Table SII. Association between psoriasis and chronic obstructive pulmonary disease (COPD) in current smokers, stratified by pack-years

	< 10 pack years $n = 1,711$		10-20 pack years $n = 715$		\geq 20 pack years $n = 1,061$	
	aOR (95% CI)	<i>p</i> -value	aOR (95% CI)	<i>p</i> -value	aOR (95% CI)	<i>p</i> -value
Psoriasis	2.02 (0.59-6.89)	< 0.2560	2.33 (0.61-9.00)	< 0.2128	2.17 (1.06-4.44)	< 0.0339
Age	1.05 (1.03-1.07)	< 0.0001	1.02 (0.98-1.05)	< 0.3779	1.02 (1.00-1.04)	< 0.0461
Sex (male/female)	0.60 (0.38-0.96)	< 0.0349	0.59 (0.33-1.07)	< 0.0823	0.35 (0.22-0.56)	< 0.0001
Race (white/non-white)	2.05 (1.19-3.53)	< 0.0105	2.19 (1.17-4.09)	< 0.0148	1.38 (0.84-2.24)	< 0.1966
Insurance status	0.87 (0.44-1.72)	< 0.6845	0.78 (0.33-1.87)	< 0.5730	1.52 (0.81-2.88)	< 0.1894
Healthcare access	1.09 (0.65-1.81)	< 0.7497	0.76 (0.33-1.73)	< 0.5012	2.03 (0.81-5.04)	< 0.1264
Obesity	1.37 (0.78-2.39)	< 0.2693	1.32 (0.74-2.35)	< 0.3354	1.35 (0.82-2.88)	< 0.2385

Survey-weighted multivariable logistic regression models were constructed with self-reported COPD as the dependent variable and self-reported history of physician-diagnosed psoriasis as the independent variable.

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Adjusted odds ratio (OR) and 95% confidence interval (95% CI) were computed for psoriasis in current smokers with a (i) smoking history of <10 pack-years, (ii) smoking history of 10-20 pack-years, and (iii) smoking history of ≥20 pack-years with the following covariates: age (linear), sex (male/female), race/ethnicity (white/non-white), insurance status (covered/not covered), routine place to go for healthcare (yes/more than one place/no routine access to healthcare), and obesity (body mass index (BMI)≥30/BMI <30). Bold values indicate significant results. 2-sided p-value < 0.05 was statistically significant.