Supplemental Table S2. Incidence Rate and Risk of Hip Fracture According to DKD Phenotype (Sensitivity Analysis 1: PU 2+ and GFR 60 as Criteria for PU and GFR, Respectively)

Variable	PU⁻GFR⁻ (n=1,226,571)	PU⁺GFR⁻ (n=27,734)	PU⁻GFR⁺ (n=170,672)	PU⁺GFR⁺ (n=12,416)
Hip fracture cases	15,668	535	5,155	467
Hip fracture IR, /1,000 PYs	1.76	2.81	4.36	6.09
Model 1	1 (reference)	1.62 (1.49–1.77)	2.49 (2.41–2.57)	3.59 (3.27–3.93)
Model 2	1 (reference)	1.75 (1.61–1.91)	1.26 (1.22–1.30)	2.45 (2.23–2.68)
Model 3	1 (reference)	1.73 (1.59–1.88)	1.25 (1.21–1.29)	2.43 (2.22–2.66)
Model 4	1 (reference)	1.76 (1.62–1.92)	1.28 (1.24–1.32)	2.48 (2.26–2.72)
Model 5	1 (reference)	1.57 (1.44–1.71)	1.20 (1.16–1.24)	2.01 (1.83–2.21)

Values are expressed as number (%) or hazard ratio (95% confidence interval). Model 1: unadjusted; Model 2: adjusted for age and sex; Model 3: Model 2+smoking, alcohol, exercise, and income; Model 4: Model 3+hypertension, dyslipidemia, and body mass index; Model 5: Model 4+stroke, proliferative diabetic retinopathy, insulin, sulfonylurea, and thiazolidinedione, renin-angiotensin system inhibitor, and duration of diabetes (≥5 or <5 years).
DKD, diabetic kidney disease; PU, proteinuria; PU⁻GFR⁻, no DKD; PU⁺GFR⁻, proteinuric DKD with normal estimated glomerular filtration rate (eGFR); PU⁻GFR⁺, non-proteinuric DKD with reduced eGFR; PU⁺GFR⁺, proteinuric DKD with reduced eGFR; IR, incidence rate; PYs, person-years.