Supplementary materials

Supplementary Table 1 — The risk of mortality in patients with acute liver injury with or without hypoglycemia.

	Acute liver injury with hypoglycemia		Acute liver injury without hypoglycemia		Crude model		Adjusted model[a]	
	n	IR	n	IR	hazard ratio (95% confidence interval)	P-value	hazard ratio (95% confidence interval)	P-value
All-cause mortality[b]	42	22.87	1290	18.38	1.37 (1.01-1.86)	0.04513	1.30 (0.95-1.77)	0.10122
All-cause mortality in 90 days[c]	1	77.4	362	82.42	0.94 (0.13-6.70)	0.95329	0.67 (0.09-4.77)	0.68608
All-cause mortality in 365 days[d]	8	71.58	605	36.57	1.97 (0.98-3.95)	0.05712	1.50 (0.75-3.04)	0.25432

a: Adjusted model adjusted age, gender, smoking, alcohol, overweight, obesity, severe obesity, HBV infection and therapy, HCV infection and

therapy, CKD, COPD, CCI score, DCSI, diabetic duration, metformin, sulfonylurea, TZD, DDP-4i, insulin basal, insulin premixed, insulin basal and bolus, anti-diabetic number, ACEI/ARB, beta-blocker, CCB, diuretics, statin, fibrate, aspirin, and enrolled research year.

Abbreviation: HBV, Hepatitis B virus infection; HCV, Hepatitis C virus infection; CKD, chronic kidney disease; COPD, chronic obstructive pulmonary disease; CCI, Charlson Comorbidity Index; DCSI, The Diabetes Complications Severity Index; TZD, thiazolidinedione; DDP-4i, dipeptidyl peptidase-4 inhibitor; ACEi, angiotension-converting enzyme inhibitor; ARB, angiotensin receptor blockers; CCB, calcium channel blocker.

[b]: patients with or without hypoglycemia during the follow-up period before mortality.

[c]: patients with or without hypoglycemia within 90 days after discharge before mortality.

[d]: patients with or without hypoglycemia within 365 days after discharge before mortality.

Supplementary Table 2 — The risk for diabetic patients with or without acute liver injury in multivariate Cox's regression analysis (sensitivity analysis).

	With acute liver injury		Without acute liver injury		Crude model		Adjusted model[a]	
	n	IR	n	IR	hazard ratio (95% confidence interval)	P-value	hazard ratio (95% confidence interval)	P-value
hypoglycemia	238	1829.56	983	708.41	2.58 (2.24-2.97)	<0.001	2.29 (1.87-2.82)	<0.001
Competing risk[b]					2.29 (1.87-2.82)	<0.001	2.19 (1.79-2.69)	<0.001
Hypoglycemia in 90 days	42	14.25	170	5.59	2.54 (1.82-3.57)	<0.001	2.34 (1.40-3.91)	0.0011
Competing risk[b]					2.34 (1.40-3.91)	0.0011	2.30 (1.38-3.82)	0.0013
Hypoglycemia in 365 days	91	8.19	336	2.9	2.81 (2.23-3.54)	<0.001	2.12 (1.50-2.98)	<0.001
Competing risk[b]					2.12 (1.50-2.98)	<0.001	2.07 (1.46-2.95)	<0.001

All-cause mortality	1053	21.85	1961	3.85	5.60 (5.20-6.04)	<0.001	2.65 (2.36-2.98)	<0.001
All-cause mortality in 90 days	286	96.83	838	27.54	3.48 (3.05-3.98)	<0.001	2.28 (1.83-2.83)	<0.001
All-cause mortality in 365 days	491	43.99	1078	9.3	4.68 (4.20-5.20)	<0.001	2.29 (1.92-2.72)	<0.001

n, case number; IR, incidence rate, per 1.000 person-years,

a: Adjusted model adjusted age, gender, smoking, alcohol, overweight, obesity, severe obesity, HBV infection and therapy, HCV infection and therapy, CKD, COPD, CCI score, DCSI, diabetic duration, metformin, sulfonylurea, TZD, DDP-4i, insulin basal, insulin premixed, insulin basal and bolus, anti-diabetic number, ACEI/ARB, beta-blocker, CCB, diuretics, statin, fibrate, aspirin, and enrolled research year.

Abbreviation: HBV, Hepatitis B virus infection; HCV, Hepatitis C virus infection; CKD, chronic kidney disease; COPD, chronic obstructive pulmonary disease; CCI, Charlson Comorbidity Index; DCSI, The Diabetes Complications Severity Index; TZD, thiazolidinedione; DDP-4i, dipeptidyl peptidase-4 inhibitor; ACEi, angiotension-converting enzyme inhibitor; ARB, angiotensin receptor blockers; CCB, calcium channel blocker.

[b]: Taking death as a competing risk for sub-distribution competing risk analysis of hypoglycemia.

Supplementary figure captions

Supplementary Figure 1 — Flowchart of the selection of cohorts from the National Health Insurance Research Database

Supplementary Figure 2 — The cumulative incidence of all-cause mortality between patients with and without acute liver injury. (*A*) within 90 days (*B*) within 365 days after discharge and after propensity score matching.