

Supplementary Online Content

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eTable. Adjusted Prevalence and Prevalence Ratio (PR) of Cardiometabolic Risk Factor Strata by Subsidy Score Quartiles, NHANES 2001-2006

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

eTable. Adjusted Prevalence and Prevalence Ratio (PR) of Cardiometabolic Risk Factor Strata by Subsidy Score Quartiles, NHANES 2001-2006

		Q1		Q2		Q3		Q4	
	<i>n</i>	%	PR (95% CI)	%	PR (95% CI)	%	PR (95% CI)	%	PR (95% CI)
BMI									
Normal	3348	39.6	1.00 (ref)	37.0	0.93 (0.85 – 1.02)	34.7	0.88 (0.80 – 0.96)	31.4	0.79 (0.71 – 0.89)
Overweight	3085	33.4	1.00 (ref)	33.5	1.00 (0.90 – 1.12)	30.5	0.91 (0.80 – 1.04)	31.7	0.95 (0.84 – 1.07)
Obese	3103	26.9	1.00 (ref)	29.6	1.10 (0.99 – 1.21)	34.8	1.29 (1.14 – 1.46)	36.8	1.37 (1.23 – 1.52)
Abdominal adiposity									
<0.52	3293	39.7	1.00 (ref)	35.7	0.90 (0.83 – 0.98)	33.0	0.83 (0.75 – 0.92)	28.7	0.72 (0.64 – 0.81)
0.52 - <0.60	3064	32.5	1.00 (ref)	33.1	1.02 (0.91 – 1.15)	32.6	1.01 (0.89 – 1.14)	32.3	1.00 (0.88 – 1.13)
≥0.60	3318	27.8	1.00 (ref)	31.1	1.12 (1.01 – 1.24)	34.4	1.24 (1.12 – 1.36)	39.0	1.40 (1.27 – 1.55)
CRP									
0.01 – 0.09	3089	37.9	1.00 (ref)	35.5	0.94 (0.84 – 1.05)	32.8	0.86 (0.77 – 0.97)	30.3	0.80 (0.72 – 0.89)
>0.09 - <0.32	2976	34.7	1.00 (ref)	32.6	0.94 (0.84 – 1.06)	31.9	0.92 (0.82 – 1.04)	32.9	0.95 (0.83 – 1.08)
≥0.32	3169	27.4	1.00 (ref)	31.8	1.16 (1.02 – 1.32)	35.3	1.29 (1.17 – 1.42)	36.9	1.34 (1.19- 1.51)
Blood Pressure									
Normal	4568	28.1	1.00 (ref)	30.3	1.00 (0.92 – 1.09)	28.3	1.04 (0.96 – 1.12)	30.2	0.96 (0.88 – 1.06)
Pre-hypertension	2408	26.9	1.00 (ref)	24.8	0.92 (0.82 – 1.03)	25.1	0.93 (0.80 – 1.08)	26.5	0.99 (0.88 – 1.11)
Hypertension	2699	44.9	1.00 (ref)	44.9	1.08 (0.95 – 1.22)	46.6	1.01 (0.89 – 1.14)	43.3	1.07 (0.96 – 1.21)
Lipids									
Normal	3766	36.5	1.00 (ref)	35.2	0.96 (0.86 – 1.08)	32.6	0.89 (0.80 – 1.00)	33.2	0.91 (0.83 – 1.00)
Intermediate	2058	23.1	1.00	21.4	0.93 (0.80 – 1.08)	21.3	0.92 (0.79 – 1.09)	20.6	0.89 (0.78 – 1.03)

dyslipidemia			(ref)						
Dyslipidemia	3851	40.4	1.00 (ref)	43.4	1.07 (0.97 – 1.19)	46.2	1.14 (1.04 – 1.25)	46.3	1.14 (1.05 – 1.25)
Glycemia									
Normal	7479	85.1	1.00 (ref)	85.7	1.01 (0.98 – 1.04)	82.0	0.96 (0.94 – 0.99)	82.1	0.96 (0.94 – 0.99)
Intermediate dysglycemia	1202	10.0	1.00 (ref)	9.7	0.97 (0.77 – 1.23)	12.0	1.20 (1.01 – 1.44)	11.7	1.17 (0.95 – 1.45)
Diagnosed diabetes	623	4.9	1.00 (ref)	4.6	0.94 (0.69 – 1.30)	6.0	1.23 (0.92 – 1.30)	6.2	1.27 (0.94 – 1.72)

Q1-4 = Quartile 1-4; PR = Prevalence ratio. Subsidy Score quartile cutoffs are Q1: 0 – 0.47; Q2: 0.48 – 0.57; Q3: 0.58 – 0.65; Q4: 0.66 – 1.0. Normal weight was defined as BMI <25 kg/m², overweight was defined as 25 kg/m² ≤ BMI <30 kg/m², and obesity as BMI ≥30 kg/m². Abdominal adiposity was categorized into tertiles: normal, <0.52; moderately enlarged, ≥0.52 but <0.60; very enlarged, ≥0.60. CRP was categorized as: tertile 1, 0.01 – 0.09 mg/dL; tertile 2, >0.09 – <0.32 mg/dL; tertile 3, ≥0.32 mg/dL. Blood pressure was categorized as: normal (no self-reported diagnosis and systolic blood pressure [sBP]<120 and diastolic blood pressure [dBP]<80 mmHg); pre-hypertension (no self-reported diagnosis and sBP 120 to <140 or dBP 80 to <90); diagnosed (self-reported) or undiagnosed (no self-reported diagnosis and sBP≥140 or dBP≥90 mmHg) hypertension or currently taking anti-hypertensive medication. Lipids (nonHDL-c) was categorized similarly: normal (no self-reported diagnosis and nonHDL-c <130 mg/dL); intermediate dyslipidemia (no self-reported diagnosis and nonHDL-c 130 to <160 mg/dL); diagnosed (self-reported) or undiagnosed (no self-reported diagnosis and nonHDL-c≥160 mg/dL) dyslipidemia or currently taking anti-cholesterolemia medication. Intermediate dysglycemia was defined as no self-reported diagnosis and glycated hemoglobin (HbA1C) ≥5.7%; diagnosed diabetes was defined as self-reported physician diagnosis. Individuals with no self-reported diagnosis and HbA1C <5.7% were categorized as normal.

Model adjusted for age, sex, race/ethnicity, educational attainment, poverty income ratio, smoking status, moderate/vigorous leisure-time physical activity, and total daily calorie intake. Individuals with missing data were excluded from the models.