

## Systematic review

### 1. \* Review title.

Give the working title of the review, for example the one used for obtaining funding. Ideally the title should state succinctly the interventions or exposures being reviewed and the associated health or social problems. Where appropriate, the title should use the PI(E)COS structure to contain information on the Participants, Intervention (or Exposure) and Comparison groups, the Outcomes to be measured and Study designs to be included.

The association between marital status and breast cancer risk: a systematic review and meta-analysis of observational studies

### 2. Original language title.

For reviews in languages other than English, this field should be used to enter the title in the language of the review. This will be displayed together with the English language title.

### 3. \* Anticipated or actual start date.

Give the date when the systematic review commenced, or is expected to commence.

24/08/2018

### 4. \* Anticipated completion date.

Give the date by which the review is expected to be completed.

20/11/2018

### 5. \* Stage of review at time of this submission.

Indicate the stage of progress of the review by ticking the relevant Started and Completed boxes. Additional information may be added in the free text box provided.

Please note: Reviews that have progressed beyond the point of completing data extraction at the time of initial registration are not eligible for inclusion in PROSPERO. Should evidence of incorrect status and/or completion date being supplied at the time of submission come to light, the content of the PROSPERO record will be removed leaving only the title and named contact details and a statement that inaccuracies in the stage of the review date had been identified.

This field should be updated when any amendments are made to a published record and on completion and publication of the review. If this field was pre-populated from the initial screening questions then you are not able to edit it until the record is published.

The review has not yet started: No

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Review stage	Started	Completed
Preliminary searches	Yes	Yes
Piloting of the study selection process	Yes	Yes
Formal screening of search results against eligibility criteria	Yes	Yes
Data extraction	No	Yes
Risk of bias (quality) assessment	No	Yes
Data analysis	No	Yes

Provide any other relevant information about the stage of the review here (e.g. Funded proposal, protocol not yet finalised).

#### 6. \* Named contact.

The named contact acts as the guarantor for the accuracy of the information presented in the register record.

Menglin Li

#### Email salutation (e.g. "Dr Smith" or "Joanne") for correspondence:

Dr Li

#### 7. \* Named contact email.

Give the electronic mail address of the named contact.

13811097397@163.com

#### 8. Named contact address

Give the full postal address for the named contact.

School of Basic Medical Science, Beijing University of Chinese Medicine (Beijing, China), Bei San Huan

Dong Lu 11, Chao Yang District

#### 9. Named contact phone number.

Give the telephone number for the named contact, including international dialling code.

13811097397

#### 10. \* Organisational affiliation of the review.

Full title of the organisational affiliations for this review and website address if available. This field may be completed as 'None' if the review is not affiliated to any organisation.

Beijing University of Chinese Medicine

#### Organisation web address:

#### 11. \* Review team members and their organisational affiliations.

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Give the title, first name, last name and the organisational affiliations of each member of the review team. Affiliation refers to groups or organisations to which review team members belong.

Dr Menglin Li. Beijing University of Chinese Medicine  
 Dr Mei Han. Beijing University of Chinese Medicine  
 Zhenzhu Liu. Beijing University of Chinese Medicine  
 Ning Zhang. Beijing University of Chinese Medicine  
 Chongcheng Xi. Beijing University of Chinese Medicine  
 Xunying Huang. Beijing University of Chinese Medicine  
 Dong Tian. Beijing University of Chinese Medicine  
 Jintao Liu. Beijing University of Chinese Medicine  
 Jingwen Chen. Beijing University of Chinese Medicine  
 Weiguang Wang. Beijing University of Chinese Medicine  
 Shuangqing Zhai. Beijing University of Chinese Medicine  
 Xiaoxuan Wang. Beijing University of Chinese Medicine  
 Zijie Chen. Beijing University of Chinese Medicine  
 Zhiying Zhang. Beijing University of Chinese Medicine  
 Yu Tang. Chaoyang District Traditional Chinese Medicine Hospital of Beijing City

### 12. \* Funding sources/sponsors.

Give details of the individuals, organizations, groups or other legal entities who take responsibility for initiating, managing, sponsoring and/or financing the review. Include any unique identification numbers assigned to the review by the individuals or bodies listed.

This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

### 13. \* Conflicts of interest.

List any conditions that could lead to actual or perceived undue influence on judgements concerning the main topic investigated in the review.

None

### 14. Collaborators.

Give the name and affiliation of any individuals or organisations who are working on the review but who are not listed as review team members.

### 15. \* Review question.

State the question(s) to be addressed by the review, clearly and precisely. Review questions may be specific or broad. It may be appropriate to break very broad questions down into a series of related more specific questions. Questions may be framed or refined using PI(E)COS where relevant.

Does marital status affect risk of developing breast cancer?

### 16. \* Searches.

Give details of the sources to be searched, search dates (from and to), and any restrictions (e.g. language or publication period). The full search strategy is not required, but may be supplied as a link or attachment.

The databases MEDLINE, EMBASE and PsycINFO were searched for electronic journals. The search duration was inception of the databases to September 2018. The search strategy included terms relating to marital status AND breast cancer and was combined with the SIGN filters for observational studies. We confined our search to papers published in English. The reference lists of all eligible articles obtained for

additional studies were checked="checked" value="1".

### 17. URL to search strategy.

Give a link to a published pdf/word document detailing either the search strategy or an example of a search strategy for a specific database if available (including the keywords that will be used in the search strategies), or upload your search strategy. Do NOT provide links to your search results.

Alternatively, upload your search strategy to CRD in pdf format. Please note that by doing so you are consenting to the file being made publicly accessible.

Do not make this file publicly available until the review is complete

### 18. \* Condition or domain being studied.

Give a short description of the disease, condition or healthcare domain being studied. This could include health and wellbeing outcomes.

Accumulating evidence suggest that marital status has potential to affect breast cancer risk. Several epidemiological studies have showed that being unmarried is related with increased breast cancer risk. However, some studies did not support this conclusion. Despite the inconsistency in results, no systematic review or meta-analysis has been carried out. Thus, we performed this meta-analysis to find out whether marital status is related with the initiate of breast cancer.

### 19. \* Participants/population.

Give summary criteria for the participants or populations being studied by the review. The preferred format includes details of both inclusion and exclusion criteria.

We will include studies of participants who were diagnosed with breast cancer.

### 20. \* Intervention(s), exposure(s).

Give full and clear descriptions or definitions of the nature of the interventions or the exposures to be reviewed.

Marital status according to whether a person is married, never married, divorced/separated or widowed at time of measurement of exposure.

### 21. \* Comparator(s)/control.

Where relevant, give details of the alternatives against which the main subject/topic of the review will be compared (e.g. another intervention or a non-exposed control group). The preferred format includes details of both inclusion and exclusion criteria.

Studies in which control subjects were matched to cases by marital status will be excluded.

### 22. \* Types of study to be included.

Give details of the types of study (study designs) eligible for inclusion in the review. If there are no restrictions on the types of study design eligible for inclusion, or certain study types are excluded, this should be stated. The preferred format includes details of both inclusion and exclusion criteria.

Longitudinal cohort studies, cases-control studies and cross-sectional surveys assessing marital status and risk of cancer will be included. Studies with no control group will be excluded.

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#### 23. Context.

Give summary details of the setting and other relevant characteristics which help define the inclusion or exclusion criteria.

#### 24. \* Main outcome(s).

Give the pre-specified main (most important) outcomes of the review, including details of how the outcome is defined and measured and when these measurement are made, if these are part of the review inclusion criteria.

We will systematically review the association of marital status and breast cancer risk. We plan to compare risk of breast cancer in married people to those who were unmarried, and compare to those who were widowed, divorced, or never married.

#### Timing and effect measures

Odds ratios (ORs), relative risk (RR), or hazard ratios (HRs).

#### 25. \* Additional outcome(s).

List the pre-specified additional outcomes of the review, with a similar level of detail to that required for main outcomes. Where there are no additional outcomes please state 'None' or 'Not applicable' as appropriate to the review

None

#### Timing and effect measures

#### 26. \* Data extraction (selection and coding).

Give the procedure for selecting studies for the review and extracting data, including the number of researchers involved and how discrepancies will be resolved. List the data to be extracted.

Two reviewers will independently assess the titles, abstracts and keywords of every record retrieved. The full texts of all potentially relevant articles will be investigated. Disagreements will be resolved by discussion

Data will be independently extracted from the included trials by two reviewers (MLL & NZ) and entered into structured characteristics table. Data to be extracted include: name of first author, publication year, study design, features of the study population, strategies for confirmation of breast cancer, research findings and other required information. We will resolve any differences in opinion through discussion consultation with the third person.

#### 27. \* Risk of bias (quality) assessment.

State whether and how risk of bias will be assessed (including the number of researchers involved and how discrepancies will be resolved), how the quality of individual studies will be assessed, and whether and how this will influence the planned synthesis.

We will rate methodological quality of included studies using Newcastle-Ottawa Criteria for cohort and case-control studies and the Joanna Briggs Institute's Checklist for cross-sectional studies.

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#### 28. \* Strategy for data synthesis.

Give the planned general approach to synthesis, e.g. whether aggregate or individual participant data will be used and whether a quantitative or narrative (descriptive) synthesis is planned. It is acceptable to state that a quantitative synthesis will be used if the included studies are sufficiently homogenous.

We will pool results where studies have used the same measurements, calculating random-effects estimates using Review Manager. We plan to compare risk of breast cancer in married people to those who were heterogeneously compared to those who were not. We will use the Cochrane Q test, which is a chi-squared statistic, to quantify the variation of effect size that is attributable to heterogeneity across studies. Funnel plots will be generated to detect publication bias when more than ten trials are identified.

#### 29. \* Analysis of subgroups or subsets.

Give details of any plans for the separate presentation, exploration or analysis of different types of participants (e.g. by age, disease status, ethnicity, socioeconomic status, presence or absence or co-morbidities); different types of intervention (e.g. drug dose, presence or absence of particular components of intervention); different settings (e.g. country, acute or primary care sector, professional or family care); or different types of study (e.g. randomised or non-randomised).

Predetermined subgroup analyses are based on type of study design and type of outcome measures.

#### 30. \* Type and method of review.

Select the type of review and the review method from the lists below. Select the health area(s) of interest for your review.

##### Type of review

Cost effectiveness

No

Diagnostic

No

Epidemiologic

No

Individual patient data (IPD) meta-analysis

No

Intervention

No

Meta-analysis

Yes

Methodology

No

Narrative synthesis

No

Network meta-analysis

No

Pre-clinical

No

Prevention

No

Prognostic

No

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Prospective meta-analysis (PMA)

No

Review of reviews

No

Service delivery

No

Synthesis of qualitative studies

No

Systematic review

Yes

Other

No

**Health area of the review**

Alcohol/substance misuse/abuse

No

Blood and immune system

No

Cancer

Yes

Cardiovascular

No

Care of the elderly

No

Child health

No

Complementary therapies

No

Crime and justice

No

Dental

No

Digestive system

No

Ear, nose and throat

No

Education

No

Endocrine and metabolic disorders

No

Eye disorders

No

General interest

No

Genetics

No

Health inequalities/health equity

No

Infections and infestations

No

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International development

No

Mental health and behavioural conditions

No

Musculoskeletal

No

Neurological

No

Nursing

No

Obstetrics and gynaecology

No

Oral health

No

Palliative care

No

Perioperative care

No

Physiotherapy

No

Pregnancy and childbirth

No

Public health (including social determinants of health)

No

Rehabilitation

No

Respiratory disorders

No

Service delivery

No

Skin disorders

No

Social care

No

Surgery

No

Tropical Medicine

No

Urological

No

Wounds, injuries and accidents

No

Violence and abuse

No

**31. Language.**

Select each language individually to add it to the list below, use the bin icon to remove any added in error.

English

There is an English language summary.



### 32. Country.

Select the country in which the review is being carried out from the drop down list. For multi-national collaborations select all the countries involved.

China

### 33. Other registration details.

Give the name of any organisation where the systematic review title or protocol is registered (such as with The Campbell Collaboration, or The Joanna Briggs Institute) together with any unique identification number assigned. (N.B. Registration details for Cochrane protocols will be automatically entered). If extracted data will be stored and made available through a repository such as the Systematic Review Data Repository (SRDR), details and a link should be included here. If none, leave blank.

### 34. Reference and/or URL for published protocol.

Give the citation and link for the published protocol, if there is one

Give the link to the published protocol.

Alternatively, upload your published protocol to CRD in pdf format. Please note that by doing so you are consenting to the file being made publicly accessible.

**No I do not make this file publicly available until the review is complete**

Please note that the information required in the PROSPERO registration form must be completed in full even if access to a protocol is given.

### 35. Dissemination plans.

Give brief details of plans for communicating essential messages from the review to the appropriate audiences.

### Do you intend to publish the review on completion?

Yes

### 36. Keywords.

Give words or phrases that best describe the review. Separate keywords with a semicolon or new line. Keywords will help users find the review in the Register (the words do not appear in the public record but are included in searches). Be as specific and precise as possible. Avoid acronyms and abbreviations unless these are in wide use.

Systematic review; meta-analysis; marital status; breast cancer; risk factor.

### 37. Details of any existing review of the same topic by the same authors.

Give details of earlier versions of the systematic review if an update of an existing review is being registered, including full bibliographic reference if possible.

### 38. \* Current review status.

Review status should be updated when the review is completed and when it is published. For newregistrations the review must be Ongoing.

Please provide anticipated publication date

Review\_Completed\_not\_published

**39. Any additional information.**

Provide any other information the review team feel is relevant to the registration of the review.

**40. Details of final report/publication(s).**

This field should be left empty until details of the completed review are available.

Give the link to the published review.