Association between cardiorespiratory fitness and vascular function in type 2 diabetes

Supporting information

Supplementary Table 1. The construction of vascular health index.

Vascular health indicators	Criteria	Points assigned		
ABI	≥ 1.17	3		
	1.08 - < 1.17	2		
	< 1.08	1		
TcPO ₂ (mmHg)	≥ 62	3		
	51 - < 62	2		
	< 51	1		
PWV (m/s)	≤ 8.12	3		
	8.12 < - 9.24	2		
	> 9.24	1		
cIMT (mm)	< 1.0	3		
	1.0 - < 1.5	2		
	≥ 1.5	1		

ABI, ankle-brachial index; TcPO₂, transcutaneous oxygen pressure; PWV, pulse wave velocity; cIMT, carotid intima-media thickness

The Vascular health index is calculated by summing the values assigned to the four vascular indicators. The score ranges from 4 to 12, with an index of less than 8 considered to be with impaired vascular function.

Supplementary Table 2. Sensitivity analysis upon the exclusion of missing data.

	No. of	Model 1		Model 2		Model 3	
Variable	cases/t otal	OR (95%CI)	P	OR (95%CI)	P	OR (95%CI)	P
CRF tertiles (MET)							
Low (< 5.2)	38/99	1 (Ref.)		1 (Ref.)		1 (Ref.)	
Middle (5.2 - 6.2)	26/108	0.51 (0.28 - 0.93)	0.03	0.68 (0.36 - 1.31)	0.25	0.70 (0.35 - 1.43)	0.33
High (> 6.2)	12/89	0.25 (0.12 - 0.52)	< 0.001	0.38 (0.17 - 0.84)	0.02	0.37 (0.16 - 0.86)	0.02
Per 1-MET increase	76/296	0.61 (0.48 - 0.77)	< 0.001	0.68 (0.53 - 0.87)	0.002	0.64 (0.49 - 0.85)	0.002

CRF, cardiorespiratory fitness; MET, metabolic equivalent; OR, odds ratio; CI, confidence interval Model 1 was crude model.

Model 2 was adjusted for age and gender.

Model 3 was adjusted for age, gender, history of smoking, history of drinking, systolic blood pressure, body mass index, estimated glomerular filtration rate, high-density lipoprotein-cholesterol, triglycerides, and hemoglobin A1c.

Participants with missing data on high-density lipoprotein-cholesterol, triglycerides, and hemoglobin A1c was excluded for this analysis.

Supplementary Table 3. Sensitivity analysis by employing quartiles of cardiorespiratory fitness.

Variable	No. of	Model 1		Model 2		Model 3	
	cases/t otal	OR (95%CI)	Р	OR (95%CI)	P	OR (95%CI)	P
CRF quartiles (MET)							
Low (< 4.9)	33/86	1 (Ref.)		1 (Ref.)		1 (Ref.)	
Middle (4.9 - 5.7)	30/92	0.78 (0.42 - 1.44)	0.42	1.18 (0.59 - 2.34)	0.64	1.16 (0.55 - 2.44)	0.70
High (5.8 - 6.6)	14/86	0.31 (0.15 - 0.64)	0.002	0.42 (0.19 - 0.93)	0.03	0.37 (0.16 - 0.86)	0.02
Very High (> 6.6)	11/79	0.26 (0.12 - 0.56)	0.001	0.37 (0.16 - 0.86)	0.02	0.36 (0.14 - 0.91)	0.03

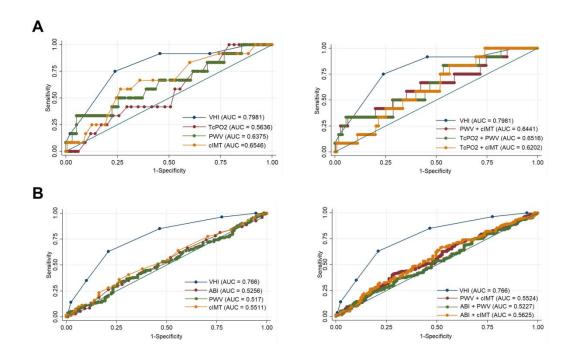
CRF, cardiorespiratory fitness; MET, metabolic equivalent; OR, odds ratio; CI, confidence interval.

Model 1 was crude model.

Model 2 was adjusted for age and gender.

Model 3 was adjusted for age, gender, history of smoking, history of drinking, systolic blood pressure, body mass index, estimated glomerular filtration rate, high-density lipoprotein-cholesterol, triglycerides, and hemoglobin A1c.

Supplementary Figure 1. Receiver operating characteristic curve analysis.

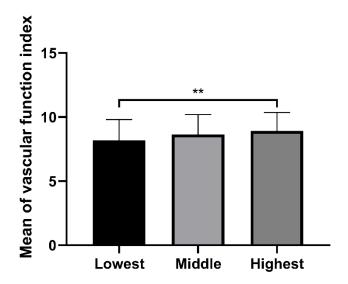


VHI, vascular health index; AUC, area under the receiver operating characteristic curve; TcPO2, transcutaneous oxygen pressure; PWV, pulse wave velocity; cIMT, carotid intima media thickness; ABI, ankle brachial index; ROC, receiver operating characteristic Comparisons were conducted on the discriminability for macrovascular dysfunction (defined as ABI <1.0) and microvascular dysfunction (defined as TcPO2 <60mmHg) based on the ROC curves for VHI versus a single indicator or two combined indicators. The outcomes showed that VHI had the largest AUCs compared with all other indicators, with all the *P* values <0.001.

A. AUCs for macrovascular dysfunction: Left panel: ROC curves of VHI and the individual indicators. Right panel: ROC curve of VHI and the combination of two indicators.

B. AUCs for microvascular dysfunction: Left panel: ROC curve of VHI and the individual indicators. Right panel: ROC curve of VHI and the combination of two indicators.

Supplementary Figure 2. Vascular function index across different categories of cardiorespiratory fitness.



** P < 0.05.