Supplementary Materials

eMethods. Confounding bias correction using National Health and Nutrition Examination Survey (NHANES) data.

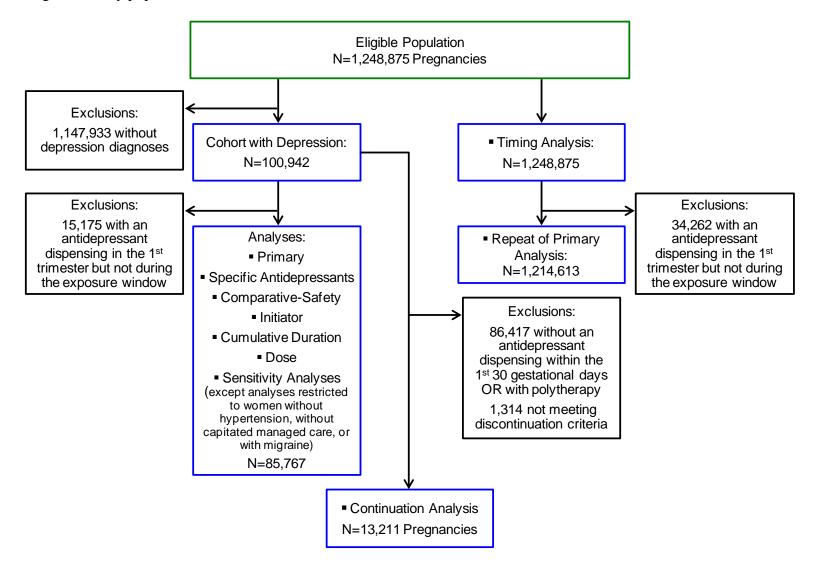
Because obesity and smoking are poorly measured by healthcare utilization data, we conducted a sensitivity analysis¹⁻² to correct the SSRI, SNRI, tricyclic and bupropion monotherapy RRs for residual confounding by these factors. The bias corrected RRs are estimated using the original RR, the confounder-outcome RR, the prevalence of the confounder among the reference group and the prevalence of the confounder among the exposed.

We assumed the obesity-preeclampsia RR was $3.0,^3$ and we assumed the smoking-preeclampsia RR was $0.7.^4$ We used 1999-2010 NHANES data among women ages 12-55 (N=15,736) to obtain prevalence estimates accounting for the complex sampling design. Women ages 20 and older who reported any current smoking and women ages 12-19 who reported any smoking in the past 30 days were classified as smokers, and women with body mass index (BMI) \geq 30 kg/mg² were classified as obese. We estimated the prevalence of the confounders among women who reported no antidepressant use (unexposed) and among women who reported using antidepressants by class (exposed). Due to small sample size, we were unable to examine the confounder prevalence by antidepressant class among women with depression.

We calculated the obesity and smoking corrected RRs for the primary analysis using the prevalence estimates for the unexposed as the referent prevalence. Then we

calculated the bias corrected RRs for the comparative safety analysis using the prevalence estimates for the women who reported using SSRIs as the referent prevalence.

eFigure1. Study population overview.



eAppendix. Classification of antidepressant dose according to Goodman & Gilman's Usual Dose.⁶

C Suar D OSC.	Dose (mg/day) Levels					
Antidepressants	Low	Medium	High			
SSRIs						
Citalopram	< 20	\geq 20 and \leq 30	>30			
Escitalopram	<10	\geq 10 and \leq 15	>15			
Fluoxetine	< 20	\geq 20 and \leq 30	>30			
Fluvoxamine	<100	\geq 100 and \leq 150	>150			
Paroxetine	< 20	\geq 20 and \leq 30	>30			
Sertraline	<100	\geq 100 and \leq 125	>125			
SNRIs						
Venlafaxine	<75	≥75 and ≤150	>150			
Duloxetine	<80	\geq 80 and \leq 90	>90			
Tricyclics						
Amoxapine	< 200	\geq 200 and \leq 250	>250			
Desipramine	<100	\geq 100 and \leq 150	>150			
Maprotiline	<100	\geq 100 and \leq 125	>125			
Nortriptyline	<75	\geq 75 and \leq 112.5	>112.5			
Amitriptyline	<100	$\ge 100 \text{ and } \le 150$	>150			
Clomipramine	<100	$\geq 100 \text{ and } \leq 150$	>150			
Doxepin	<100	$\geq 100 \text{ and } \leq 150$	>150			
Imipramine	<100	$\geq 100 \text{ and } \leq 150$	>150			
Bupropion	< 200	\geq 200 and \leq 250	>250			
Other Antidepressants						
Mirtazapine	<15	≥15 and ≤30	>30			
Nefazodone	< 200	≥200 and ≤300	>300			
Trazodone	<150	\geq 150 and \leq 175	>175			

Abbreviations: mg, milligram; SNRI, serotonin-norepinephrine reuptake inhibitor; SSRI, selective serotonin reuptake inhibitor.

eTable 1. Relative risks and 95% confidence intervals comparing the risk for preeclampsia between women with and without antidepressant exposure by class and cumulative exposure duration level; restricted to women with depression. Medicaid Analytic eXtract, 2000-2007.

Monotherapy Exposure	N	Women			elivery Year Adjusted	Fu	Fully Adjusted		
Group	Total	N	%	RR	(95% CI)	RR	(95% CI)		
SSRI									
Long	4586	267	5.8	1.08	(0.96, 1.22)	1.05	(0.93, 1.19))	
Medium	7782	416	5.4	0.99	(0.89, 1.09)	0.98	(0.89, 1.09	€)	
Short	6632	350	5.3	0.98	(0.88, 1.09)	0.99	(0.89, 1.10))	
SNRI									
Long	507	48	9.5	1.71	(1.31, 2.24)	1.64	(1.25, 2.16)	5)	
Medium	407	41	10.1	1.83	(1.37, 2.45)	1.75	(1.31, 2.34	1)	
Short	302	18	6.0	1.09	(0.70, 1.70)	1.01	(0.64, 1.57)	7)	
Tricyclic									
Long ^b	-	-	15.3	2.81	(1.72, 4.58)	2.31	(1.43, 3.75	5)	
Medium	147	13	8.8	1.66	(0.99, 2.79)	1.27	(0.76, 2.12)	2)	
Short	209	21	10.1	1.88	(1.26, 2.81)	1.63	(1.09, 2.44	1)	
Bupropion									
Long	423	26	6.2	1.11	(0.77, 1.62)	1.05	(0.72, 1.52)	2)	
Medium	987	56	5.7	1.02	(0.79, 1.32)	1.01	(0.78, 1.31	1)	
Short	1212	71	5.9	1.07	(0.85, 1.34)	1.12	(0.89, 1.40))	
Unexposed	59219	3215	5.4]	Reference]	Reference		

Abbreviations: CI, confidence interval; RR, relative risk; SNRI, serotonin-norepinephrine reuptake inhibitor; SSRI, selective serotonin reuptake inhibitor.

Full adjustment: delivery year, age, race/ethnicity, multiparity, multiple gestation, diabetes, number of outpatient depression diagnoses, number of inpatient depression diagnoses, mental disorder complicating pregnancy, pain-related diagnosis, sleep disorder, anticonvulsant dispensing, benzodiazepine dispensing, number of baseline prescription drugs, and number of baseline outpatient visits.

^aCumulative exposure duration levels, short ≤30, medium 31-90, and long >90 class-specific antidepressant days supply that overlapped with the exposure window (135 days long).

^bCell sizes are too small for display per the Centers for Medicare and Medicaid Services cell size suppression policy.

eTable 2. Relative risks and 95% confidence intervals comparing the risk for preeclampsia between women with and without antidepressant exposure by class and dose; restricted to women with depression. Medicaid Analytic eXtract, 2000-2007.

Women with Delivery Year N Fully Adjusted Monotherapy Preeclampsia Adjusted Exposure Group Total N RR 95% CI RR 95% CI SSRI High 2726 171 6.3 1.15 (0.99, 1.33)1.10 (0.95, 1.28)Medium 5.4 (0.92, 1.09)(0.91, 1.09)11361 614 1.00 1.00 Low 4913 248 5.1 0.93 (0.82, 1.06)0.95 (0.84, 1.08)**SNRI** High^b 11.9 2.18 (1.14, 4.18)1.98 (1.08, 3.64)Medium 910 84 9.2 1.68 (1.37, 2.06)(1.32, 2.00)1.63 (0.70, 1.85)Low 239 15 6.3 1.14 1.01 (0.63, 1.64)Tricyclic Medium or High^b 10.3 1.91 (0.76, 4.80)1.38 (0.57, 3.33)Low 1.99 (1.50, 2.64)(1.25, 2.20)402 43 10.7 1.66 Bupropion

Abbreviations: CI, confidence interval; RR, relative risk; SNRI, serotonin-norepinephrine reuptake inhibitor; SSRI, selective serotonin reuptake inhibitor.

5.7

5.9

5.3

3.7

5.4

1.01

1.07

0.99

0.68

(0.69, 1.49)

(0.90, 1.27)

(0.63, 1.57)

(0.39, 1.20)

Reference

1.01

1.07

0.80

0.61

(0.68, 1.50)

(0.90, 1.28)

(0.51, 1.25)

(0.35, 1.06)

Reference

Medium or High

Medium or High

Low

Low

Unexposed

Other

424

2198

324

323

59219

24

129

17

12

3215

Full adjustment: delivery year, age, race/ethnicity, multiparity, multiple gestation, diabetes, number of outpatient depression diagnoses, number of inpatient depression diagnoses, mental disorder complicating pregnancy, pain-related diagnosis, sleep disorder, anticonvulsant dispensing, benzodiazepine dispensing, number of baseline prescription drugs, and number of baseline outpatient visits.

^aDose levels were defined according to Goodman & Gilman's Usual Dose (mg/day): ⁶ low < lowest usual dose, medium ≤ the midpoint of the usual dose range, high > the midpoint of the usual dose range.

^bCell sizes are too small for display per the Centers for Medicare and Medicaid Services cell size suppression policy.

eTable 3. Relative risks and 95% confidence intervals for outcome sensitivity analyses: changing the outcome definition and correcting for outcome misclassification;⁷ restricted to women with depression. Medicaid Analytic eXtract, 2000-2007.

to women with depression. Ivi	cuicaiu f	Wome		2000-2007.			
Sensitivity Analysis	mpsia	Fully Adjusted					
(Exposure Group)	Total	N	%	RR or OR ^a	(95%	CI)	
Outcome: Inpatient							
Preeclampsia							
SSRI Monotherapy	19000	658	3.5	1.03	(0.94,	1.13)	
SNRI Monotherapy	1216	67	5.5	1.57	(1.24,	1.99)	
Tricyclic Monotherapy	441	29	6.6	1.60	(1.12,	2.27)	
Bupropion Monotherapy	2622	92	3.5	1.04	(0.85,	1.29)	
Other Monotherapy	647	17	2.6	0.66	(0.42,	1.04)	
Polytherapy	2622	105	4.0	1.02	(0.84,	1.25)	
Unexposed	59219	2071	3.5	Ref	erence		
Outcome: Severe							
Preeclampsia/Eclampsia							
SSRI Monotherapy	19000	321	1.7	1.03	(0.91,	1.18)	
SNRI Monotherapy	1216	34	2.8	1.59	(1.12,	2.24)	
Tricyclic Monotherapy	441	14	3.2	1.56	(0.92,	2.64)	
Bupropion Monotherapy	2622	34	1.3	0.79	(0.56,	1.12)	
Other Monotherapy	647	11	1.7	0.84	(0.46,	1.52)	
Polytherapy	2622	54	2.1	1.05	(0.79,	1.39)	
Unexposed	59219	976	1.7	Ref	erence		
Misclassification							
Correction: Any							
Preeclampsia							
SSRI Monotherapy	19000	1003	5.4	1.00	(0.91,	1.09)	
SNRI Monotherapy	1216	107	8.8	2.16	(1.38,	3.37)	
Tricyclic Monotherapy	441	47	10.7	2.14	(1.49,	3.01)	
Bupropion Monotherapy	2622	153	5.8	1.09	(0.89,	1.37)	
Other Monotherapy	647	29	4.5	0.67	(0.42,	1.06)	
Polytherapy	2622	169	6.5	1.12	(0.93,	1.37)	
Unexposed	59219	3215	5.4	Ref	erence		
Misclassification							
Correction: Inpatient Preeclampsia							
SSRI Monotherapy	19000	658	3.5	1.03	(0.92,	1.14)	
SNRI Monotherapy	1216	67	5.5	1.03	(0.52, $(1.31,$	2.26)	
Tricyclic Monotherapy	441	29	6.6	1.85	(1.31, (1.20,	2.26)	
Bupropion Monotherapy	2622	92	3.5	1.06	(0.83,	1.34)	
Duplopion Monomerapy	2022	12	5.5	1.00	(0.05,	1.57)	

Other Monotherapy	647	17	2.6	0.66 ((0.40,	1.15)
Polytherapy	2622	105	4.0	1.08 ((0.85,	1.37)
Unexposed	59219	2071	3.5	Refere	ence	

Abbreviations: CI, confidence interval; RR, relative risk; SNRI, serotonin-norepinephrine reuptake inhibitor; SSRI, selective serotonin reuptake inhibitor. Full adjustment: delivery year, age, race/ethnicity, multiparity, multiple gestation, diabetes, number of outpatient depression diagnoses, number of inpatient depression diagnoses, mental disorder complicating pregnancy, pain-related diagnosis, sleep disorder, anticonvulsant dispensing, benzodiazepine dispensing, number of baseline prescription drugs, and number of baseline outpatient visits.

^aOR, odds ratios were estimated for the outcome misclassification correction analyses.

eTable 4. Confounding bias corrected¹⁻² relative risks comparing the risk for preeclampsia between women with and without antidepressant exposure by class and between women by antidepressant class.

Monotherapy Exposure Group	Prevalence of Obesity Among Exposed (%)	Prevalence of Smoking Among Exposed (%)	Primary Analysis Bias Corrected RR ^{a,b}	Comparative Safety Bias Corrected RR ^{a,c}
SSRI	40.0	33.7	0.90	-
SNRI	49.2	41.9	1.29	1.44
Tricyclic	44.6	41.4	1.44	1.60
Bupropion	35.8	30.2	1.00	1.12

Abbreviations: RR, relative risk; SNRI, serotonin-norepinephrine reuptake inhibitor; SSRI, selective serotonin reuptake inhibitor.

^aAssumes the obesity-preeclampsia relative risk is 3.0 and the smoking-preeclampsia relative risk is 0.7.³⁻⁴

^bThe referent prevalence of obesity is 28.7% and the referent prevalence of smoking is 22.0%, i.e., the prevalence among women who reported no antidepressant use, for this analysis.

^cThe referent prevalence of the confounders is the prevalence of the confounders among women exposed to SSRIs for this analysis.

eTable 5. High-dimensional propensity score analysis. Odds ratios (OR) and 95% confidence intervals (CI) adjusted for deciles of propensity score, comparing the risk for preeclampsia among women with and without antidepressant exposure by class; restricted to women with depression. Medicaid Analytic eXtract, 2000-2007.

					Covariates in Propensity Score Model					
Monotherapy		Wome	n with			Investigator-				
Exposure	N	Preecla		D	Dolivery Veer Investigator-		Delivery Year Investigator- Defined			
Group	Total	1 ICCCI	impsia	D	envery rear	Defined ^b	Empirically			
Group							Defined			
		N	%	OR	(95% CI)	OR (95% CI)	OR (95% CI)			
SSRI	15874	826	5.2	1.00	(0.93, 1.08)	1.03 (0.95, 1.12)	1.03 (0.95, 1.12)			
SNRI	836	64	7.7	1.65	(1.34, 2.02)	1.69 (1.34, 2.13)	1.52 (1.17, 1.98)			
Tricyclic	269	23	8.6	2.10	(1.54, 2.86)	1.66 (1.14, 2.40)	1.39 (0.90, 2.15)			
Unexposed ^c					Reference	Reference	Reference			

Abbreviations: SNRI, serotonin-norepinephrine reuptake inhibitor; SSRI, selective serotonin reuptake inhibitor.

^aWomen with the highest and lowest 2.5% of the propensity score are excluded from the analyses.

^bInvestigator-defined covariates: delivery year, age, race/ethnicity, multiparity, multiple gestation, diabetes, number of outpatient depression diagnoses, number of inpatient depression diagnoses, mental disorder complicating pregnancy, pain-related diagnosis, sleep disorder, anticonvulsant dispensing, benzodiazepine dispensing, number of baseline prescription drugs, and number of baseline outpatient visits.

^cThe unexposed group varied for each analysis.

eTable 6. Relative risks and 95% confidence intervals for sensitivity analyses: changing the depression and exposure definitions, and accounting for within-state instead of within-woman correlations; restricted to women with depression. Medicaid Analytic eXtract, 2000-2007.

Sensitivity Analysis	N	Wome Preecla	n with		Fully Adjusted			
(Exposure Group)	Total	N	%	RR	(95%	CI)		
Depression: Specific ICD-9 Codes								
SSRI Monotherapy	14049	756	5.4	0.97	(0.89,	1.06)		
SNRI Monotherapy	897	89	9.9	1.67	(1.36,	2.05)		
Tricyclic Monotherapy Bupropion	264	26	9.9	1.44	(1.00,	2.06)		
Monotherapy	1932	106	5.5	1.00	(0.83,	1.22)		
Other Monotherapy	434	21	4.8	0.74	(0.49,	1.11)		
Polytherapy	2026	133	6.6	1.00	(0.84,	1.20)		
Unexposed	32155	1754	5.5	Reference				
Exposure: Shortened Window								
SSRI Monotherapy	10714	606	5.7	1.05	(0.96,	1.15)		
SNRI Monotherapy	938	84	9.0	1.59	(1.29,	1.96)		
Tricyclic Monotherapy Bupropion	257	26	10.1	1.59	(1.10,	2.29)		
Monotherapy	1553	101	6.5	1.20	(0.99,	1.45)		
Other Monotherapy	461	18	3.9	0.63	(0.40,	0.99)		
Polytherapy	1183	82	6.9	1.05	(0.84,	1.31)		
Unexposed	48874	2635	5.4]	Referenc	ee		
Accounting for Within- State Correlations								
SSRI Monotherapy	19000	1033	5.4	0.99	(0.93,	1.06)		
SNRI Monotherapy	1216	107	8.8	1.48	(1.26,	1.74)		
Tricyclic Monotherapy	441	47	10.7	1.57	(1.26,	1.97)		
Bupropion								
Monotherapy	2622	153	5.8	1.05	(0.90,	1.22)		
Other Monotherapy	647	29	4.5	0.71	(0.51,	0.98)		
Polytherapy	2622	169	6.5	1.01	(0.86,	1.18)		
Unexposed	59219	3215	5.4	F	Referenc	e		

Abbreviations: CI, confidence interval; ICD-9, *International Classification of Diseases*, Ninth Revision; RR, relative risk; SNRI, serotoninnorepinephrine reuptake inhibitor; SSRI, selective serotonin reuptake inhibitor.

Full adjustment: delivery year, age, race/ethnicity, multiparity, multiple gestation, diabetes, number of outpatient depression diagnoses, number of inpatient depression diagnoses, mental disorder complicating pregnancy, pain-related diagnosis, sleep disorder, anticonvulsant dispensing, benzodiazepine dispensing, number of baseline prescription drugs, and number of baseline outpatient visits.

eTable 7. Relative risks and 95% confidence intervals for additional adjustments; restricted to women with depression. Medicaid Analytic eXtract, 2000-2007.

Exposure Group	N Total		Women with Preeclampsia		onally Adjusted Pre-baseline Iformation ^a	Additi	Additionally Adjusted for Hypertension ^b		
		N	%	RR	(95% CI)	RR	(95% CI)		
SSRI									
Monotherapy	19000	1033	5.4	1.00	(0.93, 1.07)	1.00	(0.93, 1.07)		
SNRI									
Monotherapy	1216	107	8.8	1.50	(1.25, 1.81)	1.56	(1.30, 1.87)		
Tricyclic									
Monotherapy	441	47	10.7	1.56	(1.19, 2.05)	1.49	(1.13, 1.96)		
Bupropion									
Monotherapy	2622	153	5.8	1.06	(0.91, 1.25)	1.06	(0.90, 1.24)		
Other									
Monotherapy	647	29	4.5	0.70	(0.50, 1.00)	0.70	(0.50, 1.00)		
Polytherapy	2622	169	6.5	1.01	(0.86, 1.17)	1.01	(0.87, 1.18)		
Unexposed	59219	3215	5.4]	Reference		Reference		

Abbreviations: CI, confidence interval; RR, relative risk; SNRI, serotonin-norepinephrine reuptake inhibitor; SSRI, selective serotonin reuptake inhibitor.

^aAdjusted for: delivery year, age, race/ethnicity, multiparity, multiple gestation, number of outpatient depression diagnoses, number of inpatient depression diagnoses, mental disorder complicating pregnancy, anticonvulsant dispensing, benzodiazepine dispensing, number of baseline prescription drugs, and number of baseline outpatient visits, and diabetes (no antidiabetic dispensing and no diabetes diagnosis, antidiabetic dispensing or diabetes diagnosis, antidiabetic dispensing and diabetes diagnosis), pain-related diagnosis, and sleep disorder including information prior to the last menstrual period.

^bAdjusted for: delivery year, age, race/ethnicity, multiparity, multiple gestation, diabetes, number of outpatient depression diagnoses, number of inpatient depression diagnoses, mental disorder complicating pregnancy, pain-related diagnosis, sleep disorder, anticonvulsant dispensing, benzodiazepine dispensing, number of baseline prescription drugs, number of baseline outpatient visits, and hypertension (no antihypertensive dispensing and no hypertension diagnosis, no antihypertensive dispensing and hypertensive dispensing and hypertensive dispensing and hypertension diagnosis).

eTable 8. Relative risks and 95% confidence intervals for additional restrictions among women with depression, unless otherwise noted. Medicaid Analytic eXtract, 2000-2007.

		Wome	•	Fully Adjusted		
Restrictions	N Total	Preeclampsia		Fully Adjusted		
(Exposure Group)		N	%	RR	(95%	CI)
Restricted to Women Without						
Antihypertensives or Hypertension						
SSRI Monotherapy	18114	888	4.9	1.00	(0.93,	1.08)
SNRI Monotherapy	1147	92	8.0	1.55	(1.27,	1.90)
Tricyclic Monotherapy	381	36	9.5	1.72	(1.26,	2.34)
Bupropion Monotherapy	2501	136	5.4	1.11	(0.94,	1.32)
Other Monotherapy	606	23	3.8	0.70	(0.47,	1.04)
Polytherapy	2426	128	5.3	0.98	(0.82,	1.17)
Unexposed	57650	2929	5.1	I	Referenc	e
Restricted to Women With a						
Migraine Diagnosis ^a						
SSRI Monotherapy	2191	158	7.2	1.13	(0.95,	1.35)
SNRI Monotherapy	163	16	9.8	1.51	(0.94,	2.41)
Tricyclic Monotherapy	416	41	9.9	1.46	(1.08,	1.95)
Bupropion Monotherapy	334	22	6.6	1.06	(0.71,	1.59)
Other Monotherapy ^b	-	-	6.6	0.97	(0.46,	2.05)
Polytherapy	399	36	9.0	1.30	(0.93,	1.80)
Unexposed	18196	1171	6.4	I	Referenc	e
Restricted to Women Not Enrolled						
in Capitated Managed Care Plans						
SSRI Monotherapy	11881	707	6.0	1.01	(0.92,	1.10)
SNRI Monotherapy	793	69	8.7	1.41	(1.12,	1.77)
Tricyclic Monotherapy	293	33	11.3	1.57	(1.13,	2.17)
Bupropion Monotherapy	1663	95	5.7	0.96	(0.79,	1.18)
Other Monotherapy	384	16	4.2	0.61	(0.38,	0.97)
Polytherapy	1630	111	6.8	0.98	(0.81,	1.18)
Unexposed	32725	1910	5.8	I	Referenc	e
Restricted to Non-White Women						
SSRI Monotherapy	5319	326	6.1	0.97	(0.86,	1.09)
SNRI Monotherapy	250	23	9.2	1.29	(0.86,	1.93)
Tricyclic Monotherapy	153	13	8.4	1.12	(0.67,	1.85)
Unexposed	27971	1697	6.1	I	Referenc	e
Restricted to White Women						
SSRI Monotherapy	13681	707	5.2	1.02	(0.93,	1.12)
SNRI Monotherapy	966	84	8.7	1.59	(1.29,	,
Tricyclic Monotherapy	286	34	11.9	2.04	(1.49,	,
Unexposed	31248	1518	4.9	I	Referenc	e
Restricted to Women Age <30						
SSRI Monotherapy	14637	741	5.1	1.04	(0.95,	1.13)
SNRI Monotherapy	858	59	6.9	1.33	(1.03,	1.71)

Tricyclic Monotherapy	293	25	8.5	1.52 (1.04, 2.21)
Unexposed	49714	2566	5.2	Reference
Restricted to Women Age ≥30°				
SSRI Monotherapy	4363	292	6.7	0.92 (0.80, 1.05)
SNRI Monotherapy	358	48	13.4	1.76 (1.32, 2.33)
Tricyclic Monotherapy	148	22	14.9	1.73 (1.16, 2.59)
Unexposed	9505	649	6.8	Reference
Restricted to White Women Age ≥30				
SSRI Monotherapy	2942	200	6.8	1.02 (0.85, 1.21)
SNRI Monotherapy	270	38	14.1	1.98 (1.43, 2.73)
Tricyclic Monotherapy	92	12	13.0	1.74 (1.01, 3.01)
Unexposed	4503	276	6.1	Reference

Abbreviations: CI, confidence interval; RR, relative risk; SNRI, serotonin-norepinephrine reuptake inhibitor; SSRI, selective serotonin reuptake inhibitor.

Full adjustment: delivery year, age, race/ethnicity, multiparity, multiple gestation, diabetes, number of outpatient depression diagnoses, number of inpatient depression diagnoses, mental disorder complicating pregnancy, pain-related diagnosis, sleep disorder, anticonvulsant dispensing, benzodiazepine dispensing, number of baseline prescription drugs, and number of baseline outpatient visits.

^aIncludes women with and without depression.

^bCell sizes are too small for display per the Centers for Medicare and Medicaid Services cell size suppression policy.

^cAdjusted for age with linear and quadratic terms.

eReferences

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