Supplementary Table 4: Average annual change* in lung function and symptoms domain of health status related to baseline sedentary time (multivariable linear regression model†), according to baseline moderate-to-vigorous physical activity (MVPA).

	Low MVPA (<52 min.day^{-1})	High MVPA (≥ 52 min.day^{-1})	
	Per hour.day^{-1} increase in sedentary time Estimate (95% CI)	Per hour.day^{-1} increase in sedentary time Estimate (95% CI)	p-value
ΔFEV_1 (ml.year^{-1})	-5.90 (-27 to 15)	-6.77 (-28 to 14)	0.95
ΔFVC (ml.year^{-1})	-23.22 (-63 to 17)	-0.87 (-30 to 28)	0.39
ΔDL_{co} (ml/min/mmHg.year^{-1})	-0.43 (-0.82 to -0.05)	-0.29 (-0.68 to 0.10)	0.97
$\Delta SGRQ_{symptoms}$score (points.year^{-1})	0.71 (-0.67 to 2.08)	0.20 (-0.80 to 1.20)	0.32

MVPA = moderate-to-vigorous physical activity, FEV_1 = forced expiratory volume in 1 second, FVC = forced vital capacity, DL_{co} = diffusion capacity of the lung carbon monoxide, SGRQ = Saint George's respiratory questionnaire.

* Negative values represent a decline in the outcome measure.

† Every cell is a single multivariable model adjusted for baseline value of the corresponding outcome and (i) age, sex, exacerbation history (≥1 / 0), BMI, Charlson index, smoking status (current / not current), pack-years and duration of daylight for lung function variables, or (ii) age, sex, exacerbation history (≥1 / 0), smoking status, FEV_1% predicted, 6MWD and duration of daylight for SGRQ. The full list of potential confounders included: age, sex, education, marital status, work status, baseline smoking status, smoking history expressed as pack-years, medication (including long acting bronchodilators, inhaled corticosteroids and a combined inhaled therapy), diet (including vegetables, meat and fruit intake), Charlson index, BMI, FFM, FFMi, mMRC, COPD exacerbation history, FEV_1 % predicted, hand grip force, 6MWD and duration of daylight. Criteria for keeping them in the final model are detailed in the methods (complete version).