Supplementary

For those disorders for which self-report was not available in the PCS, only the estimated prevalence was derived from their drug use pattern. In these diseases, the prevalence was extracted based on the best-published evidence (meta-analysis, if available) from Iran with a similar conduction date compared to the cohort. If prevalence intervals intersect each other, we consider them similar.

Supplement Table 1. Prevalence of Diseases base on drug use pattern and published literature

Disease	Drugs Name	%	Prevalence Based on Published Literature %$	Reference
Hypothyroidism	Levothyroxine	1.7 (1.5–2)	3.7–12.8%	1–4
Hyperthyroidism	Thiamazole	1 (0.8–1.3)	0.23–4.63%	5
Parkinson	Levodopa Trihexyphenidyl Amantadine Pramipexole Selegiline Benserazide Bromocriptine Rivastigmine	0.19 (0.1–0.3)	0.05–0.26%	6
Hepatitis B	Tenofovir Adefovir Interferon alfa Lamivudine	0.1(0.04–0.18)	2.2–9%	7–9
Hyperlipidemia	Atorvastatin Lovastatin Simvastatin Gemfibrozil fenofibrate Clofibrate	7.5(7–8)	35.5–46%	10,11
Osteoporosis	Alendronic acid Calcium and Vitamin D	2 (1.7–2.3)	13–20%	12
Osteoarthritis	Glucosamine Preparation Piascledine	0.2 (0.1–0.3)	14–53%	13–15
Migraine	Sumatriptan Rizatriptan Ergotamine	0.4 (0.3–0.6)	7.14–18.11%	16,17
Iron Deficiency	Iron supplement	13.5 (12.8–14.2) *	13.6–27.7%	18,19
*Prevalence in female gender 24.12(22.94-25.34%)				

The prevalence of hyperthyroidism was estimated to be 1% (0.8–1.3%), Parkinson's disease 0.19% (0.1–0.3%), iron deficiency 13.5% (12.8–14.2%), and hyperlipidemia 7.5%(7–8%) based on drugs used in the population (Supplement Table). Self-reports of the diseases listed in Supplement Table 1 are not included in PCS data.

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