# THE LANCET Public Health 

## Supplementary appendix

This appendix formed part of the original submission and has been peer reviewed. We post it as supplied by the authors.

Supplement to: Dalene KE, Tarp J, Selmer RM, et al. Occupational physical activity and longevity in working men and women in Norway: a prospective cohort study. Lancet Public Health 2021; published online April 28. http://dx.doi.org/10.1016/ S2468-2667(21)00032-3.

## SUPPLEMENTARY TABLES S1-S4 AND SUPPLEMENTARY FIGURES S1-S6

Table S1. The Saltin-Grimby Physical Activity Level Scale, the CONOR instrument* and harmonization of leisure time PA measured by the two instruments

## Introductory texts of the the Saltin-Grimby Physical Activity Level Scale:

The following two sections have been designed to allow an estimate of your lifetime physical activity, both occupational and recreational. The first section deals with physical activity within your occupation. We have classified all occupations in four groups, from sedentary to hard manual work. Please study the following table and then match your own occupation during various periods of
your life with the table by checking appropriate boxes below:
The following section deals with your spare-time physical activity. The table outlines four different levels. Please read the table carefully and then check appropriate boxes below:
Categories of occupational physical activity - The Saltin-Grimby Physical Activity Level Scale
1 ("Sedentary"): You are mainly sedentary and do not walk much around at your workplace-for example, desk work, work including assembling of minor parts.
2 ("Walking"): You walk around quite a bit at your workplace but do not have to carry heavy items-for example, light industrial work, non-sedentary office work, inspection and the like.
3 ("Walk+lift"): Most of the time you walk, and you often have to walk up stairs and lift various items. Examples include mail delivery and construction work.
4 ("Heavy labour"): You have heavy physical work. You carry heavy burdens and carry out physically strenuous work-for example, work including digging and shovelling
Categories of leisure time physical activity - The Saltin-Grimby Physical Activity Level Scale
1 "Sedentary": Almost completely inactive: reading, TV watching, movies, etc.
2 "Low": Some physical activity during at least 4 hours per week: riding a bicycle or walking to work, walking or skiing with the family, gardening
3 "Moderate": Regular activity: such as heavy gardening, running, calisthenics, tennis, etc.
4 "High": Regular hard physical training for competition in running events, soccer, racing, European handball, etc. several times per week
Introductory text of the CONOR instrument
During the last year, how has your physical activity level been during leisure time? Think of a weekly average. Commuting to/from work is included in leisure time.
Categories of light and hard leisure time physical activity - the CONOR instrument
Average weekly hours:
Light physical activity (not sweating/not out of breath)

1. None
2. Less than 1 hour
3. 1-2 hours
4. 3 or more hours

| Harmonization of the Saltin-Grimby Physical Activity Level Scale and the CONOR scale |  |  |
| :--- | :---: | :--- |
| Saltin-Grimby Physical Activity Level Scale levels |  | Categories of light and hard PA in the CONOR scale |

*Graff-Iversen S et. al. Two short questionnaires on leisure-time physical activity compared with serum lipids, anthropometric measurements and aerobic power in a suburban population from Oslo, Norway. European journal of epidemiology 2008; 23(3): 167-74.

|  | Men（ $\mathrm{n}=213,079$ ）${ }^{\text {a }}$ |  |  |  | Women（ $\mathrm{n}=224,299)^{\text {a }}$ |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | ＂Sedentary＂ | ＂Walking＂ | ＂Walk＋lift＂ | ＂Heavy labour＂ | ＂Sedentary＂ | ＂Walking＂ | ＂Walk＋lift＂ | ＂Heavy labour＂ |
| n | 81，536 | 57，374 | 45，629 | 28，540 | 64，420 | 113，130 | 42，133 | 4，616 |
| Age（years） | $41 \cdot 8 \pm 6 \cdot 2$ | $41 \cdot 8 \pm 6 \cdot 3$ | $40 \cdot 8 \pm 6 \cdot 5^{*} \#$ | $41 \cdot 4 \pm 7 \cdot 1 * \#$ a | $41 \cdot 4 \pm 6 \cdot 6$ | $41 \cdot 4 \pm 6 \cdot 1$ | $41 \cdot 0 \pm 6 \cdot 5 * \#$ | $42 \cdot 3 \pm 6 \cdot 7 * \#$ a |
| BMI（ $\mathrm{kg} \cdot \mathrm{m}^{-2}$ ）$)$ | $25 \cdot 6 \pm 3 \cdot 2$ | $25 \cdot 4 \pm 3 \cdot{ }^{*}$ | $25 \cdot 5 \pm 3 \cdot 2^{*} \#$ | $25 \cdot 6 \pm 3 \cdot 2 * \#$ a | $24 \cdot 2 \pm 3 \cdot 9$ | $24 \cdot 3 \pm 4 \cdot 0^{*}$ | $24 \cdot 7 \pm 4 \cdot 1 * \#$ | $25 \cdot 5 \pm 4 \cdot 3 * \#$ a |
| Systolic BP（mmHg） | $134 \cdot 4 \pm 14 \cdot 3$ | $134 \cdot 9 \pm 14 \cdot 5^{*}$ | $135 \cdot 1 \pm 14 \cdot 1$＊\＃ | $136 \cdot 3 \pm 14 \cdot 9 * \#$ a | $124 \cdot 9 \pm 15 \cdot 0$ | $126 \cdot 9 \pm 15 \cdot 9^{*}$ | $126 \cdot 1 \pm 15 \cdot 4^{* \#}$ | $130 \cdot 2 \pm 16 \cdot 7 * \#$ a |
| Diastolic BP（ mmHg ） | $81 \cdot 5 \pm 10 \cdot 4$ | $81 \cdot 4 \pm 10 \cdot 4$ | $80 \cdot 8 \pm 10 \cdot 4 * \#$ | $81 \cdot 1 \pm 10 \cdot 8^{*} \#$ व | $75 \cdot 8 \pm 10 \cdot 3$ | $77 \cdot 2 \pm 10 \cdot 5 *$ | 76．3土10．5＊\＃ | $78 \cdot 5 \pm 10 \cdot 8 * \#$ a |
| Resting heart rate（bpm） | $68 \cdot 9 \pm 12 \cdot 9$ | $69 \cdot 8 \pm 12 \cdot 8^{*}$ | $70 \cdot 5 \pm 12 \cdot 6 * \#$ | $69 \cdot 5 \pm 12 \cdot 6 * \#$ a | $73 \cdot 2 \pm 12 \cdot 3$ | $74 \cdot 6 \pm 12 \cdot 7 *$ | $73 \cdot 9 \pm 12 \cdot 1^{* \#}$ | $72 \cdot 8 \pm 12 \cdot 1 \#$ a |
| Cholesterol（mmol／l） | $5 \cdot 87 \pm 1 \cdot 14$ | $5 \cdot 88 \pm 1 \cdot 15$ | 5．92 $\pm 1 \cdot 19 * \#$ | $6 \cdot 02 \pm 1 \cdot 23 * \#$ a | $5 \cdot 51 \pm 1 \cdot 08$ | $5 \cdot 65 \pm 1 \cdot 13 *$ | $5 \cdot 64 \pm 1 \cdot 12 *$ | $5 \cdot 90 \pm 1 \cdot 19 * \#$ a |
| Triglycerides（mmol／l） | $2 \cdot 12 \pm 1 \cdot 38$ | $2 \cdot 11 \pm 1 \cdot 39$ | $2 \cdot 12 \pm 1 \cdot 40$ | $2 \cdot 12 \pm 1 \cdot 44$ | $1 \cdot 31 \pm 0 \cdot 80$ | $1 \cdot 38 \pm 0 \cdot 84^{*}$ | $1 \cdot 39 \pm 0 \cdot 85 * \#$ | $1 \cdot 48 \pm 0 \cdot 85 * \#$ a |
| Current smokers | 29，426（36．1\％） | 23，888（41．6\％）＊ | 22，760（49．9\％）＊\＃ | 13，042（45．7\％）／\＃a | 23，616（36．7\％） | 43，846（38．8\％）＊ | 18，502（43．9\％）＊\＃ | 1，602（34．7\％）＊\＃a |
| Prevalent CVD | 4，534（5．6\％） | 3，156（5．5\％） | 2，000（4•4\％）＊\＃ | 1，203（4．2\％）＊\＃ | 2，442（3．8\％） | 4，372（3．9\％） | 1，516（3．6\％）\＃ | 237 （5．1\％）＊\＃口 |
| Non－Nordic ethnicity | 1，675（2•1\％） | 1，440（2．5\％）＊ | 932 （2．0\％）\＃ | 263 （0．9\％）＊\＃口 | 1，204（1．9\％） | 2，002（1．8\％） | 754 （1．8\％） | $98(2 \cdot 1 \%) \#$ |
| Education ${ }^{\text {b }}$ |  |  |  |  |  |  |  |  |
| $1^{\text {st }}-\leq 10^{\text {th }}$ class | 9，339（11．5\％） | 10，906（19．0\％）＊ | 13，680（30．0\％）＊\＃ | 10，381（36．4\％）＊\＃a | 7，073（11．0\％） | 31，376（27．7\％）＊ | 10，470（24．9\％）＊\＃ | 1，669（36．2\％）＊\＃a |
| $11^{\text {th }}-12^{\text {th }}$ class | 20，035（24．6\％） | 17，727（30．9\％）＊ | 16，059（35．2\％）＊\＃ | 11，263（39．5\％）＊\＃a | 28，384（44－1\％） | 43，353（38．3\％）＊ | 19，175（45．5\％）＊\＃ | 2，227（48．3\％）＊\＃a |
| $13^{\text {th＋}}-14^{\text {th＋}}$ class | 19，541（24．0\％） | 14，325（25．0\％）＊ | 13，636（29．9\％）＊\＃ | 5，857（20．5\％）＊\＃a | 11，757（18．3\％） | 12，375（10．9\％）＊ | 5，490（13．0\％）＊\＃ | 421 （9•1\％）＊\＃a |
| $14^{\text {th }}-17^{\text {th }}$ class | 20，648（25－3\％） | 11，260（19．6\％）＊ | 1，933（4•2\％）＊\＃ | 811 （2．8\％）＊\＃a | 13，552（21．0\％） | 24，075（21－3\％） | 6，847（16．3\％）＊\＃ | 277 （6．0\％）＊\＃a |
| $18^{\text {th }}-20^{\text {tht }}$ class | 11，973（14．7\％） | 3，156（5．5\％）＊ | 321 （0．7\％）＊\＃ | 228 （0．8\％）＊\＃ | 3，654（5．7\％） | 1，951（1．7\％）＊ | 151 （0．4\％）＊\＃ | 22 （0．5\％）＊\＃ |
| Income ${ }^{\text {c }}$ |  |  |  |  |  |  |  |  |
| Level 1 | 2，610（3．2\％） | 2，261（3．9\％）＊ | 2，088（4．6\％）＊\＃ | 2，781（9．7\％）＊\＃a | 1，851（2．9\％） | 7，840（6．9\％）＊ | 1，047（2．5\％）＊\＃ | 269 （5．8\％）＊\＃a |
| Level 5 | 42，596（52－2\％） | $18 \cdot 169$（31．7\％）＊ | 9，534（20．9\％）＊\＃ | 5，488（19•2\％）＊\＃口 | 34，722（53．9\％） | 35，382（31－3\％）＊ | 13，028（30．9\％）＊ | 869 （18．8\％）＊\＃口 |
| Leisure time PA |  |  |  |  |  |  |  |  |
| ＂Sedentary＂ | 20，829（25－6\％） | 10，238（17．8\％）＊ | 8，924（19．6\％）＊\＃ | 6，277（22．0\％）＊\＃口 | 16，647（25－8\％） | 22，932（20．3\％）＊ | 9，126（21．7\％）＊\＃ | 1，054（22．8\％）＊\＃ |
| ＂Low＂ | 37，368（45．8\％） | 29，860（52．0\％）＊ | 22，143（48．5\％）＊\＃ | 11，624（40．7\％）＊\＃口 | 37，858（58．8\％） | 75，973（67－2\％）＊ | 25，122（59•6\％）＊\＃ | 2，225（48．2\％）＊\＃a |
| ＂Moderate＂ | 19，304（23．7\％） | 14，535（25．3\％）＊ | 12，407（27．2\％）＊\＃ | 8，798（30．8\％）＊\＃a | 8，566（13．3\％） | 12，766（11．3\％）＊ | 6，904（16．4\％）＊\＃ | 1，207（26．2\％）＊\＃a |
| ＂High＂ | 4，035（5．0\％） | 2，741（4．8\％） | 2，155（4•7\％） | 1，841（6．5\％）＊\＃口 | 1，349（2•1\％） | 1，459（1－3\％）＊ | 981 （2．3\％）＊\＃ | 130 （2．8\％）＊\＃a |
| Mortality（ n （\％）） | 13，676（16．8\％） | 11，536（20－1\％） | 10，144（22－2\％） | 7，799（27－3\％） | 6，809（10．6\％） | 17，882（15．8\％） | 5，423（12•9\％） | 934 （20．2\％） |
| Cause－specific mortality |  |  |  |  |  |  |  |  |
| CVD（ n （\％）） | 4，037（29•5\％） | 3，552（30．8\％） | 3，054（30．1\％） | 2，617（33．6\％） | 1，228（18．0\％） | 4，167（23•3\％） | 1，205（22－2\％） | 251 （26．9\％） |
| Cancer（n（\％）） | 5，148（37．6\％） | 4，253（36．9\％） | 3，711（36．6\％） | 2，625（33．7\％） | 3，433（50．4\％） | 7，830（43．8\％） | 2，541（46．9\％） | 345 （36．9\％） |
| Other causes（n（\％）） | 4，491（32．8\％） | 3，731（32．3\％） | 3，379（33．3\％） | $2 \cdot 557$（32．8\％） | 2，148（31－5\％） | $5 \cdot 885$（32．9\％） | 1，677（30．9\％） | 338 （36．2\％） |

Values are mean（SD）unless otherwise specified．＊Significantly different from＂Sedentary＂（p＜0．05）．\＃Significantly different from＂Walking＂（p＜0•05）．a Significantly different from＂Walk＋lift＂（ $\mathrm{p}<0 \cdot 05$ ）
Abbreviations：BMI，body mass index；BP，blood pressure；RHR，resting heart rate；bpm，beats per minute；PA，physical activity．
${ }^{\text {a }}$ Due to missing values， n varied from 212，866－212，889 and from 224，086－224，245 for diastolic BP，systolic BP，cholesterol and triglycerides and was 199，754 and 212，300 for resting heart rate in men and women，respectively．${ }^{\text {b }}$ Highest level attained from study entry to 31.12 .2001 ．${ }^{\text {c }}$ Percentage of participants that were consistently among the quintile with the lowest income during follow－up（Level 1）and that were among the quintile with the highest income at some point during follow－up（Level 5）．
Current smokers＝daily smokers with $<20$ pack years \＆daily smoker with $\geq 20$ pack years combined．Prevalent CVD＝Angina pectoris，antihypertensive medication use， diabetes mellitus，myocardial infarction or stroke．Non－Nordic ethnicity $=1$ ．generation immigrant without Nordic background and those born in Nordic country by non－ Nordic parents（Nordic＝Norway，Sweden，Denmark，Finland，Iceland or Faroe Islands）

Table S3．Additional background characteristics in men by occupational physical activity category

|  | $\mathrm{n}=213,079$ |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  | ＂Sedentary＂ | ＂Walking＂ | ＂Walk＋lift＂ | ＂Heavy labour＂ |
| n | 81，536 | 57，374 | 45，629 | 28，540 |
| Smoking status |  |  |  |  |
| Never | 30，224（37．1\％） | 18，284（31．9\％）＊ | 11，815（25．9\％）＊\＃ | 8，968（31．4\％）＊a |
| Former with＜20 pack years | 18，203（22．3\％） | 12，845（22．4\％） | 9，277（20．3\％）＊\＃ | 5，510（19．3\％）＊\＃a |
| Former with $\geq 20$ pack years | 3，683（4．5\％） | 2，357（4．1\％）＊ | 1，777（3．9\％）＊ | 1，020（3．6\％）＊\＃a |
| Current daily smoker with＜ 20 pack years | 18，489（22．7\％） | 16，116（28．1\％）＊ | 15，638（34．3\％）＊\＃ | 9，108（31．9\％）＊\＃口 |
| Current daily smoker with $\geq 20$ pack years | 10，937（13．4\％） | 7，772（13．6\％） | 7，122（15．6\％）＊\＃ | 3，934（13．8\％）${ }^{\text {a }}$ |
| Prevalent CVD |  |  |  |  |
| No prevalent CVD | 77，002（94．4\％） | 54，218（94．5\％） | 43，629（95．6\％）＊\＃ | 27，337（95．8\％）＊\＃ |
| Angina pectoris | 874 （1．1\％） | 646 （1．1\％） | 397 （0．9\％）＊\＃ | 250 （0．9\％）＊\＃ |
| Taking antihypertensive medications | 2，907（3．5\％） | 1，955（3．3\％） | 1，221（2．6\％）＊\＃ | 756 （2．6\％）＊\＃ |
| Diabetes mellitus | 830 （1．0\％） | 600 （1．1\％） | 354 （0．8\％）＊\＃ | 211 （0．7\％）＊\＃ |
| Myocardial infarction | 713 （0．9\％） | 539 （0．9\％） | 313 （0．7\％） | 177 （0．6\％） |
| Stroke | 298 （0．4） | 179 （0．3\％） | 90 （0．2\％）＊\＃ | 69 （0．2\％）＊ |
| Ethnicity ${ }^{a}$ |  |  |  |  |
| Nordic | 79，861（98．0\％） | 55，934（97．5\％）＊ | 44，697（98．0\％）\＃ | 28，277（99．1\％）＊\＃a |
| First gen．immigrant without Nordic background | 1，650（2．0\％） | 1，426（2．5\％）＊ | 925 （2．0\％）\＃ | 260 （0．9\％）＊\＃a |
| Born in Nordic country by non－Nordic parents | 25 （＜0．1\％） | 14 （＜0．1\％） | 7 （＜0．1\％） | 3 （＜0．1\％） |
| Income ${ }^{\text {b }}$ |  |  |  |  |
| Level 1 | 2，610（3．2\％） | 2，261（3．9\％）＊ | 2，088（4．6\％）＊\＃ | 2，781（9．7\％）＊\＃a |
| Level 2 | 5，291（6．5\％） | 7，050（12．3\％）＊ | 8，518（18．7\％）＊\＃ | 7，526（26．4\％）＊\＃口 |
| Level 3 | 10，937（13．4\％） | 12，520（21．8\％）＊ | 12，991（28．5\％）＊\＃ | 6，462（22．6\％）＊\＃口 |
| Level 4 | 20，102（24．7\％） | 17，374（30．3\％）＊ | 12，498（27．4\％）＊\＃ | 6，283（22．0\％）＊\＃a |
| Level 5 | 42，596（52．2\％） | 18.169 （31．7\％）＊ | 9，534（20．9\％）＊\＃ | 5，488（19．2\％）＊\＃a |

Values are mean（SD）unless otherwise specified．＊Significantly different from＂Sedentary＂（ $\mathrm{p}<0.05$ ）．\＃ Significantly different from＂Walking＂（ $\mathrm{p}<0.05$ ）．a Significantly different from＂Walk＋lift＂（ $\mathrm{p}<0.05$ ）
Abbreviations：BMI，body mass index；BP，blood pressure；RHR，resting heart rate；bpm，beats per minute；PA， physical activity；gen．，generation
${ }^{\text {a }}$ Nordic＝Norway，Sweden，Denmark，Finland，Iceland or Faroe Islands．${ }^{\text {b }}$ Highest attained income quintile
within study sample from study entry to 31．12．2001．
Table S4．Additional background characteristics in women by occupational physical activity category

|  | $\mathrm{n}=224,299$ |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  | ＂Sedentary＂ | ＂Walking＂ | ＂Walk＋lift＂ | ＂Heavy labour＂ |
| n | 64，420 | 113，130 | 42，133 | 4，616 |
| Smoking status |  |  |  |  |
| Never | 26，216（40．7\％） | 47，553（42．0\％）＊ | 15，380（36．5\％）＊\＃ | 2，277（49．3\％）＊\＃a |
| Former with＜20 pack years | 13，466（20．9\％） | 20，474（18．1\％）＊ | 7，622（18．1\％）＊ | 684 （14．8\％）＊\＃口 |
| Former with $\geq 20$ pack years | 1，122（1．7\％） | 1，257（1．1\％）＊ | 629 （1．5\％）＊\＃ | 53 （1．2\％）＊ |
| Current daily smoker with＜ 20 pack years | 18，895（29．3\％） | 37，248（32．9\％）＊ | 15，627（37．1\％）＊\＃ | 1，381（29．9\％）\＃a |
| Current daily smoker with $\geq 20$ pack years | 4，721（7．3\％） | 6，598（5．8\％）＊ | 2，875（6．8\％）＊\＃ | 221 （4．8\％）＊\＃口 |
| Prevalent CVD |  |  |  |  |
| No prevalent CVD | 61，978（3．8\％） | 4，372（3．9\％） | 1，516（3．6\％）\＃ | 237 （5．1\％）＊\＃口 |
| Angina pectoris | 266 （0．4\％） | 449 （0．4\％） | 136 （0．3\％）＊\＃ | 14 （0．3\％） |
| Taking antihypertensive medications | 1，755（2．7\％） | 3，300（2．9\％） | 1，174（2．7\％）＊ | 205 （4．3\％） |
| Diabetes mellitus | 472 （0．7\％） | 739 （0．7\％） | 259 （0．6\％）＊ | 30 （0．7\％） |
| Myocardial infarction | 117 （0．2\％） | 161 （0．1\％）＊ | 50 （0．1\％）＊ | 5 （0．1\％） |
| Stroke | 193 （0．3\％） | 273 （0．2\％）＊ | 74 （0．2\％）＊\＃ | 15 （0．3\％）${ }^{\text {a }}$ |
| Ethnicity ${ }^{a}$ |  |  |  |  |
| Nordic | 63，216（98．1\％） | 111，128（98．2\％） | 41，379（98．2\％） | 4，518（97．9\％） |
| First gen．immigrant without Nordic background | 1，187（1．8\％） | 1，987（1．8\％） | 751 （1．8\％） | 97 （2．1\％） |
| Born in Nordic country by non－Nordic parents | 17 （＜0．1\％） | 15 （＜0．1\％） | 3 （＜0．1\％）＊ | 3 （＜0．1\％） |
| Income ${ }^{\text {b }}$ |  |  |  |  |
| Level 1 | 1，851（2．9\％） | 7，840（6．9\％）＊ | 1，047（2．5\％）＊\＃ | 269 （5．8\％）＊\＃a |
| Level 2 | 3，322（5．2\％） | 14，889（13．2\％）＊ | 3，824（9．1\％）＊\＃ | 841 （18．2\％）＊\＃a |
| Level 3 | 7，183（11．2\％） | 25，675（22．7\％）＊ | 9，733（23．1\％）＊ | 1，447（31．4\％）＊\＃a |
| Level 4 | 17，342（26．9\％） | 29，344（25．9\％）＊ | 14，501（34．4\％）＊\＃ | 1，190（25．8\％）${ }^{\text {a }}$ |
| Level 5 | 34，722（53．9\％） | 35，382（31．3\％）＊ | 13，028（30．9\％）＊ | 869 （18．8\％）＊\＃口 |

Values are mean（SD）unless otherwise specified．＊Significantly different from＂Sedentary＂（ $\mathrm{p}<0.05$ ）．\＃
Significantly different from＂Walking＂（ $\mathrm{p}<0.05$ ）．a Significantly different from＂Walk＋lift＂（ $\mathrm{p}<0.05$ ）
Abbreviations：BMI，body mass index；BP，blood pressure；RHR，resting heart rate；bpm，beats per minute；PA， physical activity；gen．，generation
${ }^{\text {a }}$ Nordic＝Norway，Sweden，Denmark，Finland，Iceland or Faroe Islands．${ }^{\text {b }}$ Highest attained income quintile within study sample from study entry to 31．12．2001．

Table S5. Stability of occupational PA in a sub-sample from the Norwegian Counties Study that selfreported their level of occupational $P A$ at three time points during follow-up $(n=36,478)$

| Survey 1 (ca. 1975) vs. survey 2 (ca. 1980) |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | Survey 2 |  |  |  |  |
| Survey 1 | Sedentary | Walking | Walk+lift | Heavy labour |  |
| Sedentary | 4,475 (71\%) | 1,180 (19\%) | 473 (8\%) | 166 (3\%) | 6,294 |
| Walking | 1,852 (11\%) | 11,764 (68\%) | 3,143 (18\%) | 593 (3\%) | 17,352 |
| Walk+lift | 502 (7\%) | 2,263 (30\%) | 3,451 (45\%) | 1,402 (18\%) | 7,618 |
| Heavy labour | 210 (4\%) | 479 (9\%) | 1,275 (24\%) | 3,250 (62\%) | 5,214 |
|  | 7,039 | 15,686 | 8,342 | 5,411 | 36,478 |
| Survey 1 (ca. 1975) vs. survey 3 (ca. 1986) |  |  |  |  |  |
|  | Survey 3 |  |  |  |  |
| Survey 1 | Sedentary | Walking | Walk+lift | Heavy labour |  |
| Sedentary | 4,392 (70\%) | 1,252 (20\%) | 449 (7\%) | 201 (3\%) | 6,294 |
| Walking | 3,103 (18\%) | 10,510 (61\%) | 3,179 (18\%) | 560 (3\%) | 17,352 |
| Walk+lift | 972 (13\%) | 2,619 (34\%) | 2,785 (37\%) | 1,242 (16\%) | 7,618 |
| Heavy labour | 479 (9\%) | 769 (15\%) | 1,115 (21\%) | 2,851 (55\%) | 5,214 |
|  | 8,946 | 15,150 | 7,528 | 4,854 | 36,478 |
| Survey 2 (ca. 1980) vs. survey 3 (ca. 1986) |  |  |  |  |  |
|  | Survey 3 |  |  |  |  |
| Survey 2 | Sedentary | Walking | Walk+lift | Heavy labour |  |
| Sedentary | 5,190 (74\%) | 1,316 (19\%) | 384 (5\%) | 149 (2\%) | 7,039 |
| Walking | 2,460 (16\%) | 10,283 (66\%) | 2,570 (16\%) | 373 (2\%) | 15,686 |
| Walk+lift | 891 (11\%) | 2,839 (34\%) | 3,426 (41\%) | 1,186 (14\%) | 8,342 |
| Heavy labour | 405 (7\%) | 712 (13\%) | 1,148 (21\%) | 3,146 (58\%) | 5,411 |
|  | 8,946 | 15,150 | 7,528 | 4,854 | 36,478 |



Figure S1. Simplified DAGs of the total effect of occupational physical activity on mortality
Nodes: Green (with ) = exposure, Blue (with $\mathbf{I}$ ) = outcome, Blue = ancestor of outcome, Red = ancestor of exposure and outcome (confounder), White = adjusted variable, Grey = unobserved (latent) variable.
Arrows: Green = causal path, red = biasing path, black = blocked path
Abbreviations: PA= physical activity. LTPA=leisure time physical activity. $\mathrm{SES}=$ socioeconomic status.
BMI=body mass index.
Note: "Under-adjustment" is always a challenge in observational studies, i.e. residual confounding. However, "overadjustment" may also be a problem when: A) Adjusting for intermediates, which may attenuate the true causal effect of the exposure or even reverse it, leading to counterintuitive results; B) Adjusting for a variable that has an effect on the exposure, but not the outcome. I.e. variables that are not confounders, but rather ancestors of the exposure alone. This may lead to worsened precision and bias-amplification from unmeasured confounding; C) Adjusting for a confounder that has a strong effect on the exposure, but only weak effect on the outcome, may give similar problems (as in B)). This was assessed and ruled out by correlating confounders with the exposure (i.e. by estimating to what extent both variance and bias may be inflated (calculated as $1 /(1-\mathrm{rho} \wedge 2)$ ). See https://ftp.cs.ucla.edu/pub/stat_ser/r493.pdf for reference.


Figure S2. Comparison of associations from model C and sensitivity analyses S1-S3 between occupational physical activity, all-cause mortality, cardiovascular disease mortality and cancer mortality in men. RMST = restricted mean survival time. Model S1 = Model C + adjustment for resting heart rate (continuous). Model S2 = Model C + exclusion of participants with "prevalent CVD" (angina pectoris, hypertension, myocardial infarction, stroke or diabetes mellitus) at study entry and/or that died within the first 5 yrs. of followup. Model S3 $=$ Model S2 + restricted to those aged 30-50 years at study entry.


Figure S3. Comparison of associations from model C and sensitivity analyses S1-S3 between occupational physical activity, all-cause mortality, cardiovascular disease mortality and cancer mortality in women. RMST=restricted mean survival time. Model S1 = Model C + adjustment for resting heart rate (continuous). Model S2 = Model C + exclusion of participants with "prevalent CVD" (angina pectoris, hypertension, myocardial infarction, stroke or diabetes mellitus) at study entry and/or that died within the first 5 yrs. of followup. Model S3 $=$ Model S2 + restricted to those aged 30-50 years at study entry. Note: due to low cell counts, the birth cohort variable had to be dichotomized for women (born before/after 1950) when modelling the association between occupational PA and CVD mortality in model S3 to achieve model convergence.

All-cause mortality (model C)


Figure S4. Time varying hazard ratios (and $95 \%$ CIs (shaded areas)) between the sedentary occupations reference group and the three other occupational physical activity groups between age 50 and 90 from model C with all-cause mortality as the outcome (adjustment for age, sex, "calendar effects" (10-yr birth cohorts), highest attained education level, ethnicity, prevalent CVD, smoking, income, BMI and leisure time physical activity) modelled as interactions between the exposure and a spline of time with two degrees of freedom for each time-dependent effect.

CVD mortality (model C)


Figure S5. Time varying hazard ratios (and $95 \%$ CIs (shaded areas)) between the sedentary occupations reference group and the three other occupational physical activity groups between age 50 and 90 from model C with CVD mortality as the outcome (adjustment for age, sex, "calendar effects" (10-yr birth cohorts), highest attained education level, ethnicity, prevalent CVD, smoking, income, BMI and leisure time physical activity) modelled as interactions between the exposure and a spline of time with two degrees of freedom for each time-dependent effect.

## Cancer mortality (model C)



Figure S6. Time varying hazard ratios (and $95 \%$ CIs (shaded areas)) between the sedentary occupations reference group and the three other occupational physical activity groups between age 50 and 90 from model $C$ with cancer mortality as the outcome (adjustment for age, sex, "calendar effects" (10-yr birth cohorts), highest attained education level, ethnicity, prevalent CVD, smoking, income, BMI and leisure time physical activity) modelled as interactions between the exposure and a spline of time with two degrees of freedom for each time-dependent effect.

