Supplementary Online Content


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

Self-reported alcohol consumption was collected prospectively and coded by general practitioners or practice nurses on the consultation date in CPRD. The most recent alcohol consumption record, prior to entry into the study, was used to classify participants’ drinking behaviour. Information on alcohol consumption is recorded using Read codes, classifying alcohol status, with additional data on daily/weekly units of alcohol consumption. We used both sources of information (as shown in e-Figure 1) to arrive at a final classification and updated the approach used in an existing algorithm on alcohol consumption. This algorithm has previously been used with CPRD datasets\(^1\). Five drinking categories were defined, as follows: non-drinkers, former drinkers, occasional drinkers, current moderate drinkers (those who had a code for current alcohol consumer and an indicator of whether they drank within daily [32g or 24g of alcohol for men and women respectively] and/or weekly [168g of alcohol for men and 112g for women] sensible drinking limits for the UK at the time of observation)\(^2\), and current heavy drinkers (defined as those who exceeded daily and/or weekly sensible drinking limits). We reclassified non-drinkers as former drinkers if they had any record of drinking recorded in their entire clinical record, entered on CPRD prior to study entry. Alcohol consumption was classified using some non-specific Read codes (such as, Read code 136..00 “alcohol consumption”) only when additional information on alcohol units was available. Otherwise, the patient’s status was classified as missing.

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eFigure 1: Algorithm used to extract information on alcohol consumption

READ codes for alcohol status available in medical records

Information on weekly number of alcohol units available in medical records

Information on daily number of alcohol units available in medical records

0 units = non-drinker
1-21/1-14 units for M/F = moderate
>21/>14 units for M/F = heavy

<1 units = non-drinker
1-6/1-2 units for M/F = moderate
≥7/≥3 units for M/F = heavy

Any alcohol consumption data recorded prior to or on index date?

No

Yes

Most recent record of alcohol consumption classified as heavy?

No

Yes

Most recent record of alcohol consumption classified as moderate?

No

Yes

Most recent record of alcohol consumption classified as occasional/light?

No

Yes

Most recent record of alcohol consumption classified as former?

No

Yes

Most recent record of alcohol consumption classified as non-drinker?

Yes

No

Any record indicating alcohol consumption in the entire medical history?

Yes

No

Heavy drinker

Moderate drinker

Occasional drinker

Former drinker

Non-drinker

Missing
eFigure 2. National Statistics definition of alcohol-related death

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eFigure 3: Flow-chart of patients included in the study

Acceptable patients with at least 1 diagnostic code for psoriasis between 01/01/1998 and 31/03/2014 from the July 2014 build of CPRD
N= 155,121

All acceptable patients without psoriasis from the July 2014 build of CPRD
N= 13,208,566

Patients excluded (not eligible for linkage)
N= 60,543

Psoriasis patients eligible for linkage to HES, ONS and deprivation data (IMD)
N= 94,578

Patients excluded
N= 25,208

Patients with first diagnostic code for psoriasis within the study window
N= 69,370

Patients excluded
N= 13,833

Matching up to 1:20

Comparison patients remaining after matching based on age, gender and general practice
N= 854,314

Patients excluded (leaving the practice before study start, registration date after practice up to standard)
N= 2,838,177

Patients excluded (not eligible for linkage)
N= 3,931,566

Patients excluded
N= 5,584,509

Patients excluded
N= 3,931,566

Patients excluded
N= 5,584,509

Patients excluded
N= 4831

Patients excluded
N= 180

Patients excluded
N= 55

Patients excluded
N= 20

Patients excluded
N= 10

Patients excluded
N= 5

Patients excluded
N= 2

Patients excluded
N= 1

Patients excluded
N= 0
References