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## TABLE E-1 Questionnaire\*

Inactivity increases the risk of osteoporosis.

Heredity does not play a role in osteoporosis.

Early menopause, such as after a hysterectomy, is not a risk factor for osteoporosis.

High caffeine intake (more than 2 cups a day) increases the risk of osteoporosis.

A lifetime low intake of calcium will increase the risk of osteoporosis.

Young women need the equivalent in calcium of a glass of milk a day to prevent osteoporosis.

Smoking is not a risk factor for osteoporosis.

Thin women are more often affected by osteoporosis than heavy women.

Weight-bearing exercise such as walking can help prevent osteoporosis.

After 40, it is too late for people to increase their calcium intake to prevent osteoporosis.

There is no treatment for osteoporosis once you develop it.

After menopause, osteoporosis may be slowed down by taking estrogen.

All individuals lose bone mass after 40 years of age.

African-Americans have a higher risk of osteoporosis than Asian-Americans.

Normally, bone loss slows down after menopause.

A diet high in calcium throughout life can help prevent osteoporosis.

There is no way to prevent osteoporosis.

White women are less affected by osteoporosis than African-American women.

Dairy products are a major source of calcium.

It is normal for bone loss to continue throughout life.

Active women are at higher risk for osteoporosis than inactive women.

Alcohol abuse is not linked to the incidence of osteoporosis.

A risk factor for osteoporosis is having a mother with it.

[One in four women over 60 will develop osteoporosis].

[Women over 40 need about 1500 mg of calcium].

[Spinach is a good source of calcium].

[Osteoporosis refers to a loss of bone mass].

[Women with blue eyes are more likely to have osteoporosis than women with brown eyes].

Questions added to our survey:

One in four women over 50 will develop osteoporosis.

One in eight men over 50 will develop osteoporosis.

Oral cortisone or prednisone decreases your risk of osteoporosis.

The most common fractures due to osteoporosis involve the spine, hip, and wrist.

Postmenopausal women not on estrogen therapy need about 500 mg of calcium daily.

Limited exposure to sunlight or insufficient Vitamin D in your diet increases your risk for osteoporosis.

The most important ages for building bone mass are 10 to 30 years of age.

<sup>\*</sup>From "Facts on Osteoporosis Quiz" (FOOQ) by Ailinger et al.<sup>53</sup>. Respondents could indicate "true,"

<sup>&</sup>quot;false," or "don't know." Items in brackets [] were removed for our survey.

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## TABLE E-2 List of Variables Entered into the Model\*

Two-category variables
Previous bone mineral density test
Married
Taking corticosteroids
Taking calcium supplements
More than high-school education
Any osteoporosis information obtained from a health-care provider
Any osteoporosis information from magazines or newspapers
Hospital site
Diagnosis of osteoporosis
Any fractures since age 40
Caucasian ethnicity
Current fragility fracture†
Regular exercise
English as a first language
Three-category variables
Knowledge of a person with osteoporosis (no person, family member, or non-family member)
Employment status (working, unemployed, or retired)
Income (unknown, ≤100,000 CAD, or >100,000 CAD)
Four-category variable
Sex (male, female premenopausal, female postmenopausal no ERT, female postmenopausal ERT)
Continuous variable
Age (using the midpoints of age categories: one category for every 10 years of age from 40 to 100+)

<sup>\*</sup>CAD = Canadian dollar, ERT = estrogen replacement therapy. †Current fragility fracture was defined as a fracture of the hip, arm, spine, wrist, leg, pelvis, ankle, or ribs, due to a trip or fall.