**Supplementary Table 5 Risk of bias of the included studies using the Newcastle-Ottawa Scale.**

|  |  |  |  |
| --- | --- | --- | --- |
| First author  | Selection | Comparability | Outcome |
|  | Q1 | Q2 | Q3 | Q4 | Q1 | Q1 | Q2 | Q3 |
| Nakano A | \* | \* |  | \* | \* | \* | \* |  |
| Moon SW | \* | \* | \* | \* | \*\* | \* | \* |  |
| Ebihara K | \* | \* | \* | \* | \* | \* | \* |  |
| Faverio P | \* | \* | \* | \* | \*\* | \* | \* | \* |
| Hanada M  | \* |  |  | \* | \* | \* | \* |  |
| Fujikawa T | \* | \* |  | \* | \* | \* | \* |  |
| Çinkooğlu A | \* | \* |  | \* | \* | \* | \* |  |
| Holst M | \* | \* | \* | \* | \* | \* | \* |  |
| Fujita K | \* | \* |  | \* | \* | \* | \* |  |
| Ohkubo H | \* | \* |  | \* | \* | \* | \* |  |
| Sridhar M | \* | \* | \* | \* | \*\* | \* | \* |  |
| Cabrera-César E | \* | \* |  | \* | \* | \* | \* |  |
| Ibarra-Fernández AA | \* | \* | \* | \* | \*\* | \* | \* |  |
| Sanmartín-Sánchez A | \* | \* | \* | \* | \*\* | \* | \* |  |
| Salhöfer L | \* | \* |  | \* | \* | \* | \* |  |

NEWCASTLE - OTTAWA QUALITY ASSESSMENT SCALE

CASE CONTROL STUDIES

Note: A study can be awarded a maximum of one star for each numbered item within the Selection and Exposure categories. A maximum of two stars can be given for Comparability.

Selection

1) Is the case definition adequate?

a) yes, with independent validation 

b) yes, eg record linkage or based on self reports

c) no description

2) Representativeness of the cases

a) consecutive or obviously representative series of cases 

b) potential for selection biases or not stated

3) Selection of Controls

a) community controls 

b) hospital controls

c) no description

4) Definition of Controls

a) no history of disease (endpoint) 

b) no description of source

Comparability

1) Comparability of cases and controls on the basis of the design or analysis

a) study controls for \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Select the most important factor.) 

b) study controls for any additional factor. (This criteria could be modified to indicate specific control for a second important factor.)

Exposure

1) Ascertainment of exposure

a) secure record (eg surgical records) 

b) structured interview where blind to case/control status 

c) interview not blinded to case/control status

d) written self report or medical record only

e) no description

2) Same method of ascertainment for cases and controls

a) yes 

b) no

3) Non-Response rate

a) same rate for both groups 

b) non respondents described

c) rate different and no designation