

Supplementary Methods

Identification of Alcohol Use Disorder

To identify individuals with alcohol use disorder (AUD), we used the Swedish Hospital Discharge Register, containing all hospitalizations for all Swedish inhabitants from 1973-2012 and the Outpatient Care Register, containing information from all outpatient clinics from 2001 to 2012. The following ICD primary and secondary diagnoses and codes were used to identify individuals with AUD: ICD8 and 9: alcohol-related psychiatric disorders (291), alcohol dependence (303), alcohol abuse (305A), alcohol-related polyneuropathy (357F), alcohol-related cardiomyopathy (425F), alcohol-related gastritis (535D), alcoholic fatty liver, alcohol hepatitis, alcoholic cirrhosis, unspecified liver damage caused by alcohol (571A-D), toxic effects of alcohol (980), alcoholism (V79B); ICD10: alcohol-related psychiatric and behavioral disorders (F10, excluding acute alcohol intoxication: F10.0), rehabilitation of a person with alcohol abuse (Z50.2), guidance and medical advice to a person with alcohol abuse (Z71.4), alcohol-related pseudo-Cushing syndrome (E24.4), alcohol-related degeneration of the nervous system and brain (G31.2), alcohol-related polyneuropathy (G62.1), alcohol-related myopathy (G72.1), alcohol-related cardiomyopathy (I42.6), alcohol-related gastritis (K29.2), liver diseases caused by alcohol (K70.0-K70.9), acute pancreatitis caused by alcohol (K85.2), chronic pancreatitis caused by alcohol (K86.0), treatment of pregnant alcoholic woman (O35.4), toxic effects of alcohol (T51.0-T51.9).

We also used alcohol-related registrations in the Swedish Crime Register, which included national complete data on all convictions from 1973-2012, with a conviction of drunk driving (law 1951:649 (paragraph 4 and 4A)) or drunk in charge of a maritime vessel (suspicion code 3201, law 1994:1009 (chapter 20, paragraph 4 and 5)) as evidence of AUD.