|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Supplementary Table 2** Association of Mediterranean diet score with frailty status | | | | | | | | | | |
|  | **Referent**  **n=198** | **Prefrail**  **n=206** | |  | | **Frail**  **n=36** | | | **P trend**  **Unadjusted** | **P trend Adjusted a** |
|  |  | β (SE) | 95% CI | |  | | β (SE) | 95% CI |  |  |
| MED Tertiles |  |  |  | |  | |  |  | 0.005 | 0.004 |
| Tertile 1, n=160 | Ref | Ref |  | |  | | Ref |  |  |  |
| Tertile 2, n=147 | Ref | 0.66 (0.29) | 0.37- 1.15 | |  | | 0.50 (0.57) | 0.16- 1.54 |  |  |
| Tertile 3, n=196 | Ref | 0.47 (0.27) | 0.27- 0.80 | |  | | 0.50 (0.54) | 0.17- 1.43 |  |  |
| β coefficient, standard of error (SE) and 95% confidence interval (CI) were calculated using multinomial logistic regression analysis. The reference category was Referent (not frail).  Tests for a linear trend across tertiles of Mediterranean diet score were conducted using the median value in each category as a continuous variable in the models in logistic regression analysis. Frailty was used as 2 categories (frail and prefrail vs. referent) in regression analysis to assess P for trend between tertile categories of diet and frailty status.  a Covariates in adjusted models were age (years), energy intake (kJ/d), smoking status, living status (living alone, live with another person and live in retirement home), marital status (unmarried, cohabiting, married, divorced, widow) and intervention group. | | | | | | | | | | |