Supplementary material

Xie B, Cai X, Zhu Y et al. Accelerometer-measured light-intensity physical activity and risk of cardiovascular disease or death in older adults: A meta-analysis. Kardiol Pol. 2022.

Table S1. MOOSE checklist

Item No	Recommendation	Reported on page No
Reporting of background should include		
1	Problem definition	5
2	Hypothesis statement	5
3	Description of study outcome(s)	5
4	Type of exposure or intervention used	5
5	Type of study designs used	5
6	Study population	5–6
Reporting of search strategy should include		
7	Qualifications of searchers (e.g., librarians and investigators)	*Table S2*
8	Search strategy, including time period included in the synthesis and key words	*Table S2*
9	Effort to include all available studies, including contact with authors	n.a.
10	Databases and registries searched	*Table S2*
11	Search software used, name and version, including special features used (e.g., explosion)	Website/Endnote
12	Use of hand searching (e.g., reference lists of obtained articles)	6

13	List of citations located and those excluded, including justification	Figure 1
14	Method of addressing articles published in languages other than English	n.a.
15	Method of handling abstracts and unpublished studies	n.a.
16	Description of any contact with authors	n.a.
Reporting of methods should include		
17	Description of relevance or appropriateness of studies assembled for assessing the hypothesis to be tested	6–7
18	Rationale for the selection and coding of data (e.g., sound clinical principles or convenience)	6–7
19	Documentation of how data were classified and coded (e.g., multiple raters, blinding and interrater reliability)	7
20	Assessment of confounding (e.g., comparability of cases and controls in studies where appropriate)	Table 1
21	Assessment of study quality, including blinding of quality assessors, stratification or regression on possible predictors of study results	7
22	Assessment of heterogeneity	9
23	Description of statistical methods (e.g., complete description of fixed or random effects models, justification of whether the chosen models account for predictors of study results, dose-response models, or cumulative meta-analysis) in sufficient detail to be replicated	8–9
24	Provision of appropriate tables and graphics	Figure 1 and

		Table 1
Reporting of results should include		
25	Graphic summarizing individual study estimates and overall estimate	Figure 1
26	Table giving descriptive information for each study included	Table 1
27	Results of sensitivity testing (e.g., subgroup analysis)	10–11
28	Indication of statistical uncertainty of findings	10–11
Reporting of discussion should include		
29	Quantitative assessment of bias (e.g., publication bias)	n.a.
30	Justification for exclusion (e.g., exclusion of non-English language citations)	n.a.
31	Assessment of quality of included studies	Good quality
Reporting of conclusions should include		
32	Consideration of alternative explanations for observed results	12–13
33	Generalization of the conclusions (ie, appropriate for the data presented and within the domain of the literature review)	13–14
34	Guidelines for future research	13–14
35	Disclosure of funding source	Attached

From: Stroup DF, Berlin JA, Morton SC, et al. Meta-analysis of Observational Studies in Epidemiology (MOOSE) Group. Meta-analysis of Observational Studies in Epidemiology. A Proposal for Reporting. JAMA. 2000; 283(15): 2008–2012

Table S2. Search strategies

Search strategy in PubMed	
#1	"light-intensity physical activity" [All fields] OR "light physical activity" [All fields] OR "light intensity physical activity" [All fields] OR "light activity" [All fields] OR "light-intensity PA" [All fields] OR “light PA” [All fields]
#2	actimeter [All fields] OR acceleromet* [All fields] OR actigraph [All fields] OR actiwatch [All fields] OR GT3X [All fields]
#3	cardiovascular disease [MeSH Terms] OR cardiovascular [All fields] OR CVD [All fields]
#4	cohort [All fields] OR “follow up” [All fields] OR follow-up [All fields] OR hazard [All fields] OR odds [All fields] OR risk [All fields] OR cox [All fields]
#5	#1 AND #2 AND #3 AND #4
#6	Published up to March 19th, 2022
Search strategy in Scopus	
#1	"light-intensity PA" [TITLE-ABS-KEY] OR "light PA" [TITLE-ABS-KEY] OR "light-intensity physical activity" [TITLE-ABS-KEY] OR “light physical activity” [TITLE-ABS-KEY] OR "light intensity physical activity" [TITLE-ABS-KEY] OR "light activity" [TITLE-ABS-KEY]
#2	acceleromet* [TITLE-ABS-KEY] OR actimeter [TITLE-ABS-KEY] OR actigraph [TITLE-ABS-KEY] OR actiwatch [TITLE-ABS-KEY] OR GT3X [TITLE-ABS-KEY]
#3	cohort [TITLE-ABS-KEY] OR hazard [TITLE-ABS-KEY] OR odds [TITLE-ABS-KEY] OR risk [TITLE-ABS-KEY] OR cox [TITLE-ABS-KEY] OR "follow up" [TITLE-ABS-KEY] OR follow-up [TITLE-ABS-KEY]
#4	cardiovascular disease [ALL] OR cardiovascular [TITLE-ABS-KEY] OR CVD [TITLE-ABS-KEY]
#5	#1 AND #2 AND #3 AND #4
#6	Published up to March 19th, 2022

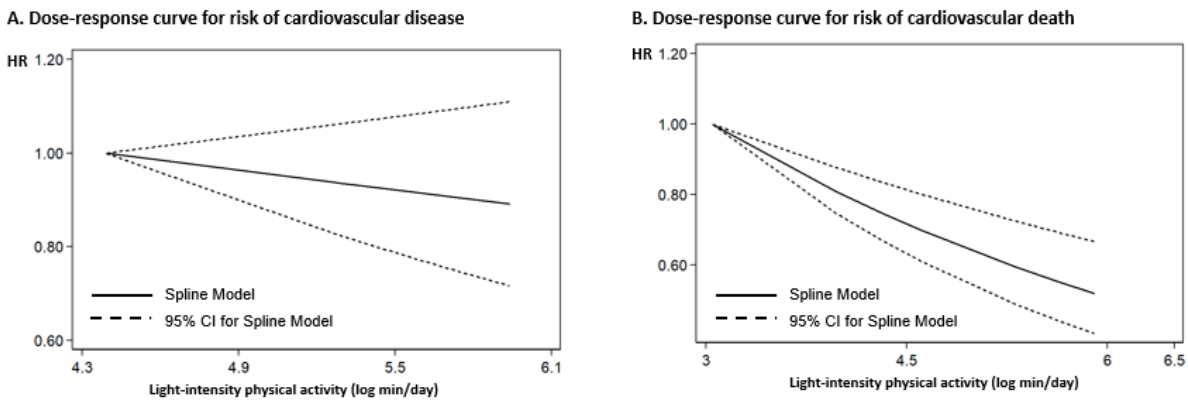

Figure S1. Dose-response curves in older adults; **A.** Dose-response analysis for LPA and risk of cardiovascular disease, with the shape modeled using restricted cubic splines with 3 knots; **B.** Dose-response analysis for LPA and risk of cardiovascular death, with the shape modeled using restricted cubic splines with 3 knots

Abbreviations: CI, confidence interval; HR, hazard ratio; LPA, light-intensity physical activity