

Supplementary Table 2. Combined associations between acetaminophen use and *NQO1* polymorphism, rs1800566, on asthma or BHR

	Acetaminophen use	<i>NQO1</i> (rs1800566)	Number (%)		aOR	95% CI lower	95% CI upper	<i>P</i> value
			(-)	(+)				
Asthma diagnosis, ever	No	GG	263 (16.16)	29 (18.01)	1.00			
	No	GA+AA	491 (30.18)	40 (24.84)	0.61	0.35	1.08	0.09
	Yes	GG	298 (18.32)	32 (19.88)	0.84	0.46	1.55	0.58
	Yes	GA+AA	575 (35.34)	60 (37.27)	0.99	0.60	1.67	0.99
Current asthma	No	GG	280 (16.30)	8 (17.39)	1.00			
	No	GA+AA	521 (30.33)	11 (23.91)	0.65	0.23	1.86	0.42
	Yes	GG	315 (18.34)	8 (17.39)	0.69	0.21	2.29	0.55
	Yes	GA+AA	602 (35.04)	19 (41.30)	1.18	0.46	3.01	0.73
BHR ($PC_{20} \leq 16$)	No	GG	250 (16.52)	41 (14.24)	1.00			
	No	GA+AA	471 (31.13)	69 (23.96)	0.93	0.57	1.52	0.77
	Yes	GG	268 (17.71)	67 (23.26)	1.29	0.77	2.19	0.34
	Yes	GA+AA	524 (34.63)	111 (38.54)	1.32	0.83	2.10	0.24

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; *NQO1*, NAD(P)H quinone oxidoreductase-1. aOR, odds ratio adjusted by age, sex, BMI, income, environmental tobacco smoking and family history of asthma.