

SUPPLEMENTARY MATERIAL

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Table S 1. Characteristics of study sample used for diabetes prevalence estimation, SLHAS 2018/19 diabetes sample (unweighted sample and weighted percentage).

Sample characteristics	Unweighted N	Unweighted % / Mean (SD)	Weighted % / Mean (SD)	Reference value
Age (Mean)	6,661	50.1 (17.2)	43.9 (16.7)	-
18–29	969	14.5	25.1	25.1
30–39	1,130	17.0	20.8	20.8
40–49	1,179	17.7	18.0	18.0
50–59	1,157	17.4	16.2	16.2
60–69	1,151	17.3	11.6	11.6
70–79	877	13.2	6.1	6.1
80+	198	3.0	2.1	2.1
Sex				
Male	3,265	49.0	47.6	47.6
Female	3,396	51.0	52.4	52.4
Ethnicity				
Sinhala	4,703	70.6	74.9	74.9
Tamil	1,504	22.6	15.3	15.3
Muslim	428	6.4	9.5	9.5
Other	26	0.4	0.3	0.3
Religion				
Buddhist	4,379	65.7	69.1	-
Hindu	1,140	17.1	12.1	-
Muslim	428	6.4	9.4	-
Christian	646	9.7	8.3	-
Other	68	1.0	1.1	-
Education				
No formal schooling	255	3.9	2.9	-
Primary education	927	14.0	10.0	-
Secondary education	2,391	36.2	36.6	-
Passed O-level	1,632	24.7	26.3	-
Passed A-level	1,127	17.1	19.8	-
Degree and above	270	4.1	4.5	-
Sector				
Urban	2,024	30.4	19.6	19.6
Rural	3,657	54.9	70.6	70.6
Estate	170	2.6	0.7	0.7
Rural/Estate	810	12.2	9.2	9.2
Province				
Western	1,431	21.5	30.0	30.0
Central	976	14.7	12.5	12.5
Southern	851	12.8	12.3	12.3
Northern	691	10.4	5.0	5.0

Eastern	553	8.3	6.8	6.8
North-Western	548	8.2	11.7	11.7
North-Central	477	7.2	6.1	6.1
Uva	467	7.0	6.1	6.1
Sabaragamuwa	667	10.0	9.7	9.7
Household SES quintile				
Poorest	1,571	23.6	19.6	20.0
Poorer	1,331	20.0	19.9	20.0
Middle	1,238	18.6	19.9	20.0
Richer	1,225	18.4	20.3	20.0
Richest	1,296	19.5	20.3	20.0
Area SES tertile				
Least developed	2,407	36.1	33.2	33.3
Middle	1,905	28.6	33.6	33.3
Most developed	2,349	35.3	33.2	33.3
Body mass index (Mean)	6,583	23.8 (4.6)	23.9 (4.7)	-
WHO BMI categories (kg/m²)				
Underweight (<18.5)	818	12.4	12.3	-
Normal (18.5–24.9)	3,305	50.2	48.7	-
Overweight (25.0–29.9)	1,857	28.2	29.4	-
Obese (≥30)	603	9.2	9.5	-
Asian BMI categories (kg/m²)				
Underweight (<18.5)	818	12.4	12.3	-
Normal (18.5–22.9)	2,196	33.4	32.2	-
Overweight (23.0–24.9)	1,109	16.8	16.5	-
Obese (≥25)	2,460	37.4	38.9	-
Fasting plasma glucose (mg/dL)	6,485	110.7 (45.2)	109.3 (46.1)	-
Diagnosed diabetics	1,174	17.6	14.3	-
Taking antidiabetic medication	865	13.6	10.8	-

Notes: The weighted estimates use the national weights as described in the main text. In the sector categorization, rural/estate refers to subjects from PSUs that were a mix of rural and estate sector households. Population reference values for age, sex, ethnicity, and sector taken from the 2012 national census statistics adjusted for estimated demographic change during 2012–2019.

Table S 2. Crude prevalence of previously diagnosed diabetes, undiagnosed diabetes, total diabetes, and proportion of total diabetes that is undiagnosed in Sri Lankan adults by additional sociodemographic characteristics, SLHAS 2018/19

	Diagnosed diabetes	Undiagnosed diabetes			Total diabetes (diagnosed and undiagnosed by FPG or OGTT)	Proportion of total diabetes that is undiagnosed§
		FPG†	OGTT‡	Total (FPG or OGTT)		
N	6,661	6,525	4,827	4,827	4,827	1,580
All adults	14.3 (13.1–15.5)	4.2 (3.5–4.8)	7.5 (6.5–8.4)	8.7 (7.6–9.7)	23.0 (21.2–24.7)	37.7 (34.0–41.4)
Religion						
Buddhist	12.0 (10.8–13.2)	4.2 (3.6–4.8)	7.4 (6.3–8.6)	8.5 (7.3–9.7)	20.5 (18.6–22.4)	41.5 (36.9–46.1)
Hindu	14.2 (10.1–18.2)	2.8 (1.5–4.0)	5.6 (3.8–7.4)	6.1 (4.3–7.9)	20.4 (16.5–24.2)	30.1 (19.9–40.2)
Muslim	29.0 (22.4–35.6)	4.6 (1.7–7.5)	10.0 (5.3–14.7)	12.2 (7.0–17.4)	41.0 (32.4–49.6)	29.6 (18.3–41.0)
Christian	16.9 (13.1–20.7)	5.9 (3.2–8.6)	7.7 (4.7–10.6)	9.9 (6.2–13.6)	26.2 (20.9–31.5)	37.8 (27.3–48.2)
Education						
No formal schooling	20.2 (12.9–27.5)	5.6 (1.8–9.4)	8.1 (2.1–14.1)	8.8 (2.5–15.1)	30.5 (21.2–39.8)	28.9 (11.1–46.6)
Primary education	18.2 (14.6–21.8)	4.1 (2.4–5.8)	11.0 (7.6–14.4)	12.4 (8.8–16.1)	32.7 (27.3–38.0)	38.1 (28.8–47.4)
Secondary education	15.4 (13.3–17.5)	4.4 (3.4–5.4)	8.0 (6.1–9.9)	9.2 (7.1–11.4)	24.2 (21.0–27.4)	38.2 (31.5–44.8)
Passed O-level	14.1 (11.9–16.2)	3.8 (2.7–4.9)	6.2 (4.4–8.0)	7.6 (5.9–9.4)	21.2 (18.6–23.9)	36.0 (28.9–43.0)
Passed A-level	10.3 (8.1–12.4)	4.6 (3.2–5.9)	7.2 (5.0–9.4)	8.1 (5.8–10.4)	18.4 (15.3–21.5)	44.1 (35.5–52.8)
Degree and above	13.2 (8.6–17.7)	1.9 (0.4–3.5)	4.2 (0.0–8.4)	4.8 (0.6–9.0)	18.6 (11.9–25.3)	25.6 (7.4–43.8)
Area SES tertile						
Least developed	7.9 (6.5–9.4)	3.5 (2.8–4.3)	5.4 (3.8–7.0)	6.5 (4.9–8.1)	14.6 (12.2–17.0)	44.6 (36.9–52.4)
Middle	12.9 (10.8–15.0)	4.4 (3.4–5.5)	8.4 (6.6–10.2)	9.5 (7.4–11.6)	22.5 (20.0–25.1)	42.1 (33.9–50.4)
Most developed	22.1 (19.9–24.2)	4.5 (3.1–5.9)	8.5 (6.8–10.2)	9.9 (7.8–11.9)	31.3 (27.7–34.9)	31.5 (26.8–36.2)
Province						
Western	20.0 (17.5–22.5)	4.5 (3.4–5.6)	7.6 (6.1–9.2)	8.9 (7.1–10.6)	28.9 (25.2–32.5)	30.7 (26.2–35.3)
Central	14.1 (9.7–18.6)	2.2 (1.6–2.9)	4.3 (2.4–6.3)	5.1 (2.7–7.5)	19.2 (14.7–23.7)	26.6 (12.8–40.3)
Southern	10.1 (8.5–11.7)	4.3 (3.1–5.6)	8.2 (5.0–11.4)	8.4 (5.4–11.5)	18.5 (15.4–21.7)	45.5 (34.6–56.5)
Northern	15.7 (10.2–21.1)	2.6 (0.7–4.5)	7.7 (4.7–10.6)	8.2 (5.3–11.1)	23.8 (18.8–28.9)	34.3 (20.8–47.8)
Eastern	13.9 (8.8–19.1)	6.7 (4.0–9.5)	7.9 (4.8–11.0)	10.1 (7.4–12.8)	24.0 (18.8–29.3)	42.0 (28.6–55.5)

North-Western	11.6 (7.9–15.3)	3.4 (1.9–5.0)	5.7 (2.9–8.5)	7.0 (3.6–10.4)	18.6 (14.6–22.6)	37.6 (20.5–54.7)
North-Central	10.8 (5.5–16.0)	3.1 (1.2–5.0)	5.2 (2.1–8.2)	5.7 (3.1–8.4)	16.5 (8.4–24.6)	34.8 (17.8–51.8)
Uva	8.6 (6.3–10.8)	2.0 (0.5–3.5)	7.3 (3.4–11.3)	7.7 (3.9–11.6)	16.3 (11.6–21.0)	47.5 (38.5–56.6)
Sabaragamuwa	11.2 (7.5–14.8)	5.2 (3.7–6.6)	8.8 (4.2–13.4)	10.0 (6.5–13.5)	21.2 (15.9–26.5)	47.3 (35.9–58.7)

Notes: Estimates are given as % (95% CI). Except for the provincial estimates, all estimates are weighted as described in text to match the Sri Lankan adult population in 2019 with respect to age, sex, ethnicity, region, and area socioeconomic development. The provincial estimates are weighted similarly but matched to the profile of each province. Diagnosed diabetes was determined by self-report, review of shared medical records and medication on interview. † FPG \geq 126 mg/dl. ‡ 2-h plasma glucose \geq 200 mg/dl. § Estimates in this column have a denominator of total diabetes, whereas all other estimates use the total population as denominator.

Table S 3. Crude prevalence of diabetes in Sri Lankan adults by age group and sex, SLHAS 2018/2019.

Age group (years)	Male prevalence (%)		Female prevalence (%)		F statistic (p-value)
	N	% (95% CI)	N	% (95% CI)	
18–29	278	4.0 (1.2–6.8)	338	3.3 (1.1–5.5)	0.14 (0.706)
30–39	398	10.5 (7.1–13.9)	406	20.4 (16.1–24.7)	10.75 (0.001)
40–49	460	25.2 (20.6–29.8)	434	29.6 (23.3–35.8)	1.24 (0.267)
50–59	446	34.2 (28.3–40.1)	435	36.5 (30.2–42.8)	0.32 (0.575)
60–69	426	35.7 (30.6–40.9)	464	48.9 (43.2–54.5)	13.54 (<0.001)
70–79	310	35.2 (26.0–44.3)	320	39.8 (33.5–46.0)	0.80 (0.374)
80+	58	47.7 (29.0–66.4)	54	34.2 (18.2–50.2)	1.05 (0.307)

Notes: Estimates are given as % (95% CI) and correspond to the values used in Supplementary Figure S2. All estimates are weighted as described in text to match the Sri Lankan adult population in 2019 with respect to age, sex, ethnicity, province, and area socioeconomic development. F statistic is for test of equal prevalence across each sex by age group.

Table S 4. Crude prevalence of previously diagnosed diabetes, total diabetes using both FPG and OGTT, and proportion of total diabetes that is undiagnosed in Sri Lankan adults by district, SLHAS 2018/19.

District	Diagnosed diabetes		Undiagnosed diabetes (FPG or OGTT)		Total diabetes (diagnosed and undiagnosed by FPG or OGTT)	
	N	% (95% CI)	N	% (95% CI)	N	% (95% CI)
Colombo	600	24.6 (20.8–28.3)	435	9.5 (6.0–13.0)	435	34.1 (27.1–41.0)
Gampaha	464	16.6 (14.1–19.1)	334	9.8 (6.3–13.3)	334	26.4 (21.9–31.0)
Kalutara	367	15.3 (10.3–20.2)	230	8.6 (5.0–12.2)	230	23.9 (15.8–32.0)
Kandy	429	17.5 (11.7–23.2)	304	4.5 (1.3–7.8)	304	22.0 (16.7–27.3)
Matale	179	4.3 (1.8–6.8)	146	3.6 [†] (-1.2–8.4)	146	8.0 (0.9–15.1)
Nuwara Eliya	368	12.9 (3.5–22.3)	272	5.2 (2.1–8.3)	272	18.1 (8.9–27.3)
Galle	421	12.1 (8.7–15.4)	263	12.4 (8.4–16.3)	263	24.4 (19.3–29.6)
Matara	250	10.5 (9.1–12.0)	109	6.2 (5.9–6.6)	109	16.8 (14.4–19.2)
Hambantota	180	6.5 (4.1–8.8)	97	4.1 [†] (-3.8–12.0)	97	10.7 (3.0–18.5)
Jaffna	223	18.1 (6.6–29.6)	186	12.7 (4.3–21.2)	186	30.8 (19.5–42.1)
Mannar	132	21.0 (13.7–28.4)	123	4.3 (2.8–5.8)	123	25.3 (17.9–32.7)
Vavuniya	133	11.3 (6.5–16.1)	99	5.1 (1.1–9.1)	99	16.4 (4.9–27.8)
Mullaitivu	118	6.4 [†] (-0.5–13.2)	108	3.4 (1.8–5.0)	108	9.8 (4.0–15.6)
Kilinochchi	85	8.3 (5.–11.6)	71	7.4 [†] (-1.4–16.2)	71	15.7 (4.6–26.8)
Batticaloa	184	14.3 (8.9–19.7)	156	10.7 (5.0–16.4)	156	25.0 (18.4–31.6)
Ampara	188	15.0 (5.1–25.0)	156	7.9 (4.1–11.6)	156	22.9 (13.3–32.5)
Trincomalee	181	16.3 (12.2–20.3)	155	12.0 (4.0–20.1)	155	28.3 (20.2–36.4)
Kurunegala	361	12.4 (6.7–18.1)	289	8.0 (3.0–13.0)	289	20.4 (15.2–25.6)
Puttalam	187	10.7 (6.7–14.8)	163	6.8 (2.9–10.8)	163	17.5 (10.0–25.1)
Anuradhapura	350	12.6 (7.2–18.0)	261	3.8 (2.1–5.5)	261	16.4 (6.9–25.9)
Polonnaruwa	127	6.7 [†] (-6.0–19.4)	100	9.0 (3.9–14.1)	100	15.7 (1.9–29.6)
Badulla	289	9.3 (5.9–12.8)	168	7.6 (2.8–12.4)	168	16.9 (11.2–22.6)
Moneragala	178	2.9 (0.2–5.5)	124	5.9 (2.5–9.3)	124	8.7 (4.8–12.7)
Ratnapura	363	11.6 (6.8–16.5)	230	6.4 (3.1–9.8)	230	18.1 (10.8–25.4)
Kegalle	304	9.4 (5.4–13.5)	248	13.2 (8.0–18.3)	248	22.6 (17.0–28.2)

Notes: † Estimate not significantly different from zero, as lower bound of CI is less than zero. Estimates are weighted as described in text to match the Sri Lankan adult population in each district in 2019 with respect to age, sex, ethnicity, and area socioeconomic development.

Table S 5. Crude prevalence of IFG, IGT, total pre-diabetes, and total diabetes and pre-diabetes in Sri Lankan adults by additional sociodemographic characteristics, SLHAS 2018/19.

	IFG [†]	IGT [‡]	Total pre-diabetes (IFG or IGT)	Hyperglycemia
N	6,525	4,827	4,827	4,827
All adults	23.2 (21.3–25.1)	18.9 (17.0–20.8)	30.5 (28.2–32.7)	53.4 (50.8–56.1)
Ethnicity				
Sinhala	24.3 (22.1–26.5)	19.6 (17.3–21.9)	31.9 (29.1–34.6)	52.8 (49.6–56.0)
Tamil	19.0 (15.0–23.1)	16.9 (13.1–20.8)	25.6 (21.8–29.5)	47.2 (42.7–51.8)
Muslim	20.7 (16.0–25.4)	15.7 (9.5–21.8)	26.4 (20.1–32.8)	67.2 (60.2–74.2)
Education				
No formal schooling	29.3 (20.3–38.3)	14.4 (7.0–21.7)	32.8 (22.6–42.9)	63.2 (53.3–73.2)
Primary education	32.0 (27.6–36.4)	14.3 (10.2–18.3)	30.7 (25.1–36.3)	63.3 (57.5–69.2)
Secondary education	23.2 (20.6–25.8)	17.7 (14.9–20.4)	29.6 (26.1–33.1)	53.8 (49.8–57.9)
Passed O-level	22.1 (19.2–25.0)	19.4 (16.0–22.7)	31.0 (27.2–34.8)	52.2 (48.3–56.2)
Passed A-level	20.3 (16.7–23.7)	21.4 (16.8–26.1)	30.5 (25.6–35.4)	48.9 (44.1–53.7)
Degree and above	19.4 (13.2–25.7)	27.3 (18.5–36.2)	33.7 (25.2–42.3)	52.4 (43.5–61.2)
Sector				
Urban	23.4 (18.9–27.8)	18.6 (14.0–23.2)	28.3 (23.0–33.5)	64.1 (58.6–69.6)
Rural	23.2 (21.0–25.4)	19.5 (17.3–21.8)	31.3 (28.6–34.0)	51.6 (48.4–54.8)
Estate	15.2 (8.2–22.2)	13.0 (7.1–18.9)	22.6 (10.5–34.8)	32.2 (21.0–43.4)
Household SES quintile				
Poorest	25.2 (21.9–28.5)	17.4 (14.1–20.8)	30.1 (26.1–34.2)	50.1 (44.8–55.4)
Poorer	22.7 (19.6–25.7)	18.3 (14.3–22.4)	30.4 (25.8–34.9)	49.8 (44.8–54.8)
Middle	22.3 (18.9–25.7)	17.4 (14.2–20.6)	29.0 (24.8–33.2)	51.5 (46.5–56.4)
Richer	22.4 (19.4–25.4)	20.1 (16.5–23.6)	31.7 (27.4–35.9)	55.6 (51.2–60.0)
Richest	23.5 (20.5–26.5)	20.9 (16.4–25.3)	31.0 (26.3–35.7)	59.9 (55.4–64.3)
Area SES tertile				
Least developed	23.5 (19.7–27.3)	17.8 (14.7–20.9)	29.9 (26.4–33.4)	44.6 (39.9–49.2)
Middle	22.5 (19.3–25.6)	18.5 (15.4–21.6)	30.0 (26.1–34.0)	52.6 (48.4–56.7)

Most developed	23.7 (20.2–27.1)	20.3 (16.7–23.8)	31.4 (26.9–35.9)	62.7 (57.9–67.5)
Province				
Western	24.2 (20.1–28.2)	21.5 (17.5–25.5)	33.0 (28.2–37.8)	61.9 (56.7–67.0)
Central	24.6 (18.3–30.8)	13.8 (9.3–18.2)	28.3 (21.6–35.0)	47.5 (40.6–54.5)
Southern	26.6 (23.8–29.4)	20.2 (14.0–26.3)	33.6 (26.7–40.5)	52.1 (45.3–58.9)
Northern	18.5 (13.3–23.7)	16.2 (13.2–19.2)	27.4 (22.4–32.4)	51.2 (44.1–58.3)
Eastern	18.4 (14.8–22.0)	23.6 (19.6–27.6)	30.6 (25.8–35.5)	54.6 (51.8–57.5)
North–Western	22.8 (18.1–27.5)	15.2 (10.8–19.7)	28.6 (22.2–35.1)	47.2 (38.8–55.7)
North–Central	17.9 (10.7–25.2)	20.8 (17.5–24.1)	27.9 (21.1–34.7)	44.4 (31.8–57.0)
Uva	31.4 (24.2–38.6)	16.5 (7.5–25.5)	36.0 (30.2–41.9)	52.4 (43.5–61.2)
Sabaragamuwa	20.3 (13.0–27.5)	17.4 (14.3–20.6)	28.7 (24.3–33.1)	49.9 (42.8–57.0)

Notes: Estimates are given as % (95% CI). All estimates are weighted as described in text to match the Sri Lankan adult population in 2019 with respect to age, sex, ethnicity, region, and area socioeconomic development, except for the estimates by province which are weighted to match the provincial populations. A residual “Other” ethnicity category and a mixed “rural/estate” sector category omitted from the table. † IFG 100–126 mg/dl. ‡ IGT 2-h plasma glucose 140–199 mg/dl.

Figure S 1. Flowchart of subject selection and contribution of subsamples to prevalence estimates.

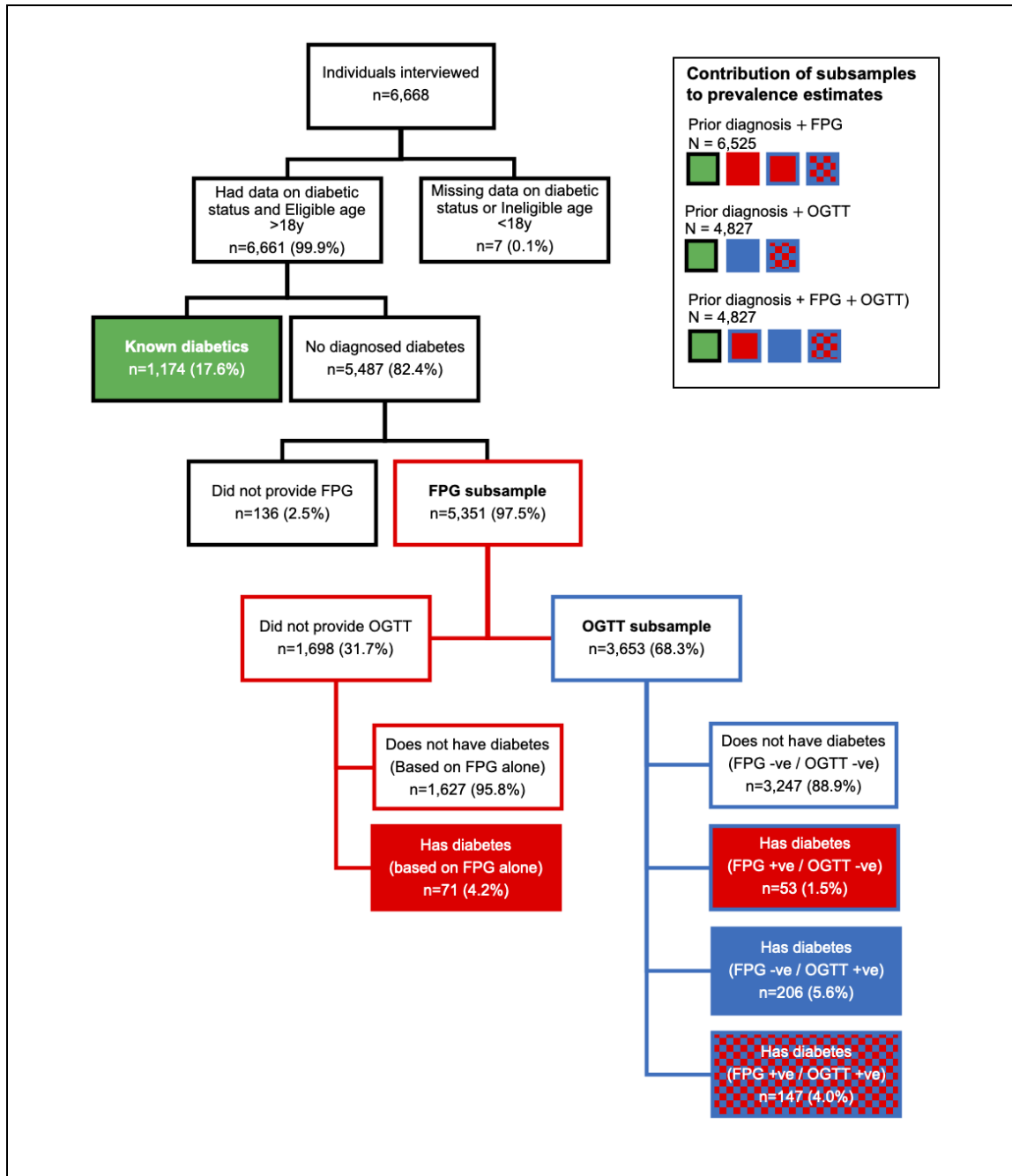
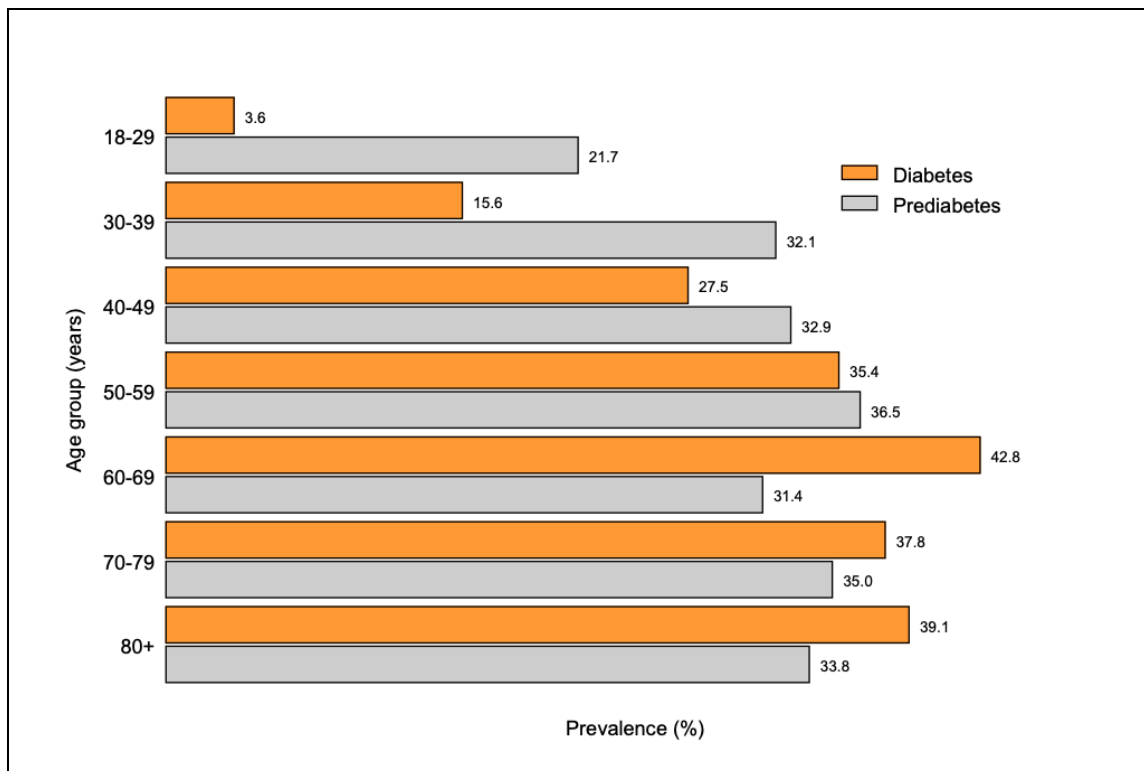


Figure S 2. Total diabetes prevalence in Sri Lankan adults by age group and sex, SLHAS 2018/2019.



Notes: All estimates are weighted as described in text to match the Sri Lankan adult population in 2019 with respect to age, sex, ethnicity, province, and area socioeconomic development. Corresponding statistics with 95% confidence intervals are given in Supplementary Table S3.

Text S 1. Estimation of household socioeconomic status using principal components analysis.

The SLHAS Wave 1 uses an asset index approach to generate a proxy measure of each household's living standard. The index was computed by using principal components analysis (PCA) of a set of household-level variables relating to asset ownership or household characteristics. Variables were selected from those used in recent Sri Lanka Household Income and Expenditure Surveys conducted by the Department of Census and Statistics, selecting those with most predictive performance, and excluding some assets that are only relevant to agricultural households (*e.g.*, tractor, thresher, fishing equipment).

Variables were either dichotomous (*e.g.*, household has a car) or categorical (*e.g.*, type of drinking water source), apart from one ordinal variable (number of bedrooms). Dichotomous variables consisted of whether the household possessed each of the following items: radio/cassette player, television, VCD/DVD player, washing machine, fridge, electric fan, domestic phone, mobile phone, computer, internet access, camera/video camera, bicycle, motorcycle/scooter, three-wheeler, motor car/van, and bus/lorry/tipper.

Categorical variables were transformed into dichotomous indicators by creating separate dummy variables for each category. They consisted of the following (numbers in parentheses indicates number of categories in each): flooring material (5), material of wall (7), type of housing tenure (12), drinking water source (16), type of toilet (4), method of household garbage disposal (6), lighting power source (5), cooking fuel (13), and type of cooking place (3).

There was a small percentage of missing values in each variable (2–3%). These were imputed with either the PSU or stratum level mean of the variable or failing those the district/sector or national means. The principal component factor or index obtained by PCA after combining all these variables was then used to divide the sample into population weighted quantiles of equal size. Separate indices were not estimated for urban or rural sectors, but analysis indicates little difference between sectors in how the national index performs.

Text S 2. STROBE checklist of items that should be included in reports of cross-sectional studies.

	Item No	Recommendation	Section, paragraph Response
Title and abstract	1	(a) Indicate the study's design with a commonly used term in the title or the abstract	Title
		(b) Provide in the abstract an informative and balanced summary of what was done and what was found	Abstract: Background, Methods and findings, Conclusions.
Introduction			
Background/ rationale	2	Explain the scientific background and rationale for the investigation being reported	Abstract: Background. Introduction
Objectives	3	State specific objectives, including any prespecified hypotheses	Abstract: Background. Introduction: final paragraph.
Methods			
Study design	4	Present key elements of study design early in the paper	Abstract: Methods and findings. Introduction: final paragraph. Methods: Study design and participants
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection	Methods: Study design and participants. Introduction: final two paragraphs.
Participants	6	(a) Give the eligibility criteria, and the sources and methods of selection of participants	Methods: Study design and participants. Results: Characteristics of participants. Supplementary Table S1, Supplementary Figure S1.
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable	Methods: Measures and procedures; Definitions; Prevalence estimation. Supplementary S1 Text.
Data sources/ measurement	8*	For each variable of interest, give sources of data and details of methods of assessment (measurement). Describe comparability of assessment methods if there is more than one group	Methods: Measures and procedures; Definitions; Prevalence estimation. Supplementary S1 Text.
Bias	9	Describe any efforts to address potential sources of bias	Methods: Measures and procedures; Prevalence estimation.
Study size	10	Explain how the study size was arrived at	Methods: Study design and participants. Results: Characteristics of participants. Supplementary Figure S1.

Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why	Methods: Measures and procedures; Definitions; Prevalence estimation. Supplementary Text S1. Notes to Figures 1 and 2, and Supplementary Figure S2.
Statistical methods	12	(a) Describe all statistical methods, including those used to control for confounding	Methods: Measures and procedures; Definitions; Prevalence estimation. Supplementary Text S1.
		(b) Describe any methods used to examine subgroups and interactions	Methods: Measures and procedures; Prevalence estimation.
		(c) Explain how missing data were addressed	Methods: Measures and procedures; Prevalence estimation.
		(d) If applicable, describe analytical methods taking account of sampling strategy	Methods: Measures and procedures; Prevalence estimation.
		(e) Describe any sensitivity analyses	Methods: Measures and procedures; Prevalence estimation. Results: provision of separate estimates using FPG and OGTT. Tables 1 and 2.
Results			
Participants	13	(a) Report numbers of individuals at each stage of study—eg numbers potentially eligible, examined for eligibility, confirmed eligible, included in the study, completing follow-up, and analysed	Methods: Study design and participants; Measures and procedures; Prevalence estimation. Results. Tables 1 and 2. Supplementary Table S1. Supplementary Figure S1.
		(b) Give reasons for non-participation at each stage	Methods: Measures and procedures; Prevalence estimation.
		(c) Consider use of a flow diagram	Supplementary Figure S1.
Descriptive data	14*	(a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders	Methods: Study design and participants. Results: Characteristics of participants. Supplementary Table S1.
		(b) Indicate number of participants with missing data for each variable of interest	Methods: Prevalence estimation. Results: Characteristics of participants. Supplementary Table S1.
Outcome data	15*	Report numbers of outcome events or summary measures	Tables 1 and 2. Supplementary Table S2, and Supplementary Figure S1.
Main results	16	(a) Give unadjusted estimates and, if applicable, confounder-adjusted estimates and their precision (eg, 95% confidence interval). Make clear which confounders were adjusted for and why they were	Results: Characteristics of participants.

		included	
		(b) Report category boundaries when continuous variables were categorized	Methods: Measures and procedures. Tables 1 and 2. Supplementary Tables S1 and S2.
		(c) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period	Not Applicable.
Other analyses	17	Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses	Figures 1 and 2.
Discussion			
Key results	18	Summarise key results with reference to study objectives	Abstract: Methods and findings, Conclusions. Discussion: paragraphs 1-3.
Limitations	19	Discuss limitations of the study, taking into account sources of potential bias or imprecision. Discuss both direction and magnitude of any potential bias	Abstract: Methods and findings. Discussion, paragraphs 5 and 8.
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence	Discussion
Generalisability	21	Discuss the generalisability (external validity) of the study results	Discussion: paragraphs 4 and 9.
Other information			
Funding	22	Give the source of funding and the role of the funders for the present study and, if applicable, for the original study on which the present article is based	Provided during submission process