

Supplementary Table 16. Time persistence effect on inflammatory liver disease development following zoster vaccination

Time (yr)	Events, n (%)	aHR (95% CI)	
		Model 1 ^{a)}	Model 2 ^{b)}
< 1			
Unvaccinated	9,265 (1.27)	1.0 (reference)	1.0 (reference)
Vaccinated	8,423 (1.15)	0.91 (0.88 to 0.94) ^{c)}	0.90 (0.87 to 0.92) ^{c)}
1–2			
Unvaccinated	9,405 (1.29)	1.0 (reference)	1.0 (reference)
Vaccinated	8,381 (1.15)	0.89 (0.86 to 0.92) ^{c)}	0.88 (0.86 to 0.91) ^{c)}
2–4			
Unvaccinated	14,720 (2.01)	1.0 (reference)	1.0 (reference)
Vaccinated	12,003 (1.64)	0.85 (0.83 to 0.87) ^{c)}	0.85 (0.83 to 0.87) ^{c)}
4–6			
Unvaccinated	8,120 (1.11)	1.0 (reference)	1.0 (reference)
Vaccinated	6,117 (0.84)	0.87 (0.84 to 0.90) ^{c)}	0.86 (0.83 to 0.89) ^{c)}
6–8			
Unvaccinated	2,262 (0.31)	1.0 (reference)	1.0 (reference)
Vaccinated	1,533 (0.21)	0.84 (0.79 to 0.90) ^{c)}	0.81 (0.76 to 0.86) ^{c)}
≥ 8			
Unvaccinated	74 (0.01)	1.0 (reference)	1.0 (reference)
Vaccinated	45 (0.01)	0.81 (0.56 to 1.17)	0.75 (0.52 to 1.10)

aHR, adjusted hazard ratio; CI, confidence interval.

^{a)}Models 1: adjusted for age (50–54, 55–59, 60–64, and ≥ 65 years) and sex.

^{b)}Model 2: adjusted for age (50–54, 55–59, 60–64, and ≥ 65 years); sex; household income (low income, middle income, and high income); region of residence (urban and rural); Charlson comorbidity index (0, 1, and ≥ 2); obesity (underweight [$< 18.5 \text{ kg/m}^2$], normal [$18.5\text{--}22.9 \text{ kg/m}^2$], overweight [$23.0\text{--}24.9 \text{ kg/m}^2$], and obese [$\geq 25.0 \text{ kg/m}^2$]); blood pressure (systolic blood pressure $< 140 \text{ mmHg}$ and diastolic blood pressure $< 90 \text{ mmHg}$ and systolic blood pressure $\geq 140 \text{ mmHg}$ or diastolic blood pressure $\geq 90 \text{ mmHg}$); fasting blood glucose (< 100 and $\geq 100 \text{ mg/dL}$); glomerular filtration rate (< 60 , $60\text{--}89$, and $\geq 90 \text{ mL/min/1.73 m}^2$); smoking status (non-, ex-, and current smoker); alcohol consumption (drinks; < 1 , $1\text{--}2$, $3\text{--}4$, and ≥ 5 days per week); aerobic physical activity (sufficient and insufficient); and history of medication use for coronary artery disease, diabetes mellitus, dyslipidemia, and hypertension.

^{c)}Significant differences ($p < 0.05$).