Supplementary Table S2. The Relationship Between the Reason for the Dental Visits and Incident Functional Disability According to Number of Teeth (n=12,370).

				Hazard Ratio (95% Confidence Interval)	
Dental visits and Number of Teeth	Participants, n	Person- years	Events, n (%)	Model 1*1	Model 2*2
≥1 dental visits for treatment per year					
≥20	4,047	21,152	476 (11.8)	1.00 (reference)	1.00 (reference)
10-19 with dental visits	1,972	10,015	330 (16.7)	1.17 (1.02-1.35)	1.15 (0.99-1.32)
10-19 with no dental visits	1,136	5,713	200 (17.6)	1.23 (1.04-1.45)	1.15 (0.98-1.36)
0-9 with dental visits	2,284	11,214	513 (22.5)	1.25 (1.10-1.42)	1.14 (1.00-1.30)
0-9 with no dental visits	2,931	13,484	810 (27.6)	1.36 (1.21-1.54)	1.24 (1.10-1.40)
$\geq 1$ dental visits for other reasons per year					
≥20	4,047	21,152	476 (11.8)	1.00 (reference)	1.00 (reference)
10-19 with dental visits	1,065	5,464	169 (15.9)	1.11 (0.93-1.33)	1.07 (0.90-1.28)
10-19 with no dental visits	2,043	2,043	361 (17.7)	1.23 (1.07-1.41)	1.19 (1.03-1.36)
0-9 with dental visits	1,026	4,983	240 (23.4)	1.35 (1.15-1.58)	1.21 (1.03-1.42)
0-9 with no dental visits	4,189	19,716	1083 (25.9)	1.30 (1.17-1.46)	1.19 (1.06-1.34)

 $<sup>*^{1}</sup>$ Model 1: Adjusted for age (65-69, 70-74, 75-79, 80-84, and  $\geq$ 85 y) and sex.

**Title:** Impact of Oral Self-care on Incident Functional Disability in Elderly Japanese: The Ohsaki Cohort 2006 Study **Authors:** Shino Bando MSc, <sup>1</sup> Yasutake Tomata PhD, <sup>1</sup> Jun Aida DDS, PhD, <sup>2</sup> Kemmyo Sugiyama MD, PhD, <sup>1</sup> Yumi Sugawara PhD, <sup>1</sup> and Ichiro Tsuji MD, PhD <sup>1</sup>

<sup>\*\*2</sup>Model 2: Adjusted for model 1 + education level (age upon final graduation from school <16, 16-18,  $\geq$ 19 y, missing), smoking (never, former, current, missing), alcohol drinking (never, former, current, missing), body mass index (kg/m2; <18.5, 18.5-24.9,  $\geq$ 25.0, missing), time spent walking daily (<30 min/d, 30 min/d-1h/d, >1h/d, missing), history of disease (stroke, hypertension, myocardial infarction, diabetes mellitus), psychological distress score (<13,  $\geq$ 13, missing), energy intake (sex-specific tertile, missing), and protein intake (sex-specific tertile, missing).

\*\*3Other reason is getting dental checkup and scaling, for example.