16.3)	246 (17.9)	877 (15.3)
	Angiotensin II antagonists	0 (0.0)	507 (17.4)	122 (8.9)	629 (11.0)
	Alpha-adrenoceptor	10 (0.7)	152 (5.2)	133 (9.7)	295 (5.2)
	antagonists				
	Statins	62 (4.3)	724 (24.9)	362 (26.3)	1148 (20.1)
Psych	otropics				
	Antipsychotics	22 (1.5)	19 (0.7)	14 (1.0)	55 (1.0)
	Antidepressants	35 (2.4)	145 (5.0)	70 (5.1)	250 (4.4)
	SSRIs	9 (0.6)	78 (2.7)	24 (1.7)	111 (1.9)
	TCAs	25 (1.7)	40 (1.4)	35 (2.5)	100 (1.7)
	Other antidepressants	1 (0.1)	28 (1.0)	15 (1.1)	44 (0.8)
	Benzodiazepines	200 (14.0)	150 (5.2)	15 (1.1)	365 (6.4)
	Benzodiazepine-related drugs	9 (0.6)	39 (1.3)	13 (0.9)	61 (1.1)
Other	s medications				
	Anti-Parkinson drugs	6 (0.4)	38 (1.3)	24 (1.7)	68 (1.2)
	Antiepileptics	17 (1.2)	52 (1.8)	39 (2.8)	108 (1.9)
	Opioids	24 (1.7)	101 (3.5)	18 (1.3)	143 (2.5)
	NSAIDs	142 (9.9)	164 (5.6)	143 (10.4)	449 (7.8)
	Anticholinergic medications	40 (2.8)	127 (4.4)	67 (4.9)	234 (4.1)
	Insulin	30 (2.1)	42 (1.4)	29 (2.1)	101 (1.8)
	Other glucose lowering drugs	57 (4.0)	240 (8.2)	121 (8.8)	418 (7.3)
	Proton pump inhibitors	37 (2.6)	612 (21.0)	183 (13.3)	832 (14.5)
	Drugs for urinary frequency	7 (0.5)	40 (1.4)	29 (2.1)	76 (1.3)
	and incontinence				
	Antihistamines	16 (1.1)	83 (2.9)	17 (1.2)	116 (2.0)

Data are presented as mean \pm SD, n (%), or median [IQR]. The sign "—" indicates the corresponding variable is systematically missing.

BMI, body mass index; HADS-A, Hospital Anxiety Depression Scale-Anxiety subscale; MMSE, Mini-Mental State Examination; MET, Metabolic Equivalent of Task; eGFR, estimated glomerular filtration rate; CRP, C-reactive protein; ACE, angiotensin-converting enzyme; SSRI, selective serotonin reuptake inhibitor; TCA, tricyclic antidepressant; NSAID, nonsteroidal anti-inflammatory drug

^aDefined by validated cutoff scores for Center for Epidemiological Studies Depression Scale (in LASA), Hospital Anxiety and Depression Scale-Depression subscale (in ActiFE Ulm), and Geriatric Depression Scale (in B-PROOF)

^bVariable was harmonized across the three cohort studies and modelled using z-scores

^cVariable was computed after multiple imputation

Supplementary Table 2. Complete characteristics of the cohort studies with retrospective data on falls

	prospectiv	ro doto an f					Cohorts with retrospective data			
		e uata on Ia	ılls	on falls						
	LASA:	B-	ActiFE	LASA:	Rotterda					
	wave C	PROOF	Ulm	wave 3B	m Study	TILDA	Total			
	(<i>n</i> =									
Variable	1507)	2912)	1463)	887)	7151)	8081)	22001)			
Sociodemographic										
variables										
Age (years)	75 [70,	73 [69,	74 [70,	60 [57,	69 [63,	62 [56,	68 [61,			
	81]	78]	81]	62.50]	77]	71]	76]			
Sex, female	781	1456	634	454	4163	4375	11863			
	(51.8)	(50.0)	(43.3)	(51.2)	(58.2)	(54.1)	(53.9)			
Educational status										
Low	1094	2006	1137	374	3544	4341	12496			
	(72.7)	(68.9)	(78.7)	(42.2)	(50.1)	(53.7)	(57.1)			
Middle	231		147	229	2086	1351	4193			
	(15.3)	149 (5.1)	(10.2)	(25.8)	(29.5)	(16.7)	(19.1)			
High	180	755	160	284	1449	2386	5214			
	(12.0)	(25.9)	(11.1)	(32.0)	(20.5)	(29.5)	(23.8)			
Living situation										
(institutionalized)	88 (5.8)	36 (3.2)	0 (0.0)	2 (0.2)	702 (9.9)	0(0.0)	828 (4.1)			
Living with partner	806	1839	951	658	4834	5592	14680			
	(53.5)	(63.2)	(65.4)	(74.2)	(67.7)	(69.2)	(66.8)			
Measures of emotional										
functioning										
Depressive symptoms ^{a,b}	229		154	106		763	2040			
	(15.8)	132 (4.6)	(11.2)	(12.0)	656 (9.8)	(9.6)	(9.6)			
HADS-A score	2 [0, 4]	_	4 [2, 6]	2 [0, 4]	2 [0, 4]	5 [3, 7]	3 [1, 6]			
Measures of cognitive										
functioning										
Immediate recall	10.94 ±	$10.77 \pm$		13.18 ±	13.07 ±	13.13 ±	12.59 ±			
(number of words)	3.75	3.26	_	3.34	3.71	3.30	3.59			

Delayed recall (number							
of words)	5 [3, 8]	7 [5, 9]	_	7 [5, 9]	8 [5, 10]	6 [4, 8]	7 [5, 9]
MMSE score	27 [26,	28 [27,	29 [27,	29 [27,	25 [23,	29 [28,	29 [27,
	29]	29]	29]	29]	27]	30]	30]
Verbal fluency ^b							
Animals named in	_	_	21 [17,	22 [19,	_	_	21 [18,
test			25]	26]			26]
Items named in	_	12 [9,	_	_	22 [18,	20 [15,	20 [16,
test		15]			26]	25]	25]
Processing speed ^b							
Score on adjusted							
Alphabet Coding	23 [17,			31 [26,			26 [20,
task-15	28]	_	_	34]	_		31]
Time spent in		68					
seconds on Trail		[53.50,			89 [78,	77 [63,	84 [70,
Making Test	_	87]	_	_	104]	100]	102]
Hearing impairment	330		358		702	1145	2601
	(21.9)	_	(25.0)	66 (7.4)	(14.6)	(14.2)	(15.6)
Visual impairment			216			798	1152
	110 (7.3)	_	(15.1)	28 (3.2)	_	(9.9)	(9.7)
Symptoms of dizziness	235		335		1126		1754
	(15.6)	_	(23.2)	58 (6.5)	(23.4)		(20.3)
Measures of physical							
functioning							
BMI	$26.90 \pm$	$27.14 \pm$	$27.59 \pm$	$27.15 \pm$	$27.56 \pm$	$28.51 \pm$	$27.72 \pm$
	4.30	3.96	4.14	4.64	4.39	4.62	4.42
Weight loss in past 3-6	234		164	155		599	1152
months	(15.6)	_	(11.5)	(17.6)	_	(7.4)	(9.7)
Use of walking aid		422				69	1070
	_	(14.6)	19 (1.4)	29 (3.3)	531 (7.5)	(71.1)	(8.7)
Able to perform tandem	911	1960	1227	820	3411		8329
stand for 10s	(63.4)	(67.5)	(88.5)	(92.8)	(93.4)	_	(81.2)
Symptoms of pain	385	1347	864	227	1656	2859	7338
	(31.3)	(46.3)	(59.4)	(27.9)	(54.9)	(35.4)	(41.9)

Poor self-rated health	204	380	241	112		1866	2803
	(13.5)	(13.1)	(16.6)	(12.6)	_	(23.1)	(18.9)
Number of functional							
limitations (0-5) ^b	1 [0, 2]	_	0 [0, 2]	0 [0, 1]	1 [0, 3]	0 [0, 1]	0 [0, 1]
Grip strength (kg) ^b	$29.00 \pm$	32.49 ±	33.44 ±	$35.52 \pm$	$28.03 \pm$	$28.08 \pm$	29.59 ±
	10.24	10.84	11.41	12.30	10.33	10.04	10.77
Gait speed (m/s) ^b	$0.79 \pm$	$0.94 \pm$	$1.03 \pm$	$1.04 \pm$	$1.20 \pm$	1.36 ±	1.14 ±
	0.27	0.28	0.33	0.24	0.20	0.21	0.30
Urinary incontinence	386		541	151		1014	2092
	(25.6)	_	(37.6)	(17.0)		(12.6)	(17.6)
Systolic blood pressure	153.21 ±	148.73 ±	142.30 ±	137.57 ±	143.93 ±	135.68	142.22 ±
(mmHg)	24.17	19.68	11.75	19.11	22.16	± 19.91	21.24
Diastolic blood pressure	83.48 ±	80.16 ±	79.57 ±	83.78 ±	83.48 ±	82.36 ±	82.39 ±
(mmHg)	12.19	12.82	10.69	10.97	11.17	11.29	11.56
Pulse rate (beats/min)	69.39 ±	68.67 ±	68.75 ±	70.59 ±	69.52 ±		69.45 ±
	11.64	13.38	12.45	11.82	11.31	_	11.66
≥ 1 fall in previous 12	485	737	502	222	1690	1566	5202
months	(32.3)	(32.6)	(34.9)	(25.1)	(23.7)	(19.4)	(24.4)
\geq 2 falls in previous 12	230	268	171			577	1325
months	(15.3)	(11.9)	(11.9)	79 (8.9)		(7.2)	(9.4)
Fear of falling							
Not afraid of	693		868			6209	7770
falling	(46.3)	_	(60.1)	_	_	(76.9)	(70.6)
Somewhat afraid	598		520			1404	2522
of falling	(40.0)	_	(36.0)	_	_	(17.4)	(22.9)
Very afraid of	205					459	
falling	(13.7)	_	57 (3.9)	_	_	(5.7)	721 (6.5)
Self-reported chronic							
conditions							
Cancer ever	188		273		823	512	1881
	(12.5)	_	(18.7)	85 (9.6)	(20.4)	(6.3)	(11.8)
Diabetes ever		233	198		867	621	2113
	125 (8.3)	(10.3)	(13.6)	69 (7.8)	(12.2)	(7.7)	(9.9)

Any ca	ardiovascular	419	865	610		2220	1208	5410
disease	e^c	(27.8)	(29.7)	(41.7)	88 (9.9)	(31.0)	(14.9)	(24.6)
Heart 1	failure ever			214				
		83 (5.6)	85 (3.8)	(14.7)	10 (1.1)	_	87 (1.1)	479 (3.4)
Angin	a pectoris ever	169					442	
_		(11.3)	61 (2.7)	_	26 (2.9)	_	(5.5)	698 (5.5)
Arrhyt	thmia ever	183					580	
		(12.4)	183 (8.2)	_	26 (3.0)	_	(7.2)	972 (7.7)
Myoca	ardial infarction						376	1244
ever		39 (2.6)	215 (9.6)	131 (9.0)	31 (3.5)	452 (6.3)	(4.7)	(5.8)
Stroke	ever						131	
		123 (8.2)	198 (8.8)	79 (5.4)	21 (2.4)	68 (1.9)	(1.6)	620 (3.5)
Lung	disease ever	241					977	1596
		(16.0)	_	113 (7.8)	90 (10.1)	175 (7.0)	(12.1)	(11.1)
Arthrit	tis ever	744		724	362	3034	2223	7087
		(49.4)	_	(49.6)	(40.8)	(44.0)	(27.5)	(37.6)
Como	rbidity ^c	1024	1909	1054	391	4546	3635	12558
		(67.9)	(65.5)	(72.0)	(44.0)	(63.6)	(45.0)	(57.1)
Varial	oles related to							
lifestyl	le							
Total p	physical activity	2910.00	3211.25	5082.00	3405.00		1653.00	2790.00
(MET	/week) ^b	[1575.00	[2047.00	[3389.75	[2026.50	3060.00	[587.25,	[1266.75
		,	,	,	,	[1710.00,	4158.00	,
		4567.50]	4883.12]	7320.25]	5055.00]	4935.00]]	4914.00]
Alcoho	ol use							
	Non-drinker	387	399			1183	1878	3921
		(25.7)	(13.7)	11 (0.8)	63 (7.1)	(16.6)	(27.9)	(19.0)
	Drinks less than	169		240		1111	625	2476
	once a month	(11.2)	270 (9.3)	(16.7)	61 (6.9)	(15.6)	(9.3)	(12.0)
	Drinks 1-3 times	184	305	362	115	898	818	2682
	a month	(12.2)	(10.5)	(25.3)	(13.0)	(12.6)	(12.1)	(13.0)
	Drinks 1-4 days a	359	808	375	358	1104	2728	5732
	week	(23.8)	(27.8)	(26.2)	(40.4)	(15.5)	(40.5)	(27.8)

	Drinks (almost)	407	1129	445	290	2826	685	5782
	daily	(27.0)	(38.8)	(31.1)	(32.7)	(39.7)	(10.2)	(28.1)
Currer	nt smoker	287			159	897	1468	3192
		(19.1)	281 (9.6)	100 (6.9)	(18.0)	(12.6)	(18.2)	(14.5)
Bioma	irkers							
eGFR	(mL/min)	$60.98 \pm$	$72.48 \pm$	65.93 ±	94.49 ±	$82.03 \pm$		$76.28 \pm$
		17.63	20.64	19.09	23.40	25.48	_	24.41
CRP (mg/l)	$6.83 \pm$	$2.89 \pm$	$3.40 \pm$	$2.65 \pm$		$3.34 \pm$	$3.58 \pm$
		13.64	5.01	6.17	4.96	_	9.84	8.89
Vitam	in B12 (pmol/l)	$337.30 \pm$	$285.43 \pm$					301.34 ±
		571.99	115.94	_	_	_	_	331.94
Vitam	in D (nmol/l)	53.21 ±	$55.70 \pm$	51.14 ±	$68.66 \pm$			55.44 ±
		24.00	24.83	18.84	21.98	_	_	23.60
Medic	ation use							
Numb	er of medications	2 [1, 3]	3 [1, 5]	3 [1, 5]	1 [0, 3]	3 [1, 5]	2 [0, 4]	2 [1, 4]
Cardio	ovascular drugs							
	Antiarrhythmics	18 (1.2)	53 (1.8)	24 (1.6)	8 (0.9)	173 (2.4)	37 (0.5)	313 (1.4)
	Cardiac							
	glycosides	104 (6.9)	64 (2.2)	40 (2.7)	3 (0.3)	113 (1.6)	99 (1.2)	423 (1.9)
							137	
	Nitrates	138 (9.2)	122 (4.2)	24 (1.6)	8 (0.9)	400 (5.6)	(1.7)	829 (3.8)
	Antiadrenergic						153	
	agents	28 (1.9)	29 (1.0)	34 (2.3)	3 (0.3)	43 (0.6)	(1.9)	290 (1.3)
		347	771	235	112	1678	1102	4245
	Diuretics	(23.0)	(26.5)	(16.1)	(12.6)	(23.5)	(13.6)	(19.3)
	Low-ceiling	190	617		103	1251	787	3061
	diuretics	(12.6)	(21.2)	113 (7.7)	(11.6)	(17.5)	(9.7)	(13.9)
	High-ceiling						326	1171
	diuretics	144 (9.6)	146 (5.0)	129 (8.8)	11 (1.2)	415 (5.8)	(4.0)	(5.3)
	Other diuretics	30 (2.0)	120 (4.1)	24 (1.6)	3 (0.3)	130 (1.8)	15 (0.2)	322 (1.5)
	Beta-blocking	237	751	449	132	1812	1164	4545
	agents	(15.7)	(25.8)	(30.7)	(14.9)	(25.3)	(14.4)	(20.7)

	Non-selective							
	beta-blocking							
	agents	75 (5.0)	106 (3.6)	43 (2.9)	13 (1.5)	174 (2.4)	71 (0.9)	482 (2.2)
	Selective beta-	162	649	406	119	1638	1097	4071
	blocking agents	(10.7)	(22.3)	(27.8)	(13.4)	(22.9)	(13.6)	(18.5)
	Calcium channel		376	237			863	2291
	blockers	110 (7.3)	(12.9)	(16.2)	66 (7.4)	639 (8.9)	(10.7)	(10.4)
		165	475	264		1077	1099	3166
	ACE inhibitor	(10.9)	(16.3)	(18.0)	86 (9.7)	(15.1)	(13.6)	(14.4)
	Angiotensin II		507			979	960	2652
	antagonists	0 (0.0)	(17.4)	133 (9.1)	73 (8.2)	(13.7)	(11.9)	(12.1)
	Alpha-							
	adrenoceptor						169	
	antagonists	11 (0.7)	152 (5.2)	143 (9.8)	13 (1.5)	264 (3.7)	(2.1)	752 (3.4)
			724	386	150	1957	2437	5716
	Statins	62 (4.1)	(24.9)	(26.4)	(16.9)	(27.4)	(30.2)	(26.0)
Psycho	otropics							
							111	
	Antipsychotics	24 (1.6)	19 (0.7)	16 (1.1)	8 (0.9)	48 (0.7)	(1.4)	226 (1.0)
							560	1372
	Antidepressants	40 (2.7)	145 (5.0)	75 (5.1)	64 (7.2)	488 (6.8)	(6.9)	(6.2)
							306	
	SSRIs	10 (0.7)	78 (2.7)	25 (1.7)	40 (4.5)	265 (3.7)	(3.8)	724 (3.3)
							116	
	TCAs	28 (1.9)	40 (1.4)	37 (2.5)	11 (1.2)	131 (1.8)	(1.4)	363 (1.6)
	Other						157	
	antidepressants	2 (0.1)	28 (1.0)	17 (1.2)	17 (1.9)	101 (1.4)	(1.9)	322 (1.5)
		215					301	1297
	Benzodiazepines	(14.3)	150 (5.2)	16 (1.1)	32 (3.6)	583 (8.2)	(3.7)	(5.9)
	Benzodiazepine-						203	
	related drugs	10 (0.7)	39 (1.3)	13 (0.9)	9 (1.0)	115 (1.6)	(2.5)	389 (1.8)
Others	medications							
	Anti-Parkinson							
	drugs	7 (0.5)	38 (1.3)	25 (1.7)	6 (0.7)	58 (0.8)	57 (0.7)	191 (0.9)

						234	
Antiepileptics	18 (1.2)	52 (1.8)	42 (2.9)	17 (1.9)	158 (2.2)	(2.9)	521 (2.4)
						370	
Opioids	25 (1.7)	101 (3.5)	18 (1.2)	30 (3.4)	328 (4.6)	(4.6)	872 (4.0)
			155			525	1526
NSAIDs	148 (9.8)	164 (5.6)	(10.6)	47 (5.3)	487 (6.8)	(6.5)	(6.9)
Anticholinergic						338	1013
medications	47 (3.1)	127 (4.4)	72 (4.9)	34 (3.8)	395 (5.5)	(4.2)	(4.6)
Insulin	31 (2.1)	42 (1.4)	31 (2.1)	16 (1.8)	175 (2.4)	69 (0.9)	364 (1.7)
Other glucose						461	1583
lowering drugs	63 (4.2)	240 (8.2)	135 (9.2)	49 (5.5)	635 (8.9)	(5.7)	(7.2)
Proton pump		612	197	133	1617	1143	3743
inhibitors	41 (2.7)	(21.0)	(13.5)	(15.0)	(22.6)	(14.1)	(17.0)
Drugs for urinary							
frequency and						110	
incontinence	9 (0.6)	40 (1.4)	32 (2.2)	2 (0.2)	79 (1.1)	(1.4)	272 (1.2)
Antihistamines	18 (1.2)	83 (2.9)	18 (1.2)	37 (4.2)	266 (3.7)	74 (0.9)	496 (2.3)

Data are presented as mean \pm SD, n (%), or median [IQR]. The sign "—" indicates the corresponding variable is systematically missing.

BMI, body mass index; HADS-A, Hospital Anxiety Depression Scale-Anxiety subscale; MMSE, Mini-Mental State Examination; MET, Metabolic Equivalent of Task; eGFR, estimated glomerular filtration rate; CRP, C-reactive protein; ACE, angiotensin-converting enzyme; SSRI, selective serotonin reuptake inhibitor; TCA, tricyclic antidepressant; NSAID, nonsteroidal anti-inflammatory drug ^aDefined by validated cutoff scores for Center for Epidemiological Studies Depression Scale (in LASA), Hospital Anxiety and Depression Scale-Depression subscale (in ActiFE Ulm), and Geriatric Depression Scale (in B-PROOF)

^bVariable was harmonized across the three cohort studies and modelled using z-scores

^cVariable was computed after multiple imputation

Supplementary Table 3. Performance of the ADFICE_IT models for predicting any fall and recurrent falls based on internal-external cross-validation in the cohorts with prospective data on falls

	Validation in	Validation in B-	Validation in ActiFE
	LASA ^a	PROOF ^b	Ulm ^c
Model for predicting any fall			
C-statistic (95% CI) ^d	0.68 (0.64-0.71)	0.65 (0.63-0.67)	0.61 (0.58-0.64)
Intercept (95% CI) ^e	0.01 (-0.10-0.13)	-0.02 (-0.11-0.06)	0.02 (-0.10-0.14)
Slope (95% CI) ^e	1.12 (0.91-1.32)	0.79 (0.67-0.92)	0.67 (0.48-0.87)
Model for predicting recurrent			
falls			
C-statistic (95% CI) ^d	0.71 (0.67-0.76)	0.71 (0.67-0.74)	0.69 (0.64-0.73)
Intercept (95% CI) ^e	-0.03 (-0.20-0.14)	0.07 (-0.06-0.19)	0.11 (-0.07-0.29)
Slope (95% CI) ^e	1.01 (0.83-1.20)	0.79 (0.66-0.93)	0.88 (0.68-1.09)

^a Models were derived from B-PROOF and ActiFE Ulm and then validated in LASA

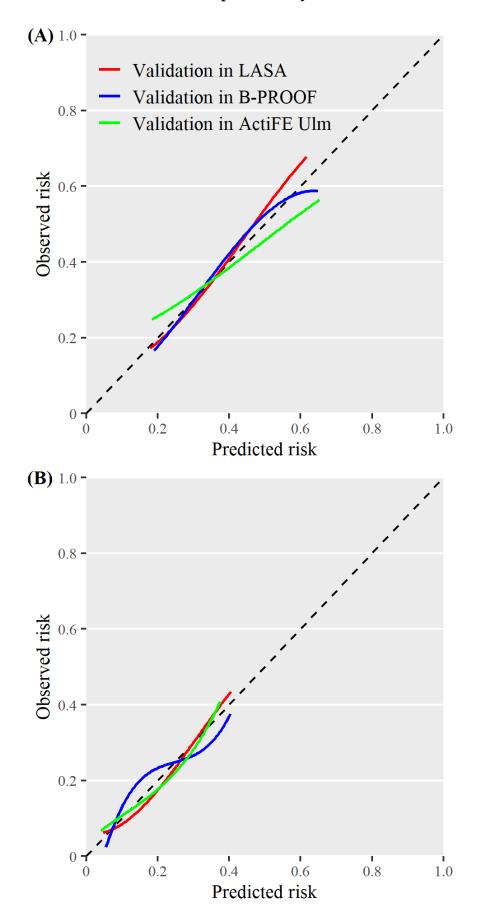
^b Models were derived from LASA and ActiFE Ulm and then validated in B-PROOF

^c Models were derived from LASA and B-PROOF and then validated in ActiFE Ulm

^d A C-statistic of 0.50 represents no discrimination and a C-statistic of 1.00 represents perfect discrimination

^e Intercept of 0 and slope of 1 represent perfect calibration

Supplementary Figure 1: Calibration plots for the ADFICE_IT models for predicting any fall (A) and recurrent falls (B) as derived from the internal-external cross-validation procedure in cohorts with prospective data on falls. Perfect calibration is represented by the dashed line.



Supplementary Table 4. model for predicting any fall that was developed using a subset of the available candidate predictors in the cohorts with prospective data on falls

Predictor	Beta ^a	OR (95% CI) ^a
Intercept	-0.043	_
Educational status		
Middle	0.173	1.19 (0.97-1.46)
High	0.324	1.38 (1.19-1.61)*
Depression score ^b	0.068	1.07 (1.00-1.15)
BMI	-0.018	0.98 (0.97-1.00)*
Number of functional limitations (0-5) ^b	0.125	1.13 (1.02-1.26)
Grip strength (kg) ^b	-0.148	0.86 (0.81-0.93)*
Gait speed (m/s) ^b	0.088	1.09 (1.01-1.18)
Systolic blood pressure (mmHg)	-0.003	1.00 (0.99-1.00)
≥ 1 fall in previous 12 months	0.426	1.53 (1.32-1.77)*
≥ 2 falls in previous 12 months	0.597	1.82 (1.49-2.21)*
Fear of falling		
Somewhat afraid of falling	0.199	1.22 (1.05-1.42)*
Very afraid of falling	0.195	1.22 (0.95-1.56)
Current smoker	-0.252	0.78 (0.64-0.95)*
Use of calcium channel blockers	-0.164	0.85 (0.71-1.02)
Use of antiepileptics	0.436	1.55 (1.00-2.40)
Use of drugs for urinary frequency and incontinence	0.656	1.93 (1.12-3.32)*

BMI, body mass index; CI, confidence interval

^a Coefficients were corrected for overfitting with a shrinkage factor of 0.88

^b OR refers to standardized Z-score, which were used for the purpose of harmonization. Z-scores are calculated as: Z-score depression_{LASA} = (CES-D score − 7.980)/7.826; Z-score depression_{B-PROOF} = (GDS score − 1.440)/ 1.942; Z-score depression_{ActiFE Ulm} = (HADS-D score − 3.802)/2.899; Z-score functional limitations_{LASA} = (number of functional limitations − 1.209)/1.529; Z-score functional limitations_{ActiFE Ulm} = (number of functional limitations − 1.013)/1.362; Z-score grip strength_{LASA} = (kg − 29.015)/10.244; Z-score grip strength_{B-PROOF} = (kg − 32.484)/10.841; Z-score grip strength_{ActiFE Ulm} = (kg − 33.364)/11.412; Z-score gait speed_{LASA} = (s/m − 0.828)/0.287; Z-score gait speed_{B-PROOF} = (s/m − 0.942)/0.276; Z-score gait speed_{ActiFE Ulm} = (s/m − 1.035)/0.327 * p < 0.01

Supplementary Table 5. Model for predicting any fall that was developed using a subset of the available candidate predictors. Performance estimates were based on internal-external cross-validation in the cohorts with prospective data on falls

	Validation in LASA ^a	Validation in B-PROOF ^b	Validation in ActiFE Ulm ^c
C-statistic (95% CI) ^d	0.67 (0.64-0.70)	0.65 (0.63-0.67)	0.61 (0.58-0.65)
Intercept (95% CI) ^e	0.02 (-0.09-0.14)	-0.10 (-0.180.02)	0.07 (-0.04-0.19)
Slope (95% CI) ^e	1.11 (0.90-1.32)	0.84 (0.69-0.99)	0.69 (0.50-0.89)

^a Model was derived from B-PROOF and ActiFE Ulm and then validated in LASA

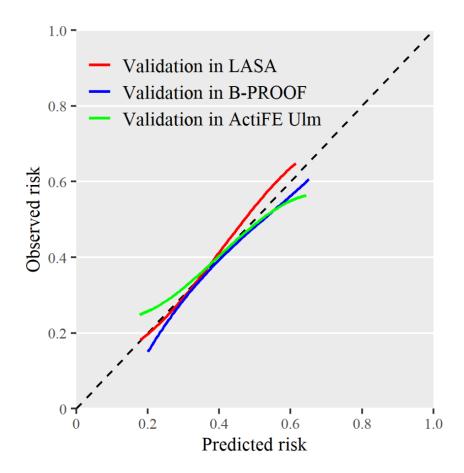
^b Model was derived from LASA and ActiFE Ulm and then validated in B-PROOF

^c Model was derived from LASA and B-PROOF and then validated in ActiFE Ulm

^d A C-statistic of 0.50 represents no discrimination and a C-statistic of 1.00 represents perfect discrimination

^e Intercept of 0 and slope of 1 represent perfect calibration

Supplementary Figure 2: Calibration plots for model for predicting any fall that was developed using a subset of the available candidate predictors. The calibration plots are based on internal-external cross-validation in the cohorts with prospective data on falls. Perfect calibration is represented by the dashed line.



Supplementary Table 6. Regression coefficients for the prediction models for any fall as developed within user groups of selected medications in the cohorts with prospective data

	Development populat	ion			
Predictor ^a	Users of beta- blocking agents (<i>n</i> = 1406)	Users of low-ceiling diuretics ($n = 891$)	Users of statins (<i>n</i> = 1148)	Users of ACE inhibitor ($n = 877$)	Users of proton pump inhibitor (<i>n</i> = 832)
Intercept	-2.459	-0.563	-0.887	-1.392	-0.485
Age (years)	0.021	_	_	_	_
Education	_	_	_	_	_
Middle	0.052	_	_	0.115	_
High	0.536	_	_	0.582	_
Depression score ^b	_	_	_	_	0.142
Able to perform tandem stand for 10s	_	-0.378	-0.409	_	-0.439
Symptoms of pain	_	_	_	0.357	_
Poor self-rated health	_	-	0.499	_	_
Grip strength (kg) ^b	-0.208	-	_	_	_
≥ 1 fall in previous 12 months	0.482	_	0.585	0.471	0.529

≥ 2 falls in previous 12 months	0.678	1.269	0.913	0.787	0.718
Use of calcium channel blockers	-0.358	_	_	_	-0.620
Use of Alpha-adrenoceptor antagonist	_	_	_	_	-0.723
Use of antiepileptics	0.924	_	_	1.248	1.251
Use of opioids	_	_	_	0.890	_
Use of drugs for urinary frequency and incontinence	_	_	_	_	1.023
Use of antihistamines	_	_	0.970	_	_

ACE, angiotensin-converting enzyme

^a Only predictors that were included in at least one of the models are shown

^b OR refers to standardized Z-score, which were used for the purpose of harmonization. Z-scores are calculated as: Z-score grip strength_{LASA} = (kg - 29.015)/10.244; Z-score grip strength_{B-PROOF} = (kg - 32.484)/10.841; Z-score grip strength_{ActiFE Ulm} = (kg - 33.364)/11.412; Z-score gait speed_{LASA} = (m/s - 0.828)/0.287; Z-score gait speed_{B-PROOF} = (m/s - 0.942)/0.276; Z-score gait speed_{ActiFE Ulm} = (m/s - 1.035)/0.327

Supplementary Table 7. Performance of the prediction models for any fall as developed within user groups of selected medications in the cohorts with prospective data

	C-statistic for subgroup-specific	C-statistic for ADFICE IT model
User group	model ^a	for predicting any fall ^a
Users of beta-blocking agents ($n = 1406$)	0.66	0.67
Users of low-ceiling diuretics ($n = 891$)	0.61	0.66
Users of statins $(n = 1148)$	0.66	0.68
Users of ACE inhibitors $(n = 877)$	0.66	0.66
Users of proton pump inhibitors ($n = 832$)	0.69	0.69

ACE, angiotensin-converting enzyme

^a Optimism-adjusted C-statistic measures were obtained via a bootstrap procedure using 200 samples for each prediction model. A C-statistic of 0.50 represents no discrimination and a C-statistic of 1.00 represents perfect discrimination.

Supplementary Table 8. Final model for history of falls in community-dwelling older adults derived from the European studies with retrospective data on falls

Predictor	Beta ^a	OR (95% CI)
Intercept	-1.775	
Cohort		
LASA (wave 3B)	-0.214	0.81 (0.66-0.99)
B-PROOF	0.017	0.92 (0.79-1.08)
Rotterdam Study	-0.389	0.62 (0.54-0.71)*
ActiFE Ulm	-0.079	1.02 (0.86-1.21)
TILDA	-0.476	0.68 (0.59-0.78)*
Age (years)	0.009	1.01 (1.00-1.02)*
Sex, female	-0.131	0.88 (0.79-0.97)*
Education		
Middle	0.075	1.08 (0.98-1.18)
High	0.187	1.21 (1.11-1.32)*
Living with partner	-0.106	0.90 (0.83-0.97)*
Depression score ^b	0.041	1.04 (1-1.09)
Hearing impairment	0.212	1.24 (1.13-1.35)*
Symptoms of dizziness	0.174	1.19 (1.04-1.37)
BMI	-0.013	0.99 (0.98-1.00)*
Weight loss in past 3-6 months	0.218	1.24 (1.07-1.44)*
Able to perform tandem stand for 10s	-0.133	0.88 (0.79-0.97)*
Symptoms of pain	0.173	1.19 (1.09-1.3)*
Number of functional limitations (0-5) ^b	0.095	1.10 (1.05-1.15)*
Grip strength (kg) ^b	-0.111	0.90 (0.85-0.95)*
Urinary incontinence	0.341	1.41 (1.27-1.56)*
Fear of falling		
Somewhat afraid of falling	0.341	1.41 (1.29-1.53)*
Very afraid of falling	0.520	1.68 (1.42-1.99)*
Stroke ever	-0.151	0.86 (0.72-1.03)
Total physical activity (MET/week) ^b	0.053	1.05 (1.02-1.09)*
Alcohol use		
Drinks less than once a month	0.053	1.05 (0.93-1.20)
Drinks 1-3 times a month	0.128	1.14 (1.01-1.28)
Drinks 1-4 days a week	0.159	1.17 (1.06-1.30)*

Drinks (almost) daily	0.146	1.16 (1.04-1.30)*
Current smoker	-0.151	0.86 (0.78-0.95)*
eGFR (mL/min)	0.004	1.00 (1.00-1.01)*
Use of antiarrhythmics	0.298	1.35 (1.05-1.73)*
Use of antiadrenergic agents	-0.272	0.76 (0.57-1.02)
Use of low-ceiling diuretics	-0.085	0.92 (0.83-1.01)
Use of antidepressants	0.294	1.34 (1.18-1.53)*
Use of antiepileptics	0.203	1.23 (1.00-1.50)

BMI, body mass index; CI, confidence interval; MET, Metabolic Equivalent of Task; eGFR, estimated glomerular filtration rate

^a Coefficients were corrected for overfitting with a shrinkage factor of 0.85

b OR refers to standardized Z-score, which were used for the purpose of harmonization. Z-scores are calculated as: Z-score depression_{LASA} (wave C) = (CES-D score − 7.980)/ 7.826; Z-score depression_{LASA} (wave $_{3B}$) = (CES-D score − 7.198)/7.008; Z-score depression_{B-PROOF} = (GDS score − 1.440)/1.942; Z-score depression $_{Rotterdam}$ Study = (CES-D score − 5.689)/7.177; Z-score depression_{ActiFE} Ulm = (HADS-D score − 3.802)/2.899; Z-score depression_{TILDA} = (CES-D − 5.860)/7.226; Z-score functional limitations_{LASA} (wave $_{3B}$) = (number of functional limitations − 1.209)/1.529; Z-score functional limitations_{LASA} (wave $_{3B}$) = (number of functional limitations − 1.530)/1.662; Z-score functional limitations_{ActiFE} Ulm = (number of functional limitations − 1.013)/1.362; Z-score functional limitations_{TILDA} = (number of functional limitations − 0.500)/0.903; Z-score grip strength_{LASA} (wave C) = (kg − 29.015)/10.244; Z-score grip strength_{LASA} (wave 3B) = (kg − 35.541)/12.311; Z-score grip strength_{B-PROOF} = (kg − 32.484)/10.841; Z-score grip strength_{Rotterdam} Study = (kg − 28.027)/10.322; Z-score physical activity_{LASA} (wave C and wave 3B), B-PROOF, Rotterdam Study, and ActiFE Ulm = (kg − 28.052)/10.041; Z-score physical activity_{LASA} (wave C and wave 3B), B-PROOF, Rotterdam Study, and ActiFE Ulm = (MET-min/week − 4005.135)/3059.858; Z-score physical activity_{TILDA} = (MET-min/week − 2927.648)/3382.322

^{*} p < 0.01

Supplementary Table 9. Performance of the model for history of a fall based on internal-external cross-validation in the cohort studies with retrospective data on falls

		Validation in				
	Validation in	LASA (wave	Validation in B-	Validation in the	Validation in	Validation in
	LASA (wave C) ^a	3B) ^b	$PROOF^{c}$	Rotterdam Study ^d	ActiFE Ulme	TILDA ^f
C-statistic (95% CI) ^g	0.62 (0.58-0.65)	0.60 (0.55-0.65)	0.66 (0.63-0.68)	0.67 (0.65-0.69)	0.66 (0.63-0.69)	0.64 (0.63-0.66)
Intercept (95% CI) ^h	0.33 (0.21-0.44)	0.21 (0.05-0.36)	0.27 (0.17-0.37)	-0.39 (-0.46	0.39 (0.27-0.50)	-0.25 (-0.33
				0.32)		0.16)
Slope (95% CI) ^h	0.65 (0.48-0.82)	0.65 (0.34-0.96)	0.90 (0.75-1.05)	0.97 (0.86-1.09)	0.98 (0.78-1.18)	0.93 (0.83-1.03)

^a The model was developed using all studies except for LASA (wave C)

^b The model was developed using all studies except for LASA (wave 3B)

^c The model was developed using all studies except for B-PROOF

^d The model was developed using all studies except for the Rotterdam Study

^e The model was developed using all studies except for ActiFE Ulm

^f The model was developed using all studies except for TILDA

^g A C-statistic of 0.50 represents no discrimination and a C-statistic of 1.00 represents perfect discrimination

^h Intercept of 0 and slope of 1 represent perfect calibration