

Supplement 30. Results for analyses investigating offspring neurodevelopmental outcomes in children of women who continued antidepressants in pregnancy versus those who discontinued. Sample restricted to those with linked data, fully adjusted model includes variable measuring the IMD decile.

	Multivariable regression				Propensity score matched regression	
	Crude ¹		Fully adjusted ²			
	OR (95% CI) ³	p-value	OR (95% CI) ³	p-value	OR (95% CI) ³	p-value
Autism	1.25 (0.95, 1.64)	0.108	1.24 (0.95, 1.64)	0.120	1.25 (0.91, 1.73)	0.174
ADHD	0.97 (0.73, 1.31)	0.861	1.01 (0.74, 1.36)	0.967	1.07 (0.75, 1.51)	0.720
Intellectual disability	0.77 (0.49, 1.23)	0.277	0.85 (0.51, 1.41)	0.527	0.94 (0.56, 1.55)	0.796

(1) Unadjusted association (2) Association adjusted for calendar year, maternal age, number of days consulted with GP in year prior to pregnancy, Charlson Comorbidity Index score at conception, past diagnosis of alcohol-related disorders, psychosis, anxiety disorders, self-harm, bipolar affective disorder, eating disorders, personality disorders, sleep disorders and neuropathic pain disorders at conception, use of medications for physical health problems, central nervous system agents, and nutritional supplements during the treatment window, smoking status at conception, any recorded severity of past depressive symptoms, region of the GP practice, concurrent use of multiple antidepressants, switching from one antidepressant to another and IMD decile. (3) Odds ratio with 95% confidence interval. (4) Multivariable regression estimates based on n=8,719 pregnancies where antidepressants had been continued, and n=6,285 pregnancies where antidepressants had been discontinued at least two months prior to conception. (5) Propensity score matched regression estimates based on n=5,355 pregnancies where antidepressants had been continued, and n=5,355 pregnancies where antidepressants had been discontinued at least two months prior to conception.