

表1-3 肉と胃がんとの関連に関するコホート研究(エビデンステーブル)

References Author	Study period		Study population		Category	Number among cases	Relative risk (95%CI or p)	p for trend	Confounding variables considered	Comments
	Year		Number of subjects for analysis	Source of subjects or deaths						
Hirayama T Life-style and Mortality: A large-scale	1990	1965-1982 (17 years)	122,261 men ≥40 years old 142,857 women	95% census population	Death	8,794 men	1.00 1.07 (0.97-1.17) 0.91 (0.82-1.00) 1.34 (1.09-1.59) 1.00		Age	Follow-up by death certificates, registral registry, 90% confidence interval
					Daily consumer Occasional Rare None Daily consumer Occasional Rare None					
							1.04 (0.88-1.20) 1.09 (0.91-1.27) 1.11 (0.87-1.35)		Age	*CI recalculated to 95%
							chi-square=0.777			
							chi-square=-1.065			

表I-4 肉と胃がんとの関連に関するケースコントロール研究(エビデンスデータベース)

References author	Study time year	Type and source	Study subjects		Category	Relative risk (95%CI or p)	p for trend	Confounding variables considered	Comments
			Definition	Number of cases					
Kono S JJCR	1979-82	Hospital-based+ population	case-newly diagnosed as having gastric cancer at Karatsu Stomach Institute control 1: control' found to be free of gastrointestinal disease at the institute control 2: general controls' 10% randomized samples stratified by sex, year of and residents	139	control 1: 2574	<i>Grilled meat</i> none 1-3 times/month 1-3 times/wk or more <i>Steak/hamburger steak</i> none 1-3 times/month 1-3 times/wk or more	1.0	n.s.	little affected by adjustment for occupation
							0.7	n.s.	
						0.9	n.s.		
						1.0	n.s.		
						0.6	p<0.05		
						0.9	n.s.		
Ito LS Ann Epidemiol	2002	1988-1998 hospital-based (HERPACC)	case: identified via the hospital cancer registry system with histological confirmation controls: cancer-free first-visit female outpatients over 30 yr old	508 (156 differentiated, 352 non-	36,490	<i>Chicken</i> total gastric cancer 4 categories by frequency 1: <1time/wk 2: 1-2times/wk 3: 3-4times/wk 4: 5<=times/wk differentiated type 4 categories by frequency 1: <1time/wk 2: 1-2times/wk 3: 3-4times/wk 4: 5<=times/wk non-differentiated type 4 categories by frequency 1: <1time/wk 2: 1-2times/wk 3: 3-4times/wk 4: 5<=times/wk	1.00 0.82 (0.67-1.00) 0.80 (0.61-1.03) 0.69 (0.39-1.23) N.S. 1.00 0.85 (0.59-1.22) 0.73 (0.45-1.17) 0.91 (0.39-2.15) n.s. 1.00 0.81 (0.63-1.02) 0.83 (0.61-1.13) 0.56 (0.26-1.22) n.s.	age, year, season at first hospital visit, smoking, family history of gastric cancer	

<i>Beef</i>		
total gastric cancer		
4 categories by frequency		
1: <1time/wk	1.00	
2: 1-2times/wk	0.92 (0.76-1.11)	
3: 3-4times/wk	0.88 (0.63-1.24)	
4: 5<=times/wk	0.97 (0.39-2.39)	N.S.
differentiated type		
4 categories by frequency		
1: <1time/wk	1.00	
2: 1-2times/wk	0.82 (0.58-1.16)	
3: 3-4times/wk	0.83 (0.44-1.55)	
4: 5<=times/wk	1.62 (0.49-5.32)	N.S.
non-differentiated type		
4 categories by frequency		
1: <1time/wk	1.00	
2: 1-2times/wk	0.96 (0.77-1.20)	
3: 3-4times/wk	0.91 (0.61-1.36)	
4: 5<=times/wk	0.59 (0.14-2.40)	N.S.
<i>Pork</i>		
total gastric cancer		
4 categories by frequency		
1: <1time/wk	1.00	
2: 1-2times/wk	0.93 (0.76-1.13)	
3: 3-4times/wk	1.31 (1.01-1.72)	
4: 5<=times/wk	0.69 (0.28-1.68)	N.S.
differentiated type		
4 categories by frequency		
1: <1time/wk	1.00	
2: 1-2times/wk	0.73 (0.51-1.05)	
3: 3-4times/wk	1.23 (0.76-2.00)	
4: 5<=times/wk	1.26 (0.39-4.04)	N.S.
non-differentiated type		
4 categories by frequency		
1: <1time/wk	1.00	
2: 1-2times/wk	1.02 (0.80-1.29)	
3: 3-4times/wk	1.36 (0.99-1.87)	
4: 5<=times/wk	0.41 (0.10-1.67)	N.S.

表I-4 (3/3)

<i>Processed meat</i>	
total gastric cancer	
4 categories by frequency	
1: <1time/wk	1.00
2: 1-2times/wk	1.02 (0.83-1.26)
3: 3-4times/wk	1.14 (0.83-1.57)
4: 5<=times/wk	0.50 (0.22-1.13) N.S.
differentiated type	
4 categories by frequency	
1: <1time/wk	1.00
2: 1-2times/wk	1.05 (0.72-1.53)
3: 3-4times/wk	0.89 (0.46-1.73)
4: 5<=times/wk	0.75 (0.24-2.42) N.S.
non-differentiated type	
4 categories by frequency	
1: <1time/wk	1.00
2: 1-2times/wk	1.00 (0.78-1.28)
3: 3-4times/wk	1.22 (0.85-1.75)
4: 5<=times/wk	0.36 (0.12-1.14) N.S.

表1-5 魚と胃がんとの関連に関するコホート研究 (エビデンステーブル)

References Author	Study period		Study population		Category	Number among cases	Relative risk (95%CI or p)	p for trend	Confounding variables considered	Comments
	Year		Number of subjects for analysis	Source of subjects followed						
Hirayama T Life-style and Mortality: A large-scale	1990	1965-1982 (17 years)	122,261 men	95% census population	Death	8,794 men	1.00		Age	Follow-up by death certificates, registral registry, 90% *CI recalculated to 95%
			≥40 years old				1.04 (0.99-1.09)	Daily consumer		
							0.95 (0.82-1.08)	Occasional		
							1.42 (0.93-1.91)	Rare		
							1.00	None		
							1.06 (0.98-1.14)	Daily consumer		
		142,857 women			5,946 women	1.22 (1.04-1.40)	chi-square=-0.805	Age		
						1.49 (1.00-1.98)	chi-square=-2.476			

表I-6 魚と胃がんとの関連に関するケースコントロール研究(エビデンスステアブル)

References author	Study time		Study subjects		Number of controls	Category	Relative risk (95%CI or p)	p for trend	Confounding variables considered	Comments
	year	Type and source	Definition	Number of cases						
Kono S JICR	1988	1979-82	Hospital-based+ population	case: newly diagnosed as having gastric cancer at Karatsu Stomach Institute control 1: hospital control' found to be free of gastrointestinal disease at the institute control 2: general population controls' 10% randomized samples stratified by sex, year of and residents	139	control: 2574	<u>Sashimi (sliced raw fish)</u> none or 1-3 times/month	1.0	n.s.	little affected by adjustment for occupation
				1-3 times/wk			0.8	n.s.		
				once/day or more			0.9	n.s.		
				<u>Fish cooked with soy-sauce</u> none or 1-3 times/month			1.0	n.s.		
				1-3 times/wk			0.7	n.s.		
				once/day or more			1.1	n.s.		
				<u>Broiled fish, combined</u> none			1.0	n.s.		
				1-3 times/month			0.9	n.s.		
				1-3 times/wk or more			1.0	n.s.		
				<u>Broiled fish, -raw</u> none			1.0	n.s.		
				1-3 times/month			0.8	n.s.		
				1-3 times/wk or more			0.7	n.s.		
				<u>Broiled fish, -dried</u> none			1.0	n.s.		
1-3 times/month	0.9	n.s.								
1-3 times/wk or more	0.9	n.s.								
<u>Broiled fish, -salted</u> none	1.0	n.s.								
1-3 times/month	0.9	n.s.								
1-3 times/wk or more	1.0	n.s.								
Ito LS Ann Epidemiol	2002	1988-1998	hospital-based (HERPACC)	case: identified via the hospital cancer registry system with histological confirmation controls: cancer-free first-visit female outpatients over 30 yr old	508 (156 differentiated, 352 non-	36,490	<u>Salted fish</u> total gastric cancer	1.00		age, year, season at first hospital visit, smoking, family history of gastric cancer
				4 categories by frequency						
				1: <1time/wk			1.05 (0.87-1.27)			
				2: 1-2times/wk			1.00 (0.72-1.38)			
				3: 3-4times/wk			0.60 (0.29-1.21)	N.S.		
				4: 5<=times/wk						
				differentiated type						
				4 categories by frequency						
				1: <1time/wk			1.00			
				2: 1-2times/wk			1.00 (0.71-1.42)			
				3: 3-4times/wk			1.12 (0.64-1.95)			
				4: 5<=times/wk			1.11 (0.44-2.78)	n.s.		
				non-differentiated type						
4 categories by frequency										
1: <1time/wk	1.00									
2: 1-2times/wk	1.07 (0.86-1.34)									
3: 3-4times/wk	0.95 (0.64-1.42)									
4: 5<=times/wk	0.34 (0.11-1.07)	n.s.								

表I-6 (2/2)

<i>Cooked fish</i>	
total gastric cancer	
4 categories by frequency	
1: <1time/wk	1.00
2: 1-2times/wk	0.94 (0.74-1.19)
3: 3-4times/wk	0.87 (0.66-1.13)
4: 5<=times/wk	0.60 (0.40-0.90)
	P<0.05
differentiated type	
4 categories by frequency	
1: <1time/wk	1.00
2: 1-2times/wk	0.86 (0.55-1.34)
3: 3-4times/wk	0.99 (0.62-1.58)
4: 5<=times/wk	0.94 (0.51-1.72)
	N.S.
non-differentiated type	
4 categories by frequency	
1: <1time/wk	1.00
2: 1-2times/wk	0.98 (0.74-1.30)
3: 3-4times/wk	0.82 (0.60-1.13)
4: 5<=times/wk	0.44 (0.26-0.77)
	P<0.005

表1-7 穀類と胃がんとの関連に関するコホート研究(エビデンステーブル)

References Author	Study period		Study population		Category	Number among cases	Relative risk (95%CI or p)	p for trend	Confounding variables considered	Comments
	Year		Number of subjects for analysis	Source of subjects						
Kato I	1992	1985-59	5395	Hospital-based (patients who received gastroscopic exam)	Rice	11 20 13	1 1.95 (0.93-4.08) 1.22 (0.53-2.78)		sex, age, residence	
					<=2 cups/day 3 cups/day 4<= cups/day			p=0.645		

表I-8 穀類と胃がんとの関連に関するケースコントロール研究(エビデンステーブル)

References author	Study time year	Study time	Study subjects		Number of cases	Number of controls	Category	Relative risk (95%CI or p)	p for trend	Confounding variables considered	Comments
			Type and source	Definition							
Kono S JJCR	1988	1979-82	Hospital-based+ population	case:newly diagnosed as having gastric cancer at Karatsu Stomach Institute control 1: control' found to be free of gastrointestinal disease at the institute control2: general controls'10% randomized samples stratified by sex, year of and residents	139	control1: 2574 control2: 278	<i>Rice</i> none or 1-3 bowls/day 4-6 bowls/day 7<= bowls/day none or 1-3 bowls/day 4-6 bowls/day 7<= bowls/day <i>Bread</i> none or 1-3 times/month 1-3 times/wk once/day or more none or 1-3 times/month 1-3 times/wk once/day or more	1.0 1.2 0.7 1.0 1.3 0.9 1.0 1.4 0.6 1.0 1.4 0.5	n.s. n.s. n.s. n.s. n.s. n.s. n.s. n.s. n.s. n.s. n.s.	little affected by adjustment for occupaiton	
Ito LS Ann Epidemiol	2002	1988-1998	hospital-based (HERPACC)	case: identified via the hospital cancer registry system with histological confirmation controls: cancer- free first-visit female outpatients over 30 yr old	508 (156 differentiated, 352 non-	36,490	<i>Rice</i> total gastric cancer 4 categories by frequency 1:rarely 2: 1-2 bowls/d 3: 3-4 bowls/d 4: 5<=bowls/d differentiated type 4 categories by frequency 1:rarely 2: 1-2 bowls/d 3: 3-4 bowls/d 4: 5<=bowls/d non-differentiated type 4 categories by frequency 1:rarely 2: 1-2 bowls/d 3: 3-4 bowls/d 4: 5<=bowls/d	1.00 1.30 (0.63-2.65) 1.39 (0.68-2.85) 2.36 (1.02-5.48) 1.00 1.90 (0.46-7.89) 1.74 (0.42-7.31) 4.72 (0.99-22.35) 1.00 1.14 (0.50-2.59) 1.31 (0.57-2.99) 1.69 (0.61-4.70)	n.s. N.S. n.s. n.s.	age, year, season at first hospital visit, smoking, family history of gastric cancer	

表I-8 (2/2)

Machida-Montani A	2004 1998-2002	Hospital based	153	301	Rice bowls per day	Adjusted for combination with H.pylori
case: gastric cancer with histologic confirmation newly diagnosed at 4 hospitals in Nagano prefecture 20-74yr control: matched 1:2 to cases for age, sex, residence area randomly selected from participants of health check-ups during the same period in the same hospitals.	1.0	1.2 (0.6-2.3)	2.5 (1.0-6.1)	0.07	infection, smoking, JA membership, family history gastric cancer, total vegetable intake, total intake, salt intake, and total energy intake.	Matched with age, sex, residence area
joint effect with H.pylori H.pylori (-) and low rice H.pylori (-) and high rice H.pylori (+) and low rice H.pylori (+) and high rice interaction term	1.0	0.9(0.2-5.4)	7.3(2.9-18.4)	18.7(5.6-62.6)	0.31	

表1-9 牛乳・乳製品と胃がんとの関連に関するコホート研究(エビデンステーブル)

References	Study period		Study population		Category	Number among cases	Relative risk (95%CI or p)	p for trend	Confounding variables considered	Comments
	Year	Number of subjects for analysis	Source of subjects	Event followed						
Matsumoto M J Epidemiol	2007	1992-2001 11606	residents in 12 communities in Japan	Death	every day vs. not every day milk butter yogurt		0.7 (0.34-1.43) 1.58 (0.48-5.20) 0.47 (0.06-3.46)		age, sex	

表1-10 牛乳・乳製品と胃がんとの関連に関するケースコントロール研究(エビデンステーブル)

References author	Study time year	Type and source	Study subjects		Relative risk (95%CI or p)	p for trend	Confounding variables considered	Comments
			Definition	Number of cases				
Kono S IJCR	1988	1979-82 Hospital-based+ population	case:newly diagnosed as having gastric cancer at Karatsu Stomach Institute control 1: hospital control' found to be free of gastrointestinal disease at the institute control2: general populaion controls'10% randomized samples stratified by sex, year of and residents	139	control1: 2574			little affected by adjustment for occupation n.s. n.s. n.s.
Ito LS Ann Epidemiol	2002	1988-1998 hospital-based (HERPACC)	case: identified via the hospital cancer registry system with histological confirmation controls: cancer- free first-visit female outpatients over 30 yr old	508 (156 differentiated, 352 non-	36,490			age, year, season at first hospital visit, smoking, family history of gastric cancer N.S.
			Milk total gastric cancer 4 categories by frequency 1: almost never 2: occasionally 3: 3-4 times/wk 4: 5<=times/wk differentiated type 4 categories by frequency 1: almost never 2: occasionally 3: 3-4 times/wk 4: 5<=times/wk non-differentiated type 4 categories by frequency 1: almost never 2: occasionally 3: 3-4 times/wk 4: 5<=times/wk					

表I-11 (1/3)

表I-11 食・タンパク質と胃がんとの関連に関するコホート研究(エビデンステーブル)

References Author	Year	Study period		Study population		Category	Number of incident cases or deaths	Event followed	Number of incident cases or deaths	Relative risk (95%CI) or p	p for trend	Confounding variables considered	Comments							
		Number of subjects for analysis	Study population	Source of subjects	incidence															
Masaki M As Pac J Can Prev	2003	1988-1998	5765	middle-aged male workers in Tokyo (cohort members of the Health Insurance Society of Tokyo Stockbrokerage as part of the JACC Study (Tokyo and its surrounding area)	incidence	84	Vegetables and fruits' pattern	low	25	1.00			age, sex, BMI, education, history of peptic ulcer, family history of gastric cancer, smoking, alcohol drinking status							
								middle	30	1.06 (0.61-1.87)										
								high	29	0.78 (0.42-1.44)	p=0.56									
								<i>Western breakfast' pattern</i>												
								low	32	1.00										
								middle	24	0.59 (0.33-1.08)										
								high	28	0.71 (0.40-1.24)	p=0.20									
								<i>Mear' pattern</i>												
								low	31	1.00										
								middle	22	0.55 (0.29-1.01)										
								high	31	1.10 (0.64-1.89)	p=0.07									
								<i>Rice/snack' pattern</i>												
								low	32	1.00										
middle	17	0.52 (0.27-1.01)																		
high	35	1.19 (0.71-2.02)	p=0.05																	
Kim MK Int J Cancer	2004	1990-1999	20300 men	middle-aged men and women (population- based) JPHC Study	incidence	400	Healthy dietary pattern total gastric cancer	Q1	57	1										
								Q2	66	1.00 (0.70-1.45)										
								Q3	74	1.06 (0.74-1.53)										
								Q4	88	1.13 (0.78-1.63)	P=0.39									
								<i>differentiated type</i>												
								Q1	36	1										
								Q2	38	0.91 (0.57-1.45)										
								Q3	43	0.97 (0.61-1.53)										
								Q4	57	1.11 (0.70-1.76)	p=0.29									
								<i>undifferentiated type</i>												
								Q1	17	1										
								Q2	27	1.37 (0.73-2.58)										
								Q3	22	1.10 (0.57-2.15)										
Q4	27	1.24 (0.64-2.40)	p=0.71																	

表I-11 (2/3)

<i>Traditional dietary pattern</i>					
total gastric cancer		30	1		
Q1		62	1.97 (1.25-3.12)		
Q2		81	2.47 (1.55-3.94)		
Q3		112	2.88 (1.76-4.72)		P<0.0001
Q4					
differentiated type		20	1		
Q1		41	2.05 (1.16-3.62)		
Q2		50	2.37 (1.32-4.28)		
Q3		63	2.67 (1.42-5.02)		P<0.0001
Q4					
undifferentiated type		7	1		
Q1		19	2.50 (1.02-6.12)		
Q2		23	3.27 (1.32-8.12)		
Q3		44	4.92 (1.92-12.6)		P=0.006
Q4					
<i>Western dietary pattern</i>					
total gastric cancer		83	1		
Q1		77	0.99 (0.71-1.37)		
Q2		64	0.88 (0.63-1.24)		
Q3		61	0.85 (0.60-1.38)		p=0.45
Q4					
differentiated type		48	1		
Q1		46	1.07 (0.71-1.62)		
Q2		44	1.07 (0.70-1.64)		
Q3		36	0.88 (0.56-1.38)		p=0.45
Q4					
undifferentiated type		30	1		
Q1		24	0.78 (0.44-1.37)		
Q2		18	0.64 (0.35-1.17)		
Q3		21	0.78 (0.44-1.40)		p=0.96
Q4					
<i>Healthy dietary pattern</i>					
total gastric cancer		36	1		
Q1		23	0.57 (0.33-0.97)		
Q2		32	0.77 (0.47-1.26)		
Q3		24	0.56 (0.32-0.96)		p=0.03
Q4					
differentiated type		12	1		
Q1		7	0.53 (0.21-1.34)		
Q2		12	0.81 (0.35-1.88)		
Q3		9	0.62 (0.25-1.54)		p=0.31
Q4					
undifferentiated type		21	1		
Q1		14	0.57 (0.29-1.15)		
Q2		19	0.79 (0.42-1.49)		
Q3		12	0.46 (0.22-0.96)		p=0.04
Q4					

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表I-11 (3/3)

<i>Traditional dietary pattern</i>				
total gastric cancer				
Q1	17	1.00		
Q2	30	1.70 (0.93-3.12)		
Q3	23	1.28 (0.68-2.44)		
Q4	45	2.40 (1.32-4.35)		p=0.007
differentiated type				
Q1	5	1.00		
Q2	9	1.82 (0.60-5.49)		
Q3	10	1.79 (0.60-5.39)		
Q4	16	2.40 (0.83-6.97)		p=0.06
undifferentiated type				
Q1	11	1.00		
Q2	16	1.32 (0.60-2.89)		
Q3	12	1.03 (0.45-2.37)		
Q4	27	2.31 (1.09-4.89)		p=0.03
<i>Western dietary pattern</i>				
total gastric cancer				
Q1	32	1.00		
Q2	27	0.94 (0.56-1.57)		
Q3	27	0.92 (0.54-1.56)		
Q4	29	1.13 (0.66-1.93)		p=0.42
differentiated type				
Q1	12	1.00		
Q2	7	0.67 (0.26-1.70)		
Q3	13	1.23 (0.54-2.77)		
Q4	8	0.86 (0.34-2.22)		p=0.68
undifferentiated type				
Q1	17	1.00		
Q2	15	0.96 (0.48-1.93)		
Q3	14	0.87 (0.42-1.81)		
Q4	20	1.40 (0.70-2.78)		p=0.30

表II-1. 糖尿病および関連要因と胃がんの関連に関するコホート研究(エビデンステーブル)(updated)

Reference	Study period	Number of subjects for analysis	Source of subjects	Study population Event followed	Number of incident cases or deaths	Category	Plasma fasting glucose level	Number among cases	Relative risk (95%CI or p)	P for trend	Confounding variables considered	Comments
Yamagata H. et al.(2005)	1988-1997(9yr)	2466 (1028 men and 1438 women)	residents 40<= yrs old in Hisayama Town (Hisayama Study)	Incidence	66 men and women	Plasma fasting glucose level	Low(<5.3mmol/l) Modest (5.3-5.8mmol/l) High (>5.8 mmol/l)	9 22 35	1.0 2.3 (1.1-5.0) 3.1 (1.5-6.4)		Age, sex, BMI, smoking status, alcohol intake, serum cholesterol, H.pylori seropositivity, history of peptic ulcer disease, total energy, total fat, salt, vitamins	when stratified by H.pylori status; among Hpylori (+) Modest FPG 3.5 (1.3-9.5), High FPG 4.2 (1.6-11.1).
Inoue et al. (2006)	1990-2003	97,771 (46,548 men and 51,223 women)	Population (JPHC Study)	Incidence	977 men 362 women	History of DM	No Yes No Yes	890 87 342 20	1 1.23 (0.98-1.54) 1 1.61 (1.02-2.54)		Age, area, BMI, history of cerebrovascular disease, history of IHD, smoking, alcohol intake, leisure time physical activity, green vegetable intake, and coffee intake	Excluding cases within 5yr: Men 1.09 (0.79-1.50). Women 1.92 (1.06-3.47)
Ikeda et al. (2008)	1988-2002	2603 (1070 men and 1533 women)	residents 40<= yrs old in Hisayama Town (Hisayama Study)	Incidence	97	HbA1c	≤4.9 5.0-5.9 6.0-6.9 ≥7.0		1.59 (0.85-3.00) 1 2.13 (1.30-3.47) 2.69 (1.24-5.85)	0.15 0.003 0.013	Age, sex, BMI smoking status, alcohol intake, serum cholesterol, H.pylori seropositivity, history of peptic ulcer disease, total energy, total fat, salt, vit A, B1, B2, C, and fiber	According to ADA guideline; HbA1c level 4.0-6.0: normal, less than 7.0%: recommended glycermic level for DM adults, less than 6>0%: more stringent goal. In this study, 5.0-5.9 was set as reference based on spline model.

表II-1 (2/2)

Inoue et al. (2009)	1990-2004	27,724 (9548 men and 18,176 women)	Population (JPHC Study) health check up participants	Incidence	High glucose (glucose \geq 5.5 mmol/l (100mg/dl) fasting or \geq 7.77 mmol/l (140mg/dl) non-fasting, and/or on treatment	Age, area, smoking status, ethanol intake, total serum cholesterol
			233 men	No	174	1
				Yes	59	1.06 (0.78-1.43)
			138 women	No	117	1
				Yes	21	1.14 (0.71-1.84)

表II-2 糖尿病および関連要因と胃がんとの関連に関する症例対照研究(エビデンスデータベース)

References author	Study time year	Study subjects		Category	Relative risk (95%CI or p)	p for trend	Confounding variables considered	Comments
		Type and source	Definition					
Kuriki K Eur J Cancer Prev	2007	1988-2000 hospital-based (HERPACC)	case: identified via the hospital cancer registry system	1318 men	47,768	Positive past/present history of DM	Age, BMI, smoking status, regular physical activity, bowel movement, family history of gastric cancer, family history of DM, dietary restriction, raw vegetable intake, greasy foods snacking.	
			controls: cancer- free first-visit outpatients	632 women	14199men			
				No	1.00			
				Yes	1.16 (0.93-1.44)			
				No	1.00			
				Yes	1.70 (1.16-2.48)			
				Positive past/present history of DM Among participants with family history of DM				
				No	1.00			
			91men	Yes	0.91 (0.49-1.68)			
				No	1.00			
			46women	Yes	2.88 (1.22-6.77)			

表III-1 (1/2)

表III-1 インフラボンと前立腺がんの関連に関するコホート研究(エビデンステーブル)

References Author	Year	Study period	Study population Number of subjects for analysis	Source of subjects	Event followed	Incidence or Mortality	Number of incident cases	Category	Number among cases	Relative risk (95%CI) or p for trend	Confounders considered	Comments
Ozasa et al.	2004	1988-1999	14,105men	JACC Study	Incidence or Mortality	52men		Serum Genistein (nM)	18	1.00	Matched (1:3) for Age (as closely as possible) and study area	
								<239	22	1.37(0.61-3.07)		
								239-682	12	0.76(0.32-1.82)		
								>682		0.46		
								Serum Daidzein (nM)	18	1.00		
								<89	21	1.43(0.63-3.25)		
								89-239	13	0.74(0.31-1.76)		
								>239		0.38		
								Serum Equol (nM)	17	1.00		
								<1.9	24	0.70(0.31-1.56)		
								1.9-56.1	11	0.39(0.15-0.98)		
								>56.1		0.046		
Kurahashi et al.	2007	1995-2004	43,509men	JPHC Study	Incidence	307men (Total)		Genistein(mg/day)	75	1.00	Adjusted for age, area, smoking status, drinking frequency, marital status, body mass index, and intake of total fatty acids, dairy, vegetables, and fruits.	Localized(>60yrs) Genistein Q1: 1.00 Q4: 0.52(0.30-0.90) P for trend=0.03 Daidzein Q1: 1.00 Q4: 0.50(0.28-0.88) P for trend=0.04 Soy food Q1: 1.00 Q4: 0.52 (0.29-0.90) P for trend=0.01
								<13.2	76	0.81(0.62-1.23)		
								13.2-21.2	91	1.13(0.81-1.57)		
								21.3-32.7	65	0.71(0.48-1.03)		
								≥ 32.8		0.22		
								Daidzein(mg/day)	70	1.00		
								<8.5	79	0.95(0.67-1.33)		
								8.5-13.4	93	1.21(0.87-1.70)		
								13.5-20.3	65	0.77(0.52-1.13)		
								≥ 20.4		0.43		
								Miso soup(mg/day)	58	1.00		
								<110.0	79	1.10(0.77-1.58)		Advanced(>60yrs)
								110.0-225.9	85	1.08(0.75-1.55)		Miso soup Q1: 1.00 Q4: 2.86 (1.01-8.11)
								226.0-335.9	85	1.04(0.72-1.50)		
								≥ 336.0		0.94		

