PPARG (Pro12Ala) genetic variant and risk of T2DM: a systematic review and meta-analysis

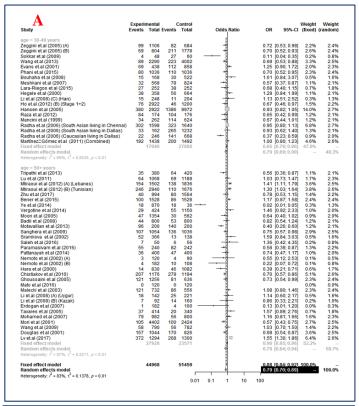
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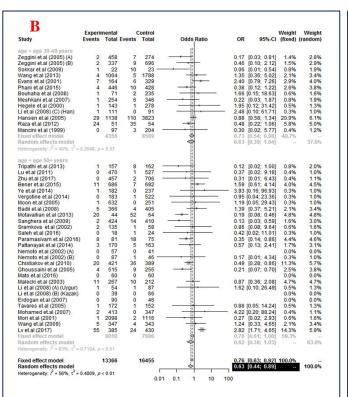
¹ Personalized Medicine Research Center, Endocrinology and Metabolism Clinical Sciences Institute, Tehran University of Medical Sciences, Tehran 1411413137, Iran

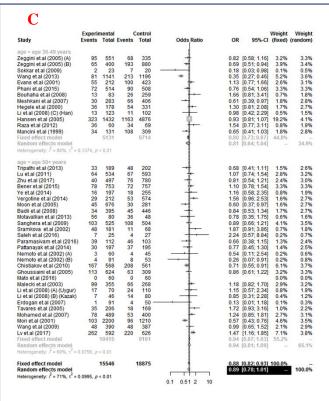
² Elderly Health Research Center, Endocrinology and Metabolism Population Sciences Institute, Tehran University of Medical Sciences, Tehran 1411413137, Iran

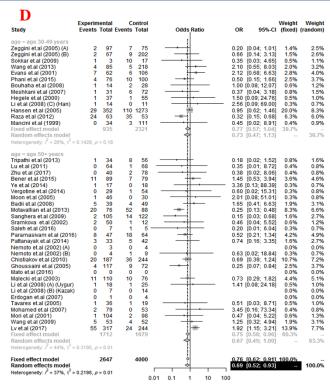
³ Medical Genomics Research Center, Tehran Medical Sciences, Islamic Azad University, Tehran 1916893813, Iran

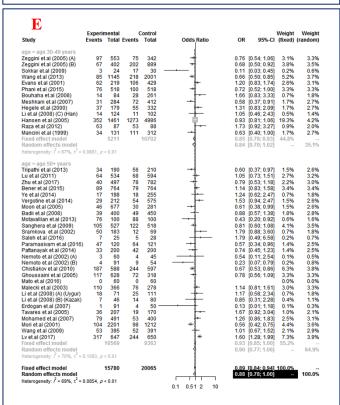
⁴ Endocrinology and Metabolism Research Center, Endocrinology and Metabolism Clinical Sciences Institute, Tehran University of Medical Sciences, Tehran 1411413137, Iran

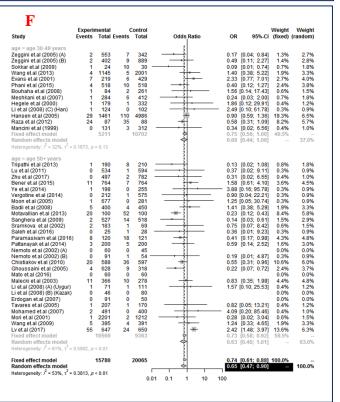












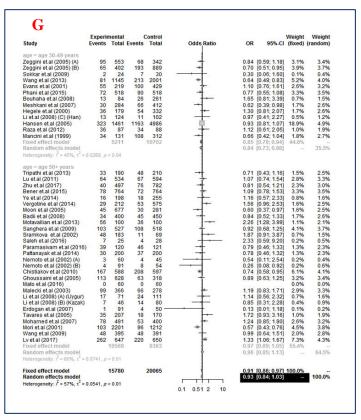


Figure S3. Subgroup analysis according to age of participants. "A" represents allele (G vs. C); "B" represents homozygote (GG vs. CC); "C" represents heterozygote (CG vs. CC); "D" represents additive (GG vs. CG); "E" represents dominant (CG/GG vs. CC); "F" represents recessive (GG vs. CC/CG); "G" co-dominant model (CG vs. CC+GG). Vertical and horizontal lines represent ORs and the corresponding 95% CIs of each study. Black highlight represents the overall estimates (pooled ORs and 95% CIs) of population with random effects model. 95% CI = 95% confidence interval, OR = odds ratio.