

Paracetamol intake and hematologic malignancies: A meta-analysis of observational studies.

Jesús Prego-Domínguez ¹ and Bahi Takkouche ^{1,2,*}

¹ Department of Preventive Medicine, University of Santiago de Compostela, 15782 Santiago de Compostela, Spain; susofis@gmail.com (J.P.D.); bahi.takkouche@usc.es (B.T.)

² Centro de Investigación Biomédica en Red de Epidemiología y Salud Pública (CIBER-ESP), 28029 Madrid, Spain

* Correspondence: bahi.takkouche@usc.es; (B.T.) Tel.: +34-881-812268; Fax: +34-981-572282

Table S1. Quality assessment of the studies included in the meta-analysis.

			CRITERIA [#] / SCORE [*]						
Author	Year	Design	1	2	3	4	5	Total score	
Friedman et al.	1981	Case-control	0	0	0	0	0	0	High risk
Kato et al.	2002	Case-control	0	1	1	0	1	3	
Friis et al.	2002	Cohorts	1	1	1	0	0	3	
Baker et al.	2005	Case-control	0	1	0	1	1	3	
Weiss et al.	2006	Case-control	0	1	0	1	1	3	
Moysich et al.	2007	Case-control	0	1	0	1	1	3	
Becker et al.	2009	Case-control	0	1	0	0	0	1	
Ross et al.	2011	Case-control	0	1	1	0	1	3	Low risk
Lipworth et al.	2003	Cohorts	1	1	1	0	1	4	
Chang et al.	2004	Case-control	0	1	1	1	1	4	
Walter et al.	2011	Cohorts	1	1	0	1	1	4	

Scoring criteria: 1) Participation in both groups > 80%; 2) Incident cases (case-control) / Changes of exposure accurately measured (cohorts); 3) Population controls (case-control) / loss of follow-up < 20% (cohorts); 4) Adjustment for sex, age and smoking or the distribution of these factors was similar between index and comparison group; 5) Duration of exposure accurately measured. *** Scoring method:** 0= no or not given, 1=yes; Score ≥ 4: low risk of bias, score < 4: high risk of bias.