Data supplement for Livne et al., Association of Cannabis Use–Related Predictor Variables and Self-Reported Psychotic Disorders: U.S. Adults, 2001–2002 and 2012–2013. Am J Psychiatry (doi: 10.1176/appi.ajp.2021.21010073)

TABLE S1. Sensitivity analysis: Prevalence of self-reported psychotic disorders by survey and past-year cannabis-related variables, adjusted for state medical cannabis law status

	NESARC, 2001-2002				NESARC-III, 2012-2013			
		Self-repo	rted psychotic di	sorder	Self-reported psychotic disord			disorder
Past year nonmedical cannabis	N of total	N	Standardized Prevalence ^a	SE ª	N of total sample	N	Standardized Prevalence ^a	SE a
without any cannabis use	sample 41.490	151	0.27	0.03	32.608	271	0.68	0.06
With any cannabis use	1,603	27	1.68	0.49	3,701	66	1.92	0.35
With frequent cannabis use	465	6	1.05	0.48	1,527	39	2.86	0.66
With daily/near-daily cannabis use	348	5	0.93	0.45	1,161	28	2.58	0.70
With cannabis use disorder	560	11	2.60	1.10	1,086	29	3.42	0.87
With proxy DSM-5 cannabis use disorder ^b	565	12	2.86	1.13	1,104	29	3.38	0.86

Note: nonmedical cannabis use: without a prescription or other than prescribed, e.g., to get high.

^a Standardized prevalence are model-predicted prevalence of self-reported psychotic disorders, adjusted for sociodemographic covariates (age, gender, race/ethnicity, education level, and urbanicity) and medical cannabis law status, from logistic regression.

^b Includes six DSM-IV cannabis use disorder criteria plus proxy for cannabis withdrawal syndrome (three or more of five symptoms: nervousness/anxiety; sleep disturbances; restlessness; depressed mood; and any physical symptoms: sweating/fast heartbeat; fever; shaking; nausea, vomiting, stomach pain; or headache), or using cannabis to avoid withdrawal symptoms.

TABLE S2. Sensitivity analysis: Within-survey associations of past-year cannabis-related indicators with self-reported psychotic disorders, adjusted for state medical cannabis law status

	NESARC, 2001–2002				NESARC-III, 2012-2013			
	Prevalence		Odds		Prevalence		Odds	
Cannabis Indicator	Difference ^a	95% Cl ^a	Ratiob	95% CI ^b	Difference ^a	95% Cl ^a	Ratiob	95% CI ^b
Any cannabis use	1.41	0.46, 2.35	6.24	3.45, 11.29	1.24	0.56, 1.92	2.87	1.94, 4.24
Frequent cannabis use	0.78	-0.14, 1.70	3.88	1.66, 9.07	2.18	0.91, 3.45	4.35	2.67, 7.06
Daily/near-daily cannabis	0.66	-0.22, 1.54	3.44	1.33, 8.88	1.90	0.55, 3.25	3.90	2.24, 6.80
use								
Cannabis use disorder	2.33	0.19, 4.47	9.82	4.20, 22.96	2.75	1.04, 4.45	5.25	3.06, 9.00
Proxy DSM-5 cannabis	2.59	0.38, 4.80	10.85	4.88, 24.12	2.70	1.01, 4.39	5.18	3.02, 8.89
use disorder ^c								

Note: nonmedical cannabis use: without a prescription or other than prescribed, e.g., to get high.

^a Effects estimated on the additive scale: **prevalence difference** indicates the prevalence difference of psychotic disorders between those with the cannabis predictor and those without cannabis use in 2001-2002 and 2012-2103. These effects are significant when the 95% confidence interval (CI) does not include 0.

^b Effects estimated on the multiplicative scale: **odds ratio** indicates the ratio of the odds of psychotic disorders between those with and without the cannabis predictor in 2001-2002 and 2012-2103. These effects are significant when the 95% CI does not include 1.

^c Includes six DSM-IV cannabis use disorder criteria plus proxy for cannabis withdrawal syndrome (three or more of five symptoms: nervousness/anxiety; sleep disturbances; restlessness; depressed mood; and any physical symptoms: sweating/fast heartbeat; fever; shaking; nausea, vomiting, stomach pain; or headache), or using cannabis to avoid withdrawal symptoms.

^c Effects estimated on the multiplicative scale: **odds ratio** indicates the ratio of the odds (likelihood) of psychotic disorders between those with and without the cannabis predictor in 2001-2002 and 2012-2103. These effects are significant when the 95% CI does not include 1.

TABLE S3. Sensitivity analysis: Across-survey associations of past-year cannabis indicators with self-reported psychotic disorders, adjusted for state medical cannabis law status

	Difference in Differenc 2012-2013 vs	es (PD)	Ratio of Odds Ratios (OR) 2012-2013 vs. 2001-2002 ^b		
	Difference in				
Cannabis Indicator	PDs	95% CI	Ratio of ORs	95% CI	
Any cannabis use	-0.17	-1.29, 0.95	0.46	0.23, 0.91	
Frequent cannabis use	1.41	-0.09, 2.85	1.12	0.43, 2.92	
Daily/near-daily cannabis use	1.24	-0.35, 2.83	1.13	0.38, 3.35	
Cannabis use disorder	0.42	-2.21, 3.05	0.53	0.20, 1.40	
Proxy DSM-5 cannabis use disorder ^c	0.11	-2.56, 2.78	0.48	0.19, 1.99	

Note: nonmedical cannabis use: without a prescription or other than prescribed, e.g., to get high.

^a Effects estimated on the additive scale: prevalence difference indicates the prevalence difference of psychotic disorders between those with and without the cannabis predictor in 2001-2002 and 2012-2103, while **difference in prevalence differences** indicates the difference between those differences. These effects are significant when the 95% confidence interval (CI) does not include 0.

^b Effects estimated on the multiplicative scale: odds ratio indicates the ratio of the odds (likelihood) of psychotic disorders between those with and without the cannabis predictor in 2001-2002 and 2012-2103, while **ratio of odds ratios** indicates the ratio between those ratios. These effects are significant when the 95% CI does not include 1.

^c Includes six DSM-IV cannabis use disorder criteria plus proxy for cannabis withdrawal syndrome (three or more of five symptoms: nervousness/anxiety; sleep disturbances; restlessness; depressed mood; and any physical symptoms: sweating/fast heartbeat; fever; shaking; nausea, vomiting, stomach pain; or headache), or using cannabis to avoid withdrawal symptoms.