Supplementary information

Increased risks between Interleukin-10 gene polymorphisms and haplotype and head and neck cancer: a meta-analysis

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Supplementary Tables

Supplementary Table S1: Scale for quality assessment.

Supplementary Table S2: PRISMA 2009 Checklist For this Meta-analysis.

Supplementary Table S3: PRISMA 2009 Flow Diagram.

Supplementary Table S4: Quality assessment based on the Newcastle-Ottawa Scale of studies included in this meta-analysis.

Table S1 Scale for quality assessment.

Criteria	Score
Representativeness of cases	
Consecutive/randomly selected form case population with clearly defined sampling frame	2
Consecutive/randomly selected form case population without	1
clearly defined sampling frame or with extensive	
Not described	0
Source of controls	
Population- or Healthy-based	2
Hospital-bases	1
Not described	0
Hardy-Weinberg equilibrium in controls	
Hardy-Weinberg equilibrium	2
Hardy-Weinberg disequilibrium	1
Genotyping examination	
Genotyping done under "blinded" condition	1
Unblinded done or not mentioned	0
Association assessment	
Assess association between genotypes and head and neck	2
cancer with appropriate statistics and adjustment for confounders	
Assess association between genotypes and head and neck	1
cancer with appropriate statistics and without adjustment for	
confounders	0
Inappropriate statistics used	

Table S2 PRISMA 2009 Checklist For this Meta-analysis

Section/topic	#	Checklist item			
TITLE					
Title	1	Identify the report as a systematic review, meta-analysis, or both.	P1		
ABSTRACT					
Structured summary	ctured summary 2 Provide a structured summary including, as applicable: background; objectives; data sources; study eligibility criteria, participants, and interventions; study appraisal and synthesis methods; results; limitations; conclusions and implications of key findings; systematic review registration number.		P3		
INTRODUCTION					
Rationale	ationale 3 Describe the rationale for the review in the context of what is already known.				
Objectives	4	Provide an explicit statement of questions being addressed with reference to participants, interventions, comparisons, outcomes, and study design (PICOS).			
METHODS					
Protocol and registration	otocol and registration 5 Indicate if a review protocol exists, if and where it can be accessed (e.g., Web address), and, if available, provide registration information including registration number.		N/A		
Eligibility criteria	ligibility criteria 6 Specify study characteristics (e.g., PICOS, length of follow-up) and report characteristics (e.g., years considered, language, publication status) used as criteria for eligibility, giving rationale.				
Information sources	Describe all information sources (e.g., databases with dates of coverage, contact with study authors to identify additional studies) in the search and date last searched.				
Search	8	Present full electronic search strategy for at least one database, including any limits used, such that it could be repeated.			

Study selection	9	State the process for selecting studies (i.e., screening, eligibility, included in systematic review, and, if applicable, included in the meta-analysis).				
Data collection process	10	Describe method of data extraction from reports (e.g., piloted forms, independently, in duplicate) and any processes for obtaining and confirming data from investigators.	P6,7			
Data items	11	List and define all variables for which data were sought (e.g., PICOS, funding sources) and any assumptions and simplifications made.	P7			
Risk of bias in individual studies	12	Describe methods used for assessing risk of bias of individual studies (including specification of whether this was done at the study or outcome level), and how this information is to be used in any data synthesis.	P7, Appendix 1			
Summary measures	immary measures 13 State the principal summary measures (e.g., risk ratio, difference in means).		P7,8			
Synthesis of results 14 Describe the methods of handling data and combining results of studies, if done, including measures of consistence (e.g., I ²) for each meta-analysis.		P7,8				

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Section/topic	#	hecklist item			
Risk of bias across studies	15	Specify any assessment of risk of bias that may affect the cumulative evidence (e.g., publication bias, selective reporting within studies).			
Additional analyses	16	Describe methods of additional analyses (e.g., sensitivity or subgroup analyses, meta-regression), if done, indicating which were pre-specified.			
RESULTS	RESULTS				
Study selection 17 Give numbers of studies screened, assessed for eligibility, and included in the review, with reasons for exclusions a each stage, ideally with a flow diagram.		P8,9			

Study characteristics	18	For each study, present characteristics for which data were extracted (e.g., study size, PICOS, follow-up period) and provide the citations.					
Risk of bias within studies	n studies 19 Present data on risk of bias of each study and, if available, any outcome level assessment (see item 12).						
Results of individual studies	20	For all outcomes considered (benefits or harms), present, for each study: (a) simple summary data for each intervention group (b) effect estimates and confidence intervals, ideally with a forest plot.	P9,10,11,12				
Synthesis of results 21 Present results of each meta-analysis done, including confidence intervals and measures of consistency.							
Risk of bias across studies	Risk of bias across studies 22 Present results of any assessment of risk of bias across studies (see Item 15).						
dditional analysis 23 Give results of additional analyses, if done (e.g., sensitivity or subgroup analyses, meta-regression [see Item 16]).							
DISCUSSION							
Summary of evidence	ummary of evidence 24 Summarize the main findings including the strength of evidence for each main outcome; consider their relevance to key groups (e.g., healthcare providers, users, and policy makers).		P14,15				
Limitations	mitations 25 Discuss limitations at study and outcome level (e.g., risk of bias), and at review-level (e.g., incomplete retrieval of identified research, reporting bias).						
Conclusions	onclusions 26 Provide a general interpretation of the results in the context of other evidence, and implications for future research.		P16,17				
FUNDING							
Funding	Describe sources of funding for the systematic review and other support (e.g., supply of data); role of funders for the systematic review.						

From: Moher D, Liberati A, Tetzlaff J, Altman DG, The PRISMA Group (2009). Preferred Reporting Items for Systematic Reviews and Meta-Analyses: The PRISMA Statement. PLoS Med 6(6): e1000097. doi:10.1371/journal.pmed1000097

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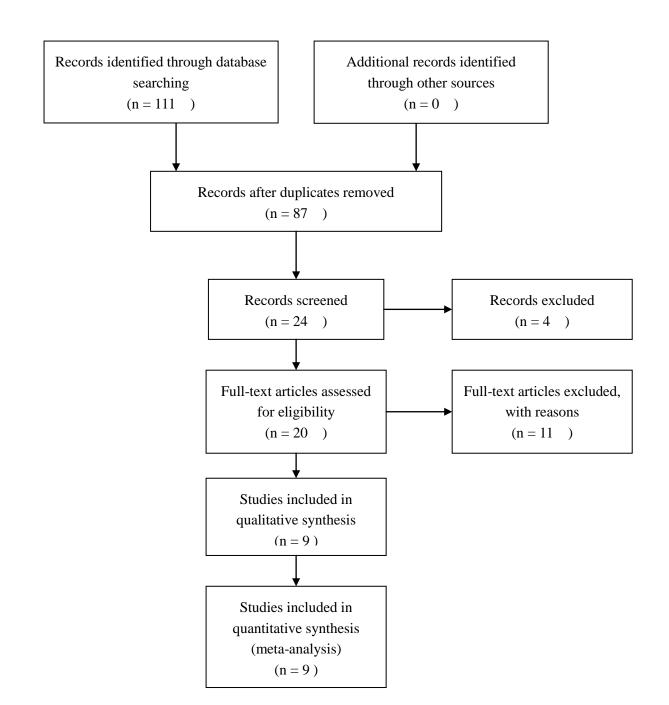


Table S4 Quality assessment based on the Newcastle-Ottawa Scale of studies included in this meta-analysis.

Author	Year	Representativeness	Source of	Hardy-Weinberg	Genotyping	Association	Total ^a
		of cases	controls	equilibrium in	examination blinded	assessment	
				controls ^a			
Pratesi	2006	1	2	2,2,2	0	2	7,7,7
Wei	2007	2	2	1,1,1	0	1	6,6,6
Farhat	2008	2	2	1	0	1	6
Yao	2008	2	2	1,2,2	0	1	6,7,7
Vairaktaris	2008	2	2	1	0	1	6
Jeong	2010	2	1	2	0	1	6
Tsai1	2013	2	1	1,1,2	0	2	6,6,7
Tsai2	2014	2	1	1,1,1	0	2	6,6,6
Hsu	2015	2	2	2,2,2	1	1	8,8,8

^a: the studies of Pratesi et al., Wei Yao Pratesi et al., Tsai1 Pratesi et al., Tsai2 Pratesi et al., and Hsu Pratesi et al. reported three polymorphisms.

And the quality score focused on each polymorphism.