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| **Supplemental Table 2.** Association of energy-adjusted honey intake with NAFLD in the TCLSIH Study (n=21,979) |
| Logistic regression models | Honey intake (g/1000 kcal per day) a | *P* for trend b |
| almost never | Tertile 1 | Tertile 2 | Tertile 3 |
| Range (women/men) | 0 | (0.09, 0.23) / (0.07, 0.26) | (0.23, 0.64) / (0.26, 0.88) | (0.64, 13.3) / (0.88, 15.1) | - |
| No. of participants | 10,286 | 3,895 | 3,903 | 3,895 | - |
| No. of NAFLD | 3,564 | 966 | 962 | 1,021 | - |
|  Model 1 | 1.00 (reference) | 0.82 (0.74, 0.91) c | 0.83 (0.75, 0.91) | 0.83 (0.75, 0.92) | <0.0001 |
|  Model 2 | 1.00 (reference) | 0.87 (0.78, 0.97) | 0.89 (0.80, 0.99) | 0.91 (0.82, 1.01) | 0.02 |
|  Model 3 | 1.00 (reference) | 0.87 (0.78, 0.97) | 0.89 (0.80, 0.99) | 0.91 (0.82, 1.01) | 0.03 |
| NAFLD, non-alcoholic fatty liver disease; TCLSIH, Tianjin Chronic Low-grade Systemic Inflammation and Health. |
| a Because the majority of participants (46.8%) almost never consumed honey, we set as “almost never” as the reference group. The remaining participants with honey consumption were ranked into tertiles. |
| b Obtained by using logistic regression analysis. |
| c Data are odds ratio (95% confidence interval). |
| Model 1 was adjusted for age, sex, and body mass index. |
| Model 2 was adjusted for age, sex, body mass index, smoking status, alcohol intake, education level, occupation, household income, physical activity, family history of disease (including cardiovascular disease, hypertension, hyperlipidemia, and diabetes), hypertension, hyperlipidemia, diabetes, and total energy intake. |
| Model 3 was adjusted for the same variables as in model 2 and further for three main dietary pattern scores (honey intake was not included in the calculation). |