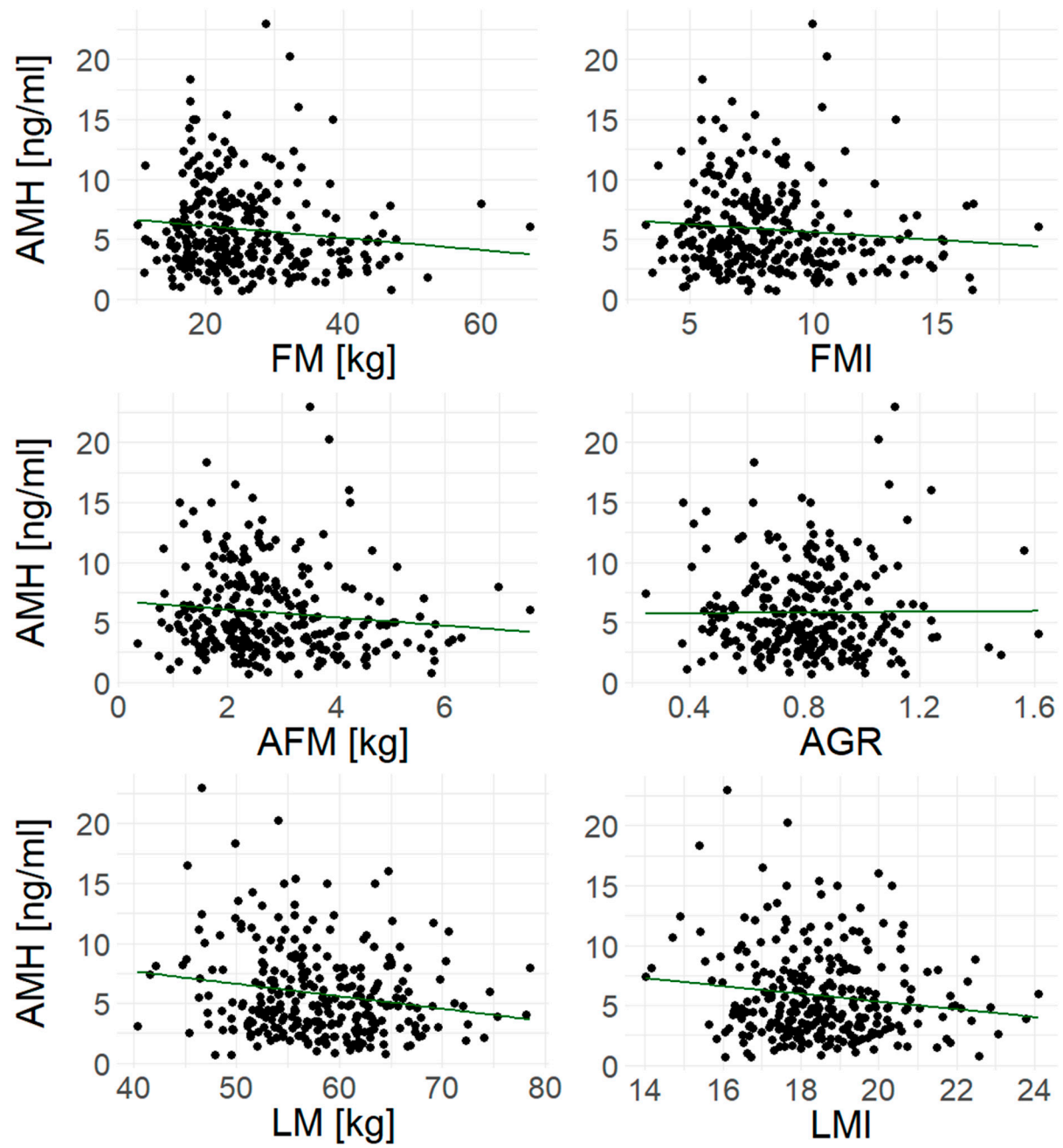


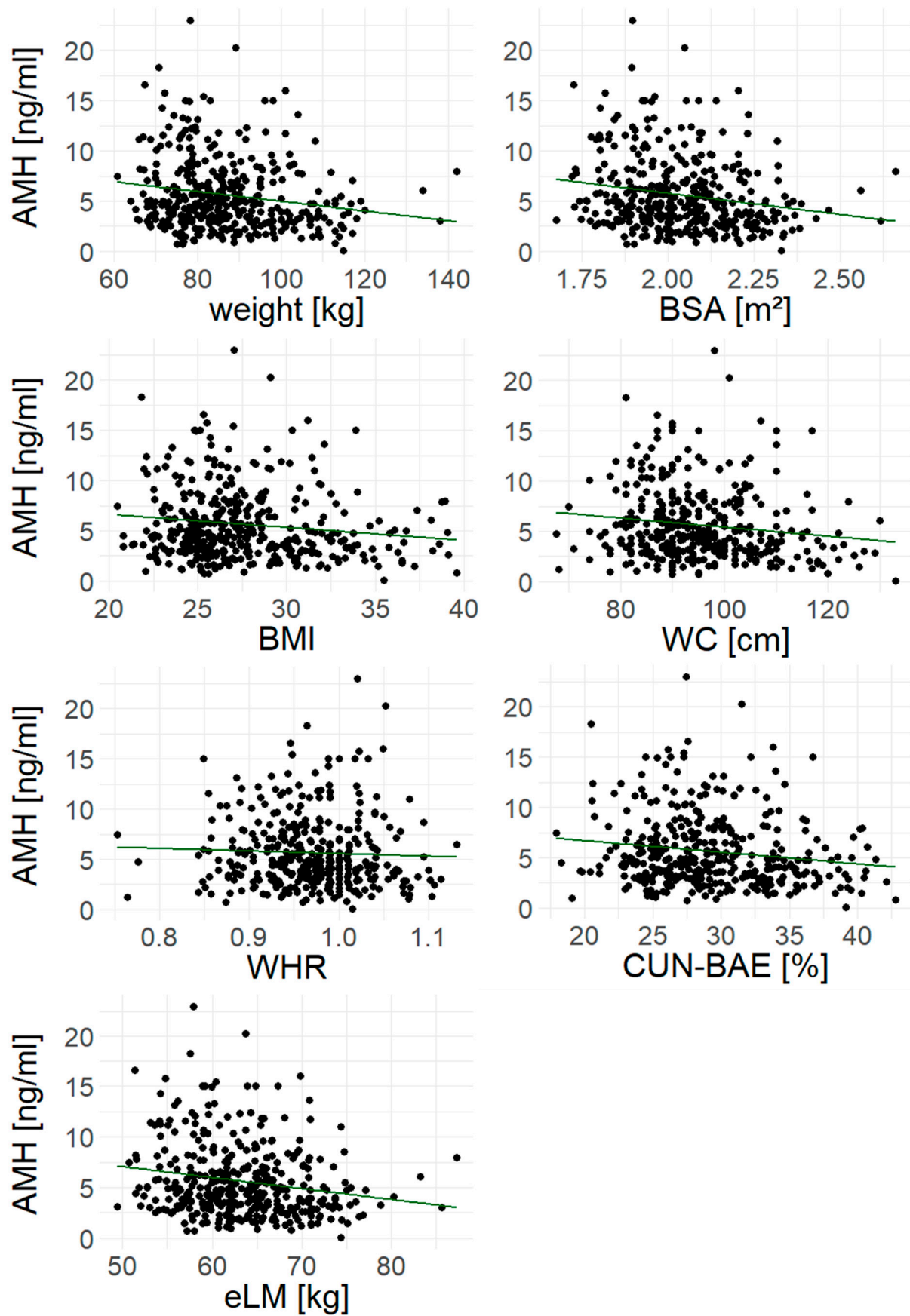
**Table S1.** Relationships of potential confounders with serum AMH levels – preliminary analysis

<i>Univariate linear regression model</i>			
	<b>R<sup>2</sup></b>	<b>β</b>	<b><i>p</i></b>
age	.021	-.004	<b>&lt;.0001</b>
FSH	.157	-.017	<b>&lt;.0001</b>
E2	.051	-.003	<b>&lt;.0001</b>
Alcohol [dpw]	-.001	-.0001	.448
Non-smoking	-.004	-.001	.731

\* Goodness-of-fit (R<sup>2</sup>), linear regression coefficient (β) and *p*-value are given for a univariate linear regression model. Transformed AMH values were used (see methods). Abbreviations: FSH, follicle-stimulating hormone; E2, estradiol; dpw, drinks per week. Study cohort (n = 382).



**Figure S1.** Scatterplots of DXA-derived parameters and serum AMH levels with regression line (green). “DXA subset” (n = 278). Abbreviations: FM, fat mass; FMI, fat mass index; AFM, android fat mass; AGR, android-gynoid ratio; LM, lean mass; LMI, lean mass index.



**Figure S2.** Scatterplots of commonly available body composition parameters and serum AMH levels with regression line (green). Whole cohort (n = 382). Abbreviations: BSA, body surface area; BMI, body mass index; WC, waist circumference; WHR, waist-hip ratio; CUN-BAE, Clínica Universidad de Navarra- Body Adiposity Estimator; eLM, estimated lean mass.