Table S5. Association of polypharmacy and PIMs with dysphagia at discharge as scenario analysis

	Model 1				Model 2				Model 3			
	β	**SE**	**95% CI**	**p-value**	**β**	**SE**	**95% CI**	**p-value**	**β**	**SE**	**95% CI**	**p-value**
Base analysis												
-Complete case analysis												
Polypharmacy definition ≥5	0.03	0.06	-0.09, 0.15	0.615	0.04	0.06	-0.08, 0.16	0.565	0.03	0.06	-0.09, 0.16	0.572
Sensitive analysis												
Polypharmacy definition ≥6	0.02	0.05	-0.08, 0.13	0.676	0.03	0.05	-0.07, 0.12	0.450	0.02	0.05	-0.09, 0.13	0.683
PIMs individual category												
Proton pump inhibitors	0.02	0.05	-0.08, 0.12	0.653	0.02	0.04	-0.05, 0.10	0.540	0.02	0.05	-0.08, 0.12	0.704
-Multiple imputation approach												
Polypharmacy definition ≥5	0.03	0.06	-0.09, 0.14	0.480	0.03	0.06	-0.08, 0.15	0.547	0.03	0.06	-0.08, 0.15	0.542
Polypharmacy definition ≥6	0.02	0.05	-0.08, 0.13	0.468	0.03	0.05	-0.08, 0.13	0.477	0.02	0.05	-0.08, 0.13	0.456

PIMs, potentially inappropriate medications; β, unstandardized coefficient; SE, Standard error; CI, confidence interval.

Model 1 represents “polypharmacy (without polypharmacy=0, as reference, or with polypharmacy=1) + age + gender + primary diagnosis at hospitalization + Charlson Comorbidity Index + FILS at baseline + hospital type were introduced into the analytical models,” Model 2 represents “Model 1 + general sarcopenia were introduced into the analytical models,” and Model 3 represents “Model 2 + primary diseases were introduced into the analytical models.”

We excluded patients with esophageal cancer (ICD-10 codes C15x; n=1), laryngeal cancer (C32x; n=1), pharyngeal cancer (C14x; n=0), stroke (I630, I631–I636, I638, I639, I600–I611, I613–I616, I619, I629, and G459; n=102), Alzheimer disease (G20; n=2), head injury (S00x–S19x; n=11), Parkinson disease (G20x; n=5), and pneumonia (J15x, J18x, J690; n=37)

Regarding PIMs individual category, we confirmed that there were 0 or 1 case except for proton pump inhibitors in patients without polypharmacy from a frequency table.