

Supplement Materials

Table S1. Overview of multivariable relationships of TMAO with CVEs or Death.

| Outcome | Author | Year | Adjusted HR (95% CI) | Adjusted Covariate |
|---------|-----------------|------|---------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CVEs | Tang, W. H. | 2013 | 1.43 (1.05-1.94) | age, sex, smoking status, systolic blood pressure, low-density lipoprotein cholesterol level, high-density lipoprotein cholesterol level, status with respect to diabetes mellitus and log-transformed high-sensitivity C-reactive protein level. |
| | Lever, M. | 2014 | 2.00 (1.10-3.60) | eGFR |
| | Kaysen, G. A. | 2015 | 0.92 (0.40-2.10) | race, diabetes, and prealbumin |
| | Kim, R. B. | 2015 | 1.23 (1.06-1.42) | age, sex, race and presence or absence of diabetes and cardiovascular comorbidities |
| | Suzuki, T. | 2016 | 1.09 (0.92-1.29) | age, blood urea and eGFR |
| Death | Tang, W. H. | 2013 | 3.37 (2.39-4.75) | age, sex, smoking status, systolic blood pressure, low-density lipoprotein cholesterol level, high-density lipoprotein cholesterol level, status with respect to diabetes mellitus and log-transformed high-sensitivity C-reactive protein level. |
| | Lever, M. | 2014 | 2.70 (1.60-4.80) | eGFR |
| | Kaysen, G. A. | 2015 | 1.14 (0.67-1.93) | none |
| | Tang, W. H. | 2015 | 1.45 (1.05-2.02) | traditional CVD risk factors, log-transformed hsCRP, log-transformed eGFR, hsCRP and cystatin C |
| | Troiseid, M. | 2015 | 1.35 (0.90-1.79) | eGFR, CRP and NT-proBNP |
| | Ottiger, M. | 2016 | 0.60 (0.20-1.60) and 1.90 (1.20-3.10) | comorbidities (coronary artery disease, congestive heart failure, cerebrovascular disease, peripheral artery occlusive disease, diabetes mellitus, chronic kidney disease, neoplastic disease, and chronic obstructive pulmonary disease) |
| | Skagen, K. | 2016 | 1.38 (0.91-2.08) | age and eGFR |
| | Missailidis, C. | 2016 | 4.32 (1.32-14.2) | age, gender, SGA, albumin, DM and mGFR |
| | Suzuki, T. | 2016 | 0.98 (0.80-1.21) | age, blood urea and eGFR |
| | Suzuki, T. | 2017 | 1.21 (0.98-1.48) | age, blood urea and eGFR |

eGFR= estimated glomerular filtration rate; CRP= C-reactive protein; NT-pro-BNP= amino-terminal pro-brain natriuretic peptide; ICED score= Index of Coexisting Disease Score; ESRD= end-stage renal disease

Table S2. Quality of Evidence evaluated by GRADE system

| Author | Year | Design | Downgrade quality of evidence | | | | | Upgrade quality of evidence | | | Quality of Evidence |
|-----------------|------|--------|-------------------------------|---------------|--------------|--------------|------------------|-----------------------------|-------|---------------|---------------------|
| | | | Risk of Bias | Inconsistency | Indirectness | Imprecision | Publication Bias | Large effect | PCWCE | Dose-response | |
| Tang, W. H. | 2013 | PCS | no | no | no | serious (-1) | undetected | large (+1) | no | no | High **** |
| Lever, M. | 2014 | PCS | no | serious (-1) | no | serious (-1) | undetected | no | no | no | Low **□□ |
| Kaysen, G. A. | 2015 | PCS | no | serious (-1) | serious (-1) | no | undetected | no | no | no | Low **□□ |
| Tang, W. H. | 2015 | PCS | no | no | no | serious (-1) | undetected | large (+1) | no | no | High **** |
| Troiseid, M. | 2015 | PCS | no | no | no | serious (-1) | undetected | no | no | no | Moderate ***□ |
| Kim, R. B. | 2015 | PCS | no | serious (-1) | no | no | undetected | no | no | no | Moderate ***□ |
| Ottiger, M. | 2016 | PCS | no | serious (-1) | no | serious (-1) | undetected | no | no | no | Low **□□ |
| Skagen, K. | 2016 | PCS | no | no | no | no | undetected | no | no | no | High **** |
| Missailidis, C. | 2016 | PCS | no | no | no | serious (-1) | undetected | no | no | no | Moderate ***□ |
| Suzuki, T. | 2016 | PCS | no | serious (-1) | no | no | undetected | no | no | no | Moderate ***□ |
| Suzuki, T. | 2017 | PCS | no | serious (-1) | no | no | undetected | no | no | no | Moderate ***□ |

Table S3. Assessment of Newcastle-Ottawa Scale

| Author | Year | Selection | Comparability | Outcome | Total |
|-----------------|------|-----------|---------------|---------|-------|
| Tang, W. H. | 2013 | 4 | 2 | 2 | 8 |
| Lever, M. | 2014 | 3 | 1 | 1 | 5 |
| Kaysen, G. A. | 2015 | 2 | 1 | 2 | 5 |
| Tang, W. H. | 2015 | 4 | 2 | 2 | 8 |
| Troiseid, M. | 2015 | 3 | 1 | 2 | 6 |
| Kim, R. B. | 2015 | 2 | 1 | 2 | 5 |
| Ottiger, M. | 2016 | 3 | 1 | 1 | 5 |
| Skagen, K. | 2016 | 4 | 1 | 2 | 7 |
| Missailidis, C. | 2016 | 3 | 2 | 1 | 6 |
| Suzuki, T. | 2016 | 3 | 1 | 1 | 5 |
| Suzuki, T. | 2017 | 3 | 1 | 1 | 5 |

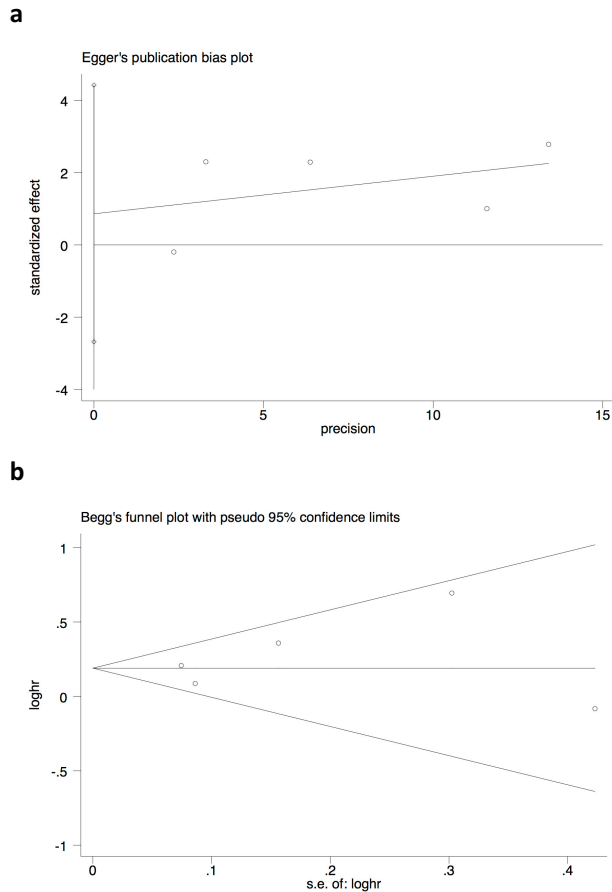


Fig. S1. Egger linear regression test and Begg's test plot with 95% Cis for the relationship between TMAO level and CVEs

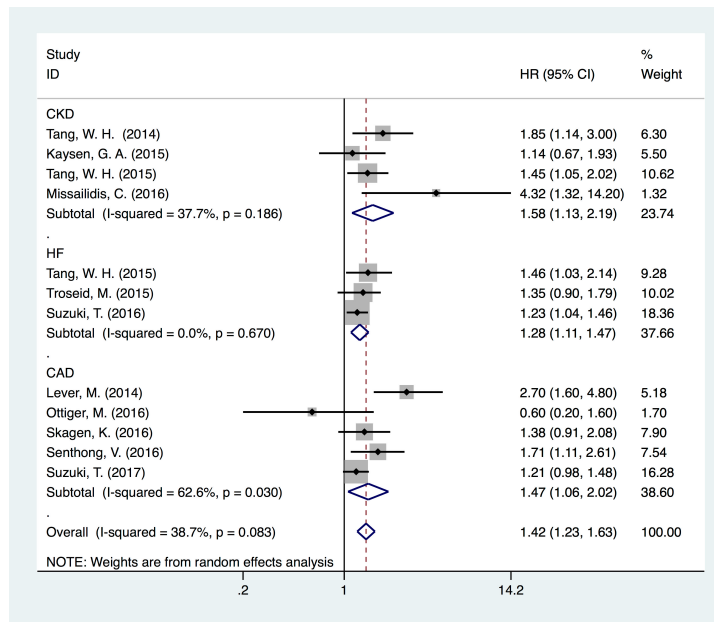
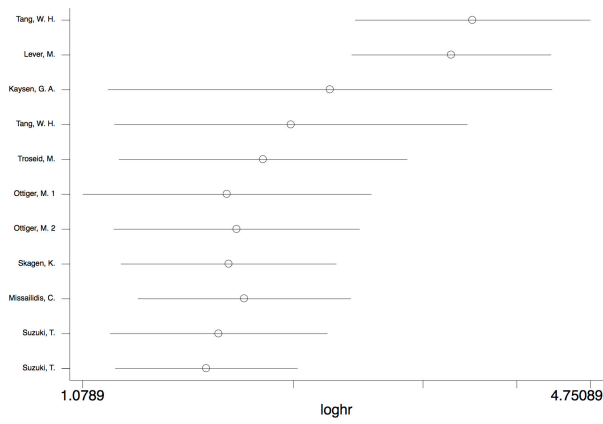


Fig. S2. Forest plot (random-effects model) for the association between TMAO (lowest vs. highest category) and CVD risk in different populations.

a



b

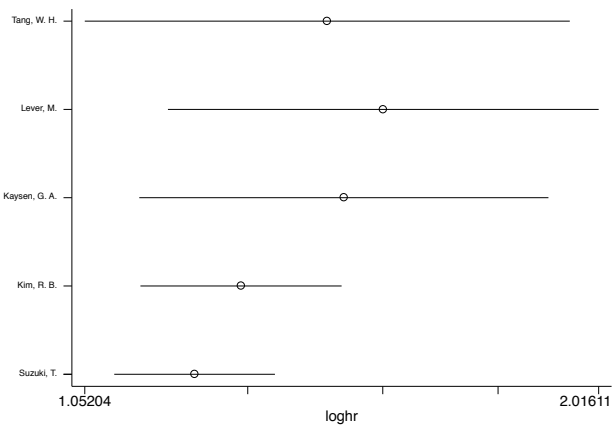
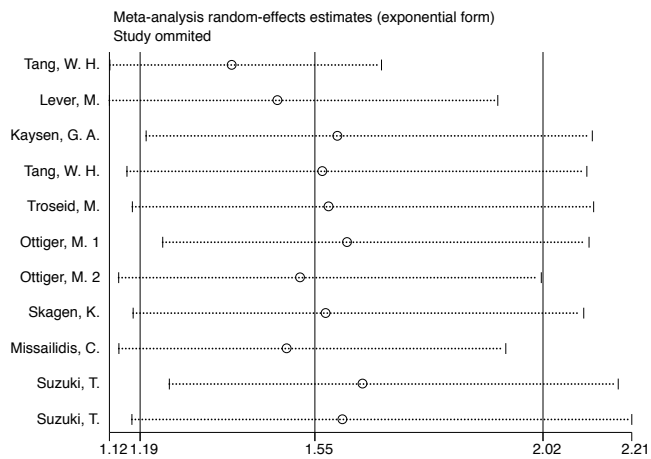


Fig. S3. Cumulative analysis for baseline TMAO level and death **(a)** and CVEs **(b)**.

a



b

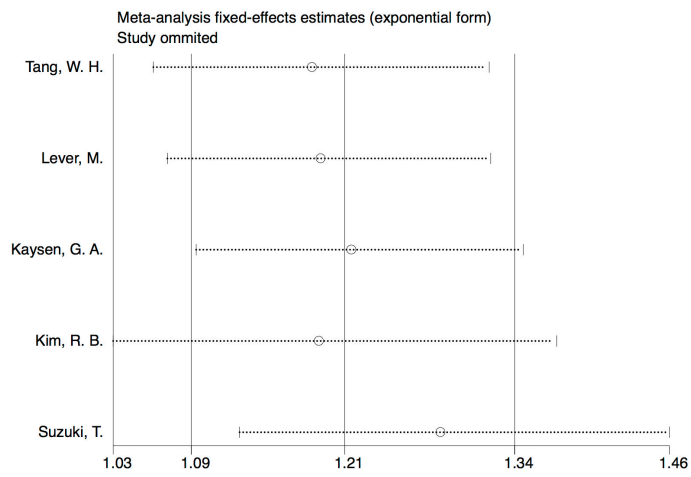
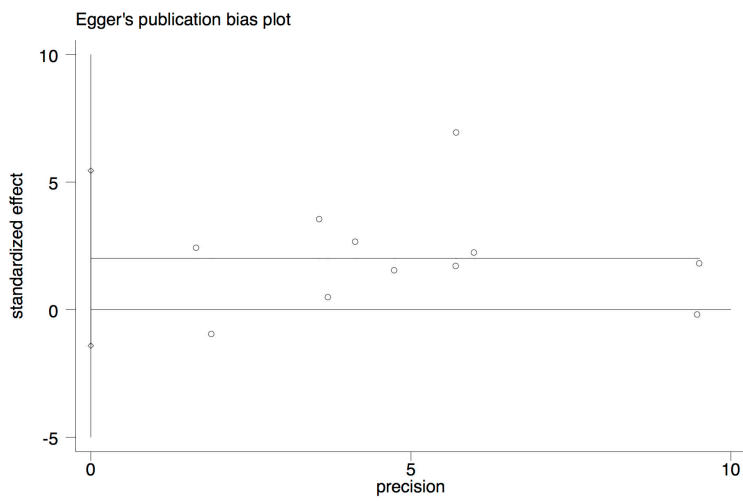


Fig. S4. Sensitivity analysis for TMAO level and death **(a)** and CVEs **(b)**.

a



b

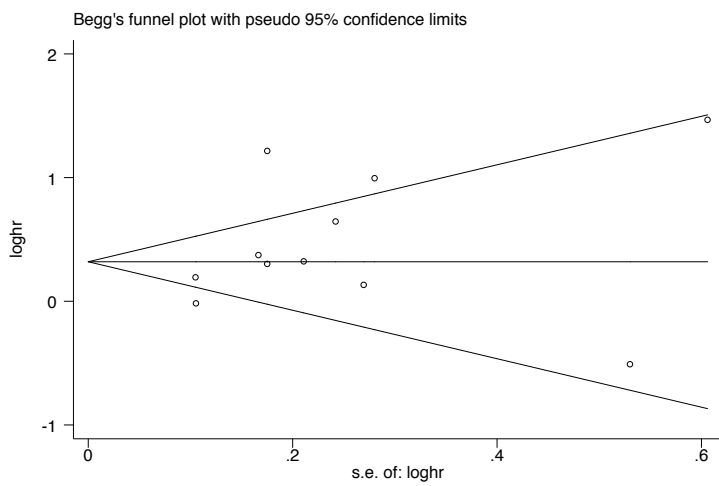


Fig. S5. Egger linear regression test and Begg’s test plot with 95% Cis for the relationship between baseline TMAO level and death risk.

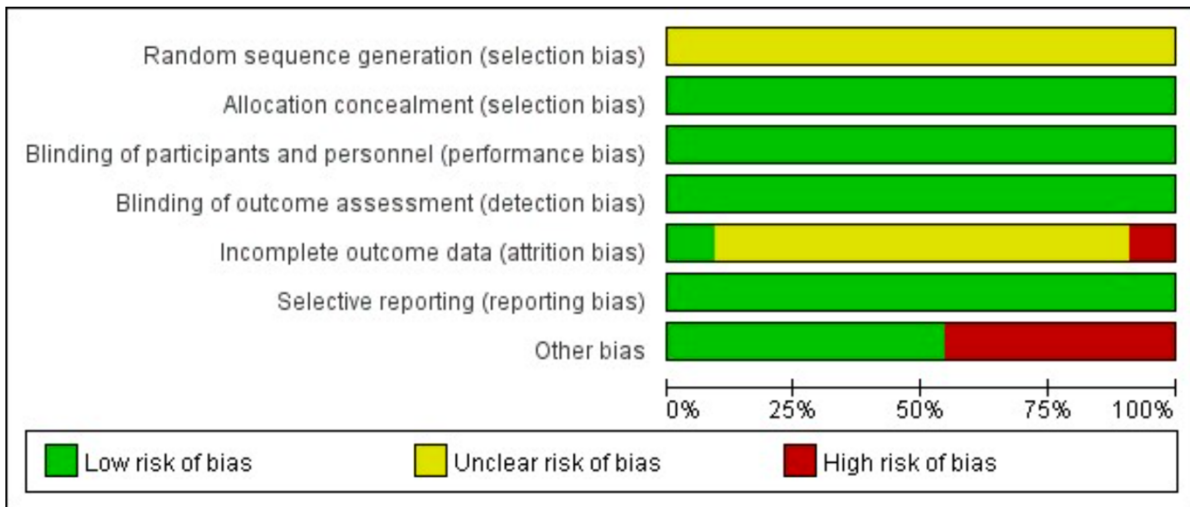


Fig. S6a. Risk of bias graph: review authors' judgements about each risk of bias item presented as percentages across all included studies.

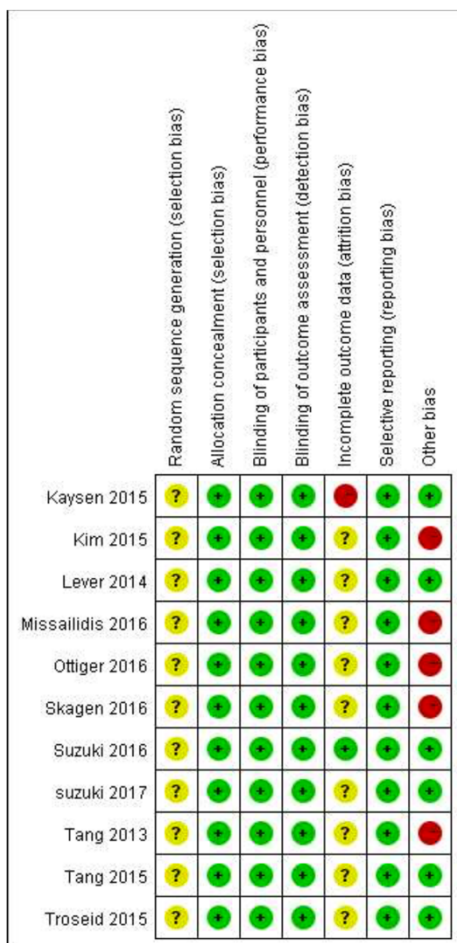


Fig. S6b. Risk of bias summary: review authors' judgements about each risk of bias item for each included study.