

Supplemental Table S3. Incidence Rate and Risk of Hip Fracture According to DKD Phenotype (Sensitivity Analysis 1: PU 2+ and GFR 45 as Criteria for PU and GFR, Respectively)

Variable	PU ⁻ GFR ⁻ (n=1,357,817)	PU ⁺ GFR ⁻ (n=34,721)	PU ⁻ GFR ⁺ (n=39,426)	PU ⁺ GFR ⁺ (n=5,429)
Hip fracture cases	19,512	782	1,311	220
Hip fracture IR, /1,000 PYs	1.99	3.33	4.89	6.91
Model 1	1 (reference)	1.70 (1.58–1.83)	2.47 (2.34–2.61)	3.65 (3.20–4.17)
Model 2	1 (reference)	1.78 (1.66–1.91)	1.50 (1.42–1.59)	3.05 (2.67–3.49)
Model 3	1 (reference)	1.76 (1.64–1.89)	1.50 (1.42–1.59)	3.03 (2.65–3.46)
Model 4	1 (reference)	1.79 (1.67–1.93)	1.52 (1.44–1.61)	3.04 (2.66–3.47)
Model 5	1 (reference)	1.58 (1.47–1.7)	1.38 (1.30–1.46)	2.33 (2.04–2.67)

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.