Supplement for: Dagfinn Aune, Sabrina Schlesinger, Teresa Norat, Elio Riboli. Tobacco smoking and the risk of abdominal aortic aneurysm - a systematic review and meta-analysis of prospective studies.

Supplementary text. Search terms used for PubMed and Embase search

PubMed:

(cigarette OR tobacco OR smoking OR smoke OR pipe OR cigar OR ETS betel nut OR bidi) AND ("aortic aneurysm")

Embase:

(((cigarette OR tobacco OR smoking OR smoke OR pipe OR cigar OR ETS betel nut OR bidi)ab.ti OR (cigarette/ OR tobacco/ OR smoking/ OR smoke/ OR pipe/ OR cigar/ OR ETS OR betel nut/ OR bidi)) AND ((aortic aneurysm)ab.ti OR aortic aneurysm/))

Supplementary Table 1. List of excluded studies and exclusion reason

Exclusion reason	Reference number
Abstract only publication	(1-7)
Case-control study	(8-27)
Case only study	(28-30)
Commentary, editorial, letter	(31-39)
Cross-sectional study	(40-83)
Duplicates	(84-88)
Meta-analysis	(89)
No confidence intervals	(90;91)
No risk estimates	(92-101)
Not relevant data	(102-107)
Not relevant exposure	(108-117)
Not relevant outcome	(118-121)
Patient populations	(122-126)
Review	(127-151)
Smoker population	(152;153)

Reference List

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Supplementary Table 2. Prospective studies of smoking and abdominal aortic aneurysm

First author, publication year, country	Study name or description	Study period	Number of participants, number of cases	Type of Smoking, subgroup	Comparison	Relative risk (95% confidence interval)	Adjustment for confounders
Hammond EC et al, 1966, USA	Cancer Prevention Study 1	1959-1960 - 1962, 3.75 years	257198 men, age 45-79 years and 362398 women, age 45-64 years: 314/23 AAA deaths	Smoking status, age 45-64 years, men Smoking status, age 65-79 years, Men Smoking status, age 45-64 years, Women	Never Ever Never Ever Never Ever	1.00 2.62 (1.60-4.28) 1.00 4.92 (3.01-8.04) 1.00 3.89 (1.72-8.82)	Age
Hammond EC et al, 1969, USA	Cancer Prevention Study 1	1959-1960 - NA, 6 years follow-up	218435 men, age 50-69 years: 260 AAA deaths	Smoking status and cigarettes per day	Never Current, 1-9 cig/d Current, 10-19 Current, 20-39 Current, 40+	1.00 2.62 (1.38-4.96) 3.85 (2.09-7.09) 4.54 (2.49-8.28) 8.00 (4.50-14.24)	Age
Strachan DP et al, 1991, United Kingdom	The Whitehall Study	1967-1969 - 1987, 16.6 years follow-up	18403 men, age 40-64 years: 99 AA cases	Smoking status, all AA Pipe/cigar smoking, all AA Pipe/cigar smoking, dissecting AA Pipe/cigar smoking, AAA Pipe/cigar smoking, other AA Cigarette smoking (manufactured), all AA Cigarette smoking (manufactured), dissecting AA Cigarette smoking (manufactured), AAA Cigarette smoking (manufactured), other AA	Never Former Current, pipe/cigar Current, manufactured cig. Current, hand-rolled Never Current Never Current Never Current Never Current Never Current Never Current Never Current Never Current	1.0 1.3 (0.42-4.1) 6.7 (1.7-26.5) 6.5 (2.3-18.7) 25.0 (7.5-83.3) 1.0 5.4 (1.9-15.3) 1.0 16.7 (3.4-82.1) 1.0 2.4 (0.3-22.5) 1.0 No cases 1.0 5.3 (3.1-9.1) 1.0 7.7 (2.8-21.7) 1.0 4.6 (2.1-10.3) 1.0 5.3 (1.7-17.3)	DBP

				Cigarette smoking (hand-rolled), all AA Cigarette smoking (hand-rolled), dissecting AA Cigarette smoking (hand-rolled), AAA Cigarette smoking (hand-rolled), other AA	Never Current Never Current Never Current Never Current	1.0 20.1 (9.2-43.8) 1.0 56.5 (13.0-246.0) 1.0 14.6 (4.1-51.7) 1.0 33.6 (5.4-210.0)	
Goldberg RJ et al, 1995, USA	Honolulu Heart Program	1965-1988, 23 years follow-up	2710 men, age 55-64 years: 119 AA cases	Cigarettes per day	Nonsmoker <20 cig/d 20 >20	1.00 2.54 (1.00-6.45) 3.38 (1.68-6.78) 3.56 (1.70-7.45)	Ventricular rate, BMI, SBP, serum cholesterol, TG, serum glucose, serum uric acid, hematocrit, forced expiratory volume, physical activity, alcohol
Lee AJ et al, 1997, United Kingdom	Edinburgh Artery Study	NA-1992-1994, 5 years follow-up	1592 men and women, age 55-74 years: 40 AAA cases 200 controls (nested case-control study)	Smoking status	Never/quit >5 years Current/former ≤5 years	1.00 3.08 (1.53-6.21)	Age, sex
Nilsson S et al, 2001, Sweden	Swedish 1963 Smoking Habit Survey	1963 – 1996, 33 years follow-up	27841 men and 28089 women, age 18-69 years: 196 AAA deaths	Smoking status, men Cigarettes per day Smoking status, women Cigarettes per day	Never Former Current Never 1-7 cig/d 8-15 16-25 >25 Never Former Current Never 1-7 cig/d 8-15	1.00 1.57 (0.94-2.63) 3.30 (2.08-5.23) 1.00 2.58 (1.41-4.71) 4.20 (2.36-7.46) 3.76 (1.80-7.86) 2.15 (0.29-16.0) 1.00 0.42 (0.06-3.02) 3.43 (2.11-5.59) 1.00 2.54 (1.34-4.80) 6.14 (3.35-11.3)	Age, residence
Rodin MB et al, 2003, USA	Chicago Heart Association Detection	1967-1973 - 2000, 30 years	10574 men and 8700 women, age 40-64 years:	Smoking status	Never Former Current	1.00 2.01 (1.42-2.85) 5.18 (3.85-6.96)	Age, sex, height, DBP, serum cholesterol

	Project in Industry Cohort	follow-up	309/109 AAA cases				
Lindblad B et al, 2005, Sweden	Malmo Preventive Project	1974-1991, 21 years follow-up	22444 men and 10982 women, mean age 43.7 years: 126/6 AAA cases	Smoking	Never/former Current	1.00 3.51 (1.92-6.44)	TG, DBP, serum cholesterol, physical inactivity
Iribarren C et al, 2007, USA	Kaiser Permanente Mulitphasic Health Checkups	1965-1970 - 2003, 13 years follow-up	104813 men and women, age ≥18 years: 605 AAA cases	Cigarette smoking status	Never Former Current, <1 pack/d Current, 1-2 packs/d Current, ≥3 packs/d Unknown packs/d Unknown	1.00 2.07 (1.59-2.69) 2.79 (2.09-3.73) 5.11 (3.96-6.60) 5.17 (3.72-7.18) 3.13 (0.99-9.87) 3.68 (1.33-10.17)	Age, sex, race, education, alcohol, height, weight, sagittal abdominal diameter, hypertension, serum total cholesterol, white blood cell count, history of coronary heart disease, diabetes, COPD, stroke, intermittent claudication, estimated GFR, HRT (women)
Wong DR et al, 2007, USA	Health Professionals Follow-up Study	1986-2002, 16 years follow-up	39352 men, age 40-75 years: 376 AAA cases	Smoking status	Never Former, quit ≥10 yrs Former, quit <10 yrs Current, 1-4 cig/d Current, 5-14 cig/d Current 15-24 cig/d Current, ≥25 cig/d	1.0 2.5 (1.8-3.6) 6.5 (4.5-9.3) 1.8 (0.4-7.4) 5.9 (3.0-11.4) 14.2 (9.4-21.5) 15.2 (9.9-23.3)	Age, hypertension, diabetes, hypercholesterolemia, BMI, physical activity
Lederle FA et al, 2008, USA	Women's Health Initiative	1993-1998 - 2004-2005, 7.8 years follow-up	161808 women, age 50-79 years: 184 AAA cases	Smoking status Pack-years	Never Ever Current Per 5 pack-years	1.00 1.94 (1.16-3.24) 8.73 (5.04-15.12) 1.11 (1.08-1.14)	Age, ethnicity/race, height, weight, hypertension, drugs for high cholesterol, coronary artery disease, cerebrovascular disease, DM, COPD, HT, peripheral artery disease, venous thromboembolism, non-skin cancer, previous aortic aneurysm, alcohol
Lawlor DA et al, 2008, South Korea	Korean Medical Insurance Corporation	1992 - 2001, 10 years follow-up	648346 men, age 30-64 years: 269 AA cases	Smoking status	Never Former Current, <10 cig/d Current, 10-19 cig/d Current, ≥20	1.00 1.23 (0.81-1.63) 1.63 (1.05-2.55) 1.78 (1.18-2.70) 1.36 (0.85-2.18)	Age, height, blood pressure, BMI, cholesterol, hyperglycemia, alcohol, regular exercise, income, area of residence

Forsdahl SH et al, 2009, Norway	The Tromsø Study	1994/1995 - 2001, 7 years follow-up	2035 men and 2310 women, age 25-82 years: 119 AAA cases	Smoking status	Never Stopped ≥20 years Stopped 10-19 years Stopped <10 years Current, <10 cig/d Current, 10-19 cig/d Current, ≥20 cig/d	1.00 1.26 (0.54-2.96) 2.90 (1.25-6.72) 2.88 (1.23-6.75) 6.19 (2.86-13.38) 9.78 (4.89-19.58) 13.72 (6.12-30.78)	Age, sex, total cholesterol, serum HDL-cholesterol, statin use, hypertension
				Duration	Never Smoked <20 years Smoked 20-29 Smoked ≥30	1.00 0.44 (0.12-1.58) 2.56 (1.17-5.58) 7.01 (3.73-13.16)	
Pirie K et al, 2012, United Kingdom	Million Women's Health Study	1996-2001 – 2011, 12 years follow-up	1180652 women, age 50-69 years: 330/164 AAA deaths	Smoking status	Never Former Current	1.00 - 6.32 (5.17-7.71)	Age, geographical region, BMI, SES, alcohol, strenuous physical activity, height, OC use, menopausal status, menopausal hormone therapy use
				Cigarettes per day	<10 cig/d 10-19 ≥20	3.87 7.18 8.09	
Sode BF et al, 2013, Denmark	Copenhagen City Heart study	1976-1978 - 2010, 23 years follow-up	15072 men and women, age 20-≥80 years: 335 AAA cases	Smoking status	Never Former Current	1.0 1.5 (0.8-2.7) 3.5 (2.2-5.8)	Age, sex, SBP, cholesterol, alcohol, lipid lowering medication, anti-hypertensive medication
					0 g/d 1-20 g/d >20 g/d	1.0 3.1 (1.9-5.0) 3.4 (1.9-5.8)	
Sode BF et al, 2013, Denmark	Copenhagen General Population Study	2003 - 2010, 4 years follow-up	56211 men and women, age 20-≥80 years: 169 AAA cases	Smoking status	Never Former Current	1.0 1.9 (1.2-3.0) 3.8 (2.4-6.1)	Age, sex, SBP, cholesterol, alcohol, lipid lowering medication, anti-hypertensive medication
					0 g/d 1-20 g/d >20 g/d	1.0 2.1 (1.3-3.2) 3.4 (2.1-5.4)	
Stackelberg O et al, 2014, Sweden	Swedish Mammography Cohort Study	1998-2011, 12.7 years follow-up	35550 women, age 46-84 years: 199 AAA cases	Smoking status	Never Former, <20 yrs quit Former, ≥20 yrs quit Current, <20 pack-yrs Current, ≥20 pack-yrs	1.00 4.63 (3.04-7.06) 0.82 (0.35-1.92) 7.01 (4.63-10.62) 10.97 (7.41-16.26)	Age, education, waist circumference, alcohol, fruit, diabetes, hypertension, hypercholesterolemia, cardiovascular disease

Stackelberg O et al, 2014, Sweden	Cohort of Swedish Men	1998-2011, 12.7 years follow-up	42596 men, age 46-84 years: 958 AAA cases	Smoking status	Never Former, <20 yrs quit Former, ≥20 yrs quit Current, <20 pack-yrs Current, ≥20 pack-yrs	1.00 3.77 (3.08-4.63) 1.61 (1.27-2.03) 3.06 (2.37-3.95) 6.55 (5.36-7.99)	Age, education, waist circumference, alcohol, fruit, diabetes, hypertension, hypercholesterolemia, cardiovascular disease
Svensjo S et al, 2014, Sweden	Uppsala men born 1941-1942	2006-2007 - 2011-2012, 5 years follow-up	2059 men, age 65 years: 36 AAA cases	Smoking status	Never Current	1.00 2.78 (1.38-5.57)	Coronary disease, claudication, sub-aneurysmal aorta at 65 years, infrarenal aortic diameter at 65 years
Howard DPJ et al, 2015, United Kingdom	The Oxford Vascular Study	2002-2014, 12 years follow-up	92728 men and women, age 45-≥85 years: 103 AAA cases	Smoking status, men Smoking status, women	Never Ever Current Never Ever Current	1.00 1.60 (1.44-1.77) 2.30 (1.72-3.06) 1.00 1.35 (1.00-1.82) 1.63 (0.80-3.33)	Age
Jahangir E et al, 2015, USA	Southern Community Cohort Study	1999-2012, 4.94 years follow-up	18782 men and women, age ≥65 years: 281 AAA cases	Smoking status, all Smoking status, men Smoking status, women	Never Former Current Never Former Current Never Former Current	1.00 1.91 (1.27-2.87) 5.55 (3.67-8.40) 1.00 1.10 (0.65-1.86) 3.40 (1.96-5.90) 1.00 3.40 (1.83-6.31) 9.17 (4.95-17.0)	Age, sex, ethnicity, education, BMI, MI/CABG, high blood pressure, high cholesterol, diabetes
Pujades-Rodriguez M et al, 2015, United Kingdom	The Clinical Practice Research Datalink	1997-2010, 5.5 years follow-up	1937360 men and women, age ≥30 years: 3135 AAA cases	Smoking status, all Smoking status, men Smoking status, women	Never Former, <2 yrs quit Former, 2-9 yrs quit Former, ≥10 yrs quit Current Never Current Never Current	1.00 4.31 (2.34-7.94) 3.98 (2.67-5.94) 1.30 (1.02-1.65) 5.18 (4.61-5.82) 1.00 5.48 (4.78-6.29) 1.00 4.48 (3.59-5.58)	Age
Tang W et al, 2016, USA	Atherosclerosis Risk in Communities Study	1987-1989 - 2013, 22.5 years follow-up	15792 men and women, age 45-64 years: 590 AAA cases	Smoking status, all Pack-years	Never Former Current None 0.1-15.2 pack-years	1.00 2.34 (1.11-4.95) 6.86 (3.18-14.8) 1.00 1.46 (0.56-3.78)	Age, sex, race, height, alcohol, triglycerides, total cholesterol

					15.3-33.9 34.0-243	3.59 (1.64-7.84) 5.91 (2.76-12.6)	
				Smoking status, longitudinal smoking status, clinical AAA	Never Quitter before visit 1 Recent quitter Current smoker	1.00 1.83 (1.19-2.81) 3.50 (1.53-8.04) 6.41 (3.67-11.2)	
				Smoking status, longitudinal smoking status, asymptomatic AAA	Never Quitter before visit 1 Recent quitter Current smoker	1.00 1.34 (0.60-2.99) 2.66 (0.65-10.9) 3.93 (1.44-10.7)	
Kihara T et al, 2017, Japan	Japan Collaborative Cohort Study	1988-1990 - 2009, 19 years follow-up	48677 men and women, age 40-79 years: 75 AA deaths	Active/passive smoking	Never/low Never/intermediate Never/high Former Current	1.00 1.12 (0.34-3.67) 1.89 (0.50-7.17) 1.52 (0.47-4.95) 4.58 (1.59-13.19)	Age, sex, BMI, hypertension, alcohol, perceived mental stress, walking, age of completed education, job status, region

BMI =Body mass index, CABG=coronary artery bypass grafting, COPD=chronic obstructive pulmonary disease, DBP=diastolic blood pressure, DM=diabetes mellitus, GFR=glomerular filtration rate, HDL=high-density lipoprotein, HRT=hormone replacement therapy, HT=hormone therapy, MI=myocardial infarction, NA= not available, OC use=oral contraceptive use, SBP=systolic blood pressure, SES=socioeconomic status, TG=triglycerides, yrs=years

Supplementary Table 3. Cigarettes per day and abdominal aortic aneurysm

Cigarettes/day	RR (95% CI)
0	1.00
5	1.99 (1.67-2.37)
10	3.52 (2.58-4.80)
15	4.99 (3.41-7.29)
20	5.81 (3.92-8.60)
25	5.91 (4.04-8.64)
30	5.61 (3.88-8.11)
$p_{nonlinearity}$	<0.0001

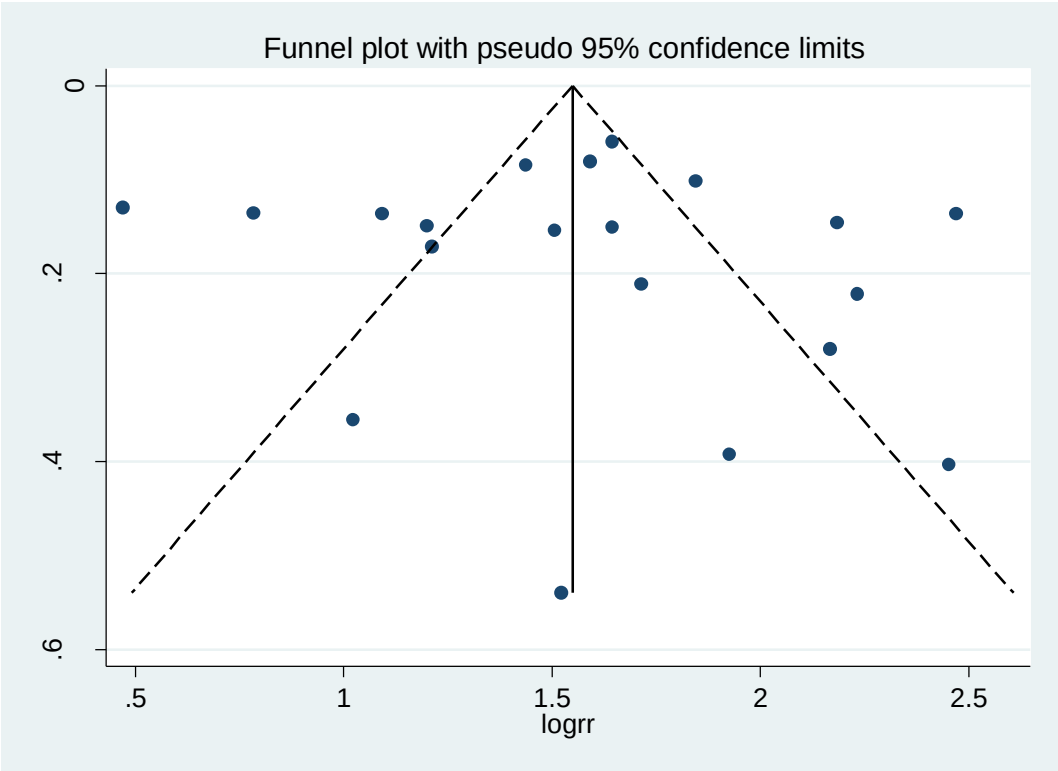
Supplementary Table 4. Pack-years of smoking and abdominal aortic aneurysm

Years since quitting	RR (95% CI)
0	1.00
5	2.01 (1.38-2.92)
10	3.60 (1.87-6.94)
15	5.34 (2.46-11.63)
20	6.61 (3.11-14.11)
25	7.17 (3.82-13.45)
30	7.08 (4.55-11.01)
$p_{nonlinearity}$	0.02

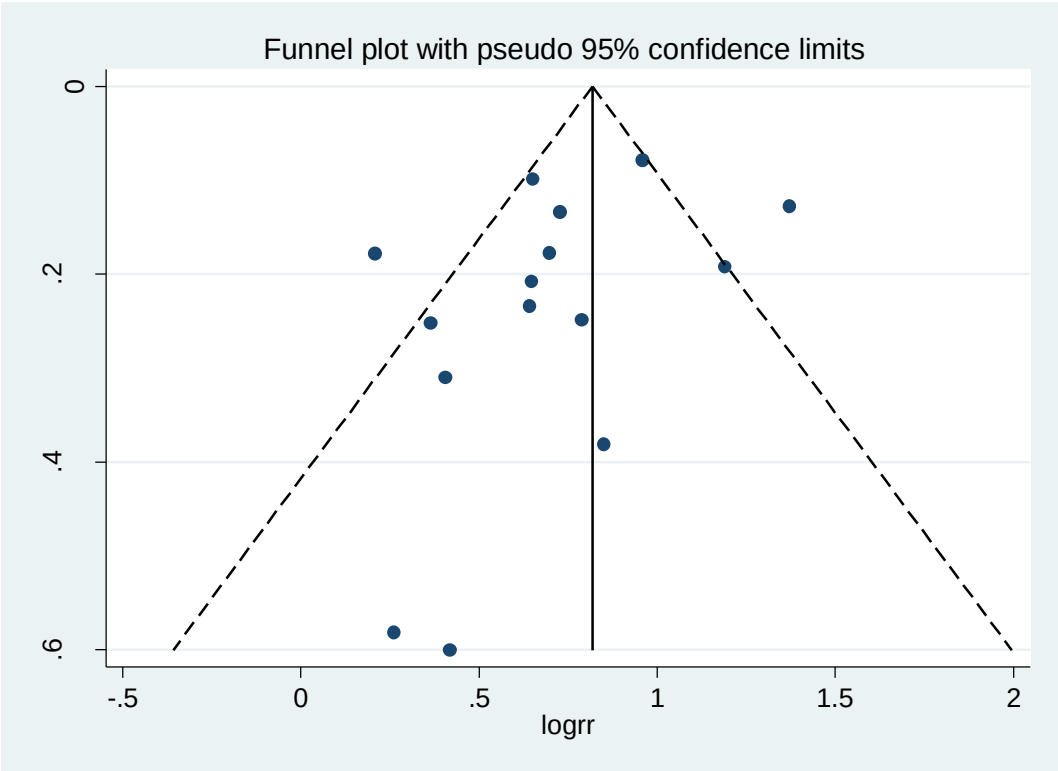
Supplementary Table 5. Years since quitting smoking and abdominal aortic aneurysm

Years since quitting	RR (95% CI)
0 (current smokers)	1.00
5	0.68 (0.55-0.85)
10	0.46 (0.33-0.65)
15	0.31 (0.20-0.48)
20	0.20 (0.11-0.36)
25	0.13 (0.06-0.30)
29	0.10 (0.03-0.27)
$p_{nonlinearity}$	0.85

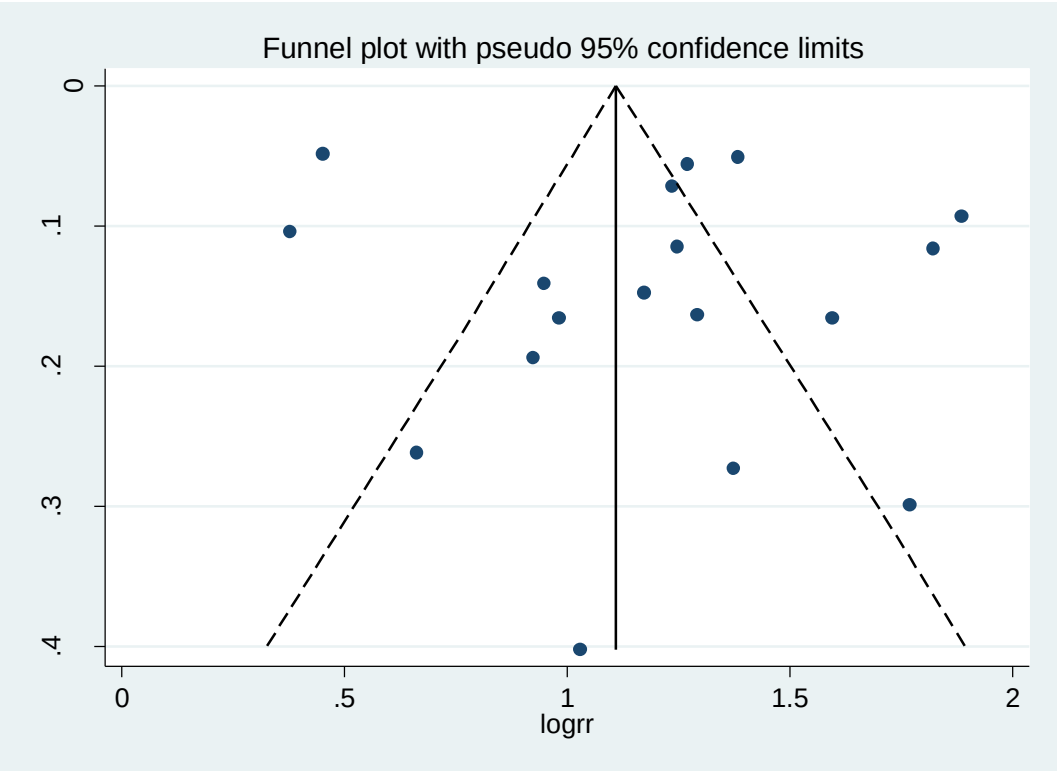
Supplementary Figure 1. Funnel plot of current smoking and abdominal aortic aneurysm



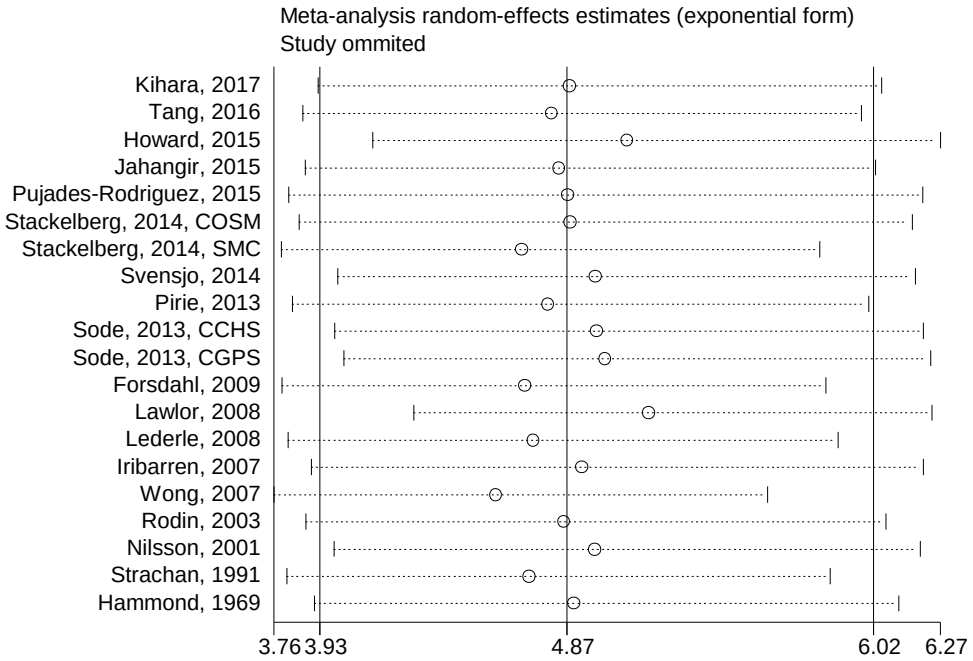
Supplementary Figure 2. Funnel plot of former smoking and abdominal aortic aneurysm



Supplementary Figure 3. Funnel plot of ever smoking and abdominal aortic aneurysm

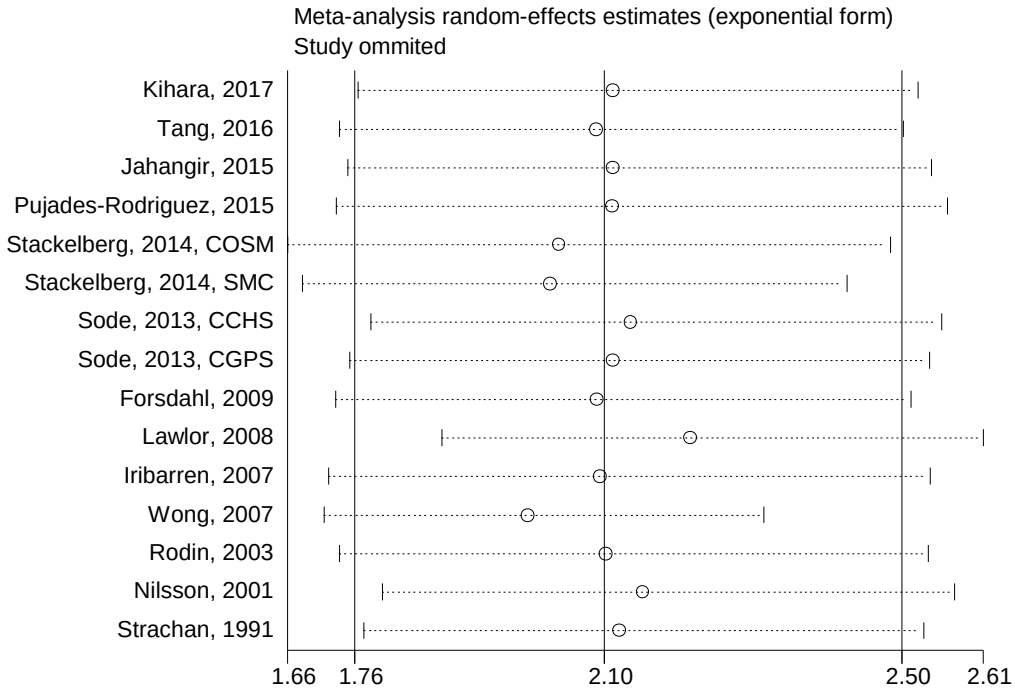


Supplementary Figure 4. Influence analysis of current smoking and abdominal aortic aneurysms



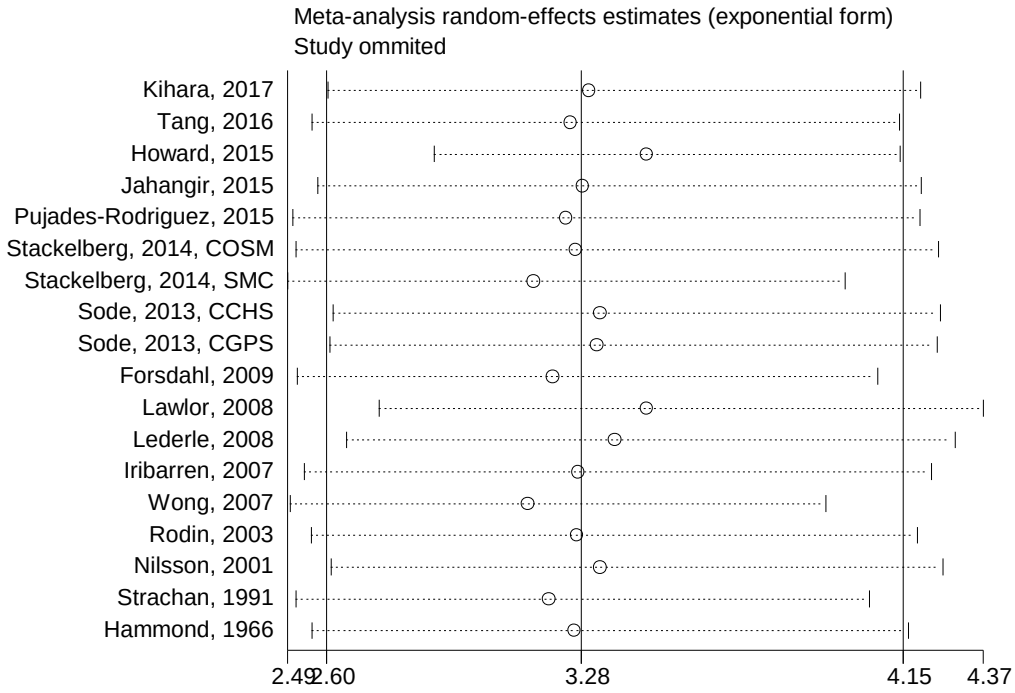
Study omitted	e^coef.	[95% Conf.	Interval]
Kihara, 2017	4.8732638	3.9257429	6.0494795
Tang, 2016	4.8072619	3.8688896	5.9732304
Howard, 2015	5.0910692	4.132822	6.2714982
Jahangir, 2015	4.833982	3.8768985	6.0273385
Pujades-Rodriguez, 2015	4.8656816	3.8153093	6.2052269
Stackelberg, 2014, COSM	4.8754168	3.8557346	6.164763
Stackelberg, 2014, SMC	4.6936235	3.7873847	5.8167057
Svensjo, 2014	4.9707479	4.0009637	6.1755958
Pirie, 2013	4.7928729	3.828316	6.0004535
Sode, 2013, CCHS	4.9758964	3.9890194	6.2069249
Sode, 2013, CGPS	5.0079312	4.0224895	6.2347898
Forsdahl, 2009	4.7043858	3.7901385	5.8391647
Lawlor, 2008	5.1716447	4.2874017	6.2382565
Lederle, 2008	4.7375731	3.8134484	5.885644
Iribarren, 2007	4.9199843	3.8997586	6.2071137
Wong, 2007	4.5970559	3.7602458	5.620091
Rodin, 2003	4.8517132	3.8803513	6.0662341
Nilsson, 2001	4.9686847	3.9850729	6.195076
Strachan, 1991	4.7217889	3.8078179	5.8551359
Hammond, 1969	4.8904333	3.9115434	6.1142974
Combined	4.8652094	3.9327087	6.0188192

Supplementary Figure 5. Influence analysis of former smoking and abdominal aortic aneurysms



Study omitted	e^coef.	[95% Conf.	Interval]
Kihara, 2017	2.1073267	1.7600673	2.5231004
Tang, 2016	2.0838819	1.7350233	2.5028849
Jahangir, 2015	2.1067533	1.7463551	2.541528
Pujades-Rodriguez, 2015	2.1062405	1.7307212	2.5632374
Stackelberg, 2014, COSM	2.0337012	1.6642301	2.4851975
Stackelberg, 2014, SMC	2.0216346	1.684405	2.4263797
Sode, 2013, CCHS	2.1313329	1.7775302	2.5555568
Sode, 2013, CGPS	2.1065922	1.7482027	2.5384529
Forsdahl, 2009	2.0850933	1.7297008	2.5135067
Lawlor, 2008	2.2126584	1.8744295	2.6119189
Iribarren, 2007	2.089792	1.7198766	2.5392699
Wong, 2007	1.9909173	1.7138845	2.3127298
Rodin, 2003	2.0978281	1.7346416	2.537056
Nilsson, 2001	2.1477613	1.7929132	2.5728402
Strachan, 1991	2.1154137	1.768082	2.5309768
Combined	2.0954087	1.7555035	2.5011273

Supplementary Figure 6. Influence analysis of ever smoking and abdominal aortic aneurysms



Study omitted	e^coef.	[95% Conf.	Interval]
Kihara, 2017	3.3043883	2.6013534	4.1974235
Tang, 2016	3.2544129	2.5579298	4.1405377
Howard, 2015	3.4589932	2.8881483	4.1426659
Jahangir, 2015	3.2877905	2.574275	4.1990719
Pujades-Rodriguez, 2015	3.2434082	2.5076098	4.1951094
Stackelberg, 2014, COSM	3.2678764	2.515053	4.2460403
Stackelberg, 2014, SMC	3.1553001	2.4933014	3.993067
Sode, 2013, CCHS	3.3343072	2.6160326	4.2497964
Sode, 2013, CGPS	3.3249993	2.6059425	4.242465
Forsdahl, 2009	3.2062051	2.518661	4.0814352
Lawlor, 2008	3.4588571	2.7400355	4.3662543
Lederle, 2008	3.3731148	2.6521847	4.2900119
Iribarren, 2007	3.2749832	2.5377183	4.2264404
Wong, 2007	3.1386313	2.4992638	3.9415638
Rodin, 2003	3.2726018	2.5570443	4.1883998
Nilsson, 2001	3.3333077	2.6098104	4.2573748
Strachan, 1991	3.1956635	2.5156772	4.0594501
Hammond, 1966	3.2644033	2.5586562	4.1648149
Combined	3.2843279	2.5988565	4.1505984

Moose checklist_smoking and abdominal aortic aneurysm

Reporting of background should include	Page
Problem definition	4,5
Hypothesis statement	4,5
Description of study outcome(s)	4,5,6
Type of exposure or intervention used	4,5,6
Type of study designs used	4,5,6
Study population	4,5
Reporting of search strategy should include	
Qualifications of searchers (eg, librarians and investigators)	6
Search strategy, including time period included in the synthesis and keywords	Supplementary text
Effort to include all available studies, including contact with authors	No contact with authors
Databases and registries searched	6
Search software used, name and version, including special features used (eg, explosion)	6
Use of hand searching (eg, reference lists of obtained articles)	6
List of citations located and those excluded, including justification	9, Supplementary Table 1
Method of addressing articles published in languages other than English	No non-english articles were identified
Method of handling abstracts and unpublished studies	Not included
Description of any contact with authors	No contact with authors
Reporting of methods should include	
Description of relevance or appropriateness of studies assembled for assessing the hypothesisto be tested	6,7, Supplementary Table 2
Rationale for the selection and coding of data (eg, sound clinical principles or convenience)	6

Documentation of how data were classified and coded (eg, multiple raters, blinding, andinterrater reliability)	6
Assessment of confounding (eg, comparability of cases and controls in studies whereappropriate)	7,8, Supplementary Table 2
Assessment of study quality, including blinding of quality assessors; stratification or regressionon possible predictors of study results	7
Assessment of heterogeneity	7
Description of statistical methods (eg, complete description of fixed or random effects models,justification of whether the chosen models account for predictors of study results,dose-response models, or cumulative meta-analysis) in sufficient detail to be replicated	6-8
Provision of appropriate tables and graphics	Table 1, Figure 1-5, Supplementary Table 1-5, Supplementary Figure 1-6
Reporting of results should include	
Graphic summarizing individual study estimates and overall estimate	8-10, Figure 2-5
Table giving descriptive information for each study included	Supplementary Table 2
Results of sensitivity testing (eg, subgroup analysis)	10, Table 1
Indication of statistical uncertainty of findings	8-10, Figure 2-5, Supplementary Table 2
Reporting of discussion should include	
Quantitative assessment of bias (eg, publication bias)	11-12
Justification for exclusion (eg, exclusion of non–English-language citations)	Non-English studies not identified
Assessment of quality of included studies	13
Reporting of conclusions should include	
Consideration of alternative explanations for observed results	11-13

Generalization of the conclusions (ie, appropriate for the data presented and within the domainof the literature review)	12-13
Guidelines for future research	13
Disclosure of funding source	14