Supplementary Table 1. Combined associations between acetaminophen use and *GSTP1* polymorphism, rs1695, on asthma or BHR

	Acetaminophen use	*GSTP1* (rs1695)	Number (%)		aOR	95% CI lower	95% CI upper	*P* value
			(-)	(+)				
Asthma diagnosis, ever	No	AA	508 (31.57)	44 (27.16)	1.00			
	No	AG+GG	244 (15.16)	25 (15.43)	1.06	0.58	1.91	0.86
	Yes	AA	542 (33.69)	56 (34.57)	1.30	0.81	2.07	0.27
	Yes	AG+GG	315 (19.58)	37 (22.84)	1.42	0.84	2.40	0.19
Current asthma	No	AA	537 (31.61)	14 (30.43)	1.00			
	No	AG+GG	261 (15.36)	5 (10.87)	0.54	0.15	1.95	0.34
	Yes	AA	572 (33.67)	16 (34.78)	1.14	0.50	2.57	0.76
	Yes	AG+GG	329 (19.36)	11 (23.91)	1.12	0.43	2.90	0.82
BHR (PC$_{20}$ ≤ 16)	No	AA	482 (32.20)	83 (29.02)	1.00			
	No	AG+GG	239 (15.97)	25 (8.74)	0.72	0.42	1.25	0.24
	Yes	AA	491 (32.80)	113 (39.51)	1.23	0.84	1.81	0.29
	Yes	AG+GG	285 (19.04)	65 (22.73)	1.35	0.88	2.09	0.17

Data were calculated by logistic regression multivariate analysis. Current asthma, together with asthma symptoms in past 12 months, lifetime asthma diagnosis were assessed by questionnaire. BHR, bronchial hyperresponsiveness; *GSTP1*, glutathione S-transferase pi 1. aOR, odds ratio adjusted by age, sex, BMI, income, environmental tobacco smoking and family history of asthma.