表III-2 イソフラボンと前立腺がんの関連に関する症例対照研究(エビデンステーブル)

References		Study time	Study subjects				Category	Relative risk (95%CI or p)	p for trend	Confounding variables considered	Comments
author	year		Type and source	Definition	Number of	Number of					
Akaza et al.	2002	?	Hospital-based (Tsukuba University Hospital, Kyusyu University Hospital, Nara Medical School Hospital and Sapporo Medical University Hospital)	Cases: histologically confirmed cases; Controls: imale without other prostatic diseases or malignant tumors	141males	112 males	Equal non-producer Equal producer	1.00 0.66(0.40-1.09)		Matched (1:1) for Age and hospital	
					66inpatients	103inpatients	Equal non-producer Equal producer	1.00 0.44(0.23-0.85)			
					75outpatient	9outpatients	Equal non-producer Equal producer	1.00 0.74(0.18-2.97)			
Nagata et al.	2007	1996-2003	Hospital-based (Tsukuba University Hospital, Sapporo Medical University Hospital)	Cases: histologically confirmed cases; Controls: outpatients without other prostatic diseases or malignant tumors	200males	200males	Isoflavones (mg/day) <30.5 30.5-59.3 59.4-89.8 ≧89.9	 1.00 0.91(0.59-1.41) 0.72(0.44-1.17) 0.48(0.25-0.93)	 0.02	Matched (1:1) for Age (± 5yrs) and hospital Adjusted for cigarette smoking and energy and PUFA intakes	
							Genistein <1.1 1.1-1.8 1.9-2.4 ≧2.5	 1.00 1.04(0.67-1.62) 0.97(0.61-1.55) 0.68(0.39-1.20)	 0.19		
							Daidzein <0.8 0.8-1.3 1.4-1.8 ≧1.9	 1.00 1.12(0.73-1.72) 0.90(0.55-1.48) 0.64(0.36-1.17)	 0.12		

表III-3 カロテノイドと前立腺がんの関連に関する症例対照研究(エビデンステーブル)

References author	year	Study time	Study subjects: Type and source	Definition	Number of cases	Number of controls	Category		Relative risk (95%CI or p)	p for trend	Confounding variables considered	Comments
Ohno et al.	1988	1981-1984	Hospital based (Kyoto University Hospital, Shiga Medical School Hospital, and 11 affiliated hospitals)	Cases: histologically confirmed cases; Controls: patients with benign prostatic hyperplasia (BPH) and general hospital patients (hospital control, HC)	100males	100 BPH	Beta-carotene(μ				Matched for hospital, age (±3yr) and date of admission (± 3months)	
							Q4(≧2289)		1.00			
							Q3(≧1733)		0.52(0.21-1.31)			
							Q2(≧1154)		1.14(0.51-2.57)			
							Q1(<1154)		2.10(0.98-4.47)			
						100 HC	Beta-carotene(μ					
							Q4(≧2564)		1.00			
							Q3(≧1726)		1.00(??-??)			
							Q2(≧1168)		1.38(0.59-3.23)			
							Q1(<1168)		2.88(1.31-6.32)			
Nagata et al.	2007	1996-2003	Hospital-based (Tsukuba University Hospital, Sapporo Medical University Hospital)	Cases: histologically confirmed cases; Controls: outpatients without other prostatic diseases or malignant tumors	200males	200males	All carotene(mg/d)				Matched (1:1) for Age (±5yrs) and Adjusted for cigarette smoking and energy and isoflavone	
							<1.6	49	1.00			
							1.6-2.4	63	1.13(0.72-1.78)			
							2.5-3.5	43	0.96(0.58-1.59)			
							≧3.6	45	1.03(0.61-1.73)	1.00		
							Lycopene(mg/d)					
							<1.3	45	1.00			
							1.3-2.5	43	0.94(0.59-1.51)			
							2.6-6.0	71	1.36(0.87-2.14)			
							≧6.1	41	0.89(0.53-1.49)	0.53		

表III-4 ビタミンと前立腺がんの関連に関する症例対照研究(エビデンステーブル)

References		Study time	Study subjects				Category		Relative risk (95%CI or p)	p for trend	Confounding variables considered	Comments
author	year		Type and source	Definition	Number of cases	Number of controls						
Oishi et al.	1988	1981-1984	Hospital based (Kyoto University Hospital, Shiga Medical School Hospital, and 11 affiliated hospitals)	Cases: histologically confirmed cases; Controls: patients with benign prostatic hyperplasia (BPH) and general hospital patients (hospital control, HC)	100males	100 BPH	Retinol(μg/d)				Matched for hospital, age (±3yr) and date of admission (± 3months)	
							≧159	37	1.00			
							<159	63	1.70(0.97-2.99)			
							Vit B1(mg/d)					
							≧0.83	53	1.00			
							<0.83	47	0.85(0.49-1.49)			
							Vit B2(mg/d)					
							≧1.08	46	1.00			
							<1.08	54	1.17(0.67-2.05)			
							Niacin(mg/d)					
							≧12.0	64	1.00			
							<12.0	36	0.56(0.32-0.99)			
							Vit C(mg/d)					
							≧88	57	1.00			
							<88	43	0.75(0.43-1.32)			
						100 HC	Retinol(μg/d)					
							≧128	51	1.00			
							<128	49	1.00 (??-??)			
							Vit B1(mg/d)					
							≧0.80	58	1.00			
							<0.80	42	0.72(0.41-1.27)			
							Vit B2(mg/d)					
							≧1.06	48	1.00			
							<1.06	52	1.08(0.62-1.89)			

						Niacin(mg/d)				
						≧12.6	56	1.00		
						<12.6	44	0.79(0.45-1.37)		
						Vit C(mg/d)				
						≧90	53	1.00		
						<90	47	0.89(0.51-1.55)		
Nagata et al.	2007	1996-2003	Hospital-based (Tsukuba University Hospital, Sapporo Medical University Hospital)	Cases: histologically confirmed cases; Controls: outpatients without other prostatic diseases or malignant tumors	200males	200males	Vit B12(μg/d)				Matched (1:1) for Age (±5yrs) and Adjusted for cigarette smoking and energy and isoflavone
							<5.2	48	1.00		
							5.2-7.3	59	1.08(0.67-1.73)		
							7.4-10.8	56	1.08(0.65-1.81)		
							≧10.9	37	0.87(0.47-1.63)	0.60	
							Vit D(μg/d)				
							<5.2	48	1.00		
							5.2-8.4	60	1.22(0.78-1.92)		
							8.5-13.4	47	1.07(0.65-1.75)		
							≧13.5	45	1.08(0.62-1.90)	0.98	
							Vit E(mg/d)				
							<5.1	57	1.00		
							5.1-5.0	49	0.90(0.56-1.46)		
							7.1-9.5	54	0.94(0.55-1.58)		
							≧9.6	40	0.88(0.48-1.58)	0.71	
							Folate(μg/d)				
							<236	55	1.00		
							236-344	58	1.05(0.67-1.66)		
							345-472	53	0.92(0.55-1.55)		
							≧473	34	0.87(0.47-1.59)	0.54	

表III-5 葉酸と前立腺がんの関連に関する症例対照研究(エビデンステーブル)

References		Study time	Study subjects				Category		Relative risk (95%CI or p)	p for trend	Confounding variables considered	Comments
author	year		Type and source	Definition	Number of cases	Number of controls						
Nagata et al.	2007	1996-2003	Hospital-based (Tsukuba University Hospital, Sapporo Medical University Hospital)	Cases: histologically confirmed cases; Controls: outpatients without other prostatic diseases or malignant tumors	200males	200males	Folate(μ g/d)				Matched (1:1) for Age (±5yrs) and Adjusted for cigarette smoking and energy and isoflavone	
							<236	55	1.00			
							236-344	58	1.05(0.67-1.66)			
							345-472	53	0.92(0.55-1.55)			
							≧473	34	0.87(0.47-1.59)	0.54		

表III-6 肉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	Number of incident cases	Category	Number among cases	Relative risk (95%CI or p)	p for trend	Confounding variables considered	Comments
Hirayama	1990	1965-1982	122,261men	A large-Scale Census-Based Cohort Study in Japan	Mortality	183men	Meat					
							daily		1.00			
							occasional		01.93 (0.61-1.42)			
							rare		0.96 (0.59-1.56)			
							none		0.69 (0.24-1.99)	0.173		
Allen et al	2004	1963-1996	18,115men	The Life Span Study cohort, Atomic-bomb survivors	Incidence	196men	Pork (times/wk)				Age, area, education, medication, hypertenttion, leasuretime physical exercise, vegetable, fruit, fish, pickles, soy and red meat intake, alcohol, BMI.	<2: Score=1 2-4: Score=2 almost daily: Score=3 Total meat intake is the sum of meat, chicken and pork intake (Score=3-9). Low: Score=3 Intermediate: Score=4-6 High: Score≧7
							<2	135	1.00			
							2-4	50	1.34 (0.96-1.86)			
							almost daily	8	1.24 (0.61-2.54)	0.14		
							Chicken (times/wk)					
							<2	99	1.00			
							2-4	52	1.09 (0.78-1.52)			
							almost daily	2	0.77 (0.19-3.10)	0.81		
							Total meat					
							Low	38	1.00			
							Intermediate	112	1.27 (0.88-1.84)			
							High	3	0.94 (0.29-3.03)	0.32		

表III-7 肉と前立腺がんの関連に関する症例対照研究(エビデンステーブル)

References author	year	Study time	Study subjects: Type and source	Definition	Number of cases	Number of controls	Category	Relative risk (95%CI or p)	p for trend	Confounding variables considered	Comments
Mishina et al.	1985	1976	Hospital based (four clinics in Kyoto, two clinics in Osaka, and five clinics in Tokyo)	Cases: histologically confirmed cases; Controls: cancer-free patients	100males	100males	Meats <occasionally Occasionally or a little more	1.00 2.00 (χ^2=1.71, P>0.05)		Matched for age(± 1yr) and for residence in the same prefecture	
Nakata et al.	1993	1985-1990	Hospital-based (General hospital in Gunma Prefecture)	Cases: untreated histologically confirmed cases; Controls: screening controls and population controls	91males (≦ 69yr)	86males (≦ 69yr)	Meats Rarely Moderately Often	 1.00 (0.50-2.00) 1.00 0.88 (0.36-2.18)		Matched for age (± 2.0yr)	
					203males (≧ 70yr)	208males (≧ 70yr)	Meats Rarely Moderately Often	 1.10 (0.69-1.75) 1.00 1.57 (0.77-3.18)			
Sonoda et al	2004	1996-2002	Hospital-based (Tsukuba University Hospital, Sapporo Medical University Hospital)	Cases: histologically confirmed cases; Controls: outpatients without other prostatic diseases or malignant tumors	140males	140males	Meat (g/day) ≦21.1 21.1-37.7 37.7-62.8 ≧62.8	 1.00 2.19 (1.00-4.81) 2.19 (0.94-5.07) 1.80 (0.81-3.98)	 0.46	Matched (1:1) for Age (±5yrs) and hospital Adjusted for cigarette smoking and energy intake	

表III-8 魚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	Number of incident cases	Category	Number among cases	Relative risk (95%CI or p)	p for trend	Confounding variables considered	Comments
Allen et al	2004	1963-1996	18,115men	The Life Span Study cohort, Atomic-bomb survivors	Incidence	196men	Fish (times/wk)				Age, area, education, medication, hypertenttion, leasuretime physical exercise, vegetable, fruit, fish, pickles, soy and red meat intake, alcohol, BMI.	<2: Score=1 2-4: Score=2 almost daily: Score=3 Total fish intake is the sum of fish and broiled fish intake (Score=2-6). Low: Score=2 Intermediate: Score=3-4 High: Score≧5
							<2	47	1.00			
							2-4	97	1.18 (0.83-1.67)			
							almost daily	52	1.54 (1.03-2.31)	0.03		
							Broiled fish					
							<2	101	1.00			
							2-4	48	1.22 (0.87-1.72)			
							almost daily	4	1.25 (0.48-3.28)	0.27		
							Total fish					
							Low	38	1.00			
							Intermediate	97	1.19 (0.82-1.73)			
							High	18	1.77 (1.01-3.11)	0.07		
Sato et al.	2008	1995-2001	18,866men	Ohsaki Cohort Study	Incidence	95men	Fish (g/day)				Age, BMI, alcohol, smoking, marital status, calorie, calcium, walkind duration, intake frequency of beef, pork, soy food, tomato and green tea.	Q1 (0-26.2) Q2 (26.3-53.3) Q3 (53.4-100.8) Q4 (100.9-) 40-69yes Q2: HR=1.26 (0.51-3.11) Q3: HR=0.86 (0.38-1.94) Q4: HR=1.01 (0.43-2.34) Ptrend=0.83 ≧70yrs Q2: HR=0.63 (0.23-1.69) Q3: HR=0.60 (0.27-1.30) Q4: HR=0.44 (0.18-1.11) Ptrend=0.08
							Q1	25	1.00			
							Q2	15	0.92 (0.48-1.76)			
							Q3	29	0.73 (0.42-1.28)			
							Q4	26	0.72 (0.40-1.33)	0.23		
Pham et al.	2009	1986-2003	5589men	Miyako Study	Mortality	21men	Fish				Age, smoking, alcohol, history of diabetes, employment status, living with spouse, study area, intake of vegetable, fruit and meat.	Low: ≦4 times/month High: ≧ 2times/week
							Low	15	1.00			
							High	6	0.12 (0.05-0.32)			

表III-9 魚と前立腺がんの関連に関する症例対照研究(エビデンステーブル)

References		Study time	Study subjects				Category	Relative risk (95%CI or p)	p for trend	Confounding variables considered	Comments
author	year		Type and source	Definition	Number of cases	Number of controls					
Mishina et al.	1985	1976	Hospital based (four clinics in Kyoto, two clinics in Osaka, and five clinics in Tokyo)	Cases: histologically confirmed cases; Controls: cancer-free patients	100males	100males	Sea food >occasionally Never or only occasionally	 1.00 2.33 (χ^2=5.63, P<0.05)		Matched for age(±1yr) and for residence in the same prefecture	
Sonoda et al	2004	1996-2002	Hospital-based (Tsukuba University Hospital, Sapporo Medical University Hospital)	Cases: histologically confirmed cases; Controls: outpatients without other prostatic diseases or malignant tumors	140males	140males	Fish (g/day) ≦47.3 47.3-75.7 75.7-130.7 ≧130.7	 1.00 1.04 (0.53-2.02) 0.79 (0.39-1.59) 0.45 (0.20-1.02)	 0.04	Matched (1:1) for Age (±5yrs) and hospital Adjusted for cigarette smoking and energy intake	

表III-10 穀類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	Number of incident cases	Category	Number among cases	Relative risk (95%CI or p)	p for trend	Confounding variables considered	Comments
Allen et al	2004	1963-1996	18,115men	The Life Span Study cohort, Atomic-bomb survivors	Incidence	196men	Bread (times/day)				Age, area, education, medication, hypertenttion, leasuretime physical exercise, vegetable, fruit, fish, pickles, soy and red meat intake, alcohol, BMI.	
							<1	105	1.00			
							2	80	0.91 (0.68-1.23)			
							3+	11	0.68 (0.36-1.29)	0.23		
							Rice (times/day)					
							<1	20	1.00			
							2	71	0.88 (0.54-1.45)			
							3+	102	1.11 (0.68-1.80)	0.27		

表III-11 穀類と前立腺がんの関連に関する症例対照研究(エビデンステーブル)

References author	year	Study time	Study subjects Type and source	Definition	Number of cases	Number of controls	Category	Relative risk (95%CI or p)	p for trend	Confounding variables considered	Comments
Mishina et al.	1985	1976	Hospital based (four clinics in Kyoto, two clinics in Osaka, and five clinics in Tokyo)	Cases: histologically confirmed cases; Controls: cancer-free patients	100males	100males	Rice or wheat			Matched for age(± 1yr) and for residence in the same prefecture	
							<Twice	1.00			
							Twice or more daily	2.00 (χ^2=1.07, P>0.05)			
Sonoda et al	2004	1996-2002	Hospital-based (Tsukuba University Hospital, Sapporo Medical University Hospital)	Cases: histologically confirmed cases; Controls: outpatients without other prostatic diseases or malignant tumors	140males	140males	Rice (g/day)			Matched (1:1) for Age (±5yrs) and hospital	
							≦110 (1cup)	1.00			
							220 (2cups)	1.59 (0.75-3.34)			
							≧330 (3cups)	1.57 (0.79-3.14)	0.27	Adjusted for cigarette smoking and energy intake	

表S-1　カロテノイドと全がんとの関連に関するコホート研究（サマリーテーブル）

Reference	Study period	Study population					Magnitude of association
		Sex	Number of subjects	Age range	Event	Number of incident cases or deaths	
Ito et al	1988-2003	men+women	3204	39-85yr	death	140	α-carotene(AC) ↓ β-carotene(BC) ↓ Lycopene(LY) ↓ Total carotene(TCA=AC+BC+LY) ↓ β-cryptoxanthin(CR) — Zeaxanthin & Lutein(ZL) ↓ Canthaxanthin(CX) — Total xanthophyll(TXA=CR+ZL+CX) ↓ Provitamin A(PVA=AC+BC+CR) ↓ Total carotenoid(TCAR=TCA+TXA) ↓ ↓ *Based on one unit increase of logarithmically transformed serum value (mmol/l)

表S-2 ビタミンと全がんとの関連に関するコホート研究（サマリーテーブル）

Reference	Study period	Study population					Magnitude of association
		Sex	Number of subjects	Age range	Event	Number of incident cases or deaths	
Ito et al	1988-2003	men+women	3204	39-85yr	death	140	Retinol (RE) — Alpha-Tocopherol (AT) — Beta-+gannma-Tocopherol (BT) — Total Tocopherol (TTO=AT+BT) — *Based on one unit increase of logarithmically transformed serum value (mmol/l)

表S-3. イソフラボンと大腸がんの関連に関するコホート研究(サマリーテーブル)

Reference	Study period	Study population					Magnitude of association*		
		Sex	No. of subjects	Age range	Event	No. of incident cases or deaths	Colon	Rectum	Colorectum
Oba et al. 2007 (1)	1992-2000	Men	13,394	35+ yr	Indicence	114	—	NA	NA
		Women	16,327	35+ yr	Indicence	102	—	NA	NA
Akhter et al. 2008 (2)	1995-2004	Men	39, 069	45-74 yr	Indicence	528	↓↓	—	—
		Women	43, 994	45-74 yr	Indicence	358	—	—	—

表S-4. カロテノイドと大腸がんの関連に関するコホート研究(サマリーテーブル)

Reference	Study period	Study population					Magnitude of association		
		Sex	No. of subjects	Age range	Event	No. of incident cases or deaths	Colon	Rectum	Colorectum
Wakai et al. 2005 (1)*	1988-2002	Men	(7,673)	40-79 yr	Indicence	54	NA	NA	↓↓↓～↑+
		Women	(15,781)	40-79 yr	Indicence	62	NA	NA	↓～↑↑↑#
Ito et al. 2005 (2)	1988-2003?	Men and women	3,182	39-79 yr	Death	21	NA	NA	—～↓↓↓$

* Nested case-control study

+ OR<0.5: retinol, α-tocopherol, canthaxanthin, β-carotene, total carotenes, provitamin A, and total carotenoids

OR<0.5: retinol; OR>2: α-carotene, total xanthophylls, total carotenoids

$ OR<0.5: total carotenes, α-carotene, β-carotene, lycopene

表S-5. カロテノイドと大腸がんの関連に関する症例対照研究（サマリーテーブル）

Reference	Study period	Study subjects				Magnitude of association		
		Sex	Age range	No. of cases	No. of controls	Colon	Rectum	Colorectum
Wakai et al. 2006 (1)	2001-04	Men	20-79 yr	295	1475	−	−	NA
		Women	20-79 yr	212	1060	↓ ↓ ↓ * ～ −	↓ ↓ ↓ ** ～ −	NA

* OR<0.5: vitamin E

** OR<0.5: carotene, vitamin E

表S-6. 葉酸と大腸がんの関連に関するコホート研究（サマリーテーブル）

Reference	Study period	Study population					Magnitude of association*		
		Sex	No. of subjects	Age range	Event	No. of incident cases or deaths	Colon	Rectum	Colorectum
Ishihara et al. 2007 (1)	1995-2002	Men	35,107	45-74 yr	Indicence	335	NA	NA	−
		Women	43,077	45-74 yr	Indicence	191	NA	NA	−
Otani et al. 2008 (2)*	1990-2003	Men	14,004	40-69 yr	Indicence	487	−	↓	−
		Women	24,369	40-69 yr	Indicence	457	−	−	−

* Nested case-control study with measurement of plasma folate concentrations

表S-7. 葉酸と大腸がんの関連に関する症例対照研究(サマリーテーブル)

Reference	Study period	Study subjects				Magnitude of association		
		Sex	Age range	No. of cases	No. of controls	Colon	Rectum	Colorectum
Otani et al. 2005 (1)	1998-02	Men and women	20-74 yr	107	224	—	—	—
Wakai et al. 2006 (2)	2001-04	Men	20-79 yr	295	1475	—	—	NA
						—	—	NA
		Women	20-79 yr	212	1060	↓ ↓	—	NA
						—	—	NA

表S-8 肺がんとビタミン、カロテノイドとの関連に関するコホート研究(サマリーテーブル)

References			Study period	Study population					Assessment of intake	Strength of association
Author	Year	No.		Sex	Number of subjects	Age range	Event	Number of incident cases or deaths		
Ito Y, et al.	2006	1	1988–2003	Men and women	3,254	39-85	Death	41	Serum levels	↓

表S-9 肺がんとビタミン、カロテノイドとの関連に関するケースコントロール研究(サマリーテーブル)

References			Study period	Study subjects				Assessment of intake	Strength of association
Author	Year	No.		Sex	Age range	Number of cases	Number of controls		
Ito Y, et al.	2006	1	1988–1999	Men	40-79	163	375	Serum levels	↓ ↓ ↓
				Women	40-79	48	112	Serum levels	↓ ↓

表S-10 肺がんとイソフラボンとの関連に関するコホート研究(サマリーテーブル)

References			Study period	Study population					Assessment of intake	Strength of association
Author	Year	No.		Sex	Number of subjects	Age range	Event	Number of incident cases or deaths		
Shimazu T, et al.	2010	1	1995-2005	Men	36,177	45-74	Incidence	481	Questionnaire	↓ ↓ ↓ (never smokers)
				Women	40,484	45-74	Incidence	178	Questionnaire	–

表S-11 イソフラボンと乳がんとの関連に関するコホート研究（サマリーテーブル）

References			Study population				Strength of association
Author	Year	Study period	Number of subjects	Ranged age	Event	Number of incident cases or deaths	
Yamamoto et al. (1)	2003	1990-1999	21,852	40-59	Incidence	179	Intake All women ↓ ↓ ↓ ↓ ↓ ↓ ↓
Iwasaki et al. (2)	2008	1990-2002	24,226 Control selected; 288	40-59	Incidence	144	Plasma All ↓ ↓ ↓ ↓ ↓ ↓ Postmenopausal ↓ ↓ Plasma All – ↓ ↓ Postmenopausal –

表S-12 イソフラボンと乳がんとの関連に関するケース・コントロール研究（サマリーテーブル）

References			Study subjects			Strength of association
Author	Year	Study period	Ranged age	Number of cases	Number of controls	
Hirose et al. (1)	2005	2000-2001	18yr or over	79 premenopausal 88 postmenopausal	414 premenopausal 440 postmenopausal	↓ ↓ ↓ ↓ ↓
Iwasaki et al. (2)	2009	2001-2006	20-74	390 178 premenopausal 212 postmenopausal	390 137 premenopausal 253 postmenopausal	— — ↓

表S-13 ビタミンと乳がんとの関連に関するケース・コントロール研究（サマリーテーブル）

References			Study subjects			
Author	Year	Study period	Ranged age	Number of cases	Number of controls	Strength of association
Ma et al.	2009	2000-2005	20-74	388	388	Vitamin B2 —
						Vitamin B6 —
						Vitamin B12 —

表S-14 肥満と肝がんとの関連に関するコホート研究（サマリーテーブル）

Reference	Study period	Study population					Magnitude of association
		Sex	Number of subjects	Age range	Event	Number of incident cases or deaths	
Ohata et al. (2003) (1)	1980-2000	men and women	161 (HCV-associated chronic hepatitis or cirrhosis)	Not specified	Incidence	70	↑
Kuriyama et al. (2005) (2)	1984-1992	women	15054	>=40 yr	Incidence	31	-
		men	12485	>=40 yr	Incidence	69	-
Khan et al. (2006) (3)	1977-2002	men and women	1989	30-77 yr	Death	8	-
Muto et al. (2006) (4)	Not described	men and women	622 (decompensated cirrhosis)	20-75 yr	Incidence	89	↑ ↑ ↑
Fujino (2007) (5)	1988-2003	men	46178	40-79 yr	Death	463	-
		men	12485	40-79 yr	Death	227	-
Ohki et al. (2008) (6)	1994-2006	men and women	1431 (HCV-associated chronic liver disease)	Not specified	Incidence	340	↑ ↑ ↑
Inoue et al. (2009) (7)	1993-2006	men and women	17590	40-69 yr	Incidence	102	↑ ↑ ↑

表S-15 肥満と肝がんとの関連に関する症例対照研究（サマリーテーブル）

Reference	Study period	Study subjects				Magnitude of association
		Sex	Age range	Number of cases	Number of controls	
Ohishi et al. (2008) (1)	1970-2002	men and women	Not specified	224	644	↑ ↑ ↑

表S-16 イソフラボン、カロテノイド、ビタミンと肝がんとの関連に関するコホート研究（サマリーテーブル）

Reference	Study period	Study population					Magnitude of association
		Sex	Number of subjects	Age range	Event	Number of incident cases or deaths	
Ito et al. (2006) (1)	1988-2003	men and women	3204	39-85 yr	Death	12	↓ ↓ (α-carotene) ↓ ↓ ↓ (β-carotene) — (lycopene) ↓ ↓ (total carotene) ↑ (β-cryptoxanthin) — (zeaxanthin & lutein) — (canthaxanthin) — (total xanthophyll) ↓ ↓ (provitamin A) ↓ (total carotenoid) ↓ ↓ (retinol) ↓ ↓ (α-tocopherol) ↓ ↓ (β-γ-tocopherol) ↓ ↓ (total tocopherol)
Kurahashi et al. (2009) (2)	1993-2005	men	7215	40-69 yr	Incidence	69	— (genistein) — (daizein)
		women	12783	40-69 yr	Incidence	32	↑ ↑ ↑ (genistein) ↑ ↑ ↑ (daizein)
Kurahashi et al. (2009) (3)	1993-2005	men and women	19998	40-69 yr	Incidence	101	— (retinol) — (α-carotene) ↓ (β-carotene) — (vitamin C)

表S-17 熱い飲食物(嗜好含む)と食道がんとの関連に関するコホート研究 (サマリーテーブル)

References			Study period	Study subjects						Strength of association
Author	Year	(Ref. No.)		Sex	No. of subjects	Ranged age	Event	Number of incident cases or deaths	Category	
Kinjo Y et al.	1998	(1)	1965-1981	Men	100,840	40-70 yrs	Death	328	hot vs non-hot	↑ ↑
				Women	119,432	40-70 yrs	Death	112	hot vs non-hot	↑ ↑
Ishikawa A et al.	2006	(2)	Cohort 1 1984-1992	Men	9,008	40 yrs or older	Incidence	38	Tea cups/day	↑
			Cohort 2 1990-1997	Men	17,715	40-64 yrs	Incidence	40	Tea cups/day	↑

表S-18 熱い飲食物(嗜好含む)と食道がんとの関連に関するケースコントロール研究 (サマリーテーブル)

References			Study period	Study subjects					Strength of association
Author	Year	(Ref. No.)		Sex	Ranged age	Number of cases	Number of controls	Category	
Kamon et al.	1976	(1)	1973-1985	Men	Not specified	56	253	Gruel daily/non-dailty	↑ ↑ ↑
				Women	Not specified	42	223	Gruel daily/non-dailty	↑
Takagi et al.	1990	(2)	1990-1999	Women	17-87	34	178	Hot food like vs dislike	-
Yokoyama A et al.	2006	(3)	2000-2004	Women	40-79	52	412	Level of preference	↑ ↑