Table 1 Supplementary. Results from logistic univariate analysis of (A) high-risk drinking and (B) any drinking

A Variable	р	OR (95% CI)
Diagnosis		
RA	0.008	0.2 (0.1-0.7)
PsA	0.29	1.5 (0.7-3.1)
AS	<0.0001	4.5 (2.0-10.0)
Male Gender	0.001	6.9 (2.4-19.4)
Low Disease Activity*	0.038	6.1 (1.0-37.6)
Smoking	0.17	2.9 (0.6-13.8)
Presence of erosions	0.92	0.9 (0.3-1.4)
Methotrexate use	0.083	0.5 (0.2-1.1)
B Variable	р	OR (95% CI)
Diagnosis		
RA	0.195	0.6 (0.3-1.3)
PsA	0.03	1.9 (1.1-3.5)
AS	0.03	0.5 (0.3-0.9)
Male Gender	0.034	1.8 (1.1-3.1)
Low Disease Activity*	0.476	2.2 (0.2-19.4)
Smoking	0.155	1.7 (0.8-3.4)
Presence of erosions	0.44	0.8 (0.5-1.4)
Methotrexate use	0.541	0.8 (0.5-1.43)

RA: rheumatoid arthritis, AS: ankylosing spondylitis, PsA: psoriatic arthritis. Low Disease Activity*as defined by DAS28-CRP \leq 2.6 for patients with RA or PsA and as a BASDAI \leq 4 for patients with AS.

Table 2 Supplementary. Results from linear univariate analysis of alcohol consumption in weekly units

Variable	р	R^2
Age	0.315	0.005
DAS28-CRP	0.061	0.21
TJC	0.676	0.001
SJC	0.247	0.005
CRP	0.669	0.001
HAQ	0.0001	0.079
Morning Stiffness	0.721	0.001

DAS28-CRP: Disease activity score for a 28 joint count-based on C reactive protein, TJC: Tender joint count, SJC: swollen joint count, CRP: C reactive protein, HAQ: health assessment questionnaire.

Table 3 Supplementary. Results from multivariate logistic analysis of high-risk alcohol use

Variable	р	OR (95% CI)
Rheumatoid Arthritis	0.648	0.7 (0.1-3.6)
Male Gender	0.002	33.3 (3.6-307.4)
Low Disease Activity*	0.046	9.3 (1.0-218.2)
Smoking	0.082	8.7 (0.8-101.3)
Methotrexate use	0.322	2.3 (0.4-13.3)