Supplemental Online Content

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This supplemental material has been provided by the authors to give readers additional information about their work.

eAppendix 1. Description of the source, the measurement, and the categorization of covariates

Information on calendar year of birth (1973-1978, 1979-1984, 1985-1990, 1991-1996, 1997-2002, 2003-2008, 2009-2016), sex (boy or girl), gestational age, birth weight, and multiple/singleton birth was obtained from the Medical Birth Registers (MBR) in Denmark, Finland, and Sweden. Gestational age was based on routine ultrasound examinations performed in early second trimester or date of last menstrual period (LMP). Ultrasound examinations was not uniformly introduced until the mid-1990s in Denmark, Sweden and Finland. In the rare event of missing information on ultrasound examinations, we used LMP (if it was available) to estimate gestational age. We excluded offspring with abnormal gestational age (<154 or >315 days) or with abnormal birth weight (more than five standard deviations below or above the mean).

Diagnoses of congenital anomalies in study participants were extracted from the Danish National Patient Register (DNPR), the Swedish Patient Register (SPR) and the Finnish Hospital Discharge Register (FHDR) using the International Statistical Classification of Diseases and Related Health Problems (ICD) codes: ICD-8/9: 740-759 and ICD-10: Q00-Q99.

Maternal country of origin (same as the study country versus not) and marital status before delivery (married/registered partnership versus not) was identified from the Danish Civil Registration System, the Finnish Central Population Register, and the Swedish Total Population Register. Data on the mother's highest education before delivery was obtained from the Danish Integrated Database for Labour Market Research, the Education Register at Statistics Finland, and the Swedish Register of Education. From the MBR we also obtained data on maternal age at delivery (≤ 19 , 20-24, 25-29, 30-34, and ≥ 35 years), parity (1,2, ≥ 3), body mass index (BMI, not available in our Finnish data) and smoking (yes or no) in early pregnancy. Maternal BMI was categorized as underweight (BMI <18.5 kg/m²), normal weight (18.5–24.9 kg/m²), overweight (25.0–29.9 kg/m²), and obesity (≥ 30.0 kg/m²).

Information on maternal diabetes before delivery (including pregestational diabetes and gestational diabetes mellitus) was retrieved from the DNPR, FHDR, and Swedish MBR using the following ICD codes: (1) in Denmark: ICD-8: 249, 250; ICD-10: E10-E14, O24; (2) in Finland: ICD-9: 250, 648A, 6488A; ICD-10: E10-E14, O24; and (3) in Sweden: ICD-8: 250; ICD-9: 250, 648A, 648W; ICD-10: E10-E14, O24. To retrieve information on maternal family history of CVDs before delivery, we identified the mother's family members from the Danish Civil Registration System and the Swedish Multi-Generation Register, and then extracted their CVD diagnoses from the DNPR, the Danish Register of Cause of Death, the SPR, and the Swedish Cause of Death Register using ICD-8/9: 390–459 and ICD-10: I00-I99.

Our criteria for selecting confounders were (1) a known or an a-priori hypothesized association with both exposure and outcome and (2) not being on the causal pathway between exposure and outcome.

eAppendix 2. Description of our sibling analysis

The sibling analysis included all sibling pairs from our whole population. Firstly, we identified the mothers who had two or more biological children, and created a sub-cohort of these sibling pairs. Secondly, we performed analyses in this sibling sub-cohort using a stratified Cox regression with a separate stratum for each family identified by the mother's identification number. We adjusted for the same covariates as in the analyses involving the whole population. Only sibling pairs discordant for exposure and outcome contributed to the estimates in the analyses.

The sibling analysis included 7 031 134 sibling pairs with 2 808 293 mothers, among them 15 851 mothers had recurrent preeclampsia. The number of sibling pairs discordant for exposure to maternal preeclampsia and the diagnosis of ischemic heart disease or stroke in their lives was 290 027, 14 093, or 21 998, respectively.

Data source	Information	Period covered		
Denmark				
Danish Civil Registration System	Sex, birth date, place of birth, vital status, linkage to parents and siblings, marital status, and migration	1968-2016		
Danish Integrated Database for Labour Market Research	Mother's highest completed educational attainment	1980-2016		
Danish Medical Birth Register	Child's birth date, sex, gestational age, birth weight, singleton status, mother's body mass index (available since 2003) and smoking in early pregnancy (available since 1991), age at delivery and parity	1973-2016		
Danish National Patient Register	Information on inpatient and outpatient care (diagnosis, date)	Inpatient care: 1977- 2016; outpatient care and emergency department contacts: 1995-2016		
Danish Register of Causes of Death	Date of death and cause of death	1970-2016		
Finland				
Finnish Central Population Register	Sex, date of birth, death, marital status, and migration	1968-2014		
Education Register at Statistics Finland	Mother's highest completed educational attainment	1970-2014		
Finnish Medical Birth Register	Child's birth date, sex, gestational age, birth weight, singleton status, mother's smoking in early pregnancy, age at delivery and parity	1987-2014		
Finnish Hospital Discharge Register	Information on inpatient and outpatient care (diagnosis, date)	Inpatient care: 1969- 2014; outpatient care contacts: 1998-2014		
Finnish Causes of Death Register	Date of death and cause of death	1969-2014		
Sweden				
Swedish Total Population Register	Sex, birth date, place of birth, civil status, marital status, and migration	1968-2014		

eTable 1. Description of Danish, Finnish, and Swedish registers used in this study

Swedish Multi-Generation	Relationships for all residents born	1961-2014
Register	since 1932. The index persons	
	must have been registered since	
	1961 in order to be included.	
Swedish Register of	Mother's highest completed	1985-2014
Education	educational attainment	
Swedish Medical Birth	Child's birth date, sex, gestational	1973-2014
Register	age, birth weight, singleton status,	
	mother's age at delivery, parity,	
	complications during pregnancy,	
	smoking and body mass index	
	during pregnancy (available since	
	1982)	
Swedish Patient Register	Information on inpatient and	Inpatient care: 1964-
	outpatient care (diagnosis, date)	2014 (its coverage
		became nationwide
		since 1987); outpatient
		care: 2001-2014
Swedish Cause of Death	Date and cause of death	1952-2014
Register		

	ICD-8	ICD-9	ICD-10	
Pre-existin	g chronic hypertension			
Denmark	400.09, 400.19, 400.29, 400.39,		110, 111, 112, 113,	
а	400.99, 401.99		I15, O10, O11	
Finland ^b		4019, 4029,	110, 111, 112, 113,	
		4039, 4040,	I15, O10, O11	
		4059, 6420,		
		6421, 6422, 6427		
Sweden ^c	400, 401, 402, 403, 404	401, 402, 403,	110, 111, 112, 113,	
		404, 405, 642A,	I15, O10, O11	
		642B, 642C,		
		642H		
Gestationa	al hypertension	I	Γ	
Denmark	637.00, 760.29		O13, O16	
a				
Finland ^b		6423, 6429	013, 016	
Sweden ^c	637.01	642D, 642X	O13, O16	
Preeclamp	sia	Γ	Γ	
Denmark	637.03, 637.04, 637.09, 637.19		014, 015	
a				
Finland ^b		6424, 6425, 6426	014, 015	
Sweden ^c	637.03, 637.04, 637.09, 637.99,	642E, 642F,	O14, O15	
	637.10	642G		
Mild/mode	rate preeclampsia	Γ	Γ	
Denmark ª	637.03, 637.09		014.0, 014.9	
Finland ^b		6424	014.0, 014.9	
Sweden ^c	637.03, 637.09, 637.99	642E	014.0, 014.9	
Severe pre	eclampsia			
Denmark	637.04, 637.19		014.1, 014.2,	
а			O15	
Finland ^b		6425, 6426	014.1, 015	
Sweden ^c	637.04, 637.10	642F, 642G	014.1, 014.2,	
			O15	

eTable 2. International Classification of Diseases codes for hypertensive disorders of pregnancy

Abbreviations: ICD, International Statistical Classification of Diseases and Related Health Problems.

^a In Denmark, the information about maternal hypertensive disorders during pregnancy was extracted from the Danish National Patient Register. We used ICD-8 up to 1995 and ICD-10 afterwards.

^b In Finland, the information about maternal hypertensive disorders during pregnancy was extracted from the Finnish Hospital Discharge Register. We used of ICD-9 up to 1995 and ICD-10 afterwards.

^c In Sweden, the information about maternal hypertensive disorders during pregnancy was extracted from the Swedish Medical Birth Register. We used ICD-8 up to 1986, ICD-9 from 1987 to 1996, and ICD-10 afterwards.

	ICD-8	ICD-10	
Ischemic	heart disease		
Denmar	410-414		120-125
k ^a			
Finland		4100, 4109, 4110, 4120, 4121, 4131, 4140,	120-125
b		4148, 4149	
Sweden	410-414	410-414	120-125
с			
Stroke	r		
Denmar	430, 431, 433,		160, 161, 163,
k ^a	434, 436		164
Finland		430, 431, 433, 434, 436	160, 161, 163,
b			164
Sweden	430, 431, 433,	430, 431, 433, 434, 436	160, 161, 163,
с	434, 436		164
Hemorrh	agic stroke		
Denmar	430, 431		160, 161
k ^a			
Finland		430, 431	160, 161
b			
Sweden	430, 431	430, 431	160, 161
С			
Ischemic	stroke		
Denmar	433, 434		163, 164
k ^a			
Finland		433, 434	163, 164
b			
Sweden	433, 434	433, 434	163, 164
С			

eTable 3. International Classification of Diseases codes for ischemic heart disease and stroke

Abbreviations: ICD, International Statistical Classification of Diseases and Related Health Problems.

^a In Denmark, the information about ischemic heart disease and stroke and its subtypes was extracted from the Danish National Patient Register and the Danish Register of Cause of Death. We used the Danish version of ICD-8 up to 1995 and ICD-10 afterwards.

^b In Finland, the information about ischemic heart disease and stroke and its subtypes was extracted from the Finnish Hospital Discharge Register and Finnish Caused of Death Register. We used the Finnish version of ICD-9 up to 1995 and ICD-10 afterwards.

^c In Sweden, the information about ischemic heart disease and stroke and its subtypes was extracted from the Swedish Patient Register and the Swedish Cause of Death Register. We used the Swedish version of ICD-8 up to 1986, ICD-9 from 1987 to 1996, and ICD-10 afterwards.

	Mild/moderate preeclampsia	Severe preeclampsia N (%)						
	N (%)							
Timing of onset								
Late-onset	118 187 (86.7)	31 001 (66.7)						
Early-onset	18 177 (13.3)	15 506 (33.3)						
Preeclampsia with/without	ut SGA							
Without SGA	109 908 (80.6)	27 451 (59.0)						
With SGA	26 456 (19.4)	19 056 (41.0)						

eTable 4. The number and rates of preeclampsia according to its severity

Abbreviations: SGA, small for gestational age (i.e., birth weight below the 10th percentile of the Swedish sex-specific

standard curve for normal fetal growth); HR

eTable 5. Incidence rates and hazard ratios with 95% confidence intervals for ischemic heart disease and stroke according to preeclampsia, by attained age

Exposure	Number of	Rate, per	Crude HR (95%	Adjusted HR (95%							
	events	10,000	CI)	CI) ^a							
		person-									
		years									
Ischemic heart disease											
Attained age <18 years	ars										
Normotensive	1,021	0.09	1.00	1.00							
pregnancy											
Preeclampsia	27	0.11	1.23 (0.84-1.80)	1.07 (0.73-1.57)							
Attained age ≥18 yea	ars										
Normotensive	6,216	1.30	1.00	1.00							
pregnancy											
Preeclampsia	106	1.45	1.59 (1.31-1.93)	1.42 (1.20-2.07)							
Stroke											
Attained age <18 years	ars										
Normotensive	3,408	0.31	1.00	1.00							
pregnancy											
Preeclampsia	126	0.52	1.69 (1.41-2.02)	1.57 (1.31-1.88)							
Attained age ≥18 yea	ars										
Normotensive	7,137	1.49	1.00	1.00							
pregnancy											
Preeclampsia	107	1.47	1.20 (0.99-1.45)	1.13 (0.93-1.37)							

Abbreviations: HR, hazard ratio; CI, confidence interval.

^a We adjusted for calendar year of birth, sex, maternal parity, age, education, marital status, and diabetes before childbirth.

eTable 6. Incidence rates and hazard ratios with 95% confidence intervals for stroke subtypes according to maternal preeclampsia and its subtypes

Exposure		Hemorr	hagic stroke		Ischemic stroke			
	Number of	Rate, per	Crude HR	Adjusted HR	Number	Rate, per	Crude HR	Adjusted HR
	events	10,000	(95% CI)	(95% CI) ^a	of events	10,000	(95% CI)	(95% CI) ^a
		person-				person-		
		years				years		
Normotensive	4,848	0.31	1.00	1.00	5,597	0.35	1.00	1.00
pregnancy								
Preeclampsia	101	0.32	1.25 (1.03-	1.23 (1.01-	131	0.42	1.61 (1.35-	1.44 (1.21-1.72)
			1.53)	1.50)			1.91)	
Onset of preeclamps	ia	-				-		
Late onset	65	0.26	1.07 (0.84-	1.03 (0.81-	91	0.36	1.51 (1.23-	1.34 (1.09-1.65)
			1.37)	1.32)			1.86)	
Early onset	27	0.58	2.61 (1.79-	2.50 (1.71-	32	0.68	3.13 (2.21-	2.55 (1.80-3.61)
			3.82)	3.66)			4.43)	
Severity of preeclam	psia							
Mild/moderate	73	0.30	1.13 (0.90-	1.11 (0.88-	97	0.40	1.47 (1.20-	1.33 (1.09-1.63)
			1.43)	1.40)			1.80)	
Severe	28	0.40	1.74 (1.20-	1.74 (1.20-	34	0.49	2.22 (1.58-	1.91 (1.36-2.67)
			2.52)	2.52)			3.10)	
Preeclampsia with/with	ithout SGA							
Without SGA	62	0.27	1.16 (0.90-	1.11 (0.86-	86	0.38	1.61 (1.30-	1.41 (1.14-1.74)
			1.49)	1.43)			1.99)	
With SGA	30	0.42	1.80 (1.26-	1.74 (1.22-	36	0.50	2.18 (1.57-	1.90 (1.37-2.64)
			2.58)	2.50)			3.02)	

Other hypertensive disorders during pregnancy										
Pre-existing chronic	15	0.35	1.80 (1.08-	1.82 (1.10-	15	0.35	1.86 (1.12-	1.44 (0.87-2.40)		
hypertension			2.99)	3.04)			3.10)			
Gestational	45	0.29	1.17 (0.87-	1.17 (0.87-	67	0.43	1.71 (1.34-	1.55 (1.22-1.97)		
hypertension			1.56)	1.57)			2.18)			

Abbreviations: SGA, small for gestational age (i.e., birth weight below the 10th percentile of the Swedish sex-specific standard curve for normal fetal growth); HR, hazard ratio; CI, confidence interval.

^a We adjusted for calendar year of birth, sex, maternal parity, age, education, marital status, and diabetes before childbirth.

eTable 7. Incidence rates and hazard ratios with 95% confidence intervals for ischemic heart disease and stroke according to preeclampsia, stratified by study country

Exposure	Number of events	Rate, per	Crude HR (95% CI)	Adjusted HR (95% CI) ^a	P-value for interaction
		10,000			
		person-years			
Ischemic heart disease ^b					
Denmark					
Normotensive pregnancy	4,972	0.90	1.00	1.00	
Preeclampsia	98	0.68	1.11 (0.91-1.36)	1.09 (0.89-1.33)	
Sweden					0.92
Normotensive pregnancy	1,457	0.18	1.00	1.00	
Preeclampsia	16	0.13	1.45 (0.88-2.37)	1.37 (0.83-2.25)	
Finland					0.28
Normotensive pregnancy	808	0.37	1.00	1.00	
Preeclampsia	19	0.43	1.10 (0.70-1.73)	1.14 (0.72-1.79)	
Stroke ^b					
Denmark					
Normotensive pregnancy	5,357	0.97	1.00	1.00	
Preeclampsia	144	1.00	1.26 (1.07-1.48)	1.22 (1.04-1.44)	
Sweden					0.86
Normotensive pregnancy	4,250	0.52	1.00	1.00	
Preeclampsia	63	0.50	1.36 (1.06-1.74)	1.24 (0.97-1.59)	
Finland					0.71
Normotensive pregnancy	938	0.43	1.00	1.00	
Preeclampsia	26	0.58	1.32 (0.89-1.95)	1.32 (0.89-1.94)	

Abbreviations: HR, hazard ratio; CI, confidence interval.

^a We adjusted for calendar year of birth, sex, maternal parity, age, education, marital status, and diabetes before childbirth.

eTable 8. Incidence rates and hazard ratios with 95% confidence intervals for ischemic heart disease and stroke according to preeclampsia, stratified by the child's sex

Exposure	Number of events	Rate, per 10,000	Crude HR (95% CI)	Adjusted HR (95% CI) ^a	P-value for interaction
		person-years			
Ischemic heart disease ^b					
Boys					0.42
Normotensive pregnancy	4,640	0.57	1.00	1.00	
Preeclampsia	80	0.49	1.33 (1.06-1.66)	1.26 (1.01-1.57)	
Girls					
Normotensive pregnancy	2,597	0.34	1.00	1.00	
Preeclampsia	53	0.35	1.53 (1.17-2.01)	1.47 (1.12-1.93)	
Stroke ^b					
Boys					0.95
Normotensive pregnancy	5,493	0.67	1.00	1.00	
Preeclampsia	124	0.76	1.36 (1.13-1.62)	1.32 (1.11-1.58)	
Girls					
Normotensive pregnancy	5,052	0.65	1.00	1.00	
Preeclampsia	109	0.72	1.38 (1.14-1.67)	1.35 (1.11-1.63)	

Abbreviations: HR, hazard ratio; CI, confidence interval.

^a We adjusted for calendar year of birth, maternal parity, age, education, marital status, and diabetes before childbirth.

eTable 9. Incidence rates and hazard ratios with 95% confidence intervals for ischemic heart disease and stroke according to preeclampsia and its subtypes, in children without congenital anomalies

Exposure		Ischemic heart disease				Stroke			
	Number of events	Rate, per 10,000	Crude HR (95% CI)	Adjusted HR (95% Cl) ^a	Number of events	Rate, per 10,000	Crude HR (95% CI)	Adjusted HR (95% CI) ^a	
		vears				vears			
Normotensive pregnancy	5,940	0.41	1.00	1.00	8,001	0.55	1.00	1.00	
Preeclampsia	96	0.35	1.35 (1.10- 1.65)	1.28 (1.04- 1.57)	155	0.56	1.28 (1.09- 1.50)	1.25 (1.06-1.46)	
Onset of preeclamps	ia								
Late onset	66	0.29	1.31 (1.03- 1.68)	1.25 (0.98- 1.60)	106	0.47	1.14 (0.94- 1.38)	1.12 (0.92-1.35)	
Early onset	13	0.34	1.73 (1.01- 2.98)	1.62 (0.94- 2.79)	36	0.94	2.38 (1.72- 3.31)	2.32 (1.67-3.22)	
Severity of preeclam	psia			• •			· · ·		
Mild/moderate	78	0.36	1.32 (1.06- 1.65)	1.24 (0.99- 1.56)	114	0.53	1.16 (0.97- 1.40)	1.13 (0.94-1.36)	
Severe	18	0.30	1.46 (0.92- 2.32)	1.45 (0.91- 2.31)	41	0.68	1.75 (1.29- 2.38)	1.74 (1.28-2.36)	
Preeclampsia with/with	ithout SGA			• •			· · ·		
Without SGA	58	0.29	1.51 (1.16- 1.95)	1.23 (0.95- 1.59)	102	0.51	1.31 (1.08- 1.60)	1.20 (0.99-1.46)	
With SGA	21	0.35	1.87 (1.22- 2.87)	1.58 (1.03- 2.43)	39	0.64	1.69 (1.24- 2.32)	1.56 (1.14-2.14)	
Other hypertensive d	isorders during	pregnancy							
Pre-existing chronic hypertension	7	0.18	1.23 (0.58- 2.58)	1.21 (0.57- 2.54)	23	0.60	1.73 (1.15- 2.61)	1.77 (1.18-2.68)	
Gestational hypertension	54	0.38	1.59 (1.21- 2.08)	1.58 (1.21- 2.07)	80	0.57	1.32 (1.06-	1.34 (1.07-1.67)	

Abbreviations: SGA, small for gestational age (i.e., birth weight below the 10th percentile of the Swedish sex-specific standard curve for normal fetal growth); HR, hazard ratio; CI, confidence interval. ^a We adjusted for calendar year of birth, sex, maternal parity, age, education, marital status, and diabetes before childbirth. eTable 10. Incidence rates and hazard ratios with 95% confidence intervals for ischemic heart disease and stroke according to preeclampsia and its subtypes, in children with information on maternal country of origin

Exposure		Ischemic h	eart disease			St	roke	
	Rate, per 10,000 person- years	Adjusted HR in the whole population (95% CI) ^a	Adjusted HR in the restricted population (95% Cl) ^b	Adjusted HR in the restricted population (95% CI) ^c	Rate, per 10,000 person- years	Adjusted HR in the whole population (95% CI) ^a	Adjusted HR in the restricted population (95% Cl) ^b	Adjusted HR in the restricted population (95% Cl) ^c
Normotensive pregnancy	0.47	1.00	1.00	1.00	0.70	1.00	1.00	1.00
Preeclampsia	0.42	1.33 (1.12- 1.58)	1.43 (1.19- 1.73)	1.44 (1.20- 1.74)	0.77	1.34 (1.17- 1.52)	1.34 (1.17- 1.54)	1.34 (1.16- 1.54)
Onset of preeclampsia	1						• •	•
Late onset	0.36	1.31 (1.06- 1.61)	1.48 (1.18- 1.85)	1.48 (1.18- 1.85)	0.66	1.18 (1.01- 1.39)	1.22 (1.03- 1.44)	1.22 (1.03- 1.44)
Early onset	0.36	1.62 (1.03- 2.55)	1.66 (0.98- 2.81)	1.68 (0.99- 2.84)	1.27	2.55 (1.97- 3.28)	2.45 (1.85- 3.24)	2.45 (1.85- 3.24)
Severity of preeclamps	sia	• /				• •	· · ·	•
Mild/moderate	0.47	1.33 (1.10- 1.61)	1.46 (1.17- 1.83)	1.47 (1.20- 1.80)	0.77	1.22 (1.05- 1.42)	1.28 (1.09- 1.49)	1.27 (1.09- 1.49)
Severe	0.27	1.33 (0.89- 2.01)	1.29 (0.79- 2.11)	1.29 (0.79- 2.11)	0.84	1.81 (1.41- 2.32)	1.60 (1.21- 2.13)	1.60 (1.21- 2.13)
Preeclampsia with/with	hout SGA	. ,				• •	•	•
Without SGA	0.35	1.32 (1.06- 1.64)	1.41 (1.10- 1.80)	1.42 (1.11- 1.81)	0.69	1.25 (1.07- 1.48)	1.30 (1.09- 1.54)	1.29 (1.09- 1.54)
With SGA	0.42	1.50 (1.03- 2.18)	1.81 (1.22- 2.69)	1.82 (1.23- 2.70)	0.93	1.84 (1.44- 2.34)	1.78 (1.36- 2.31)	1.78 (1.36- 2.31)
Other hypertensive dis	orders during	pregnancy						
Pre-existing chronic hypertension	0.37	1.72 (1.02- 2.92)	2.24 (1.20- 4.18)	2.27 (1.22- 4.22)	0.78	1.60 (1.12- 2.30)	1.64 (1.07- 2.52)	1.64 (1.07- 2.53)
Gestational hypertension	0.44	1.44 (1.12- 1.84)	1.44 (1.08- 1.94)	1.45 (1.08- 1.95)	0.86	1.40 (1.16- 1.68)	1.45 (1.18- 1.79)	1.45 (1.17- 1.79)

Abbreviations: SGA, small for gestational age (i.e., birth weight below the 10th percentile of the Swedish sex-specific standard curve for normal fetal growth); HR, hazard ratio; CI, confidence interval.

^a In the whole population, we adjusted for calendar year of birth, sex, maternal parity, age, education, marital status, and diabetes before childbirth. ^b In study participants with information on maternal country of origin, we adjusted for calendar year of birth, sex, maternal parity, age, education, marital status, and diabetes before childbirth. ^c In study participants with information on maternal country of origin, we further adjusted for maternal country of origin.

eTable 11. Incidence rates and hazard ratios with 95% confidence intervals for ischemic heart disease and stroke according to preeclampsia and its subtypes, in children with information on maternal smoking during early pregnancy

Exposure	Ischemic heart disease				Stroke			
	Rate, per 10,000 person- years	Adjusted HR in the whole population (95% CI) ^a	Adjusted HR in the restricted population (95% CI) ^b	Adjusted HR in the restricted population (95% CI) ^c	Rate, per 10,000 person- years	Adjusted HR in the whole population (95% CI) ^a	Adjusted HR in the restricted population (95% Cl) ^b	Adjusted HR in the restricted population (95% Cl) ^c
Normotensive pregnancy	0.17	1.00	1.00	1.00	0.41	1.00	1.00	1.00
Preeclampsia	0.22	1.33 (1.12- 1.58)	1.20 (0.90- 1.62)	1.23 (0.92- 1.65)	0.53	1.34 (1.17- 1.52)	1.28 (1.06- 1.54)	1.29 (1.07- 1.56)
Onset of preeclampsia								
Late onset	0.21	1.31 (1.06- 1.61)	1.18 (0.86- 1.63)	1.21 (0.88- 1.68)	0.45	1.18 (1.01- 1.39)	1.07 (0.86- 1.34)	1.09 (0.87- 1.36)
Early onset	0.23	1.62 (1.03- 2.55)	1.37 (0.68- 2.75)	1.38 (0.69- 2.76)	0.99	2.55 (1.97- 3.28)	2.36 (1.68- 3.31)	2.37 (1.69- 3.32)
Severity of preeclampsia								
Mild/moderate	0.23	1.33 (1.10- 1.61)	1.25 (0.90- 1.75)	1.28 (0.92- 1.78)	0.47	1.22 (1.05- 1.42)	1.11 (0.88- 1.40)	1.12 (0.89- 1.41)
Severe	0.18	1.33 (0.89- 2.01)	1.05 (0.56- 1.96)	1.09 (0.58- 2.02)	0.73	1.81 (1.41- 2.32)	1.77 (1.30- 2.42)	1.80 (1.32- 2.46)
Preeclampsia with/with	out SGA		•	•			•	
Without SGA	0.24	1.32 (1.06- 1.64)	1.33 (0.96- 1.84)	1.37 (0.99- 1.89)	0.45	1.25 (1.07- 1.48)	1.06 (0.84- 1.34)	1.08 (0.85- 1.36)
With SGA	0.15	1.50 (1.03- 2.18)	0.88 (0.44- 1.75)	0.88 (0.44- 1.77)	0.83	1.84 (1.44- 2.34)	1.98 (1.46- 2.67)	1.99 (1.47- 2.68)
Other hypertensive disorders during pregnancy								
Pre-existing chronic hypertension	0.26	1.72 (1.02- 2.92)	1.66 (0.89- 3.10)	1.68 (0.90- 3.14)	0.52	1.60 (1.12- 2.30)	1.28 (0.82- 1.99)	1.29 (0.83- 2.01)
Gestational hypertension	0.24	1.44 (1.12- 1.84)	1.34 (0.92- 1.94)	1.36 (0.93- 1.97)	0.63	1.40 (1.16- 1.68)	1.49 (1.18- 1.88)	1.50 (1.19- 1.89)

Abbreviations: SGA, small for gestational age (i.e., birth weight below the 10th percentile of the Swedish sex-specific standard curve for normal fetal growth); HR, hazard ratio; CI, confidence interval.

^a In the whole population, we adjusted for calendar year of birth, sex, maternal parity, age, education, marital status, and diabetes before childbirth. ^b In study participants with information on maternal smoking during pregnancy, we adjusted for calendar year of birth, sex, maternal parity, age, education, marital status, and diabetes before childbirth. ^c In study participants with information on maternal smoking during pregnancy, we further adjusted for maternal smoking during early pregnancy.

eTable 12. Incidence rates and hazard ratios with 95% confidence intervals for ischemic heart disease and stroke according to preeclampsia and its subtypes, in children with information on maternal body mass index during early pregnancy

Exposure	Ischemic heart disease				Stroke				
	Rate, per 10,000 person- years	Adjusted HR in the whole population (95% Cl) ^a	Adjusted HR in the restricted population (95% Cl) ^b	Adjusted HR in the restricted population (95% Cl) ^c	Rate, per 10,000 person- years	Adjusted HR in the whole population (95% Cl) ^a	Adjusted HR in the restricted population (95% Cl) ^b	Adjusted HR in the restricted population (95% Cl) ^c	
Normotensive pregnancy	0.09	1.00	1.00	1.00	0.41	1.00	1.00	1.00	
Preeclampsia	0.10	1.33 (1.12- 1.58)	1.24 (0.66- 2.33)	1.21 (0.64- 2.27)	0.57	1.34 (1.17- 1.52)	1.38(1.06- 1.80)	1.35 (1.04- 1.76)	
Onset of preeclampsia									
Late onset	0.10	1.31 (1.06- 1.61)	1.28 (0.66- 2.48)	1.24 (0.64- 2.42)	0.50	1.18 (1.01- 1.39)	1.22 (0.91- 1.65)	1.20 (0.89- 1.62)	
Early onset	0.08	1.62 (1.03- 2.55)	0.98 (0.14- 7.01)	0.96 (0.13- 6.84)	1.10	2.55 (1.97- 3.28)	2.34 (1.38- 3.97)	2.29 (1.35- 3.88)	
Severity of preeclam	ipsia			•		· · · ·		<u>.</u>	
Mild/moderate	0.11	1.33 (1.10- 1.61)	1.33 (0.66- 2.69)	1.29 (0.64- 2.61)	0.57	1.22 (1.05- 1.42)	1.37 (1.01- 1.86)	1.34 (0.99- 1.83)	
Severe	0.07	1.33 (0.89- 2.01)	0.98 (0.24- 3.93)	0.96 (0.24- 3.84)	0.58	1.81 (1.41- 2.32)	1.41 (0.86- 2.30)	1.38 (0.84- 2.26)	
Preeclampsia with/w	vithout SGA							-	
Without SGA	0.08	1.32 (1.06- 1.64)	0.97 (0.43- 2.17)	0.94 (0.42- 2.11)	0.49	1.25 (1.07- 1.48)	1.17 (0.85- 1.63)	1.14 (0.82- 1.59)	
With SGA	0.17	1.50 (1.03- 2.18)	2.12 (0.79- 5.69)	2.09 (0.78- 5.60)	0.87	1.84 (1.44- 2.34)	2.11 (1.37- 3.24)	2.07 (1.34- 3.19)	
Other hypertensive disorders during pregnancy									
Pre-existing chronic hypertension	0.30	1.72 (1.02- 2.92)	3.76 (1.39- 10.14)	3.64 (1.35- 9.84)	0.52	1.60 (1.12- 2.30)	1.14 (0.54- 2.40)	1.10 (0.52- 2.33)	
Gestational hypertension	0.14	1.44 (1.12- 1.84)	1.62 (0.72- 3.62)	1.57 (0.70- 3.53)	0.72	1.40 (1.16- 1.68)	1.63 (1.14- 2.34)	1.60 (1.11- 2.30)	

Abbreviations: SGA, small for gestational age (i.e., birth weight below the 10th percentile of the Swedish sex-specific standard curve for normal fetal growth); HR, hazard ratio; CI, confidence interval.

^a In the whole population, we adjusted for calendar year of birth, sex, maternal parity, age, education, marital status, and diabetes before childbirth. ^b In study participants with information on maternal body mass index during pregnancy, we adjusted for calendar year of birth, sex, maternal parity, age, education, marital status, and diabetes before childbirth.

^c In study participants with information on maternal body mass index during pregnancy, we further adjusted for maternal body mass index during early pregnancy.

eTable 13. Incidence rates and hazard ratios with 95% confidence intervals for ischemic heart disease and stroke according to preeclampsia and its subtypes, in children with information on maternal family history of cardiovascular diseases

Exposure		Ischemic I	neart disease		Stroke				
	Rate, per 10,000 person- years	Adjusted HR in the whole population (95% CI) ^a	Adjusted HR in the restricted population (95% Cl) ^b	Adjusted HR in the restricted population (95% Cl) ^c	Rate, per 10,000 person- years	Adjusted HR in the whole population (95% Cl) ^a	Adjusted HR in the restricted population (95% Cl) ^b	Adjusted HR in the restricted population (95% Cl) ^c	
Normotensive pregnancy	0.47	1.00	1.00	1.00	0.70	1.00	1.00	1.00	
Preeclampsia	0.42	1.33 (1.12- 1.58)	1.43 (1.19- 1.72)	1.43 (1.19- 1.73)	0.77	1.34 (1.17- 1.52)	1.34 (1.16- 1.54)	1.34 (1.16- 1.54)	
Onset of preeclampsia									
Late onset	0.36	1.31 (1.06- 1.61)	1.46 (1.17- 1.83)	1.46 (1.17- 1.83)	0.66	1.18 (1.01- 1.39)	1.22 (1.03- 1.44)	1.22 (1.03- 1.62)	
Early onset	0.36	1.62 (1.03- 2.55)	1.66 (0.98- 2.80)	1.66 (0.98- 2.81)	1.27	2.55 (1.97- 3.28)	2.45 (1.85- 3.24)	2.44 (1.85- 3.23)	
Severity of preeclampsia									
Mild/moderate	0.47	1.33 (1.10- 1.61)	1.46 (1.19- 1.78)	1.46 (1.19- 1.78)	0.76	1.22 (1.05- 1.42)	1.27 (1.09- 1.49)	1.27 (1.09- 1.49)	
Severe	0.27	1.33 (0.89- 2.01)	1.29 (0.79- 2.10)	1.29 (0.79- 2.11)	0.80	1.81 (1.41- 2.32)	1.60 (1.21- 2.13)	1.60 (1.21- 2.13)	
Preeclampsia with/with	out SGA					· · · · ·			
Without SGA	0.35	1.32 (1.06- 1.64)	1.40 (1.10- 1.79)	1.40 (1.10- 1.79)	0.69	1.25 (1.07- 1.48)	1.29 (1.09- 1.54)	1.29 (1.09- 1.54)	
With SGA	0.42	1.50 (1.03- 2.18)	1.81 (1.22- 2.68)	1.81 (1.22- 2.68)	0.93	1.84 (1.44- 2.34)	1.77 (1.36- 2.31)	1.77 (1.36- 2.31)	
Other hypertensive disorders during pregnancy									
Pre-existing chronic hypertension	0.37	1.72 (1.02- 2.92)	2.23 (1.20- 4.16)	2.27 (1.22- 4.24)	0.82	1.60 (1.12- 2.30)	1.72 (1.13- 2.62)	1.73 (1.14- 2.63)	
Gestational hypertension	0.44	1.44 (1.12- 1.84)	1.44 (1.07- 1.93)	1.45 (1.08- 1.94)	0.86	1.40 (1.16- 1.68)	1.46 (1.18- 1.80)	1.46 (1.18- 1.80)	

Abbreviations: SGA, small for gestational age (i.e., birth weight below the 10th percentile of the Swedish sex-specific standard curve for normal fetal growth); HR, hazard ratio; CI, confidence interval.

^a In the whole population, we adjusted for calendar year of birth, sex, maternal parity, age, education, marital status, and diabetes before childbirth. ^b In study participants with information on maternal family history of cardiovascular diseases, we adjusted for calendar year of birth, sex, maternal parity, age, education, marital status, and diabetes before childbirth.

^c In study participants with information on maternal family history of cardiovascular diseases, we further adjusted for family history of cardiovascular diseases.



eFigure. Cumulative incidence of A, ischemic heart disease, and B, stroke according to preeclampsia