## **Supplementary Online Content**

Siegel KR, McKeever Bullard K, Imperatore G, et al. Association of higher consumption of foods derived from subsidized commodities with adverse cardiometabolic risk among US adults. *JAMA Intern Med.* Published online July 5, 2016. doi:10.1001/jamainternmed.2016.2410.

**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	
	n	%	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)

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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 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.