

Supplemental Table S4. Incidence Rate and Risk of Hip Fracture According to DKD Phenotype (Sensitivity Analysis 1: PU 1+ and GFR 45 as Criteria for PU and GFR, Respectively)

Variable	PU ⁻ GFR ⁻ (n=1,305,120)	PU ⁺ GFR ⁻ (n=87,418)	PU ⁻ GFR ⁺ (n=35,669)	PU ⁺ GFR ⁺ (n=9,186)
Hip fracture cases	18,575	1,719	1,179	352
Hip fracture IR, /1,000 PYs	1.97	2.85	4.82	6.37
Model 1	1 (reference)	1.47 (1.39–1.54)	2.46 (2.32–2.61)	3.37 (3.04–3.75)
Model 2	1 (reference)	1.49 (1.42–1.57)	1.49 (1.41–1.59)	2.45 (2.20–2.72)
Model 3	1 (reference)	1.48 (1.41–1.55)	1.49 (1.40–1.58)	2.44 (2.20–2.71)
Model 4	1 (reference)	1.50 (1.43–1.58)	1.51 (1.42–1.60)	2.47 (2.22–2.75)
Model 5	1 (reference)	1.37 (1.31–1.44)	1.38 (1.30–1.46)	1.95 (1.76–2.17)

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.