

**Supplementary table 1.** Summary of 21 prospective observational studies with fish consumption information included in the present review

First Author	Publication year	Study	Quality Score (0-6, 6 is best)	Design	Location	Baseline population	Age range/ average, y	Sex	Highest intake category (referent)	No. of Participants	Average Follow-up, y	No. of any Stroke Event
Kinjo <sup>1</sup>	1999	Kinjo Y	4	Prospective cohort	Japan	General	40+	Both	≥4 servings/wk (<1 serving/wk)	223,170	15.0	11,030
Bernstein <sup>2</sup>	2012	NHS	6	Prospective cohort	USA	General	30-55	Women	Top quintile (bottom quintile)	84,010	26.0	2,633
Takachi <sup>2,3</sup>	2010	JPHC	6	Prospective cohort	Japan	General	45-74	Both	Top quintile (bottom quintile)	77,500	8.0	1,745
Yamagishi <sup>4</sup>	2008	JACC	6	Prospective cohort	Japan	General	40-79	Both	Top quintile (bottom quintile)	57,972	12.7	972
Bernstein <sup>2</sup>	2012	HPFS	6	Prospective cohort	USA	General	40-75	Men	Top quintile (bottom quintile)	43,150	22.0	1,397
Sauvaget <sup>5</sup>	2003	HNLS	6	Prospective cohort	Japan	General	Men: 54 Women: 58	Both	1 serving/d (none)	40,349	16.0	1,462
Larsson <sup>6</sup>	2011	SMC	6	Prospective cohort	Sweden	General	49-83	Women	>3 servings/wk (<1 serving/wk)	34,670	10.4	1,680
Myint <sup>7</sup>	2006	EPIC-Norfolk	6	Prospective cohort	UK	General	40-79	Both	>2 servings/wk (<1 serving/wk)	24,312	8.5	421
Morris <sup>8</sup>	1995	PHS	6	Prospective cohort	USA	General	40-84	Men	≥5 servings/wk (<1 serving/wk)	21,185	4.0	173
de Goede <sup>9</sup>	2012	MORGEN	6	Prospective cohort	Netherlands	General	20-65	Both	Top quartile (bottom quartile)	20,069	10.5	221
Yuan <sup>10</sup>	2001	Shanghai	5	Prospective cohort	China	General	45-64	Men	≥200 g/wk (<50 g/wk)	18,244	12.0	480
Nakamura <sup>11</sup>	2005	NIPPON	5	Prospective cohort	Japan	General	30+	Both	>2 servings/d (1-2 servings/wk)	8,879	19.0	288
Mozaffarian <sup>12</sup>	2005	CHS	6	Prospective cohort	USA	General	65-98	Both	≥5 servings/wk (<1 serving/mo)	4,775	12.0	626
Montonen <sup>13</sup>	2009	FMCHE	6	Prospective cohort	Finland	General	40-79	Both	Top quartile (bottom quartile)	3,958	28.0	659
Atkinson <sup>14</sup>	2011	CaPS	6	Prospective cohort	UK	General	45-59	Men	Top quintile (bottom quintile)	2,710	18.0	225
Kaushik <sup>15</sup>	2008	BMES	6	Prospective cohort	Australia	General	49+	Both	>2 servings/wk (<1 serving/wk)	2,683	10.0	100
Gillum <sup>16</sup>	1996	NHANES I	6	Prospective cohort	USA	General	45-74	Both	>1 serving/wk (none)	2,059	12.0	262
Folsom <sup>17</sup>	2004	IWHS	5	Prospective cohort	USA	General	55-69	Women	Top quintile (bottom quintile)	1,847	14.0	313
Orencia <sup>18</sup>	1996	WES	5	Prospective cohort	USA	General	40-55	Men	≥35 g/d (0 g/d)	1,847	30.0	222
Wennburg <sup>19</sup>	2007	MONICA	5	Nested case-control	Sweden	General	55.4	Both	>3 servings/wk (<1 serving/mo)	1,107	15.0	369
Keli <sup>20</sup>	1994	ZUTPHEN	5	Prospective cohort	Netherlands	General	50-69	Men	>20 g/d (≤20 g/d)	552	15.0	42
<i>Total</i>										675,048	15.1	25,320

**Supplementary table 2.** Summary of 14 prospective observational studies of long-chain omega-3 fatty acid included in the present review

First Author	Publication year	Study	Quality Score (0-6, 6 is best)	Design	Location	Baseline population	Age range/ average, yr	Sex	Omega-3 Assessment	Average baseline Intake/ proportion	Sample type	Assay method	No. of Participants	Average Follow-up, yr	No. of any Stroke Event
Yamagishi <sup>4</sup>	2008	JACC	6	Prospective cohort	Japan	General	40-79	Both	Food frequency questionnaire	1.60 g/d	-	-	57,972	12.7	972
Montonen <sup>13</sup>	2009	FMCHE	6	Prospective cohort	Finland	General	40-79	Both	Dietary history interview	0.35 g/d	-	-	3,958	28.0	659
He <sup>21</sup>	2002	HPFS	6	Prospective cohort	United States	General	40-75	Men	Food frequency questionnaire	0.30 g/d	-	-	43,671	12.0	608
Iso <sup>22</sup>	2001	NHS	6	Prospective cohort	United States	General	34-59	Women	Food frequency questionnaire	0.17 g/d	-	-	79,839	14.0	574
de Goede <sup>9</sup>	2012	MORGEN	6	Prospective cohort	Netherlands	General	20-65	Both	Food frequency questionnaire	0.11 g/d (women) 0.12 g/d (men)	-	-	20,069	10.5	221
Yuan <sup>10</sup>	2001	Shanghai	5	Prospective cohort	China	General	45-64	Men	Food frequency questionnaire	0.10 g/d	-	-	18,244	12.0	480
Wiberg <sup>23</sup>	2006	ULSAM	5	Prospective cohort	Sweden	General	50	Men	Circulating EPA (20:5, n-3) + DHA (22:6, n-3)	2.00%	Serum	GLC	2,009	29.3	421
Wennburg <sup>19</sup>	2007	MONICA	5	Nested case-control	Sweden	General	55	Both	Circulating EPA (20:5, n-3) + DHA (22:6, n-3)	5.75%	Plasma	GLC	1,107	15.0	369
Iso <sup>24</sup>	2003	Iso	6	Prospective cohort	Japan	General	40-69	Both	24-hour dietary recall	2.60 g/d	-	-	4,775	14.0	295
Iso <sup>25</sup>	2002	Kyowa	4	Nested case-control	Japan	General	40-85	Both	Circulating EPA (20:5, n-3) + DHA (22:6, n-3)	4.10%	Serum	GLC	788	4.5	197
Simon <sup>26</sup>	1995	MRFIT	4	Nested case-control	United States	General	35-57	Men	Circulating EPA (20:5, n-3) and DHA (22:6, n-3)	3.88%	Plasma	GLC	192	7.0	190
Morris <sup>8</sup>	1995	PHS	6	Prospective cohort	United States	General	40-84	Men	Food frequency questionnaire	0.24 g/d	-	-	21,185	4.0	173
Strom <sup>27</sup>	2012	DNBC	6	Prospective cohort	Denmark	General	16-47	Women	Food frequency questionnaire	0.31 g/d	-	-	48,627	8.0	146
Kaushik <sup>15</sup>	2008	BMES	6	Prospective cohort	Australia	General	49 and above	Both	Food frequency questionnaire	NR	-	-	2,683	10.0	69
<i>Total</i>													305,119	13.0	5,374

**Supplementary table 3.** Summary of 12 randomised controlled trials included in the present review

Lead Author/s, publication year	Name of the Trial	Quality Score (0-6, 6 is best)	Location	Baseline population	Age group, y	Sex	Intervention/s	Control/s	No. of Participants	Average Follow-up, y	No. of Stroke Event
Yokoyama et al. 2007 <sup>28</sup>	JELIS	5	Japan	Hyperlipidaemia	Men: 40-75 Women: ≤75	Both	Capsule: EPA, 1.8 g/d +Pravastatin 10 mg or Simvastatin 5 mg/d	Pravastatin 10 mg or Simvastatin 5 mg/d	18,645	4.6	328
ORIGIN investigators. 2012 <sup>29</sup>	ORIGIN	6	Multicentre	Dysglycemia	≥50	Both	Capsule: EPA+DHA, 1 g/d	Placebo containing equal amount of olive oil	12,536	6.2	650
GISSI-P investigators 2002; GISSI-P investigators 1999 <sup>30,31</sup>	GISSI-P	4	Italy	Prior MI	Not defined	Both	Capsule: EPA+DHA, 1 g/d	Placebo containing no EPA+DHA	11,334	3.5	178
GISSI-HF Investigators. 2008 <sup>32</sup>	GISSI-HF	5	Italy	CHF	≥18	Both	Capsule: EPA+DHA, 1 g/d	Placebo containing no EPA+DHA	6,975	4.0	225
Omega study group 2010 <sup>33</sup>	OMEGA	5	Germany	Recent MI	≥18	Both	Capsule: 0.46 g EPA + 0.38 g DHA per day	Equal amount of olive oil per day	3,804	1.0	40
Burr et al. 1989 <sup>34</sup>	DART	5	United Kingdom	Prior MI	<70	Men	Dietary advice of fatty fish or equivalent EPA capsule, approx. 0.43 g/d	Non specific dietary advice	3,114	2.0	30
Galan P et al. 2010 <sup>35</sup>	SU.FOL.OM3	5	France	Prior MI	45-80	Both	Capsule: 0.4 g EPA+ 0.2 g DHA/day	Placebo containing no EPA+DHA	2,501	4.7	83
Burr et al. 2003 <sup>36</sup>	DART 2	5	United Kingdom	Recent angina	<70	Men	Dietary advice of fatty fish or equivalent EPA capsule, approx. 0.5 g/d	Non specific dietary advice	2033	2	7
Eritsland J et al. 1996 <sup>37</sup>	-	4	Norway	Recent CHD	Not defined	Both	Capsule: EPA+DHA, 3.3 g/d	Placebo containing no EPA+DHA	610	1.0	7
von Schacky et al. 1999 <sup>38</sup>	-	5	Germany	CHD	18-75	Both	Capsule: EPA, 1.06 g/d + DHA, 0.65 g/d	Placebo containing non-marine fatty acid mixture	223	2.0	4
Svensson et al. 2006 <sup>39</sup>	OPACH	5	Denmark	Prior CVD	Not defined	Both	Capsule: EPA+DHA, 1.7 g/d	Equal amount of olive oil	206	2.0	10
Sacks et al. 1995 <sup>40</sup>	HARP	4	United States	Recent CHD	30-75	Both	Capsule: EPA, 2.9 g/d + DHA, 1.9 g/d + DPA, 1.2 g/d	Placebo containing olive oil	59	2.4	1
<i>Total</i>									<i>62,040</i>	<i>3.0</i>	<i>1,563</i>

JELIS, Japan EPA Lipid Intervention Study; ORIGIN, Outcome Reduction with an Initial Glargine Intervention; GISSI-HF, The Gruppo Italiano per lo Studio della Sopravvivenza nell'Infarto Miocardico-Heart Failure; GISSI-P, The Gruppo Italiano per lo Studio della Sopravvivenza nell'Infarto Miocardico-Prevenzione; SU.FOL.OM3, SUPplementation with Folate, vitamin B6 and B12 and/or OMEga-3 fatty acids; OPACH, Omega-3 Fatty Acids as Secondary Prevention Against Cardiovascular Events in Patients Who Undergo Chronic Hemodialysis; HARP, Harvard Atherosclerosis Reversibility Project; CHF, chronic heart failure; MI, myocardial infarction; CRF, chronic renal failure; CHD, coronary heart disease; PAD, peripheral arterial disease; CVD, cardiovascular disease; EPA, Eicosapentaenoic acid; DHA, Docosahexanoic acid; GLA, Gamma linolenic acid; g/d, gram/day; mg/d, milligram/day