

Supplementary information

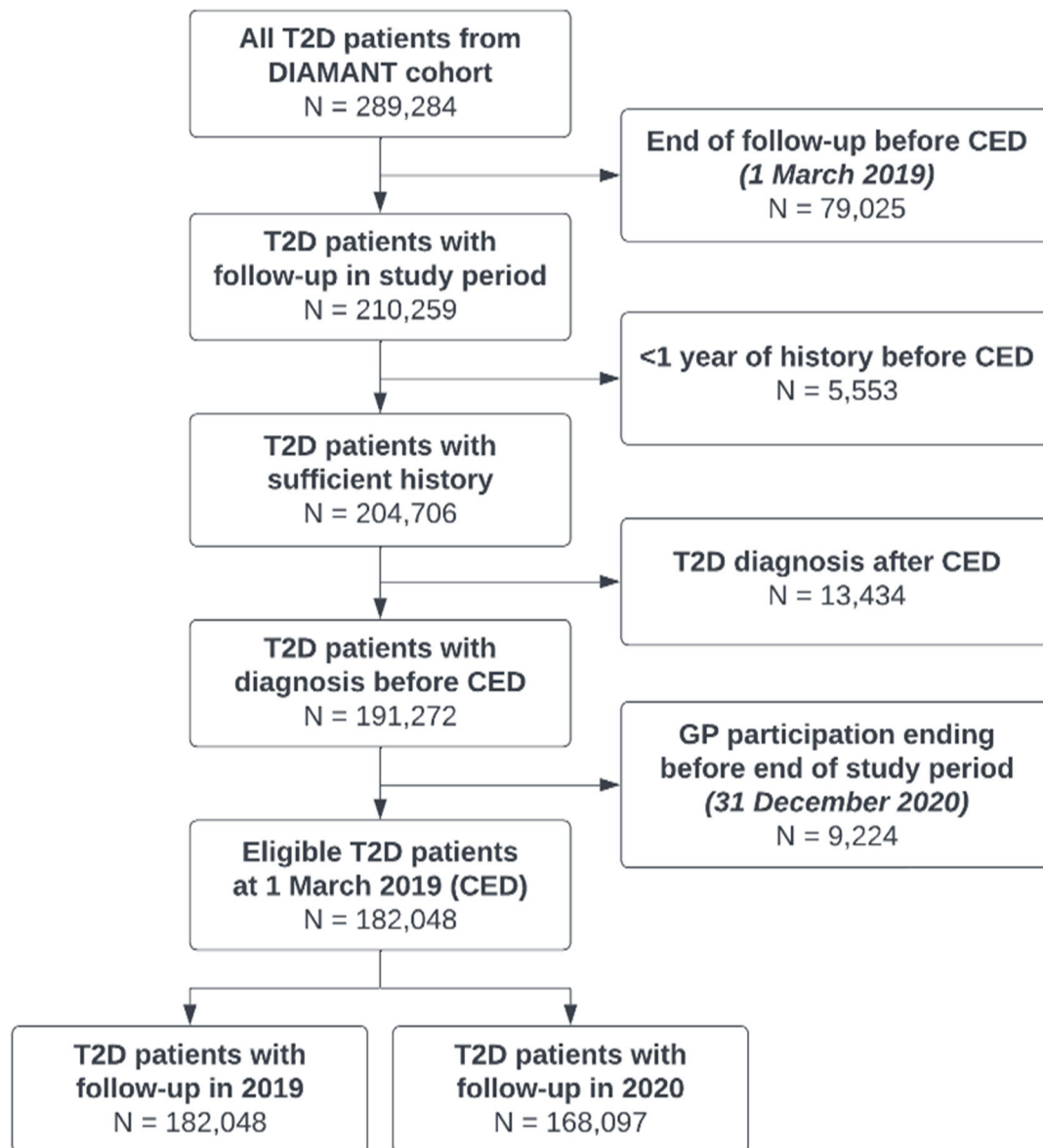


Figure S1. Patient selection flowchart. Cohort entry date (CED) is at March 1st, 2019.

Table S1. Definitions of patient characteristics at start of cohort (March 1st, 2019).

Variable	Description	Categories
Age	2019 minus year of birth.	N/A.
Sex		Female, male.
Socioeconomic status	Based on postal code.	Low, middle, high, or unknown.
Smoking status	Most recent examination before March 1st, 2019	Current, former, never, or unknown.
Duration of T2D	Duration in years since T2D diagnosis: March 1st, 2019 minus date of diagnosis, based on first of either T2D ICPC, ATC code A10 or T2D examination.	<2, 2-4, 5-9 and 10+ years.
BMI	Examination closest to March 1st, 2019, maximum 2 years before.	N/A.
HbA1C	Examination closest to March 1st, 2019, maximum 2 years before.	N/A.
HbA1c on target [5]	HbA1c on target, as defined in Dutch GP guideline for diabetes management. Examination closest to March 1st, 2019, maximum 2 years before. Age as determined at March 1st, 2019. - Patients aged <70 years: ≤53 mmol/mol - Patients aged ≥70 years: <ul style="list-style-type: none"> • Using no medication, or metformin: ≤53 mmol/mol • Using other diabetes medication: 54-58 mmol/mol for patients with T2D duration <10 years, and 54-64 mmol/mol for patients with T2D duration ≥10 years. 	Yes or no.
eGFR	Examination closest to March 1st, 2019, maximum 2 years before. The Chronic Kidney Disease Epidemiology (CKD-EPI) formula is used to calculate eGFR.	N/A.
SBP	Examination closest to March 1st, 2019, maximum 2 years before.	N/A.
LDL	Examination closest to March 1st, 2019, maximum 2 years before.	N/A.
High-risk T2D [5]	High-risk T2D patients, as defined in Dutch GP guideline for diabetes management: <ul style="list-style-type: none"> - Patients with history of cardiovascular disease <ul style="list-style-type: none"> ○ Acute coronary syndrome, angina, stroke, transient ischemic attack, intermittent claudication, or aortic aneurysm. - Patients with chronic kidney disease. - Patients with heart failure. 	Yes or no.

T2D, type 2 diabetes; BMI, body mass index; HbA1c, Hemoglobin A1c; eGFR, estimated glomerular filtration rate; LDL, low-density lipoprotein cholesterol; SBP, systolic blood pressure.

Table S2. Sensitivity analysis. Overview of outcomes in lockdown period (1 March until 30 June 2020) and the same period in 2019.

		2019 (N = 182,048)	2020 (N = 168,097)
GP visit counts, %			
Office visits,	0	34.4%	37.2%
	1	17.8%	18.1%
	>1	47.8%	44.7%
Home visits	0	91.7%	92.8%
	1	4.7%	4.4%
	>1	3.6%	2.8%
Phone calls	0	83.3%	80.2%
	1	10.6%	11.5%
	>1	6.1%	8.3%
E-mails	0	99.1%	99.4%
	1	0.8%	0.5%
	>1	0.1%	0.1%
Clinical measurements counts, %			
HbA1c	0	46.3%	63.4%
	1	42.4%	29.9%
	>1	11.3%	6.7%
BMI	0	45.8%	69.8%
	1	42.6%	24.6%
	>1	11.6%	5.6%
LDL	0	70.0%	80.0%
	1	28.6%	18.5%
	>1	1.4%	1.5%
SBP	0	39.9%	68.4%
	1	42.7%	24.4%
	>1	17.4%	7.2%
eGFR	0	63.2%	73.8%
	1	31.7%	22.4%
	>1	5.1%	3.8%
Clinical measurements values, mean (SD)			
HbA1c (mmol/mol)		55.2 (12.1)	56.2 (12.6)
BMI (kg/m ²)		29.7 (5.3)	29.5 (5.2)
LDL (mmol/L)		2.46 (0.91)	2.44 (0.90)
SBP (mmHg)		136.6 (15.6)	137.9 (16.1)
eGFR (mL/min/1.73m ²)		72.7 (21.4)	71.5 (21.9)

GP visits counts and clinical measurements counts (0, 1 or >1) are counts per observation period in years. GP, general practitioner; HbA1c, Hemoglobin A1c; BMI, body mass index; LDL, low-density lipoprotein cholesterol; SBP, systolic blood pressure; eGFR, estimated glomerular filtration rate.

Table S3. Sensitivity analysis. Negative binomial regression model of health care use in lockdown period (March 1st until June 30th, 2020) and the same period in 2019.

	Total GP visits	GP office visits	GP home visits	GP phone calls
<i>2020 vs. 2019, estimate (95% CI)</i>				
Univariate	1.03 (1.01; 1.04)**	1.00 (0.99; 1.02) ^{NS}	0.79 (0.75; 0.84)**	1.34 (1.29; 1.38)**
Multivariate	1.03 (1.01; 1.04)**	1.00 (0.98; 1.01) ^{NS}	0.88 (0.84; 0.93)**	1.35 (1.31; 1.40)**
<i>Stratified models</i>				
Age <70	N.A.	0.97 (0.95; 0.99)**	0.91 (0.81; 1.02) ^{NS}	N.A.
Age ≥70	N.A.	1.03 (1.00; 1.05)*	0.84 (0.80; 0.90)**	N.A.
HbA1c on target	N.A.	N.A.	N.A.	1.39 (1.34; 1.45)**
HbA1c not on target	N.A.	N.A.	N.A.	1.29 (1.22; 1.36)**
Non-high-risk T2D	N.A.	0.99 (0.98; 1.01) ^{NS}	0.91 (0.86; 0.97)**	N.A.
High-risk T2D	N.A.	1.04 (1.00; 1.09)*	0.79 (0.72; 0.87)**	N.A.

Estimates are rate ratios of visit counts, comparing 2020 to 2019. Multivariate models adjusted for sex, age, socioeconomic status, diabetes duration, baseline HbA1c, baseline BMI, baseline LDL, baseline SBP, baseline eGFR, HbA1c on/off target, and high- or low-risk DM. If interaction terms were significant, only then the stratified adjusted estimates are presented accordingly. GP, general practitioner; HbA1c, hemoglobin A1c; BMI, body mass index; LDL, low-density lipoprotein cholesterol; SBP, systolic blood pressure. **p-value of <0.01; *p-value of <0.05; ^{NS}p-value of ≥0.05.

Table S4. Sensitivity analysis. Generalized estimated equations (GEE) models of clinical outcomes in lockdown period (March 1st until June 30th, 2020) and the same period in 2019.

	HbA1c (mmol/mol)	BMI (kg/m ²)	LDL (mmol/L)	SBP (mmHg)
<i>2020 vs. 2019, estimate (95% CI)</i>				
Univariate	0.94 (0.86; 1.03)**	-0.16 (-0.17; -0.14)**	-0.01 (-0.02; 0.00) ^{NS}	1.80 (1.66; 1.95)**
Multivariate	1.02 (0.93; 1.11)**	-0.16 (-0.18; -0.15)**	-0.01 (-0.02; -0.00)*	1.80 (1.66; 1.94)**
<i>Stratified models</i>				
Age <70	1.12 (0.99; 1.26)**	-0.11 (-0.13; -0.08)**	N.A.	N.A.
Age ≥70	0.94 (0.84; 1.05)**	-0.20 (-0.22; -0.18)**	N.A.	N.A.
HbA1c on target	2.78 (2.69; 2.87)**	-0.10 (-0.12; -0.08)**	N.A.	1.94 (1.76; 2.11)**
HbA1c not on target	-1.68 (-1.84; -1.52)**	-0.27 (-0.30; -0.25)**	N.A.	1.53 (1.29; 1.77)**
Non-high-risk T2D	N.A.	-0.14 (-0.16; -0.13)**	N.A.	1.84 (1.69; 1.99)**
High-risk T2D	N.A.	-0.30 (-0.35; -0.24)**	N.A.	1.48 (1.03; 1.92)**

Estimates are differences in population averages of the clinical measurement values, comparing 2020 to 2019. Multivariate models adjusted for sex, age, socioeconomic status, diabetes duration, baseline HbA1c, baseline BMI, baseline LDL, baseline SBP, baseline eGFR, HbA1c on/off target, and high- or low-risk DM. If interaction terms were significant, only then the stratified adjusted estimates are presented accordingly. HbA1c, hemoglobin A1c; BMI, body mass index; LDL, low-density lipoprotein cholesterol; SBP, systolic blood pressure. **p-value of <0.001; *p-value of <0.05; ^{NS}p-value of ≥0.05.