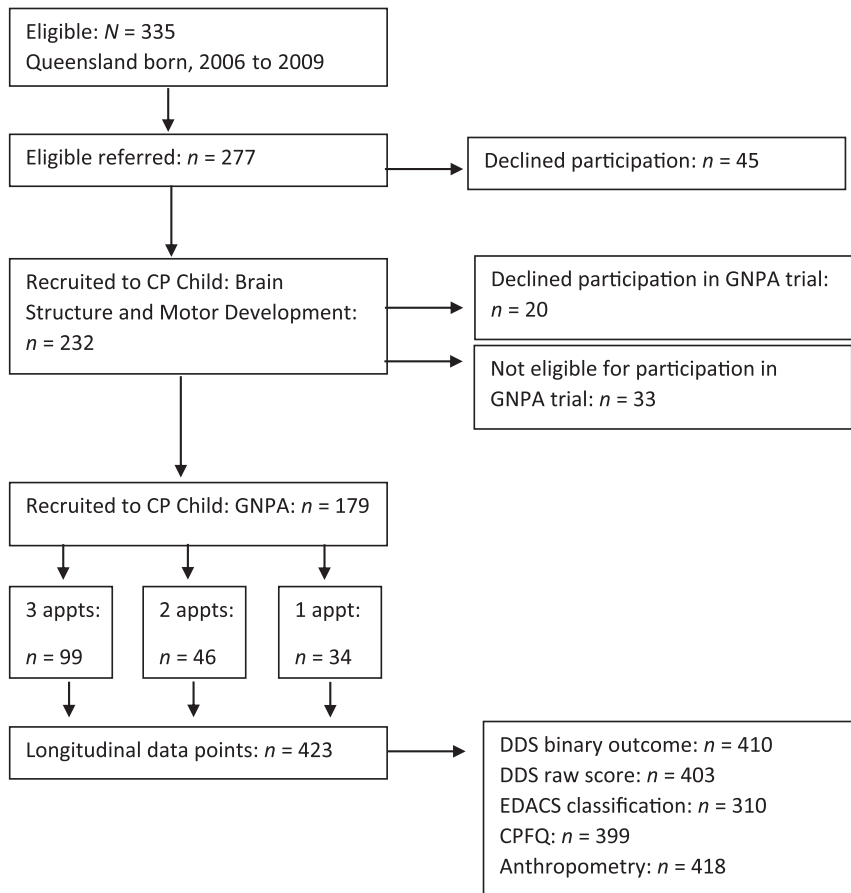


## Supplemental Information



### SUPPLEMENTAL FIGURE 3

Recruitment pathways for children with CP participating in the OPD substudy. Appt, appointment; CPFQ, CP Child Feeding Questionnaire; GNPA, Growth, Nutrition and Physical Activity.

**SUPPLEMENTAL TABLE 3** Reproducibility (Interrater and Intrarater) of OPD Measures in Preschool Children Aged 48–60 Months With CP

	Interrater ( <i>n</i> = 40)		Intrarater ( <i>n</i> = 40)	
	Reliability $\kappa$ ( <i>P</i> )	% Agreement	Reliability $\kappa$ ( <i>P</i> )	% Agreement
DDS-part 2 (overall)	0.82*	92.1	0.94*	97.4
DDS-part 2 (raw score) <sup>a</sup>	0.92*	52.6	0.99*	84.2
Nonchewable score <sup>a</sup>	0.82*	76.9	0.97*	100.0
Chewable score <sup>a</sup>	0.89*	71.8	0.98*	97.4
Fluid score <sup>a</sup>	0.89*	89.5	0.98*	92.1
Pharyngeal phase (overall)	0.84*	92.5	0.85*	92.5
Puree	0.39 (.002)	75.8	1.0*	100.0
Semisolid	0.52*	82.1	1.0*	100.0
Chewable	0.48*	81.6	0.70*	86.8
Thin fluid	0.71*	86.8	0.76*	89.5

$\kappa$ , Cohen's  $\kappa$  coefficient; PSAS, Pre-Speech Assessment Scale; SOMA, Schedule for Oral Motor Assessment.

<sup>a</sup> Continuous variables are ICC reported; percent agreement is calculated based on perfect agreement or 1 point on either side of perfect.

\* *P* < .001;  $\kappa$  < 0 poor, 0.01–0.20 slight, 0.21–0.40 fair, 0.41–0.60 moderate, 0.61–0.80 substantial, and 0.81–1.0 almost perfect.<sup>18</sup>

**SUPPLEMENTAL TABLE 4** Reproducibility of GMFCS

Age Group	Assessments (Children)	Concordance: <i>n</i> (%)		Reliability: $\kappa$ (95% CI)
		Perfect	Close	
≤24 mo	129 (91)	110 (85.3)	19 (14.7)	0.81 (0.74 to 0.89)
25–48 mo	132 (95)	115 (87.1)	17 (12.9)	0.81 (0.73 to 0.89)
All cases <sup>a</sup>	284 (125)	248 (87.3)	36 (12.7)	0.83 (0.78 to 0.88)

Data and calculations for the GMFCS reproducibility were performed by Dr Alex Craven, in conjunction with his MBBS Honours Thesis. Perfect concordance between 2 independent physiotherapists occurred in 87.3% (*n* = 248) of cases and close concordance (within ±1 GMFCS level) occurred in 12.7% (*n* = 36) of cases. There were no cases of gross disagreement (difference of ≥2 GMFCS levels between raters). Interrater reliability of GMFCS between 2 independent raters was high, with a nonweighted  $\kappa$  of 0.83 (95% CI 0.78 to 0.88), showing near perfect agreement. There was no significant difference in interrater reliability between the younger (≤24 mo) and older (25–48 mo) GMFCS age bands.

<sup>a</sup> Includes 23 assessments (23 children) at 60 mo corrected age. Close concordance was defined as an assessment within ±1 GMFCS level.

**SUPPLEMENTAL TABLE 5** Feeding Characteristics of Children Aged 60 Months With CP in the Longitudinal OPD Study by MACS (*n* = 135)

	Overall, <i>n</i> (%)	MACS I, <i>n</i> (%) (%): <i>n</i> = 76	MACS II, <i>n</i> (%) (%): <i>n</i> = 29	MACS III, <i>n</i> (%) (%): <i>n</i> = 10	MACS IV, <i>n</i> (%) (%): <i>n</i> = 3	MACS V, <i>n</i> (%) (%): <i>n</i> = 17	Crude OR (95% CI); <i>P</i>	Adjusted OR (95% CI); <i>P</i>
OPD classification overall	78 (57.8)	29 (38.2)	20 (69.0) <sup>a</sup>	9 (90.0) <sup>a</sup>	3 (100.0) <sup>a</sup>	17 (100.0) <sup>a</sup>	4.0 (2.0 to 7.7); <.001	3.5 (1.5 to 8.7); .005
DDS (modified)	58 (43.0)	14 (18.4)	15 (51.7) <sup>a</sup>	9 (90.0) <sup>a</sup>	3 (100.0) <sup>a</sup>	17 (100.0) <sup>a</sup>	5.7 (2.9 to 11.3); <.001	6.3 (2.3 to 17.1); <.001
Pharyngeal phase signs	41 (30.4)	8 (10.5)	7 (24.1)	6 (60.0) <sup>a</sup>	3 (100.0) <sup>a</sup>	17 (100.0) <sup>a</sup>	4.5 (2.6 to 7.7); <.001	5.1 (2.4 to 11.0); <.001
Parent report	58 (45.0)	18 (23.7)	14 (48.4) <sup>a</sup>	6 (60.0) <sup>a</sup>	3 (100.0) <sup>a</sup>	17 (100.0) <sup>a</sup>	3.2 (2.0 to 5.1); <.001	2.6 (1.4 to 4.8); .003
OPD severity, mean (95% CI)	4.3 (3.1 to 5.5)	0.8 (0.3 to 1.2)	2.8 (1.5 to 4.2)	7.3 (2.5 to 12.1)	16.3 (4.1 to 28.6)	19.5 (17.7 to 21.3)	$\beta$ = 4.6 (4.1 to 4.9); <.001	$\beta$ = 4.3 (3.8 to 4.9); <.001

<sup>a</sup> Indicates individual MACS levels that are significantly different compared with MACS I. Adjusted for age, sex, preterm status, epilepsy.