### **Online-Only Supplemental Material**

#### Intervention

The 2 diets were either a high-protein diet with 25 E% protein, 30 E% fat, 45 E% carbohydrates, and low glycemic index (GI; <50), or a moderate-protein diet with 15 E% protein, 30 E% fat, 55 E% carbohydrates, and moderate GI (56–70). The diets were consumed ad libitum without energy restriction; instead, participants were given advice on meal portion sizes to maintain weight loss. The PA programs consisted of either a high-intensity PA for 75 min·week<sup>-1</sup> or a moderate-intensity PA for 150 min·week<sup>-1</sup>. In order to improve the diet and PA compliance, participants were supported in behavior change with group counselling visits, using the PREVIEW Behavior Modification Intervention Toolbox (PREMIT) (1,2).

- 1. Kahlert D, Unyi-Reicherz A, Stratton G, et al. PREVIEW behavior modification intervention toolbox (PREMIT): a study protocol for a psychological element of a multicenter project. Front Psychol 2016;7:1136
- 2. Huttunen-Lenz M, Hansen S, Christensen P, et al. PREVIEW study-influence of a behavior modification intervention (PREMIT) in over 2300 people with pre-diabetes: intention, self-efficacy and outcome expectancies during the early phase of a lifestyle intervention. Psychol Res Behav Manag 2018;11:383-394

#### **Statistical Analyses**

Differences in baseline characteristics among prediabetes metabolic phenotypes (e.g. iIFG, iIGT, or IFG+IGT) or between those with normal vs intermediate HbA<sub>1c</sub> levels were examined using an independent-samples t test or a 1-way ANOVA for approximately normally-distributed variables, a Mann–Whitney U or a Kruskal–Wallis H non-parametric test for non-normally-distributed variables, and a  $\chi^2$  test for categorical variables.

Cumulative incidence of type 2 diabetes by prediabetes metabolic phenotypes was calculated using the Kaplan–Meier method, without adjustment. Because of the visit windows, some participants had a longer (>156 weeks) survival time and we assumed that their last status was observed at 156 weeks. Diabetes incidence across prediabetes metabolic phenotypes was determined using a time-dependent Cox hazards regression model, adjusted for Ln(time)×phenotype, ethnicity, baseline smoking status, baseline alcohol drinking, baseline BMI, intervention arm and intervention site. The proportional hazards assumption was evaluated using a Wald test of the interaction of prediabetes metabolic phenotypes and time.

# Supplementary Table 1. Human Ethics Committees for each intervention site

Intervention sites	<b>Human Ethics Committees</b>
Denmark (University of	The Research Ethics Committees of the Capital Region
Copenhagen)	
F:-14 (II-::	Coordinating Ethical Committee of HUS (Helsinki and Uusimaa
Finland (University of Helsinki)	Hospital District)
The Netherlands (University of	Medical Ethics Committee of the Maastricht University Medical Centre
Maastricht)	
The UK (University of	UK National Research Ethics Service (NRES) and East Midlands
Nottingham)	(Leicester) Ethics Committee
Spain (University of Navarra)	Research Ethics Committee of the University of Navarra
Bulgaria (Medical University of	Commission on Ethics in Scientific Research with the Medical
Sofia)	University-Sofia (KENIMUS)
Australia (University of Sydney)	The University of Sydney, Human Research Ethics Committee (HREC)
New Zealand (University of	Health and Disability Ethics Committees (HDEC)
Auckland)	

Supplementary Table 2. Overview of data collection

	0	8	26	52	78	104	156
	weeks						
Socio-demographics (age, sex, ethnicity, smoking habits, and alcohol drinking)	×						
Anthropometry (body weight and waist circumference)	×	×	×	×	×	×	×
Body composition (fat mass and fat-free mass)	×	×	×	×		×	×
Glucose metabolism (fasting plasma glucose, HbA <sub>1c</sub> , and fasting insulin)	×	×	×	×		×	×
Glucose metabolism (2-hour plasma glucose)	×		×	×		×	×
Blood pressure (systolic blood pressure and diastolic blood pressure)	×	×	×	×		×	×
Lipid metabolism (total cholesterol, high- density lipoprotein cholesterol, and fasting triglycerides)	×	×	×	×		×	×
Dietary intake*	×		×	×		×	×
Physical activity*	×		×	×		×	×

 $HbA_{1c}$ , hemoglobin  $A_{1c}$ . \*Baseline dietary intake and physical activity and changes in dietary intake and physical activity from baseline were calculated and added to the linear mixed model. The macronutrient composition of the low-energy diet (3400 kJ·day<sup>-1</sup>, protein 43.7 E%, carbohydrate 41.2 E%, fat 15.1 E%, fiber 13.3 g·day<sup>-1</sup>) will be used to estimate dietary intake at 8 weeks. Physical activity at 0 weeks was used to estimate physical activity at 8 weeks, assuming that physical activity did not change from during the weight loss phase. Average dietary intake at 52 and 104 weeks was used to estimate dietary intake at 78 weeks. Average physical activity at 52 and 104 weeks was used to estimate physical activity at 78 weeks.

#### **Supplementary Table 3. Ethnicity**

	iIFG (n=869)	iIGT (n=93)	IFG+IGT (n=548)	P-value*	Intermediate hyperglycemia but normal HbA <sub>1c</sub> level (n=1106)	Intermediate hyperglycemia and intermediate HbA <sub>1c</sub> level (n=384)	<i>P</i> -value†
Ethnicity				< 0.001			< 0.001
Caucasian	773 (89.0%)	70 (75.3%)	488 (89.1%)	_	1012 (91.5%)	300 (78.1%)	_
Asian	16 (1.8%)	11 (11.8%)	13 (2.4%)	_	19 (1.7%)	21 (5.5%)	_
Black	13 (1.5%)	1 (1.1%)	6 (1.1%)	_	10 (0.9%)	10 (2.6%)	_
Arabic	2 (0.2%)	0 (0%)	2 (0.4%)	_	1 (0.1%)	3 (0.8%)	_
Hispanic	22 (2.5%)	2 (2.2%)	9 (1.6%)	_	23 (2.1%)	10 (2.6%)	_
Other	43 (4.9%)	9 (9.7%)	30 (5.5%)	_	41 (3.7%)	40 (10.4%)	_

Data are n (%). iIFG, isolated impaired fasting glucose; iIGT, isolated impaired glucose tolerance; IFG+IGT, both impaired fasting glucose and impaired glucose tolerance. \*P for differences in ethnicity between participants with different prediabetes metabolic phenotypes, examined using a  $\chi^2$  test. †P for differences in ethnicity between participants with normal vs intermediate HbA<sub>1c</sub>, examined using a  $\chi^2$  test.

# **Supplementary Table 4. Completer and non-completer characteristics at baseline**

	Completers	Non-completers†	P-value‡	
	(n=685)	(n=825)	1 value,	
Prediabetes phenotypes			_	
iIFG	402 (58.7%)	467 (56.6%)	0.055	
iIGT	31 (4.5%)	62 (7.5%)		
IFG+IGT	252 (36.8%)	296 (35.9%)		
Normal HbA <sub>1c</sub>	508 (74.6%)	598 (73.9%)	0.493	
Intermediate HbA <sub>1c</sub>	173 (25.4%)	211 (26.1%)		
Socio-demographics				
Age, years	58 (49, 63)	50 (40, 59)	< 0.001	
Sex			< 0.001	
Women	421 (61.5%)	579 (70.2%)	-	
Men	264 (38.5%)	246 (29.8%)	-	
Ethnicity			< 0.001	
Caucasian	641 (93.6%)	690 (83.6%)	-	
Other*	44 (6.4%)	135 (16.4%)	_	
Smoking			< 0.001	
No	617 (90.1%)	662 (80.2%)	_	
Yes, but less than weekly	20 (2.9%)	122 (14.8%)	_	
Yes, at least daily	40 (5.8%)	30 (3.6%)	_	
Missing	8 (1.2%)	11 (1.3%)	_	
Drinking			< 0.001	
No	173 (25.3%)	308 (37.3%)	_	
Yes	505 (73.7%)	505 (61.2%)	_	
Missing	7 (1.0%)	12 (1.5%)	-	
Anthropometry and body				
composition				
Body weight, kg	93.5 (83.6, 105.1)	100.3 (87.3, 116.5)	< 0.001	
Height, m	1.68 (1.62, 1.76)	1.67 (1.61, 1.74)	0.003	
BMI, kg·m <sup>-2</sup>	32.6 (30.0, 36.1)	35.4 (31.7, 40.7)	< 0.001	
Fat mass, kg	37.9 (31.3, 46.3)	43.3 (35.5, 53.9)	< 0.001	
Fat-free mass, kg	53.0 (47.4, 64.1)	55.3 (48.2, 65.0)	0.088	
Glucose metabolism				
Fasting plasma glucose, mmol·L <sup>-1</sup>	6.2 (0.4)	6.1 (0.4)	0.034	
2-hour plasma glucose, mmol·L <sup>-1</sup>	7.4 (1.8)	7.5 (1.7)	0.235	
Fasting insulin, mU·L-1	10.7 (8.0, 15.0)	12.8 (9.3, 17.8)	< 0.001	
HOMA-IR	3.0 (2.2, 4.2)	2.9 (2.2, 4.2)	< 0.001	
HbA₁c, mmol·mol <sup>-1</sup>	36.6 (3.1)	36.6 (3.3)	0.650	
HbA <sub>1c</sub> , %	5.5 (0.3)	5.5 (0.3)	0.720	

Lipid metabolism			
Fasting triglycerides, mmol·L <sup>-1</sup>	1.3 (1.0, 1.7)	1.4 (1.1, 1.8)	0.028
Total cholesterol, mmol·L <sup>-1</sup>	5.2 (1.0)	5.2 (1.0)	0.077
HDL cholesterol, mmol·L <sup>-1</sup>	1.2 (1.1, 1.4)	1.2 (1.1, 1.4)	0.101
LDL cholesterol, mmol·L <sup>-1</sup>	3.3 (2.6, 3.8)	3.2 (2.7, 3.8)	0.979
Blood pressure			
Systolic blood pressure, mmHg	130.1 (15.5)	129.2 (15.6)	0.292
Diastolic blood pressure, mmHg	79.0 (72.7, 85.3)	79.0 (70.0, 85.7)	0.226

Data are mean (SD), median (25th, 75th percentiles), or n (%). HbA<sub>1c</sub>, hemoglobin A<sub>1c</sub>; HDL cholesterol, high-density lipoprotein cholesterol; HOMA-IR, homeostatic model assessment of insulin resistance; LDL cholesterol, low-density lipoprotein cholesterol. \*Including Asian, Black, Arabic, Hispanic, and other.  $\chi^2$  test was based on full categories. †Non-completers are the same as dropouts. ‡P for differences in baseline characteristics between completers and non-completers, examined using independent-sample t tests, a Mann–Whitney U non-parametric test, and a  $\chi^2$  test.

## Supplementary Table 5. Dietary intake and physical activity by prediabetes metabolic phenotype

	Prediabetes	01	26	52l-n	104	156	P for interaction	P for group	P for time
	phenotype	0 weeks	26 weeks	52 weeks	104 weeks	156 weeks	of group and time	main effect	main effect
Carbohydrate, E%	iIFG	39.6 (0.3)	40.0 (0.3)	40.2 (0.3)	40.3 (0.4)	38.9 (0.4)			
	iIGT	43.8 (0.8) †‡	40.4 (1.0)	41.8 (1.1)	41.4 (1.2)	43.9 (1.3) †‡	0.001	_	_
	IFG+IGT	39.9 (0.4)	40.4 (0.4)	40.3 (0.4)	39.5 (0.4)	39.5 (0.5)			
	Normal HbA <sub>1c</sub>	39.9 (0.3)	40.0 (0.3)	40.2 (0.3)	40.0 (0.3)	39.0 (0.3)	0.412	0.173	< 0.001
	Intermediate HbA <sub>1c</sub>	40.2 (0.4)	40.9 (0.5)	40.8 (0.5)	40.2 (0.5)	40.3 (0.5)	0.412	0.173	<0.001
Protein, E%	iIFG	17.7 (0.2)	20.5 (0.2)	20.1 (0.2)	19.9 (0.2)	20.1 (0.2)			
	iIGT	17.1 (0.5)	21.2 (0.6)	20.0 (0.6)	20.8 (0.7)	19.4 (0.7)	0.304	0.601	< 0.001
	IFG+IGT	17.9 (0.2)	20.6 (0.2)	20.1 (0.2)	20.2 (0.2)	20.2 (0.3)			
	Normal HbA <sub>1c</sub>	17.6 (0.1)	20.5 (0.2)	20.1 (0.2)	20.0 (0.2)	20.1 (0.2)	0.741	0.439	< 0.001
	Intermediate HbA <sub>1c</sub>	18.0 (0.2)	20.7 (0.3)	20.1 (0.3)	20.1 (0.3)	20.0 (0.3)	0.741		<0.001
Fat, E%	iIFG	37.2 (0.3)	33.6 (0.3)	33.9 (0.3)	34.5 (0.3)	35.3 (0.3)			
	iIGT	35.4 (0.8)	33.4 (0.9)	34.3 (1.0)	33.2 (1.1)	32.0 (1.2)	0.109	0.155	< 0.001
	IFG+IGT	37.0 (0.3)	33.8 (0.4)	34.4 (0.4)	35.2 (0.4)	34.9 (0.4)			
	Normal HbA <sub>1c</sub>	36.8 (0.2)	33.7 (0.3)	34.1 (0.3)	34.6 (0.3)	35.0 (0.3)	0.650	0.517	< 0.001
	Intermediate HbA <sub>1c</sub>	37.4 (0.4)	33.4 (0.4)	34.1 (0.5)	34.8 (0.5)	35.0 (0.5)	0.630		<0.001
Fiber, g·day <sup>-1</sup>	iIFG	22.2 (0.3)	23.4 (0.4)	22.9 (0.4)	21.8 (0.4)	21.2 (0.4)			
	iIGT	23.2 (0.9)	22.1 (1.1)	25.6 (1.2) ‡	23.4 (1.3)	23.0 (1.4)	0.029	_	_
	IFG+IGT	22.4 (0.4)	22.1 (0.4)	22.3 (0.5)	20.8 (0.5)	21.1 (0.5)			
	Normal HbA <sub>1c</sub>	22.2 (0.3)	22.9 (0.3)	22.6 (0.3)	21.1 (0.4)	21.0 (0.4)	0.077	0.205	
	Intermediate HbA <sub>1c</sub>	22.8 (0.5)	22.4 8 (0.5)	23.5 (0.6)	22.4 (0.6)	21.8 (0.6)	0.077	0.205	
Energy, kcal·day <sup>-1</sup>	iIFG	8925.3 (87.7)	7116.6 (98.7)	7009.6 (103.6)	6832.5 (110.4)	6804.3 (111.6)			
	iIGT	8761.1 (257.5)	7108.9 (306.7)	7682.0 (332.3)	7314.6 (355.2)	7417.8 (381.4)	0.289	0.106	< 0.001
	IFG+IGT	8686.9 (106.5)	6828.3 (119.3)	6801.5 (126.6)	6707.1 (133.4)	6577.7 (137.5)			

	Normal HbA <sub>1c</sub>	8824.9 (76.7)	7102.1 (86.1) §	6958.6 (91.1)	6758.6 (97.4)	6757.9 (99.1)	0.029		
	Intermediate HbA <sub>1c</sub>	8817.8 (126.9)	6741.7 (144.1)	6986.7 (152.0)	6965.1 (157.6)	6717.7 (162.6)	0.029	I	_
Total physical activity,	iIFG	301.9 (4.5)	336.5 (5.1)	318.6 (5.4)	314.4 (5.8)	304.1 (6.0)			
counts·min-1	iIGT	283.9 (14.0)	330.9 (16.4)	335.3 (16.9)	317.5 (18.9)	308.3 (21.0)	0.138	0.038	< 0.001
	IFG+IGT	278.3 (5.6)	317.5 (6.3)	316.0 (6.7)	308.9 (7.0)	292.0 (7.4)			
	Normal HbA <sub>1c</sub>	297.7 (4.0)	333.3 (4.5)	319.0 (4.8)	316.9 (5.1)	301.5 (5.3)	0.174	0.026	د0 001
	Intermediate HbA <sub>1c</sub>	277.0 (6.8)	317.5 (7.7)	317.9 (8.1)	302.4 (8.3)	295.8 (8.8)	0.174	0.036	< 0.001

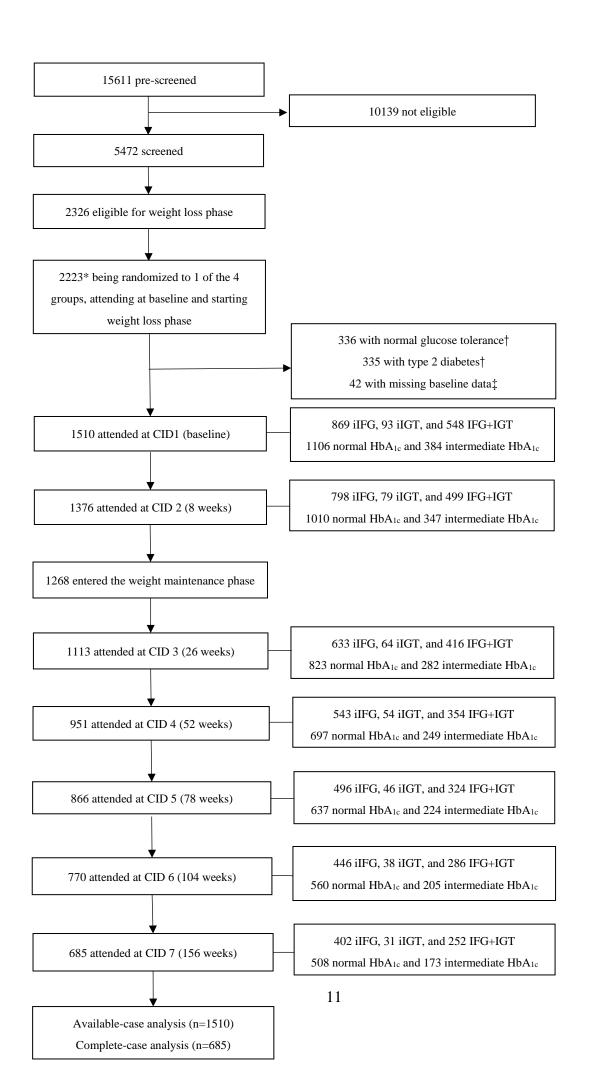
Data are estimated marginal mean (SE). Analyses were performed using a linear mixed model adjusted for time as fixed effects and participant identifier and intervention site as random effects. Time by group interaction terms were added. Post hoc analyses with multiple comparisons with Bonferroni correction were performed to compare groups at each time point, where appropriate. HbA<sub>1c</sub>, hemoglobin A<sub>1c</sub>; iIFG, isolated impaired fasting glucose; iIGT, isolated impaired glucose tolerance; IFG+IGT, both impaired fasting glucose and impaired glucose tolerance; prediabetes metabolic phenotypes were defined at baseline. iIFG vs IFG+IGT \*P<0.05; iIFG vs iIGT vs IFG+IGT  $^{\ddagger}P$ <0.05; normal vs intermediate HbA<sub>1c</sub>  $^{\$}P$ <0.05.

## Supplementary Table 6. Changes in triglyceride-glucose index by prediabetes metabolic phenotype

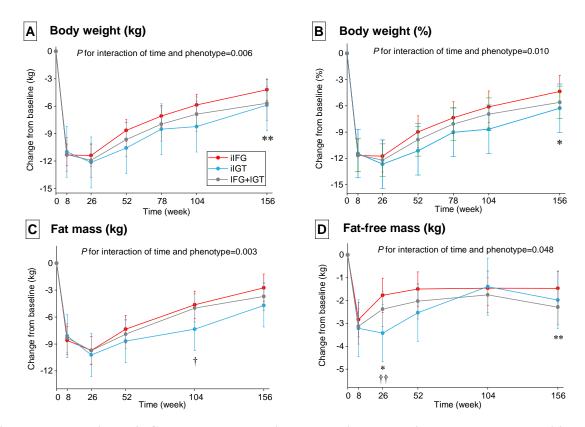
	Crown	0–8	0–26	0-52	0–78	0-104	0–156	P for interaction	P for group	P for time
	Group	weeks	weeks	weeks	weeks	weeks	weeks	of group and time	main effect	main effect
	iIFG	-0.33	-0.22	-0.13	-0.07	-0.10	-0.08		0.204	
	III	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)			
Available-case analysis,	iIGT	-0.31	-0.26	-0.17	-0.09	-0.16	-0.13	0.154		< 0.001
weight-unadjusted	IIG1	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	0.134	0.384	<0.001
	IFG+IGT	-0.35	-0.23	-0.15	-0.07	-0.11	-0.11			
	IFU+IU1	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)			
	iIFG	-0.27	-0.17	-0.15	-0.13	-0.18	-0.19		0.620	<0.001
	IIFG	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	(0.02)	0.146		
Available-case analysis,	iIGT	-0.23	-0.19	-0.17	-0.14	-0.22	-0.23			
weight-adjusted		(0.04)	(0.04)	(0.04)	(0.04)	(0.04)	(0.04)			
	IFG+IGT	-0.27	-0.16	-0.14	-0.11	-0.17	-0.19			
		(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)			
	iIFG	-0.43	-0.30	-0.21	-0.12	-0.16	-0.13			
	IIFG	(0.05)	(0.05)	(0.05)	(0.05)	(0.05)	(0.05)			
Complete-case analysis,	iIGT	-0.38	-0.33	-0.24	-0.10	-0.28	-0.27	0.138	0.636	< 0.001
weight-unadjusted	IIG1	(0.08)	(0.08)	(0.08)	(0.08)	(0.08)	(0.08)	0.138	0.636	<0.001
	IFG+IGT	-0.43	-0.30	-0.22	-0.11	-0.17	-0.17			
	IFG+IG1	(0.05)	(0.05)	(0.05)	(0.05)	(0.05)	(0.05)			
	Normal HbA <sub>1c</sub>	-0.35	-0.25**	-0.17**	-0.10***	-0.13*	-0.12***			
Available-case analysis,	Nofiliai fidA <sub>1c</sub>	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	-0.001		
weight-adjusted	Intermediate HbA <sub>1c</sub>	-0.35	-0.20	-0.11	-0.03	-0.08	-0.06	< 0.001	_	_
	intermediate rioA <sub>1c</sub>	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)	(0.03)			

	Normal HbA <sub>1c</sub>	-0.43	-0.33*	-0.26***	-0.15**	-0.20*	-0.19*			
Complete-case analysis,	Normal HbA <sub>1c</sub>	(0.05)	(0.05)	(0.05)	(0.05)	(0.05)	(0.05)	<sub>2</sub> 0.001		
weight-adjusted	Intermediate HbA <sub>1c</sub>	-0.48	-0.27	-0.16	-0.06	-0.14	-0.12	< 0.001	_	_
		(0.05)	(0.05)	(0.05)	(0.05)	(0.05)	(0.05)			

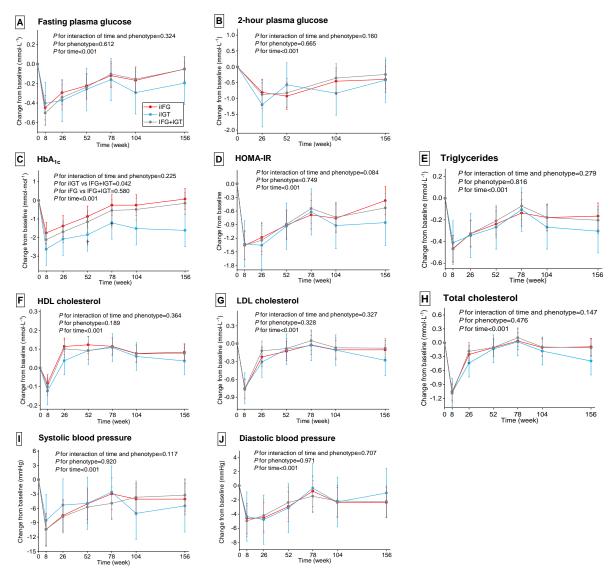
Data are estimated marginal mean (SE) in changes in triglyceride-glucose index from baseline in different prediabetes metabolic phenotypes. HbA<sub>1c</sub>, hemoglobin A<sub>1c</sub>; iIFG, isolated impaired fasting glucose; iIGT, isolated impaired glucose tolerance; IFG+IGT, both impaired fasting glucose and impaired glucose tolerance; prediabetes metabolic phenotype was defined at baseline. Analyses were performed using a linear mixed model adjusted for age, sex, ethnicity, baseline BMI, baseline smoking habits, baseline alcohol drinking, baseline triglyceride-glucose index, intervention arm, and time as fixed covariates and participant identifier and intervention site as random effects. Time by group interaction terms were added. Post hoc multiple comparisons with Bonferroni correction were performed to compare groups at each time point, where appropriate. Normal vs intermediate HbA<sub>1c</sub> \*P<0.05, \*\*P<0.01, and \*\*\*P<0.001.



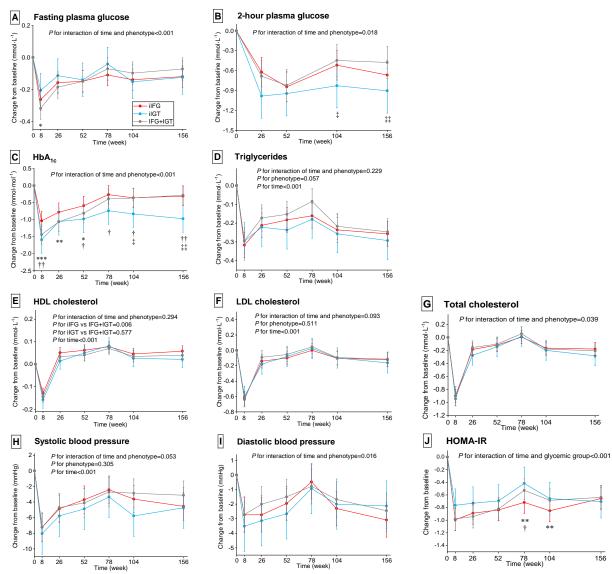
**Supplementary Figure 1. Study flow diagram.** CID, clinical investigation day; iIFG, isolated impaired fasting glucose; iIGT, isolated impaired glucose tolerance; IFG+IGT, both impaired fasting glucose and impaired glucose tolerance; prediabetes metabolic phenotype was defined at baseline. \*A total of 2224 participants started the weight loss phase, but 1 withdrew consent and requested data deletion. †Normal glucose tolerance and type 2 diabetes were defined using fasting plasma glucose and 2-hour plasma glucose. ‡Participants with normal glucose tolerance or type 2 diabetes at baseline or missing baseline fasting plasma glucose and/or 2-hour plasma glucose data (unidentifiable glycemic status) were excluded from the present analysis. Visit windows for data collection: at 8 weeks: –3 to 5 days; at 26 weeks: ±1 week; at 52 weeks; ±2 weeks; remaining time points: ±4 weeks



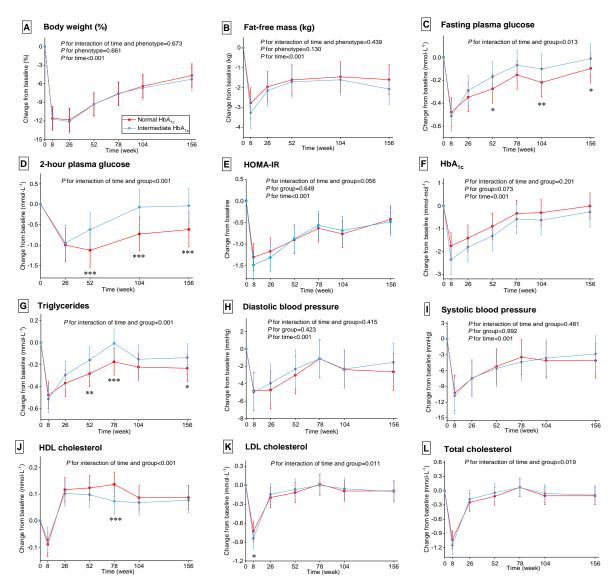
Supplementary Figure 2.-Complete-case analysis: changes in body weight and body composition by prediabetes metabolic phenotype. Values are estimated marginal mean and 95% CI in changes in body weight in kg (A), body weight in % (B), fat mass in kg (C), and fat-free mass in kg (D) from baseline in different prediabetes metabolic phenotypes (complete-case analysis). iIFG, isolated impaired fasting glucose; iIGT, isolated impaired glucose tolerance; IFG+IGT, both impaired fasting glucose and impaired glucose tolerance; prediabetes metabolic phenotype was defined at baseline. Analyses were performed using a linear mixed model adjusted for age, sex, ethnicity, baseline BMI, baseline smoking habits, baseline alcohol drinking, baseline values of the outcome being considered, intervention arm, and time as fixed covariates and participant identifier and intervention site as random effects. Time by prediabetes metabolic phenotype interaction terms were added. Post hoc multiple comparisons with Bonferroni correction were performed to compare prediabetes metabolic phenotypes at each time point, where appropriate. iIFG vs IFG+IGT \*P<0.05, \*\*P<0.01, and \*\*\*P<0.001; iIFG vs iIGT †P<0.05, ††P<0.01, and †††P<0.001; iIGT vs IFG+IGT †P<0.05, ††P<0.01, and †††P<0.001.



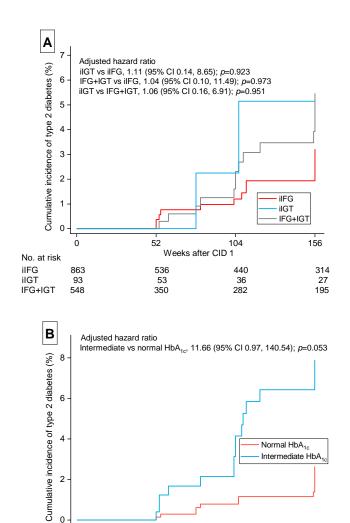
Supplementary Figure 3. Complete-case analysis: changes in cardiometabolic risk factors by prediabetes metabolic phenotype. Values are estimated marginal mean (95% CI) in changes in fasting plasma glucose (A), 2-hour plasma glucose (B), HbA<sub>1c</sub> (C), HOMA-IR (D), triglycerides (E), HDL cholesterol (F), LDL cholesterol (G), total cholesterol (H), diastolic blood pressure (I), and systolic blood pressure (J) from baseline in different prediabetes metabolic phenotypes (complete-case analysis). HbA<sub>1c</sub>, hemoglobin A<sub>1c</sub>; HDL cholesterol, high-density lipoprotein cholesterol; HOMA-IR, homeostatic model assessment of insulin resistance; iIFG, isolated impaired fasting glucose; iIGT, isolated impaired glucose tolerance; IFG+IGT, both impaired fasting glucose and impaired glucose tolerance; LDL cholesterol, low-density lipoprotein cholesterol; prediabetes metabolic phenotype was defined at baseline. Analyses were performed using a linear mixed model adjusted for age, sex, ethnicity, baseline BMI, baseline smoking habits, baseline alcohol drinking, baseline values of the outcome being considered, intervention arm, and time as fixed covariates and participant identifier and intervention site as random effects. Time by prediabetes metabolic phenotype interaction terms were added. Post hoc multiple comparisons with Bonferroni correction were performed to compare prediabetes metabolic phenotypes at each time point, where appropriate. iIFG vs IFG+IGT \*P<0.05, \*\*P<0.01, and \*\*\*P<0.001; iIFG vs iIGT †P<0.05, ††P<0.01, and †††P<0.001; iIGT vs IFG+IGT \*P<0.05, \*\*P<0.01, and \*\*\*P<0.001.



Supplementary Figure 4. Weight-adjusted changes in cardiometabolic risk factors by prediabetes metabolic phenotype. Values are estimated marginal mean (95% CI) in changes in fasting plasma glucose (A), 2-hour plasma glucose (B), HbA<sub>1c</sub> (C), triglycerides (D), HDL cholesterol (E), LDL cholesterol (F), total cholesterol (G), diastolic blood pressure (H), systolic blood pressure (I), and HOMA-IR (J), from baseline in different prediabetes metabolic phenotypes. HbA<sub>1c</sub>, hemoglobin A<sub>1c</sub>; HDL cholesterol, high-density lipoprotein cholesterol; HOMA-IR, homeostatic model assessment of insulin resistance; iIFG, isolated impaired fasting glucose; iIGT, isolated impaired glucose tolerance; IFG+IGT, both impaired fasting glucose and impaired glucose tolerance; LDL cholesterol, low-density lipoprotein cholesterol; prediabetes metabolic phenotype was defined at baseline. Analyses were performed using a linear mixed model adjusted for age, sex, ethnicity, baseline BMI, baseline smoking habits, baseline alcohol drinking, baseline values of the outcome being considered, intervention arm, and time as fixed covariates and participant identifier and intervention site as random effects. Time by prediabetes metabolic phenotype interaction terms were added. Post hoc multiple comparisons with Bonferroni correction were performed to compare prediabetes metabolic phenotypes at each time point, where appropriate. iIFG vs IFG+IGT \*P<0.05, \*\*P<0.01, and \*\*\*P<0.001; iIFG vs iIGT †P<0.05, \*†P<0.01, and \*††P<0.001; iIGT vs IFG+IGT †P<0.05, \*†P<0.01, and \*††P<0.001.



Supplementary Figure 5. Complete-case analysis: changes in body weight and cardiometabolic risk factors in prediabetes with normal or intermediate HbA<sub>1c</sub>. Values are estimated marginal mean (95% CI) in changes in body weight in % (A), fat-free mass (B), fasting plasma glucose (C), 2-hour plasma glucose (D), HOMA-IR (E), HbA<sub>1c</sub> (F), triglycerides (G), diastolic blood pressure (H), systolic blood pressure (I), HDL cholesterol (J), LDL cholesterol (K), and total cholesterol (L) from baseline in prediabetes with normal or intermediate HbA<sub>1c</sub> (complete-case analysis). HbA<sub>1c</sub>, hemoglobin A<sub>1c</sub>; HDL cholesterol, high-density lipoprotein cholesterol; HOMA-IR, homeostatic model assessment of insulin resistance; LDL cholesterol, low-density lipoprotein cholesterol. Analyses were performed using a linear mixed model adjusted for age, sex, ethnicity, baseline BMI, baseline smoking habits, baseline alcohol drinking, baseline values of the outcome being considered, intervention arm, and time as fixed covariates and participant identifier and intervention site as random effects. Time by group interaction terms were added. Post hoc pairwise comparisons (independent-samples t test) were performed to compare groups at each time point, where appropriate. Normal vs intermediate HbA<sub>1c</sub> \*P< 0.05, \*\*P< 0.01, and \*\*\*P< 0.001.



Supplementary Figure 6. Cumulative incidence of type 2 diabetes. CID, clinical investigation day. Values are cumulative incidence of type 2 diabetes at each time point. Cumulative incidence was calculated using the Kaplan-Meier method, without adjustment. The incidence of type 2 diabetes was compared among subgroups using a time-dependent Cox hazards regression model adjusted for Ln(time)×subgroup, ethnicity, baseline smoking status, baseline alcohol consumption, baseline BMI, intervention arm and intervention site as covariates.

52

687

248

104 Weeks after CID 1

556

156

398

136

2

0

Intermediate HbA<sub>1c</sub> 384

No. at risk Normal HbA<sub>1c</sub> 1106

ò

### **Appendices**

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