Supplementary Online Content

- Soneji S, Barrington-Trimis JL, Wills TA, et al. Association between initial use of e-cigarettes and subsequent cigarette smoking among adolescents and young adults: a systematic review and meta-analysis. *JAMA Pediatr*. Published online June 26, 2017. doi:10.1001/jamapediatrics.2017.1488
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This supplementary material has been provided by the authors to give readers additional information about their work.

eTable 1. Summary of Search Results

Database	Platform	Years covered	Dates	#
			Conducted	Results
Medline	Pubmed	1946-current	July 28, 2016	2471
			December 15,	
			2016	
			February 13,	
			2017	
Embase	Embase.com	1974-current	July 28, 2016	3156
			December 13,	
			2016	
			February 7, 2017	
Web of Science	WOS	1900-current	July 28, 2016	2055
			December 15,	
			2016	
			February 13,	
			2017	
Cochrane Library	Wiley	Issue #, date	July 28, 2016	240
-		DSR - Iss7, July	December 15,	
		2016	2016	
		Dare-Iss2, April 2015	February 17,	
		Trials-Iss6, June	2017	
		2016		
		methods-Iss3, July		
		2012		
		tech-Iss2, April 2016		
Society for	_	2016	September 1,	803
Research on			2016	
Nicotine &				
Tobacco				
Society for		2016	September 1,	34
Behavioral			2016	
Medicine				
NIH Tobacco		2016	September 1,	167
Regulatory			2016	
Science				
Conference				
			Total	8926
		Total with D	uplicates Removed	6959

eTable 2. PubMed Run (Conducted on July 28, 2016)

Search	Query	Items
		Found
#3	Search (#1 AND #2)	2,044
#2	Search Tobacco Use[mesh] OR Tobacco [mesh] OR Tobacco use	292,817
	disorder[mesh] OR Tobacco Products[mesh] OR Cigarette*[tiab]	
	OR Tobacco[tiab] OR Smoking[tiab] OR smoker*[tiab] OR	
	cigar*[tiab]	
#1	Search Electronic Cigarettes[mesh] OR (Nebulizers and	2,231
	Vaporizers[mesh] AND (tobacco[mesh] OR tobacco[tiab] OR	
	nicotine[mesh] OR nicotine[tiab])) OR (Drug Delivery	
	Systems[mesh] AND (tobacco[mesh] OR tobacco[tiab] OR	
	nicotine[mesh] OR nicotine[tiab])) OR Electronic Cigarette*[tiab]	
	OR E-Cig*[tiab] OR electronic nicotine delivery system*[tiab]	
	OR vape*[tiab] OR vaping[tiab]	

eTable 3. Cochrane Library (Wiley) Run (Conducted on July 28, 2016)

ID	Search	Hits
#1	Electronic Cigarette* or E-Cig* or electronic nicotine delivery system*	3,344
	or vape* or vaping or nebulize*:ti,ab,kw (Word variations have been	
	searched)	
#2	Cigarette* or Tobacco or Smoking or smoker* or cigar*:ti,ab,kw	20,039
	(Word variations have been searched)	
#3	#1 and #2	196

eTable 4. Keyword Search Terms for Society for Research on Nicotine and Tobacco and Society of Behavioral Medicine Annual Meetings and NIH Tobacco Regulatory Science Program Conference

Keywords					
Electronic cigarette*					
E-cig*					

Electronic nicotine delivery system

Vape*

Vaping

Tobacco

Smoking

Cigarette

eTable 5. Psychosocial and Behavioral Characteristics Included in Studies

G. I		Details			
Study	Covariate				
Leventhal	Depressive	20-item Center for Epidemiologic Studies			
et al.	Symptoms	Depression Scale			
(2015)	Impulsivity	5-item Temperament and Character Inventory			
		impulsivity subscale			
	Delinquent	Sum of frequency ratings for engaging in 11			
	Behavior	different behaviors (e.g., stealing, lying to parents)			
	Substance Use	Ever use of alcohol and 13 separate illicit and			
		prescription substances of abuse			
	Family History of	"Does anyone in your immediate family (brothers,			
	Smoking	sisters, parents, or grandparents) have a history of			
		smoking cigarettes?"			
	Peer Smoking	"In the last 30 days, how many of your 5 closest			
		friends have smoked cigarettes?"			
	Smoking	"Would you try smoking a cigarette if one of your			
	Susceptibility	best friends offered it to you?"			
		"Do you think you would smoke in the next 6			
		months?"			
		"Are you curious about smoking?"			
		(definitely not, probably not, probably yes, definitely			
	G 11	yes)			
	Smoking				
	Expectancies	smoking" and (reversed) "I think I might feel bad			
		from smoking."(1 strongly disagree, 2 disagree, 3			
D: 1	G 4: G 1:	agree, 4 strongly agree)			
Primack	Sensation Seeking	Composite measure of sensation-seeking tendency			
et al.		previously found to be related to cigarette smoking			
(2015)		and other high-risk health behaviors based on 6			
	Donontal Conclains	items, such as "I like to do dangerous things" Navar (0) former (1) especianel (2) and deily (2)			
	Parental Smoking	Never (0), former (1), occasional (2), and daily (3), and scores for mothers and fathers were averaged			
	Peer Smoking	# of respondents' close friends smoked cigarettes,			
	reel Smoking	with response choices of none (0), few (1), more than			
		a few (2), or most (3)			
Barrington-	Cigarette Use in	"Does anyone who lives with you now use			
Trimis	Home	cigarettes?"			
et al.	Peer Smoking	"How many of your 4 closest friends use			
(2016)	1 cci Sillokilig				
(2010)	Dear Assentability	[cigarettes]?" (0–4 friends) "How would your best friends act toward you if you			
	Peer Acceptability of Smoking	used cigarettes?" (very unfriendly, unfriendly,			
	or Smoking	friendly, or very friendly)			
Primack	Self-Esteem				
et al.		Single-Item Self-Esteem Scale 4. item validated Likert type scale that included items			
(2016)	Sensation Seeking	4-item validated Likert-type scale that included items			
(2010)		such as "I like to do dangerous things"			

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	Rebelliousness	Validated Likert-type subscale of Smith and Fogg that included items such as "I tend to go against the rules"
Unger et al.	Past Month Use of Alcohol	
(2016)	Past Month Use of Other Tobacco Products	Hookah, cigars, little cigars, smokeless tobacco
Hornik et al.	Sensation Seeking	4-item validated Likert-type scale that included items such as "I like to do frightening things"
(2016)	Ever Cigarette Use	"Have you ever tried smoking cigarettes, even one or two puffs?"
	Cigarette Use in Home	"Does anyone who lives with you now smoke cigarettes?"
	Peer Smoking	"How many of your 4 closest friends smoke cigarettes?" (0-4 friends)
Spindle et al. (2016)	Depression	4 items from the Symptom Checklist (SCL)-90. Items are measured on 5-point Likert scales and included "feeling blue," "worrying too much about things," "feeling hopeless about the future," "feeling no interest in things."
	Anxiety	4 items from the SCL-90. Items are measured on 5-point Likert scales and included "feeling fearful," "suddenly scared for no reason," "nervousness or shakiness inside," "spells of terror or panic."
	Impulsivity	5 subscales from the UPPS-P Impulsive Behavior Scale. Subscales each consisted of 3 items measured on 4-point Likert scales. Subscales included: lack of perseverance, lack of premeditation, negative urgency, positive urgency, and sensation seeking.
	Stressful Life Events	12 items inquiring about potentially stressful life events in the past 12 months (e.g., "separation from loved one or close friend"). Stressful life events were summed to create an overall score.
	Peer Deviance	6 items addressing how many of the student's friends (from "none" to "all") had smoked cigarettes, drank alcohol, gotten drunk, had problems with alcohol, been in trouble with the law, and smoked marijuana. Items were summed to create an overall peer deviance score.
	Other Tobacco Use	Ever use of "smokeless tobacco," "little cigars/cigarillos," and "hookah."
Miech et al. (2017)	Binge Drinking, Past 2 Weeks	"Think back over the last 2 weeks. How many times (if any) have you had 5 or more drinks in a row?"
	Marijuana Use,	"On how many occasions (if any) have you used

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Past 30	Days marijua	ana (weed, pot) or
	hashish	(hash, hash oil) during the last 30 days?"

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eTable 6. Quality of Studies Assessment (Newcastle-Ottawa Scale)

Category	Criteria	Leventhal	Primack	Wills et	Barrington-	Unger et	Hornik &	Primack	Spindle	Miech et
		et al. (2015)	et al. (2015)	al. (2015)	Trimis et al. (2015)	al. (2016)	Gibson (2016)	et al. (2016)	et al. (2016)	al. (2017)
Selection	Representative- ness of the exposed cohort	b*	b*	b*	b*	b*	b*	b*	b*	b*
	Selection of the non-exposed cohort	a*	a*	a*	a*	a*	a*	a*	a*	a*
	Ascertainment of exposure	С	С	С	С	С	С	С	С	С
	Demonstration that outcome of interest was not present at start of study	a*	a*	a*	a*	a*	a*	a*	a*	a*
Comparabil ity	Comparability of cohorts on the basis of the design or analysis	b*	b*	b*	b*	b*	b*	b*	b*	b*
Outcome	Assessment of outcome	С	С	С	С	С	С	С	С	С
	Was follow-up long enough for outcomes to occur ¹	a*	a*	a*	a*	a*	a*	a*	a*	a*
	Adequacy of follow-up of cohorts ²	b*	С	С	С	b*	d	С	b*	С
Total # of sta	rs (*)	6	5	5	5	6	5	5	6	5

¹6 months considered adequate follow up time

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²Studies with <20% loss to follow-up received one star for adequacy of follow-up of cohorts

Note: Lev=Leventhal et al. (2015); Pri=Primack et al. (2015); Wil=Wills et al. (2016); Bar=Barrington-Trimis et al. (2016);

Ung=Unger et al. (2016); Hor=Hornik et al. (2016); Spi=Spindle et al. (2016); Mie=Miech et al. (2017). Letters refer to the grade as denoted by the Newcastle – Ottawa Scale rubric (http://www.ohri.ca/programs/clinical_epidemiology/nosgen.pdf).

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eTable 7. Risk of Bias (ROBINS-I)

Study	Confounding	Selection	Measurement	Missing	Measurement	Reported	Overall
			of Intervention	Data	of Outcomes	Result	
Lev (2015)	Moderate	Low	Low	Low	Low	Moderate	Moderate
Pri (2015)	Moderate	Low	Low	Low	Low	Moderate	Moderate
Wil (2016)	Moderate	Low	Low	Low	Low	Moderate	Moderate
Bar (2016)	Moderate	Low	Low	Low	Low	Moderate	Moderate
Pri (2016)	Moderate	Low	Low	Low	Low	Moderate	Moderate
Ung (2016)	Moderate	Low	Low	Low	Low	Moderate	Moderate
Hor (2016)	Moderate	Low	Low	Low	Low	Moderate	Moderate
Spi (2016)	Moderate	Low	Low	Low	Low	Moderate	Moderate
Mie (2017)	Moderate	Low	Low	Low	Low	Moderate	Moderate

Note: Moderate=the study is sound for a non-randomized study with regard to this domain but cannot be considered comparable to a well-performed randomized trial; Low=the study is comparable to a well-performed randomized trial with regard to this domain. Lev=Leventhal et al. (2015); Pri=Primack et al. (2015); Wil=Wills et al. (2016); Bar=Barrington-Trimis et al. (2016); Ung=Unger et al. (2016); Hor=Hornik et al. (2016); Spi=Spindle et al. (2016); Mie=Miech et al. (2017).

eTable 8. Pooled Adjusted Odds Ratio Varying Probability of Publishing Study With Largest Standard Error

Probability of	OR [95%	P-value for hypothesis of overall treatment effect	P-value for hypothesis that no selection remains unexplained
publishing	CI]		-
study with			
largest			
standard			
error			
1	3.57	< 0.0001	0.0416
	[2.37;		
	5.39]		
0.93	3.49	< 0.0001	0.0495
	[2.30;		
	5.30]		
0.79	3.32	< 0.0001	0.068
	[2.19;		
	5.03]		
0.69	3.16	< 0.0001	0.0887
	[2.10;		
	4.75]		
0.6	3.01	< 0.0001	0.1203
	[2.02;		
	4.47]		
0.52	2.86	< 0.0001	0.167
	[1.95;		
	4.20]		
0.46	2.72	< 0.0001	0.2374
	[1.88;		
	3.94]		
0.4	2.59	< 0.0001	0.3434
	[1.81;		
	3.71]		

Note: Adj.=Adjusted; Prob.=Probability; OR=odds ratio; CI=confidence interval

eTable 9. Pooled Adjusted Odds Ratio: Copas Selection Model and Random-Effects Model

Model	OR [95%	P-value for hypothesis of overall treatment effect	P-value for hypothesis that no selection remains unexplained
	CI]		_
Copas	3.01	< 0.0001	0.1203
Selectio	[2.02;		
n	4.47]		
Random	3.62	< 0.0001	
Effects	[2.42;		
	5.41]		

Note: Adj.=Adjusted; OR=odds ratio; CI=confidence interval

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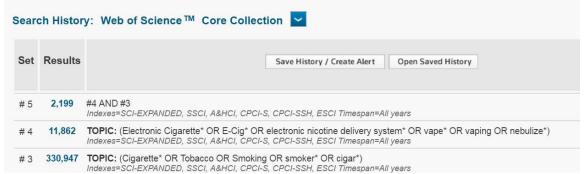
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eFigure 1. Embase Run (Conducted on July 28, 2016)

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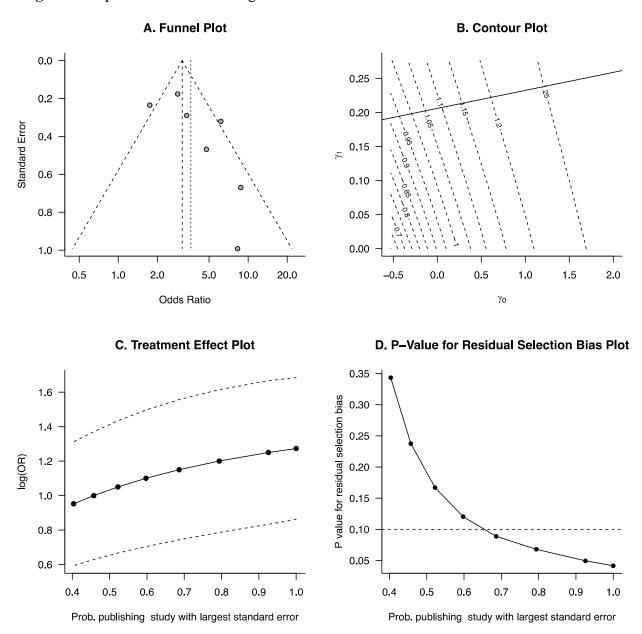
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eFigure 2. Web of Science Run (Conducted on July 28, 2016)



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eFigure 3. Copas Selection Modeling



eAppendix. Selection Bias: Copas Selection Modeling

Two of the seven studies on cigarette smoking initiation fell outside the 95% confidence intervals denoted by the diagonal dashed lines shown in the funnel plot (eFigure 3, Panel A), which suggests possible heterogeneity and publication bias. We then assessed the sensitivity of the meta-analysis to selection mechanisms of varying strength. 1,2 Specifically, γ_0 is approximately equal to the probit of the probability that a study with a large standard error is published and y_1 is approximately equal to the probit of the probability that a study with precision equal to the inverse of its standard error is published. The contour plot (eFigure 3, Panel B) suggests that the estimated adjusted pooled odds ratio from the meta-analysis may be sensitive (i.e., varies between 0.7 and 1.25) to the range of (γ_0, γ_1) values. We further explore this sensitivity in eFigure 3, Panels C and D. As the probability of publishing the study with the largest standard error decreases from 100% to 40%, the estimated adjusted pooled odds ratio deceases from 3.57 (e^{1.27}) to 2.59 (e^{0.95}; eFigure 3, Panel C). Notably, the confidence interval of the adjusted pooled odds ratio remains above 1 (i.e., confidence interval of log odds ratio remains above 0) across the range of probabilities of publishing the study with the largest standard error. For each of the selection probabilities shown in eFigure 3, Panel C, the Copas selection model calculates a p-value for the test of any remaining selection bias. Selection mechanisms for which this p-value is not statistically significant (i.e., p-value \geq 10%) correspond to more plausible estimates of the adjusted pooled odds ratio under the Copas selection model. The model indicates statistically significant residual publication bias (i.e., p-value < 10%) until the probability of publishing the study with the largest standard error falls just below 60%. In other words, estimated adjusted pooled odds ratios corresponding to probabilities of publishing the study with the largest standard error below 60% are the most plausible under the model. Notably, all of these estimated adjusted pooled odds ratios are statistically significant (eTable 8). Overall, adjusting for selection bias, the estimated adjusted pooled odds ratio equaled 3.01 (95% CI: 2.02, 4.47) compared to 3.62 (95% CI: 2.42, 5.41) under the baseline random effects model (eTable 9).