

## Supplemental Online Content

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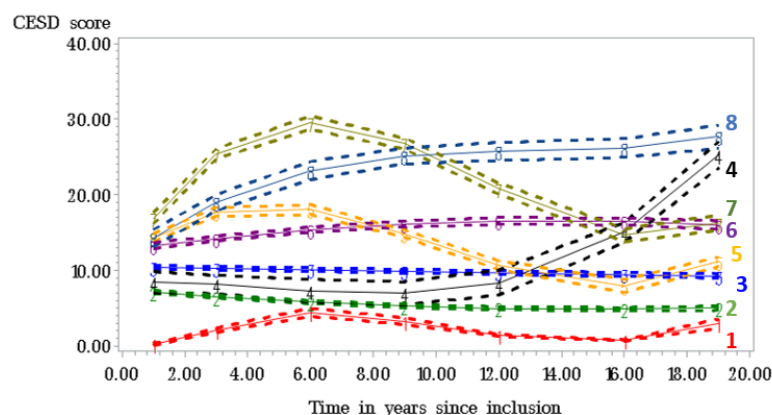
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This supplementary material has been provided by the authors to give readers additional information about their work.

## eMethods. Calculation of Trajectories of Depressive Symptoms

To calculate trajectories of depressive symptoms, we used a group-based trajectory modeling approach, which is based on a non-parametric mixed model.<sup>1</sup> We estimated the best-fitting number of trajectories based on a minimum Bayesian Information Criterion while maintaining at least 50 participants in each trajectory. Of the initially 8 trajectories obtained, we grouped them into 5 groups for clinical interpretation. The original 8 trajectories are given in eFigure 1 below. The figure shows trajectories of mean CES-D (Center for Epidemiologic Studies Depression Scale) scores over 19 years from the study population of 6,980 individuals, and with up to 7 measures of depressive symptoms. For clinical interpretation, we grouped together trajectories 1 and 2 which have both a CES-D score <10 at each follow-up examination round (new combined low trajectory in the main analysis). We also grouped together the trajectories 3 and 6 that had a CES-D score between 10 and 17 at each follow-up examination (new combined mild trajectory in the main analysis). Finally, we grouped together the trajectories 5 and 7 because these trajectories had the same pattern of moderately high starting CES-D scores, increasing, then remitting (new remitting trajectory in the main analysis). Trajectory 4 corresponds to the low-increasing trajectory and trajectory 8 to the high-increasing trajectory in the main analysis.



TRAJECTORY NUMBER	NUMBER OF PARTICIPANTS (%)	NUMBER OF OBSERVATIONS IN EACH TRAJECTORY DURING FU
1	296 (4,2%)	3851
2	2572 (36,9%)	21532
3	2687 (38,5%)	18072
4	57 (0,8%)	6770
5	424 (6,1%)	1543
6	692 (9,9%)	2343
7	161 (2,3%)	2612
8	91 (1,3%)	985

**eFigure 1. The initially obtained eight trajectories of depressive symptoms**

The figure shows trajectories of mean CES-D (Center for Epidemiologic Studies Depression Scale) scores over 19 years from 6,980 individuals, with up to 7 measures of depressive symptoms

**eTable 1.** Definition of Cardiovascular Health Metrics

<b>Metric</b>	<b>Intermediate/ideal level</b>	<b>Poor level</b>
<b>Smoking</b>	Never or quit smoking	Current smokers
<b>Body mass index</b>	<30 kg/m <sup>2</sup>	≥30 kg/m <sup>2</sup>
<b>Physical activity</b>	≥1h of sports per week	<1h of sports per week
<b>Healthy diet</b>	≥2 portions of fish/week and/or vegetables and fruits everyday	<2 portions of fish/week and <1 portion of fruits and vegetables per day
<b>Blood pressure</b>	No diagnosis of hypertension and no use of antihypertensive medication	Diagnosis of hypertension or use of antihypertensive medication
<b>Hyperglycemia</b>	No diagnosis of diabetes and no use of glucose-lowering medication	Diagnosis of diabetes or use of glucose-lowering medication
<b>Dyslipidemia</b>	No diagnosis of dyslipidemia and no use of lipid-modifying medication	Diagnosis of dyslipidemia or use of lipid-modifying medication

**eTable 2.** Characteristics Measured in 1997 of Included and Excluded Individuals

	Included	Excluded due to prior coronary heart disease or depressive symptoms in 1997	Excluded due to missing data
	<b>n=6980</b>	<b>n=3408</b>	<b>n=10239</b>
Age, mean (standard deviation), y	53.3 (3.5)	53.2 (3.4)	53.1 (3.5)
Women, %	1671 (23.9)	720 (21.1)	3223 (31.5)
Education level, %		<b>n=3340</b>	<b>n=9350</b>
High	1968 (28.2)	799 (23.9)	1935 (20.7)
Intermediate	4711 (67.5)	2344 (70.2)	6607 (70.7)
Low	301 (4.3)	197 (5.9)	808 (8.6)
Occupation level, %		<b>n=3340</b>	<b>n=9350</b>
High	2098 (30.1)	754 (22.6)	1769 (18.9)
Intermediate	4509 (64.6)	2291 (68.6)	6773 (72.4)
Low	373 (5.3)	295 (8.8)	808 (8.6)

Values are reported as No. (%) unless otherwise indicated.

**eTable 3.** Characteristics of the Total Study Population in 1997 According to the Trajectories of Depressive Symptoms<sup>a</sup>

	<b>Low trajectory (n=2868 (41.1%))</b>	<b>Mild trajectory (n=3379 (48.4%))</b>	<b>Low-increasing trajectory (n=57 (0.8%))</b>	<b>Remitting trajectory (n=585 (8.4%))</b>	<b>High-increasing trajectory (n=91 (1.3%))</b>
<b>Characteristics</b>					
Age, mean (SD), years	53.5 (10.3)	53.5 (12.9)	54.4 (12.0)	51.6 (3.8)	52.1 (15.9)
Women	412 (14.4%)	865 (25.6%)	14 (24.6%)	324 (55.4%)	56 (61.5%)
Education level					
High	840 (29.3%)	912 (27.0%)	11 (19.3%)	180 (30.8%)	25 (27.5%)
Intermediate	1920 (67%)	2315 (68.5%)	41 (71.9%)	375 (64.1%)	60 (65.9%)
Low	108 (3.8%)	152 (4.5%)	5 (8.8%)	30 (5.1%)	6 (6.6%)
Occupation level					
High	975 (34.0%)	976 (28.9%)	13 (22.87%)	116 (19.8%)	18 (19.8%)
Intermediate	1747 (60.9%)	2210 (65.4%)	40 (70.2%)	444 (75.9%)	68 (74.7%)
Low	146 (5.1%)	193 (5.7%)	4 (7.0%)	25 (4.3%)	5 (5.5%)
Cardiovascular health <sup>b</sup>					
Number of metrics at intermediate/ideal level in 1997, mean (SD)	4.9 (1.3)	4.8 (1.4)	4.5 (1.5)	5.0 (1.3)	4.7 (1.5)

Values are reported as No. (%) unless otherwise indicated.

<sup>a</sup> Depressive symptoms trajectories were calculated from 1997 up to 2015

<sup>b</sup> The cardiovascular health metrics included nonsmoking and intermediate or ideal levels of body weight, physical activity, diet, blood pressure, glucose and cholesterol.

**eTable 4.** Associations of Cardiovascular Health (in 1997) and 7-Year Change in Cardiovascular Health (Between 1990 and 1997) With Incident Depressive Symptoms—Results of Additional Analysis

	Adjusted odds ratio [95%CI] <sup>a,b</sup>
<b>Main analysis</b>	
Cardiovascular health per one additional intermediate/ideal metric	0.87 [0.84 - 0.91]
7-year change in cardiovascular health per one higher intermediate/ideal metric	0.91 [0.86 - 0.96]
<b>After excluding individuals with incident coronary heart disease (n=378 excluded)</b>	
Cardiovascular health per one additional intermediate/ideal metric	0.88 [0.84 - 0.92]
7-year change in cardiovascular health per one higher intermediate/ideal metric	0.91 [0.86 - 0.97]
<b>Only individuals included with complete follow-up data (total included in analysis n=4832, with 1269 individuals with depressive symptoms at one or more follow-up examinations)</b>	
Cardiovascular health per one additional intermediate/ideal metric	0.86 [0.82 - 0.91]
7-year change in cardiovascular health per one higher intermediate/ideal metric	0.88 [0.82 - 0.94]
<b>After multiple imputation (total number included in analysis 8,904)<sup>c</sup></b>	
Cardiovascular health per one additional intermediate/ideal metric	0.90 [0.86 - 0.93]
7-year change in cardiovascular health per one higher intermediate/ideal metric	0.93 [0.89 - 0.98]
<b>Incident depressive symptoms defined as CES-D ≥17 (total included in analysis n=6622, with 1957 individuals with depressive symptoms at one or more follow-up examinations)</b>	
Cardiovascular health per one additional intermediate/ideal metric	0.89 [0.86 - 0.93]
7-year change in cardiovascular health per one higher intermediate/ideal metric	0.87 [0.82 - 0.92]
<b>Incident depressive symptoms defined as CES-D ≥23 (total included in analysis n=7895, with 1243 individuals with depressive symptoms at one or more follow-up examinations)</b>	
Cardiovascular health per one additional intermediate/ideal metric	0.84 [0.80 - 0.89]
7-year change in cardiovascular health per one higher intermediate/ideal metric	0.81 [0.76 - 0.86]
<b>Incident depressive symptoms defined as CES-D ≥17 in men and CES-D ≥ 23 in women and/or use of antidepressant medication<sup>d</sup> (total included in analysis n=7354, with 1728 individuals with incident depressive symptoms)</b>	
Cardiovascular health per one additional intermediate/ideal metric	0.87 [0.82 - 0.92]
7-year change in cardiovascular health per one higher intermediate/ideal metric	0.92 [0.86 - 0.98]
<b>Excluding individuals with depressive symptoms within 3 years of follow-up (total included in analysis n=5808, with 976 individuals with depressive symptoms at one or more follow-up examinations)</b>	
Cardiovascular health per one additional intermediate/ideal metric	0.87 [0.82 - 0.92]
7-year change in cardiovascular health per one higher intermediate/ideal metric	0.91 [0.84 - 0.98]
<b>Additional adjustment for childhood life events<sup>e</sup> (total included in analysis n=6622)</b>	
Cardiovascular health per one additional intermediate/ideal metric	0.90 [0.85 - 0.94]
7-year change in cardiovascular health per one higher intermediate/ideal metric	0.94 [0.88 - 1.00]
<b>Additional adjustment for psychosocial work environment<sup>f</sup> (total included in analysis n=6219)</b>	
Cardiovascular health per one additional intermediate/ideal metric	0.88 [0.84 - 0.92]
7-year change in cardiovascular health per one higher intermediate/ideal metric	0.91 [0.86 - 0.97]
<b>Additional adjustment for psychosocial factors at work<sup>g</sup> (total included in analysis n=5125)</b>	
Cardiovascular health per one additional intermediate/ideal metric	0.85 [0.81 - 0.90]
7-year change in cardiovascular health per one higher intermediate/ideal metric	0.88 [0.82 - 0.94]

Abbreviations: CI=confidence interval, CES-D=Center for Epidemiologic Studies Depression Scale

<sup>a</sup> Odds ratios were adjusted for age, sex, education and occupation. <sup>b</sup> Analyses on 7-year change in cardiovascular health (between 1990 and 1997) were additionally adjusted for number of metrics at intermediate/ideal level in 1990

<sup>c</sup> Imputation of missing covariates (imputed in 887 individuals) and cardiovascular health metrics (imputed in 1037 individuals) with multiple imputation using fully conditional specification method under SAS MI procedure (n=10 imputations). Metrics were not imputed if participants had missing data on all individual cardiovascular health metrics (n=2658).

<sup>d</sup> Antidepressant medication use was available since 2007 via linkage with the French National claims data

<sup>e</sup> Presence of adverse childhood life events (before age 17) was evaluated in 2004 by the ACLE questionnaire (subscales: material deprivation, history of early separation and history of conflicts or violence).<sup>2</sup>

<sup>f</sup> Psychosocial work environment was evaluated in 1997 by the short version of the effort–reward imbalance questionnaire (subscales: effort, reward and over-commitment).<sup>3</sup>

<sup>g</sup> Psychosocial factors at work was evaluated in 1997 by the Karasek Job Content Questionnaire (scales: decision latitude, psychological demands, social support and physical demands).<sup>4</sup>

**eTable 5.** Associations of Individual Cardiovascular Health Metrics (Measured in 1997) With Incident Clinically Relevant Depressive Symptoms

<b>Intermediate/ideal vs poor level of each cardiovascular health metric in 1997</b>	<b>Number of individuals with intermediate/ideal cardiovascular health of the individual metric</b>	<b>Adjusted odds ratio [95% confidence interval]<sup>a</sup></b>
Smoking	5875	0.73 [0.64 - 0.83]
Body mass index	6398	0.86 [0.72 - 1.03]
Physical activity	2653	0.83 [0.75 - 0.93]
Healthy diet	1985	1.03 [0.91 - 1.15]
High blood pressure	5649	0.82 [0.72 - 0.93]
Hyperglycemia	6681	0.68 [0.54 - 0.86]
Dyslipidemia	4807	0.86 [0.77 - 0.97]

<sup>a</sup> Odds ratios were adjusted for age, sex, education and occupation. For each metric, the poor level is used as the reference category.

**eTable 6.** Associations of 7-Year Change in Each Cardiovascular Health Metric (Between 1990 and 1997) With Incident Clinically Relevant Depressive Symptoms

Change in cardiovascular health between 1990 and 1997	n	Adjusted odds ratio [95% confidence interval] <sup>a</sup>
<b>Smoking</b>		
Consistently poor	939	1 [reference]
Poor to intermediate/ideal	565	0.79 [0.63 - 0.99]
Intermediate/ideal to poor	166	1.33 [0.98 - 1.80]
Consistently intermediate/ideal	5310	0.76 [0.66 - 0.88]
<b>Body mass index</b>		
Consistently poor	258	1 [reference]
Poor to intermediate/ideal	39	1.55 [0.86 - 2.79]
Intermediate/ideal to poor	324	0.69 [0.49 - 0.97]
Consistently intermediate/ideal	6359	0.70 [0.55 - 0.90]
<b>Physical activity</b>		
Consistently poor	3651	1 [reference]
Poor to intermediate/ideal	673	0.97 [0.81 - 1.16]
Intermediate/ideal to poor	676	0.84 [0.70 - 1.02]
Consistently intermediate/ideal	1980	0.76 [0.67 - 0.86]
<b>Healthy diet</b>		
Consistently poor	4144	1 [reference]
Poor to intermediate/ideal	1139	0.99 [0.85 - 1.14]
Intermediate/ideal to poor	851	0.94 [0.79 - 1.11]
Consistently intermediate/ideal	846	0.89 [0.82 - 1.24]
<b>High blood pressure</b>		
Consistently poor	637	1 [reference]
Poor to intermediate/ideal	0 <sup>b</sup>	-
Intermediate/ideal to poor	694	0.97 [0.78 - 1.22]
Consistently intermediate/ideal	5649	0.80 [0.68 - 0.96]
<b>Hyperglycemia</b>		
Consistently poor	122	1 [reference]
Poor to intermediate/ideal	0 <sup>b</sup>	-
Intermediate/ideal to poor	177	1.28 [0.81 - 2.02]
Consistently intermediate/ideal	6681	0.79 [0.55 - 1.15]
<b>Dyslipidemia</b>		
Consistently poor	903	1 [reference]
Poor to intermediate/ideal	0 <sup>b</sup>	-
Intermediate/ideal to poor	1270	0.93 [0.77 - 1.11]
Consistently intermediate/ideal	4807	0.83 [0.71 - 0.97]

<sup>a</sup> Odds ratios were adjusted for age, sex, education and occupation. The consistently poor category is used as the reference category

<sup>b</sup> For the metrics high blood pressure, hyperglycemia and dyslipidemia, no individuals changed from a poor level (i.e. diagnosis of hypertension, diabetes or dyslipidemia or use of antihypertensive, glucose-lowering or lipid-modifying medication, respectively) to an intermediate/ideal level. For definition of individual metrics, see eTable 1.



## eReferences.

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