

Supplementary Appendix

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Supplementary Table 1. Numbers and proportions of participants with multiple cardiometabolic disorders according to HOMA-IR quintiles

Number of cardiometabolic disorders	HOMA-IR quintiles				
	Quintile 1	Quintile 2	Quintile 3	Quintile 4	Quintile 5
0					
Number of participants	6127	5666	4816	3703	1885
Proportion (95% CI)	34.9 (34.0-35.9)	33.3 (32.4-34.3)	29.3 (28.4-30.2)	23.9 (23.1-24.8)	13.0 (12.3-13.7)
1					
Number of participants	8165	7581	6983	6038	4362
Proportion (95% CI)	43.7 (42.8-44.7)	41.0 (40.1-42.0)	39.2 (38.3-40.2)	35.2 (34.2-36.1)	26.0 (25.2-26.9)
2					
Number of participants	3540	4009	4618	5333	5776
Proportion (95% CI)	17.2 (16.5-17.9)	19.1 (18.4-19.9)	21.5 (20.8-22.2)	25.3 (24.5-26.1)	30.4 (29.5-31.3)
3					
Number of participants	850	1361	2131	3197	4953
Proportion (95% CI)	3.8 (3.5-4.1)	6.0 (5.6-6.4)	9.2 (8.7-9.7)	13.7 (13.1-14.3)	22.9 (22.2-23.7)
4					
Number of participants	55	121	192	468	1760
Proportion (95% CI)	0.3 (0.2-0.4)	0.5 (0.4-0.6)	0.8 (0.6-0.9)	1.9 (1.7-2.1)	7.7 (7.2-8.1)

Prevalences (95% CIs) were weighted to represent the overall Chinese adult population aged 18 years or older.

The number of cardiometabolic disorders for each participant was the presence number of obesity or central obesity, diabetes, dyslipidemia, and hypertension. For each cardiometabolic disorder, the participants received 1 if this disorder presented, and 0 otherwise.

Supplementary Table 2. Numbers and proportions of participants with multiple cardiometabolic disorders according to HOMA-B quintiles

Number of cardiometabolic disorders	HOMA-B quintiles				
	Quintile 1	Quintile 2	Quintile 3	Quintile 4	Quintile 5
0					
Number of participants	4606	4967	4591	4219	3814
Proportion (95% CI)	25.8 (25.0-26.6)	29.5 (28.6-30.4)	27.7 (26.8-28.6)	26.2 (25.3-27.1)	23.3 (22.5-24.2)
1					
Number of participants	7008	6987	6669	6361	6104
Proportion (95% CI)	38.5 (37.5-39.4)	37.9 (36.9-38.8)	37.1 (36.2-38.0)	35.9 (34.9-36.8)	34.5 (33.6-35.5)
2					
Number of participants	4245	4261	4650	4908	5212
Proportion (95% CI)	21.6 (20.9-22.4)	21.2 (20.4-21.9)	22.1 (21.4-22.9)	23.7 (22.9-24.5)	25.9 (25.1-26.8)
3					
Number of participants	2074	2022	2383	2798	3215
Proportion (95% CI)	10.1 (9.6-10.7)	9.2 (8.7-9.7)	10.9 (10.4-11.5)	12.2 (11.6-12.8)	14.6 (14.0-15.2)
4					
Number of participants	804	502	446	451	393
Proportion (95% CI)	4.0 (3.6-4.3)	2.2 (2.0-2.4)	2.1 (1.8-2.4)	2.0 (1.8-2.2)	1.6 (1.4-1.8)

Prevalences (95% CIs) were weighted to represent the overall Chinese adult population aged 18 years or older.

The number of cardiometabolic disorders for each participant was the presence number of obesity or central obesity, diabetes, dyslipidemia, and hypertension. For each cardiometabolic disorder, the participants received 1 if this disorder presented, and 0 otherwise.

Supplementary Table 3. Prevalences of cardiometabolic disorders according to joint categories of HOMA-IR and HOMA-B

Cardiometabolic disorders	HOMA-IR/HOMA-B levels								
	Low/ High	Low/ Median	Low/ Low	Median/ High	Median/ Median	Median/ Low	High/ High	High/ Median	High/ Low
Number of participants	6897	16291	14287	16459	17753	3267	14119	3434	1183
Obesity or central obesity	20.9 (19.7-22.2)	17.6 (16.9-18.3)	15.4 (14.7-16.2)	33.7 (32.8-34.6)	32.3 (31.4-33.2)	35.3 (33.2-37.3)	55.5 (54.4-56.6)	60.8 (58.6-63.0)	61.4 (57.6-65.2)
Diabetes	1.4 (1.1-1.7)	2.0 (1.7-2.3)	7.7 (7.1-8.3)	1.9 (1.6-2.1)	4.9 (4.5-5.3)	43.5 (41.3-45.6)	10.7 (10.0-11.3)	46.2 (44.0-48.4)	97.6 (96.4-98.8)
Dyslipidemia	45.5 (43.8-47.1)	45.2 (44.2-46.2)	43.6 (42.5-44.7)	52.2 (51.2-53.3)	51.6 (50.7-52.6)	52.3 (50.1-54.5)	64.4 (63.3-65.5)	65.5 (63.4-67.6)	72.9 (69.4-76.3)
Hypertension	21.9 (20.7-23.2)	26.5 (25.7-27.4)	36.0 (35.0-37.0)	26.4 (25.5-27.2)	35.5 (34.6-36.4)	46.8 (44.6-48.9)	39.5 (38.4-40.5)	55.1 (52.8-57.3)	59.5 (55.6-63.3)

Prevalences (95% CIs) were weighted to represent the overall Chinese adult population aged 18 years or older.

HOMA-IR and HOMA-B levels were divided by the respective quintiles: for HOMA-IR levels, low refers to quintile 1 and 2, median refers to quintile 3 and 4, and high refers to quintile 5; for HOMA-B levels, low refers to quintile 1; median refers to quintile 2 and 3; and high refers to quintile 4 and 5.