Association between TP53 Arg72Pro polymorphism and leukemia risk: a meta-

analysis of 14 case-control studies

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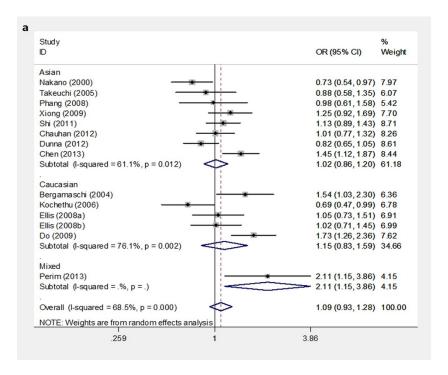
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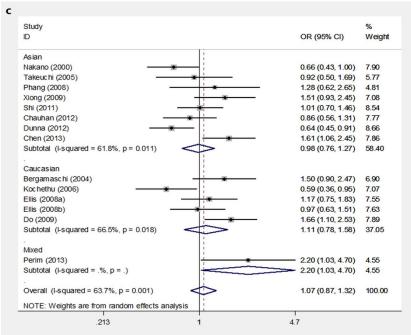
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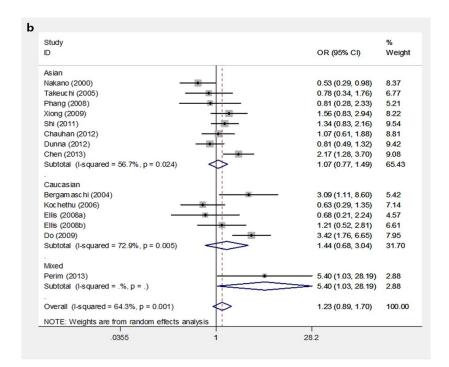
Table S1 Scale for quality assessment criterion

Criterion	Score
Source of cases	
Selected from population or cancer registry	3
Selected from hospital	2
Selected from pathology archives, but without description	1
Not described	0
Source of controls	
Population-based	3
Blood donors or volunteers	2
Hospital-based (cancer-free patients)	1
Not described	0
Specimens used for determining genotypes	
White blood cells or normal tissues	3
Tumor tissues or exfoliated cells of tissue	0
Hardy–Weinberg equilibrium in controls	
Hardy–Weinberg equilibrium	3
Hardy–Weinberg disequilibrium	0
Total sample size	
>1,000	3
>500 and <1,000	2
>200 and <500	1
<200	0

Fig.S1 Forest plot of OR with 95% CI of leukemia associated with the *TP53* Arg72Pro polymorphism (a allele model; b homozygous model; c dominant model; d recessive model)







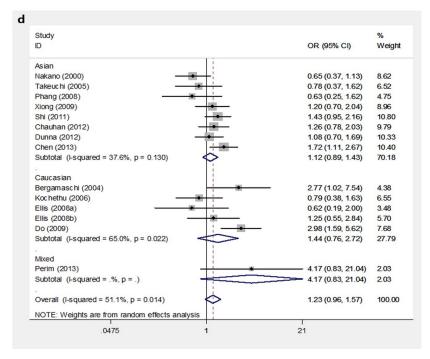


Fig.S2 Sensitivity analysis of the association between the TP53 Arg72Pro polymorphism and leukemia (allele model)

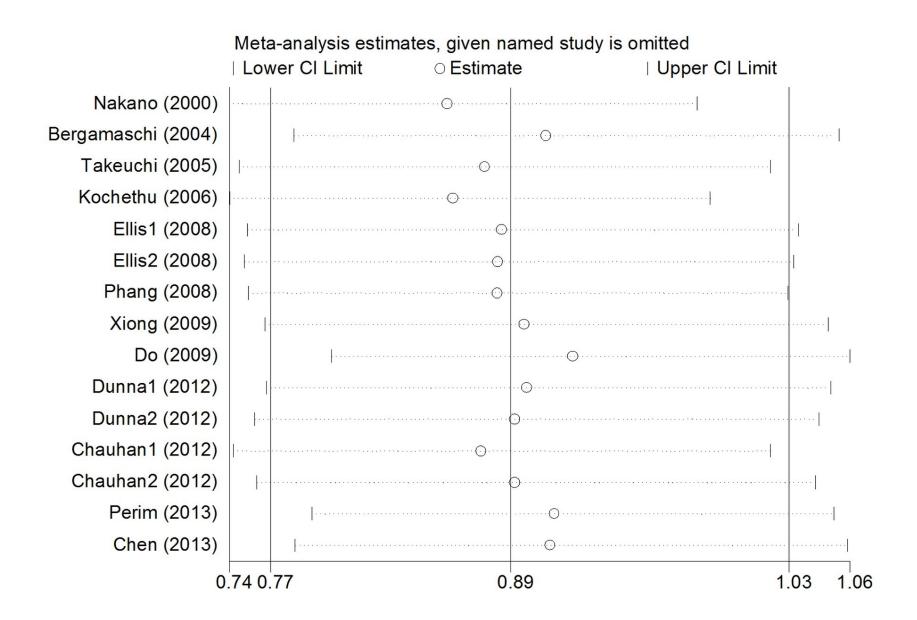


Fig.S3 Begger's funnel plot of publication biases on the association between the *TP53* Arg72Pro polymorphism and leukemia risk (allele model)

