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Maternal weight and infections in early childhood: a cohort study
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Abstract

Objective: The aim of this study was to examine this association between maternal weight during pregnancy and the incidence of hospitalisations for infectious diseases during early childhood.

Design: A population-based cohort study.

Setting: A national cohort was created by combining data from the Swedish Medical Birth Register, the National Inpatient Register, the Cause of Death Register, the Total Population Register and the Longitudinal integration database for health insurance and labour market studies.

Patients: 693,007 children born in Sweden between 1998 and 2006.

Main outcome measures: Number of hospitalisations for infectious diseases during the first five years of life, overall and for categories of infectious diseases (lower respiratory, enteric, upper respiratory, genitourinary, perinatal, skin and soft tissue, neurological and eye, digestive tract, bloodstream and other infections).

Results: Overweight (Body Mass Index (BMI) 25.0–29.9) and obesity (BMI ≥ 30) during pregnancy were associated with a higher overall incidence of hospitalisations for infectious diseases, adjusted incidence rate ratio (IRR) 1.05 (95% CI 1.03–1.06) and adjusted IRR 1.18 (95% CI 1.16–1.21). Overweight and obesity during pregnancy were strongly associated with perinatal infections, adjusted IRR 1.34 (95% CI 1.25–1.44) and adjusted IRR 1.72 (95% CI 1.57–1.88). In contrast, we found no association between maternal weight during pregnancy and infections of skin and soft tissue, the nervous system, the digestive tract or the bloodstream.

Conclusions: We observed an association between overweight and obesity during pregnancy, and hospitalisations for infectious diseases during early childhood.

INTRODUCTION

Excess weight during pregnancy is a global health issue. Overweight (Body Mass Index (BMI) 25.0– 29.9) and obesity (BMI ≥30.0) are increasing among women of reproductive age (20–49 years) in all regions of the world.¹ Furthermore, increasing levels of excess weight during pregnancy have been reported from many countries including UK, Tanzania and Sweden.²⁻⁴ In Sweden, the prevalence of overweight during pregnancy increased from around 9 % in 1978 to 25,4 % in 2015, whereas the prevalence obesity increased from around 2 % to 13,6 %.⁵⁶

Excess weight during pregnancy is associated with severe consequences for the mother, foetus and child. Obesity during pregnancy increases the risk of e.g. pre-eclampsia, gestational diabetes, infections and pulmonary embolism.⁷⁻¹⁰ Moreover, obesity during pregnancy is associated with increased risks for preterm birth, stillbirth, and congenital malformations of the nervous system and heart.¹⁰ After birth, children of obese mothers have increased risk of asphyxia (low APGAR-score) and death during the neonatal period.⁴⁷

While it is well established that excess weight during pregnancy is associated with many adverse outcomes, less is known about its association with infectious diseases during early childhood. Previous studies have shown that maternal obesity before the pregnancy is associated with an increased risk for pneumonia during the first 6 months after birth and hospitalisations for infectious diseases during the first 5 years of life.¹¹¹² Nevertheless, there is still a scarcity of studies assessing the association between maternal weight before or during pregnancy and infectious diseases in early childhood. Additionally, no previous study systematically examined the associations for different categories of infectious diseases. Therefore, the aim of this study was to examine the association between excess weight during pregnancy and infectious disease incidence, which, in this study is measured by number of hospitalisations for infectious diseases during the first five years of life.

METHODS

Setting

Sweden is a welfare state with a publicly funded healthcare system, free education and a comprehensive social insurance system. Healthcare during childhood and adolescence is provided for free. All children are also offered a standard vaccination program.¹³ The social insurance system includes social assistance, which is an income allowance from social authorities that provides a minimum living standard including housing, food, clothes and health.¹⁴

Study population and data retrieval

This is a population-based cohort study of children born in Sweden between 1998 and 2006. The cohort was created by combining several registers held by the National Board of Health and Welfare and by Statistics Sweden. The Medical Birth Register (MBR) contains information on prenatal, delivery and neonatal care (up to 28 days). It covers 98–99 % of all births in Sweden.¹⁵ The cause of death register (CDR) contains information on deaths including a Statistical Classification of Diseases (ICD) code of underlying cause and covers over 97% all deaths.¹⁶ LISA (Longitudinal integration database for health insurance and labour market studies) contains socio-economic data including education level. The Swedish Total Population Register contains information about migration. The National Inpatient Register (NIR) contains information about hospital admissions including ICD code for primary diagnosis and cover over 99% of all inpatient hospital admissions in Sweden.¹⁷ These registers were linked together using the national registration number, a unique personal identification number assigned to all Swedish residents at birth or immigration. The data were linked and anonymized by the Centre for Epidemiology at the Swedish National Board of Health and Welfare. The final cohort included all live births recorded in the MBR during the study period.

Explanatory variables

Maternal BMI during pregnancy was calculated from height and weight recorded in MBR. Height was self-reported while weight was measured at the first antenatal care visit, which occurs between 8 and 12 weeks of gestation for approximately 90 percent of pregnant women.¹⁵ In comparison with pre-pregnancy weight, weight measured in the first trimester will be slightly higher.¹⁸ Maternal BMI

during pregnancy was categorised, according to WHO guidelines for BMI, into underweight (<18.5), normal (18.5–24.9), overweight (25.0–29.9) and obese (\geq 30.0).¹⁹

Data on maternal age, maternal smoking, parity and geographic region was obtained from the MBR. Maternal smoking was reported during an interview at the first antenatal care visit, this self-reported data show high agreement with cotinine (a metabolite of nicotine) levels in maternal serum (95 % of self-reported non-smokers have low levels of serum cotinine).²⁰ Parity was recorded as the number of previous live or stillbirths + 1. The region is the county where the mother resided at the time of delivery.

Socioeconomic status was measured by maternal education and data were obtained from LISA for the year of birth. Maternal education was divided into lower secondary school or less (9 years or less), upper secondary school (10–12 years), short post-secondary education (13–15 years) and long post-secondary education (16 years or more).

Outcomes

The main outcome was number of inpatient hospital admissions with a principal diagnosis of infectious disease recorded in NPR during the first five years of life. Hospital admissions were recorded using International Classification of Disease, Tenth Revision (ICD-10) codes, and mapped onto a modified classification scheme that distinguishes between 10 major infectious disease categories (lower respiratory, enteric, upper respiratory, genitourinary, perinatal, skin and soft tissue, neurological and eye, digestive tract, bloodstream and other infections).²¹ Readmissions on the same day with the same infectious category were excluded. A list of ICD codes is included in Appendix A.

Statistical methods

Children were followed until 5 years of age or censoring due to death or international migration. Incidence rates (IRs) were estimated for overall risk of infectious diseases and for specific subsets of infectious diseases. The IRs were calculated as number of hospital admissions per 100,000 personyears (PY) at risk.

Crude and adjusted associations of the association between pregnancy weight categories (exposure) and number of hospitalisations (outcomes) were calculated using negative binomial regression models and presented as Incidence Rate Ratios (IRR). The adjusted models were controlled for potentially confounding effects of maternal age, maternal education level, maternal smoking, parity, geographic region and time trends (year of birth). A separate model was fitted for each outcome (overall and categories of infectious diseases). All analyses were restricted to observations with complete information on all covariates. Negative binomial models were chosen over Poisson regression models, a choice that was informed by a likelihood ratio test for overdispersion.

In sensitivity analysis, we used multiple imputation methods to impute missing data.²² The missing data pattern was arbitrary, and we therefore used a chained equations approach. We developed two predictive models. Both models included all variables in the adjusted substantive model and the outcome (overall number of hospitalisations for infectious diseases). In the first predictive model, we first imputed region, then maternal education, maternal smoking and pregnancy BMI. In the second predictive model, we reversed the order of imputation. All missing values were imputed using ordinal logistic regression. Ten imputed datasets were generated for each predictive model.

All statistical analyses were performed using Stata version 14 (StataCorp. 2015. Stata Statistical Software: Release 14. College Station, TX: StataCorp LP).

The study was approved by the Regional Ethics Committee at Umeå University (nr 2012-265-31M and 2013-320-32M) and by the MSc Research Ethics Committee at London School of Hygiene Tropical Medicine (nr 10852).

RESULTS

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The MBR contained 838,756 records of live births between 1998 and 2006. Children with missing data on pregnancy BMI (n = 114,588) or covariates (n = 31,161) were excluded from the complete case analyses. We followed all remaining 693,007 children (83 % of the original cohort) until 5 years of age, censoring due to death (n = 2,001) or international migration (n = 9,338). The study included 3,432,561 person-years of follow up time. During the follow-up period, 125,297 inpatient hospital admissions for infectious diseases were recorded in NPR. Readmissions on the same day and recorded with the same infectious disease category were excluded (n = 287) leaving 125,010 hospital admissions.

Table 1 show key background characteristics for the study population. Women with low education level were, in comparison with women with and long post-secondary education, more likely to be overweight or obese during pregnancy. Smoking during pregnancy and parity ≥4 were also associated with obesity during pregnancy. In contrast, women who resided in Stockholm (the capital) region were less likely to be obese.

Table 2 shows Incidence Rates (IR) per 100,000 Person-Years (PY) overall and for categories of infectious diseases, by pregnancy BMI categories. Overall incidence of infectious disease hospitalisations increased considerably with pregnancy BMI, from 3479 per 100,000 PY (95%, CI 3454–3504) for children of normal weight mothers to 3739 per 100,000 PY (95%, CI 3698–3780) for children of overweight mothers and 4341 per 100,000 PY (95%, CI 4274–4410) for children of obese mothers. The three most important categories of infectious diseases were lower respiratory, enteric and upper respiratory infections. The largest difference between pregnancy weight categories was observed for perinatal infections.

Figure 1 shows the association between the BMI during pregnancy and overall number of hospitalisations for infectious diseases during the first five years of life. The incidence rate of hospital admissions for infectious diseases was 5% higher for children whose mothers were overweight during pregnancy (adjusted Incidence Rate Ratio (IRR) 1.05, 95% Cl 1.03–1.06). Children of obese

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mothers were 18% more likely to be admitted (adjusted IRR 1.18, 95% CI 1.16–1.21). Appendix B includes full regression results for the analyses presented in Figure 1 as well as results from models with multiple imputation for missing values. Results after multiple imputation were consistent with those from the complete case analyses.

Figure 2 shows associations between BMI during pregnancy and the number of hospitalisations for specific infectious disease categories during the first five years of life. In the adjusted analysis, overweight and obesity during pregnancy were associated with upper respiratory infections, genitourinary infections, perinatal infections and other infections. In addition, obesity during pregnancy was also associated with lower respiratory and enteric infections. In contrast, overweight and obesity during pregnancy were not associated with skin and soft tissue infections, neurological and eye infections, digestive tract infections and bloodstream infections. The risk of perinatal infections was 34% higher among children whose mothers were overweight (adjusted IRR 1.34, 95% Cl 1.25–1.44) and 72% higher among children to obese mothers (adjusted IRR 1.72, 95% Cl 1.57–1.88). However, only 3.5 % of the infectious disease-related admissions were due to perinatal infections. Appendix C includes full regression results for the analyses presented in Figure 2 as well as results from models with multiple imputation for missing values. Results after multiple imputation were largely consistent with those from the complete case analyses.

DISCUSSION

We found a moderate association between obesity during pregnancy and the overall number of hospitalisations for infectious diseases before children's fifth birthday. The association was most explicit for respiratory infections, genitourinary infections and perinatal infections. In contrast, the association between overweight during pregnancy and hospitalisations for infectious diseases was weaker and only noteworthy for perinatal infections.

An association between maternal obesity and the overall risk of hospitalisations for infectious diseases was hypothesized since maternal obesity is associated with many detrimental conditions,

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including preterm births, low birth weight, birth complications and congenital anomalies.^{10,23} These conditions contribute to a generally increased vulnerability in the offspring including a higher susceptibility to infections. Two previous studies have examined the association between maternal obesity and the overall risk of hospitalisations for infectious diseases. A recent cohort study from Australia including 2807 children reported that children of obese mothers were 2.3 times more likely to be hospitalized for infectious diseases during the first five years of life.¹² Compared to our study, the stronger association may be due to different ICD-codes used to define "infectious diseases". We used ICD codes with an infectious cause from all ICD-10 chapters, whereas the Australian study only used ICD-codes from the first ICD-10 chapter. In a similar setting to ours, a cohort study of 6022 Danish children found no association between maternal overweight (BMI greater than or equal to 24 kg/m2) and hospitalisations for infectious diseases during early childhood.²⁴ However, an insignificant association (crude IRR 1.11, 95% CI 0.97–1.27) was reported. In comparison to these studies, the large study population in our study yield more precise estimates and allowed us to examine the association between maternal weight and specific infectious disease categories. Overweight and obesity during pregnancy were associated with perinatal infections. Additionally, obesity during pregnancy was also associated with respiratory, genitourinary and enteric infections. The strong association between maternal BMI during pregnancy and perinatal infections was anticipated from previous research e.g. both maternal overweight and obesity have been associated with higher infant mortality.⁴ The associations between maternal obesity and both respiratory and enteric infections can, at least in part, be explained by reduced breastfeeding among obese mothers.²⁵ Breastfeeding decreases the risk for several infectious diseases including respiratory and enteric infections.²⁶ The association between maternal obesity and respiratory infections have been

Taiwanese study that reported an increased risk of pneumonia during the first 6 months for children of mothers with a pre-pregnancy BMI of 24 or higher.¹¹ Additionally, a Norwegian study found an association between maternal obesity and lower respiratory infections during the first 18 months.

examined in two previous large cohort studies. Our results are consistent with findings from a

However, this association did not persist in the adjusted analyses.²⁷ In comparison with our study, these analyses were also adjusted for maternal income, maternal marital status, maternal asthma, parental smoking after birth, breastfeeding, and type of daycare. To our knowledge, no previous studies have examined the association between maternal weight during pregnancy and enteric or genitourinary infections during early childhood.

Strengths of this study include the large size of the study population, which allowed us to systematically examine the associations between BMI during pregnancy and risk of hospitalisations for categories of infectious diseases; the use of several high-quality registers which allowed analysis to be adjusted for potential confounders including maternal education level. However, our study has several weaknesses. A large number of individuals had missing data on BMI during pregnancy, the main exposure. Therefore, we used multiple imputation to include individuals with missing data. Estimates after multiple imputation were similar to estimates from complete case analyses indicating no major selection bias due to missing data, under the assumption that data were missing at random.²² Another limitation is the lack of information about breastfeeding, childhood obesity and other potential mediators. Therefore, we did not conduct a mediation analysis of the association between maternal weight during pregnancy and hospitalisations for infectious diseases. Finally, there is a risk of residual confounding due to unmeasured or incompletely measured factors including ethnicity and socioeconomic status.

In conclusion, this study found an association between overweight and obesity during pregnancy and the overall risk of hospitalisations for infectious diseases in early childhood. Thereby, it contributes to the growing evidence about the wide range of adverse outcomes associated with overweight and the need for stepping up policy interventions.

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Contributors: SV conceptualised and designed the study, performed data analyses and wrote the
manuscript. GR contributed to the design, assisted with the statistical analyses and revised the
manuscript. SAS created the database contributed to the design and revised the manuscript. All
authors approved the final manuscript.
Competing interests: We have no conflict of interest to declare.
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Epost: info@oskarfonden.se).
Patient consent: Patient informed consent was not needed because the data collected were
retrospective and deidentified.
Ethics approval: The study was approved by the Regional Ethics Committee at Umeå University (nr
2012-265-31M and 2013-320-32M) and by the MSc Research Ethics Committee at London School of
Hygiene Tropical Medicine (nr 10852). The retrieval and use of register data were also approved
through a separate review of data safety and confidentiality by Swedish National Board of Health and
Welfare, and by Statistics Sweden.
Data sharing statement: The data used in this study were obtained from third parties. It includes
sensitive information and some access restrictions apply to the data. Interested researchers need to
obtain data directly from National Board of Health and Welfare in Sweden and from Statistics
Sweden. Children included in the study were identified in the Medical Birth Register, data on
hospitalisations were obtained from the Swedish National Patient Register and data on deaths were
obtained from the Cause of Death Register. All of these registers are maintained by National Board of
Health and Welfare in Sweden. Data on maternal education was obtained from the Longitudinal
Integration Database for Health Insurance and Labour market Studies and data on migration was
obtained from the Swedish Total Population Register, both registers are maintained by Statistics
Sweden.

"What is already known on this topic"

Children of overweight mothers are more likely to have birth complications, congenital anomalies and other detrimental conditions.

An increased risk of infectious disease in children of overweight mothers has been observed in some smaller cohort studies.

There is no previous large population-based cohort study on the association between overweight during pregnancy, and the risk of infectious disease during early childhood.

"What this study adds"

We found an association between overweight and obesity during pregnancy and the overall risk of infectious disease hospitalisations during early childhood.

Overweight and obesity during pregnancy were both strongly associated with perinatal infections; obesity during pregnancy was also modestly associated with respiratory and genitourinary infections.

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REFERENCES

5	
6	1 Black RE, Victora CG, Walker SP, et al. Maternal and child undernutrition and overweight in low-
7	income and middle-income countries. <i>Lancet</i> 2013;382:427-51.
8	2 Heslehurst N, Ells LJ, Simpson H, Batterham A, Wilkinson J, Summerbell CD. Trends in maternal
9	obesity incidence rates, demographic predictors, and health inequalities in 36,821 women over a 15-
10	
11	year period. <i>BJOG : an international journal of obstetrics and gynaecology</i> 2007;114:187-94.
12	3 Villamor E, Msamanga G, Urassa W, et al. Trends in obesity, underweight, and wasting among
13	women attending prenatal clinics in urban Tanzania, 1995-2004. The American journal of clinical
14	nutrition 2006;83:1387-94.
15	4 Johansson S, Villamor E, Altman M, Bonamy AK, Granath F, Cnattingius S. Maternal overweight and
	obesity in early pregnancy and risk of infant mortality: a population based cohort study in Sweden.
16	Bmj 2014;349:g6572.
17	5 Brynhildsen J, Sydsjo A, Ekholm-Selling K, Josefsson A. The importance of maternal BMI on infant's
18	birth weight in four BMI groups for the period 1978-2001. Acta obstetricia et gynecologica
19	
20	Scandinavica 2009;88:391-6.
21	6 Socialstyrelsen. Statistik om graviditeter, förlossningar och nyfödda barn 2015. 2017 Mar.
22	http://www.socialstyrelsen.se/publikationer2017/2017-3-3 (accessed 10 April 2018).
23	7 Aviram A, Hod M, Yogev Y. Maternal obesity: implications for pregnancy outcome and long-term
24	risks-a link to maternal nutrition. International journal of gynaecology and obstetrics: the official
25	organ of the International Federation of Gynaecology and Obstetrics 2011;115 Suppl 1:S6-10.
26	8 Sebire NJ, Jolly M, Harris JP, et al. Maternal obesity and pregnancy outcome: a study of 287,213
27	pregnancies in London. International journal of obesity and related metabolic disorders : journal of
28	the International Association for the Study of Obesity 2001;25:1175-82.
29	9 Vasudevan C, Renfrew M, McGuire W. Fetal and perinatal consequences of maternal obesity.
30	
31	Archives of disease in childhood Fetal and neonatal edition 2011;96:F378-82.
32	10 Ruager-Martin R, Hyde MJ, Modi N. Maternal obesity and infant outcomes. Early human
33	development 2010;86:715-22.
34	11 Chen CH, Wen HJ, Chen PC, et al. Prenatal and postnatal risk factors for infantile pneumonia in a
35	representative birth cohort. <i>Epidemiology and infection</i> 2012;140:1277-85.
36	12 Cameron CM, Shibl R, McClure RJ, Ng SK, Hills AP. Maternal pregravid body mass index and child
37	hospital admissions in the first 5 years of life: results from an Australian birth cohort. International
38	journal of obesity 2014;38:1268-74.
39	13 Anell A, Glenngard AH, Merkur S. Sweden health system review. <i>Health systems in transition</i>
	2012;14:1-159.
40	14 Weitoft GR, Hjern A, Batljan I, Vinnerljung B. Health and social outcomes among children in low-
41	
42	income families and families receiving social assistance - A Swedish national cohort study. Social
43	science & medicine 2008;66:14-30.
44	15 Socialstyrelsen. The Swedish Medical Birth Register - A summary of content and quality. 2003 Nov.
45	http://www.socialstyrelsen.se/Lists/Artikelkatalog/Attachments/10655/2003-112-3_20031123.pdf
46	(accessed 10 April 2018).
47	16 Socialstyrelsen. Causes of Death 2014. 2015 Aug.
48	http://www.socialstyrelsen.se/Lists/Artikelkatalog/Attachments/19909/2015-8-1.pdf (accessed 10
49	April 2018).
50	17 Ludvigsson JF, Andersson E, Ekbom A, et al. External review and validation of the Swedish national
51	inpatient register. BMC public health 2011;11:450.
52	18 Margerison-Zilko CE, Shrimali BP, Eskenazi B, Lahiff M, Lindquist AR, Abrams BF. Trimester of
53	maternal gestational weight gain and offspring body weight at birth and age five. Maternal and child
54	
55	health journal 2012;16:1215-23.
56	
57	
58	
59	
60	https://mc.manuscriptcentral.com/adc

19 World Health Organization. Global database on body massindex: BMI classification.
http://apps.who.int/bmi/index.jsp?introPage=intro_3.html (accessed 10 April 2018).
20 Mattsson K, Kallen K, Rignell-Hydbom A, et al. Cotinine Validation of Self-Reported Smoking
During Pregnancy in the Swedish Medical Birth Register. Nicotine & tobacco research : official journal

of the Society for Research on Nicotine and Tobacco 2016;18:79-83. 21 Baker MG, Barnard LT, Kvalsvig A, *et al.* Increasing incidence of serious infectious diseases and inequalities in New Zealand: a national epidemiological study. *Lancet* 2012;379:1112-9.

22 Sterne JA, White IR, Carlin JB, *et al*. Multiple imputation for missing data in epidemiological and clinical research: potential and pitfalls. *Bmj* 2009;338:b2393.

23 Stothard KJ, Tennant PW, Bell R, Rankin J. Maternal overweight and obesity and the risk of congenital anomalies: a systematic review and meta-analysis. *Jama* 2009;301:636-50.

24 Yuan W, Basso O, Sorensen HT, Olsen J. Maternal prenatal lifestyle factors and infectious disease in early childhood: a follow-up study of hospitalization within a Danish birth cohort. *Pediatrics* 2001;107:357-62.

25 Turcksin R, Bel S, Galjaard S, Devlieger R. Maternal obesity and breastfeeding intention, initiation, intensity and duration: a systematic review. *Maternal & child nutrition* 2014;10:166-83.
26 Duijts L, Jaddoe VW, Hofman A, Moll HA. Prolonged and exclusive breastfeeding reduces the risk

of infectious diseases in infancy. *Pediatrics* 2010;126:e18-25. 27 Haberg SE, Stigum H, London SJ, Nystad W, Nafstad P. Maternal obesity in pregnancy and respiratory health in early childhood. *Paediatric and perinatal epidemiology* 2009;23:352-62.

			Included			Excluded*
	Underweight	Normal	Overweight	Obese	All	All
	n = 16,241	n = 431,708	n= 171,826	n = 73,232	n = 693,007	n = 145,749
Maternal age (n (%))						
≤19	765 (7,7)	6462 (64,9)	1910 (19,2)	821 (8,2)	9958	4588
20-24	3905 (4,5)	52815 (61,0)	20263 (23,4)	9662 (11,2)	86645	20519
25-29	5619 (2,5)	141631 (63,1)	53897 (24,0)	23473 (10,5)	224620	42215
30-34	4338 (1,8)	155494 (63,5)	60400 (24,7)	24479 (10,0)	244711	49459
≥35	1614 (1,3)	75306 (59,3)	35356 (27,8)	14797 (11,6)	127073	28968
Parity (n (%))						
1	8525 (2,8)	198523 (66,3)	66458 (22,2)	25863 (8,6)	299369	63728
2	5645 (2,2)	158028 (62,1)	64141 (25,2)	26730 (10,5)	254544	50554
3	1525 (1,6)	56250 (57,6)	27431 (28,1)	12435 (12,7)	97641	20331
≥4	546 (1,3)	18907 (45,6)	13796 (33,3)	8204 (19,8)	41453	11112
Maternal smoking (n (%))						
No smoking	13938 (2,2)	393659 (63,2)	153046 (24,6)	62568 (10,0)	623211	80210
Smoking	2303 (3,3)	38049 (54,5)	18780 (26,9)	10664 (15,3)	69796	10596
Maternal education (n (%))†						
≤9	3151 (3,9)	43753 (53,9)	21784 (26,9)	12413 (15,3)	81101	16222
10-12	7509 (2,2)	194203 (58,1)	89794 (26,9)	42662 (12,8)	334168	55751
13-15	1985 (1,9)	67628 (66,1)	24431 (23,9)	8235 (8,1)	102279	19563
≥16	3596 (2,0)	126124 (71,9)	35817 (20,4)	9922 (5,7)	175459	33978
Region (n (%))						
Blekinge	239 (2,0)	7160 (60,1)	3107 (26,1)	1411 (11,8)	11917	1114
Dalarna	389 (2,0)	11262 (56,8)	5516 (27,8)	2677 (13,5)	19844	2512
Gotland	80 (2,0)	2336 (58,4)	1075 (26,9)	512 (12,8)	4003	491
Gävleborg	403 (2,1)	10594 (55,7)	5377 (28,3)	2636 (13,9)	19010	3633
Halland	552 (2,4)	14699 (63,8)	5596 (24,3)	2183 (9,5)	23030	2915
Jämtland	175 (2,0)	5320 (60,3)	2297 (26,0)	1029 (11,7)	8821	1750
Jönköping	622 (2,2)	17071 (60,3)	7486 (26,5)	3122 (11,0)	28301	2615

Kalmar	404 (2,5)	9716 (59,1)	4338 (26 <i>,</i> 4)	1984 (12,1)	16442	1850
Kronoberg	308 (2,1)	8954 (60,9)	3745 (25,5)	1689 (11,5)	14696	1091
Norrbotten	357 (2,1)	9935 (57,1)	4757 (27,3)	2348 (13,5)	17397	3710
Skåne	2252 (2,5)	56244 (61,6)	22835 (25,0)	9940 (10,9)	91271	14878
Stockholm	4255 (2,8)	103766 (68,1)	32788 (21,5)	11668 (7,7)	152477	50477
Södermanland	439 (2,3)	11021 (57,6)	5244 (27,4)	2421 (12,7)	19125	3417
Uppsala	530 (2,2)	15045 (62,1)	6051 (25,0)	2613 (10,8)	24239	5201
Värmland	373 (2,0)	11182 (59,0)	5023 (26,5)	2381 (12,6)	18959	3110
Västerbotten	366 (2,0)	11023 (61,1)	4667 (25,9)	1984 (11,0)	18040	4134
Västernorrland	277 (1,8)	8423 (55,1)	4344 (28,4)	2236 (14,6)	15280	5272
Västmanland	453 (2,3)	11733 (59,8)	4994 (25,5)	2430 (12,4)	19610	2536
Västra Götaland	2592 (2,2)	73663 (63,0)	28856 (24,7)	11734 (10,0)	116845	27143
Örebro	442 (2,3)	11599 (60,2)	4931 (25,6)	2299 (11,9)	19271	4941
Östergötland	733 (2,1)	20962 (60,9)	8799 (25,6)	3935 (11,4)	34429	2836

*Children with missing data on pregnancy BMI (n = 114,588) or covariates (n = 31,161) were excluded (totally 17% of the original cohort). Data on covariates were available in 62%–100% of the excluded children.

[†]Maternal education level at year of birth, categorised into 9 years or less (lower secondary school or less) 10-12 years (upper secondary school) 13-15 years (short post-secondary education) or 16 years or more (long post-secondary education).

Pregnancy BMI categorised as underweight (BMI <18.5), normal (BMI 18.5–24.9), overweight (BMI 25.0–29.9) and obese (BMI ≥30.0).

Table 2: Inpatient hospital admission rates for overall and for categories of infectious diseases, by pregnancy BMI categories.

		Underweig	ght	Normal		Overweig	sht	Obese	
	Infections	Events	IR (95% CI)	Events	IR (95% CI)	Events	IR (95% CI)	Events	IR (95% CI)
•	All*	3042	3789 (3657 - 3926)	74371	3479 (3454 - 3504)	31847	3739 (3698 - 3780)	15750	4341 (4274 - 4410)
1	Lower respiratory tract	748	932 (867 - 1001)	19419	908 (896 - 921)	8337	979 (958 - 1000)	4266	1176 (1141 - 1212)
2	Enteric	846	1054 (985 - 1127)	17638	825 (813 - 837)	7063	829 (810 - 849)	3481	959 (928 - 992)
3	Upper respiratory tract	576	717 (661 - 778)	15041	704 (692 - 715)	6721	789 (770 - 808)	3271	902 (871 - 933)
4	Genitourinary	218	272 (238 - 310)	5091	238 (232 - 245)	2265	266 (255 - 277)	1102	304 (286 - 322)
5	Perinatal ⁺	76	6113 (4882 - 7654)	2411	7295 (7010 - 7592)	1254	9536 (9023 - 10079)	665	11876 (11007 - 12814)
6	Skin and soft tissue	72	90 (71 - 113)	2135	100 (96 - 104)	825	97 (90 - 104)	396	109 (99 - 120)
7	Neurological and eye	38	47 (34 - 65)	1121	52 (49 - 56)	403	47 (43 - 52)	182	50 (43 - 58)
8 n	Digestive tract	46	57 (43 - 76)	922	43 (40 - 46)	362	43 (38 - 47)	162	45 (38 - 52)
9 0	Blood stream	21	26 (17 - 40)	628	29 (27 - 32)	285	33 (30 - 38)	105	29 (24 - 35)
1	Other	399	497 (451 - 548)	9890	463 (454 - 472)	4299	505 (490 - 520)	2106	580 (556 - 606)

*Includes all perinatal infections.

⁺Includes only perinatal infections recorded between birth and day 28.

Incidence rates (IRs) estimated as number of inpatient hospital admissions per 100,000 person-years (PY) at risk. Pregnancy BMI categorised as underweight (BMI <18.5), normal (BMI 18.5–24.9), overweight (BMI 25.0–29.9) and obese (BMI ≥30.0).

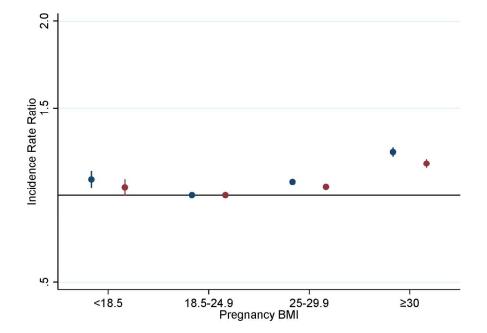


Figure 1: Crude (blue) and adjusted (red) analyses of the association between pregnancy BMI categories and overall risk of infectious disease hospitalisations. Incidence rate ratios were estimated using binomial regression models. Vertical lines represent 95% CIs around the point estimates. Adjusted analyses were adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth. All analyses excluded children with missing data, leaving 693,007 children.

381x319mm (120 x 120 DPI)

>30

+

≥30

≥30

≥30

≥30

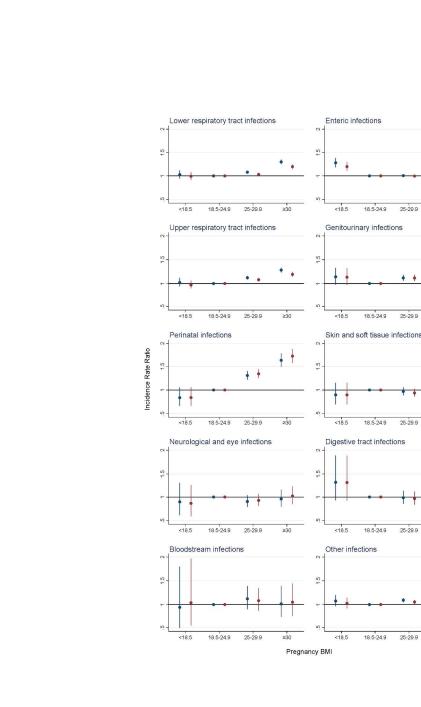


Figure 2: Crude (blue) and adjusted (red) analyses of the association between pregnancy BMI and categories infectious diseases hospitalisations. Incidence rate ratios were estimated using binomial regression models. Vertical lines represent 95% CIs around the point estimates. Adjusted analyses were adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth. All analyses excluded children with missing data, leaving 693,007 children.

165x271mm (300 x 300 DPI)

Appendix A

Table A: Infectious disease categories and groups

Category	Group
Enteric infections	Enteric infections
	Enteric symptoms
Bloodstream infections	Septicemia
Neurological & eye infections	Meningococcal disease
incur ological et eye intections	CNS viral infections
	CNS general infections
	Eye infections
Upper respiratory tract infections	-
opported printer, and an	Upper RTI
Lower respiratory tract infections	
	Acute LRTI
	Chronic LRTI
Digestive tract infections	Oral infections
5	Gastrointestinal tract infections
	Hepatic infections
	Viral Hepatitis
Genitourinary infections	Kidney infections
	Urinary tract infections
	Reproductive system infections, male
	Reproductive system infections, female
Skin & soft tissue infections	Skin infections, typical
	Skin infections, other
	Connective tissue infections
Infections of perinatal period	Perinatal infections
Other infections	STI
	HIV/AIDS
	Breast infections
	Osteomyelitis
	Joint infections
	Connective tissue infections
	Neoplasms from infection
	Postoperative infections
	Adverse effect of ID treatment
	Other Bacterial Infections
	Other Viral infections
	Other Mycoses
	Other Protozoan infections
	Other ID
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ID Group	ICD-10 Codes
Enteric infections	A00, A01, A02, A03, A04, A05, A06, A07,A08
Enteric symptoms	A09, I880, K528, K529, R11
Septicemia	A40, A41
HIV/AIDS	B20, B21. B22, B23, B24
STI	A50, A51, A52, A53, A54, A55, A56, A57, A58,
	A59, A60, A63, A64, N290
Meningococcal disease	A39
CNS viral infections	A801, A802, A803, A804, A809, A811, A812,
	A818, A819, A82, A83, A84, A85, A86, A87, A88, A89
CNS general infections	G00, G01, G02, G030, G039, G04, G05, G06, G07, G08, G09, G610
Eye infections	B30, H000, H03, H043, H050, H100, H102, H103,
	H109, H130, H131, H160, H190, H191, H192,
	H220, H440, H451
Ear infections	H600, H601, H602, H603, H608, H609, H62, H65, H66, H67, H680, H70, H730, H750, H830, H940
Upper RTI	J00, J01, J02, J03, J04, J05, J06, J32, J340, J36, J37, J390, J391
Tuberculosis	A15, A16, A17, A18, A19, N740, N741, J65
Acute LRTI	A481, A482, B59, J09, J10, J11, J12, J13, J14, J15,
	J16, J17, J18, J20, J21, J22
Chronic LRTI	J40, J41, J42, J440, J47, J85, J86, J988
Heart & Circulatory	B332, 100, 101, 102, 105, 106, 107, 108, 109, 1301,
infections	133, 138, 139, 1400, 1410, 1411, 1412, 1430, 1716,
Oral infactions	
Oral infections	K02, K044, K046, K050, K052, K053, K113, K122
Gastrointestinal tract	K230, K231, K25, K26, K27, K28, K293, K294,
infections	K295, K35, K36, K37, K61, K630, K632, K650,
Hanatic infactions	K678, K908, K930
Hepatic infections Viral Hepatitis	K750, K770, K830 B15, B16, B17, B18, B19
Kidney infections	N00, N05, N10, N136, N151
Urinary tract infections	N300, N341, N351, N37, N390
	1000, 1071, 1001, 107, 1000
Reproductive system	N410, N411, N412, N413, N431, N45, N410,
infections, male	N411, N412, N413, N431, N45, N481, N482, N490, N49, N51
Reproductive system infections, female	N70, N71, N72, N73, N74, N751, N764, N87

Skir	n infections, typical	A46, L00, L01, L02, L03, L04, L050, L08
Skir	n infections, other	B86, T009, T633, T634, T793
Bre	ast infections	N61
Ost	eomyelitis	M462, M463, M464, M465
Joir	nt infections	M00, M01
Cor	nnective tissue infections	M021, M023, M03, M600, M630, M631, M632, M650, M651, M680, M710, M711, M896
Neo	oplasms from infection	C11, C161, C162, C163, C164, C165, C166, C168, C169, C210, C211, C220, C46, C53, D002, D013, D06
Pos	toperative infections	T802, T814, T826, T827, T835, T836, T845, T846, T847, T857, T874
	verse effect of ID atment	R761, R762, T36, T37, T485, T487, T490, T495, T496, T499, T788, T789, T880, T881, T887
Oth	er Bacterial infections	A20, A21, A22, A23, A24, A25, A26, A27, A28, A30, A31, A32, A33, A34, A35, A36, A37, A38, A42, A43, A44, A480, A483, A484, A488, A49, A65, A66, A67, A68, A69, A70, A71, A74, A75, A77, A78, A79, B95, B96
Oth	er Viral infections	A90, A91, A92, A93, A94, A95, A96, A98, A99, B00, B01, B02, B03, B04, B05, B06, B07, A08, B09, B25, B26, B27, B33, B34, B97
Oth	ner Mycoses	B35, B36, B37, B38, B39, B40, B41, B42, B43, B44, B45, B46, B47, B48, B49
Oth	er Protozoan infections	B50, B51, B52, B53, B54, B55, B56, B57, B58, B60, B64
Oth	ner ID	B65, B66, B67, B68, B69, B70, B71, B72, B73, B74, B75, B76, B77, B78, B79, B80, B81, B82, B83, B85, B86, B87, B88, B89, B94, B99, E033, E321, F024, F071, I88, T64
Per	inatal infections	P002, P027, P23, P35, P36, P37, P38, P39

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Appendix B: Regression outputs for all infections

Table C: All infections

Variables		Crude	IRR (95% CI)	Adjuste	d IRR* (95% CI)	MI-mod	el 1 IRR†(95% CI)	MI-mode	el 2 IRR‡ (95% C
Pregnancy BMI	Underweight	1.09	(1.04 - 1.14)	1.04	(1.00 - 1.09)	1.05	(1.00 - 1.09)	1.05	(1.00 - 1.10)
	Normal	1	ref	1	ref	1	ref	1	ref
	Overweight	1.07	(1.06 - 1.09)	1.05	(1.03 - 1.06)	1.05	(1.03 - 1.06)	1.05	(1.04 - 1.07)
	Obese	1.25	(1.22 - 1.28)	1.18	(1.16 - 1.21)	1.19	(1.16 - 1.21)	1.19	(1.16 - 1.21)
Maternal age	≤19			1.02	(0.97 - 1.08)	1.03	(0.98 - 1.07)	1.03	(0.98 - 1.07)
	20-24			1	ref	1	ref	1	ref
	25-29			0.94	(0.92 - 0.96)	0.93	(0.91 - 0.94)	0.93	(0.91 - 0.94)
	30-34			0.88	(0.86 - 0.90)	0.87	(0.85 - 0.89)	0.87	(0.85 - 0.89)
	≥35			0.82	(0.80 - 0.85)	0.82	(0.80 - 0.84)	0.82	(0.80 - 0.84
Parity	1			1	ref	1	ref	1	ref
	2			1.14	(1.12 - 1.16)	1.14	(1.12 - 1.15)	1.14	(1.12 - 1.15
	3			1.13	(1.11 - 1.16)	1.15	(1.12 - 1.17)	1.15	(1.12 - 1.17
	≥4			1.28	(1.24 - 1.32)	1.30	(1.27 - 1.34)	1.30	(1.27 - 1.34
Maternal	No smoking			1	ref	1	ref	1	ref
smoking	Smoking			1.09	(1.06 - 1.11)	1.08	(1.06 - 1.11)	1.08	(1.06 - 1.11
Maternal	≤9			1.19	(1.16 - 1.22)	1.20	(1.17 - 1.23)	1.20	(1.17 - 1.23
education	10-12			1.03	(1.01 - 1.05)	1.04	(1.02 - 1.06)	1.04	(1.02 - 1.06
	13-14			1	ref	1	ref	1	ref
	≥16			0.97	(0.95 - 0.99)	0.96	(0.94 - 0.98)	0.96	(0.94 - 0.98
Region	Blekinge			1	ref	1	ref	1	ref
	Dalarna			1.08	(1.02 - 1.15)	1.10	(1.04 - 1.17)	1.10	(1.04 - 1.17
	Gotland			1.20	(1.10 - 1.32)	1.20	(1.10 - 1.31)	1.20	/ (1.10 - 1.31
	Gävleborg			0.78	(0.73 - 0.83)	0.78	(0.73 - 0.83)	0.78	(0.73 - 0.83
	Halland			1.09	(1.02 - 1.15)	1.09	(1.03 - 1.16)	1.09	(1.03 - 1.16
	Jämtland			1.25	(1.17 - 1.35)	1.26	(1.18 - 1.34)	1.26	(1.18 - 1.34
	Jönköping			0.67	(0.63 - 0.71)	0.67	(0.63 - 0.71)	0.67	(0.63 - 0.71
	Kalmar			1.13	(1.06 - 1.21)	1.14	(1.07 - 1.21)	1.14	(1.07 - 1.21

	Norrbotten Skåne Stockholm	0.99 0.96	(0.93 - 1.06)	1.00	(0.94 - 1.06)	1.00	(0.94 - 1.06)
		0.96					. ,
	Stockholm		(0.91 - 1.01)	0.97	(0.93 - 1.02)	0.97	(0.93 - 1.02)
		0.82	(0.78 - 0.86)	0.82	(0.78 - 0.86)	0.82	(0.78 - 0.86)
	Södermanland	0.96	(0.91 - 1.03)	0.97	(0.91 - 1.02)	0.97	(0.91 - 1.02)
	Uppsala	0.67	(0.63 - 0.72)	0.68	(0.64 - 0.72)	0.68	(0.64 - 0.72)
	Värmland	0.76	(0.71 - 0.81)	0.76	(0.72 - 0.81)	0.76	(0.72 - 0.81)
	Västerbotten	1.08	(1.01 - 1.14)	1.07	(1.01 - 1.13)	1.07	(1.01 - 1.13)
	Västernorrland	1.03	(0.97 - 1.10)	1.04	(0.98 - 1.10)	1.04	(0.98 - 1.10)
	Västmanland	0.97	(0.91 - 1.03)	0.96	(0.91 - 1.02)	0.96	(0.91 - 1.02)
	Västra						
	Götaland	1.02	(0.97 - 1.07)	1.02	(0.97 - 1.07)	1.02	(0.97 - 1.07)
	Örebro	0.95	(0.89 - 1.01)	0.96	(0.90 - 1.01)	0.96	(0.90 - 1.01)
	Östergötland	0.70	(0.66 - 0.75)	0.71	(0.67 - 0.75)	0.71	(0.67 - 0.75)
Year	1998	1	ref	1	ref	1	ref
	1999	0.98	(0.95 - 1.01)	0.99	(0.97 - 1.02)	0.99	(0.97 - 1.02)
	2000	0.94	(0.92 - 0.97)	0.94	(0.92 - 0.97)	0.94	(0.92 - 0.97)
	2001	0.94	(0.91 - 0.96)	0.94	(0.91 - 0.94)	0.94	(0.91 - 0.94)
	2002	0.92	(0.89 - 0.95)	0.92	(0.92 - 0.97)	0.92	(0.92 - 0.97)
	2003	0.93	(0.91 - 0.96)	0.94	(0.90 - 0.94)	0.94	(0.90 - 0.94)
	2004	0.89	(0.87 - 0.92)	0.90	(0.91 - 0.96)	0.90	(0.91 - 0.96)
	2005	1.01	(0.98 - 1.04)	1.01	(0.88 - 0.92)	1.01	(0.88 - 0.92)
	2006	0.94	(0.92 - 0.97)	0.96	(0.99 - 1.04)	0.96	(0.99 - 1.04)
Observations (N)	693,007	693,007		838,756		838,756	
* Adjusted for ma	ternal age, maternal education level, mate	rnal smoking, r	number of previo	us births, ge	ographic region a	and year of	birth.
•	tion imputed using multiple imputation. Se maternal age, maternal education level, m	• •		•		-	• •

Appendix C: Regression outputs for categories of infectious diseases

Table D: Lower respiratory tract infections

Variables		Crude	e IRR (95% CI)	Adjuste	d IRR* (95% CI)	MI-mode	el 1 IRR†(95% CI)	MI-mode	el 2 IRR‡ (95% CI)
Pregnancy BMI	Underweight	1.03	(0.94 - 1.12)	0.99	(0.91 - 1.08)	1.00	(0.92 - 1.08)	1.02	(0.93 - 1.11)
	Normal	1	ref	1	ref	1	ref	1	ref
	Overweight	1.08	(1.05 - 1.11)	1.03	(1.00 - 1.06)	1.03	(1.00 - 1.06)	1.04	(1.01 - 1.07)
	Obese	1.30	(1.25 - 1.35)	1.19	(1.15 - 1.24)	1.20	(1.15 - 1.24)	1.20	(1.15 - 1.25)
Maternal age	≤19			1.14	(1.02 - 1.27)	1.14	(1.05 - 1.25)	1.14	(1.05 - 1.25)
	20-24			1	ref	1	ref	1	ref
	25-29			0.93	(0.89 - 0.97)	0.91	(0.88 - 0.94)	0.91	(0.87 - 0.94)
	30-34			0.84	(0.81 - 0.88)	0.84	(0.81 - 0.87)	0.84	(0.81 - 0.87)
	≥35			0.75	(0.72 - 0.79)	0.75	(0.72 - 0.79)	0.75	(0.72 - 0.78)
Parity	1			1	ref	1	ref	1	ref
	2			1.64	(1.59 - 1.69)	1.61	(1.57 - 1.66)	1.61	(1.57 - 1.66)
	3			1.65	(1.58 - 1.72)	1.66	(1.60 - 1.72)	1.66	(1.60 - 1.72)
	≥4			2.06	(1.96 - 2.18)	2.04	(1.94 - 2.14)	2.04	(1.94 - 2.14)
Maternal	No smoking			1	ref	1	ref	1	ref
smoking	Smoking			1.29	(1.24 - 1.34)	1.26	(1.21 - 1.30)	1.26	(1.21 - 1.30)
Maternal	≤9			1.09	(1.03 - 1.14)	1.10	(1.05 - 1.16)	1.10	(1.05 - 1.16)
education	10-12			1.00	(0.96 - 1.04)	1.01	(0.97 - 1.04)	1.01	(0.97 - 1.05)
	13-14			1	ref	1	ref	1	ref
	≥16			1.01	(0.97 - 1.06)	0.99	(0.96 - 1.03)	1.00	(0.96 - 1.04)
Region	Blekinge			1	ref	1	ref	1	ref
	Dalarna			0.85	(0.76 - 0.95)	0.87	(0.79 - 0.97)	0.87	(0.78 - 0.97)
	Gotland			0.70	(0.58 - 0.85)	0.71	(0.60 - 0.86)	0.71	/ (0.59 - 0.85)
	Gävleborg			0.60	(0.53 - 0.67)	0.61	(0.55 - 0.69)	0.61	(0.55 - 0.69)
	Halland			1.04	(0.93 - 1.15)	1.08	(0.97 - 1.19)	1.08	(0.97 - 1.19)
	Jämtland			1.07	(0.94 - 1.22)	1.06	(0.94 - 1.20)	1.07	(0.94 - 1.21)
	Jönköping			0.46	(0.41 - 0.52)	0.47	(0.42 - 0.53)	0.47	(0.42 - 0.53)
	Kalmar			1.09	(0.97 - 1.21)	1.14	(1.02 - 1.27)	1.14	(1.02 - 1.27)

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	Kronoberg	0.78	(0.69 - 0.88)	0.81	(0.72 - 0.91)	0.81	(0.72 - 0.9
	Norrbotten	0.82	(0.73 - 0.92)	0.87	(0.78 - 0.97)	0.87	(0.78 - 0.9
	Skåne	1.02	(0.93 - 1.12)	1.08	(0.99 - 1.18)	1.08	(0.98 - 1.
	Stockholm	0.84	, (0.76 - 0.92)	0.88	(0.81 - 0.96)	0.88	(0.81 - 0.
	Södermanland	0.89	(0.80 - 0.99)	0.91	(0.82 - 1.01)	0.91	(0.82 - 1.
	Uppsala	0.42	(0.37 - 0.48)	0.44	(0.39 - 0.49)	0.44	(0.39 - 0.
	Värmland	0.55	(0.48 - 0.62)	0.57	(0.50 - 0.64)	0.57	(0.50 - 0.
	Västerbotten	0.88	(0.78 - 0.98)	0.89	(0.80 - 0.99)	0.89	(0.80 - 0
	Västernorrland	0.83	(0.74 - 0.93)	0.83	(0.75 - 0.93)	0.83	(0.75 - 0.
	Västmanland	0.88	(0.78 - 0.98)	0.89	(0.80 - 0.99)	0.89	(0.80 - 0
	Västra						
	Götaland	0.79	(0.72 - 0.86)	0.81	(0.74 - 0.88)	0.80	(0.74 - 0
	Örebro	0.80	(0.71 - 0.89)	0.81	(0.73 - 0.90)	0.81	(0.73 - 0
	Östergötland	0.56	(0.50 - 0.62)	0.58	(0.52 - 0.64)	0.58	(0.52 - 0
/ear	1998	1	ref	1	ref	1	ref
	1999	1.17	(1.11 - 1.24)	1.19	(1.13 - 1.25)	1.19	(1.13 - 1
	2000	1.08	(1.02 - 1.15)	1.08	(1.02 - 1.14)	1.08	(1.02 - 1
	2001	1.29	(1.22 - 1.37)	1.30	(0.88 - 0.94)	1.30	(0.87 - 0
	2002	1.15	(1.09 - 1.21)	1.14	(1.23 - 1.36)	1.14	(1.23 - 1
	2003	1.21	(1.14 - 1.28)	1.21	(1.09 - 1.20)	1.21	(1.08 - 1
	2004	1.15	(1.09 - 1.22)	1.15	(1.15 - 1.27)	1.15	(1.15 - 1
	2005	1.61	(1.52 - 1.70)	1.59	(1.10 - 1.21)	1.59	(1.09 - 1
	2006	1.23	(1.16 - 1.30)	1.24	(1.51 - 1.67)	1.24	(1.51 - 1
Observations (N)	693,007	693,007		838,756		838,756	

⁺ Missing information imputed using multiple imputation. Sequential imputation in the order: region, maternal education, maternal smoking and pregnancy BMI. Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

[‡] Missing information imputed using multiple imputation. Sequential imputation in the order: pregnancy BMI, maternal smoking, maternal education and region. Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

Table E: Enteric infection

Variables		Crude	IRR (95% CI)	Adjuste	d IRR* (95% CI)	MI-mode	l 1 IRR†(95% CI)	MI-mode	l 2 IRR‡ (95% C
Pregnancy BMI	Underweight	1.28	(1.18 - 1.38)	1.20	(1.11 - 1.29)	1.17	(1.09 - 1.26)	1.18	(1.10 - 1.27)
	Normal	1	ref	1	ref	1	ref	1	ref
	Overweight	1.00	(0.98 - 1.04)	1.00	(0.97 - 1.03)	1.00	(0.98 - 1.03)	1.01	(0.98 - 1.04
	Obese	1.16	(1.12 - 1.21)	1.12	(1.08 - 1.17)	1.14	(1.10 - 1.19)	1.14	(1.10 - 1.19
Maternal age	≤19			0.93	(0.84 - 1.02)	0.91	(0.83 - 0.99)	0.91	(0.84 - 0.99
	20-24			1	ref	1	ref	1	ref
	25-29			0.93	(0.90 - 0.97)	0.93	(0.90 - 0.97)	0.93	(0.90 - 0.97
	30-34			0.87	(0.83 - 0.91)	0.85	(0.82 - 0.89)	0.85	(0.82 - 0.89
	≥35			0.80	(0.76 - 0.84)	0.80	(0.77 - 0.84)	0.80	(0.77 - 0.84
Parity	1			1	ref	1	ref	1	ref
	2			0.88	(0.85 - 0.90)	0.88	(0.86 - 0.90)	0.88	(0.86 - 0.90
	3			0.86	(0.82 - 0.89)	0.88	(0.85 - 0.91)	0.88	(0.85 - 0.91
	≥4			0.95	(0.90 - 1.01)	0.99	(0.94 - 1.04)	0.99	(0.94 - 1.04
Maternal	No smoking			1	ref	1	ref	1	ref
smoking	Smoking			0.95	(0.91 - 0.99)	0.96	(0.92 - 1.00)	0.96	(0.92 - 1.00
Maternal	≤9			1.37	(1.30 - 1.44)	1.35	(1.29 - 1.42)	1.35	(1.29 - 1.42
education	10-12			1.09	(1.04 - 1.13)	1.08	(1.05 - 1.12)	1.09	(1.05 - 1.13
	13-14			1	ref	1	ref	1	ref
	≥16			0.97	(0.93 - 1.01)	0.96	(0.92 - 1.00)	0.96	(0.92 - 1.00
Region	Blekinge			1	ref	1	ref	1	ref
	Dalarna			1.37	(1.22 - 1.55)	1.35	(1.21 - 1.51)	1.35	(1.21 - 1.51
	Gotland			1.62	(1.37 - 1.92)	1.53	(1.31 - 1.80)	1.53	(1.31 - 1.80
	Gävleborg			0.98	(0.86 - 1.11)	0.95	(0.84 - 1.07)	0.95	(0.84 - 1.06
	Halland			1.09	(0.97 - 1.23)	1.06	(0.95 - 1.19)	1.06	(0.95 - 1.19
	Jämtland			1.40	(1.22 - 1.61)	1.35	(1.19 - 1.54)	1.35	(1.19 - 1.54
	Jönköping			0.99	(0.88 - 1.11)	0.96	(0.86 - 1.07)	0.96	(0.86 - 1.07
	Kalmar			1.29	(1.14 - 1.46)	1.23	(1.10 - 1.39)	1.23	(1.10 - 1.38
	Kronoberg			0.80	(0.70 - 0.92)	0.78	(0.68 - 0.89)	0.78	(0.68 - 0.88

	Norrbotten		1.29	(1.14 - 1.45)	1.24	(1.10 - 1.38)	1.23	(1.10 - 1.38)
	Skåne		0.99	(0.89 - 1.10)	0.96	(0.87 - 1.06)	0.96	(0.87 - 1.06)
	Stockholm		1.04	(0.94 - 1.15)	1.01	(0.92 - 1.11)	1.01	(0.92 - 1.11)
	Södermanland		1.27	(1.13 - 1.43)	1.23	(1.10 - 1.37)	1.23	(1.10 - 1.37)
	Uppsala		0.88	(0.78 - 0.99)	0.84	(0.75 - 0.95)	0.84	(0.75 - 0.94)
	Värmland		0.97	(0.86 - 1.10)	0.94	(0.84 - 1.06)	0.94	(0.84 - 1.06)
	Västerbotten		1.54	(1.37 - 1.73)	1.47	(1.31 - 1.64)	1.47	(1.31 - 1.64)
	Västernorrland		1.41	(1.25 - 1.59)	1.33	(1.19 - 1.49)	1.33	(1.19 - 1.49)
	Västmanland		1.23	(1.09 - 1.38)	1.17	(1.04 - 1.31)	1.17	(1.04 - 1.31)
	Västra Götaland		1.12	(1.01 - 1.24)	1.09	(0.99 - 1.20)	1.09	(0.99 - 1.20)
	Örebro		0.87	(0.77 - 0.99)	0.86	(0.76 - 0.96)	0.86	(0.76 - 0.96)
	Östergötland		0.90	(0.80 - 1.01)	0.88	(0.79 - 0.98)	0.88	(0.79 - 0.98)
Year	1998		1	ref	1	ref	1	ref
	1999		0.93	(0.88 - 0.99)	0.94	(0.90 - 0.99)	0.94	(0.90 - 0.99)
	2000		0.93	(0.88 - 0.98)	0.94	(0.89 - 0.98)	0.94	(0.89 - 0.98)
	2001		0.85	(0.81 - 0.90)	0.86	(0.90 - 0.97)	0.86	(0.90 - 0.97)
	2002		0.86	(0.81 - 0.91)	0.86	(0.82 - 0.91)	0.86	(0.82 - 0.91)
	2003		0.96	(0.91 - 1.01)	0.96	(0.82 - 0.91)	0.96	(0.82 - 0.90)
	2004		0.90	(0.86 - 0.95)	0.92	(0.91 - 1.00)	0.91	(0.91 - 1.00)
	2005		0.97	(0.92 - 1.02)	0.98	(0.87 - 0.96)	0.98	(0.87 - 0.96)
	2006		0.94	(0.89 - 0.99)	0.96	(0.93 - 1.03)	0.96	(0.93 - 1.02)
Observations (N)		693,007	693,007		838,756		838,756	

* Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

⁺ Missing information imputed using multiple imputation. Sequential imputation in the order: region, maternal education, maternal smoking and pregnancy BMI. Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

[‡] Missing information imputed using multiple imputation. Sequential imputation in the order: pregnancy BMI, maternal smoking, maternal education and region. Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

Table F: Upper respiratory tract infections

Variables		Crude	e IRR (95% CI)	Adjuste	d IRR* (95% CI)	MI-mode	el 1 IRR†(95% CI)	MI-mode	el 2 IRR‡ (95% CI)
Pregnancy BMI	Underweight	1.02	(0.93 - 1.12)	0.97	(0.88 - 1.06)	0.98	(0.89 - 1.07)	0.98	(0.90 - 1.08)
	Normal	1	ref	1	ref	1	ref	1	ref
	Overweight	1.12	(1.09 - 1.16)	1.08	(1.05 - 1.11)	1.08	(1.04 - 1.11)	1.08	(1.05 - 1.12)
	Obese	1.28	(1.23 - 1.34)	1.19	(1.14 - 1.24)	1.19	(1.15 - 1.25)	1.20	(1.15 - 1.25)
Maternal age	≤19			1.04	(0.93 - 1.16)	1.04	(0.95 - 1.14)	1.04	(0.95 - 1.14)
	20-24			1	ref	1	ref	1	ref
	25-29			0.93	(0.89 - 0.97)	0.91	(0.87 - 0.95)	0.91	(0.87 - 0.95)
	30-34			0.88	(0.84 - 0.92)	0.86	(0.83 - 0.90)	0.86	(0.83 - 0.90)
	≥35			0.85	(0.80 - 0.90)	0.83	(0.79 - 0.88)	0.83	(0.79 - 0.88)
Parity	1			1	ref	1	ref	1	ref
	2			1.15	(1.12 - 1.19)	1.15	(1.12 - 1.19)	1.15	(1.12 - 1.19)
	3			1.14	(1.09 - 1.19)	1.15	(1.11 - 1.20)	1.15	(1.11 - 1.20)
	≥4			1.19	(1.12 - 1.26)	1.24	(1.17 - 1.31)	1.24	(1.17 - 1.30)
Maternal	No smoking			1	ref	1	ref	1	ref
smoking	Smoking			1.05	(1.01 - 1.10)	1.07	(1.02 - 1.11)	1.06	(1.02 - 1.11)
Maternal	≤9			1.21	(1.14 - 1.28)	1.19	(1.13 - 1.25)	1.19	(1.13 - 1.25)
education	10-12			1.05	(1.00 - 1.09)	1.04	(1.00 - 1.08)	1.04	(1.00 - 1.08)
	13-14			1	ref	1	ref	1	ref
	≥16			0.91	(0.87 - 0.96)	0.91	(0.87 - 0.95)	0.90	(0.87 - 0.94)
Region	Blekinge			1	ref	1	ref	1	ref
	Dalarna			0.96	(0.85 - 1.08)	0.96	(0.86 - 1.07)	0.96	(0.86 - 1.07)
	Gotland			1.52	(1.29 - 1.80)	1.51	(1.29 - 1.76)	1.51	(1.29 - 1.76)
	Gävleborg			0.86	(0.76 - 0.97)	0.84	(0.75 - 0.94)	0.84	(0.75 - 0.94)
	Halland			1.00	(0.89 - 1.12)	0.99	(0.89 - 1.11)	0.99	(0.89 - 1.10)
	Jämtland			1.43	(1.25 - 1.63)	1.43	(1.27 - 1.62)	1.43	(1.27 - 1.62)
	Jönköping			0.51	(0.45 - 0.58)	0.51	(0.45 - 0.57)	0.51	(0.45 - 0.57)
	Kalmar			1.04	(0.92 - 1.18)	1.03	(0.92 - 1.16)	1.03	(0.92 - 1.16)
	Kronoberg			0.51	(0.44 - 0.58)	0.49	(0.43 - 0.56)	0.49	(0.43 - 0.56)

	Norrbotten		0.68	(0.60 - 0.78)	0.70	(0.62 - 0.79)	0.70	(0.62 - 0.79)
	Skåne		0.75	(0.68 - 0.83)	0.76	(0.69 - 0.83)	0.76	(0.69 - 0.83)
	Stockholm		0.57	(0.52 - 0.63)	0.57	(0.52 - 0.62)	0.57	(0.52 - 0.62)
	Södermanland		0.91	(0.80 - 1.02)	0.90	(0.80 - 1.01)	0.90	(0.80 - 1.01)
	Uppsala		0.73	(0.65 - 0.82)	0.72	(0.65 - 0.81)	0.72	(0.65 - 0.81)
	Värmland		0.87	(0.77 - 0.98)	0.85	(0.76 - 0.95)	0.85	(0.76 - 0.95)
	Västerbotten		0.88	(0.78 - 1.00)	0.86	(0.77 - 0.97)	0.86	(0.77 - 0.97)
	Västernorrland		0.98	(0.87 - 1.11)	1.00	(0.90 - 1.12)	1.00	(0.90 - 1.12)
	Västmanland		0.94	(0.83 - 1.06)	0.94	(0.84 - 1.05)	0.94	(0.84 - 1.05)
	Västra							
	Götaland		0.82	(0.75 - 0.91)	0.81	(0.74 - 0.89)	0.81	(0.74 - 0.89)
	Örebro		1.18	(1.05 - 1.32)	1.17	(1.05 - 1.30)	1.17	(1.05 - 1.30)
	Östergötland		0.77	(0.69 - 0.86)	0.76	(0.68 - 0.85)	0.76	(0.68 - 0.84)
Year	1998		1	ref	1	ref	1	ref
	1999		0.88	(0.83 - 0.93)	0.91	(0.87 - 0.96)	0.91	(0.87 - 0.96)
	2000		0.82	(0.78 - 0.87)	0.82	(0.78 - 0.87)	0.82	(0.78 - 0.87)
	2001		0.76	(0.72 - 0.81)	0.78	(0.87 - 0.95)	0.78	(0.87 - 0.95)
	2002		0.76	(0.72 - 0.80)	0.79	(0.74 - 0.82)	0.79	(0.74 - 0.82)
	2003		0.71	(0.67 - 0.75)	0.73	(0.75 - 0.83)	0.73	(0.75 - 0.83)
	2004		0.68	(0.64 - 0.72)	0.70	(0.69 - 0.76)	0.70	(0.69 - 0.76)
	2005		0.71	(0.67 - 0.76)	0.73	(0.66 - 0.73)	0.73	(0.66 - 0.73)
	2006		0.71	(0.67 - 0.75)	0.74	(0.69 - 0.77)	0.74	(0.69 - 0.77)
Observations (N)		693,007	693,007		838,756		838,756	

* Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

⁺ Missing information imputed using multiple imputation. Sequential imputation in the order: region, maternal education, maternal smoking and pregnancy BMI. Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

[‡] Missing information imputed using multiple imputation. Sequential imputation in the order: pregnancy BMI, maternal smoking, maternal education and region. Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

Table G: Genitourinary infections

Variables		Crude	e IRR (95% CI)	Adjuste	ed IRR* (95% CI)	MI-mod	MI-model 1 IRR†(95% CI)		MI-model 2 IRR‡ (95% CI)	
Pregnancy BMI	Underweight	1.14	(0.98 - 1.33)	1.13	(0.97 - 1.32)	1.13	(0.98 - 1.30)	1.14	(0.99 - 1.32)	
	Normal	1	ref	1	ref	1	ref	1	ref	
	Overweight	1.12	(1.06 - 1.18)	1.12	(1.05 - 1.18)	1.11	(1.05 - 1.18)	1.12	(1.05 - 1.18)	
	Obese	1.28	(1.18 - 1.37)	1.27	(1.17 - 1.37)	1.25	(1.16 - 1.35)	1.25	(1.16 - 1.35)	
Maternal age	≤19			1.00	(0.81 - 1.23)	1.03	(0.87 - 1.22)	1.03	(0.87 - 1.22)	
	20-24			1	ref	1	ref	1	ref	
	25-29			1.05	(0.97 - 1.14)	1.01	(0.94 - 1.09)	1.01	(0.94 - 1.09)	
	30-34			0.98	(0.90 - 1.07)	0.94	(0.87 - 1.02)	0.94	(0.87 - 1.02)	
	≥35			0.94	(0.86 - 1.04)	0.94	(0.86 - 1.03)	0.94	(0.86 - 1.03)	
Parity	1			1	ref	1	ref	1	ref	
	2			0.99	(0.94 - 1.05)	1.00	(0.95 - 1.05)	1.00	(0.95 - 1.05)	
	3			0.91	(0.84 - 0.99)	0.93	(0.86 - 1.00)	0.93	(0.86 - 1.00)	
	≥4			1.00	(0.90 - 1.12)	1.01	(0.91 - 1.11)	1.01	(0.92 - 1.12)	
Maternal	No smoking			1	ref	1	ref	1	ref	
smoking	Smoking			0.94	(0.86 - 1.02)	0.92	(0.85 - 1.00)	0.93	(0.85 - 1.01)	
Maternal	≤9			1.09	(0.99 - 1.20)	1.11	(1.01 - 1.21)	1.09	(1.00 - 1.20)	
education	10-12			1.02	(0.95 - 1.10)	1.03	(0.97 - 1.10)	1.03	(0.96 - 1.10)	
	13-14			1	ref	1	ref	1	ref	
	≥16			0.96	(0.89 - 1.04)	0.96	(0.89 - 1.04)	0.96	(0.89 - 1.03)	
Region	Blekinge			1	ref	1	ref	1	ref	
	Dalarna			0.98	(0.80 - 1.21)	1.00	(0.82 - 1.22)	1.00	(0.82 - 1.22)	
	Gotland			0.68	(0.47 - 0.99)	0.73	(0.52 - 1.02)	0.73	(0.52 - 1.02)	
	Gävleborg			0.59	(0.47 - 0.74)	0.61	(0.49 - 0.7 <mark>5</mark>)	0.61	(0.49 - 0.75)	
	Halland			1.00	(0.81 - 1.23)	0.97	(0.79 - 1.17)	0.97	(0.80 - 1.17)	
	Jämtland			0.62	(0.46 - 0.82)	0.70	(0.54 - 0.90)	0.70	(0.54 - 0.90)	
	Jönköping			0.66	(0.54 - 0.81)	0.65	(0.53 - 0.79)	0.65	(0.53 - 0.79)	
	Kalmar			0.72	(0.57 - 0.91)	0.74	(0.59 - 0.92)	0.74	(0.59 - 0.92)	
	Kronoberg			0.62	(0.49 - 0.80)	0.63	(0.50 - 0.80)	0.63	(0.50 - 0.80)	

	Norrbotten		0.78	(0.62 - 0.97)	0.76	(0.61 - 0.94)	0.76	(0.62 - 0.9
	Skåne		0.92	(0.77 - 1.10)	0.93	(0.79 - 1.10)	0.93	(0.79 - 1.1
	Stockholm		0.67	(0.56 - 0.80)	0.65	(0.55 - 0.77)	0.65	(0.55 - 0.
	Södermanland		0.64	(0.51 - 0.81)	0.64	(0.52 - 0.79)	0.64	(0.52 - 0.
	Uppsala		0.72	(0.58 - 0.89)	0.74	(0.61 - 0.90)	0.74	(0.61 - 0.
	Värmland		0.60	(0.48 - 0.76)	0.64	(0.51 - 0.79)	0.64	(0.51 - 0.
	Västerbotten		0.81	(0.65 - 1.01)	0.78	(0.64 - 0.96)	0.78	(0.64 - 0.
	Västernorrland		0.65	(0.51 - 0.83)	0.70	(0.56 - 0.86)	0.70	(0.56 - 0.
	Västmanland		0.83	(0.67 - 1.03)	0.82	(0.67 - 1.01)	0.82	(0.67 - 1.
	Västra							
	Götaland		1.20	(1.01 - 1.42)	1.18	(1.00 - 1.39)	1.18	(1.00 - 1.
	Örebro		0.76	(0.61 - 0.94)	0.80	(0.66 - 0.98)	0.80	(0.66 - 0.
	Östergötland		0.59	(0.48 - 0.73)	0.59	(0.49 - 0.72)	0.59	(0.49 - 0.
Year	1998		1	ref	1	ref	1	ref
	1999		0.95	(0.85 - 1.05)	0.97	(0.88 - 1.06)	0.97	(0.88 - 1.
	2000		0.96	(0.86 - 1.07)	0.94	(0.86 - 1.03)	0.94	(0.86 - 1.
	2001		0.93	(0.84 - 1.03)	0.90	(0.94 - 1.09)	0.90	(0.94 - 1.
	2002		1.02	(0.92 - 1.13)	0.97	(0.82 - 0.99)	0.97	(0.82 - 0.
	2003		1.00	(0.90 - 1.11)	0.97	(0.89 - 1.07)	0.97	(0.89 - 1.
	2004		0.98	(0.89 - 1.09)	0.96	。 (0.88 - 1.06)	0.96	(0.88 - 1.
	2005		0.90	(0.81 - 1.00)	0.90	(0.88 - 1.05)	0.90	(0.88 - 1.
	2006		0.89	(0.80 - 0.98)	0.90	(0.82 - 0.98)	0.90	(0.82 - 0.
Observations (N)		693,007	693,007		838,756		838,756	

* Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

⁺ Missing information imputed using multiple imputation. Sequential imputation in the order: region, maternal education, maternal smoking and pregnancy BMI. Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

+ Missing information imputed using multiple imputation. Sequential imputation in the order: pregnancy BMI, maternal smoking, maternal education and region. Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

Table H: Perinatal infections

Variables		Crude	e IRR (95% CI)	Adjuste	d IRR* (95% CI)	MI-mode	el 1 IRR†(95% CI)	MI-mode	el 2 IRR‡ (95% CI)
Pregnancy BMI	Underweight	0.84	(0.66 - 1.06)	0.84	(0.67 - 1.06)	0.89	(0.71 - 1.11)	0.87	(0.68 - 1.11)
	Normal	1	ref	1	ref	1	ref	1	ref
	Overweight	1.31	(1.22 - 1.40)	1.34	(1.25 - 1.44)	1.31	(1.22 - 1.40)	1.30	(1.21 - 1.39)
	Obese	1.63	(1.49 - 1.78)	1.72	(1.57 - 1.88)	1.64	(1.50 - 1.79)	1.65	(1.50 - 1.81)
Maternal age	≤19			1.03	(0.81 - 1.30)	0.93	(0.75 - 1.15)	0.93	(0.75 - 1.15)
	20-24			1	ref	1	ref	1	ref
	25-29			1.12	(1.01 - 1.23)	1.14	(1.04 - 1.25)	1.14	(1.04 - 1.24)
	30-34			1.24	(1.12 - 1.38)	1.26	(1.14 - 1.38)	1.26	(1.14 - 1.38)
	≥35			1.47	(1.30 - 1.66)	1.49	(1.34 - 1.66)	1.49	(1.33 - 1.66)
Parity	1			1	ref	1	ref	1	ref
	2			0.44	(0.41 - 0.48)	0.45	(0.42 - 0.48)	0.45	(0.42 - 0.48)
	3			0.39	(0.35 - 0.44)	0.40	(0.36 - 0.44)	0.40	(0.36 - 0.44)
	≥4			0.37	(0.31 - 0.43)	0.38	(0.33 - 0.44)	0.38	(0.33 - 0.44)
Maternal	No smoking			1	ref	1	ref	1	ref
smoking	Smoking			1.11	(1.00 - 1.22)	1.10	(1.00 - 1.20)	1.09	(1.00 - 1.20)
Maternal	≤9			1.01	(0.89 - 1.15)	1.03	(0.92 - 1.16)	1.03	(0.91 - 1.16)
education	10-12			0.99	(0.91 - 1.09)	1.02	(0.94 - 1.11)	1.02	(0.94 - 1.11)
	13-14			1	ref	1	ref	1	ref
	≥16			0.93	(0.84 - 1.03)	0.94	(0.86 - 1.03)	0.94	(0.85 - 1.03)
Region	Blekinge			1	ref	1	ref	1	ref
	Dalarna			0.84	(0.59 - 1.18)	0.91	(0.66 - 1.26)	0.91	(0.66 - 1.26)
	Gotland			1.44	(0.91 - 2.28)	1.55	(1.01 - 2.37)	1.55	(1.01 - 2.38)
	Gävleborg			0.92	(0.66 - 1.30)	0.95	(0.69 - 1.3 <mark>0</mark>)	0.94	(0.68 - 1.30)
	Halland			1.59	(1.17 - 2.15)	1.63	(1.22 - 2.18)	1.63	(1.22 - 2.18)
	Jämtland			1.88	(1.33 - 2.65)	1.95	(1.41 - 2.70)	1.95	(1.41 - 2.69)
	Jönköping			0.30	(0.20 - 0.45)	0.30	(0.21 - 0.45)	0.30	(0.20 - 0.45)
	Kalmar			2.35	(1.74 - 3.18)	2.43	(1.82 - 3.25)	2.43	(1.82 - 3.25)
	Kronoberg			1.54	(1.12 - 2.14)	1.63	(1.19 - 2.22)	1.63	(1.19 - 2.22)

	Norrbotten		2.00	(1.48 - 2.71)	1.96	(1.46 - 2.62)	1.95	(1.46 - 2.61
	Skåne		1.16	(0.88 - 1.53)	1.17	(0.89 - 1.52)	1.16	(0.89 - 1.52
	Stockholm		0.43	(0.33 - 0.58)	0.43	(0.33 - 0.56)	0.43	(0.33 - 0.56
	Södermanland		1.41	(1.03 - 1.93)	1.45	(1.08 - 1.96)	1.45	(1.08 - 1.96
	Uppsala		0.41	(0.28 - 0.61)	0.40	(0.27 - 0.57)	0.40	(0.27 - 0.57
	Värmland		0.47	(0.31 - 0.70)	0.49	(0.34 - 0.71)	0.49	(0.33 - 0.71
	Västerbotten		1.45	(1.06 - 2.00)	1.49	(1.11 - 2.02)	1.49	(1.10 - 2.01
	Västernorrland		1.56	(1.13 - 2.16)	1.57	(1.16 - 2.11)	1.56	(1.16 - 2.11
	Västmanland		0.87	(0.62 - 1.22)	0.88	(0.64 - 1.23)	0.88	(0.64 - 1.22
	Västra							
	Götaland		3.24	(2.48 - 4.23)	3.19	(2.47 - 4.12)	3.18	(2.46 - 4.12
	Örebro		1.70	(1.25 - 2.32)	1.58	(1.18 - 2.12)	1.58	(1.18 - 2.12
	Östergötland		0.32	(0.22 - 0.46)	0.33	(0.23 - 0.47)	0.33	(0.23 - 0.47
Year	1998		1	ref	1	ref	1	ref
	1999		0.83	(0.73 - 0.94)	0.82	(0.73 - 0.92)	0.82	(0.73 - 0.92
	2000		0.84	(0.74 - 0.95)	0.86	(0.76 - 0.96)	0.86	(0.76 - 0.96
	2001		0.77	(0.68 - 0.88)	0.75	(1.04 - 1.25)	0.75	(1.04 - 1.24
	2002		0.82	(0.72 - 0.93)	0.82	(0.67 - 0.84)	0.82	(0.67 - 0.84
	2003		0.70	(0.62 - 0.80)	0.70	(0.73 - 0.91)	0.70	(0.73 - 0.91
	2004		0.68	(0.60 - 0.77)	0.67	。 (0.62 - 0.78)	0.67	(0.62 - 0.78
	2005		0.69	(0.61 - 0.79)	0.66	(0.59 - 0.75)	0.66	(0.59 - 0.75
	2006		0.75	(0.66 - 0.85)	0.72	(0.59 - 0.74)	0.72	(0.59 - 0.74
Observations (N)		693,007	693,007		838,756		838,756	

* Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

⁺ Missing information imputed using multiple imputation. Sequential imputation in the order: region, maternal education, maternal smoking and pregnancy BMI. Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

[‡] Missing information imputed using multiple imputation. Sequential imputation in the order: pregnancy BMI, maternal smoking, maternal education and region. Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

Table I: Skin & soft tissue infections

Variables		Crude	e IRR (95% CI)	Adjuste	d IRR* (95% CI)	MI-mode	el 1 IRR†(95% CI)	MI-mode	el 2 IRR‡ (95% CI
Pregnancy BMI	Underweight	0.90	(0.70 - 1.15)	0.90	(0.70 - 1.15)	0.95	(0.75 - 1.21)	0.93	(0.74 - 1.18)
	Normal	1	ref	1	ref	1	ref	1	ref
	Overweight	0.97	(0.89 - 1.06)	0.94	(0.86 - 1.02)	0.96	(0.88 - 1.06)	0.96	(0.88 - 1.05)
	Obese	1.09	(0.97 - 1.23)	1.02	(0.91 - 1.15)	1.04	(0.93 - 1.16)	1.03	(0.91 - 1.15)
Maternal age	≤19			0.97	(0.69 - 1.35)	1.03	(0.79 - 1.34)	1.03	(0.79 - 1.34)
	20-24			1	ref	1	ref	1	ref
	25-29			1.05	(0.93 - 1.19)	0.96	(0.86 - 1.08)	0.96	(0.86 - 1.08)
	30-34			1.02	(0.89 - 1.16)	0.94	(0.83 - 1.05)	0.94	(0.83 - 1.05)
	≥35			0.92	(0.79 - 1.07)	0.88	(0.77 - 1.00)	0.88	(0.77 - 1.00)
Parity	1			1	ref	1	ref	1	ref
	2			1.23	(1.13 - 1.34)	1.22	(1.13 - 1.32)	1.22	(1.13 - 1.32)
	3			1.28	(1.14 - 1.44)	1.29	(1.16 - 1.43)	1.29	(1.16 - 1.43)
	≥4			1.58	(1.35 - 1.85)	1.56	(1.36 - 1.80)	1.57	(1.36 - 1.80)
Maternal	No smoking			1	ref	1	ref	1	ref
smoking	Smoking			1.02	(0.91 - 1.16)	1.05	(0.94 - 1.18)	1.05	(0.94 - 1.18)
Maternal	≤9			1.14	(0.99 - 1.33)	1.15	(1.00 - 1.31)	1.15	(1.01 - 1.32)
education	10-12			1.04	(0.93 - 1.17)	1.05	(0.95 - 1.16)	1.06	(0.96 - 1.18)
	13-14			1	ref	1	ref	1	ref
	≥16			0.95	(0.84 - 1.07)	0.96	(0.86 - 1.07)	0.97	(0.86 - 1.08)
Region	Blekinge			1	ref	1	ref	1	ref
	Dalarna			1.05	(0.75 - 1.48)	1.07	(0.77 - 1.48)	1.07	(0.78 - 1.48)
	Gotland			0.75	(0.41 - 1.37)	0.84	(0.49 - 1.45)	0.84	(0.49 - 1.45)
	Gävleborg			0.84	(0.58 - 1.20)	0.82	(0.58 - 1.15)	0.82	(0.58 - 1.15)
	Halland			0.97	(0.69 - 1.37)	1.01	(0.73 - 1.39)	1.01	(0.73 - 1.39)
	Jämtland			1.34	(0.91 - 1.99)	1.22	(0.84 - 1.78)	1.22	(0.84 - 1.78)
	Jönköping			0.78	(0.55 - 1.09)	0.77	(0.56 - 1.06)	0.77	(0.56 - 1.06)
	Kalmar			1.14	(0.80 - 1.62)	1.11	(0.79 - 1.55)	1.10	(0.79 - 1.54)
	Kronoberg			0.88	(0.60 - 1.29)	0.90	(0.63 - 1.30)	0.90	(0.63 - 1.30)

	Norrbotten		0.94	(0.66 - 1.35)	0.95	(0.68 - 1.33)	0.95	(0.68 - 1.33)
	Skåne		1.13	(0.84 - 1.51)	1.14	(0.86 - 1.50)	1.14	(0.86 - 1.50)
	Stockholm		1.03	(0.77 - 1.36)	1.03	(0.79 - 1.35)	1.03	(0.79 - 1.35)
	Södermanland		0.83	(0.58 - 1.19)	0.83	(0.59 - 1.16)	0.83	(0.59 - 1.16)
	Uppsala		0.84	(0.59 - 1.18)	0.90	(0.65 - 1.23)	0.90	(0.65 - 1.23)
	Värmland		0.79	(0.55 - 1.14)	0.75	(0.53 - 1.06)	0.75	(0.53 - 1.06)
	Västerbotten		0.77	(0.53 - 1.12)	0.76	(0.54 - 1.08)	0.76	(0.54 - 1.08)
	Västernorrland		1.34	(0.94 - 1.89)	1.37	(0.99 - 1.88)	1.37	(0.99 - 1.88)
	Västmanland		1.07	(0.76 - 1.51)	1.04	(0.75 - 1.45)	1.04	(0.75 - 1.45)
	Västra							
	Götaland		1.16	(0.87 - 1.54)	1.18	(0.90 - 1.54)	1.18	(0.90 - 1.54)
	Örebro		0.81	(0.57 - 1.17)	0.81	(0.58 - 1.14)	0.81	(0.58 - 1.14)
	Östergötland		0.78	(0.56 - 1.08)	0.81	(0.59 - 1.11)	0.81	(0.59 - 1.11)
Year	1998		1	ref	1	ref	1	ref
	1999		1.05	(0.88 - 1.24)	1.06	(0.91 - 1.23)	1.06	(0.91 - 1.23)
	2000		1.01	(0.85 - 1.20)	0.98	(0.85 - 1.14)	0.98	(0.85 - 1.14)
	2001		1.19	(1.01 - 1.40)	1.18	(0.86 - 1.08)	1.18	(0.86 - 1.08)
	2002		1.19	(1.02 - 1.40)	1.15	(1.02 - 1.36)	1.15	(1.02 - 1.36)
	2003		1.33	(1.14 - 1.56)	1.29	(0.99 - 1.33)	1.29	(0.99 - 1.33)
	2004		1.17	(1.00 - 1.38)	1.13	(1.12 - 1.49)	1.13	(1.12 - 1.49)
	2005		1.18	(1.00 - 1.39)	1.13	(0.98 - 1.31)	1.13	(0.98 - 1.31)
	2006		1.25	(1.07 - 1.46)	1.23	(0.98 - 1.30)	1.23	(0.98 - 1.30)
Observations (N)		693,007	693,007	-	838,756		838,756	-

* Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

⁺ Missing information imputed using multiple imputation. Sequential imputation in the order: region, maternal education, maternal smoking and pregnancy BMI. Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

[‡] Missing information imputed using multiple imputation. Sequential imputation in the order: pregnancy BMI, maternal smoking, maternal education and region. Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

Table J: Neurological and eye infections

Variables		Crude	e IRR (95% CI)	Adjuste	d IRR* (95% CI)	MI-mode	el 1 IRR†(95% CI)	MI-mode	el 2 IRR‡ (95% CI
Pregnancy BMI	Underweight	0.90	(0.62 - 1.31)	0.87	(0.59 - 1.27)	0.85	(0.59 - 1.22)	0.84	(0.59 - 1.19)
	Normal	1	ref	1	ref	1	ref	1	ref
	Overweight	0.91	(0.79 - 1.04)	0.93	(0.81 - 1.06)	0.95	(0.83 - 1.08)	0.95	(0.83 - 1.08)
	Obese	0.96	(0.80 - 1.15)	1.02	(0.85 - 1.23)	1.05	(0.87 - 1.26)	1.02	(0.85 - 1.24)
Maternal age	≤19			0.98	(0.59 - 1.61)	1.11	(0.75 - 1.66)	1.12	(0.75 - 1.67)
	20-24			1	ref	1	ref	1	ref
	25-29			0.78	(0.65 - 0.94)	0.78	(0.66 - 0.92)	0.78	(0.66 - 0.92)
	30-34			0.75	(0.62 - 0.91)	0.77	(0.65 - 0.92)	0.77	(0.65 - 0.92)
	≥35			0.79	(0.64 - 0.99)	0.80	(0.65 - 0.97)	0.80	(0.65 - 0.97)
Parity	1			1	ref	1	ref	1	ref
	2			1.17	(1.03 - 1.33)	1.15	(1.03 - 1.30)	1.15	(1.03 - 1.30)
	3			1.14	(0.95 - 1.37)	1.23	(1.04 - 1.44)	1.23	(1.04 - 1.44)
	≥4			1.27	(0.98 - 1.65)	1.28	(1.02 - 1.61)	1.29	(1.02 - 1.61)
Maternal	No smoking			1	ref	1	ref	1	ref
smoking	Smoking			1.13	(0.94 - 1.36)	1.15	(0.96 - 1.38)	1.16	(0.98 - 1.38)
Maternal	≤9			0.77	(0.61 - 0.97)	0.85	(0.68 - 1.05)	0.84	(0.68 - 1.04)
education	10-12			0.84	(0.71 - 0.99)	0.89	(0.76 - 1.03)	0.89	(0.77 - 1.03)
	13-14			1	ref	1	ref	1	ref
	≥16			0.91	(0.76 - 1.09)	0.96	(0.81 - 1.13)	0.96	(0.81 - 1.13)
Region	Blekinge			1	ref	1	ref	1	ref
	Dalarna			0.99	(0.57 - 1.71)	1.08	(0.64 - 1.82)	1.08	(0.64 - 1.82)
	Gotland			1.14	(0.49 - 2.64)	1.16	(0.52 - 2.60)	1.16	(0.52 - 2.60)
	Gävleborg			0.78	(0.44 - 1.39)	0.75	(0.43 - 1.31)	0.75	(0.43 - 1.31)
	Halland			1.86	(1.13 - 3.06)	1.90	(1.17 - 3.07)	1.89	(1.17 - 3.07)
	Jämtland			0.89	(0.45 - 1.75)	0.78	(0.40 - 1.51)	0.78	(0.40 - 1.51)
	Jönköping			0.86	(0.51 - 1.45)	1.04	(0.63 - 1.71)	1.04	(0.63 - 1.71)
	Kalmar			0.82	(0.46 - 1.47)	0.80	(0.45 - 1.42)	0.80	(0.45 - 1.42)
	Kronoberg			0.66	(0.35 - 1.24)	0.68	(0.37 - 1.25)	0.68	(0.37 - 1.25)

	Norrbotten	0.32	(0.16 - 0.66)	0.43	(0.23 - 0.80)	0.43	(0.23 - 0.80)
	Skåne	1.18	(0.75 - 1.86)	1.26	(0.81 - 1.95)	1.26	(0.81 - 1.95)
	Stockholm	1.45	(0.93 - 2.26)	1.51	(0.98 - 2.32)	1.51	(0.98 - 2.32)
	Södermanland	0.84	(0.48 - 1.48)	0.87	(0.51 - 1.48)	0.87	(0.51 - 1.48)
	Uppsala	0.86	(0.50 - 1.48)	0.88	(0.52 - 1.47)	0.88	(0.52 - 1.46)
	Värmland	0.48	(0.26 - 0.90)	0.58	(0.32 - 1.03)	0.58	(0.32 - 1.03)
	Västerbotten	0.89	(0.51 - 1.57)	0.97	(0.57 - 1.65)	0.97	(0.57 - 1.66)
	Västernorrland	0.57	(0.30 - 1.09)	0.74	(0.42 - 1.29)	0.74	(0.42 - 1.29)
	Västmanland	1.04	(0.60 - 1.79)	1.09	(0.64 - 1.83)	1.09	(0.64 - 1.84)
	Västra						
	Götaland	1.38	(0.88 - 2.16)	1.46	(0.94 - 2.24)	1.46	(0.94 - 2.24)
	Örebro	0.72	(0.40 - 1.28)	0.77	(0.45 - 1.32)	0.77	(0.45 - 1.32)
	Östergötland	0.55	(0.32 - 0.94)	0.56	(0.33 - 0.95)	0.56	(0.33 - 0.94)
Year	1998	1	ref	1	ref	1	ref
	1999	0.99	(0.77 - 1.26)	1.00	(0.80 - 1.24)	1.00	(0.80 - 1.24)
	2000	1.00	(0.78 - 1.27)	0.95	(0.77 - 1.18)	0.95	(0.77 - 1.18)
	2001	0.97	(0.76 - 1.23)	0.95	(0.66 - 0.92)	0.95	(0.66 - 0.92)
	2002	0.91	(0.71 - 1.16)	0.89	(0.77 - 1.18)	0.89	(0.77 - 1.18)
	2003	0.89	(0.70 - 1.13)	0.87	(0.72 - 1.10)	0.87	(0.72 - 1.11)
	2004	0.86	(0.68 - 1.10)	0.86	(0.70 - 1.08)	0.86	(0.70 - 1.08)
	2005	0.91	(0.71 - 1.15)	0.88	(0.69 - 1.06)	0.88	(0.69 - 1.06)
	2006	0.93	(0.74 - 1.18)	0.87	(0.71 - 1.09)	0.87	(0.71 - 1.09)
Observations (N)	693,007	693,007	,	838,756		838,756	

* Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

⁺ Missing information imputed using multiple imputation. Sequential imputation in the order: region, maternal education, maternal smoking and pregnancy BMI. Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

+ Missing information imputed using multiple imputation. Sequential imputation in the order: pregnancy BMI, maternal smoking, maternal education and region. Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

Table K: Digestive tract infections

Variables		Crude	e IRR (95% CI)	Adjuste	ed IRR* (95% CI)	MI-mod	el 1 IRR†(95% CI)	MI-mode	el 2 IRR‡ (95% C
Pregnancy BMI	Underweight	1.32	(0.93 - 1.89)	1.32	(0.92 - 1.88)	1.17	(0.82 - 1.65)	1.18	(0.84 - 1.67)
	Normal	1	ref	1	ref	1	ref	1	ref
	Overweight	0.98	(0.86 - 1.13)	0.97	(0.84 - 1.11)	0.97	(0.85 - 1.12)	0.96	(0.83 - 1.11)
	Obese	1.04	(0.85 - 1.26)	0.99	(0.82 - 1.21)	1.02	(0.85 - 1.23)	1.02	(0.85 - 1.23)
Maternal age	≤19			0.88	(0.52 - 1.50)	0.81	(0.53 - 1.26)	0.81	(0.52 - 1.25)
	20-24			1	ref	1	ref	1	ref
	25-29			0.79	(0.65 - 0.96)	0.76	(0.64 - 0.91)	0.76	(0.64 - 0.91)
	30-34			0.87	(0.70 - 1.07)	0.82	(0.68 - 0.99)	0.82	(0.69 - 0.99)
	≥35			0.72	(0.56 - 0.91)	0.67	(0.54 - 0.83)	0.67	(0.54 - 0.83)
Parity	1			1	ref	1	ref	1	ref
	2			1.22	(1.06 - 1.40)	1.23	(1.08 - 1.39)	1.23	(1.08 - 1.39)
	3			1.53	(1.27 - 1.85)	1.47	(1.24 - 1.74)	1.47	(1.24 - 1.74)
	≥4			1.89	(1.47 - 2.43)	1.90	(1.52 - 2.38)	1.90	(1.52 - 2.38)
Maternal	No smoking			1	ref	1	ref	1	ref
smoking	Smoking			1.10	(0.91 - 1.34)	1.14	(0.95 - 1.37)	1.14	(0.95 - 1.36)
Maternal	≤9			1.22	(0.95 - 1.55)	1.32	(1.05 - 1.65)	1.33	(1.06 - 1.67)
education	10-12			1.05	(0.87 - 1.26)	1.11	(0.94 - 1.32)	1.11	(0.94 - 1.32)
	13-14			1	ref	1	ref	1	ref
	≥16			1.23	(1.01 - 1.50)	1.22	(1.01 - 1.46)	1.22	(1.01 - 1.47)
Region	Blekinge			1	ref	1	ref	1	ref
	Dalarna			1.05	(0.58 - 1.93)	0.99	(0.58 - 1.70)	0.99	(0.58 - 1.71)
	Gotland			1.82	(0.80 - 4.12)	1.50	(0.69 - 3.2 <mark>4</mark>)	1.50	(0.70 - 3.24)
	Gävleborg			0.89	(0.47 - 1.65)	0.79	(0.45 - 1.3 <mark>9</mark>)	0.79	(0.45 - 1.39)
	Halland			1.31	(0.74 - 2.32)	1.11	(0.66 - 1.87)	1.11	(0.66 - 1.88)
	Jämtland			0.71	(0.32 - 1.59)	0.87	(0.44 - 1.69)	0.87	(0.45 - 1.69)
	Jönköping			1.09	(0.62 - 1.91)	0.92	(0.54 - 1.54)	0.92	(0.55 - 1.54)
	Kalmar			1.11	(0.60 - 2.06)	0.98	(0.56 - 1.73)	0.98	(0.56 - 1.74)
	Kronoberg			1.48	(0.81 - 2.72)	1.25	(0.71 - 2.19)	1.25	(0.71 - 2.19)

	Norrbotten		0.88	(0.47 - 1.67)	0.78	(0.44 - 1.39)	0.78	(0.44 - 1.3
	Skåne		1.38	(0.83 - 2.28)	1.15	(0.73 - 1.82)	1.15	(0.73 - 1.8
	Stockholm		1.32	(0.80 - 2.16)	1.14	(0.73 - 1.78)	1.14	(0.73 - 1.7
	Södermanland		1.13	(0.62 - 2.06)	0.92	(0.53 - 1.59)	0.92	(0.53 - 1.5
	Uppsala		0.64	(0.34 - 1.19)	0.71	(0.41 - 1.23)	0.71	(0.41 - 1.2
	Värmland		0.63	(0.32 - 1.23)	0.58	(0.32 - 1.05)	0.57	(0.31 - 1.0
	Västerbotten		1.20	(0.66 - 2.19)	1.10	(0.64 - 1.88)	1.10	(0.64 - 1.8
	Västernorrland		1.35	(0.73 - 2.48)	1.15	(0.67 - 1.97)	1.15	(0.67 - 1.9
	Västmanland		0.92	(0.50 - 1.70)	0.74	(0.42 - 1.31)	0.74	(0.42 - 1.3
	Västra							
	Götaland		1.53	(0.93 - 2.51)	1.31	(0.84 - 2.05)	1.31	(0.84 - 2.0
	Örebro		1.02	(0.55 - 1.87)	0.91	(0.53 - 1.57)	0.91	(0.53 - 1.
	Östergötland		1.06	(0.61 - 1.85)	0.88	(0.53 - 1.46)	0.88	(0.53 - 1.4
Year	1998		1	ref	1	ref	1	ref
	1999		0.98	(0.75 - 1.28)	0.94	(0.74 - 1.18)	0.94	(0.74 - 1.1
	2000		1.01	(0.77 - 1.31)	0.97	(0.77 - 1.22)	0.97	(0.77 - 1.2
	2001		1.09	(0.85 - 1.41)	1.02	(0.64 - 0.91)	1.02	(0.64 - 0.9
	2002		0.96	(0.74 - 1.24)	0.87	(0.81 - 1.28)	0.87	(0.81 - 1.2
	2003		0.90	(0.70 - 1.17)	0.87	(0.69 - 1.09)	0.87	(0.69 - 1.0
	2004		1.16	(0.91 - 1.49)	1.02	。 (0.69 - 1.09)	1.02	(0.69 - 1.0
	2005		0.88	(0.67 - 1.14)	0.86	(0.82 - 1.27)	0.86	(0.82 - 1.2
	2006		1.02	(0.79 - 1.30)	0.96	(0.69 - 1.09)	0.96	(0.69 - 1.0
Observations (N)		693,007	693,007		838,756		838,756	

* Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

⁺ Missing information imputed using multiple imputation. Sequential imputation in the order: region, maternal education, maternal smoking and pregnancy BMI. Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

[‡] Missing information imputed using multiple imputation. Sequential imputation in the order: pregnancy BMI, maternal smoking, maternal education and region. Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

Table L: Bloodstream infections

Variables	Crude IRR (95% CI)		Adjuste	ed IRR* (95% CI)	MI-model 1 IRR†(95% CI)		MI-model 2 IRR‡ (95% CI)		
Pregnancy BMI	Underweight	0.94	(0.50 - 1.79)	1.04	(0.55 - 1.97)	1.06	(0.56 - 1.99)	1.04	(0.58 - 1.88)
	Normal	1	ref	1	ref	1	ref	1	ref
	Overweight	1.12	(0.90 - 1.39)	1.08	(0.87 - 1.34)	1.06	(0.87 - 1.31)	1.07	(0.86 - 1.32)
	Obese	1.02	(0.74 - 1.39)	1.05	(0.76 - 1.44)	1.14	(0.85 - 1.55)	1.12	(0.82 - 1.55)
Maternal age	≤19			1.24	(0.55 - 2.80)	1.08	(0.54 - 2.15)	1.07	(0.54 - 2.13)
	20-24			1	ref	1	ref	1	ref
	25-29			1.13	(0.82 - 1.57)	1.12	(0.85 - 1.49)	1.13	(0.85 - 1.50)
	30-34			1.20	(0.86 - 1.68)	1.06	(0.79 - 1.43)	1.07	(0.80 - 1.44)
	≥35			0.90	(0.61 - 1.32)	0.88	(0.63 - 1.22)	0.88	(0.63 - 1.23)
Parity	1			1	ref	1	ref	1	ref
	2			0.89	(0.71 - 1.11)	0.97	(0.80 - 1.18)	0.97	(0.80 - 1.18)
	3			1.64	(1.24 - 2.16)	1.52	(1.18 - 1.95)	1.51	(1.17 - 1.94)
	≥4			1.25	(0.82 - 1.90)	1.27	(0.88 - 1.83)	1.27	(0.88 - 1.82)
Maternal	No smoking			1	ref	1	ref	1	ref
smoking	Smoking			0.75	(0.53 - 1.05)	0.85	(0.62 - 1.16)	0.87	(0.63 - 1.22)
Maternal	≤9			1.40	(0.95 - 2.06)	1.29	(0.91 - 1.82)	1.31	(0.92 - 1.86)
education	10-12			1.04	(0.78 - 1.38)	1.13	(0.87 - 1.46)	1.11	(0.86 - 1.43
	13-14			1	ref	1	ref	1	ref
	≥16			1.07	(0.79 - 1.46)	1.04	(0.79 - 1.37)	1.03	(0.78 - 1.36)
Region	Blekinge			1	ref	1	ref	1	ref
	Dalarna			5.26	(1.35 - 20.46)	5.45	(1.43 - 20.72)	5.47	(1.44 - 20.77
	Gotland			7.44	(1.38 - 40.21)	7.45	(1.44 - 38.54)	7.48	(1.45 - 38.75
	Gävleborg			6.75	(1.74 - 26.08)	7.61	(2.03 - 28.43)	7.63	(2.04 - 28.51
	Halland			5.14	(1.34 - 19.71)	5.85	(1.56 - 21.85)	5.85	(1.56 - 21.88
	Jämtland			2.36	(0.46 - 12.03)	3.54	(0.79 - 15.93)	3.56	(0.79 - 16.01
	Jönköping			5.16	(1.37 - 19.36)	5.67	(1.54 - 20.86)	5.67	(1.54 - 20.89
	Kalmar			7.49	(1.91 - 29.40)	8.31	(2.18 - 31.74)	8.30	(2.17 - 31.71
	Kronoberg			4.04	(0.96 - 16.94)	4.74	(1.17 - 19.21)	4.74	(1.17 - 19.20

	Norrbotten		9.72	(2.53 - 37.27)	11.20	(3.02 - 41.56)	11.21	(3.02 - 41.
	Skåne		4.61	(1.30 - 16.39)	5.34	(1.53 - 18.67)	5.33	(1.53 - 18.
	Stockholm		7.16	(2.04 - 25.11)	8.94	(2.59 - 30.83)	8.94	(2.59 - 30.
	Södermanland		4.96	(1.27 - 19.38)	5.42	(1.43 - 20.50)	5.42	(1.43 - 20.
	Uppsala		3.64	(0.94 - 14.15)	4.22	(1.12 - 15.82)	4.22	(1.12 - 15.
	Värmland		3.50	(0.87 - 14.12)	5.86	(1.54 - 22.28)	5.84	(1.54 - 22.
	Västerbotten 🧹		7.65	(1.99 - 29.47)	8.19	(2.20 - 30.55)	8.21	(2.20 - 30.
	Västernorrland		4.65	(1.14 - 18.94)	6.59	(1.73 - 25.07)	6.59	(1.73 - 25.
	Västmanland		3.36	(0.84 - 13.36)	3.75	(0.97 - 14.51)	3.75	(0.97 - 14
	Västra							
	Götaland		8.09	(2.30 - 28.44)	9.41	(2.72 - 32.55)	9.42	(2.72 - 32
	Örebro		1.61	(0.37 - 7.07)	2.50	(0.63 - 9.94)	2.50	(0.63 - 9.9
	Östergötland		6.76	(1.84 - 24.85)	7.47	(2.07 - 26.97)	7.48	(2.07 - 26.
Year	1998		1	ref	1	ref	1	ref
	1999		0.79	(0.50 - 1.25)	0.82	(0.55 - 1.22)	0.82	(0.55 - 1.
	2000		1.40	(0.91 - 2.16)	1.21	(0.83 - 1.75)	1.21	(0.83 - 1.
	2001		1.32	(0.86 - 2.02)	1.12	(0.85 - 1.49)	1.12	(0.85 - 1.
	2002		1.32	(0.86 - 2.01)	1.31	(0.77 - 1.63)	1.32	(0.77 - 1.0
	2003		1.42	(0.94 - 2.16)	1.24	(0.91 - 1.90)	1.25	(0.91 - 1.9
	2004		1.50	(0.99 - 2.27)	1.54	。 (0.86 - 1.79)	1.54	(0.86 - 1.8
	2005		1.84	(1.22 - 2.77)	1.77	(1.08 - 2.20)	1.77	(1.08 - 2.2
	2006		1.78	(1.19 - 2.66)	1.78	(1.24 - 2.52)	1.78	(1.24 - 2.5
Observations (N)		693,007	693,007		838,756		838,756	
* Adjusted for ma	ternal age mater	nal education level n	naternal smoking in	umber of previo	us hirths g	eographic region :	and year of	hirth

* Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

⁺ Missing information imputed using multiple imputation. Sequential imputation in the order: region, maternal education, maternal smoking and pregnancy BMI. Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

+ Missing information imputed using multiple imputation. Sequential imputation in the order: pregnancy BMI, maternal smoking, maternal education and region. Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

Table M: Other infections

Variables	Cr		e IRR (95% CI)	Adjuste	Adjusted IRR* (95% CI)		MI-model 1 IRR†(95% CI)		MI-model 2 IRR‡ (95% CI)	
Pregnancy BMI	Underweight	1.08	(0.97 - 1.20)	1.03	(0.92 - 1.14)	1.04	(0.94 - 1.16)	1.03	(0.93 - 1.15)	
	Normal	1	ref	1	ref	1	ref	1	ref	
	Overweight	1.09	(1.05 - 1.13)	1.05	(1.01 - 1.10)	1.06	(1.02 - 1.10)	1.06	(1.02 - 1.10)	
	Obese	1.25	(1.19 - 1.32)	1.17	(1.11 - 1.23)	1.18	(1.12 - 1.24)	1.17	(1.11 - 1.23)	
Maternal age	≤19			1.03	(0.90 - 1.18)	1.09	(0.98 - 1.22)	1.09	(0.98 - 1.22)	
	20-24			1	ref	1	ref	1	ref	
	25-29			0.90	(0.85 - 0.95)	0.90	(0.85 - 0.94)	0.90	(0.85 - 0.94)	
	30-34			0.83	(0.79 - 0.88)	0.83	(0.79 - 0.88)	0.83	(0.79 - 0.88)	
	≥35			0.78	(0.73 - 0.83)	0.79	(0.74 - 0.83)	0.79	(0.74 - 0.83)	
Parity	1			1	ref	1	ref	1	ref	
	2			1.23	(1.18 - 1.27)	1.21	(1.17 - 1.25)	1.21	(1.17 - 1.25)	
	3			1.24	(1.18 - 1.31)	1.23	(1.17 - 1.29)	1.23	(1.17 - 1.29)	
	≥4			1.37	(1.27 - 1.47)	1.40	(1.31 - 1.49)	1.40	(1.31 - 1.49)	
Maternal	No smoking			1	ref	1	ref	1	ref	
smoking	Smoking			1.10	(1.04 - 1.16)	1.09	(1.04 - 1.14)	1.09	(1.04 - 1.15)	
Maternal	≤9			1.23	(1.15 - 1.32)	1.26	(1.18 - 1.33)	1.26	(1.18 - 1.34)	
education	10-12			1.03	(0.98 - 1.08)	1.05	(1.00 - 1.10)	1.05	(1.00 - 1.10)	
	13-14			1	ref	1	ref	1	ref	
	≥16			0.97	(0.91 - 1.02)	0.97	(0.92 - 1.02)	0.97	(0.92 - 1.02)	
Region	Blekinge			1	ref	1	ref	1	ref	
	Dalarna			1.51	(1.30 - 1.74)	1.58	(1.37 - 1.81)	1.58	(1.37 - 1.81)	
	Gotland			1.42	(1.14 - 1.76)	1.44	(1.18 - 1.77)	1.44	(1.17 - 1.77)	
	Gävleborg			0.73	(0.62 - 0.86)	0.76	(0.65 - 0.8 <mark>9</mark>)	0.76	(0.65 - 0.89)	
	Halland			1.21	(1.05 - 1.40)	1.27	(1.10 - 1.46)	1.26	(1.10 - 1.45)	
	Jämtland			1.44	(1.22 - 1.72)	1.49	(1.27 - 1.75)	1.49	(1.27 - 1.75)	
	Jönköping			0.89	(0.77 - 1.03)	0.90	(0.78 - 1.04)	0.90	(0.78 - 1.04)	
	Kalmar			1.16	(0.99 - 1.35)	1.19	(1.03 - 1.38)	1.19	(1.03 - 1.38)	
	Kronoberg			0.70	(0.59 - 0.84)	0.72	(0.61 - 0.86)	0.72	(0.61 - 0.86)	

	Norrbotten		1.43	(1.24 - 1.67)	1.45	(1.26 - 1.67)	1.45	(1.26 - 1.67
	Skåne		1.02	(0.90 - 1.17)	1.06	(0.94 - 1.20)	1.06	(0.94 - 1.20
	Stockholm		0.85	(0.75 - 0.97)	0.86	(0.76 - 0.97)	0.86	(0.76 - 0.97
	Södermanland		0.86	(0.73 - 1.01)	0.90	(0.78 - 1.05)	0.90	(0.78 - 1.05
	Uppsala		0.77	(0.66 - 0.90)	0.78	(0.67 - 0.90)	0.78	(0.67 - 0.90
	Värmland		0.86	(0.73 - 1.01)	0.87	(0.75 - 1.02)	0.87	(0.75 - 1.02
	Västerbotten		1.26	(1.08 - 1.47)	1.29	(1.12 - 1.49)	1.29	(1.12 - 1.49
	Västernorrland		1.03	(0.87 - 1.21)	1.07	(0.92 - 1.24)	1.07	(0.92 - 1.24
	Västmanland		0.90	(0.77 - 1.05)	0.89	(0.77 - 1.04)	0.89	(0.77 - 1.04
	Västra							
	Götaland		1.04	(0.92 - 1.19)	1.08	(0.95 - 1.22)	1.08	(0.95 - 1.22
	Örebro		1.00	(0.86 - 1.17)	1.05	(0.91 - 1.21)	1.05	(0.91 - 1.21
	Östergötland		0.67	(0.58 - 0.78)	0.70	(0.61 - 0.81)	0.70	(0.61 - 0.81
Year	1998		1	ref	1	ref	1	ref
	1999		1.03	(0.96 - 1.10)	1.02	(0.96 - 1.09)	1.02	(0.96 - 1.09
	2000		1.00	(0.93 - 1.07)	0.99	(0.93 - 1.05)	0.99	(0.93 - 1.05
	2001		0.86	(0.80 - 0.92)	0.86	(0.85 - 0.94)	0.86	(0.85 - 0.94
	2002		0.91	(0.85 - 0.98)	0.89	(0.80 - 0.92)	0.89	(0.80 - 0.92
	2003		0.88	(0.82 - 0.94)	0.88	(0.84 - 0.95)	0.88	(0.84 - 0.95
	2004		0.83	(0.77 - 0.89)	0.83	(0.83 - 0.94)	0.83	(0.83 - 0.94
	2005		0.88	(0.82 - 0.94)	0.87	(0.78 - 0.89)	0.87	(0.78 - 0.89
	2006		0.95	(0.89 - 1.01)	0.95	(0.82 - 0.93)	0.95	(0.82 - 0.93
Observations (N)		693,007	693,007	. ,	838,756		838,756	-

* Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

⁺ Missing information imputed using multiple imputation. Sequential imputation in the order: region, maternal education, maternal smoking and pregnancy BMI. Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.

+ Missing information imputed using multiple imputation. Sequential imputation in the order: pregnancy BMI, maternal smoking, maternal education and region. Adjusted for maternal age, maternal education level, maternal smoking, number of previous births, geographic region and year of birth.