

	PCSK9-Ab (N=274)		
	r	95%CI	p
Age	0.017	1.431	0.788
Height	-0.013	1.096	0.830
Weight	0.001	1.701	0.991
BMI	0.010	0.502	0.874
WBC	-0.032	410.665	0.606
RBC	-0.052	0.073	0.440
Plt	-0.127	10.929	0.075
HbA1c	-0.011	0.128	0.855
LDL	0.055	3.643	0.399
T-Cho	-0.043	4.289	0.539
TG	0.045	13.258	0.475
HDL-C	-0.055	2.144	0.396
nonHDL-C	-0.007	4.590	0.916
TP	-0.134	0.073	0.03
Alb	-0.035	0.407	0.591
T-BILL	-0.047	0.049	0.613
GOT(AST)	0.058	1.659	0.360
GPT(ALT)	0.074	2.116	0.250
γ -GTP	0.000	10.426	0.995
ALP	-0.031	11.411	0.627

LDH	0.005	8.748	0.935
UA	0.044	0.162	0.490
Na	-0.023	9.581	0.720
K	0.007	0.057	0.909
Cl	-0.023	1.291	0.722
Ca	-0.155	0.089	0.138
Fe	0.204	14.336	0.314
P	-0.093	0.153	0.550
AMY	0.077	7.148	0.417
Che	0.051	14.849	0.537
CK	-0.051	12.853	0.461
Glu	0.057	6.686	0.373
UN	0.026	0.873	0.676
Cre	-0.004	1.112	0.945

Supplemental Table 1. Correlation between blood PCSK9-Ab and clinical parameters in patient with diabetes.

Correlations were calculated using Spearman's correlation and logistic regression analysis. All statistical analyses were performed using Excel software. All tests were two-tailed, and P-values <0.05 were considered statistically significant.

	PCSK9 protein (N=274)		
	r	95%CI	p
Age	-0.044	1.431	0.483
Height	0.001	1.096	0.990
Weight	0.053	1.701	0.404
BMI	0.069	0.502	0.283
WBC	0.040	410.665	0.523
RBC	0.090	0.073	0.191
Plt	0.015	10.929	0.822
HbA1c	-0.010	0.128	0.872
LDL	-0.009	3.643	0.894
T-Cho	0.030	4.289	0.669
TG	0.008	13.258	0.900
HDL-Cho	-0.064	2.144	0.321
nonHDL- Cho	0.101	4.590	0.162
TP	-0.008	0.073	0.908
Alb	0.073	0.407	0.275
T-BILL	0.001	0.049	0.989
GOT(AST)	-0.033	1.659	0.602
GPT(ALT)	-0.036	2.116	0.571
γ -GTP	0.018	10.426	0.779

ALP	-0.030	11.411	0.641
LDH	-0.013	8.748	0.843
UA	-0.043	0.162	0.503
Na	0.079	9.581	0.228
K	-0.036	0.057	0.575
Cl	-0.028	1.291	0.657
Ca	0.160	0.089	0.127
Fe	0.129	14.336	0.521
P	0.134	0.153	0.392
AMY	-0.083	7.148	0.381
Che	0.242	14.849	0.011
CK	-0.017	12.853	0.798
Glu	-0.153	6.686	0.030
UN	-0.058	0.873	0.368
Cre	-0.017	1.112	0.784

Supplemental Table 2. Correlations between blood PCSK9 protein and clinical parameters in patients with diabetes.

Correlations were calculated using Spearman's correlation and logistic regression analysis. All statistical analyses were performed using Excel software. All tests were two-tailed, and P-values <0.05 were considered statistically significant.