Parity and gastric cancer risk: a systematic review and dose-response meta-analysis of prospective cohort studies

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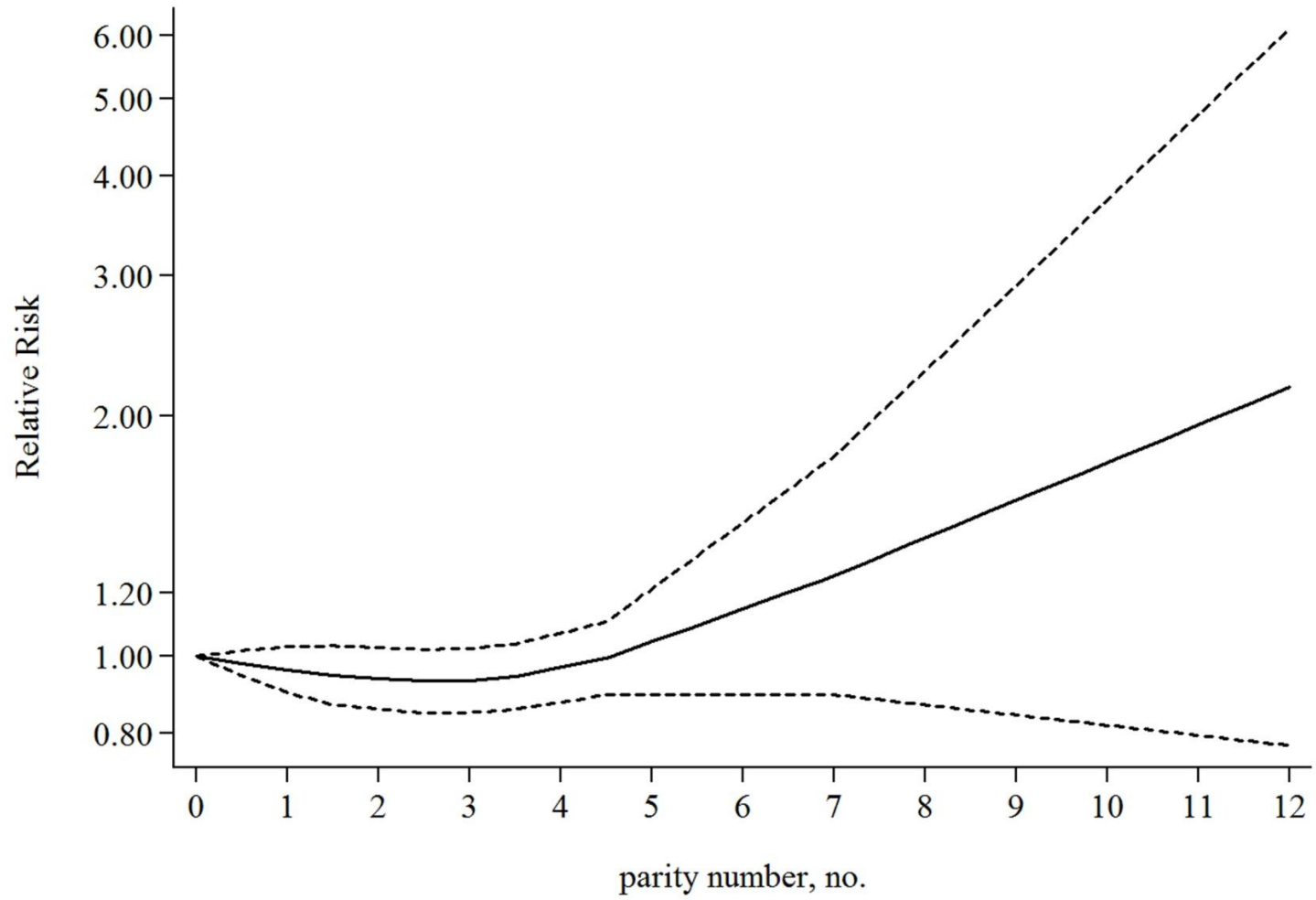**Supplementary Table S1.** Methodological quality of prospective studies included in the meta-analysis[*]

First author, (reference) publication year	Representativeness of the exposed cohort	Selection of the unexposed cohort	Ascertainment of exposure	Outcome of interest not present at start of study	Control for important factor or additional factor†	Assessment of outcome	Follow-up long enough for outcomes to occur ‡	Adequacy of follow-up of cohorts §
Green, 2012	☆	☆	☆	☆	☆☆	☆	—	☆
Chang, 2011	☆	☆	☆	☆	—	☆	☆	☆
Duell, 2010	☆	☆	☆	☆	☆☆	☆	—	☆
Freedman, 2010	☆	☆	☆	☆	☆☆	☆	—	☆
Bahmanyar, 2008	☆	☆	☆	☆	—	☆	☆	☆
Persson, 2008	☆	☆	☆	☆	—	☆	☆	☆
Freedman, 2007	☆	☆	☆	☆	☆☆	☆	—	☆
Koski-Rahikkala, 2006	☆	☆	☆	☆	—	☆	☆	☆
Kaneko, 2003	☆	☆	☆	☆	☆☆	☆	—	☆
Heuch, 2000	☆	☆	☆	☆	—	☆	☆	☆

* A study could be awarded a maximum of one star for each item except for the item Control for important factor or additional factor. The definition/explanation of each column of the Newcastle-Ottawa Scale is available from (http://www.ohri.ca/programs/clinical_epidemiology/oxford.asp.).

† A maximum of 2 stars could be awarded for this item. Studies that controlled for cigarette smoking received one star, whereas studies that controlled for other important confounders such as body mass index, alcohol drinking received an additional star.

‡ A cohort study with a follow-up time ≥10 y was assigned one star.

§ A cohort study with a follow-up rate ≥75% was assigned one star.

Supplementary Figure S1. Dose-response relationship for the association between parity number and gastric cancer risk. The solid line represents the estimated relationship. The dashed line represents the 95% confidence interval of the estimated relationship. The P values for nonlinearity were 0.093. The vertical axis is on a log scale.