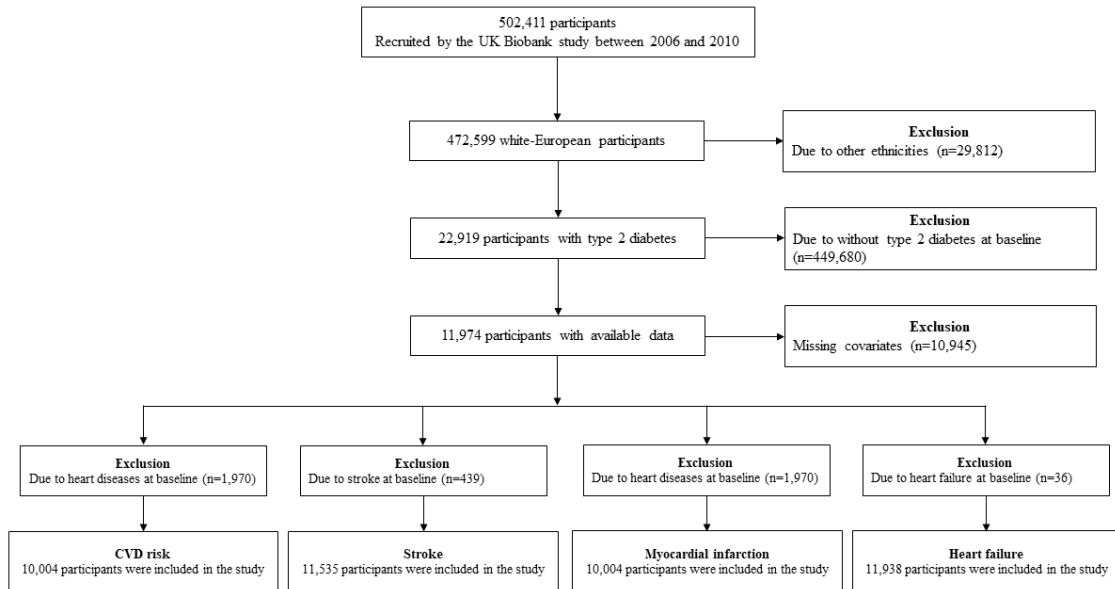


1 **Supplementary Materials**

2 **Supplementary Table S1 Summary of Balance for Matched Data**

Variables	Means	Means	Std. mean differences	Variance ratios	eCDF statistics mean
	Treated	Control			
Distance	0.1060	0.0849	0.1616	2.2068	0.0018
Age	60.3244	60.3240	0.0001	1.0433	0.0036
Sex	0.3272	0.3226	0.0100	-	0.0047
Deprivation index	-0.0538	-0.1806	0.0362	1.0377	0.0102
Education	2031.3716	2041.7819	-0.0026	1.0080	0.0168
Smoking status	0.6785	0.6694	0.0126	1.0611	0.0082
Processed meat	1.8437	1.8366	0.0063	1.1276	0.0106
Alcohol intake	3.7752	3.7127	0.0368	1.1453	0.0227
Total physical activity	1.2665	1.3216	-0.0624	1.0600	0.0184
Total sedentary time	5.4552	5.4176	0.0140	1.2131	0.0108
Type 2 diabetes duration	1.4953	1.1013	0.0701	1.0707	0.0068
Body mass index	28.9761	28.6962	0.0422	1.7430	0.0469

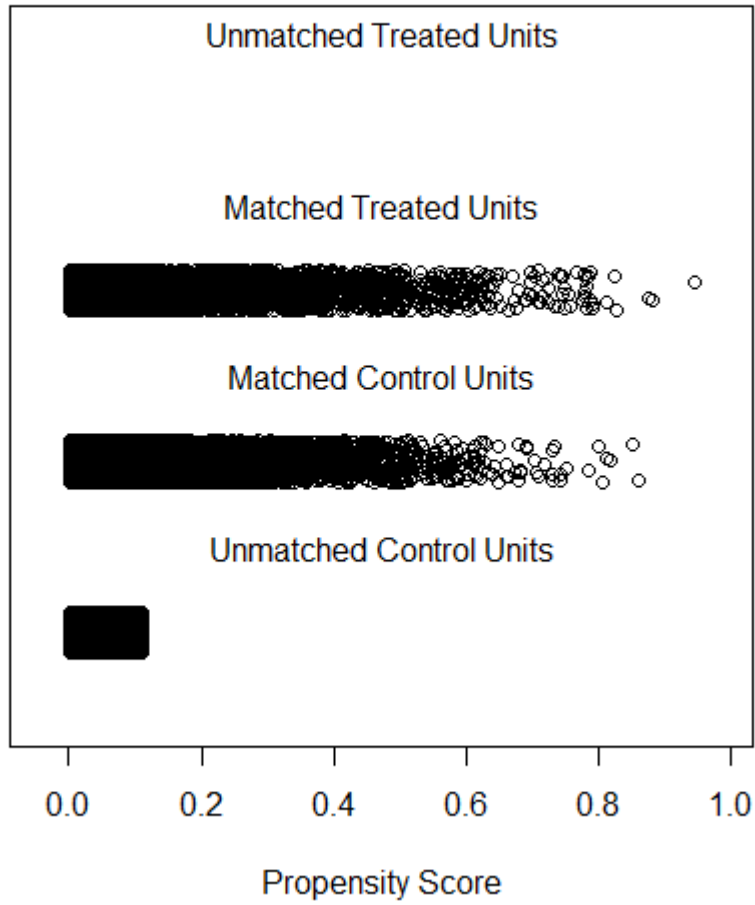
3 eCDF, Empirical cumulative distribution function; Std, Standardised



4

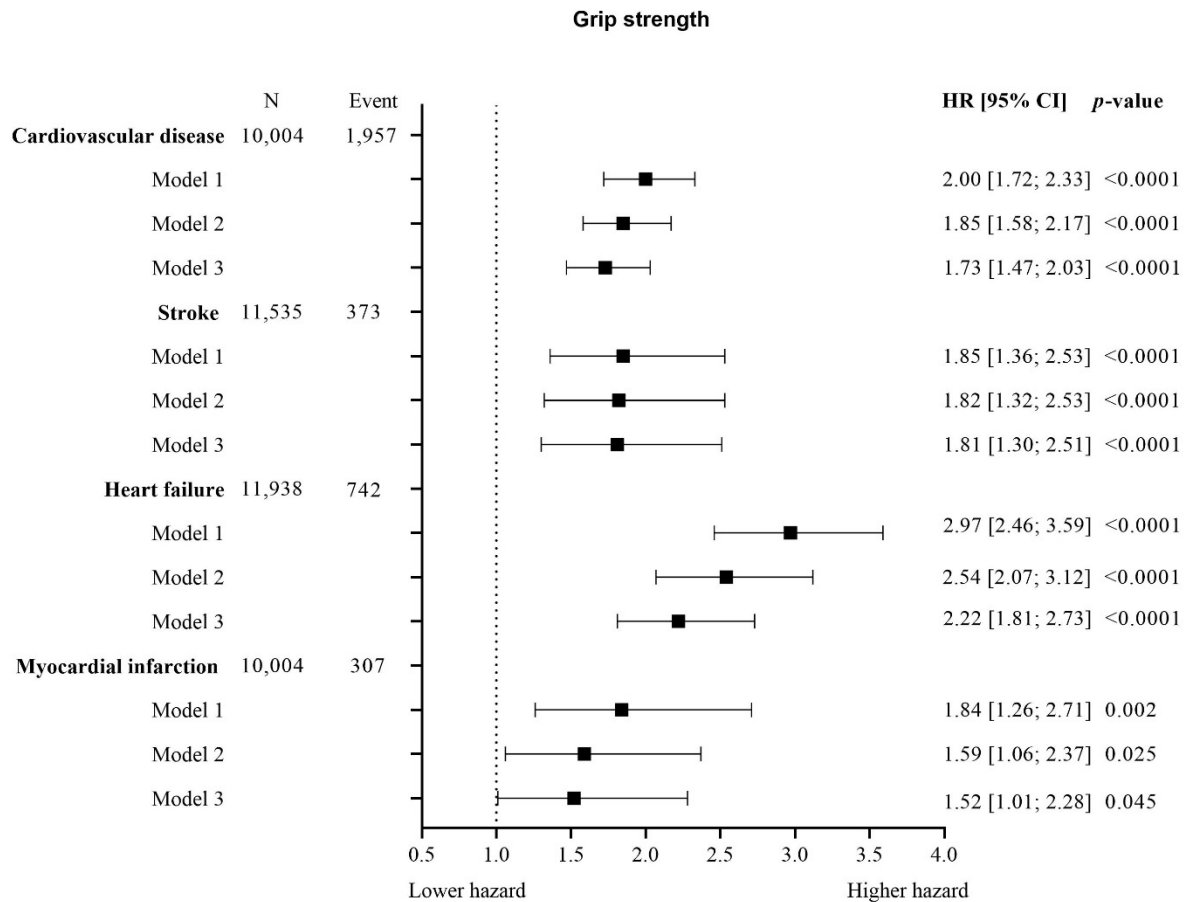
5 **Supplementary Figure S1** Flowchart of participants

Distribution of Propensity Scores



7

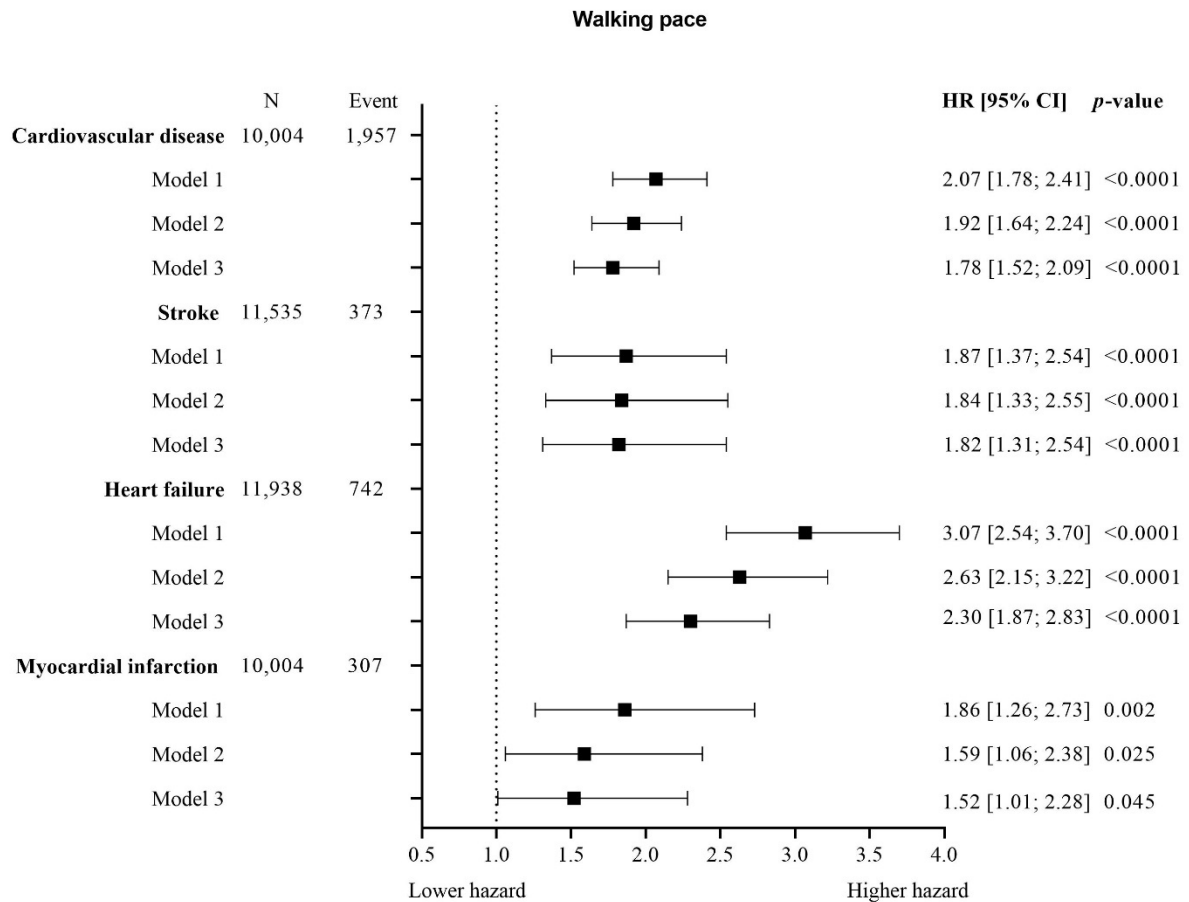
8 **Supplementary Figure S2** Distribution of propensity scores



9

10 **Supplementary Figure S3** Association between grip strength and incidence of CVD, stroke,
 11 myocardial infarction and heart failure in people with type 2 diabetes

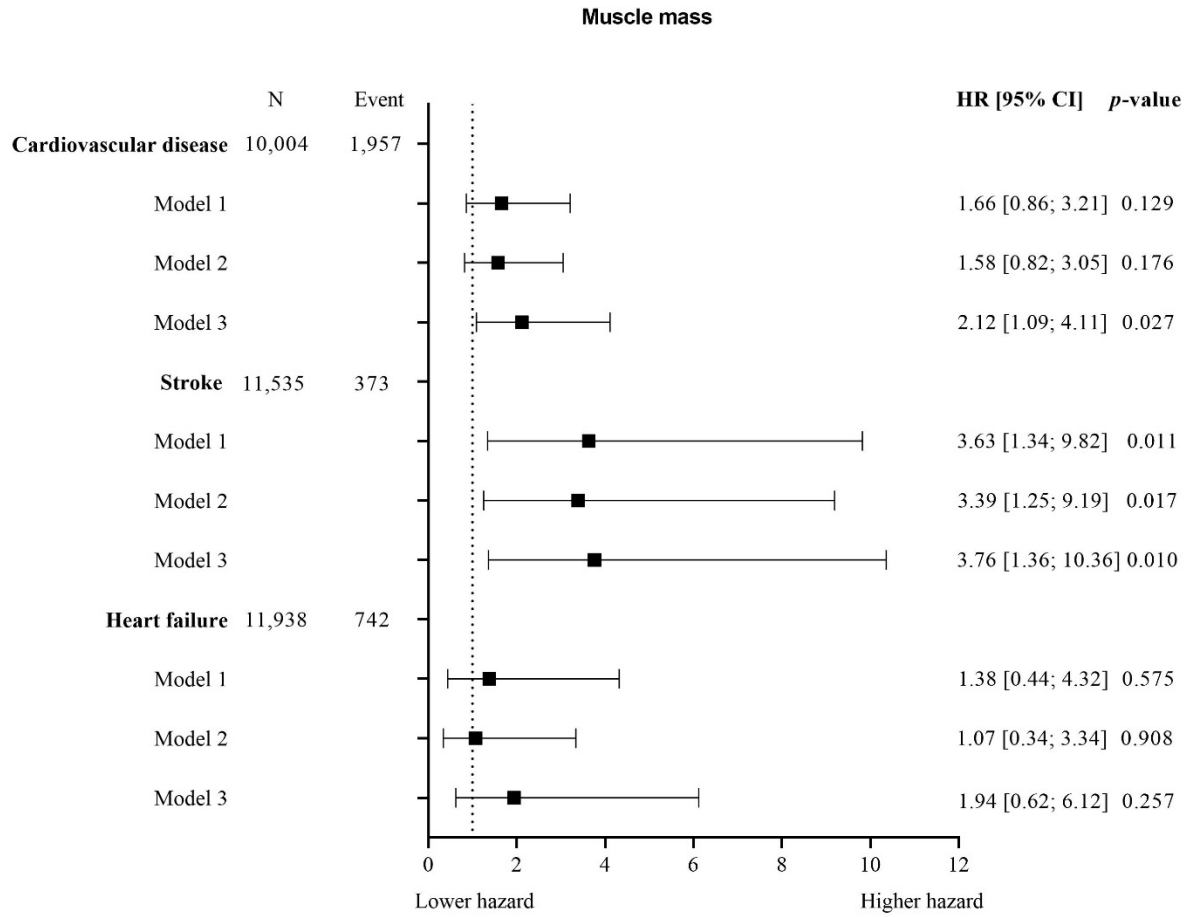
12 Data are presented as HRs and their 95% CI. Non-sarcopenia was the reference group (HR =
 13 1.00). Model 1 (Minimally adjusted model) included age, sex, deprivation index, and
 14 education. Model 2 (Fully adjusted model) was further adjusted for model 1 but also included
 15 processed meat, smoking status, alcohol intake, total sedentary time, total physical activity and
 16 type 2 diabetes duration. Model 3 (Sensitivity analysis) was adjusted as in model 2 but also
 17 included body mass index.



18

19 **Supplementary Figure S4** Association between walking pace and incidence of CVD, stroke,
 20 myocardial infarction and heart failure in people with type 2 diabetes

21 Data are presented as HRs and their 95% CI. Non-sarcopenia was the reference group (HR =
 22 1.00). Model 1 (Minimally adjusted model) included age, sex, deprivation index, and
 23 education. Model 2 (Fully adjusted model) was further adjusted for model 1 but also included
 24 processed meat, smoking status, alcohol intake, total sedentary time, total physical activity and
 25 type 2 diabetes duration. Model 3 (Sensitivity analysis) was adjusted as in model 2 but also
 26 included body mass index.



27

28 **Supplementary Figure S5** Association between muscle mass and incidence of CVD, stroke
 29 and heart failure in people with type 2 diabetes

30 Data are presented as HRs and their 95% CI. Non-sarcopenia was the reference group (HR =
 31 1.00). Model 1 (Minimally adjusted model) included age, sex, deprivation index, and
 32 education. Model 2 (Fully adjusted model) was further adjusted for model 1 but also included
 33 processed meat, smoking status, alcohol intake, total sedentary time, total physical activity and
 34 type 2 diabetes duration. Model 3 (Sensitivity analysis) was adjusted as in model 2 but also
 35 included body mass index.