## Supplementary Material 1

The questionnaire regarding physical activity in Korean nationwide health screening (translated into English).

Please read the following questions and select your current situation.

During the last 7 days, how many days did you do vigorous activities like heavy lifting, digging, aerobics, or fast bicycling?
$\square 0 \square 1 \square 2 \square 3 \square 4 \square 5 \square 6 \square 7$

During the last 7 days, how many days did you perform moderate physical activities such as carrying light loads, bicycling at a regular place, or double tennis?
※ Do not include walking.
$\square 0 \square 1 \square 2 \square 3 \square 4 \square 5 \square 6 \square 7$

During the last 7 days, on how many days did you walk for at least 30 minutes at a time? This includes walking at work and at home, walking to travel from place to place, and any other walking that you did solely for recreation, sport, exercise, or leisure.
$\square 0 \square 1 \square 2 \square 3 \square 4 \square 5 \square 6 \square 7$

Supplementary Table S1 Hazard ratios and $95 \%$ CIs for the incidence of dementia according to changes in regular physical activity ${ }^{*}$ (sensitivity analysis)

| Change in regular physical activity | N | Event | Person-years <br> (PYs) | Incidence rate (per 1000 PYs ) | HR (95\% CI) |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  | Model $1^{\dagger}$ | Model $2^{\ddagger}$ | Model $3^{8}$ |
| All-cause dementia |  |  |  |  |  |  |  |
| Continuous lack of PA | 92,124 | 2,431 | 441,316 | 5.51 | 1 (reference) | 1 (reference) | 1 (reference) |
| Decreaser | 19,561 | 352 | 94,479 | 3.73 | 0.86 (0.77-0.96) | 0.87 (0.78-0.97) | 0.87 (0.78-0.98) |
| Increaser | 13,180 | 320 | 63,767 | 5.02 | 0.90 (0.80-1.01) | 0.90 (0.80-1.02) | 0.91 (0.81-1.02) |
| Continuous PA | 8,886 | 137 | 42,717 | 3.21 | 0.74 (0.62-0.87) | 0.76 (0.64-0.91) | 0.77 (0.65-0.91) |
| Alzheimer's disease |  |  |  |  |  |  |  |
| Continuous lack of PA | 92,124 | 1,811 | 441,316 | 4.10 | 1 (reference) | 1 (reference) | 1 (reference) |
| Decreaser | 19,561 | 273 | 94,479 | 2.89 | 0.92 (0.81-1.05) | 0.92 (0.81-1.05) | 0.93 (0.82-1.05) |
| Increaser | 13,180 | 237 | 63,767 | 3.72 | 0.91 (0.79-1.04) | 0.91 (0.79-1.04) | 0.91 (0.80-1.05) |
| Continuous PA | 8,886 | 99 | 42,717 | 2.32 | 0.74 (0.60-0.91) | 0.76 (0.62-0.94) | 0.77 (0.63-0.94) |
| Vascular dementia |  |  |  |  |  |  |  |
| Continuous lack of PA | 92,124 | 351 | 441,316 | 0.80 | 1 (reference) | 1 (reference) | 1 (reference) |


| Decreaser | 19,561 | 47 | 94,479 | 0.50 | $0.74(0.54-1.00)$ | $0.76(0.56-1.03)$ | $0.76(0.56-1.03)$ |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| Increaser | 13,180 | 52 | 63,767 | 0.82 | $0.97(0.73-1.30)$ | $0.99(0.74-1.32)$ | $0.99(0.74-1.32)$ |
| Continuous PA | 8,886 | 19 | 42,717 | 0.44 | $0.63(0.40-1.01)$ | $0.68(0.43-1.08)$ | $0.69(0.43-1.09)$ |

HR, hazard ratio; PA, physical activity.
*Regular physical activity was defined as $\geq 1,000$ metabolic equivalent task minutes per week.
${ }^{\dagger}$ Model 1 was adjusted for age and sex.
${ }^{\text {* }}$ Model 2 was adjusted for age, sex, smoking status, alcohol consumption, income level, body mass index, and comorbidities (hypertension, dyslipidemia, chronic kidney disease, cancer, and depression).
${ }^{\S}$ Model 3 was adjusted for age, sex, smoking status, alcohol consumption, income level, body mass index, comorbidities (hypertension, dyslipidemia, chronic kidney disease, cancer, and depression), and antidiabetic drugs.

Supplementary Table S2 Hazard ratios and 95\% CIs for the incidence of dementia according to regular physical activity change over a 4-year interval

| Change in regular physical activity | N | Event | Person-years(PYs) | Incidence rate (per 1000 PYs) | HR (95\% CI) |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  | Model $1^{\dagger}$ | Model $2^{\ddagger}$ | Model $3^{\S}$ |
| All-cause dementia |  |  |  |  |  |  |  |
| Continuous lack of PA | 55,836 | 806 | 138,440 | 5.82 | 1 (reference) | 1 (reference) | 1 (reference) |
| Decreaser | 10,077 | 153 | 25,354 | 6.03 | 1.01 (0.85-1.20) | 1.02 (0.86-1.21) | 1.02 (0.86-1.22) |
| Increaser | 14,879 | 119 | 37,526 | 3.17 | 0.70 (0.58-0.85) | 0.71 (0.58-0.86) | 0.71 (0.58-0.86) |
| Continuous PA | 7,533 | 66 | 19,058 | 3.46 | 0.73 (0.56-0.94) | 0.74 (0.57-0.95) | 0.74 (0.57-0.95) |
| Alzheimer's disease |  |  |  |  |  |  |  |
| Continuous lack of PA | 55,836 | 646 | 138,440 | 4.67 | 1 (reference) | 1 (reference) | 1 (reference) |
| Decreaser | 10,077 | 115 | 25,354 | 4.54 | 0.96 (0.79-1.17) | 0.97 (0.79-1.18) | 0.97 (0.79-1.18) |
| Increaser | 14,879 | 90 | 37,526 | 2.40 | 0.67 (0.54-0.84) | 0.68 (0.54-0.85) | 0.68 (0.54-0.85) |
| Continuous PA | 7,533 | 51 | 19,058 | 2.68 | 0.72 (0.54-0.96) | 0.73 (0.55-0.97) | 0.73 (0.55-0.97) |
| Vascular dementia |  |  |  |  |  |  |  |
| Continuous lack of PA | 55,836 | 102 | 138,440 | 0.74 | 1 (reference) | 1 (reference) | 1 (reference) |


| Decreaser | 10,077 | 19 | 25,354 | 0.75 | $0.94(0.58-1.54)$ | $0.96(0.59-1.56)$ | $0.96(0.59-1.57)$ |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| Increaser | 14,879 | 19 | 37,526 | 0.51 | $0.80(0.49-1.32)$ | $0.82(0.50-1.34)$ | $0.82(0.50-1.35)$ |
| Continuous PA | 7,533 | 11 | 19,058 | 0.58 | $0.84(0.45-1.58)$ | $0.87(0.47-1.64)$ | $0.88(0.47-1.65)$ |

HR, hazard ratio; PA, physical activity.
*Model 1 was adjusted for age and sex.
${ }^{\dagger}$ Model 2 was adjusted for age, sex, smoking status, alcohol consumption, income level, body mass index, and comorbidities (hypertension, dyslipidemia, chronic kidney disease, cancer, and depression).
${ }^{\ddagger}$ Model 3 was adjusted for age, sex, smoking status, alcohol consumption, income level, body mass index, comorbidities (hypertension, dyslipidemia, chronic kidney disease, cancer, and depression), and antidiabetic drugs.

Supplementary Table S3 Hazard ratios and $95 \%$ CIs for the incidence of dementia according to changes in regular physical activity after adjusting for confounders both at initial and follow-up assessment

| Change in regular physical activity | N | Event | Person-years(PYs) | Incidence rate (per 1000 PYs ) | HR (95\% CI) |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  | Model $1^{\dagger}$ | Model $2^{\ddagger}$ | Model $3^{\text {§ }}$ |
| All-cause dementia |  |  |  |  |  |  |  |
| Continuous lack of PA | 86,643 | 2322 | 414,451 | 5.60 | 1 (reference) | 1 (reference) | 1 (reference) |
| Decreaser | 14,396 | 355 | 69,594 | 5.10 | 0.89 (0.80-1.00) | 0.89 (0.80-1.00) | 0.89 (0.80-1.00) |
| Increaser | 21,159 | 385 | 102,371 | 3.76 | 0.85 (0.76-0.95) | 0.86 (0.77-0.96) | 0.86 (0.78-0.96) |
| Continuous PA | 11,533 | 178 | 55,863 | 3.19 | 0.69 (0.59-0.81) | 0.72 (0.61-0.84) | 0.72 (0.62-0.84) |
| Alzheimer's disease |  |  |  |  |  |  |  |
| Continuous lack of PA | 86,643 | 1744 | 414,451 | 4.21 | 1 (reference) | 1 (reference) | 1 (reference) |
| Decreaser | 14,396 | 252 | 69,594 | 3.62 | 0.86 (0.75-0.98) | 0.85 (0.75-0.97) | 0.85 (0.75-0.98) |
| Increaser | 21,159 | 292 | 102,371 | 2.85 | 0.88 (0.78-1.00) | 0.89 (0.79-1.01) | 0.89 (0.79-1.01) |
| Continuous PA | 11,533 | 132 | 55,863 | 2.36 | 0.71 (0.59-0.84) | 0.73 (0.61-0.87) | 0.73 (0.61-0.88) |
| Vascular dementia |  |  |  |  |  |  |  |
| Continuous lack of PA | 86,643 | 328 | 414,451 | 0.79 | 1 (reference) | 1 (reference) | 1 (reference) |


| Decreaser | 14,396 | 59 | 69,594 | 0.85 | $1.01(0.76-1.33)$ | $1.02(0.77-1.35)$ | $1.02(0.78-1.35)$ |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Increaser | 21,159 | 59 | 102,371 | 0.58 | $0.85(0.64-1.12)$ | $0.88(0.66-1.16)$ | $0.88(0.67-1.16)$ |
| Continuous PA | 11,533 | 23 | 55,863 | 0.41 | $0.57(0.37-0.87)$ | $0.61(0.40-0.93)$ | $0.62(0.40-0.94)$ |

HR, hazard ratio; PA, physical activity.
*Model 1 was adjusted for age and sex.
${ }^{\dagger}$ Model 2 was adjusted for age, sex, smoking status, alcohol consumption, income level, body mass index, and comorbidities (hypertension, dyslipidemia, chronic kidney disease, cancer, and depression).
${ }^{\dagger}$ Model 3 was adjusted for age, sex, smoking status, alcohol consumption, income level, body mass index, comorbidities (hypertension, dyslipidemia, chronic kidney disease, cancer, and depression), and antidiabetic drugs.

Supplementary Table S4 Hazard ratios and $95 \%$ CIs for the incidence of dementia according to relative change in physical activity

| Change in PA | MET minutes | N | Event | Person-years(PYs) | Incidence rate (per 1000 PYs ) | HR (95\% CI) |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | per week |  |  |  |  | Model $1^{\dagger}$ | Model $2^{\ddagger}$ | Model $3^{\S}$ |
| All-cause dementia |  |  |  |  |  |  |  |  |
| Continuous lack of PA |  | 86,643 | 2,322 | 414,451 | 5.60 | 1 (reference) | 1 (reference) | 1 (reference) |
| Increaser | <1,000 | 4,514 | 76 | 21,985 | 3.46 | 0.79 (0.63-0.99) | 0.80 (0.63-1.00) | 0.80 (0.64-1.01) |
|  | $\geq 1,000$ | 16,645 | 309 | 80,386 | 3.84 | 0.87 (0.77-0.98) | 0.87 (0.77-0.98) | 0.87 (0.77-0.98) |
| Decreaser | <500 | 7,585 | 201 | 36,869 | 5.45 | 0.91 (0.79-1.05) | 0.91 (0.78-1.05) | 0.90 (0.78-1.04) |
|  | $\geq 500$ | 6,811 | 154 | 32,724 | 4.71 | 0.87 (0.74-1.03) | 0.88 (0.75-1.04) | 0.89 (0.76-1.05) |
| Continuous PA | <1,000 | 2,098 | 30 | 10,257 | 2.92 | 0.61 (0.43-0.88) | 0.65 (0.45-0.93) | 0.65 (0.45-0.93) |
|  | $\geq 1,000$ | 9,455 | 148 | 45,605 | 3.25 | 0.71 (0.60-0.84) | 0.73 (0.62-0.87) | 0.74 (0.63-0.88) |
| Alzheimer's disease |  |  |  |  |  |  |  |  |
| Continuous lack of PA |  | 86,643 | 1,744 | 414,451 | 4.21 | 1 (reference) | 1 (reference) | 1 (reference) |
| Increaser | <1,000 | 4,514 | 51 | 21,985 | 2.32 | 0.72 (0.55-0.96) | 0.73 (0.55-0.96) | 0.73 (0.55-0.97) |
|  | $\geq 1,000$ | 16,645 | 241 | 80,386 | 3.00 | 0.92 (0.80-1.06) | 0.92 (0.80-1.06) | 0.92 (0.81-1.06) |
| Decreaser | <500 | 7,585 | 141 | 36,869 | 3.82 | 0.86 (0.72-1.02) | 0.85 (0.72-1.01) | 0.85 (0.72-1.01) |


|  | $\geq 500$ | 6,811 | 111 | 32,724 | 3.39 | $0.85(0.70-1.03)$ | $0.86(0.71-1.05)$ | $0.87(0.72-1.05)$ |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| Continuous PA | $<1,000$ | 2,098 | 25 | 10,257 | 2.43 | $0.70(0.47-1.04)$ | $0.74(0.50-1.10)$ | $0.75(0.50-1.11)$ |
|  | $\geq 1,000$ | 9,455 | 107 | 45,605 | 2.35 | $0.71(0.58-0.86)$ | $0.73(0.60-0.88)$ | $0.73(0.60-0.89)$ |
| Vascular dementia |  |  |  |  |  |  |  |  |
| Continuous lack of PA | 86,643 | 328 | 414,451 | 0.79 | 1 (reference) | 1 (reference) | 1 (reference) |  |
| Increaser | $<1,000$ | 4,514 | 18 | 21,985 | 0.82 | $1.21(0.75-1.95)$ | $1.24(0.77-2.00)$ | $1.26(0.78-2.02)$ |
|  | $\geq 1,000$ | 16,645 | 41 | 80,386 | 0.51 | $0.75(0.54-1.04)$ | $0.77(0.56-1.07)$ | $0.77(0.56-1.07)$ |
| Decreaser | $<500$ | 7,585 | 37 | 36,869 | 1.00 | $1.15(0.82-1.61)$ | $1.15(0.82-1.62)$ | $1.15(0.82-1.62)$ |
|  | $\geq 500$ | 6,811 | 22 | 32,724 | 0.67 | $0.83(0.54-1.29)$ | $0.86(0.56-1.32)$ | $0.86(0.56-1.33)$ |
| Continuous PA | $<1,000$ | 2,098 | 2 | 10,257 | 0.19 | $0.26(0.07-1.05)$ | $0.28(0.07-1.12)$ | $0.28(0.07-1.12)$ |
|  | $\geq 1,000$ | 9,455 | 21 | 45,605 | 0.46 | $0.64(0.41-1.00)$ | $0.69(0.44-1.07)$ | $0.70(0.45-1.09)$ |

PA, physical activity; MET, metabolic equivalent task; HR, hazard ratio.
*Model 1 was adjusted for age and sex.
${ }^{\dagger}$ Model 2 was adjusted for age, sex, smoking status, alcohol consumption, income level, body mass index, and comorbidities (hypertension,
dyslipidemia, chronic kidney disease, cancer, and depression).
\#Model 3 was adjusted for age, sex, smoking status, alcohol consumption, income level, body mass index, comorbidities (hypertension,
dyslipidemia, chronic kidney disease, cancer, and depression), and antidiabetic drugs.

Supplementary Table S5 Hazard ratios and $95 \%$ CIs for the incidence of dementia after further adjusting for relative changes in physical activity (change in the frequency of physical activity)

| Change in regular physical activity | N | Event | Person-years(PYs) | Incidence rate (per 1000 PYs ) | HR (95\% CI) |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  | Model $1{ }^{\dagger}$ | Model $2^{\ddagger}$ | Model $3^{\text {§ }}$ |
| All-cause dementia |  |  |  |  |  |  |  |
| Continuous lack of PA | 86,643 | 2,322 | 414,451 | 5.60 | 1 (reference) | 1 (reference) | 1 (reference) |
| Decreaser | 14,396 | 355 | 69,594 | 5.10 | 0.88 (0.75-1.02) | 0.88 (0.76-1.03) | 0.89 (0.76-1.03) |
| Increaser | 21,159 | 385 | 102,371 | 3.76 | 0.86 (0.74-1.00) | 0.87 (0.75-1.01) | 0.87 (0.75-1.01) |
| Continuous PA | 11,553 | 178 | 55,863 | 3.19 | 0.69 (0.59-0.81) | 0.72 (0.62-0.84) | 0.73 (0.62-0.85) |
| Alzheimer's disease |  |  |  |  |  |  |  |
| Continuous lack of PA | 86,643 | 1,744 | 414,451 | 4.21 | 1 (reference) | 1 (reference) | 1 (reference) |
| Decreaser | 14,396 | 252 | 69,594 | 3.62 | 0.85 (0.71-1.01) | 0.85 (0.71-1.01) | 0.85 (0.71-1.02) |
| Increaser | 21,159 | 292 | 102,371 | 2.85 | 0.89 (0.75-1.06) | 0.89 (0.75-1.06) | 0.89 (0.75-1.06) |
| Continuous PA | 11,553 | 132 | 55,863 | 2.36 | 0.71 (0.59-0.84) | 0.73 (0.61-0.87) | 0.74 (0.62-0.88) |
| Vascular dementia |  |  |  |  |  |  |  |
| Continuous lack of PA | 86,643 | 328 | 414,451 | 0.79 | 1 (reference) | 1 (reference) | 1 (reference) |


| Decreaser | 14,396 | 59 | 69,594 | 0.85 | $0.84(0.57-1.23)$ | $0.85(0.58-1.25)$ | $0.86(0.58-1.26)$ |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| Increaser | 21,159 | 59 | 102,371 | 0.58 | $1.01(0.70-1.47)$ | $1.039(0.71-1.51)$ | $1.04(0.71-1.51)$ |
| Continuous PA | 11,553 | 23 | 55,863 | 0.41 | $0.57(0.37-0.87)$ | $0.61(0.40-0.93)$ | $0.62(0.40-0.94)$ |

HR, hazard ratio; PA, physical activity.
*Model 1 was adjusted for age and sex.
${ }^{\dagger}$ Model 2 was adjusted for age, sex, smoking status, alcohol consumption, income level, body mass index, and comorbidities (hypertension, dyslipidemia, chronic kidney disease, cancer, and depression).
${ }^{\ddagger}$ Model 3 was adjusted for age, sex, smoking status, alcohol consumption, income level, body mass index, comorbidities (hypertension, dyslipidemia, chronic kidney disease, cancer, and depression), antidiabetic drugs, and changes in the frequency of physical activity.

Supplementary Figure S1 Flow chart of study population


## Supplementary Figure S2 Diagram of the study timeline

## Follow-up period


$1^{\text {st }}$ screening
(2009-2012)

- Participants who were newly diagnosed with type 2 diabetes within 2 years after $1^{\text {st }}$ screening - Physical activity measurement (baseline)

```
2 nd screening
(2010-2015) - Physical activity measurement after 2 years (follow-up)
```

