Supplementary Material

Herpes Simplex Viral Infection Doubles the Risk of Dementia in a Contemporary Cohort of Older Adults: A Prospective Study

SUPPLEMENTARY RESULTS

Larger proportions of participants included than not included in the HSV and HSV-1 subsamples had ≤ 9 years education (HSV: 58.5% versus 49.2%, p = 0.022; HSV-1: 59.3% vs. 49.8%, p = 0.008) and anti-CMV IgG positivity (HSV: 80.5% versus 68.2%, p < 0.001; HSV-1: 81.4% versus 69.1%, p < 0.001). Relative to other participants, the CMV subsample was characterized by a larger proportion of females (52.2% versus 42.7%, p = 0.013), larger proportion of persons with ≤ 9 years education (58.7% versus 50.2%, p = 0.024), and greater prevalence of anti-HSV IgM positivity (9.2% versus 4.5%, p = 0.026).

Anti–HSV-1 IgG positivity nearly doubled the risk of dementia in the basic [hazard ratio (HR) = 1.92, p = 0.034] and fully adjusted (HR = 1.95, p = 0.031) models (Supplementary Table S1, Supplementary Figure 1). No significant association between anti–HSV-1 IgG positivity and AD was found in the full sample (Supplementary Table 1). The interaction between anti–HSV-1 IgG and *APOE* $\varepsilon4$ positivity was not significant (Supplementary Table 1).

The results of proportional hazard assumption testing are presented here, including numerical (Supplementary Tables 2-4) and graphical tests (Supplementary Figures 2.1.1-4.2.2). In the graph legends: 0 = no and 1 = yes.

			7					
	AD		Dementia					
	Basic model		Basic model		Fully adjusted model		Interaction model	
	HR (95% CI)	р	HR (95% CI)	р	HR (95% CI)	р	HR (95% CI)	р
Anti–HSV-1 IgG pos	2.12 (0.88–5.10)	0.093	1.92 (1.05–3.51)	0.034	1.95 (1.06–3.57)	0.031	1.69 (0.78–3.65)	0.182
Sex (women)	1.31 (0.68–2.54)	0.424	0.91 (0.57–1.45)	0.691	0.89 (0.56–1.42)	0.623	0.88 (.55–1.41)	0.603
Education ≥10 y					0.84 (0.52–1.36)	0.474	0.84 (0.52–1.37)	0.490
APOE ε4 pos					1.75 (1.09–2.81)	0.021	1.32 (0.43-4.05)	0.623
Anti–HSV-1 IgG pos x APOE ε4 pos							1.41 (0.41–4.85)	0.588

Supplementary Table 1. HRs for AD and dementia with anti-HSV type 1 IgG positivity and its interaction with *APOE* ɛ4 positivity for the full sample.

Data were obtained with Cox proportional-hazards regression models.

HR, hazard ratio; AD, Alzheimer's disease; CI, confidence interval; HSV-1, herpes simplex virus type 1; IgG, immunoglobulin G; pos, positive; *APOE* ɛ4, apolipoprotein E4.

	<i>p</i> for Pearson correlation with ranked time			
Partial residual	AD,	Dementia,	Dementia,	Dementia,
	basic	basic	fully	interaction
Anti-HSV IgG pos model				
Anti-HSV IgG pos	0.830	0.941	0.952	0.949
Sex (women)	0.372	0.190	0.195	0.197
Education ≥ 10 y			0.876	0.878
APOE ε4 pos			0.118	0.111
Anti-HSV IgG pos x <i>APOE</i> ε4 pos				0.208
Anti-HSV-1 IgG pos model				
Anti-HSV-1 IgG pos	0.551	0.894	0.894	0.889
Sex (women)	0.370	0.189	0.192	0.192
Education ≥ 10 y			0.876	0.879
APOE ε4 pos			0.122	0.119
Anti-HSV-1 IgG pos x <i>APOE</i> ε4 pos				0.241
Anti-CMV IgG pos model with HSV				
Anti-CMV IgG pos	0.923	0.452	0.459	0.449
Sex (women)	0.368	0.187	0.193	0.194
Education ≥ 10 y			0.869	0.868
Anti-HSV IgG pos			0.942	0.942
Anti-CMV IgG pos x anti-HSV IgG pos				0.462
Anti-CMV IgG pos model with HSV-1				
Anti-CMV IgG pos	0.923	0.452	0.457	0.444
Sex (women)	0.368	0.187	0.191	0.194
Education ≥ 10 y			0.867	0.863
Anti-HSV-1 IgG pos			0.894	0.893
Anti-CMV IgG pos x anti-HSV-1 IgG pos				0.305

Supplementary Table 2. *p* for Shoenfeld test of the full sample model.

AD, Alzheimer's disease; HSV, herpes simplex virus; IgG, immunoglobulin G; pos, positive; $APOE \varepsilon 4$, apolipoprotein E4; HSV-1, herpes simplex virus type 1; CMV, cytomegalovirus.

	p for Pearson correlation with ranked time			
Partial residual	AD, basic	Dementia, basic	Dementia, fully	
Anti-HSV IgM pos model				
Anti-HSV IgM pos	0.593	0.807	0.810	
Sex (women)	0.1.66	0.112	0.118	
Education ≥ 10 y			0.656	
APOE ε4 pos			0.181	
Anti-HSV-IgG level model				
Anti-HSV- IgG level	0.232	0.858	0.886	
Sex (women)	0.165	0.112	0.118	
Education ≥10 y			0.656	
APOE ε4 pos			0.181	
Anti-herpesvirus drugs 5 y				
Anti-herpesvirus drugs 5 y	0.335	0.340	0.315	
Sex (women)	0.167	0.114	0.121	
Education ≥10 y			0.651	
APOE ɛ4 pos			0.176	

Supplementary Table 3. *p* for Shoenfeld test of the HSV subsample model.

AD, Alzheimer's disease; HSV, herpes simplex virus; IgG, immunoglobulin G; pos, positive; $APOE \varepsilon 4$, apolipoprotein E4.

	<i>p</i> for Pearson correlation with ranked time				
Partial residual	AD, basic	Dementia, basic	Dementia, fully		
Anti-HSV IgM pos model					
Anti-HSV IgM pos	0.411	0.687	0.693		
Sex (women)	0.163	0.073	0.074		
Education ≥10 y			0.762		
APOE ε4 pos			0.235		
Anti-HSV-IgG level model					
Anti-HSV- IgG level	0.242	0.931	0.903		
Sex (women)	0.163	0.073	0.074		
Education ≥10 y			0.765		
APOE ε4 pos			0.235		
Anti-herpesvirus drugs 5 y					
Anti-herpesvirus drugs 5 y	0.336	0.401	0.389		
Sex (women)	0.164	0.073	0.075		
Education ≥10 y			0.764		
APOE ε4 pos			0.231		

Supplementary Table 4. *p* for Shoenfeld test of the HSV-1 subsample model.

AD, Alzheimer's disease; HSV-1, herpes simplex virus type 1; IgG, immunoglobulin G; pos, positive; *APOE* ɛ4, apolipoprotein E4.





Kaplan–Meier cumulative hazard of incident dementia according to anti-HSV type 1 IgG positivity. Each + denotes a censored observation. HSV, herpes simplex virus; IgG, immunoglobulin G.



Supplementary Figure 2.1 AD outcome in the full sample

Supplementary Figure 2.1.1



Supplementary Figure 2.1.2



Supplementary Figure 2.1.3



Supplementary Figure 2.1.4



Supplementary Figure 2.2 Dementia outcome in the full sample





Supplementary Figure 2.2.2







Supplementary Figure 2.2.4







Supplementary Figure 2.2.6



Supplementary Figure 3.1 AD outcome in HSV subsample

Supplementary Figure 3.1.1



Supplementary Figure 3.1.2



Supplementary Figure 3.1.3



Supplementary Figure 3.1.4



Supplementary Figure 3.2 Dementia outcome in HSV subsample

Supplementary Figure 3.2.1



Supplementary Figure 3.2.2



Supplementary Figure 3.2.3



Supplementary Figure 3.2.4







Supplementary Figure 3.2.6

Supplementary Figure 4.1 Dementia outcome in CMV subsample

Supplementary Figure 4.1.1

Supplementary Figure 4.1.2

Supplementary Figure 4.1.4

Supplementary Figure 4.2 AD outcome in CMV subsample

Supplementary Figure 4.2.1

Supplementary Figure 4.2.2