**Supplementary Material 1.**

**The RECORD statement – checklist of items, extended from the STROBE statement, that should be reported in observational studies using routinely collected health data.**

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|  | **Item No.** | **STROBE items** | **Location in manuscript where items are reported** | **RECORD items** | **Location in manuscript where items are reported** |
| **Title and abstract** | | | | | |
|  | 1 | (a) Indicate the study’s design with a commonly used term in the title or the abstract (b) Provide in the abstract an informative and balanced summary of what was done and what was found |  | RECORD 1.1: The type of data used should be specified in the title or abstract. When possible, the name of the databases used should be included.  RECORD 1.2: If applicable, the geographic region and timeframe within which the study took place should be reported in the title or abstract.  RECORD 1.3: If linkage between databases was conducted for the study, this should be clearly stated in the title or abstract. | Abstract under section “Participants”  Abstract. Geographic region under “Settings”, timeframe under “Interventions”  Not applicable |
| **Introduction** | | | | | |
| Background rationale | 2 | Explain the scientific background and rationale for the investigation being reported |  |  | Main text, under section “Background” |
| Objectives | 3 | State specific objectives, including any prespecified hypotheses |  |  | Main text, under section “Background” |
| **Methods** | | | | | |
| Study Design | 4 | Present key elements of study design early in the paper |  |  | Main text. Section: “Methods”. Subsection: “Study design”. |
| Setting | 5 | Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection |  |  | Main text. Section “Methods”. Subsections: “Data sources” and “Exposure, outcomes and potential confounders”. |
| Participants | 6 | *(a) Cohort study* - Give the eligibility criteria, and the sources and methods of selection of participants. Describe methods of follow-up  *Case-control study* - Give the eligibility criteria, and the sources and methods of case ascertainment and control selection. Give the rationale for the choice of cases and controls  *Cross-sectional study* - Give the eligibility criteria, and the sources and methods of selection of participants  *(b) Cohort study* - For matched studies, give matching criteria and number of exposed and unexposed  *Case-control study* - For matched studies, give matching criteria and the number of controls per case |  | RECORD 6.1: The methods of study population selection (such as codes or algorithms used to identify subjects) should be listed in detail. If this is not possible, an explanation should be provided.  RECORD 6.2: Any validation studies of the codes or algorithms used to select the population should be referenced. If validation was conducted for this study and not published elsewhere, detailed methods and results should be provided.  RECORD 6.3: If the study involved linkage of databases, consider use of a flow diagram or other graphical display to demonstrate the data linkage process, including the number of individuals with linked data at each stage. | Main text. Section: “Methods”. Subsection: “Data sources”.  Not reported because we used all the population of Italy and all the confirmed cases  Not linkage was performed. |
| Variables | 7 | Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable. |  | RECORD 7.1: A complete list of codes and algorithms used to classify exposures, outcomes, confounders, and effect modifiers should be provided. If these cannot be reported, an explanation should be provided. | Main text. Section: “Methods”. Subsection: “Exposure, outcomes and potential confounders” |
| Data sources/ measurement | 8 | For each variable of interest, give sources of data and details of methods of assessment (measurement).  Describe comparability of assessment methods if there is more than one group |  |  | Main text. Section: “Methods”. Subsection: “Data sources” |
| Bias | 9 | Describe any efforts to address potential sources of bias |  |  | Main text. Section: “Methods”. Subsection: “Statistical analysis” |
| Study size | 10 | Explain how the study size was arrived at |  |  | Not reported because we included all cases of confirmed COVID and all the population of Italy |
| Quantitative variables | 11 | Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen, and why |  |  | Main text. Section: “Methods”. Subsection: “Statistical analysis” |
| Statistical methods | 12 | (a) Describe all statistical methods, including those used to control for confounding  (b) Describe any methods used to examine subgroups and interactions  (c) Explain how missing data were addressed  (d) *Cohort study* - If applicable, explain how loss to follow-up was addressed  *Case-control study* - If applicable, explain how matching of cases and controls was addressed  *Cross-sectional study* - If applicable, describe analytical methods taking account of sampling strategy  (e) Describe any sensitivity analyses |  |  | Main text. Section: “Methods”. Subsection: “Statistical analysis” |
| Data access and cleaning methods |  | .. |  | RECORD 12.1: Authors should describe the extent to which the investigators had access to the database population used to create the study population.  RECORD 12.2: Authors should provide information on the data cleaning methods used in the study. | Main text. Section: “Methods”. Subsection: “Data sources”.  Main text. Section: “Methods”. Subsection: “Statistical analysis” |
| Linkage |  | .. |  | RECORD 12.3: State whether the study included person-level, institutional-level, or other data linkage across two or more databases. The methods of linkage and methods of linkage quality evaluation should be provided. | No linkage was performed |
| **Results** | | | | | |
| Participants | 13 | (a) Report the numbers of individuals at each stage of the study (*e.g.*, numbers potentially eligible, examined for eligibility, confirmed eligible, included in the study, completing follow-up, and analysed)  (b) Give reasons for non-participation at each stage.  (c) Consider use of a flow diagram |  | RECORD 13.1: Describe in detail the selection of the persons included in the study (*i.e.,* study population selection) including filtering based on data quality, data availability and linkage. The selection of included persons can be described in the text and/or by means of the study flow diagram. | Main text. Section: “Methods”. Subsection: “Statistical analysis” and under section “Results” |
| Descriptive data | 14 | (a) Give characteristics of study participants (*e.g.*, demographic, clinical, social) and information on exposures and potential confounders  (b) Indicate the number of participants with missing data for each variable of interest  (c) *Cohort study* - summarise follow-up time (*e.g.*, average and total amount) |  |  | Main text. Section “Results”. Table 1. |
| Outcome data | 15 | *Cohort study* - Report numbers of outcome events or summary measures over time  *Case-control study* - Report numbers in each exposure category, or summary measures of exposure  *Cross-sectional study* - Report numbers of outcome events or summary measures |  |  | Main text. Section: “Results”. Table 2. |
| Main results | 16 | (a) Give unadjusted estimates and, if applicable, confounder-adjusted estimates and their precision (e.g., 95% confidence interval). Make clear which confounders were adjusted for and why they were included  (b) Report category boundaries when continuous variables were categorized  (c) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period |  |  | Main text. Section: “Results”. Table 3. |
| Other analyses | 17 | Report other analyses done—e.g., analyses of subgroups and interactions, and sensitivity analyses |  |  | Not applicable |
| **Discussion** | | | | | |
| Key results | 18 | Summarise key results with reference to study objectives |  |  | Main text. Section: “Discussion”. Subsection: “Statement of principal findings” |
| Limitations | 19 | Discuss limitations of the study, taking into account sources of potential bias or imprecision. Discuss both direction and magnitude of any potential bias |  | RECORD 19.1: Discuss the implications of using data that were not created or collected to answer the specific research question(s). Include discussion of misclassification bias, unmeasured confounding, missing data, and changing eligibility over time, as they pertain to the study being reported. | Main text. Section: “Discussion”. Subsection: “Strengths and weaknesses of the study” |
| Interpretation | 20 | Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence |  |  | Main text. Section: “Discussion”. Subsection: “Strengths and weaknesses in relation to other studies, discussing important differences in results” |
| Generalisability | 21 | Discuss the generalisability (external validity) of the study results |  |  | Main text. Section: “Discussion”. Subsection: “Strengths and weaknesses in relation to other studies, discussing important differences in results” |
| **Other Information** | | | | | |
| Funding | 22 | Give the source of funding and the role of the funders for the present study and, if applicable, for the original study on which the present article is based |  |  | Main text. Section “Funding” |
| Accessibility of protocol, raw data, and programming code |  | .. |  | RECORD 22.1: Authors should provide information on how to access any supplemental information such as the study protocol, raw data, or programming code. | Main text. Section: “Methods”. |

\*Reference: Benchimol EI, Smeeth L, Guttmann A, Harron K, Moher D, Petersen I, Sørensen HT, von Elm E, Langan SM, the RECORD Working Committee. The REporting of studies Conducted using Observational Routinely-collected health Data (RECORD) Statement. *PLoS Medicine* 2015; in press.

\*Checklist is protected under Creative Commons Attribution ([CC BY](http://creativecommons.org/licenses/by/4.0/)) license.

**Supplementary Material 2.**

**Statistical multivariate models: Equation for the negative binomial models carried out using glmmTMB package of R statistical software:**

Model 1. Adjusted for sex and age.

Model 2. Adjusted for sex, age and population density.

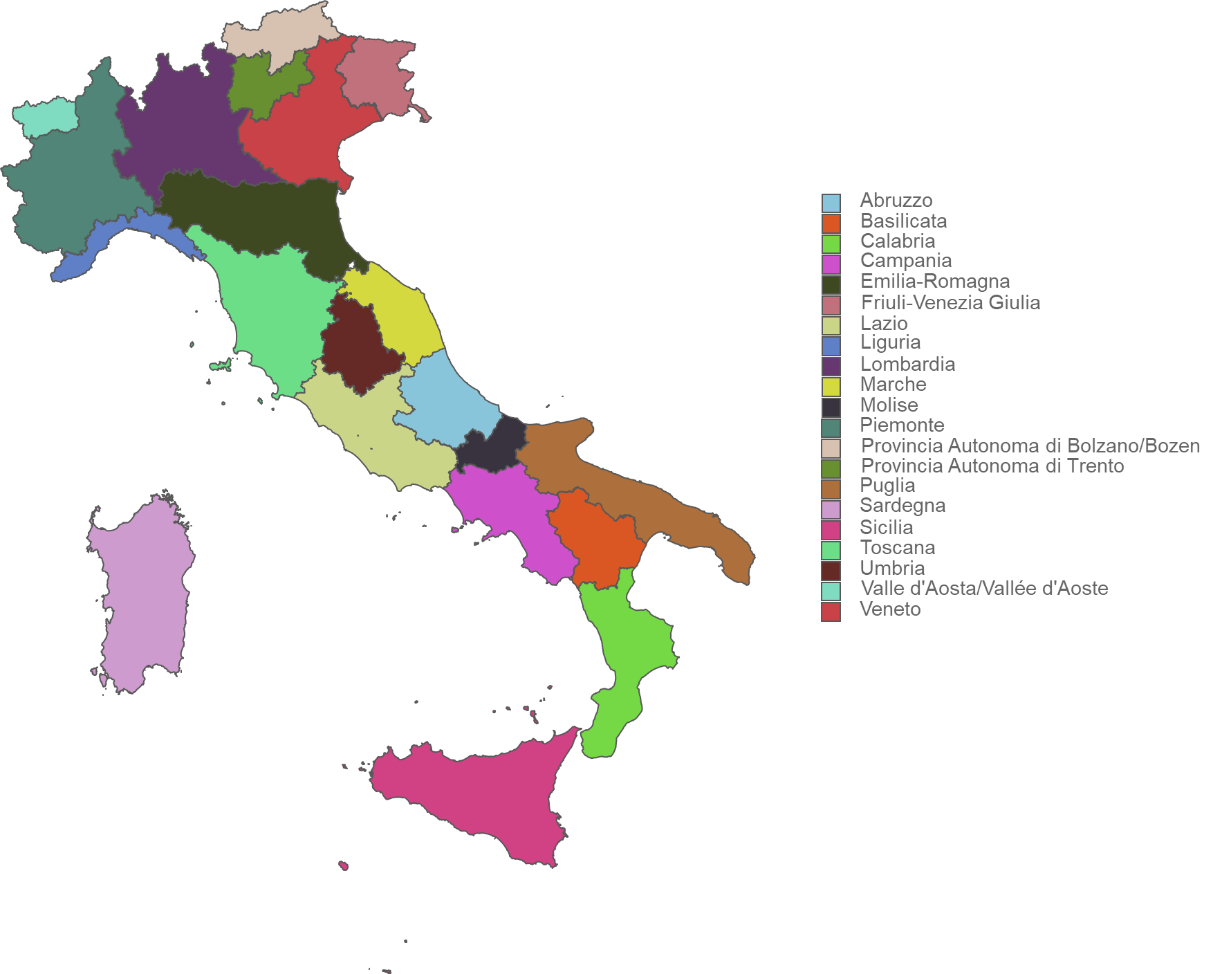
Model 3. Adjusted for sex, age, population density and region of diagnosis.

Where is the number of cases/hospitalisations/deaths in each municipality “*m*”, for each sex “*s”*, each epidemic period “*e”* and each age group “*a*”. Deprivation is the quintile of deprivation/income of each municipality “*m”*; population density is the number of population per km2 in each municipality “*m*” in tertiles; region refers to the region where each municipality “m” is located; macroarea to the macroarea where the municipality “*m*” is located; and the population-days, as the offset, refers to the log of the number of days that each population (for a given municipality “*m*”, sex “*s*”, and age group “*a*”) spends in each epidemic period “*e*”. One model was calculated for each period and each outcome (9 models in total).

**List of R packages used in the analysis:** "lubridate", "sf", "haven", "visdat", "readr", "Hmisc", "wesanderson", "Epi", "gtools", "readxl", "janitor", "broom", "stringr", "knitr", "rcartocolor", "inspectdf", "glue", "scales", "patchwork", "modi", "xlsx", "effects", "tidyverse", "dotwhisker", "naniar", “glmmTMB”, “tictoc”.

**Supplementary Material 3.**

**Figure S2. Map of the 21 Italian regions and autonomous provinces**



**Supplementary Material 4. Full results of the multilevel negative binomial regression analysis**

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| S4.1. Incidence Rate Ratios (IRR) and 95% confidence interval (95% CI) of the results of the multilevel negative binomial regression analysis for the association between COVID-19 incidence and deprivation in Italian municipalities | | | | | | | | | | | |
| **Incidence IRR [95%CI]** | | | | | | | | | | | |
|  | **Model 1. Adjusted for sex and age** | | | | **Model 2. Adjusted for sex, age and population density** | | | | **Model 3. Adjusted for sex, age, population density and region of residence** | | |
|  | Pre-lockdown | Lockdown | | Post-lockdown | Pre-lockdown | Lockdown | | Post-lockdown | Pre-lockdown | Lockdown | Post-lockdown |
| Deprivation | | | | | | | | | | | |
| Q1 | Ref | Ref | | Ref | Ref | Ref | | Ref | Ref | Ref | Ref |
| Q2 | 0.97 [0.83-1.14] | 0.92 [0.84-1.02] | | 1.19 [1.09-1.29] | 0.81 [0.69-0.95] | 0.81 [0.73-0.89] | | 1.11 [1.02-1.21] | 0.80 [0.71-0.91] | 0.95 [0.88-1.03] | 1.12 [1.03-1.21] |
| Q3 | 1.09 [0.93-1.27] | 0.89 [0.80-0.98] | | 1.15 [1.06-1.25] | 0.83 [0.71-0.97] | 0.72 [0.65-0.80] | | 1.03 [0.95-1.13] | 0.92 [0.80-1.05] | 1.01 [0.93-1.09] | 1.11 [1.02-1.20] |
| Q4 | 0.67 [0.57-0.78] | 0.64 [0.57-0.71] | | 0.99 [0.91-1.08] | 0.50 [0.43-0.59] | 0.52 [0.47-0.58] | | 0.90 [0.83-0.98] | 1.00 [0.87-1.16] | 1.18 [1.08-1.29] | 1.16 [1.06-1.27] |
| Q5 | 0.21 [0.18-0.25] | 0.23 [0.21-0.26] | | 0.85 [0.78-0.92] | 0.15 [0.13-0.18] | 0.18 [0.16-0.20] | | 0.74 [0.68-0.81] | 1.17 [0.98-1.41] | 1.14 [1.03-1.27] | 1.47 [1.32-1.63] |
| Sex | | | | | | | | | | | |
| Females | Ref | Ref | | Ref | Ref | Ref | | Ref | Ref | Ref | Ref |
| Males | 1.94 [1.88-2.01] | 0.98 [0.96-1] | | 1.1 [1.08-1.12] | 1.95 [1.88-2.02] | 0.98 [0.96-1] | | 1.1 [1.08-1.12] | 1.94 [1.88-2.01] | 0.98 [0.96-1] | 1.1 [1.08-1.12] |
| Population density | | | | | | | | | | | |
|  |  |  | <54.6 ppkm2 | | Ref | Ref | | Ref | Ref | Ref | Ref |
|  |  |  | 54.6-106 ppkm2 | | 1.47 [1.24-1.74] | 1.35 [1.22-1.5] | | 1.06 [0.98-1.15] | 1.24 [1.07-1.44] | 1.14 [1.05-1.23] | 1.09 [1-1.18] |
|  |  |  | >106 ppkm2 | | 3.22 [2.8-3.71] | 2.36 [2.17-2.56] | | 1.63 [1.52-1.74] | 1.26 [1.11-1.43] | 1.18 [1.1-1.27] | 1.38 [1.29-1.49] |
| Region of diagnosis | | | | | | | | | | | |
|  |  |  | |  |  |  | Abruzzo | | Ref | Ref | Ref |
|  |  |  | |  |  |  | Basilicata | | 0.19 [0.1-0.38] | 0.37 [0.28-0.5] | 0.63 [0.5-0.81] |
|  |  |  | |  |  |  | Calabria | | 0.2 [0.13-0.31] | 0.29 [0.24-0.36] | 0.17 [0.14-0.21] |
|  |  |  | |  |  |  | Campania | | 0.41 [0.29-0.57] | 0.45 [0.37-0.54] | 0.81 [0.69-0.95] |
|  |  |  | |  |  |  | Emilia-Romagna | | 7.59 [5.59-10.3] | 4.46 [3.72-5.34] | 1.44 [1.21-1.7] |
|  |  |  | |  |  |  | Friuli-Venezia Giulia | | 1.66 [1.15-2.4] | 1.24 [1-1.54] | 1.24 [1.02-1.52] |
|  |  |  | |  |  |  | Lazio | | 0.67 [0.47-0.95] | 0.98 [0.81-1.18] | 1.1 [0.93-1.3] |
|  |  |  | |  |  |  | Liguria | | 2.69 [1.89-3.83] | 3.85 [3.15-4.69] | 1.49 [1.23-1.8] |
|  |  |  | |  |  |  | Lombardia | | 11.79 [8.93-15.57] | 6.26 [5.35-7.32] | 1.54 [1.34-1.78] |
|  |  |  | |  |  |  | Marche | | 3.43 [2.45-4.82] | 2.59 [2.12-3.17] | 0.98 [0.81-1.18] |
|  |  |  | |  |  |  | Molise | | 0.29 [0.14-0.61] | 0.57 [0.42-0.77] | 0.83 [0.65-1.07] |
|  |  |  | |  |  |  | Piemonte | | 2.64 [1.97-3.53] | 4.56 [3.89-5.35] | 1.07 [0.92-1.25] |
|  |  |  | |  |  |  | PA di Bolzano | | 2.39 [1.58-3.63] | 3.16 [2.49-4] | 1.44 [1.15-1.8] |
|  |  |  | |  |  |  | PA di Trento | | 4.16 [2.79-6.2] | 7.49 [5.99-9.36] | 1.61 [1.29-2.02] |
|  |  |  | |  |  |  | Puglia | | 0.41 [0.28-0.59] | 0.46 [0.38-0.57] | 0.38 [0.32-0.46] |
|  |  |  | |  |  |  | Sardegna | | 0.14 [0.09-0.24] | 0.29 [0.23-0.36] | 1.13 [0.95-1.35] |
|  |  |  | |  |  |  | Sicilia | | 0.25 [0.17-0.36] | 0.34 [0.28-0.41] | 0.59 [0.49-0.69] |
|  |  |  | |  |  |  | Toscana | | 1.69 [1.21-2.35] | 1.75 [1.44-2.12] | 1.7 [1.43-2.03] |
|  |  |  | |  |  |  | Umbria | | 1.11 [0.69-1.78] | 1.21 [0.93-1.59] | 1.49 [1.17-1.91] |
|  |  |  | |  |  |  | Valle d’Aosta | | 6.84 [4.24-11.04] | 5.59 [4.2-7.45] | 2.28 [1.72-3.04] |
|  |  |  | |  |  |  | Veneto | | 3.02 [2.24-4.09] | 2.47 [2.08-2.94] | 1.46 [1.24-1.71] |
| ICC | 0.689\*\* | 0.575\*\* | | 0.430\*\* | 0.689\*\* | 0.571\*\* | 0.431\*\* | | 0.522\*\* | 0.389\*\* | 0.384\*\* |
| \*Random intercepts were included in the models to account for clustering of observations at the municipality level.  ICC = Intraclass Correlation Coefficient  \*\* Likelihood Ratio test < 0.05 | | | | | | | | | | | |
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| S4.2. Incidence Rate Ratios (IRR) and 95% confidence interval (95% CI) of the results of the multilevel negative binomial regression analysis for the association between case-hospitalisation from COVID-19 and deprivation in Italian municipalities | | | | | | | | | | | |
| **Case-hospitalisation (within 40 days of diagnosis) IRR [95%CI]** | | | | | | | | | | | |
|  | **Model 1. Adjusted for sex and age** | | | | **Model 2. Adjusted for sex, age and population density** | | | | **Model 3. Adjusted for sex, age, population density and region of residence** | | |
|  | Pre-lockdown | Lockdown | | Post-lockdown | Pre-lockdown | Lockdown | | Post-lockdown | Pre-lockdown | Lockdown | Post-lockdown |
| Deprivation | | | | | | | | | | | |
| Q1 | Ref | Ref | | Ref | Ref | Ref | | Ref | Ref | Ref | Ref |
| Q2 | 1.11 [0.88-1.40] | 1.59 [1.32-1.91] | | 0.97 [0.82-1.16] | 1.09 [0.86-1.38] | 1.49 [1.24-1.80] | | 0.97 [0.81-1.15] | 0.88 [0.71-1.09] | 1.00 [0.85-1.16] | 0.92 [0.77-1.08] |
| Q3 | 1.15 [0.92-1.44] | 1.63 [1.36-1.96] | | 1.07 [0.90-1.27] | 1.12 [0.89-1.42] | 1.49 [1.24-1.80] | | 1.06 [0.89-1.26] | 0.88 [0.71-1.09] | 0.93 [0.79-1.09] | 0.95 [0.81-1.13] |
| Q4 | 0.99 [0.78-1.25] | 1.39 [1.15-1.67] | | 1.10 [0.93-1.30] | 0.96 [0.75-1.23] | 1.27 [1.04-1.53] | | 1.09 [0.92-1.29] | 0.81 [0.65-1.03] | 0.86 [0.73-1.03] | 0.99 [0.83-1.19] |
| Q5 | 0.82 [0.63-1.07] | 1.58 [1.29-1.92] | | 1.02 [0.86-1.21] | 0.80 [0.61-1.05] | 1.42 [1.16-1.73] | | 1.01 [0.85-1.20] | 0.68 [0.51-0.92] | 0.89 [0.72-1.1] | 0.99 [0.81-1.22] |
| Sex | | | | | | | | | | | |
| Females | Ref | Ref | | Ref | Ref | Ref | | Ref | Ref | Ref | Ref |
| Males | 1.58 [1.43-1.75] | **2.87 [2.71-3.04]** | | **1.6 [1.5-1.71]** | **1.58 [1.43-1.76]** | 2.87 [2.7-3.04] | | 1.6 [1.5-1.71] | 1.58 [1.43-1.74] | 2.82 [2.66-2.99] | 1.61 [1.5-1.71] |
| Population density | | | | | | | | | | | |
|  |  |  | <54.6 ppkm2 | | Ref | Ref | | Ref | Ref | Ref | Ref |
|  |  |  | 54.6-106 ppkm2 | | **0.93 [0.68-1.26]** | 1.02 [0.83-1.25] | | 1.09 [0.9-1.32] | 0.94 [0.71-1.24] | 1.2 [1.01-1.43] | 1.08 [0.9-1.29] |
|  |  |  | >106 ppkm2 | | **1.05 [0.81-1.35]** | 1.37 [1.16-1.62] | | 1.08 [0.93-1.25] | 0.76 [0.6-0.98] | 1.03 [0.88-1.19] | 0.9 [0.77-1.06] |
| Region of diagnosis | | | | | | | | | | | |
|  |  |  | |  |  |  | Abruzzo | | Ref | Ref | Ref |
|  |  |  | |  |  |  | Basilicata | | 0.09 [0.01-0.61] | 0.86 [0.46-1.61] | 0.51 [0.3-0.86] |
|  |  |  | |  |  |  | Calabria | | 0.95 [0.37-2.44] | 0.59 [0.36-0.95] | 1.53 [0.99-2.38] |
|  |  |  | |  |  |  | Campania | | 0.4 [0.2-0.81] | 0.41 [0.28-0.61] | 0.4 [0.29-0.55] |
|  |  |  | |  |  |  | Emilia-Romagna | | 0.61 [0.35-1.07] | 0.65 [0.46-0.92] | 1.48 [1.09-2.02] |
|  |  |  | |  |  |  | Friuli-Venezia Giulia | | 0.29 [0.14-0.59] | 0.36 [0.23-0.56] | 0.7 [0.47-1.05] |
|  |  |  | |  |  |  | Lazio | | 0.42 [0.21-0.83] | 0.48 [0.33-0.71] | 1.17 [0.84-1.61] |
|  |  |  | |  |  |  | Liguria | | 1.88 [1-3.54] | 0.8 [0.54-1.18] | 1.58 [1.11-2.24] |
|  |  |  | |  |  |  | Lombardia | | 1.96 [1.15-3.34] | 1.86 [1.35-2.55] | 1.36 [1.03-1.8] |
|  |  |  | |  |  |  | Marche | | 0.2 [0.11-0.37] | 0.22 [0.15-0.33] | 0.27 [0.18-0.41] |
|  |  |  | |  |  |  | Molise | | 2.04 [0.49-8.57] | 0.67 [0.33-1.36] | 0.55 [0.31-0.98] |
|  |  |  | |  |  |  | Piemonte | | 0.09 [0.05-0.16] | 0.04 [0.03-0.05] | 0.66 [0.49-0.89] |
|  |  |  | |  |  |  | PA di Bolzano | | 0.86 [0.4-1.85] | 0.3 [0.19-0.48] | 0.4 [0.25-0.64] |
|  |  |  | |  |  |  | PA di Trento | | 0.37 [0.18-0.77] | 0.24 [0.15-0.37] | 0.46 [0.28-0.74] |
|  |  |  | |  |  |  | Puglia | | 1.43 [0.72-2.85] | 1.02 [0.67-1.54] | 1.39 [0.97-1.98] |
|  |  |  | |  |  |  | Sardegna | | 2.56 [0.89-7.33] | 0.59 [0.36-0.99] | 0.69 [0.48-0.98] |
|  |  |  | |  |  |  | Sicilia | | 1.22 [0.59-2.55] | 1.24 [0.83-1.86] | 1.21 [0.87-1.67] |
|  |  |  | |  |  |  | Toscana | | 0.34 [0.18-0.62] | 0.24 [0.17-0.36] | 0.34 [0.24-0.47] |
|  |  |  | |  |  |  | Umbria | | 0.18 [0.07-0.44] | 0.34 [0.2-0.59] | 0.58 [0.36-0.91] |
|  |  |  | |  |  |  | Valle d’Aosta | | 0.18 [0.07-0.42] | 0.41 [0.23-0.72] | 0.89 [0.5-1.56] |
|  |  |  | |  |  |  | Veneto | | 0.42 [0.24-0.75] | 0.41 [0.29-0.58] | 0.63 [0.46-0.86] |
| ICC | 0.438\*\* | 0.611\*\* | | 0.378\*\* | 0.439\*\* | 0.611\*\* | 0.378\*\* | | 0.308\*\* | 0.441\*\* | 0.291\*\* |
| \*Random intercepts were included in the models to account for clustering of observations at the municipality level.  ICC = Intraclass Correlation Coefficient  \*\* Likelihood Ratio test < 0.05 | | | | | | | | | | | |
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| S4.3. Incidence Rate Ratios (IRR) and 95% confidence interval (95% CI) of the results of the multilevel negative binomial regression analysis for the association between case-fatality from COVID-19 and deprivation in Italian municipalities | | | | | | | | | | | |
| **Case-fatality (within 40 days of diagnosis) IRR [95%CI]** | | | | | | | | | | | |
|  | **Model 1. Adjusted for sex and age** | | | | **Model 2. Adjusted for sex, age and population density** | | | | **Model 3. Adjusted for sex, age, population density and region of residence** | | |
|  | Pre-lockdown | Lockdown | | Post-lockdown | Pre-lockdown | Lockdown | | Post-lockdown | Pre-lockdown | Lockdown | Post-lockdown |
| Deprivation | | | | | | | | | | | |
| Q1 | Ref | Ref | | Ref | Ref | Ref | | Ref | Ref | Ref | Ref |
| Q2 | 1.03 [0.88-1.20] | 1.00 [0.91-1.08] | | 0.93 [0.70-1.22] | 1.04 [0.89-1.22] | 0.97 [0.89-1.06] | | 0.95 [0.72-1.26] | 0.96 [0.82-1.12] | 0.94 [0.86-1.02] | 0.94 [0.71-1.25] |
| Q3 | 1.14 [0.99-1.32] | 1.04 [0.96-1.13] | | 1.16 [0.89-1.51] | 1.15 [0.99-1.35] | 1.00 [0.92-1.09] | | 1.21 [0.93-1.57] | 1.01 [0.86-1.17] | 0.94 [0.86-1.02] | 1.26 [0.96-1.66] |
| Q4 | 1.22 [1.05-1.42] | 1.04 [0.96-1.13] | | 1.17 [0.90-1.52] | 1.24 [1.06-1.45] | 1.00 [0.92-1.09] | | 1.22 [0.94-1.58] | 1.06 [0.90-1.24] | 0.94 [0.86-1.02] | 1.20 [0.90-1.59] |
| Q5 | 1.01 [0.84-1.21] | 1.00 [0.91-1.10] | | 1.26 [0.97-1.62] | 1.02 [0.85-1.23] | 0.96 [0.87-1.06] | | 1.31 [1.01-1.70] | 0.92 [0.75-1.13] | 0.95 [0.85-1.07] | 1.02 [0.73-1.41] |
| Sex | | | | | | | | | | | |
| Females | Ref | Ref | | Ref | Ref | Ref | | Ref | Ref | Ref | Ref |
| Males | 1.65 [1.53-1.78] | **2.03 [1.95-2.11]** | | **1.65 [1.47-1.84]** | **1.65 [1.53-1.78]** | 2.03 [1.95-2.11] | | 1.65 [1.47-1.84] | 1.62 [1.5-1.74] | 2.02 [1.94-2.1] | 1.64 [1.47-1.84] |
| Population density | | | | | | | | | | | |
|  |  |  | <54.6 ppkm2 | | Ref | Ref | | Ref | Ref | Ref | Ref |
|  |  |  | 54.6-106 ppkm2 | | **1.08 [0.87-1.35]** | 1.1 [0.99-1.22] | | 0.86 [0.65-1.13] | 0.98 [0.79-1.22] | 1.07 [0.96-1.19] | 0.84 [0.63-1.11] |
|  |  |  | >106 ppkm2 | | **0.99 [0.83-1.19]** | 1.15 [1.05-1.26] | | 0.82 [0.66-1.02] | 0.89 [0.74-1.07] | 1.06 [0.97-1.16] | 0.85 [0.67-1.07] |
| Region of diagnosis | | | | | | | | | | | |
|  |  |  | |  |  |  | Abruzzo | | Ref | Ref | Ref |
|  |  |  | |  |  |  | Basilicata | | 1.32 [0.16-11.19] | 0.66 [0.37-1.16] | 0.76 [0.39-1.5] |
|  |  |  | |  |  |  | Calabria | | 1.1 [0.51-2.39] | 0.93 [0.65-1.32] | 0.58 [0.25-1.39] |
|  |  |  | |  |  |  | Campania | | 1.05 [0.61-1.81] | 1.09 [0.84-1.41] | 0.74 [0.48-1.13] |
|  |  |  | |  |  |  | Emilia-Romagna | | 0.95 [0.62-1.46] | 1 [0.82-1.23] | 0.53 [0.34-0.82] |
|  |  |  | |  |  |  | Friuli-Venezia Giulia | | 0.6 [0.33-1.09] | 0.55 [0.41-0.75] | 0.52 [0.28-0.96] |
|  |  |  | |  |  |  | Lazio | | 0.81 [0.46-1.4] | 0.6 [0.46-0.77] | 0.68 [0.44-1.06] |
|  |  |  | |  |  |  | Liguria | | 1.17 [0.72-1.92] | 0.87 [0.69-1.1] | 0.59 [0.36-0.96] |
|  |  |  | |  |  |  | Lombardia | | 1.33 [0.88-2] | 1.15 [0.94-1.39] | 0.47 [0.32-0.69] |
|  |  |  | |  |  |  | Marche | | 0.83 [0.52-1.32] | 0.71 [0.56-0.9] | 0.28 [0.15-0.54] |
|  |  |  | |  |  |  | Molise | | 1.23 [0.37-4.06] | 0.7 [0.42-1.19] | 0.47 [0.19-1.13] |
|  |  |  | |  |  |  | Piemonte | | 1.13 [0.73-1.73] | 0.88 [0.72-1.08] | 0.56 [0.37-0.85] |
|  |  |  | |  |  |  | PA di Bolzano | | 0.61 [0.32-1.14] | 0.79 [0.6-1.05] | 0.17 [0.06-0.47] |
|  |  |  | |  |  |  | PA di Trento | | 0.59 [0.33-1.06] | 0.67 [0.52-0.87] | 0.41 [0.2-0.83] |
|  |  |  | |  |  |  | Puglia | | 1.24 [0.71-2.16] | 0.91 [0.7-1.18] | 1.12 [0.7-1.8] |
|  |  |  | |  |  |  | Sardegna | | 0.48 [0.13-1.74] | 0.72 [0.5-1.04] | 0.59 [0.36-0.96] |
|  |  |  | |  |  |  | Sicilia | | 0.83 [0.44-1.56] | 0.91 [0.69-1.2] | 0.9 [0.59-1.39] |
|  |  |  | |  |  |  | Toscana | | 0.72 [0.45-1.17] | 0.67 [0.54-0.85] | 0.52 [0.34-0.8] |
|  |  |  | |  |  |  | Umbria | | 0.62 [0.3-1.31] | 0.41 [0.27-0.63] | 0.59 [0.31-1.11] |
|  |  |  | |  |  |  | Valle d’Aosta | | 0.4 [0.19-0.85] | 0.74 [0.52-1.05] | 0.31 [0.1-0.97] |
|  |  |  | |  |  |  | Veneto | | 0.48 [0.31-0.75] | 0.62 [0.5-0.77] | 0.75 [0.5-1.13] |
| ICC | 0.074\*\* | 0.041\*\* | | 0.127\*\* | 0.074\*\* | 0.041\*\* | 0.126\*\* | | 0.052\*\* | 0.030\*\* | 0.105\*\* |
| \*Random intercepts were included in the models to account for clustering of observations at the municipality level.  ICC = Intraclass Correlation Coefficient  \*\*Likelihood Ratio test < 0.05 | | | | | | | | | | | |
|  | | | | | | | | | | | |