

Appendix 4 (as supplied by the authors): Risk of decline in functional status in tertiles of resting heart rate and SDNN after exclusion of participants with incident non-fatal stroke during follow-up

	Tertiles of HR/SDNN			P for trend
	Low	Middle	High	
Heart Rate	n=1580	n=1685	n=1577	
ADL, OR (95% CI)				
Model 1	1 (ref)	1.16 [0.94;1.44]	1.74 [1.41;2.13]	<0.001
Model 2	1 (ref)	1.24 [0.99;1.55]	1.84 [1.47;2.30]	<0.001
IADL, OR (95% CI)				
Model 1	1 (ref)	1.08 [0.90;1.29]	1.41 [1.17;1.68]	<0.001
Model 2	1 (ref)	1.07 [0.89;1.30]	1.37 [1.12;1.66]	0.001
SDNN	n=1626	n=1603	n=1613	
ADL, OR (95% CI)				
Model 1	1.34 [1.11;1.63]	0.92 [0.75;1.13]	1 (ref)	0.002
Model 2	1.27 [1.04;1.55]	0.88 [0.72;1.09]	1 (ref)	0.02
IADL, OR (95% CI)				
Model 1	1.35 [1.13;1.61]	1.14 [0.95;1.36]	1 (ref)	0.001
Model 2	1.29 [1.08;1.54]	1.11 [0.93;1.33]	1 (ref)	0.005

Abbreviations: HR: Heart Rate; SDNN: Standard Deviation of the Normal to Normal R-R intervals; n: Number; msec: milliseconds; ADL: basic Activities of Daily Living; IADL: Instrumental Activities of Daily Living; OR: Odds Ratio; CI: Confidence Interval. Model 1: adjusted for country, age, sex, education. Model 2: adjusted for country, age, sex, education, ADL/IADL at baseline, smoking, body mass index, history of hypertension, history of diabetes mellitus, history of claudication, history of myocardial infarction, history of stroke/transient ischemic attack, statin treatment, diuretics, angiotensin converting enzyme inhibitors, angiotensin receptor blockers, beta-blockers, calcium-channel blockers, nitrates, aspirin and anticoagulants.