

1 Epigenetic markers of adverse lifestyle identified among night shift workers

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21 **ABSTRACT**

22 Background: Epigenetic changes in the form of DNA methylation (DNAm) may act as biological  
23 markers of risk factors or adverse health states. We investigated associations between night shift  
24 work and established DNAm predictors of lifestyle, and compared them with those observed  
25 between night shift work and self-reported or conventionally-measured phenotypes.

26 Methods: In two cohort studies, Generation Scotland (GS) (n=7,028) and Understanding Society  
27 (UKHLS) (n=1,175), we evaluated associations between night shift work and four lifestyle factors  
28 (body mass index, smoking, alcohol, education) using both conventionally-measured phenotypes  
29 and DNA methylation-based scores proxying the phenotypes. DNA methylation-based measures of  
30 biological ageing were also generated using six established “epigenetic clocks”. Meta-analysis of GS  
31 and UKHLS results was conducted using inverse-variance weighted fixed effects.

32 Results: Night shift work was associated with higher BMI (0.79; 95%CI 0.02, 1.56; p=0.04) and lower  
33 education (-0.18; -0.30, -0.07; p=0.002). There was weak evidence of association between night shift  
34 work and DNAm scores for smoking (0.06, -0.03, 0.15; p=0.18) and education (-0.24; -0.49, 0.01;  
35 p=0.06) in fully adjusted models. Two of the epigenetic age measures demonstrated higher age  
36 acceleration among night shift workers (0.80; 0.42, 1.18; p<0.001 for GrimAge and 0.46; 0.00, 0.92;  
37 p=0.05 for PhenoAge).

38 Conclusions: Night shift work is associated with phenotypic and DNAm-based measures of lower  
39 education. Night shift work was also related to DNAm predictors of smoking and ageing.

40 Keywords: shift work; smoking; BMI; alcohol; education; biomarkers; DNA methylation;  
41 Understanding Society; Generation Scotland

## 42 INTRODUCTION

43 Shift work has been referred to as “*a work activity scheduled outside standard daytime hours, where*  
44 *there may be a handover of duty from one individual or work group to another*”<sup>1</sup>. Typically, shift work  
45 has been associated with industries that require 24-hour operation, such as essential public services  
46 or for practical purposes. In recent years there has been an increase in the number of shift workers  
47 in other industries<sup>1</sup> with approximately 19% of the working population engaged in shift work as their  
48 main job<sup>2</sup> in the UK.

49 It has been argued that the introduction of shift work within wider industries does not consider the  
50 health and wellbeing costs to the individual shift worker<sup>3</sup>. Much of the research that investigates the  
51 health impacts of shift work has previously centred around circadian disruption, which can result in  
52 disturbed sleep and excessive sleepiness during the work shift<sup>4</sup>. However, adverse health behaviours  
53 have been found among shift workers which also put them at higher risk of disease<sup>5-7</sup> and shift work  
54 has been associated with higher risk of diseases<sup>8-11</sup> than non-shift workers.

55 Recent studies have investigated epigenetic changes in the form of circulating DNA methylation  
56 (DNAm) as an objective measure for evaluating the potential health impact of shift work<sup>12</sup>. While  
57 these studies have typically focused on assessing individual sites in the genome (cytosine-  
58 phosphate-guanine “CpG” sites), recently DNAm scores derived from methylation levels at  
59 numerous CpG sites across the epigenome have been developed which can act as proxies for  
60 lifestyle exposures and may predict health outcomes<sup>13</sup>. Self-reported health behaviours (especially  
61 one-off measures) are subject to measurement error and bias<sup>14</sup>, and using more objective measures  
62 of long-term exposure could identify more robust associations with shift work.

63 One group of DNAm scores aims to capture the epigenetic clock. DNA methylation age (DNAm Age)  
64 has been derived to provide an accurate estimate of biological age across a range of tissues, and at  
65 different life stages<sup>15</sup>. Estimated DNAm Age exceeding true chronological age is known as ‘age  
66 acceleration’ and studies suggest that DNAm age acceleration is associated with age-related health  
67 outcomes independent of chronological age<sup>16</sup>. As well as the clocks developed based on age, more  
68 recent ‘second generation’ epigenetic clocks have been developed based on lifestyle factors and  
69 biomarkers which have been found to be highly predictive of both health and lifespan<sup>17,18</sup>. Other  
70 DNAm scores which predict modifiable health, lifestyle and socio-economic factors include scores  
71 developed for alcohol consumption, smoking status, BMI and education<sup>13</sup>.

72 This study aimed to investigate associations of night shift work participation and a series of blood  
73 based DNAm predictors of ageing, BMI, smoking, alcohol and education within the *Generation*  
74 *Scotland* (GS) and *Understanding Society* (UKHLS) studies.

75 **MATERIALS AND METHODS**

76 **1.1. Generation Scotland (GS)**

77 The Generation Scotland: Scottish Family Health Study is a prospective cohort study comprising  
78 participants from the general population across five regions of Scotland. The recruitment protocol  
79 and cohort characteristics are described in detail elsewhere<sup>19</sup> and in the **Supplementary Methods**.

80 Blood DNAm was profiled using the Infinium MethylationEPIC BeadChip (Illumina Inc.) in two sample  
81 sets from GS: Set 1 and Set 2 (**Supplementary Methods**).

82 Methylation data were available for 777,193 CpGs measured in Set 1 (n=2,578 unrelated individuals)  
83 and 773,860 CpGs measured in Set 2 (n=4,450 unrelated individuals). The data sets had DNAm  
84 profiled at separate time points and quality control and normalisation was carried out separately.  
85 Details on the variables and how they were derived can be found in the **Supplementary Methods**.

86

87 **1.2. Understanding Society (UKHLS)**

88 The UK Household Longitudinal Study (UKHLS) (also known as Understanding Society) is a  
89 longitudinal panel survey of 40,000 UK households from England, Scotland, Wales and Northern  
90 Ireland. The recruitment protocol and cohort characteristics are described in detail elsewhere<sup>20,21</sup>  
91 and in the **Supplementary Methods**.

92 Blood DNAm was profiled using the same Infinium MethylationEPIC BeadChip (Illumina Inc.) as used  
93 by GS. Methylation data was available for 837,487 CpGs in 1,175 individuals (**Supplementary**  
94 **Methods**). Details on the variables and how they were derived can be found in the **Supplementary**  
95 **Methods**.

96

97 **1.3. DNA methylation scores**

98 We derived four DNAm scores related to BMI, smoking, alcohol consumption and education which  
99 were based on CpG sites identified in a previous study<sup>13</sup>. Details of the DNAm scores are shown in  
100 Table 1. For each individual, DNAm scores were calculated as the sum of methylation values at each  
101 CpG multiplied by the effect sizes obtained in a previous study<sup>13</sup>.

102 We also derived six epigenetic biomarkers of ageing using previously published approaches<sup>17,20-22</sup>.  
103 (**Supplementary Methods**). In each case, age acceleration was defined as the residual obtained from  
104 regressing predicted age, as estimated by the epigenetic clock, on chronological age. This measure of  
105 age acceleration is independent of chronological age.

106 All methylation scores were standardized (mean = 0, standard deviation = 1) in both GS and UKHLS.

107

108 **1.4. Statistical Analyses**

109 We first assessed whether lifestyle factors were associated with night shift work. We performed  
110 linear regression of each phenotype (as the outcome variable) in relation to night shift work (as the  
111 exposure variable). This was with the exception for education, which was treated as the exposure  
112 variable given that education precedes night shift work. In GS, two models were run: Model 1 with  
113 adjustment for age and sex, and Model 2 with additional adjustment for other self-reported  
114 phenotypes (e.g., for smoking, the model was also adjusted for BMI, alcohol, and education). In

115 UKHLS, two models were run: Model 1 with adjustment for age, sex, blood processing day and batch  
116 and Model 2 with additional adjustment for other self-reported phenotypes.

117 We subsequently assessed whether the lifestyle factors could be proxied with DNAm scores within  
118 GS and UKHLS. We performed linear regression of the phenotypes (exposure variable) and lifestyle  
119 DNAm scores for alcohol, smoking, education, and BMI (outcome variable). For these models, a  
120 logistic regression was performed. In GS, two models were run: Model 1 with adjustment for age,  
121 sex and 20 methylation principal components (PCs) and Model 2 with additional adjustment for  
122 other self-reported phenotypes (e.g., for smoking related DNAm scores, the model was also adjusted  
123 for BMI, alcohol, and education). In UKHLS, two models were run: Model 1 with adjustment for age,  
124 sex, blood processing day and batch and Model 2 with additional adjustment for other self-reported  
125 phenotypes.

126 We finally assessed whether night shift work was related to the lifestyle DNAm scores. We  
127 performed linear regression of each lifestyle methylation score (outcome) in relation to night shift  
128 work (exposure). This again was with the exception for education, which was treated as the  
129 exposure. In GS, three models were run: Model 1 with adjustment for age, sex and 20 methylation  
130 PCs; Model 2 had additional adjustments for other self-reported phenotypes (e.g., for smoking  
131 related DNAm scores, model adjusted for BMI, alcohol, and education); and Model 3 with further  
132 adjustment for the corresponding phenotype (e.g., for smoking related DNAm scores, the model was  
133 also adjusted for smoking). In UKHLS, three models were run: Model 1 with adjustment for age, sex,  
134 blood processing day and batch; Model 2 with additional adjustment of other self-reported; and  
135 Model 3 with further adjustment for the corresponding phenotype.

136 We assessed whether night shift work was related to any of the six epigenetic ageing measures. We  
137 performed linear regression of each epigenetic age acceleration (EEA) measure (as the outcome  
138 variable) in relation to night shift work.

139 In GS, two models were run: Model 1 with adjustment for sex and 20 methylation PCs and Model 2  
140 with additional adjustment for smoking, BMI, education, and alcohol. In UKHLS, two models were  
141 run: Model 1 with adjustment for sex, blood processing day and batch and Model 2 with additional  
142 adjustment for smoking, BMI, education, and alcohol.

143 We conducted a series of meta-analyses of GS Sets 1 and 2 and UKHLS using an inverse-variance  
144 weighted fixed effects approach. For this, we used the binary measure of night shift work derived in  
145 GS and the current night shift work variable derived in UKHLS. The  $I^2$  statistic was used to assess  
146 heterogeneity across the studies.

147 We conducted meta-analyses of: i) the self-reported or conventionally measured (in the case of BMI)  
148 lifestyle factors in relation to night shift work, ii) the lifestyle DNAm scores in relation to night shift  
149 work and iii) the epigenetic age acceleration measures in relation to night shift work.

150

## 151 **RESULTS**

### 152 **2.1. Baseline characteristics**

153 Summary characteristics of the participants from GS and UKHLS are presented in **Table 2**. 7,028  
154 individuals with DNAm data were included from GS (n=2,578 in Set 1 and n=4,450 in Set 2) and 1,175  
155 individuals from UKHLS. Set 1 and 2 of GS had a younger mean age (50.0 $\pm$ 12.5 and 51.4 $\pm$ 13.2)  
156 compared to UKHLS (58.0 $\pm$ 15.0). There was a comparable balance of men and women across the  
157 three datasets: 38.6% males in GS Set 1, 43.7% in GS Set 2 and 41.6% in UKHLS. BMI was also broadly

158 comparable:  $27.4 \pm 5.5 \text{ kg/m}^2$ ,  $26.8 \pm 5.0 \text{ kg/m}^2$  and  $28.1 \pm 6.2 \text{ kg/m}^2$ , in GS Set 1, GS Set 2 and UKHLS,  
159 respectively. GS Set 1 had more current smokers whilst UKHLS had more former smokers and GS Set  
160 2 had more never smokers. There was a higher proportion of daily drinkers in UKHLS (16.0%)  
161 compared with GS (12.4% in Set 1 and 13.2% in Set 2). There was also a higher proportion of less  
162 than monthly drinkers in UKHLS (25.2%) compared with GS (17.2% in Set 1 and 16.2% in Set 2). Years  
163 of full-time education was comparable between Set 1 and 2 of GS ( $13.6 \pm 3.4$  and  $13.8 \pm 3.4$ ,  
164 respectively) whilst in UKHLS it was slightly lower ( $12.3 \pm 5.1$ ). In UKHLS, 1.6% of participants (n=18)  
165 were currently working night shifts while 8.8% (n=103) had reported working night shifts over the  
166 previous 11 years. In GS Set 1, 8.1% (n=127) of participants reported working at night for >20 hours  
167 per week at the time of sampling, compared with 7.9% (n=193) in GS Set 2.

168

## 169 **2.2. Lifestyle factors**

### 170 *2.2.1. How does night shift work relate to conventionally measured lifestyle factors?*

171 In GS, night shift work was inversely associated with alcohol frequency in both GS Set 1 and GS Set 2  
172 (Model 1: Effect= -0.056; 95% CI -0.095, -0.017; p=0.006 category change per hour for GS Set 1, and -  
173 0.039; -0.072, -0.006; p=0.019 for GS Set 2), although associations attenuated with adjustment for  
174 the other self-reported phenotypes in GS Set 2 (Model 2: -0.024; -0.057, 0.009; p=0.151) (**Table S1**).  
175 Night shift work was positively associated with smoking status in GS Set 1 (Model 1: 0.024; 0.006,  
176 0.042; p=0.009 category change per hour) but were more weakly associated in GS Set 2 (Model 2:  
177 0.012; -0.006, 0.030; p=0.216), and when adjusted for the other phenotypes (**Table S1**). There were  
178 positive associations between night shift work and BMI in both GS Set 1 (Model 1: 0.15; 0.03, 0.28;  
179 p=0.02 kg/m<sup>2</sup> per hour) and GS Set 2 (Model 2: 0.23; 0.14, 0.32; p=1x10<sup>-6</sup>), although these  
180 associations attenuated when adjusted for the other phenotypes. There was an inverse association  
181 between night shift work and education in GS Set 2 (Model 1: -0.07; -0.13, -0.02; p=0.01 hour per  
182 year) which was less apparent in GS Set 1 (Model 1: -0.05; -0.12, 0.03; p=0.21), although there was  
183 stronger evidence of association of the binary night shift work variable with education, based on in  
184 both datasets (**Table S1**).

185 In UKHLS, no strong associations were found between current, ever, or previous night shift work and  
186 any of the lifestyle phenotypes, although effect estimates were typically in the same direction as in  
187 GS (**Table S2**).

188 In the GS-UKHLS combined meta-analysis there was evidence of a positive association between night  
189 shift work and BMI (0.79; 0.02, 1.56; p=0.04 kg/m<sup>2</sup> difference between those who did and did not  
190 work night shifts) and an inverse association between night shift work and education (-0.18; -0.30, -  
191 0.07; p=0.002 log odds per year of education) in the fully adjusted models (Model 2) (**Figure 1**).  
192 There was little evidence for an association between night shift work and either alcohol intake or  
193 smoking status in a meta-analysis across the three datasets (0.00; -0.19, 0.20; p=0.97 and 0.04; -  
194 0.19, 0.27; p=0.73 category change between those who did and did not work night shifts,  
195 respectively). There was little evidence for heterogeneity between the study estimates ( $I^2 < 5\%$ ).  
196 Results of the minimally adjusted models (Model 1) are shown in **Figure S1**.

### 197 *2.2.2. How are DNA methylation biomarkers associated with lifestyle factors in GS and UKHLS?*

198 There were positive associations between each DNAm score and its respective lifestyle phenotype in  
199 both GS and UKHLS (**Table S3** and **S4**, respectively).

### 200 *2.2.3. Is night shift work associated with DNA methylation biomarkers?*

201 In GS, there were no clear associations between night shift work and the alcohol DNAm score (**Table**  
202 **S5**). Night hours were positively associated with the smoking DNAm score in both GS Set 1 and GS  
203 Set 2 (Model 1: 0.04 SD; 0.02, 0.06;  $p=1.28\times10^{-4}$  and 0.02 SD; 0.00, 0.04;  $p=0.01$ ), although  
204 associations attenuated with further covariate adjustment in Models 2 and 3. Number of night hours  
205 was also positively associated with the BMI DNAm score in both GS Set 1 and GS Set 2 (Model 1: 0.03  
206 SD; 0.01, 0.05;  $p=0.01$  and 0.03 SD; 0.01, 0.04;  $p=0.04$ ). Associations attenuated with further  
207 covariate adjustment in Models 2 and 3 (**Table S5**). Number of night hours was inversely associated  
208 with the education DNAm score in GS Set 1 (Model 1: -0.20 hours; -0.33, -0.08;  $p=0.001$ ) and more  
209 weakly in GS Set 2 (Model 1: -0.09 hours; -0.19, 0.01;  $p=0.08$ ). With further covariate adjustment,  
210 the association persisted in GS Set 1 but was attenuated in GS Set 2 (**Table S5**).

211 None of the night shift work measures were strongly associated with the lifestyle DNAm scores  
212 when UKHLS was assessed independently (**Table S6**). When estimates from GS were combined in a  
213 meta-analysis with UKHLS, there was little evidence of night shift work associations with the alcohol  
214 and BMI DNAm scores in the fully adjusted models (Model 3) (**Figure 2**). However, there was some  
215 evidence of an inverse association between night shift work and the education DNAm score in all  
216 three datasets (-0.24; -0.49, 0.01;  $p=0.06$  log odds per year) (**Figure 2**). There was also weak evidence  
217 for a positive association between night shift work and the smoking DNAm score (0.06 SD, -0.03,  
218 0.15;  $p=0.18$ ). There was little evidence for heterogeneity between the study estimates in the meta-  
219 analysis ( $I^2 = 0\%$ ). Results of the minimally adjusted models (Models 1 and 2) are shown in **Figures S2**  
220 and **S3**.

### 221 **2.3. Epigenetic ageing**

222 There was evidence of an association between night shift work and GrimAge in GS, but not for the  
223 other epigenetic clocks. For GrimAge, the number of night hours was associated with higher age  
224 acceleration in both GS Set 1 (Model 1: 0.19 years, 0.11, 0.27;  $p=1.18\times10^{-5}$ ) and GS Set 2 (Model 1:  
225 0.10 years, 0.04, 0.16;  $p=9.45\times10^{-4}$ ) (**Table S7**). Associations with GrimAge acceleration remained,  
226 although were partially attenuated on adjustment for smoking, BMI, education and alcohol (**Table**  
227 **S7**). None of the night shift work measures were strongly associated with epigenetic age acceleration  
228 in UKHLS (**Table S8**).

229 In the GS-UKHLS meta-analysis, night shift work was associated with a 0.80 year (0.42, 1.18;  $p<0.001$ )  
230 increase in GrimAge acceleration (**Figure 3**). There was also weak evidence of association with  
231 PhenoAge acceleration (0.46 years; 0.00, 0.92;  $p=0.05$ ). The other four epigenetic clocks showed  
232 limited evidence of association. There was low heterogeneity between the study estimates in the  
233 meta-analysis ( $I^2 < 50\%$ ).

234

## 235 **DISCUSSION**

236 We conducted analyses to investigate associations between night shift work and both phenotypic  
237 and DNAm markers in two cohorts. When we assessed phenotypic traits, we found that night shift  
238 work was associated with higher BMI and lower education. When assessing DNAm predictors of the  
239 same traits, there was similar evidence of association of night shift work with BMI and education  
240 DNAm scores. While the association with the BMI score was attenuated after adjusting for the  
241 corresponding phenotype, night shift work was nominally associated with education and smoking in  
242 fully adjusted models. Furthermore, two of the epigenetic age measures, GrimAge and PhenoAge,  
243 demonstrated higher age acceleration among night shift workers.

244 The observational associations of night shift work with lower education and higher BMI have been  
245 previously reported with comparable effect sizes<sup>23</sup>. While we did not find evidence of a phenotypic  
246 association with reported smoking, the association between night shift work and the smoking  
247 methylation score is consistent with previous studies reporting that smoking behaviour is more  
248 common with shift work comparison to day work<sup>8,24-27</sup>. One study also found that shift workers were  
249 also more likely to start smoking in comparison to their counterpart day workers<sup>28</sup>. We also found  
250 little evidence of an association between night shift work and either self-reported or methylation  
251 measures of alcohol; however, previous research has found that shift workers were more likely to  
252 drink heavily<sup>7</sup>.

253 There is growing evidence to suggest that DNAm-based measures are useful for health and lifestyle  
254 profiling<sup>29</sup>. Furthermore, several studies have shown that methylation predictors can provide a more  
255 accurate measurement of exposure than those based on self-report<sup>30</sup>. For example, previous studies  
256 have shown that smoking methylation scores may provide a more accurate measure of true  
257 exposure compared with self-reported smoking<sup>18,30</sup>, possibly due to erroneous self-reporting, the  
258 broad categories for reporting exposure, or because DNAm is able to capture long-term biological  
259 changes as a result of smoking as well as secondary smoking. This is supported in part by our findings  
260 that the education and smoking scores were still weakly associated with night shift work even after  
261 adjusting for the corresponding self-reported exposures.

262 Night shift work was also associated with higher epigenetic age acceleration, as measured by two  
263 epigenetic clocks: one predictive of mortality (GrimAge)<sup>18</sup> and the other predictive of physiological  
264 dysregulation (PhenoAge)<sup>17</sup>. White *et al* (2019)<sup>12</sup> also found associations between the length of time  
265 working night shifts and increased PhenoAge<sup>31</sup>, although GrimAge was not investigated. Circadian  
266 oscillators have been found to contribute to epigenetic ageing<sup>32</sup> and there is emerging evidence that  
267 DNAm age estimators relate to circadian rhythm<sup>33</sup>. However, it should be noted that we did not find  
268 that night shift work was associated with the Hannum and Horvath clocks, which were designed to  
269 estimate chronological age<sup>20,22</sup>. This absence of association is in accordance with findings from White  
270 *et al*<sup>31</sup> and suggests that intrinsic circadian processes are unlikely to underlie the associations  
271 observed<sup>17,18</sup>.

## 272 **Strengths and limitations**

273 One of the main strengths of the study is the use of GS, an epidemiological cohort study with a large  
274 sample size with DNAm data which has also captured information on night shift work. Meta-  
275 analysing associations with those from the UKHLS dataset also improved power to detect  
276 associations between night shift work, lifestyle factors and DNAm predictors and indicated  
277 consistency in associations across studies. Furthermore, we have the use of both self-reported and  
278 DNAm markers for the same exposure, so were able to directly compare.

279 There were some limitations to the study. The DNAm scores used in this study were developed in GS  
280 Set 1, which might lead to overfitting of the models. However, by using the second set of  
281 participants in GS and the independent UKHLS datasets, we hope that this should minimise any  
282 potential overfitting issues. There was also limited evidence for heterogeneity in the associations  
283 observed between GS set 1 and the other studies.

284 We specifically assessed night shift work rather than other forms of shift work (such as  
285 morning/evening only or rotating shift work) in relation to DNA methylation. This is because of the  
286 previous evidence suggesting that night shift work is likely to be particularly disruptive to biological  
287 processes and to have implications for adverse health. Whilst rotating shift work has also been  
288 linked with circadian disruption, we did not specifically investigate this group of workers. There is  
289 limited information on the intensity of shift work per night, e.g. whether the participant works 7pm-

290 7am three days a week or 7pm-10pm every day, or the direction of shift rotation (forward or  
291 backward rotating) which may have a differential biological impact<sup>34</sup>.

292 We are unable to make conclusions regarding causality of the associations observed. We cannot  
293 exclude reverse causation since the analysis in GS and that based on current night shift work in  
294 UKHLS was assessed cross-sectionally. Given education preceeds shift work status, the association  
295 implies that those with less education engage in occupations that include night shift work. This is in  
296 line with a previous study which found an inverse association between a genetic (rather than  
297 epigenetic) risk score for higher education and shift work participation<sup>35</sup>.

298 To support our findings, similar analysis should be performed in larger cohorts with DNAm data.  
299 Future studies should also look at evaluating whether these biomarkers could provide insights into  
300 the potential effects of night shift work on subsequent health outcomes, e.g., cardiometabolic  
301 diseases and cancer.

302

### 303 CONCLUSIONS

304 In over 8,000 participants from two cohort studies, night shift work was associated with both  
305 phenotypic and DNA methylation-based measures of higher BMI and lower education. DNAm  
306 predictors of smoking and ageing were also related to night shift work. Epigenetic measures may  
307 provide insights into the health and lifestyle profiles of night shift workers.

308

**Table 1: Origins of lifestyle DNA methylation scores employed in the current analysis**

Phenotype	DNA methylation scores	Original publication	No. of CpG sites
Alcohol	Alcohol	Epigenetic prediction of complex traits and death <sup>13</sup>	450
Smoking	Smoking	Epigenetic prediction of complex traits and death <sup>13</sup>	233
BMI	BMI	Epigenetic prediction of complex traits and death <sup>13</sup>	1109
Education	Education	Epigenetic prediction of complex traits and death <sup>13</sup>	373
Ageing	AgeAccelHorvath	DNA methylation age of human tissues and cell types <sup>22</sup>	353
	IEAA	DNA methylation age of human tissues and cell types <sup>22</sup>	353
	AgeAccelHannum	Genome-wide methylation profiles reveal quantitative views of human ageing rates <sup>20</sup>	71
	EEAA	DNA methylation-based measures of biological age: meta-analysis predicting time to death <sup>21</sup>	71
	AgeAccelPheno	An epigenetic biomarker of ageing for lifespan and healthspan <sup>17</sup>	513
	AgeAccelGrim	DNA methylation GrimAge strongly predicts lifespan and healthspan <sup>18</sup>	1,030

309

CpG: cytosine-phosphate-guanine; IEAA: Intrinsic epigenetic age acceleration; EEAA: Extrinsic

310

epigenetic age acceleration

311 **Table 2: Baseline characteristics of the participants in Generation Scotland and Understanding  
312 Society**

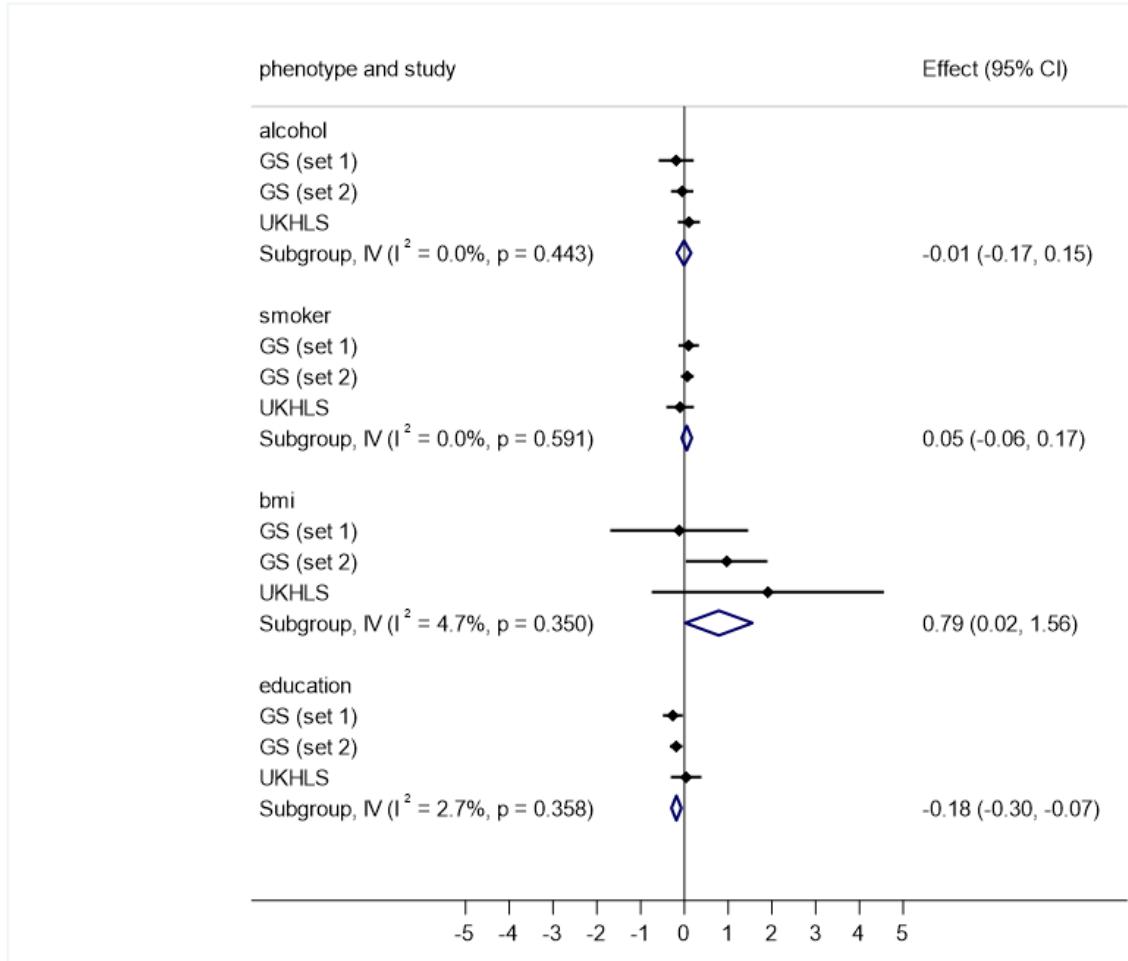
313

Variables	Categories	Generation Scotland					Understanding Society		
		Set 1 (n=2578)		Set 2 (n=4450)			Overall (n=1175)		
		Mean	SD	Mean	SD		Mean	SD	
<b>Age (years)</b>		50.02	12.5	51.39	13.2		57.97	15.0	
<b>Body mass index (kg/m<sup>2</sup>)</b>		27.24	5.4	26.76	4.9		28.11	6.2	
<b>Education (years of full-time education)</b>		13.62	3.4	13.75	3.4		12.31	5.1	
		<i>N</i>	<i>%</i>	<i>N</i>	<i>%</i>		<i>N</i>	<i>%</i>	
<b>Sex</b>	<i>Male</i>	1583	38.6	1944	43.7		489	41.6	
	<i>Female</i>	995	61.4	2506	56.3		686	58.4	
<b>Smoking status</b>	<i>Current</i>	460	18.3	675	15.5		186	15.9	
	<i>Former</i>	771	30.7	1398	32.1		487	41.6	
	<i>Never</i>	1276	50.9	2276	52.3		498	42.5	
<b>Alcohol</b>	<i>Daily</i>	167	12.4	334	13.2		164	16.0	
	<i>More than weekly</i>	728	54	1402	55.6		475	43.6	
	<i>More than monthly</i>	222	16.5	386	15.2		166	15.2	
	<i>Less than monthly</i>	231	17.2	411	16.2		275	25.2	
<b>Night shift work</b>	<i>0 hours per week</i>	1015	64.9	1592	65.6	<i>Never</i>	1072	91.2	
	<i>1-19 hours per week</i>	422	27.0	643	26.5	<i>Ever</i>	103	8.8	
	<i>&gt;20 hours per week</i>	127	8.1	193	7.9	<i>Previous</i>	79	6.9	
						<i>Current</i>	18	1.6	

314

315

316 **Figure 1: Associations between night shift work and phenotypes in Generation Scotland (GS) and**  
317 **Understanding Society (UKHLS)**



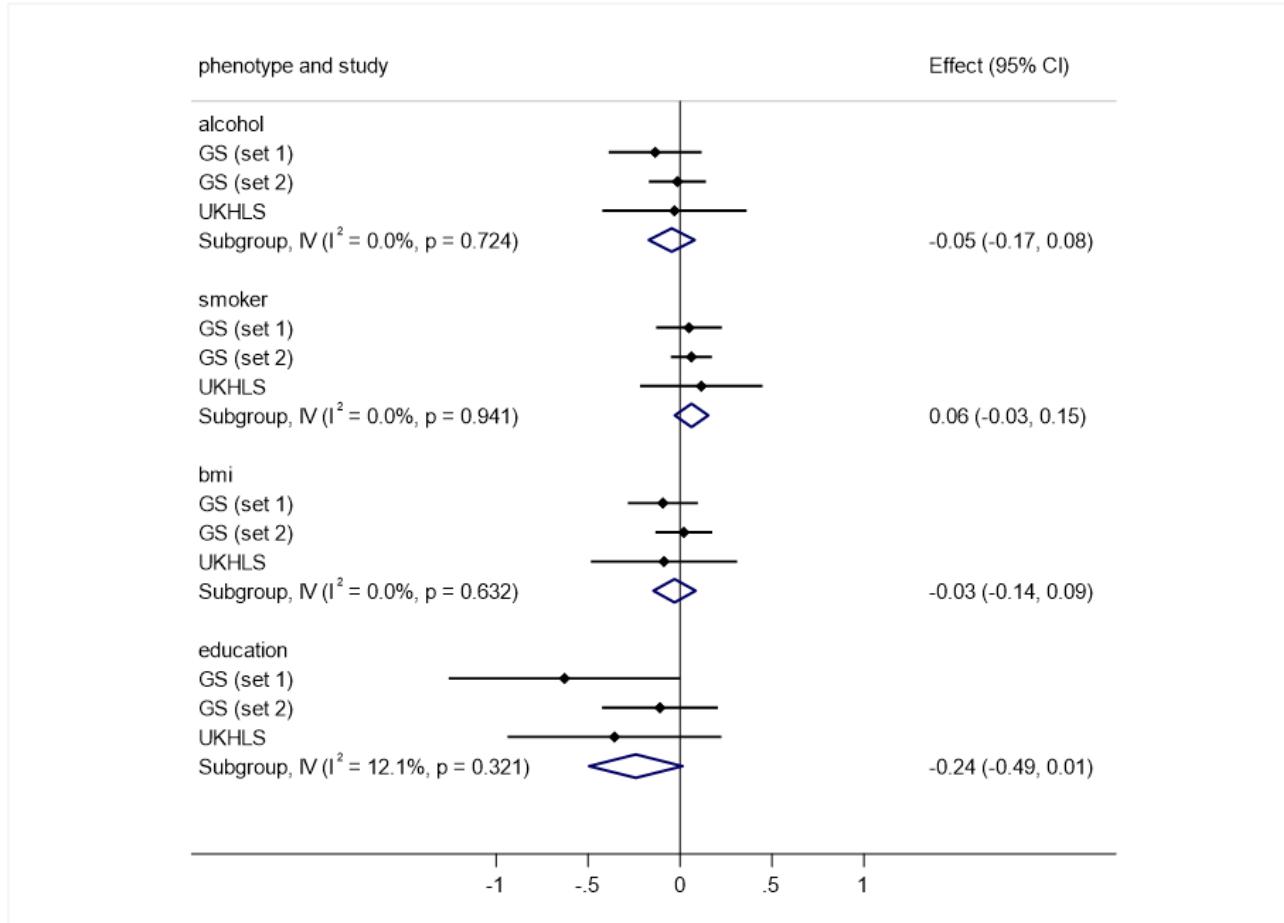
318

319 **\*Model 2: adjusted for age, sex, other self-reported phenotypes (e.g., for smoking, model adjusted**  
320 **for alcohol, body mass index and education)**

321 For these models, education was treated as the exposure and shift work was the outcome; effect  
322 estimates are log odds ratios

323

324 **Figure 2: Associations between night shift work and methylation scores in Generation Scotland**  
325 **(GS) and Understanding Society (UKHLS)**



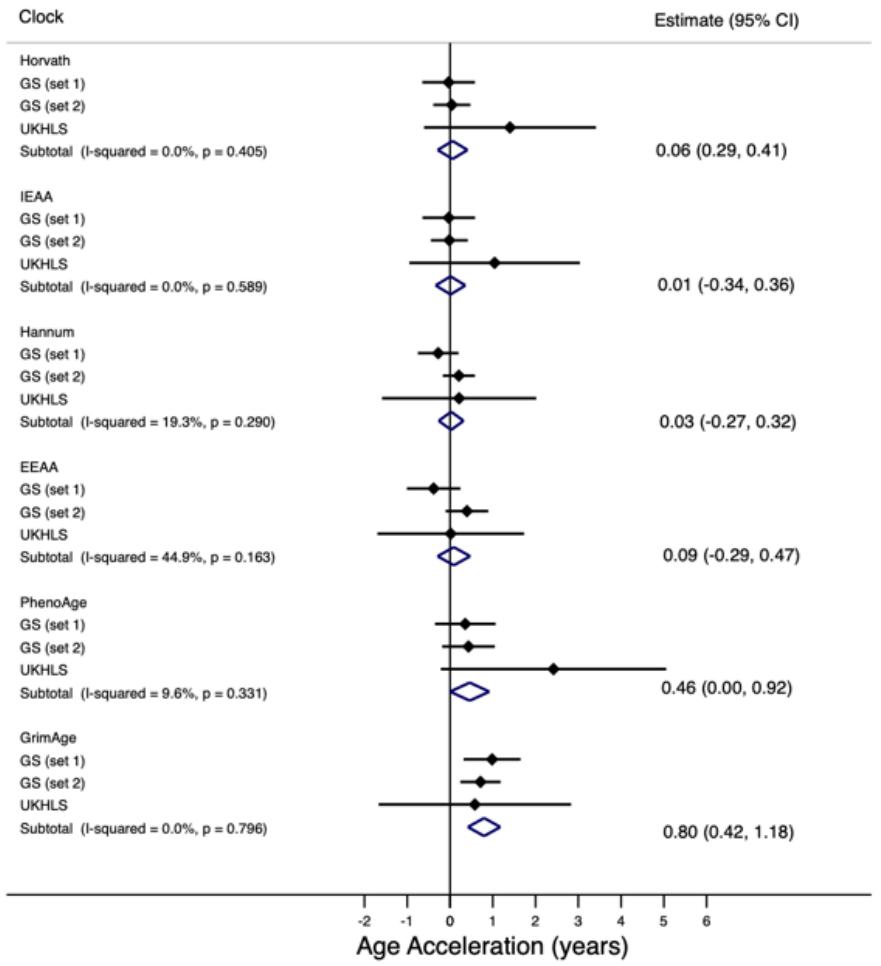
326

327 **\*Model 3: adjusted for age, sex, blood processing day, rack barcode, corresponding other self-  
328 reported phenotypes (e.g., for smoking DNAm, model adjusted for smoking, alcohol, body mass  
329 index and education)**

330 For these models, education was treated as the exposure and shift work was the outcome; effect  
331 estimates are log odds ratios

332

333 **Figure 3: Associations between night shift work and epigenetic age acceleration in Generation**  
334 **Scotland (GS)and Understanding Society (UKHLS)**



335

336 **Model 2: Adjusted for sex, 20 methylation PCs, smoking, alcohol, body mass index and education**

337 For these models, education was treated as the exposure and shift work was the outcome; effect  
338 estimates are log odds ratios

339

340 **SUPPLEMENTARY MATERIALS**

341 Supplementary Table 1: Associations between night shift work and phenotypes in Generation  
342 Scotland

343 Supplementary Table 2: Associations between night shift work and phenotypes in Understanding  
344 Society

345 Supplementary Table 3: Associations between phenotypes and methylation scores in Generation  
346 Scotland

347 Supplementary Table 4: Associations between phenotypes and methylation scores in Understanding  
348 Society

349 Supplementary Table 5: Associations between night shift work and methylation scores in Generation  
350 Scotland

351 Supplementary Table 6: Associations between night shift work and methylation scores in  
352 Understanding Society

353 Supplementary Table 7: Associations between night shift work and measures of epigenetic age  
354 acceleration in Generation Scotland

355 Supplementary Figure 1: Associations between night shift work and phenotypes in Understanding  
356 Society and Generation Scotland – Model 1

357 Supplementary Figure 2: Associations between night shift work and methylation scores in  
358 Understanding Society and Generation Scotland – Model 1

359 Supplementary Figure 3: Associations between night shift work and methylation scores in  
360 Understanding Society and Generation Scotland – Model 2

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391 Conceptualization, Rebecca Richmond; Data curation, Daniel L. McCartney and Yanchun Bao; Formal  
392 analysis, Paige Hulls, Daniel L. McCartney and Rebecca Richmond; Supervision, Frank De Vocht and  
393 Richard Martin; Visualization, Richard Martin; Writing – original draft, Paige Hulls and Rebecca  
394 Richmond; Writing – review & editing, Paige Hulls, Daniel L. McCartney, Yanchun Bao, Rosie Walker,  
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#### 397 **INSTITUTIONAL REVIEW BOARD STATEMENT**

398 Data governance was provided by the METADAC data access committee, funded by ESRC, Wellcome,  
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400 Ethical approval for Understanding Society was obtained from the National Research Service  
401 (Understanding Society – UK Household Longitudinal Study: A Biosocial Component, Oxfordshire A  
402 REC, Reference: 10/H0604/2). All our consents can be found here:  
403 <https://www.understandingsociety.ac.uk/documentation/health-assessment/fieldwork-documents>.

#### 404 **INFORMED CONSENT STATEMENT**

405 Informed consent was obtained from all subjects involved in the study.

#### 406 **DATA AVAILABILITY STATEMENT**

407 According to the terms of consent for GS participants, access to data must be reviewed by the GS  
408 Access Committee. Applications should be made to [access@generationscotland.org](mailto:access@generationscotland.org).

#### 409 **CONFLICT OF INTERESTS**

410 REM has received speaker fees from Illumina and is an advisor to the Epigenetic Clock Development  
411 Foundation.

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