Article title: Biopsychosocial, work-related, and environmental factors affecting work participation in people with Osteoarthritis: A systematic review.

Journal name: BMC Musculoskeletal Disorders

Authors: Angela Ching<sup>1</sup>, Yeliz Prior<sup>1</sup>, Jennifer Parker<sup>1</sup>, Alison Hammond<sup>1</sup>

Affiliation: <sup>1</sup>Centre for Health Sciences Research, University of Salford, Salford, Greater Manchester, United Kingdom.

Corresponding Author: Professor Yeliz Prior (email: <a href="y.prior@salford.ac.uk">y.prior@salford.ac.uk</a>)

## Additional File 5 Outcomes: leaving work before statutory retirement age

Author, year, country	Leaving work before statutory retirement age	Biopsychosocial factors and associations with outcomes
	Premature work loss / early exit from work / early retirement	
Wilkie <i>et al.</i> ,	23.6% with premature work loss (PWL). Primary care OA	Male (OR: 1.97, 95% CI: 1.28–3.04), pain interference (OR: 1.51, 95% CI:
2014, United	consulters off work due to sickness vs those without OA (33.8% vs	1.00–2.27) and low co-worker support (OR: 3.11, 95% CI: 1.78–5.42)
Kingdom [17]	19.1%).	independently associated with PWL in OA consulters.
Laires et al.,	OA associated with: PWL (OR: 1.85, 95% CI: 1.27–2.69); but not	Strong association pain interference and PWL, especially knee OA (OR: 1.52,
2018,	official early retirement (OR: 1.43, 95% CI: 0.96–2.12).	95% CI: 1.16–1.99).
Portugal [42]		
	Knee OA strongly associated with PWL (OR: 2.25, 95% CI: 1.42–	Knee OA: highest levels of disability (HAQ scores ≥ 2) at greatest risk PWL.
	3.59). No significant association hand or hip OA.	
	Unemployment associated with PWL (OR: 1.97, 95% CI: 1.27–	
	3.06), especially knee OA (OR: 2.68, 95% CI: 1.58–4.53), and	
	younger age (50–57) (OR: 3.47, 95% CI: 1.88–6.41).	
Kontio et al.,	On average 2.1 (95% CI: 2.0–2.2) potential working life–years lost.	Univariate model PWL predictors: male, older age, low education, long initial
2020, Finland	Those with polyarthritis/CMC joint OA lost significantly more	sickness absence, not returned to work sustainably after the initial sickness
[34]	working life-years (2.5, 95% CI: 2.3-2.5) than those with knee or	absence and receiving vocational rehabilitation. All physical work-related
	hip OA (2.0, 95% CI: 1.9–2.1 and 2.0, 95% CI: 1.8–2.1, respectively).	factors increased risk of PWL, but not significant in multivariate model.

	2. Disability pension / disability retirement	
Kontio et al.,	Annual proportion time spent in permanent disability retirement	
2020, Finland	(mean time all persons/year) highest in polyarthritis/CMC joint OA	
[34]	group vs knee, hip, and other OA 17.7% vs 12.1%, 11.1% 12.0%,	
	respectively.	
Hubertsson	Knee OA: 21% women; 17% men received sickness benefit during	
et al., 2013,	previous year.	
Sweden [14]		
	More women than men received disability pension payment (32%	
(see Table 3	vs 16%).	
for data on		
absenteeism)	Disability pension payment increased with age.	
	Women = 94 (SD 149) days disability pension/person/year.	
	Men = 47 (SD 115) days disability pension/person/year.	
Hubertsson	Risk of disability pension (adjusted for age and education):	
et al., 2017,	Knee OA increased:	
Sweden [30]	- in all job sectors vs business and administration.	
	- for women in health care (OR: 10.25, 95% CI: 4.78–21.97),	
(see Table 3	childcare (OR: 9.83, 95% CI: 4.36–22.17), and cleaning (OR:	
for data on	16.70, 95% CI: 7.46–37.37).	
absenteeism)	- men in construction (OR: 3.45, 95% CI: 1.96–6.09), metal	
	work (OR: 4.35, 95% CI: 2.09–9.02), and transportation (OR:	
	2.09, 95% CI: 1.06–4.10).	
	Hip OA increased:	
	- in all studied job sectors vs business and administration.	
	- for women in health care (OR: 6.91, 95% CI: 2.49–19.13),	
	childcare (OR: 5.89, 95% CI: 1.92–18.07), and cleaning (OR:	
	5.44, 95% CI: 1.50–19.72).	
- <u></u>	- men in farming (OR: 3.15, 95% CI: 1.16–8.55).	

Kontio et al.,	No. full disability retired due to knee OA = 6117.	Physical work-related factors and disability retirement adjusted for age: all
2018, Finland	Overall age-adjusted incidence = 60 (men); 72 (women)/ 100,000	physical load factors (heavy physical work; kneeling/squatting ≥1 hr/day;
[31]	person-years.	heavy lifting ≥20kg, ≥10 times/day; sitting ≥5 hrs/day; standing or moving ≥5
		hrs/day) statistically significantly associated with disability retirement due to
		knee OA in men (range: sitting (HR: 0.28, 95% CI: 0.25–0.32) to standing or
		moving (HR: 2.52, 95% CI: 2.32–2.73) and women (range: sitting HR: 0.23,
		95% CI: 0.20–0.26) to heavy physical work (HR 2.75, 95% CI 2.57–2.95)). All
		physical load factors increased risk disability retirement apart from sitting
		which reduced risk.
		High risk disability retirement. Men: service workers, electricians, plumbers,
		construction workers, unskilled transport, construction, and manufacturing
		workers. Women: assistant nurses, building caretakers, cleaners, kitchen
		workers. Risk in manual workers strongly attributed to physically heavy work.

Key: CMC = carpometacarpal; OA = osteoarthritis; **Measures**: HAQ = Health Assessment Questionnaire; PWL = premature work loss (i.e., leaving work or losing job prior to State Pension age); **Other**: 95% CI = 95% confidence interval; HR = Hazard ratio; no. = number; OR = Odds ratio; SD = standard deviation; vs = versus.