

Supplementary Table 1. Baseline participant characteristics in the whole analytic sample and subsamples of the Women's Health Initiative

	Whole analytic sample (<i>n</i> = 155,925)	CVD Biomarker Study (<i>n</i> = 22,561)	DXA Study (<i>n</i> = 10,894)
Age, y	63.2	63.9	63.3
Race/ethnicity, %			
White	82.8	46.8	77.8
Black/African-American	8.9	35.5	13.7
Hispanic/Latino	3.9	15.3	6.3
Other/unknown	4.4	2.4	2.2
College degree or above, %	39.7	32.3	30.6
Annual family income ≥\$50,000, %	40.5	28.8	29.3
Smoking status, %			
Never	51.2	52.5	54.8
Former	41.9	38.3	37.2
Current	6.9	9.2	8.0
Moderate alcohol consumption (5-15 g/d), %	16.8	12.6	13.1
Recreational physical activity, MET-h/wk	12.5	10.7	13.9
AHEI-2010 (excluding alcohol)	47.3	45.5	45.3
Hormone replacement therapy, %			
Never	43.6	60.6	47.4
Former	16.0	20.2	15.9
Current	40.2	19.2	36.8
Hypertension, %	38.8	46.7	40.2
Dyslipidemia, %	14.3	15.5	14.0
Reported diabetes, %	5.7	9.3	7.5
Reported CHD or stroke, %	4.1	5.1	4.9
Study group, %			
WHI Observational Study	57.5	24.9	56.1
Control of WHI clinical trials	16.5	25.0	17.2
Active arms of WHI clinical trials	26.0	50.1	26.6
Anthropometric measures			
Body mass index, kg/m ²	27.9	29.6	28.2
Waist circumference, cm	86.3	89.7	85.7
Hip circumference, cm	106.3	108.7	106.5
Waist-to-hip ratio	0.81	0.82	0.80
Height, cm	161.8	161.1	161.7

AHEI, alternate Healthy Eating Index; CHD, coronary heart disease; CVD, cardiovascular disease; DXA, dual energy X-ray absorptiometry; MET, metabolic equivalent; WHI, Women's Health Initiative.

Supplementary Table 2. Procedures for identification and adjudication of incident cases of lower-extremity arterial disease in the Women's Health Initiative

No.	Procedures	Details	N (%*)
1	Surgery, angioplasty, or thrombolysis	Surgery, angioplasty, or thrombolysis for lower-extremity arterial disease	923 (80.1)
2	Ultrasonography or angiography	Obstruction or ulcerated plaque ($\geq 50\%$ of the diameter or $\geq 75\%$ of the cross-sectional area) demonstrated on ultrasound or angiogram of the iliac arteries or below	779 (67.6%)
3	Exertional leg pain	Exertional leg pain relieved by rest in combination with: 1) claudication diagnosed by physician; and/or 2) ankle-arm systolic blood pressure ratio ≤ 0.80	326 (28.3%)
4	No doppler pulse in vessels	Absence of pulse by doppler in any major vessel of lower extremities	114 (9.9%)
5	Amputation of one or more toes	Amputation of one or more toes or part of the lower extremity because of ischemia or gangrene	75 (6.5)
6	Positive exercise test	Exercise test that is positive for lower extremity claudication	19 (1.6%)
By 1 or 2			1083 (94.0%)
By 1 or 2 or 3			1104 (95.8%)
By at least two procedures			778 (67.5%)

*Percent cases among 1152 incident cases of lower-extremity arterial disease included in the analysis.

Supplementary Table 3. Information on fasting measures of biomarkers in subsets of the Women's Health Initiative*

Biomarker	Lab	Specimen	n	Mean	SD	Units	Quality Control			
							Dups (n)	Corr (r)	Mean CV (%)	Min Pull Corr (r)
MUFA	Tufts	Citrate	2437	12.32	1.66	%	123	0.82	3.67	0.72
PUFA	Tufts	Citrate	2437	41.60	2.06	%	123	0.81	1.66	0.70
SFA	Tufts	Citrate	2437	46.09	1.29	%	123	0.77	1.09	0.71
Apolipoprotein (a)	Harvard-Rifai	EDTA	3989	25.39	31.63	mg/dL	200	0.98	8.95	0.95
Apolipoprotein A1	Harvard-Rifai	EDTA	3996	178.69	41.97	mg/dL	201	0.84	4.56	0.53
Apolipoprotein B	Harvard-Rifai	EDTA	3996	101.21	26.96	mg/dL	201	0.90	4.9	0.76
Apolipoprotein E	Robinson Lab	EDTA	2988	325.61	90.15	RFU	153	0.70	4.02	0.49
Total LDL	LipoScience	EDTA	4485	1509.92	436.25	nmol/L	245	0.94	6.02	0.70
Large LDL	LipoScience	EDTA	4485	593.77	270.29	nmol/L	245	0.83	14.88	0.73
Medium-Small LDL	LipoScience	EDTA	3964	174.07	96.31	nmol/L	218	0.89	16.82	0.72
Small LDL	LipoScience	EDTA	4485	798.13	495.61	nmol/L	245	0.91	17.73	0.69
Very-Small LDL	LipoScience	EDTA	3964	725.01	392.23	nmol/L	218	0.91	16.28	0.67
LDL Size	LipoScience	EDTA	4484	21.05	0.68	nm	245	0.83	0.89	0.63
Total HDL	LipoScience	EDTA	4485	33.12	6.78	umol/L	245	0.92	4.16	0.76
Large HDL	LipoScience	EDTA	4485	5.89	3.24	umol/L	245	0.93	12.71	0.65
Medium HDL	LipoScience	EDTA	4485	4.57	5.16	umol/L	245	0.89	43.26	0.39
Small HDL	LipoScience	EDTA	4485	22.67	5.73	umol/L	245	0.89	6.53	0.73
HDL Size	LipoScience	EDTA	4485	9.03	0.54	nm	245	0.96	0.78	0.91
Triglyceride	UMMC	Serum	24,207	137.5	83.16	mg/dL	1075	1.00	1.92	0.92
HDL Cholesterol	UMMC	Serum	24,206	53.91	13.53	mg/dL	1075	0.97	3.07	0.83
LDL Cholesterol	UMMC	Serum	23,904	148.96	37.68	mg/dL	1050	0.96	2.95	0.74
Glucose	UMMC	Serum	24,208	103.61	34.79	mg/dL	1075	0.99	1.55	0.77
Insulin	UMMC	Serum	23,420	68.27	102.22	pmol/L	1031	0.99	4.86	0.87
hs-CRP	UMMC	Serum	24,205	5.07	7.50	mg/L	1075	1.00	2.27	0.99
SHBG	Hormone Lab	Serum	11,900	52.28	32.33	nmol/L	645	0.99	5.18	0.53
Adiponectin	Harvard-Rifai	EDTA	2543	8479.98	4264.26	ng/mL	101	0.90	12.3	0.78

CV, Coefficient of variation; HDL, high-density lipoprotein; HOMA-IR, homeostatic model assessment of insulin resistance; hs-CRP, high-sensitivity C-reactive protein; LDL, Low-density lipoprotein; MUFA, monounsaturated fatty acids; PUFA, Polyunsaturated fatty acids; SFA, saturated fatty acids; SHBG, sex hormone-binding globulin.

*Biomarkers highlighted in yellow contributed to the WHI CVD Biomarker Study.

Supplementary Table 4. Measures of predicated waist and hip circumference and risk of lower-extremity arterial disease in the Women's Health Initiative ($n = 155,925$)

	Quartile				P-trend
	Q1	Q2	Q3	Q4	
Predicated waist circumference*					
No. of cases	209	243	307	393	
No. of person-years	640,234	630,514	615,212	583,996	
Model 1 (HR [95% CI])	1.00 (Referent)	1.20 (1.00-1.45)	1.48 (1.24-1.77)	1.91 (1.61-1.77)	<0.0001
Model 2 (HR [95% CI])	1.00 (Referent)	1.19 (0.98-1.43)	1.43 (1.20-1.71)	1.79 (1.51-2.12)	<0.0001
Model 2 + metabolic factors†	1.00 (Referent)	1.11 (0.92-1.34)	1.24 (1.04-1.48)	1.30 (1.09-1.54)	0.0019
Predicated hip circumference*					
No. of cases	391	281	252	228	
No. of person-years	598,935	622,987	629,399	618,635	
Model 1 (HR [95% CI])	1.00 (Referent)	0.73 (0.63-0.86)	0.65 (0.55-0.76)	0.57 (0.49-0.67)	<0.0001
Model 2 (HR [95% CI])	1.00 (Referent)	0.74 (0.63-0.87)	0.66 (0.56-0.77)	0.57 (0.48-0.67)	<0.0001
Model 2 + metabolic factors†	1.00 (Referent)	0.83 (0.71-0.97)	0.77 (0.66-0.90)	0.65 (0.55-0.76)	<0.0001

Model 1 was adjusted for age (y), race/ethnicity (White, Black/African-American, Hispanic/Latino, other/unknown), education (at most high school, some college, college or above), annual family income (<20,000, 20,000-<50,000, 50,000-<75,000, ≥75,000 USD), and study group (3 variables with each being classified as observational, control, and intervention).

Model 2 was adjusted for covariates in the model 1 plus smoking status (never, former, current), pack-years of smoking (for current smokers), alcohol consumption (0, 0-<5, 5-<15, 15-<25, ≥25 g/day), recreational physical activity (MET-h/week), diet-quality score (AHEI-2010 excluding alcohol), hormone replacement therapy (never, former, current [<5 , $5-<10$, $10-<15$, ≥ 15 y]), aspirin use (never, ever), use of nonsteroidal anti-inflammatory drug (never, ever), history of CHD or stroke (yes, no), and height

*Predicated waist circumference was residuals from a multivariable linear regression model in which waist circumference was regressed against hip circumference and other covariates including age, study group, race, smoking status, and baseline hormone use. Predicted hip circumference was residuals from a multivariable linear regression model in which hip circumference was regressed against waist circumference and these covariates. Predicted waist circumference was moderately correlated with absolute waist circumference (Pearson's $r = 0.60$) and was not correlated with absolute hip circumference (Pearson's $r < 0.0001$). Predicted hip circumference was moderately correlated with absolute hip circumference (Pearson's $r = 0.59$) and was not correlated with absolute waist circumference (Pearson's $r < 0.0001$).

†Including reported diabetes (yes, no), dyslipidemia (yes, no), use of antihypertensive drugs (yes, no), and systolic blood pressure (mmHg).

Supplementary 5. Associations of trunk and leg fat mass with risk of lower-extremity arterial disease in the Women's Health Initiative ($n = 10,894$), by smoking status

Smoking status	No. of cases	Trunk fat mass		Leg fat mass	
		HR (95% CI), per 5 kg	P-interaction	HR (95% CI), per 5 kg	P-interaction
Never smoker	39	1.17 (0.83-1.66)	0.17	0.72 (0.44-1.18)	0.0034
Former smoker	46	1.22 (0.87-1.73)		0.65 (0.38-1.14)	
Current smoker	34	1.63 (1.06-2.50)		0.19 (0.09-0.42)	

Results were adjusted for covariates listed for model 2 of Table 3 in the article except smoking status.

Supplementary Table 6. Associations of whole-body fat mass and the ratio of trunk-to-leg fat mass with risk of lower-extremity arterial disease in the Women's Health Initiative ($n = 10,894$)

	Quartile				P-trend	Continuous*
	Q1	Q2	Q3	Q4		
Whole-body fat mass						
Median (range), kg	20.5 (<24.3)	27.7 (24.5-30.8)	34.5 (30.9-38.8)	45.8 (\geq 38.9)		
No. of cases	31	30	29	29		
No. of person-years	43,300	43,312	42,607	41,146		
Model 1 (HR [95% CI])	1.00 (Referent)	0.91 (0.55-1.50)	0.81 (0.55-1.50)	0.77 (0.46-1.31)	0.32	0.86 (0.72-1.02)
Model 2 (HR [95% CI])	1.00 (Referent)	0.92 (0.55-1.54)	0.91 (0.53-1.55)	0.90 (0.48-1.68)	0.75	0.88 (0.71-1.08)
Model 2 + metabolic factors [†]	1.00 (Referent)	0.85 (0.50-1.43)	0.82 (0.47-1.43)	0.77 (0.41-1.45)	0.45	0.84 (0.68-1.03)
Ratio of trunk-to-leg fat mass						
Median (range)	0.83 (<0.99)	1.10 (0.99-1.21)	1.34 (1.22-1.47)	1.69 (\geq 1.48)		
No. of cases	21	30	23	45		
No. of person-years	44,447	43,336	42,328	40,253		
Model 1 (HR [95% CI])	1.00 (Referent)	1.45 (0.83-2.54)	1.07 (0.59-1.93)	2.23 (1.32-3.87)	0.0036	1.49 (1.24-1.79)
Model 2 (HR [95% CI])	1.00 (Referent)	1.63 (0.92-2.87)	1.25 (0.68-2.30)	2.72 (1.58-4.69)	0.0004	1.55 (1.29-1.86)
Model 2 + metabolic factors [†]	1.00 (Referent)	1.38 (0.78-2.45)	1.03 (0.56-1.89)	1.61 (0.91-2.85)	0.15	1.23 (1.01-1.51)

Model 1 was adjusted for age (y), race/ethnicity (White, Black/African-American, Hispanic/Latino, other/unknown), education (at most high school, some college, college or above), annual family income (<20,000, 20,000-<50,000, 50,000-<75,000, \geq 75,000 USD), and study group (3 variables with each being classified as observational, control, and intervention).

Model 2 was adjusted for covariates in the model 1 plus smoking status (never, former, current), pack-years of smoking (for current smokers), alcohol consumption (0, 0-<5, 5-<15, 15-<25, \geq 25 g/day), recreational physical activity (MET-h/week), diet-quality score (AHEI-2010 excluding alcohol), hormone replacement therapy (never, former, current [$<$ 5, 5-<10, 10-<15, \geq 15 y]), aspirin use (never, ever), use of nonsteroidal anti-inflammatory drug (never, ever), history of CHD or stroke (yes, no), height, and whole-body lean mass (for whole-body fat mass) or the ratio of trunk-to-leg lean mass (for the ratio of trunk-to-leg fat mass).

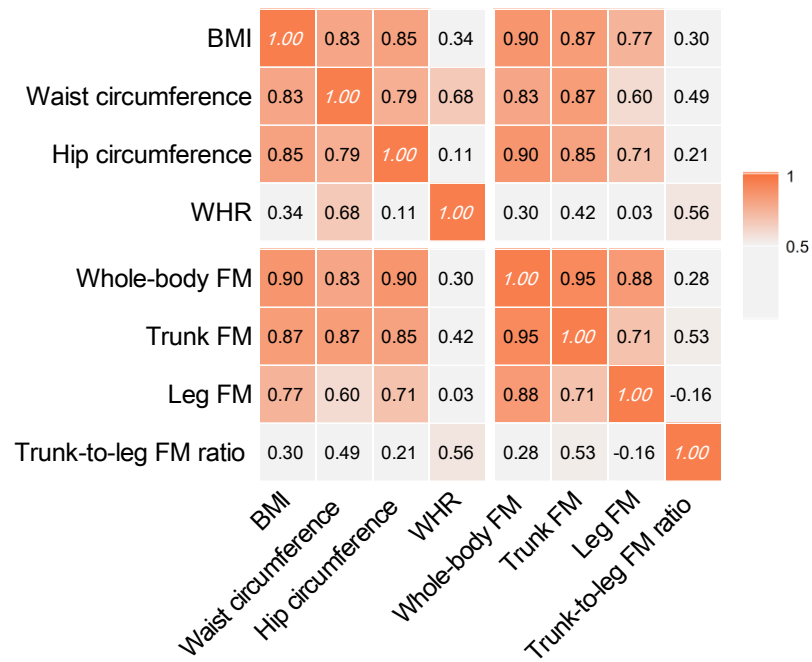
*Scales are 10 kg for whole-body fat mass and 0.5 unit for the ratio of trunk-to-leg fat mass.

[†]Including reported diabetes (yes, no), dyslipidemia (yes, no), use of antihypertensive drugs (yes, no), and systolic blood pressure (mmHg).

Supplementary Figure 1. Correlations between anthropometric measures and body fat mass.

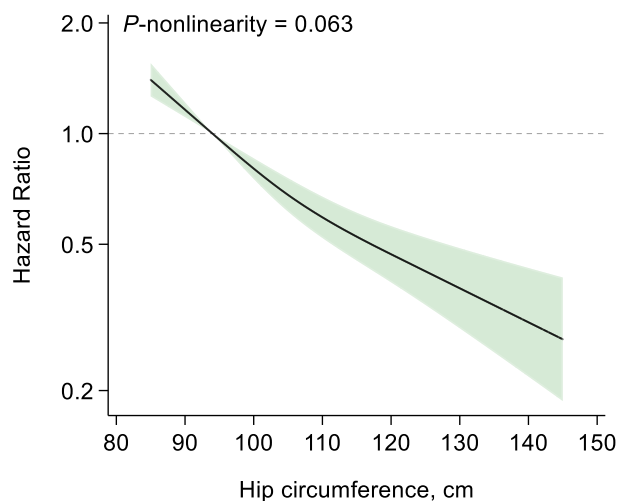
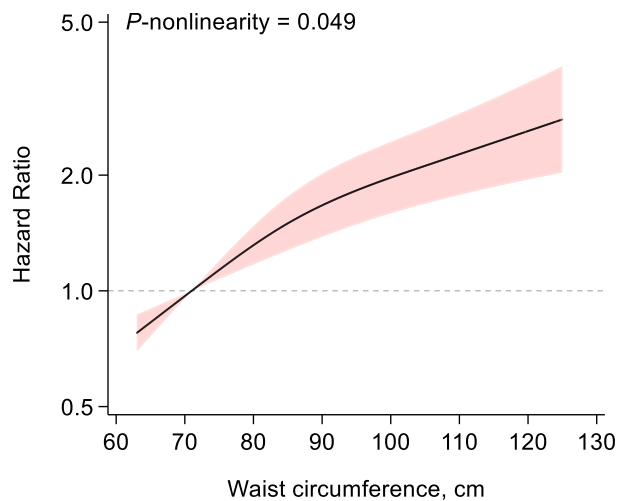
Results were Pearson partial correlation coefficients with adjustment for age, race/ethnicity, and study group.

BMI, body mass index; FM, fat mass; WHR, waist-to-hip ratio.



Supplementary Figure 2. Restricted cubic spline for the association between waist or hip circumference and risk of lower-extremity arterial disease.

Median value for the lowest quartile of waist or hip circumference was used as the referent and results were adjusted for covariates listed for model 2 of Table 2 in the article. All data were included in the analyses and results for waist or hip circumference between 1st and 99th percentile were shown for presentation purpose.



Supplementary Figure 3. Measures of upper- and lower-body fat and multiple cardiometabolic biomarkers.

All biomarker concentrations were transformed using a rank-based inverse normal transformation to approximate a normal distribution. Results are Pearson partial correlations with adjustment for covariates listed for model 2 of Table 2 (for waist and hip circumference) or Table 3 (for trunk and leg fat) in the article in addition to clinical risk factors including use of antihypertensive drugs, systolic blood pressure, dyslipidemia, and diabetes.

HDL, high-density lipoprotein; HOMA-IR, homeostatic model assessment of insulin resistance; hs-CRP, high-sensitivity C-reactive protein; LDL, Low-density lipoprotein; MUFA, monounsaturated fatty acids; PUFA, Polyunsaturated fatty acids; SFA, saturated fatty acids; SHBG, sex hormone-binding globulin.

Biomarker	Waist	Hip	n	Trunk fat	Leg fat	n
MUFA	-0.08	0.03	2399	-0.05	0.12	195
PUFA	-0.06	0.02	2399	-0.20	0.06	195
SFA	0.19	-0.08	2399	0.33	-0.22	195
Apolipoprotein (a)	-0.02	0.04	3975	-0.05	0.02	326
Apolipoprotein A1	-0.12	0.01	3982	-0.25	0.11	328
Apolipoprotein B	0.14	-0.07	3982	0.14	-0.12	328
Apolipoprotein E	-0.04	0.00	2793	-0.01	0.04	272
Total LDL	0.16	-0.13	4256	0.20	-0.15	378
Large LDL	-0.17	0.11	4256	-0.11	0.09	378
Medium-Small LDL	0.24	-0.16	3769	0.27	-0.20	330
Small LDL	0.23	-0.19	4256	0.23	-0.21	378
Very-Small LDL	0.24	-0.17	3769	0.28	-0.21	330
LDL Size	-0.24	0.14	4255	-0.24	0.16	378
Total HDL	-0.06	0.03	4256	0.09	-0.07	378
Large HDL	-0.26	0.11	4256	-0.24	0.12	378
Medium HDL	-0.02	0.12	4256	0.04	0.13	378
Small HDL	0.10	-0.13	4256	0.21	-0.24	378
HDL Size	-0.26	0.16	4256	-0.27	0.18	378
Triglyceride	0.27	-0.16	23,320	0.36	-0.29	2088
HDL Cholesterol	-0.28	0.11	23,319	-0.33	0.23	2088
LDL Cholesterol	0.06	-0.04	23,032	0.04	-0.02	2049
Glucose	0.25	-0.07	23,321	0.32	-0.19	2088
Insulin	0.39	-0.02	22,563	0.52	-0.21	2030
HOMA-IR	0.40	-0.05	22,561	0.54	-0.25	2030
hs-CRP	0.21	0.09	23,318	0.33	0.01	2088
SHBG	-0.33	0.08	11,471	-0.41	0.16	989
Adiponectin	-0.28	0.11	2497	-0.41	0.25	235