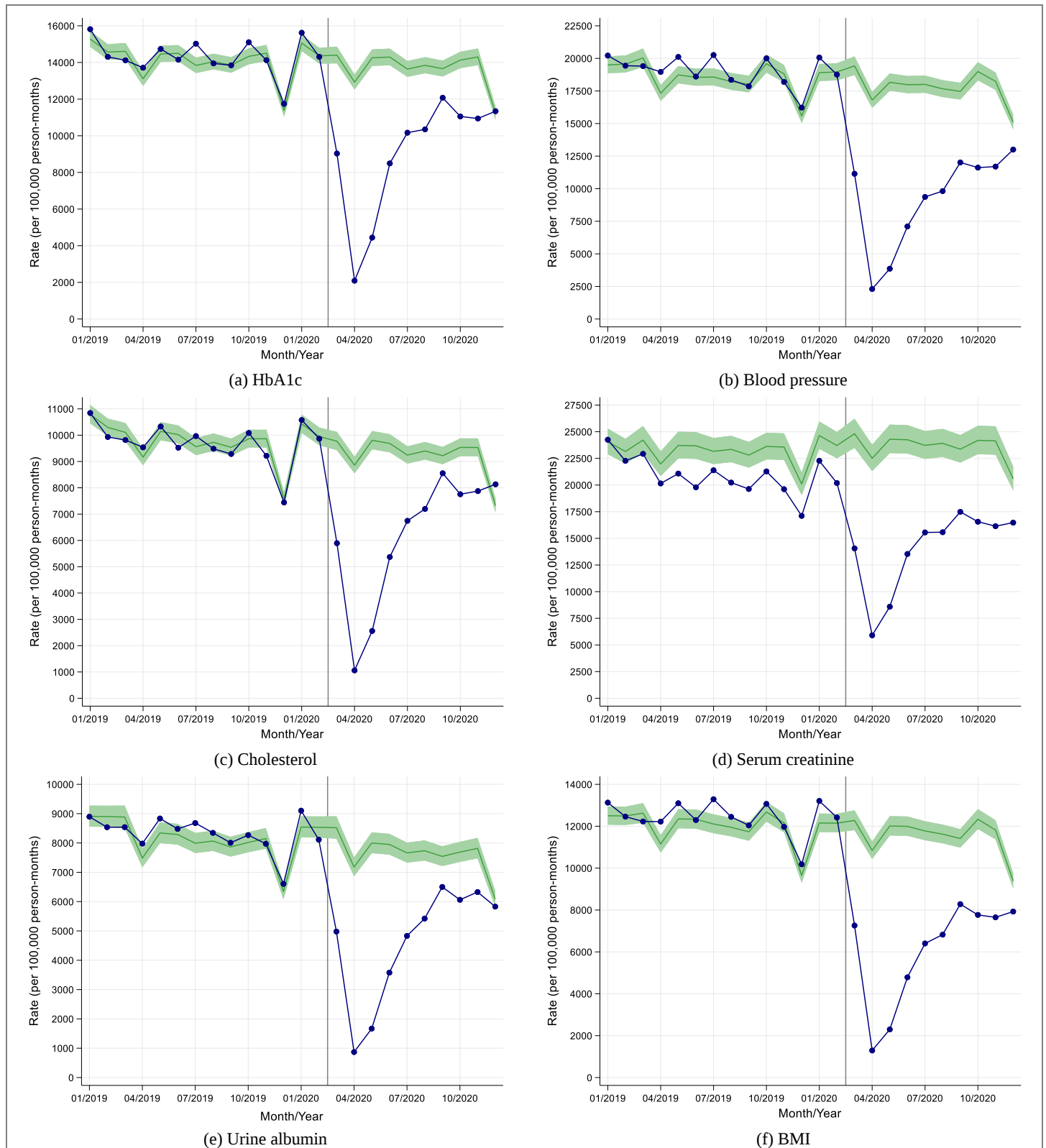


Supplemental Material

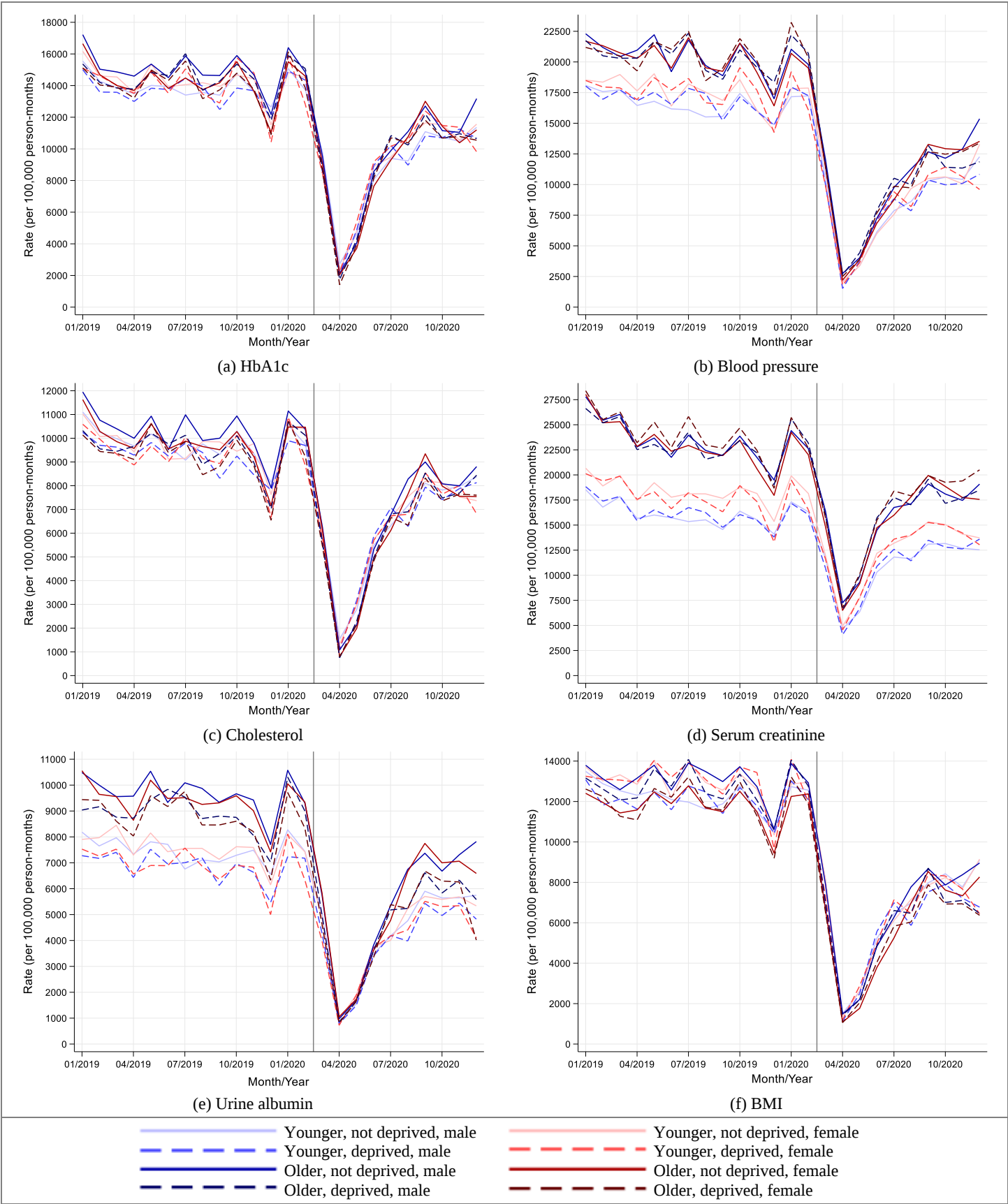
Table of Contents

Supplementary Figure 1. Observed and expected care process rates in people with type 2 diabetes during 2019 and 2020, in Northern Ireland, Scotland and Wales	2
Supplementary Figure 2. Stratified care process rates in people with type 2 diabetes during 2019 and 2020, in Northern Ireland, Scotland and Wales	3
Supplementary Table 1. Strata applied to study cohorts	4
Supplementary Table 2. Comparison of observed and expected rates of diabetes-related care process implementation and new medication initiation in people with type 2 diabetes between March and December 2020 and in April 2020, in Northern Ireland, Scotland, and Wales	5
Supplementary Figure 3. Observed and expected rates of new medication initiation in people with type 2 diabetes during 2019 and 2020, in Northern Ireland, Scotland and Wales	6
Supplementary Figure 4. Stratified rates of new medication initiation in people with type 2 diabetes during 2019 and 2020, in England	7
Supplementary Figure 5. Observed and expected new and repeat medication prescribing rates in people with type 2 diabetes during 2019 and 2020, in Northern Ireland, Scotland and Wales	8

Supplementary Figure 1. Observed and expected care process rates in people with type 2 diabetes during 2019 and 2020, in Northern Ireland, Scotland and Wales



Supplementary Figure 2. Stratified care process rates in people with type 2 diabetes during 2019 and 2020, in Northern Ireland, Scotland and Wales



Supplementary Table 1. Strata applied to study cohorts

Stratum	Label	Older	Deprived	Female
1	Younger, not deprived, male	0	0	0
2	Younger, not deprived, female	0	0	1
3	Younger, deprived male	0	1	0
4	Younger, deprived female	0	1	1
5	Older, not deprived, male	1	0	0
6	Older, not deprived, female	1	0	1
7	Older, deprived male	1	1	0
8	Older, deprived female	1	1	1
• Older = 0,1 if age $\geq$ 65 • Deprived = 0,1 if IMD quintile = 4 or 5 • Female = 0,1				

Supplementary Table 2. Comparison of observed and expected rates of diabetes-related care process implementation and new medication initiation in people with type 2 diabetes between March and December 2020 and in April 2020, in Northern Ireland, Scotland, and Wales

	Between March and December 2020			April 2020		
	Observed Frequency	Expected Frequency (95% CI)	Percentage Reduction (95% CI)	Observed Frequency	Expected Frequency (95% CI)	Percentage Reduction (95% CI)
Care processes						
HbA1c	72,084	113,705 (110,149 to 117,376)	36.6 (34.6 to 38.6)	1862	11,513 (11,153 to 11,885)	83.8 (83.3 to 84.3)
Blood pressure	72,650	147,623 (142,287 to 153,159)	50.8 (48.9 to 52.6)	2050	14,967 (14,427 to 15,526)	86.3 (85.8 to 86.8)
Cholesterol	48,674	77,035 (74,341 to 79,826)	36.8 (34.5 to 39.0)	944	7891 (7615 to 8177)	88.0 (87.6 to 88.5)
Serum creatinine	112,867	195,299 (184,827 to 206,364)	42.2 (38.9 to 45.3)	5260	20,049 (18,976 to 21,182)	73.8 (72.3 to 75.2)
Urine albumin	36,881	63,500 (60,730 to 66,396)	41.9 (39.3 to 44.5)	774	6393 (6115 to 6684)	87.9 (87.3 to 88.4)
BMI	48,242	96,139 (92,499 to 99,922)	49.8 (47.8 to 51.7)	1151	9659 (9293 to 10,038)	88.1 (87.6 to 88.5)
New medication						
Antidiabetic						
DPP-4i	414	619 (566 to 677)	33.1 (26.9 to 38.8)	27	68 (62 to 74)	60.3 (56.5 to 63.5)
GLP-1ag	85	82 (67 to 102)	-3.7 (-26.9 to 16.7)	<5	-	-
Insulin	234	224 (195 to 258)	-4.5 (-20.0 to 9.3)	21	23 (20 to 27)	8.7 (-5.0 to 22.2)
Metformin	2874	3310 (3121 to 3510)	13.2 (7.9 to 18.1)	138	386 (364 to 409)	64.2 (62.1 to 66.3)
SGLT2i	616	929 (806 to 1070)	33.7 (23.6 to 42.4)	26	92 (79 to 107)	71.7 (67.1 to 75.7)
Sulphonylurea	599	625 (578 to 675)	4.2 (-3.6 to 11.3)	41	75 (69 to 81)	45.3 (40.6 to 49.4)
Any ¹	2985	3417 (3224 to 3622)	12.6 (7.4 to 17.6)	147	403 (381 to 427)	63.5 (61.4 to 65.6)
Antihypertensive						
ACEi	526	685 (636 to 737)	23.2 (17.3 to 28.6)	23	77 (71 to 83)	70.1 (67.6 to 72.3)
α -blocker	214	249 (220 to 282)	14.1 (2.7 to 24.1)	11	26 (22 to 29)	57.7 (50.0 to 62.1)
ARB	180	223 (194 to 256)	19.3 (7.2 to 29.7)	9	24 (21 to 28)	62.5 (57.1 to 67.9)
β -blocker	328	384 (342 to 432)	14.6 (4.1 to 24.1)	21	39 (34 to 44)	46.2 (38.2 to 52.3)
CC-blocker	363	472 (430 to 518)	23.1 (15.6 to 29.9)	22	56 (51 to 61)	60.7 (56.9 to 63.9)
Diuretic	375	384 (344 to 428)	2.3 (-9.0 to 12.4)	20	42 (37 to 46)	52.4 (45.9 to 56.5)
Any ²	616	738 (684 to 795)	16.5 (9.9 to 22.5)	40	81 (75 to 87)	50.6 (46.7 to 54.0)
Lipid-lowering						
Statin	1196	1420 (1325 to 1522)	15.8 (9.7 to 21.4)	55	153 (143 to 165)	64.1 (61.5 to 66.7)
Ezetimibe	33	18 (11 to 29)	-83.3 (-200.0 to -13.8)	<5	-	-
Fibrate	25	16 (11 to 23)	-56.3 (-127.3 to -8.7)	<5	-	-
Any ³	1199	1419 (1325 to 1520)	15.5 (9.5 to 21.1)	56	153 (143 to 164)	63.4 (60.8 to 65.9)
Antiplatelet						
Aspirin	239	229 (202 to 260)	-4.4 (-18.3 to 8.1)	16	24 (21 to 27)	33.3 (23.8 to 40.7)
Clopidogrel	196	228 (192 to 271)	14.0 (-2.1 to 27.7)	14	23 (19 to 27)	39.1 (26.3 to 48.1)
Other ⁴	61	61 (42 to 88)	0 (-45.2 to 30.7)	5	5 (4 to 8)	0 (-25.0 to 37.5)
Any	300	298 (266 to 336)	-0.7 (-12.8 to 10.7)	23	31 (27 to 35)	25.8 (14.8 to 34.3)

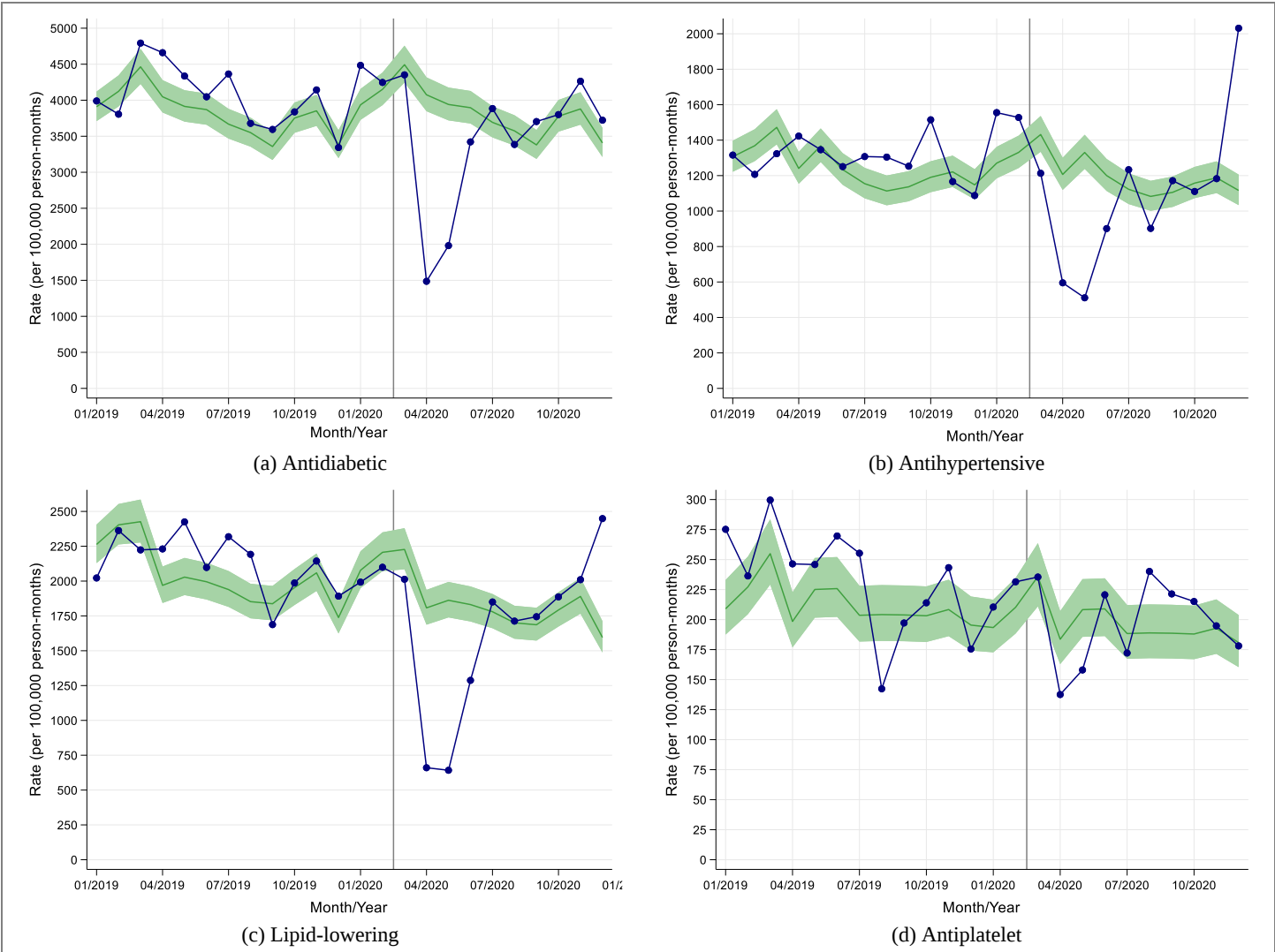
1. Also includes α -glucosidase inhibitors, meglitinides, and thiazolidinediones (glitazones).

2. Also includes central-acting agents, peripheral adrenergic inhibitors, and vasodilators.

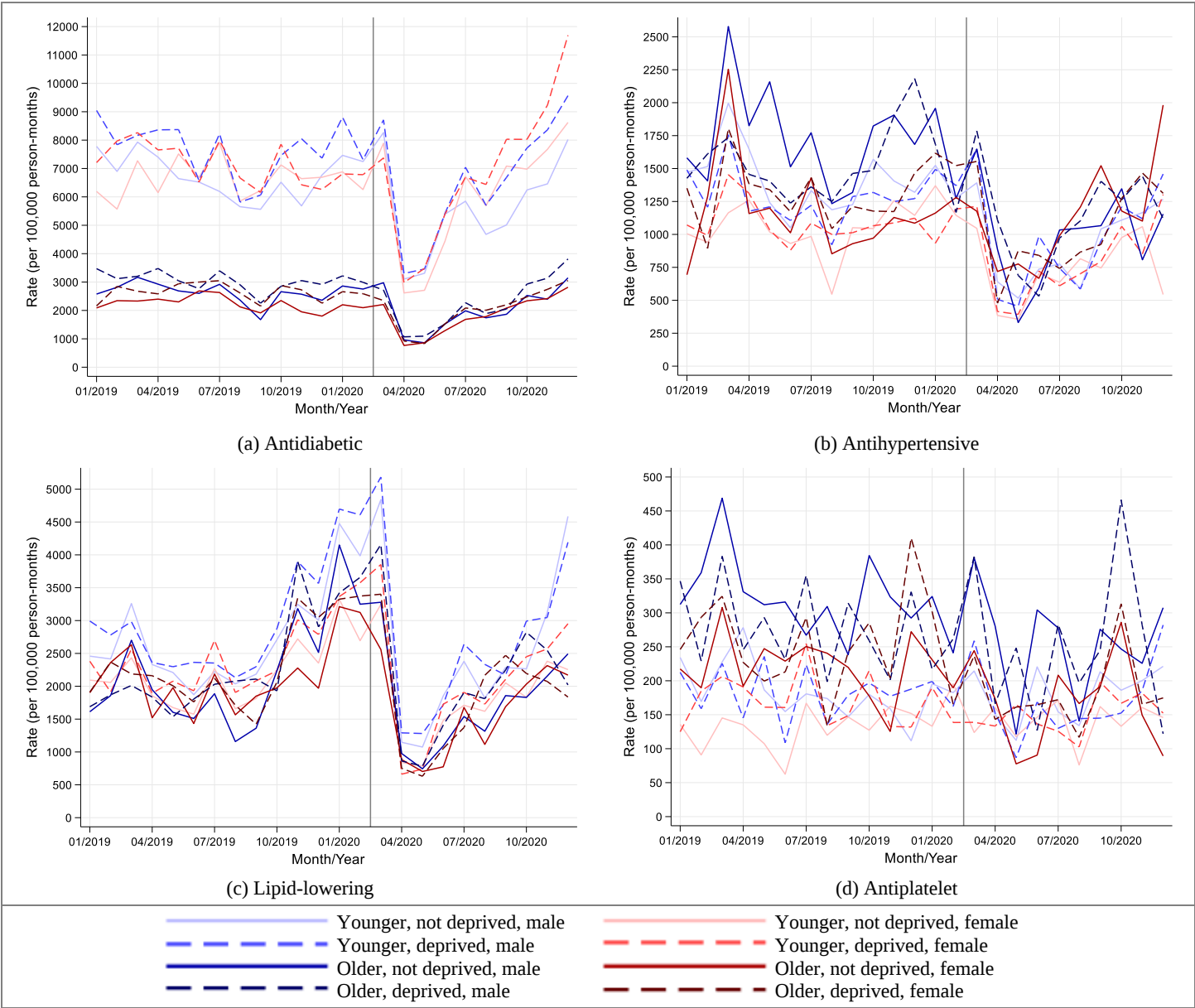
3. Also includes cholestyramine, colesvelam, colestipol, niacin, lomitapide, and PCSK9 inhibitors.

4. Includes cangrelor, dipyridamole, glycoprotein inhibitors, prasugrel, and ticagrelor.

Supplementary Figure 3. Observed and expected rates of new medication initiation in people with type 2 diabetes during 2019 and 2020, in Northern Ireland, Scotland and Wales



Supplementary Figure 4. Stratified rates of new medication initiation in people with type 2 diabetes during 2019 and 2020, in England



Supplementary Figure 5. Observed and expected new and repeat medication prescribing rates in people with type 2 diabetes during 2019 and 2020, in Northern Ireland, Scotland and Wales

