## SUPPLEMENTARY MATERIAL

# Self-report of chronic diseases in old-aged individuals: extent of agreement with general practitioner medical records in the German AugUR study 

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Supplementary Figure 2a)-k). Percentages of overall agreement stratified by sex, age, status of living with a partner and education status. Overall agreement includes all coincident statements of participants and general practitioners, whether they are positive or negative statements. Threshold for age was generated through a median split. Percentages and valid totals for each subgroup are given. Total $n$ varies due to missing values in diseases or independent variables. COPD=chronic obstructive pulmonary disease.

## SUPPLEMENTARY NOTE

## Recruitment and response in AugUR baseline

For AugUR-1 baseline survey, a written invitation letter was sent to 5,644 persons aged 70 to 95 years ( 2,437 men, 3,207 women). A total of 2,457 persons were contactable ( $43.5 \%$ contact proportion) resulting in 1133 study participants ( $46.1 \%$ cooperation proportion). The overall net response rate was $20.1 \%$, larger in men than in women ( $25.5 \%$ versus $15.9 \%$ ) and decreasing by age ( $26.0 \%$ in age group $70-74,7.2 \%$ in those $90-95$ years). For the second cross-sectional survey (AugUR2-BL), we sent a written invitation letter to 7,878 contactable persons aged between 70 and 95 years ( 2,629 men, 5,249 women). Based on the response results of the first AugUR survey, we adjusted numbers and sex ratio in age groups to best fit the Bavarian population $70+$ in our current study sample. Contact was possible with 2,894 persons $(36.7 \%$ contact proportion) resulting in 1,316 study participants ( $45.5 \%$ cooperation proportion). The overall net response rate was $16.7 \%$, larger in men than in women ( $21.0 \%$ versus $14.6 \%$ ) and decreasing by age (18.2\% in age group 70-74, $7.3 \%$ in those $90-95$ years).

Supplementary Table 1. Patterns of missing information in self-reports and GP-reports.

| Self-report |  |  |  |  | GP-report |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Disease | Yes | No | I don't know | GP-reports on participants answering "I don't know" | Yes | No | missing | Self-reports on cases with missing GPreports |
| Hypertension | 432 (73.3) | 156 (26.5) | 1 (0.2) | Yes: 0 <br> No:1 <br> Missing: 0 | 437 (74.2) | 134 (22.8) | 18 (3.1) | Yes: 9 No: 9 I don't know: 0 |
| Diabetes | 141 (23.9) | 448 (76.1) | 0 (0) | Yes: 0 <br> No: 0 <br> Missing: 0 | 171 (29.0) | 415 (70.4) | 3 (0.5) | Yes: 0 <br> No: 3 <br> I don't know: 0 |
| Myocardial infarction | 57 (9.7) | 530 (90.0) | 2 (0.3) | Yes: 0 <br> No: 2 <br> Missing: 0 | 43 (7.3) | 536 (91.0) | 10(1.7) | Yes: 1 <br> No: 9 <br> I don't know: 0 |
| Heart failure | 473 (80.3) | 112 (19.0) | 4 (0.7) | Yes: 0 <br> No: 4 <br> Missing: 0 | 105 (17.8) | 476 (80.8) | 8 (1.4) | Yes: 2 <br> No: 6 <br> I don't know: 0 |
| Stroke | 54 (9.2) | 531 (90.2) | 4 (0.7) | Yes: 0 <br> No: 4 <br> Missing: 0 | 46 (7.8) | 539 (91.5) | 4 (0.7) | Yes: 1 <br> No: 3 <br> I don't know: 0 |
| Kidney disease | 171 (29.0) | 417 (70.8) | 1 (0.2) | Yes: 1 <br> No: 0 <br> Missing: 0 | 124 (21.1) | 458 (77.8) | 7 (1.2) | Yes: 3 <br> No: 4 <br> I don't know: 0 |
| Cancer | 158 (26.8) | 430 (73.0) | 1 (0.2) | Yes: 1 <br> No: 0 <br> Missing: 0 | 151 (25.6) | 434 (73.7) | 4 (0.7) | Yes: 3 <br> No: 1 <br> I don't know: 0 |
| Asthma | 57 (9.7) | 530 (90.0) | 2 (0.3) | Yes: 1 <br> No: 1 <br> Missing: 0 | 36 (6.1) | 485 (82.3) | 68 (11.5) | Yes: 5 <br> No: 63 <br> I don't know: 0 |
| Chronic Bronchitis/ COPD | 55 (9.3) | 532 (90.6) | 2 (0.3) | Yes: 0 <br> No: 1 Missing: 0 | 31 (5.3) | 485 (82.3) | 73 (12.4) | Yes: 9 <br> No: 64 <br> I don't know: 0 |
| Rheumatoid arthritis | 79 (13.4) | 505 (85.7) | 5 (0.8) | Yes: 2 <br> No: 3 <br> Missing: 0 | 28 (4.8) | 488 (82.9) | 73 (12.4) | Yes: 10 <br> No: 63 <br> I don't know: 0 |
| Arthrosis | 391 (66.4) | 195 (33.1) | 3 (0.5) | Yes: 1 <br> No: 1 <br> Missing: 1 | 242 (41.1) | 297 (50.4) | 50 (8.5) | Yes: 32 <br> No: 17 <br> I don't know: 1 |

GP=general practitioner; COPD=chronic obstructive pulmonary disease.
As we did not incorporate missing values of GPs and "I don't know"-answers of participants in our analyses, we addressed them in this supplementary table. The left half of the table depicts the selfreported diseases and GPs data on cases where participants reported "I don't know". The right half of the table depicts GP-reports and self-reported data on cases where GPs did not provide information (missing). In most cases, the GP or participant did not report the disease if the counterpart did not provide information on the disease (i.e., missing or "I don't know"); except for arthrosis, where the majority of participants reported the disease when GPs did not provide information on it.

Supplementary Table 2. Cross-tables showing raw data of self-reports and GP-reports for diabetes, myocardial infarction, heart failure, stroke, kidney disease and cancer.

|  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | yes | no | total |
| Diabetes | Self- | yes | 126 | 15 | 141 |
|  | report | no | 45 | 400 | 445 |
|  |  | total | 171 | 415 | 586 |
| Myocardial | Self- | yes | 29 | 27 | 56 |
| infarction | report | no | 14 | 507 | 521 |
|  |  | total | 43 | 534 | 577 |
| Heart failure | Self- | yes | 40 | 70 | 110 |
|  | report | no | 65 | 402 | 467 |
|  |  | total | 105 | 472 | 577 |
| Stroke | Self- | yes | 30 | 23 | 53 |
|  | report | no | 16 | 512 | 528 |
|  |  | total | 46 | 535 | 581 |
| Kidney | Self- | yes | 48 | 120 | 168 |
| disease | report | no | 75 | 338 | 413 |
|  |  | total | 123 | 458 | 581 |
| Cancer | Self- | yes | 110 | 47 | 157 |
|  | report | no | 40 | 387 | 427 |
|  |  | total | 150 | 434 | 584 |

This table shows raw data of self-reports and GP-reports on diabetes, myocardial infarction, heart failure, stroke, kidney disease and cancer. For these conditions, a diagnose date was given by the GP. If the disease was diagnosed after the participant's last chance of reporting it in an interview, it was considered absent. The adapted numbers of reported diseases are used in the following analyses and are presented in Supplementary Table 4.

## Supplementary Table 3. Absolute and relative numbers on disease cases considered to be absent.

| Disease | Disease cases <br> considered to be absent | n (participants) | Proportion |
| :--- | :---: | :---: | :---: |
| Diabetes | 5 | 586 | $5 / 586=0.85 \%$ |
| Myocardial infarction | 5 | 577 | $5 / 577=0.87 \%$ |
| Heart failure | 10 | 577 | $10 / 577=1.73 \%$ |
| Stroke | 3 | 581 | $3 / 581=0.52 \%$ |
| Kidney disease | 11 | 581 | $11 / 581=1.89 \%$ |
| Cancer | 12 | 584 | $12 / 584=2.05 \%$ |

Diseases diagnosed after the participant's last chance of reporting it in an interview were considered absent. The numbers of respective absent diseases are shown in in reference to the number of cases ( $n$ ) where both participant and GP gave information on the disease status (i.e., without missing values and "I don't know").

Supplementary Table 4. Cross-tables showing number of self-reports and GP-reports as used in further analyses.

| Hypertension | Selfreport |  | $\begin{gathered} \text { GP } \\ \text { yes } \end{gathered}$ | no | total |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | yes | 376 | 47 | 423 |
|  |  | no | 61 | 86 | 147 |
|  |  | total | 437 | 133 | 570 |
| Diabetes | Selfreport | yes | 126 | 15 | 141 |
|  |  | no | 40 | 405 | 445 |
|  |  | total | 166 | 420 | 586 |
| Myocardial infarction | Selfreport | yes | 29 | 27 | 56 |
|  |  | no | 9 | 512 | 521 |
|  |  | total | 38 | 577 | 577 |
| Heart failure | Selfreport | yes | 40 | 70 | 110 |
|  |  | no | 65 | 402 | 467 |
|  |  | total | 105 | 472 | 577 |
| Stroke | Selfreport | yes | 30 | 23 | 53 |
|  |  | no | 13 | 515 | 528 |
|  |  | total | 43 | 538 | 581 |
| Kidney disease | Selfreport | yes | 48 | 120 | 168 |
|  |  | no | 64 | 349 | 413 |
|  |  | total | 112 | 469 | 581 |
| Cancer | Selfreport | yes | 110 | 47 | 157 |
|  |  | no | 28 | 399 | 427 |
|  |  | total | 138 | 446 | 584 |
| Asthma | Selfreport | yes |  | 27 | 52 |
|  |  | no | 10 | 457 | 467 |
|  |  | total | 35 | 484 | 519 |
| Chronic bronchitis/ COPD | Selfreport | yes | 14 | 32 | 46 |
|  |  | no | 17 | 451 | 468 |
|  |  | total | 31 | 483 | 514 |
| Rheumatoid arthritis | Selfreport | yes | 12 | 57 | 69 |
|  |  | no | 14 | 428 | 442 |
|  |  | total | 26 | 485 | 511 |
| Arthrosis | Selfreport | yes | 183 | 176 | 359 |
|  |  | no | 58 | 120 | 178 |
|  |  | total | 241 | 296 | 537 |

Cross-tables show distributions of self-reports and GP-reports, with GP-reports as reference category. GP=general practitioner; COPD=chronic obstructive pulmonary disease.

Supplementary Table 5. Characteristics of AugUR participants included in the GP substudy and participants not included in the sub-study.

|  | GP sub-study participants $\mathrm{n}=589$ | AugUR participants not included in sub-study. $\mathrm{n}=1,732$ |
| :---: | :---: | :---: |
| Sex \| n (\%) |  |  |
| women | 313 (53.1) | 906 (52.3) |
| men | 276 (46.9) | 826 (47.7) |
| Age \| median (IQR) | 79.0y (75.5-82.6y) | 78.8 y (75.8y-82.7y) |
| Living with partner \| n (\%) |  |  |
| no | 265 (45.0) | 689 (39.8) |
| yes | 324 (55.0) | 1,043 (60.2) |
| Education \| n (\%) |  |  |
| $\leq 8$ years | 309 (53.1) | 864 (50.2) |
| >8 years | 273 (46.9) | 857 (49.8) |
| Most recent interview time point \| n (\%) |  |  |
| 2013-2015 (AugUR-1-BL) |  | 250 (14.4) |
| 2016-2018 (AugUR-1-F1) | 146 (24.8) | 459 (28.6) |
| 2017-2019 (AugUR-2-BL) | 340 (57.7) | 904 (52.2) |
| 2019-2020 (AugUR-1-F2) | 31 (5.3) | 83 (4.8) |
| Disease count \| mean (SD) | 2.90 (1.6) | 2.83 (1.5) |

IQR=inter quartile range; y=years; AugUR-1-BL=baseline visit AugUR-1 cohort; AugUR-1-F1=follow-up1 visit AugUR-1 cohort; AugUR-2-BL=baseline visit AugUR-2 cohort; AugUR-1-F2=follow-up-2 visit AugUR-1 cohort. Absolute numbers and percentages are shown.

To address the question of selection bias, we compared the characteristics of our sub-study participants with the characteristics of AugUR participants not included in the sub-study. Shown are the characteristics for 589 GP sub-study participants and for 1,732 participants of AugUR. The 1,732 participants gave consent and valid information to contact their GPs but were excluded from the sub-study as the respective GPs did not provide information on the disease status. In addition, we evaluated the mean number of selfreported diseases (disease count ranging from 0-11), to check whether GPs did preferentially provide information on "healthier" patients with shorter medical records; this was not the case.

Supplementary Figure 1.





Supplementary Figure 2.




