10.1071/EN19195_AC

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Environmental Chemistry 2020, 17(4), 304-313

Supplementary Material

Association of plasma antimony concentration with markers of liver function in Chinese adults

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Content

Table S1. Association of plasma antimony concentration with serum liver enzyme
ratios among the study participants (N=4733)
Figure S1. The restricted cubic spline for the association between plasma antimony
concentration and incident elevation of liver function markers (N=4733)S-4
Table S2. Basic characteristic of participants free of acute hepatitis B virus infection at
the follow-up survey (N=3924)
Figure S2. Association between plasma antimony concentration and incident elevation
of liver function markers among participants free of acute hepatitis B virus infection at
the follow-up survey (N=3924).

Table S1. Association of plasma antimony concentration with serum liver enzyme ratios among the study participants (N=4733). ^A

Abbreviation: ALP, alkaline phosphatase; ALT, alanine aminotransferase; AST, aspartate aminotransferase; TBil, total bilirubin; DBil, direct bilirubin; IBil, indirect bilirubin; CI, confidence interval; BMI, body mass index; eGFR, estimated glomerular filtration rate;

ULN, upper limit of normal.

Liver enzyme ratios		β (95% CI)	
	Model 1 ^B	Model 2 ^C	Model 3 ^D
Ratio 1 ^E	0.00 (-0.02, 0.02)	0.00 (-0.02, 0.02)	0.01 (-0.01, 0.03)
Ratio 2 ^F	0.03 (0.00, 0.07)	0.03 (0.00, 0.07)	0.03 (-0.01, 0.06)

^A Plasma antimony concentration was naturally log transformed.

^B Model 1 was adjusted for age, gender, and eGFR.

^C Model 2 was further adjusted for BMI, smoking, drinking status, and education level.

^D Model 3 was further adjusted for hypertension, hyperlipidemia, and future disease status.

^E Ratio 1 was defined as AST value/ALT levels.

^F Ratio 2 was defined as the ratio of (ALT value/ ALT ULN) and (ALP value/ ALP ULN).

Figure S1. The restricted cubic spline for the association between plasma antimony concentration and incident elevation of liver function markers (N=4733).

The lines represented adjusted odds ratios based on restricted cubic splines for the natural log-transformed concentration of plasma antimony in the fully adjusted logistic regression model.

Knots were placed at the 5th, 35th, 65th, and 95th percentiles, with the reference value (OR=1) set at the 10th percentile.

The model was adjusted for age, gender, eGFR, BMI, smoking status, drinking status, education level, hypertension, hyperlipidemia, and future disease status.









Table S2. Basic characteristic of participants free of acute hepatitis B virus infection at

the follow-up survey (N=3924)

Variables	Participants without acute HBV infection	
No of participants	3924	
Age (years)	64.51 ± 7.43	
Male, n (%)	2276 (48.1)	
BMI (kg m ⁻²)	24.53 ± 3.27	
Waist circumference (cm)	83.44 ± 9.35	
Smoking status, n (%)		
Current smoker	799 (20.4)	
Former smoker	425 (10.9)	
Never smoker	2690 (68.7)	
Drinking status, n (%)		
Current drinker	916 (23.3)	
Former drinker	183 (4.7)	
Never drinker	2825 (72.0)	
Education level, n (%)		
Primary school or below	1246 (32.1)	
Middle school	1453 (37.4)	
High school or beyond	1183 (30.5)	
Physical activity, n (%)	2236 (64.9)	
eGFR, (mL min ⁻¹ 1.73 ⁻¹ m ⁻²)	87.20 ± 22.55	
Hypertension, n (%)	2014 (51.3)	
Hyperlipidemia, n (%)	1775 (45.2)	
Family history of chronic hepatitis, n (%)	21 (0.5)	
Plasma antimony, (µg L ⁻¹)	0.12 (0.07, 0.20)	
ALP, (U L ⁻¹)	92 ± 28	
ALT, (U L ⁻¹)	21 ± 19	
AST, (U L ⁻¹)	24 ± 13	
TBil, (µmol L ⁻¹)	14.54 ± 5.95	
DBil, (µmol L ⁻¹)	4.64 ± 2.14	
IBil, (μmol L ⁻¹)	9.90 ± 4.49	

Abbreviation: HBV, hepatitis B virus.

Figure S2. Association between plasma antimony concentration and incident elevation of liver function markers among participants free of acute hepatitis B virus infection at the follow-up survey (N=3924).

The lines represented adjusted odds ratios based on restricted cubic splines for the natural log-transformed concentration of plasma antimony in the fully adjusted logistic regression model.

Knots were placed at the 5th, 50th, and 95th percentiles, with the reference value (OR=1) set at the 10th percentile.

The model was adjusted for age, gender, eGFR, BMI, smoking status, drinking status, education level, hypertension, hyperlipidemia, and future disease status.





