平成 28 年度厚生労働科学研究費補助金 (女性の健康の包括的支援政策研究事業) 分担研究報告書

女性の健康における社会学的要因に関するシステマティックレビュー

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研究要旨

本研究は、健康の社会学的要因である社会経済状況(教育歴、職業、雇用形態、所得・収入)や社会的ネットワーク(婚姻状況、同居状況)と女性の健康(全死亡、がん死亡・罹患、循環器死亡・罹患、自覚的健康感、抑うつ・精神的苦痛)や健康行動(喫煙、飲酒)に関する文献を MEDLINE から抽出し、現時点における日本人女性の健康に関するエビデンスを整理しその傾向を概観することを目的にシステマティックレビューを実施した。

本研究において実施したレビューの結果、現時点において社会経済状況による死亡や罹患との関連についてはいくつかの大規模コホートから報告がされており、基本的に社会経済状況が悪いと死亡リスク、疾病罹患リスクが高い傾向がみられた。しかし、日本人女性を対象とした健康の社会決定要因に関する検証はまだ十分とはいえず、特に子育て期(20~30代)の女性を対象としたエビデンス、就労や所得・収入に関連するエビデンスが少ないことが示された。また、社会的健康決定要因と健康指標の関連に顕著な性差が存在し、その性差の傾向は対象とする要因、健康指標によって一貫していないことも示唆された。健康影響にみられる性差を包括的に理解するためには、生物学的性差の影響に加えて、社会状況、社会的規範、社会的価値観などを考慮し男女を取り巻く社会的環境の違い(社会的性差)を踏まえた研究エビデンスを積み重ねていくことが重要だと考えられる。また、女性の健康に関する社会的決定要因の把握には、女性の家庭生活、就労、社会経済状況、役割など人生の様々な局面に影響を与えている日本社会の特徴のひとつ「強い性別役割分業規範(男性稼ぎ手モデル)」の影響を含めた理解が重要であることが示唆された。

A. 研究目的

健康の社会経済的な格差、すなわち所得・学歴・職種などによって表わされる社会経済状況と健康の間に強い関連があることはよく知られている。一般に、世帯所得、財産、教育、職業階級が高い水準にあればあるほど、疾病の罹患率や死亡率が低く、健康であると言える。日本においても、経済的低迷の中で所得格差や貧困問題が注目され、その流れと連動する形で社会格差

への関心が高まった。公衆衛生分野においては 健康の地域格差や社会経済状況による格差に関 する知見が蓄積され、日本においても欧米と同 様に健康の社会格差が存在することが観察され た。2009 年に発表された Kagaminori らの研究 では、日本においても健康の社会的格差は存在 するが、その規模、分布やパターンは必ずしも欧 米と一致しないと報告されている(1)。残念なが ら、この時点において性別に検討が行われた研 究は少なく、女性の健康における社会的決定要 因に関するエビデンスについて言及されていな い。

その後、様々な社会的要因と健康指標との関連に関する研究が行われ、日本人女性を対象と したエビデンスも徐々に蓄積されてきている。

そこで、本研究では、これまでに日本人を対象に把握されている社会的要因とさまざまな健康指標との関連に関する知見を基に日本における健康の社会格差を把握し、今後の女性の健康支援対策事業における科学的基盤を堅固にすることを目的としたシステマティックレビューを実施した。具体的には、健康の社会学的要因である社会経済状況(教育歴、職業、雇用形態、所得・収入)や社会的ネットワーク(婚姻状況、同居状況)と女性の健康(全死亡、がん死亡・罹患、循環器死亡・罹患、自覚的健康感、抑うつ・精神的苦痛)や健康行動(喫煙、飲酒)について、MEDLINEから文献を抽出し、現時点における日本人女性に関するエビデンスを整理し、その傾向を概観することとした。

B. 研究方法

女性の社会的健康決定要因と考えられる社会 経済状況(教育歴、所得・収入、職業、雇用形態) や婚姻形態、同居形態と女性の健康(全死亡、が ん死亡・罹患、循環器死亡・罹患、自覚的健康感、 抑うつ・精神的苦痛、喫煙、飲酒)の関連に関す るシステマティックレビューを実施するため、 上記の社会決定健康要因と健康の関連について、 統制語(MeSH)を用いて MEDLINE から文献の抽出 を行った。(表1)対象国を日本とし、調査対象 (動物実験除く)、言語(英語)、論文形式(総説や レターなど除外)を固定した上で、以下の検索式 により文献を抽出した。(のべ1089編*)その中 から、抄録を確認し、女性を対象にしていないも の、男女別に結果が示されていないもの、症例報 告など、適切な検証が行われていないものを除 外し、社会的健康決定要因と健康アウトカムご とに分類した。検索式で得られなかった論文も

多数みうけられため、手作業で論文を検索する作業も追加した。(のべ 123 編*) その後、論文の精読によるエビデンスの把握とエビデンステーブルの作成を実施した。その結果、教育歴(36 編*)、所得・収入(11 編*)、職業(31 編*)、雇用形態(11 編*)、婚姻形態(23 編*)、居住形態(11 編*)の論文を把握し、健康指標ごとに整理しレビューを実施した。(*要因ならびに健康指標ごとに集計し合計したため重複あり)

そのうち、コホート研究は75件、横断研究が48件。対象年齢が20-39歳は42件、40-64歳は104件、65歳以上は64件であった。(重複あり)

C. 研究結果ならびにD. 考察

1. 教育歷

教育歴は将来における職業機会や収入を規定 する意味において社会階層の最も基本的な指標 だと考えられおり、これまでの疫学研究で最も 頻繁に用いられている社会階層指標の一つであ る(2)。教育歴は学歴、公的教育の終了年齢、公 的教育の修業年数によって測定され、将来の社 会的成功に関する情報を提供すると考えられる。 つまり、高い教育歴の人は、よい職につく可能 性、高い収入を得る可能性、良い家に住む可能 性、良い職場環境を享受できる可能性が高く、逆 に、低い教育歴の人はこれらの可能性が低いと 予想される。教育によって得た知識やライフス キルは、その人の健康に関する情報や資源への アクセスを決定すると考えられ、教育による健 康情報や資源へのアクセスの違いによって健康 格差が生まれる可能性が示唆されている(3)。高 い教育をうけること、つまり高学歴であること による自己肯定感の上昇などの心理的側面への 影響や 13) 学閥などに代表されるような社会的 ネットワークや資源を通した社会心理的な影響 から健康格差が生成される機序も考えられる (4)。また、このような情報・資源・社会心理要 因における教育歴による差は健康行動にも影響 がある(3)。欧米の多くの先行研究は教育歴が短

ければ短いほど死亡率・罹患率が高く、健康状態 は悪いことを示している。

1-1 全死亡

教育歴と全死亡の関連は、男女共に教育歴が高いほど死亡リスクが低い傾向が示されている。たとえば、Fujinoらは、全国45地区に居住する40~79歳の地域住民約11万人が参加した大規模コホート研究Japan Collaborative Cohort Study (JACC Study)のデータを用いて、教育歴と死亡リスクの関連を検証した。(5)その結果、公的教育を18歳以上まで受けた群に対して、公的教育を完了した年齢が15歳以下であった群の調整ハザード比は、男性で1.16(95%信頼区間:1.08-1.25)、女性で1.26(95%信頼区間:1.14-1.39)であった。また、Itoらは4保健所管内の40~59歳の地域住民約5万5千人が参加した大規模コホート研究

Japan Public Health Center-based

Prospective Study (JPHC study) コホート1のデータを用い、1990年のベースライン調査時に得られた最終学歴(中学卒業、高校卒業、短大・大学・専門学校卒業)とその後2002年末までの総死亡リスクとの関連を分析した。(6)その結果、最終学歴が短大・大学・専門学校卒業の男性と比較して、中学卒業群の死亡ハザード比は男性で1.30(95%信頼区間:1.09-1.54)女性で1.34(95%信頼区間:1.02-1.78)と報告している。

1-2 がん (死亡・罹患)

がん死亡との関連に関しては一貫した結果は 得られていない。前述の JACC Study においては、 男性においては教育歴が高いほど全がん死亡リ スクが低いが、女性では関連がみられていない (5,7)。また、JPHC study においては女性におい てのみ教育歴と全がん死亡リスクの関連が見ら れた(6)。広島・長崎原爆被ばく者コホート(寿 命調査 LSS:1ife Span Study) においては、1978 年に74歳以下の男性約1万3千人と女性約2万 人を対象に約23年間追跡した結果、教育歴と全がん死亡リスクとの関連は男女とも把握されていなかった。また、部位別の検討においても顕著な関連は把握されていない(8)。

罹患リスクに関する検討では、LSS Study において、教育歴が低いほど全がん罹患リスクが高い傾向を示したが、女性では統計的に有意な関連はみられなかった(8)。乳がん罹患リスクに関しては、JACC Studyでは高学歴の女性の乳がん罹患リスクが高いことが示されたが(9)、他の研究では関連はみられず(8)、一貫した結論は得られていない。

1-3 循環器疾患 (死亡・罹患)

循環器疾患死亡においては、教育歴が高いほど循環器疾患で死亡するリスクが低い傾向が把握された。前述の JACC Study では 40-65 歳の男女約5万6千人を平均14.7年追跡した結果、男女ともに教育歴が高いほど循環器疾患で死亡するリスクが低かった(7)。他のコホート研究においても統計的に有意ではなかったが、同様の傾向がみられた(6,10)。

循環器疾患罹患に関する検討は、主に脳卒中罹患リスクと教育歴の関連が検討されている。 JPHC study において、女性を対象に教育歴と脳卒中罹患との関連を検討した結果、欧米と異なり、低学歴群とともに高学歴群においてもリスクが上昇するというU型の関連を把握した(11-13)。この関連は特に出血性の脳卒中で強くみられた。しかし、教育歴と虚血性心疾患死亡・罹患との関連はみられていない(5,11)。

1-4 自覚的健康感

日本における自覚的健康感と教育歴の関連に 関する検証の多くは横断研究の結果である。地 方自治体職員を約1300人対象とした研究では 男女とも関連はみられなかったが(14)、20歳以 上の地域住民から無作為抽出

された男女あわせて約3千人を対象にした World Mental Health Japan (WMHJ) 研究で は、女性において教育年数が低いほど自覚的健康感が悪い人の割合が高かった(15)。自覚的健康感に関する検証のほとんどは横断研究であるが、Wang らは1993年に2地区に居住する47~77歳の地域住民約1万人に対し、7年後の2000年に追跡調査を実施したKomo-Ise Studyのデータを用いて、教育歴と自覚的健康感の関連を縦断的に検証した。その結果、高校卒業を基準とした教育歴と自覚的健康感においては縦断的な関連を把握することはなかった(16)。

1-5 精神健康

教育歴と精神的苦痛との関連に関する縦断研究は実施されていない。前述の WMHJ 研究では、女性では教育歴が高いほど自覚的な精神不健康を訴える人の割合が低いことが示されたが(15)、無作為に抽出された20-74歳の地域住民を対象とした検証(17)では同様の傾向はみられるものの、統計的に有意な結果ではなかった。

抑うつとの関連に関しては、WMHJ研究における5年間の追跡の結果、男女ともに教育年数が高いほど抑うつ罹患リスクが高い傾向が示されている(19)。

1-6 健康行動 (喫煙・飲酒)

35-64 歳の地方自治体職員約 1300 人対象とした研究では、男女とも教育歴が高いほど喫煙者の割合が高い傾向がみられた。また、女性では高校卒業群は大学卒業群と比較して、毎日飲酒する習慣のある人の割合が高い傾向がみられたが、男性では同様の傾向はみられなかった(14)。しかし教育歴と健康行動の関連に関する検証は量・質ともに限られており、結論には至らない。

1-7 まとめ

教育歴は、他の指標と比較して、疫学調査において最も頻繁に情報が収集され、情報の欠損も少ない有用な社会階層指標のひとつである。教育歴と全死亡、疾患別死亡、がん罹患、循環器疾患罹患、精神健康の関連について、日本の代表的

なコホート研究による縦断的検証が実施されエ ビデンスも蓄積されてきている。教育歴が低い ほど死亡リスクが高いという関連は、欧米と同 様に日本においても顕著であるといえる。しか し、疾患別死亡リスクとの関連においては、必ず しも一致した結論に至っていない。また、がん・ 循環器疾患罹患リスクに関しても、十分なエビ デンスがあるとはいえず、女性の結果は男性あ るいは欧米の結果と異なる傾向もみられる。精 神健康との関連に関しては、欧米と異なり、高学 歴群で抑うつ罹患リスクが高いという傾向が示 されている。しかし、教育歴と精神健康ならびに 健康行動の関連に関する検証は限定的であり、 結論には至らないと考える。

2. 所得·収入

所得・収入は個人の生活水準を示唆する重要 な指標の一つである。疫学研究では、世帯人数を 調整した等価所得を用いることが多い。収入は、 健康に影響を与える物質的環境と直接的に関連 するという意味において重要な指標である。収 入が多い人は、健康に益する物やサービスへの アクセスが、収入が少ない人と比較して良いと 考えられる。少なくとも現在では、貧困により健 康を維持するのに困難なレベルの物質的困窮は 解消されているが、健康に関する上級財(階層の 高い人から普及していく財)、例えば、禁煙クリ ニックに通う、添加物の少ない食品を購入する、 スポーツクラブに入会する等といった行動は、 依然収入によって差があると考えられる。欧米 の多くの先行研究において収入が少ないほど死 亡率・罹患率が高く、健康状態は悪いことが示さ れている。

2-1 全死亡

該当するエビデンスはなかった。

2-2 がん (死亡・罹患) 該当するエビデンスはなかった。

2-3 循環器疾患 (死亡・罹患) 該当するエビデンスはなかった。

2-4 自覚的健康感

1993 年から 2000 年にかけて 2 地区に居住する 47~77 歳の地域住民約1万人に追跡調査を実施した Komo-Ise Study では、世帯収入が低いほど自覚的健康感が悪いと答える傾向が把握された(16)。また、WMHJ 研究においても同様の結果が把握された(15)。

2-5 精神健康

2001年の国民生活基礎調査データを用い、25 -59歳を対象に世帯収入と精神的ストレスの有 無の関連を検証した研究では、男女共に世帯収 入が低いほど精神的ストレスを感じている人の 割合が高い傾向が示されている(20)。また、地域 住民から無作為抽出した20歳以上の人を対象に した研究では、同様の傾向ではあったが統計的 に有意な結果ではなかった(15,17)。

抑うつにおいては、横断研究で女性では世帯 収入が高いほど抑うつの有病リスクが低い傾向 が報告されているが(21)、WMHJ研究データを用 い無作為抽出された地域住民約1600人のベース ライン時の世帯収入と5年後の抑うつ発症の関 連を検討した縦断研究では、男女ともに関連は 把握されていない(19)。

2-6 健康行動 (喫煙・飲酒)

前述の2001年の国民生活基礎調査データを用い、25-59歳の約4万1千人を対象に世帯収入と喫煙ならびに過剰飲酒の有無との関連について検討した結果、男女とも収入が低いほど喫煙している傾向がみられた。女性においては、最も世帯収入の低い群で最も高い群と比較して過剰飲酒をしている人の割合が高い傾向がみられたが、男性では世帯収入と危険飲酒の関連はみられなかった(20)。

2-7 まとめ

収入は、個人の経済力を反映する重要な指標のひとつである。しかし、これまでの大規模コホート研究の多くは、個人の所得・収入に関する情報を収集しておらず、残念ながら収入・所得と全死亡、疾患別死亡・罹患の関連に関するエビデンスはなかった。その他の健康指標との関連に関しても、所得・収入が高いほど、健康状態が良く、良い健康行動をとっている傾向がみられるが、そのエビデンスは質・量ともに不足している。

3. 職業

受けた教育によって選択可能な職業が決定され、就いた職業によって経済的報酬額が決定する。従って、職業は教育歴と収入をつなぐ中間的指標といえる。また、職業は社会的地位や権力を推定し把握できる可能性があり、社会経済的状況の複合的特徴を捉えることが可能な総合的な指標であるといえる。しかし、日本では職業の有無や日本標準職業分類大分類(22)から、職業をブルーカラー労働者(肉体労働者)、ホワイトカラー労働者(頭脳労働者)に分類するなど比較的単純で古典的な手法を用いることが多く、職業を階層化した指標を用いた研究は少ない。

職業指標の最大の短所は職に就いていない集団、たとえば、失業者、主婦などを対象にできないことである。また、性によって職業に偏りがあり、女性が主についている職業、たとえばサービス業、販売業、介護・保健医療職等をどのように扱うかについて問題が残る。日本ではホワイトカラー職に就く女性の多くが補助的な役割であることが多く、女性においてホワイトカラー職の多くを占めるサービス業、販売業などは収入も低く、不安定で、職業性ストレスが高い傾向にある(20,23)。したがって、男性とはその健康影響も異なることが考えられる。

3-1 全死亡

職業の有無と全死亡の関連については、男女 共に無職者の死亡リスクが有職者と比較して高 いことが示された(7,24)。たとえば、JACC Study のデータを用いて職業の有無と死亡リス クの関連を検証した結果、無職者は有職者ある いは事務職と比較して死亡リスクが高く、 (7,24) 肉体労働者は事務職と比較して男性で 高い死亡リスクを示すが、女性では関連がみら れなかった(7)。(また、40-69歳の地域住民約 1万1千人を対象に平均約9.2年間追跡した Jichi Medical School (JMS) コホート研究で は、事務職と比較した農林業のハザード比は男 性で 1.05 (95%信頼区間: 0.71-1.56) である のに対し、女性は 0.55 (95%信頼区間: 0.33-0.93) と女性においてのみ肉体労働(農林漁 業) は事務職と比較して死亡リスクが低いと報 告している(10)。また、高齢者を対象としたコ ホート研究では、男女とも 75 歳以上の後期高 齢者において有職者は無職者と比較して4年の 追跡期間における死亡リスクが低い傾向がみら れた(25)。また、68歳から82歳の高齢者を12 年間追跡した研究では、特に女性において有職 者は無職者と比較して死亡リスクが低いことが 示されている(26)。

3-2 がん (死亡・罹患)

全がん死亡リスクと職業との関連は前述 2 つの大規模コホートにおける検証では把握されなかった(10,13,27)。部位別の検討では、JACC研究において、肉体労働は事務職と比較して、男性では胃がん、大腸がん、女性では肺がん、乳がんにおいて、死亡リスクが高いと報告されている(27)。

がん罹患リスクに関して該当するエビデンスはなかった。

3-3 循環器疾患 (死亡·罹患)

循環器疾患死亡においては、前述の JACC 研究では40-65歳の男女約5万6千人を平均14.7年追跡した結果、男性の無職者は事務職者と比較して循環器疾患で死亡するリスクが高く、女性の肉体労働者は事務職者と比較してそのリスクは低かった(7)。同じ JACC 研究で、40-79歳

を対象に平均12.5年追跡し疾患別の検討を実施した結果、虚血性心疾患においては男女とも職業との関連はみられなかったが、脳卒中死亡では、男性において肉体労働者は事務職者と比較してリスクが高いことが報告されている(27)。また、JMS コホート研究では、男性の農林業者は事務職者と比較して循環器疾患死亡リスクが低いが、女性では関連がみられなかった(10)。

循環器疾患罹患に関する検討は、JPHC 研究において実施された1件のみである。40-59歳の女性約1万5千人を約20年間追跡した結果、サービス販売職、肉体労働者は専門・管理職と比較して、脳卒中罹患リスクが高かった。事務職者も同様の傾向はみられたが、統計的に有意ではなかった(13)。

3-4 自覚的健康感

2地区に居住する 47~77歳の地域住民約1万人を対象に、1993年から 2000年にかけて追跡調査を実施した Komo-Ise Studyでは、男女共に雇用者と比較して無職者の自覚的健康感が悪いリスクが高いことが把握された(16)。地方自治体職員約1300人を対象とした横断研究では、男女共に肉体労働者は高階層非肉体労働者と比較して自覚的健康感が悪かった(14)。別の地方自治体公務員約2500人を対象とした横断研究では、男性においては管理職と比較して、専門職、事務職、肉体労働者の自覚的健康感が悪い人の割合が高い傾向がみられたが、女性では関連が把握されなかった(28)。

3-5 精神健康

2001年の国民生活基礎調査データを用い25-59歳の女性約2000人を対象に、職業と精神的ストレスや心配の有無の関連を検証した研究では、男性において肉体労働や農業は専門職より精神的ストレスを感じている人の割合が低い傾向が示された。また女性では主婦と比較して、農業従事者は精神的ストレスを感じている人の割合が低く、販売業、サービス業従事者では高いこ

とが報告されている(20)。また、29-50歳の就 労者約2300人を対象とした研究では、男性では 職業分類と抑うつ症状の有無との関連がみられ なかったが、女性では事務・管理職と比較して専 門職者の抑うつ症状の有病リスクが高かった。 同じ研究において、管理職かどうかと抑うつ症 状の有無との関連は男女ともみられなかった (29)。

3-6 健康行動 (喫煙·飲酒)

2001年の国民生活基礎調査データを用い25-59歳を対象に職業と喫煙行動との関連を分析した結果、女性では販売職、サービス職は主婦より喫煙する傾向がみられた。男性では、管理職、販売、サービス、輸送・通信、労務は専門職と比較して喫煙する傾向がみられた。地方公務員を対象とした調査においては男女ともに職位と喫煙との統計的に有意な関連はみられていない(14)。前述の国民生活基礎調査データを用いた研究において、危険飲酒との関連を分析した結果、女性では専門職、事務職、販売職、サービス職は主婦より危険飲酒している傾向が把握された。男性では専門職と比較して販売、輸送・通信、労務において危険飲酒している傾向がみられた(20)。

3-7 まとめ

職業は多くの研究で職業カテゴリーとして扱われており、階層を示す職業的地位を示す指標との関連を検討した研究は限られている。また、基準となる職業カテゴリーも一致しておらず、職業と健康の関連に関して、現時点で一貫した結論を得ることは難しいと考える。これまでの研究結果を性別で比較すると、男女で結果が異なる傾向がみられ、職業と健康の関連を捉えるには女性の就労環境に特化した検討が重要であることが示唆される。就労の健康影響に関しては、これまで主に産業保健分野において、職場の環境や雇用状況に関する要因と健康との関連を中心に検証されてきた。そして、その対象は主に正規雇用者であることが多く、そのため非正規

雇用者の多い女性就労者は研究の対象から外れ ていることが多かったため、職業と女性の健康 に関するエビデンスは特に十分とはいえない。

4. 雇用形態

女性就労者は、家庭との両立のためパート・ア ルバイトなどの非正規雇用での就労が多い傾向 にあり、その割合は1990年ごろから年々増加し 続けている。その背景の一つに、一旦正規職から 離れると正規職に戻ることが難しいという日本 社会特有の雇用体制がある。パート・アルバイト などの働く時間の自由度が比較的高い勤務体系 は家庭と仕事の両立を目指す必要のある女性に とって都合が良いという側面がある。一方で、家 事・育児のため離職し、その後復職した女性の多 くは、本人の希望とは関係なく非正規雇用での 就労をせざるを得ない状況が存在する。女性の 高い非正規雇用割合は、日本の雇用体制と性別 役割分業規範が女性の雇用形態に大きく影響し た結果でもあると言える。また、日本における正 規雇用とパートタイム雇用の違いは、勤務時間 の長さという意味のほか、雇用に関する条件や 状況、福利厚生面における違いを含めたもので あり、いわゆる雇用における「身分」の意味合い が強い定義といえる。先に述べた様に非正規雇 用から正規雇用への移動は極めて困難であると いう状況を考えると、パート・アルバイト就労者 の経済的不安、雇用不安、将来に対する危機感と いったものが長期的な健康への影響を与えるの ではないかと推察される。

4-1 全死亡

JACC 研究データを用いた 2 つの研究から、男性において自営はフルタイム雇用と比較して全死亡リスクが高く (パートタイム雇用者はほとんどおらず分析不可)(30)、女性において自営ならびにパートタイム雇用はフルタイム雇用と比較して全死亡リスクが高かった(31)。

4-2 がん (死亡・罹患)

全がん死亡リスクに関する分析では、男女共に自営は雇用者と比較して死亡リスクが高く、 部位別にみると男性では、食道がん、胃がん、大 腸がん、肝がんでその傾向がみられ、女性ではす い臓がん、肺がんでみられた(27)。

がん罹患に関するエビデンスはなかった。

4-3 循環器疾患 (死亡・罹患)

前述の JACC 研究データを用いた研究より、男性では雇用形態と循環器疾患死亡リスクの関連は見られなかったが、女性では、雇用者は自営と比較して循環器疾患死亡リスクが高いことが示された。しかし、疾患別死亡における分析では、男性でのみ、雇用者が自営と比較して脳卒中死亡リスクが高いことがみとめられた(30)。虚血性心疾患死亡においては男女とも関連がみられなかった(27,30)。

4-4 自覚的健康感

該当するエビデンスはなかった。

4-5 精神健康

中高年縦断調査データを用い、50-59歳の男 女あわせて約1万5千人を対象に、2005年から 2009年まで追跡した縦断研究の結果、男性にお いて重篤な心理的苦痛を発症するリスクが、フ ルタイム雇用者と比較して非正規雇用者で高か ったが、女性では関連がなかった(32)。また、 2007年の国民生活基礎調査データを用い、15-83歳を対象に雇用形態と精神的苦痛の有無の関 連を分析した研究では、男性のパートタイム就 労者はフルタイム正規雇用者と比較して精神的 苦痛の有病者割合が高いが、女性では関連がみ られなかった。逆に女性のフルタイム非正規雇 用者は、フルタイム正規雇用者と比較して精神 的苦痛の有病者割合が高いが、男性では関連が みられないという男女で異なる結果であった (33)。また、29-50歳の就労者約2300人を対象 とした研究では、フルタイム雇用かどうかは精 神的ストレスの有無と関連がみられていない $(29)_{\circ}$

4-6 健康行動 (喫煙・飲酒)

浜松市の15-79歳地域住民で無作為に抽出された約500人を対象に実施した調査の結果、男女とも雇用形態と危険飲酒の有無に統計的に有意な関連はみられなかった(34)。

4-7 まとめ

近年、非正規雇用者の割合増加に伴い、雇用形態の違いが健康に与える影響について関心が高まり、その検証も進められてきたが、雇用形態と健康に関するエビデンスは十分とはいえない。これまでのエビデンスを概観すると雇用形態と健康の関連には顕著な性差がみられる。

5. 婚姻形態

婚姻が健康に大きな影響を与えている事はこ れまでの多くの先行研究により明らかにされて いる(35)。男女とも未婚者や死別・離別者に比 べ、既婚者は、身体的に健康で、心理的にも幸福 であり、死亡リスクも低いことが知られている。 婚姻が健康に影響を与える機序のひとつは婚姻 関係を通した社会的サポートの授受による影響 が挙げられる。婚姻による社会的サポート、特に 情緒的サポートの授受は、うつ症状や不安、疾病 への罹患や死亡リスクを減少させる効果がよく 知られている(35)。また、婚姻により得られる経 済的安定が健康に大きな影響を与えることも考 えられる(36)。一般的に社会経済的基盤が脆弱 な女性にとって、婚姻により得られる経済的安 定は大きな恩恵の一つである事は想像に難くな い。これに対し、婚姻による経済的影響がそれほ ど大きなものでないと考えられる男性にとって は、結婚によってもたらされるパートナーや家 族の協力や支えといった、情緒的・社会的サポー トの供給が健康に大きく影響することが伺える。

5-1 全死亡

婚姻と全死亡の関連は、既婚者は未婚者と

比較して死亡リスクが低い傾向が示された (31, 37-39)。たとえば、JACC 研究では 40-59 歳の地域住民を 1990 年のベースライン時の 婚姻形態をもとに、その後20年間追跡した結 果、既婚者と比較した未婚者の全死亡ハザー ド比は、2.04 (95%信頼区間:1.18-3.53) で あった。Komo-Ise Study においても同様に、 47~77歳の地域住民約1万人を対象に、1999 年のベースライン時の婚姻形態をもとにその 後7年間追跡した結果、既婚者と比較した未 婚者の全死亡のハザード比は、1.91 (95%信 頼区間:1.05-3.49) であった(37)。男性にお いては、離別・死別も同様に死亡リスクが高 い傾向が示されているが(38,39)、女性におい ては離別・死別が既婚者より高い死亡リスク であるという結果は得られていない。特に高 齢者を対象にしたコホート研究においては、 男性では死別者の死亡リスクは婚姻継続者と 比較して高いが、死別した女性は婚姻を継続 している女性と比較して死亡リスクがない、 あるいは低いという、欧米とは異なる結果を 示している(26,40)。

5-2 がん (死亡・罹患)

JACC 研究おいて、男性では死別者は既婚者と 比較してがん死亡リスクが高い傾向がみられる が、女性では関連はみられない。Komo-Ise Study では男女ともに関連がみられていない(37)。

がん罹患に関する該当するエビデンスはなかった。

5-3 循環器疾患 (死亡・罹患)

JACC 研究おいて、男性では死別者・未婚者は 既婚者と比較して循環器疾患死亡リスク、虚血 性心疾患死亡リスク、脳卒中死亡リスクが高い 傾向がみられたが、女性では関連がみられてい ない(38)。しかし、Komo-Ise Studyでは男女と もに関連がみられておらず、一貫した結果とは なっていない(37)。 循環器疾患罹患に関する検討は、JPHC 研究に おいて実施された 1 件のみである。45-64 歳の 女性約 5 万人の脳卒中発症を、ベースライン時 における過去 5 年間の婚姻形態変化をもとに約 15 年間追跡した結果、男女ともに離婚・死別者は 結婚継続者と比較して脳卒中罹患リスクが高い 傾向を示した(41)。

5-4 自覚的健康感

1993 年から 2000 年にかけて 2 地区に居住する 47~77 歳の地域住民約1万人を対象に追跡調査を実施した Komo-Ise Study では、男性の離婚者・非婚者は既婚者と比較して自覚的健康感が悪化するリスクが高いが、女性では関連がみられていない(16)。

5-5 精神健康

2001年の国民生活基礎調査データを用い、25 -59歳を対象に職業と精神的ストレスや心配の 有無の関連を検証した研究で、男性では婚姻形態との関連はみられなかったが、女性の離婚者 は既婚者と比較して精神的ストレスを感じている人の割合が高いことが報告されている(20)。

抑うつに関するエビデンスはなかった。

5-6 健康行動

2001年の国民生活基礎調査データを用い 25-59歳を対象に婚姻形態と喫煙行動との関連を分析した結果、男性の非婚者は既婚者と比較して喫煙しない傾向がみられた。女性での非婚者は、男性とは対称的に既婚者と比較して喫煙する傾向がみられた(20,42)。同じ研究において、危険飲酒との関連を分析した結果、男女とも離婚者は既婚者と比較して危険飲酒している傾向がみられた。

5-7 まとめ

これまでのエビデンスを概観すると、日本に おける婚姻形態の健康影響は必ずしも欧米の結 果と一致しているとは言えない。日本における 婚姻の健康影響は、健康アウトカム、対象者の年 齢や性別によって異なることが示唆された。

6. 居住形態

居住形態と健康の関連に関する研究は、欧米では主にパートナーとの同居の有無、独居の有無を中心に検討されてきた。しかし、わが国における居住に関する状況は欧米とは異なり、居住形態は子供・親との同居の有無を含めた居住形態と健康との関連についての研究が進められている。

6-1 全死亡

居住形態と全死亡の関連は、いくつかコホート研究により検討されているが、一貫した傾向は把握されていない(25, 26, 37, 43)。

(たとえば、JPHC 研究では 40-59 歳の地域住 民約9万人を対象に、1990年のベースライン時 の居住形態をもとにその後11年間追跡した結 果、男性では独居、親と同居、子供と同居、そ の他と同居は配偶者と同居と比較して死亡リス クが高く、配偶者と親と同居、配偶者と子供と 親と同居は配偶者とのみ同居と比較して死亡リ スクが低かった。一方、女性では親との同居は 配偶者とのみ同居と比較して死亡リスクが高い という結果であり、居住形態と死亡リスクの関 連は複雑で性差が顕著である(43)。Komo-Ise Study においては 47~77 歳の地域住民約 1 万人 を対象に、1999年のベースライン時の居住形態 をもとにその後7年間追跡した結果、男女とも に同居者が増えるほど死亡リスクが低下してい る傾向がみられた(37)。高齢者を対象にしたコ ホート研究の結果は、高齢者では中高年者とは 異なる健康影響がある可能性を示唆するもので あった(25, 26)。

6-2 がん (死亡・罹患)

がん死亡に関する検討は1件のみであった。 Komo-Ise Study においてがん死亡との関連を検 討した結果、男性では同居者数が一人増えるご とにがん死亡リスクは低下するが、女性では関連がみられていない(37)。がん罹患との関連に関する先行研究はなかった。

6-3 循環器疾患 (死亡·罹患)

循環器疾患死亡・罹患リスクに関する分析は、 前述の JACC 研究において実施されており、男女 で異なる結果が示されている。虚血性心疾患死 亡においては、男性では親と同居、その他と同居 は配偶者とのみ同居と比較して死亡リスクが高 いが、女性では独居あるいは親と同居は配偶者 とのみ同居と比較して死亡リスクが高い。虚血 性心疾患罹患に関しては、男性では関連が見ら れなかったが、女性では親と配偶者と同居、子供 と配偶者と同居、配偶者と親と子供と同居、子供 と同居は配偶者とのみ同居と比較して死亡リス クが高いという結果であった(43)。

Komo-Ise Study においては、循環器疾患死亡、脳卒中死亡、虚血性心疾患死亡のいずれにおいても男女とも関連がみられていない(37)。

6-4 自覚的健康感

1993 年から 2000 年にかけて 2 地区に居住する 47~77 歳の地域住民約5千人を追跡調査した Komo-Ise Study では、男女ともに同居者数が一人増えるごとに自覚的健康感が悪くなるリスクが低下する傾向であった。(16)。

6-5 精神健康

該当する研究は、高齢者を対象にした横断研究1件のみだった。65-74歳の地域住民約2千人を調査した結果、独居者の抑うつ傾向リスクは誰かと同居している人と比較して高かった(18)。(女性では統計的に有意な関連ではなかった)また、同じ研究で、男性では配偶者とだけ同居と比較して、配偶者以外の家族と同居、独居は抑うつ傾向リスク高く、女性では配偶者と配偶者以外の家族と同居、独居は抑うつ傾向リスク高い傾向がみられた(44)。

6-6 健康行動

該当するエビデンスはなかった。

6-7 まとめ

居住形態の健康影響に関するエビデンスは十分ではなく、結論には至らない。しかし、居住形態が健康になんらかの影響を及ぼしている傾向がうかがえる。また、居住形態の健康影響も男女で異なる可能性も示唆される。

E. 結論

本研究において実施したレビューの結果、日本人女性を対象とした健康の社会決定要因に関する検証はまだ十分とはいえないと考えられる。しかし、現時点において社会経済状況による死亡や罹患との関連についてはいくつかの大規模コホートから報告がされており、基本的に社会経済状況が悪いと死亡リスク、疾病罹患リスクが高い傾向がみられる。健康行動や精神健康に関する分析は限られており、健康格差発症メカニズムに関しての検証には至っていない。

また、多くの社会的健康決定要因の健康影響 において、顕著な性差がみられることには注意 が必要である。健康あるいは健康影響にみられ る性差を包括的に理解するためには、生物学的 性の影響に加えて、社会状況、社会的規範、社会 的価値観などを考慮し、男女を取り巻く社会的 環境の違いを踏まえた研究エビデンスを積み重 ねていくことが重要であると考える。欧米と異 なり、日本では「男性は外で働いて家計を維持 し、女性は家庭を守るべきである」という性別役 割分業規範 (男性稼ぎ手モデル) が依然として根 強く、女性の家庭生活、就労、社会経済状況、役 割など人生の様々な局面に影響を与えている。 このような社会的特徴は、女性の健康に直接的 にも間接的にも大きく影響している。したがっ て、女性の健康に関する社会的決定要因の把握 には、その背景にある性別役割分業規範の影響 を含めた理解が重要である。

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F. 健康危険情報 特記すべきことなし

G. 研究発表

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- H. 知的財産権の出願・登録状況 特記すべきことなし

Table1.	Studies	of Education	and	health	outco

me

Table1. Studies of Educatio	on and health outcome														
Author, published year	studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk						
All cause mortality Fujino Y et al. (2005) Prev Med. 40:444-451.	JACC study	16715 (men) 23284 (women)	40-79	Prospective cohort	153,184 <u>person years</u> 223,955 person years	Educational background (age:≦15 years, 16-17 years, ≧18 years)	All cause mortality	Age	RR=1.16 (95%CI: 1.08-1.25) for \leq 15 years vs \geq 18 years. RR=1.06 (95%CI: 0.97-1.16) for 16-17 years vs \geq 18 years. RR=1.26 (95%CI: 0.91-1.14-1.38) for \leq 15 years vs \geq 18 years. RR=1.04 (95%CI: 0.92-1.15) for 16-17 years vs \geq 18 years.						
ionjo K et al. (2014) Int J. ehav Med. 21(5):737-49	JACC study -	24460 (men) 32649 (women)	- 40-65	Prospective cohort	16 years (mean follow up period: 14.7 years)	Age at education completed (15 years and younger, 16-18 years old, 19 years and older, Missing)	All cause mortality	Age, marital status, occupation	Logistic estimate -0.135 for 16-18 years old vs 15 years and younger (p<0.05). Logistic estimate -0.283 for 19 years and older. vs 15 years and younger (p<0.05). Logistic estimate -0.106 for 16-18 years old vs 15 years and younger (p<0.05). Logistic estimate -0.18 for 19 years and older vs 15 years and younger (p<0.05).						
onjo K et al. (2015) J pidemiol Community ealth; 69;1012-1017.	JACC study	16692 (women)	40-59	Prospective cohort	20 years (mean follow up period; 17.7 years)	Education level (age of completed formal education) (15 years or younger, 16-18 years, 19 years or older)	All cause mortality (two period:1973-77, 1993-98)	Age, area	HR=0.86 (95%CI: 0.75 to 0.98) for 16-18 years vs 15 years or younger. HR=0.80 (95%CI: 0.64 to 0.99) for 19 years or older vs 15 years or younger.						
S et al. (2008) Eur J of blic Health. 5:466-472.	JPHC Cohort study -	18940 (men) 20288 (women)	- 40-59	Prospective cohort	13 years	Educational level (primary [junior high school], secondary [high school], tertiary [jr. college, vocational school, university or higher])	All cause mortality	Sex, age, Public Heealth Center area	HR=1.30 (95% CI, 01.09-1.54) for men with primary education vs tertiary. HR=1.05 (95% CI, 0.88-1.26) for men with secondary education vs tertiary. (p for trend <0.0001) HR=1.34 (95% CI: 1.02-1.78) for women with primary education vs tertiary. HR=1.04 (95% CI, 0.78-1.40) for women with secondary education vs tertiary.						
			35 years old and older						(p for trend 0.002) All ages HR=1.21 (95%CI: 0.90-1.64) for 15-17 yearas vs ≧ 18 years. HR=1.22 (95%CI: 0.85-1.76) for <15 years vs ≧ 18 years. (p for trend 0.28)						
		4301 (men)	35-59	-					The number of						
rokawa K et al. (2006) ropean J Epidemiol.	Jichi Medical School		60-	Prospective cohort	Mean follow-up	Educational level	All cause mortality	Age, educational level, employment status.	60 and elder HR=1.11 (95%CI: 0.78-1.59) for 15-17 years vs ≥ 18 years. HR=1.14 (95%CI: 0.77-1.70) for <15 years vs ≥ 18 years. (p for trend 0.54)						
641-651		6780 (women)	MS) cohort study		6780	6780	6780	6780	35 years old and older		period:9.17 years	(<15 years, 15≦; <18 years , ≧18 years)			All ages HR=1.49 (95%CI: 0.92-2.39) for 15-17 yearss vs \ge 18 years. HR=1.65 (95%CI: 0.99-2.74) for <15 years vs \ge 18 years. (p for trend 0.08)
															25.50
			60-						60 and elder HR=1.58 (95%CI: 0.84-2.99) for 15-17 yearas vs ≧ 18 years. HR=1.62 (95%CI: 0.86-3.05) for <15 years vs ≧ 18 years. (p for trend 0.23)						
shi N et al. (2008) Ann idemiol. 18:584-591.	The Life Span Study (LSS) cohort	12747 (men)	74≧ (in 1978)	Prospective cohort	23 years (1980.1.1~2003.12.31)	Education level (≦9 years, 10-12 years, ≧13 years)	All cause mortality	Age, BMI, smoking, DS02 radiation dose estimates, city	HR=1.23 (95%CI: 1.13-1.35) for ≤9 years men vs ≥13 years men. HR=1.13 (95%CI: 1.04-1.24) for 10-12 years men vs ≥13 years men. (p for trend <0.001) HR=1.31 (95%CI: 1.12-1.53) for ≤9 years men vs ≥13 years men.						
		20136 (women)			22 years (1981.1.1~2003.12.31)				HR=1.15 (5%Cf: 0.99-1.34) for 10-12 years men vs ≥ 13 years men. (p for trend <0.001)						
ino Y et al. (2005) ev Med. 40:444-451.	JACC study -	16715 (men)	40-79	Prospective cohort	153,184 person years	Educational background (age: ≦ 15 years, 16-17 years, ≧ 18 years)	All cancer mortality	Age	$\begin{split} RR=&1.17\ (95\%CI:\ 1.04-1.32)\ for\ \leqq 15\ years\ vs\ \geqq 18\ years.\\ RR=&1.06\ (95\%CI:\ 0.92-1.22)\ for\ 16-17\ years\ vs\ \geqq 18\ years. \end{split}$						
v Med. 40.444-451.		23284 (women)			223,955 person years	(age. = 13 years, 10-17 years, = 10 years)			RR=1.10 (95%CI: 0.93-1.30) for \leq 15 years vs \geq 18 years. RR=1.02 (95%CI: 0.84-1.23) for 16-17 years vs \geq 18 years. Logistic estimate -0.109 for 16-18 years old vs 15 years and younger.						
njo K et al. (2014) Int J. nav Med. 21(5):737-49	JACC study -	24460 (men) 32649	40-65	Prospective cohort	16 years (mean follow up period: 14.7 years)	Age at education completed (15 years and younger, 16-18 years old, 19 years and older, Missing)	All cancer mortality	Age, marital status, population size, proportion of aged population, sampling methods, proportion of college graduates (%)	Logistic estimate -0.191 for 19 years and older vs 15 years and younger (p<0.05). Logistic estimate 0.069 for 16-18 years old vs 15 years and younger.						
ing V et al. (2000) B		(women) 18746 (men)	>10			Educational healesman	Stomach Co.		Logistic estimate 0.028 for 19 years and older vs 15 years and younger. RR=0.90 (95%CI: 0.69-1.18) for 16-18 years vs \leq 15 years. RR=0.72 (95%CI: 0.50-1.04) for \geq 19 years vs \leq 15 years.						
jino Y et al. (2002) Prev ed. 35:121-127.	JACC study -	26184 (women)	≧ 18 (in 1949)	Prospective cohort	10 years (328,030 person years	Educational background) (age: ≦ 15 years, 16-18 years, ≧ 19 years)	Stomach Cancer mortality	Age	RR=0.89 (95%CI: 0.61-1.31) for 16-18 years vs \leq 15 years. RR=1.15 (95%CI: 0.61-2.20) for \geq 19 years vs \leq 15 years.						
S et al. (2008) Eur J of	IDVG C. h	18940 (men)	40.50	P	12	Educational level (primary [junior high school] , secondary [high	All		HR=1.22 (95% CI, 0.93-1.59) for women with primary education vs tertiary. HR=0.99 (95% CI, 0.75-1.32) for women with secondary education vs tertiary. (p for trend 0.026)						
blic Health. 5:466-472.	JPHC Cohort study	20288 (women)	40-59	Prospective cohort	13 years	school], tertiary [junior college or vocational school, and university or higher])	All cancer mortality	Sex, age, Public Heealth Center area	HR=1.31 (95% CI, 0.87-1.96) for women with primary education vs tertiary. HR=1.13 (95% CI, 0.74-1.72) for women with secondary education vs tertiary. (p for trend 0.108)						
irokawa K et al. (2006) 1ropean J Epidemiol.	Jichi Medical School	4301 (men)	- 35-	Prospective cohort	Mean follow-up perio		All cancer mortality	Age, educational level, employment status	HR=1.17(95%CI: 0.76 -1.79) for 15-17 yearas vs \ge 18 years. HR=1.08(95%CI: 0.64 -1.82) for 15 year and younger vs \ge 18 years. (p for trend 0.78)						
:641-651	(JMS) cohort study	6780 (women)	33	pecure consti	9.17 years	(<15 years, 15≦; <18 years, ≥18 years)		control of the	HR=1.57 (95%C1: 0.84-2.93) for 15-17 yearas vs \ge 18 years. HR=1.80 (95%C1: 0.891-3.56) for 15 year and younger vs \ge 18 years. (p for trend 0.11)						

Author, published year	studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
		12747 (men)	_		23 years (1980.1.1~2003.12.31)		All cancer mortality		HR=1.07 (95%CI: 0.94-1.23) for ≤9 years vs ≥13 years. HR=0.95 (95%CI: 0.83-1.09) for 10-12 years vs ≥13 years. (p for trend 0.14)
		20136 (women)			22 years (1981.1.1~2003.12.31)	-	An cancer mortality		HR=1.16 (95%CI: 0.90-1.48) for \le 9 years vs \ge 13 years. HR=1.09 (95%CI: 0.85-1.39) for 10-12 years vs \ge 13 years. (p for trend 0.15)
		12747 (men)	_		23 years (1980.1.1~2003.12.31)	_	Stomach cancer	_	HR=1.00 (95%CI: 0.74-1.36) for \le 9 years vs \ge 13 years. HR=1.04 (95%CI: 0.77-1.40) for 10-12 years vs \ge 13 years. (p for trend 0.94)
		20136 (women)	_		22 years (1981.1.1~2003.12.31)	-	mortality	orectal cancer	HR=0.83 (95%CI: 0.47-1.45) for \le 9 years vs \ge 13 years. HR=0.83 (95%CI: 0.48-1.45) for 10-12 years vs \ge 13 years. (p for trend 0.70)
		12747 (men)			23 years (1980.1.1~2003.12.31)	12.31)	Colorectal cancer		HR=0.88 (95%CI: 0.56-1.39) for ≤9 years vs ≥13 years. HR=1.03 (95%CI: 0.67-1.60) for 10-12 years vs ≥13 years. P for trend 0.48
Nishi N et al. (2008) Ann	The Life Span Study	20136 (women)		22 years (1981.1.1~2003.12.31) (p fo	HR=1.40 (95%CI: 0.61-3.23) for ≤9 years vs ≥13 years. HR=1.43 (95%CI: 0.62-3.28) for 10-12 years vs ≥13 years. (p for trend 0.75)				
Epidemiol. 18:584-591.	(LSS) cohort	12747 (men)	(in 1978)	Prospective cohort	23 years (1980.1.1~2003.12.31)	(≦9 years, 10-12 years, ≧13 years)		—Age, BMI, smoking, DS02 radiation dose estimates, city	HR=1.50 (95%CI: 1.11-2.04) for ≤9 years vs ≥13 years. HR=1.05 (95%CI: 0.77-1.42) for 10-12 years vs ≥13 years. (p for trend 0.002)
	•	20136 (women)	_		22 years (1981.1.1~2003.12.31)	1)	Liver cancer mortality		HR=1.70 (95%CI: 0.79-3.66) for \le 9 years vs \ge 13 years. HR=1.42 (95%CI: 0.66-3.06) for 10-12 years vs \ge 13 years. (p for trend 0.09)
		12747 (men)	_		23 years (1980.1.1~2003.12.31)		E Lung cancer mortality H		HR=1.04 (95%CI: 0.78-1.39) for ≤9 years vs ≥13 years. HR=0.87 (95%CI: 0.65-1.17) for 10-12 years vs ≥13 years. (p for trend 0.49)
	•	20136 (women)	_		22 years (1981.1.1~2003.12.31)			HR=1.30 (95%CI: 0.63 -2.70) for \leq 9 years vs \geq 13 years. HR=1.08 (95%CI: 0.52 -2.23) for 10 -12 years vs \geq 13 years. (p for trend 0.19)	
	•	20136 (women)	_		22 years (1981.1.1~2003.12.31)		Breast cancer mortality	y	HR=1.16 (95%CI: 0.51-2.63) for ≤9 years vs ≥13 years. HR=1.28 (95%CI: 0.59-2.81) for 10-12 years vs ≥13 years. (p for trend 0.94)
	•	12747 (men)	_		23 years (1980.1.1~2003.12.31)	_	Prostate cancer mortality	_	HR=3.21 (95%CI: 1.13-9.15) for \leq 9 years vs \geq 13 years. HR=1.89 (95%CI: 0.64-5.59) for 10-12 years vs \geq 13 years. (p for trend 0.01)
Kuwahara A et al. (2010).	JPHC Cohort study (among gastric cancer	522 (men)	40-59	Prospective cohort	16 years	Educational level (junior high school, high school,		Age at diagnosis	HR=1.06 (95%CI: 0.57-1.99) for high school vs college or higher. HR=1.26 (95%CI: 0.68-2.30) for jr high school vs college or higher.
Gastric Cancer. 13:222-230.	patients)	203 (women)				college or higher)	mortality	g	HR=3.32 (95%CI: 0.77-14.35) for high school vs college or higher. HR=2.45 (95%CI: 0.58-10.35) for jr high school vs college or higher.
Cancer morbility			40-79						HR=1.33 (95%CI: 0.90-1.97) for 16-18 years vs <16 years. HR=1.97 (95%CI: 1.19-3.26) for 18 years vs <16 years. (p for trend 0.010)
Fujino Y et al. (2008) Cancer Causes Control. 19:931-937.	JACC study	32646 (women)	40-79 who aged 18 years o above in 1949	Prospective cohort	13 years	level of education (<16, 16-18, 18< years)	Breast cancer incidence br	Age, BMI, alcohol, smoking, stress, hours of walking, hours of exercise, attendance at breast cancer screening program, breast self-examination, number of pregnancies, number of deliveries, age at first delivery, age at menarche, age at menopause	HR=0.86 (95%CI: 0.49-1.53) for 16-18 years vs <16 years.
			40-79 who aged under 18 years in 1949					пспораве	HR=1.90 (95%CI: 1.07-3.38) for 16-18 years vs <16 years. HR=2.51 (95%CI: 1.23-5.12) for 18< years vs <16 years. (p for trend 0.009)
Ito S et al. (2008) Eur J of	Thursday.	18940 (men)				Educational level (primary [junior high school], secondary [high	.,,		HR=1.04 (95% CI, 0.87-1.24) for women with primary education vs tertiary. HR=0.98 (95% CI, 0.82-1.18) for women with secondary education vs tertiary. (p for trend 0.454)
Public Health. 5:466-472.	JPHC Cohort study	20288 (women)	40-59	Prospective cohort	12 years	school, tertiary [junior college or vocational school, and university or higher])	h All cancer incidence Sex, age, Public He	Sex, age, Public Heealth Center area	HR=1.02 (95% CI, 0.83-1.27) for women with primary education vs tertiary. HR=1.02 (95% CI, 0.81-1.27) for women with secondary education vs tertiary. (p for trend 0.832)

Author, published year	studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
		12747 (men)			23 years (1980.1.1~2003.12.31)	<u>_</u>	All cancer incidence		HR=1.20 (95%CI: 1.07+1.35) for ≤9 years vs ≥ 13 years. HR=1.10 (95%CI: 0.99+1.23) for 10-12 years vs ≥ 13 years. (p for trend 0.001)
		20136 (women)			22 years (1981.1.1~2003.12.31)			_	HR=1.14 (95%CI: 0.95-1.37) for ≤9 years vs ≥ 13 years. HR=1.10 (95%CI: 0.92-1.31) for 10 -12 years vs ≥ 13 years. (p for trend 0.18)
		12747 (men)			23 years (1980.1.1~2003.12.31)	_	Stomach cancer		HR=1.07 (95%CT: 0.86-1.34) for ≤9 years vs ≥ 13 years. HR=1.03 (95%CT: 0.83-1.28) for 10 -12 years vs ≥ 13 years. (p for trend 0.52)
	·	20136 (women)			22 years (1981.1.1~2003.12.31)	_	incidence		HR=0.73 (95%CI: 0.51-1.06) for ≤9 years vs ≥ 13 years. HR=0.65 (95%CI: 0.45-0.94) for 10 -12 years vs ≥ 13 years. (p for trend 0.86)
	(me 201 201 (worn miol. 18:584-591. (LSS) cohort 127 (me 201 (me 2	12747 (men)			23 years (1980.1.1~2003.12.31)	_	Colorectal cancer	_	HR=1.08 (95%CI: 0.79-1.48) for ≤9 years vs ≥ 13 years. HR=1.26 (95%CI: 0.94-1.70) for 10-12 years vs ≥ 13 years. (p for trend 0.93)
Nichi N et al. (2008) Ann		20136 (women)	≦74		22 years (1981.1.1~2003.12.31)	Education level	incidence	Age, BMI, smoking, DS02 radiation dose estimates, city	HR=1.30 (95%CI: 0.75-2.26) for ≤9 years vs ≥13 years. HR=1.43 (95%CI: 0.83-2.46) for 10-12 years vs ≥13 years. (p for trend 0.90) HR=1.60 (95%CI: 0.18-2.17) for ≤9 years vs ≥13 years. HR=1.14 (95%CI: 0.85-1.54) for 10-12 years vs ≥13 years. (p for trend <0.001)
Epidemiol. 18:584-591.		12747 (men)	(in 1978)	Prospective cohort	23 years (1980.1.1~2003.12.31)	$(\leq 9 \text{ years}, 10\text{-}12 \text{ years}, \geq 13 \text{ years})$			
		20136 (women)			22 years (1981.1.1~2003.12.31)	=	Liver cancer incidence		HR=1.07 (95%CI: 0.57-2.02) for ≤9 years vs ≥13 years. HR=0.94 (95%CI: 0.51-1.75) for 10-12 years vs ≥13 years.
		12747 (men)			23 years (1980.1.1~2003.12.3	_		<u> </u>	(p for trend 0.43) HR=1.24 (65%CT: 0.91-1.70) for ≤9 years vs ≥13 years. HR=1.09 (95%CT: 0.80-1.49) for 10-12 years vs ≥13 years.
	2013 (wome 2013	20136 (women)			22 years (1981.1.1~2003.12.31)	31)	Lung cancer incidence		(p for trend 0.13) HR=1.35 (95%CI: 0.70-2.59) for ≤9 years vs ≥ 13 years. HR=0.94 (95%CI: 0.49-1.81) for 10-12 years vs ≥ 13 years.
		20136 (women)			22 years (1981.1.1~2003.12.31)		Breast cancer incidence		(n for trend 0.03) HR=1.09 (9% Ct: 0.69-1.71) for ≤9 years vs ≥13 years. HR=1.27 (95% Ct: 0.83-1.95) for 10-12 years vs ≥13 years.
		12747 (men)			23 years (1980.1.1~2003.12.3		Prostate cancer incidence	-	(p for trend 0.56) HR=1.59 (95%CI: 0.98-2.58) for ≤9 years vs ≥ 13 years. HR=1.10 (95%CI: 0.67-1.83) for 10-12 years vs ≥ 13 years. (p for trend 0.56)
CVD mortality									(p for frend 0.56)
		16715 (men)			153,184 person years		Circulatory system		RR=1.06 (95%CI: 0.93-1.21) for \leq 15 years vs \geq 18 years. RR=1.01 (95%CI: 0.86-1.18) for 16-17 years vs \geq 18 years.
		23284 (women)			223,955 person years	_	diseases mortality	— Age	RR=1.27 (95%CI: 1.08-1.50) for \leq 15 years vs \geq 18 years. RR=1.05 (95%CI: 0.87-1.27) for 16-17 years vs \geq 18 years.
Fujino Y et al. (2005) Prev Med. 40:444-451.	JACC study	16715 (men)	40-79	Prospective cohort	153,184 person years	Educational background	Ischemic heart disease		RR=0.77 (95%CI: 0.58-1.01) for \leq 15 years vs \geq 18 years. RR=0.90 (95%CI: 0.65-1.24) for 16-17 years vs \geq 18 years.
		23284 (women)		•	223,955 person years	(age:≦15 years, 16-17 years, ≧18 years)		<u>-</u>	RR=1.01 (95%CI: 0.70-1.44) for \leq 15 years vs \geq 18 years. RR=0.84 (95%CI: 0.54-1.30) for 16-17 years vs \geq 18 years.
		16715 (men)			153,184 person years	_	Cerebrovascular disease	:	RR=1.23 (95%C1: 1.01-1.50) for \leq 15 years vs \geq 18 years. RR=1.05 (95%C1: 0.82-1.34) for 16-17 years vs \geq 18 years.
		23284 (women)			223,955 person years				RR=1.44 (95%CI: 1.13-1.83) for \le 15 years vs \ge 18 years. RR=1.03 (95%CI: 0.77-1.38) for 16-17 years vs \ge 18 years. Logistic estimate -0.110 for 16-18 years old vs 15 years and younger.
Honjo K et al. (2014) Int J. Behav Med. 21(5):737-49	JACC study	24460 (men)	40-65	Prospective cohort	16 years (mean follow up	Age at education completed (15 years and younger, 16-18 years old, 19 years	CVD mortality	Age, marital status, population size, proportion of aged population, sampling methods, proportion of college	Logistic estimate -0.367 for 19 years and older vs 15 years and younger (p<0.05). Logistic estimate -0.229 for 16-18 years old vs 15 years and younger (p<0.05).
		32649 (women)			period: 14.7 years)	and older, Missing)		graduates (%)	Logistic estimate -0.471 for 19 years and older vs 15 years and younger (p<0.05). HR=1.70 (95% CI: 1.14-2.52) for men with primary education vs tertiary.
ito S et al. (2008) Eur J of	JPHC Cohort study	18940 (men)	40-59	Prospective cohort	13 years	Educational level (primary [junior high school] , secondary [high school], tertiary [junior college or	CVD mortality	Sex, age, Public Heealth Center area	HR=1.28 (95% CI: 0.85-1.94) for men with secondary education vs tertiary. (p for trend = 0.001)
Public Health. 5:466-472.		20288 (women)			y	vocational school, and university or higher])			HR=1.120 (95% CI: 0.68-2.12) for women with primary education vs tertiary. HR=0.87 (95% CI: 0.47-1.60) for women with secondary education vs tertiary. (p for trend = 0.17)
Hirokawa K et al. (2006)	Jichi Medical School	4301 (men)	25	Prospective cohort	Mean follow-up perio		CVD mortality	Age, educational level, employment status	HR=2.36 (95%CI: 1.09-1.79) for 15-17 yearas $vs \ge 18$ years. HR=3.26(95%CI: 1.43-7.48) for <15 yearas $vs \ge 18$ years. (p for trend 0.00)
European J Epidemiol. 21:641-651 Jichi Medical School (JMS) cohort study		r rospective conort	9.17 years	(<15 years, $15 \le$; <18 years, \ge 18 years)	C+D mortality	лде, сиисаконан есчеt, етрюутет мания	HR=1.11 (95%CI: 0.49-2.50) for 15-17 yearas vs ≧ 18 years. HR=1.42 (95%CI: 0.63-3.20) for <15 yearas vs ≧ 18 years. (p for trend 0.32)		

Author, published year	studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
CVD morbility Ito S et al. (2008) Eur J of Public Health. 5:466-472.	JPHC Cohort study -	18940 (men) 20288 (women)	- 40-59	Prospective cohort	12 years	Educational level (primary [junior high school], secondary [high school], tertiary [junior college or vocational school, and university or higher])	CVD incidence	Sex, age, Public Heealth Center area	HR=0.92 (95% CI: 0.73-1.16) for men with primary education vs tertiary. HR=0.94 (95% CI: 0.74-1.19) for men with secondary education vs tertiary. (p for trend 0.492) HR=1.27 (95% CI: 0.87-1.86) for women with primary education vs tertiary. HR=0.85 (95% CI: 0.57-1.28) for women with secondary education vs tertiary.
							Total stroke incidence		(p for trend 0.007) HR=1.63 (95%CI: 1.29-2.06) for junior high school education vs high school education. HR=1.41 (95%CI: 0.96-2.05) for college or higher education vs high school education. Among people who are not working (m=5560) HR=2.21 (95%CI: 1.45-3.37) for junior high school education vs high school education. HR=1.08 (95%CI: 0.47-2.48) for college or higher education vs high school education. Among people who are working (m=14744) HR=1.46 (95%CI: 1.09-1.94) for junior high school education vs high school education.
							Intraparenchymal hemorrhage	_	HR=1.13 (95%CI: 0.78-1.66) for junior high school education vs high school education. HR=0.86 (95%CI: 0.43-1.72) for college or higher education vs high school education. Among people who are not working (m=5560) HR=1.33 (95%CI: 0.70-2.50) for junior high school education vs high school education. HR=NA for college or higher education vs high school education. Among people who are working (m=14744) HR=1.02 (95%CI: 0.62-1.66) for junior high school education vs high school education. HR=1.28 (95%CI: 0.62-2.66) for college or higher education vs high school education.
Honjo K et al. (2008) Stroke ;39:2886-2890.	JPHC Cohort study	20543 (women)	40-59	Prospective cohort	12 years	Educational level (junior high school education, high school education, and any college or higher education)	Subarachnoid hemorrhage incidence	Age, area	HR=2.20 (95%CI: 1.34-3.60) for junior high school education vs high school education. HR=2.20 (95%CI: 1.08-4.48) for college or higher education vs high school education. Among people who are not working (n=5560) HR=2.22 (95%CI: 0.90-5.48) for junior high school education vs high school education. HR=1.40 (95%CI: 0.28-6.93) for college or higher education vs high school education. Among people who are working (n=14744) HR=2.36 (95%CI: 1.29-4.32) for junior high school education vs high school education. HR=2.67 (95%CI: 1.18, 6.04) for college or higher education vs high school education.
							Ischemic stroke incidence		HR=1.90 (95%CI: 1.30-2.76) for junior high school education vs high school education. HR=1.60 (95%CI: 0.87-2.93) for college or higher education vs high school education. Among people who are not working (m-5560) HR=3.98 (95%CI: 1.81-8.77) for junior high school education vs high school education. HR=3.04 (95%CI: 0.97-9.60) for college or higher education vs high school education. Among people who are working (m=14744) HR=1.44 (95%CI: 0.92-2.25) for junior high school education vs high school education. HR=1.16 (95%CI: 0.54-2.46) for college or higher education vs high school education.
							Coronary heart disease	_	HR=0.79 (95%CI: 0.45-1.41) for junior high school education vs high school education. HR=0.58 (95%CI: 0.17-1.95) for college or higher education vs high school education. Among people who are not working (n=5560) HR=0.66 (95%CI: 0.27-1.60) for junior high school education vs high school education. HR=NA for college or higher education vs high school education. Among people who are working (n=14744) HR=1.13 (95%CI: 0.50-2.57) for junior high school education vs high school education. HR=1.15 (95%CI: 0.31-4.32) for college or higher education vs high school education.
Honjo K et al. (2012) J Epidemiol. 22:324-330.	JPHC Cohort	9317 (women)	40-59	Prospective cohort	16 years	Education level (junior high school, high school, junior college/ yocational school/ college)	Stroke incidence	Age, area	HR=0.56 (95%CI: 0.39-0.80) for high school education vs junior high school education. HR=0.99 (95%CI: 0.0.61-1.58) for college graduates vs junior high school education.
Honjo K et al. (2014). Stroke 45:2592-2598.	JPHC Cohort	14742 (women)	40-59	Prospective cohort	20 years	Education level (junior high school, high school, junior college/ yocational school/ college)	Stroke incidence	Age, marital status, geographical area	HR=0.69 (95%CI: 0.57-0.84) for high school vs junior high school HR=0.81 (95%CI: 0.59-1.10) for junior college/vocational school/college vs junior high school
Self-rated Health Nishi N et al. (2004) Soc Sci Med. 58:1159-1170.	= -	968 (men) 393 (women)	35-64	Cross sectional (Civil servants working takarazuka City)	in —	Education (University, High school, junior high school)	Poor self-rated health (0: excellent, very good or good, 1: fair or poor)	Age	OR=1.18 (95%CI: 0.89-1.55) for high school vs university. OR=2.09 (95%CI: 1.28-3.42) for junior high school vs university. (p for trend 001) OR=0.96 (95%CI: 0.60-1.53) for high school vs university. OR=1.59 (95%CI: 0.77-3.28) for junior high school vs university. (p for trend 0.38)
	-	1314 (men) 1673 (women)	-				Self-rated physical health		Educational attainment OR=1.07 (95%CI: 0.82-1.41) for 12 years vs 13 years or longer. OR=1.21 (95%CI: 0.89-1.64) for 11 years or shorter vs 13 years or longer. (p for trend n.s.) Educational attainment OR=1.15 (95%CI: 0.89-1.49) for 12 years vs 13 years or longer. OR=1.63 (95%CI: 2.12-2.21) for 11 years or shorter vs 13 years or longer.
Honjo K et al. (2006). J Epidemiol. 146:223-232.	World Mental Health Japan (WMHJ) survey	601 (women)	≥ 20	Cross sectional	_	Educational attainment (13 years or longer, 12 years, 11 years or shorter)	(asked to rate general physical health on a five-point scale; "good physical health"="excellent" or "very good" or "good"	Age, marital status, area	(p for trend 0.02) By employment situation (Housewife) OR=1.30 (95%CI: 0.79-2.13) for 12 years vs 13 years or longer. OR=1.54 (95%CI: 0.87-2.75) for 11 years or shorter vs 13 years or longer. (p for trend 0.22)
		1010	"very good" or "good", "poor physical health"="fair" or "poor")		By employment situation (Worker) OR=1.19 (95%CI: 0.77-1.46) for 12 years vs 13 years or longer. OR=1.72 (95%CI: 1.19-2.50) for 11 years or shorter vs 13 years or longer. (p for trend 0.14)				
	-	62 (women)	_						By employment situation (Retired) OR=1.16 (95%CI: 0.22-6.01) for 12 years vs 13 years or longer. OR=1.00 (95%CI: 0.14-7.02) for 11 years or shorter vs 13 years or longer. (p for trend n.s.)

Author, published year	studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
Wang Net al. (2005) J Epidemiol. 5:155-162.	the Komo-Ise study -	4523 (men)	 47-77	Prospective cohort	7 years	More than high school vs high school or less	Self-reported fair or poor health	Age, area	OR=0.97 (95%CI: 0.83-1.13) for high school or less vs more than high school.
,		5127 (women)							$OR = 1.12\ (95\% CI: 0.95\text{-}1.31)\ for\ high\ school\ or\ less\ vs\ more\ than\ high\ school.$
Miyake Y et al.(2012). BMC Psychiatry. 12:117.	Kyushu Okinawa Maternal and Child Health Study (KOMCHS)	1741 (women)	NA (age, years, mean±SI 31.2±4.4)	D: Cross sectional	_	Education (<13years, 13-14 years, ≧15years)	Antenatal depression (CES-D score ≥16)	Age, gestation, region of residence, family structure, history of depression, family history of depression, smoking, and secondhand smoke exposure at home and at work	OR=1.00 (95% CI: 0.73-1.37) for 13-14 years vs 12 and less OR=0.72(95% CI: 0.52-0.99) for 15 and more vs 12 and less
Psychological distress/depre	ession								Educational attainment
	-	1314 (men)	_						OR=1.11 (95%CT: 0.84-1.48) for 12 years vs 13 years or longer. OR=1.29 (95%CT: 0.95-1.76) for 11 years or shorter vs 13 years or longer. (p for trend n.s.)
	-	1673 (women)	_				Self-rated mental health (asked to rate general mental health on a five-		Educational attainment OR=1.22 (95%CI: 0.95-1.58) for 12 years vs 13 years or longer. OR=1.46 (95%CI: 1.08-1.97) for 11 years or shorter vs 13 years or longer. (p for trend 0.04)
Honjo K et al. (2006). J Epidemiol. 146:223-232.	World Mental Health Japan (WMHJ) survey	601 (women)	≧20	Cross sectional	_	Educational attainment (13 years or longer, 12 years, 11 years or shorter)	point scale; "good mental health"="excellent" or "very good" or "good",	Age, marital status, area	By employment situation (Housewife) OR=1.28 (95%CI: 0.77-2.13) for 12 years vs 13 years or longer. OR=1.42 (95%CI: 0.78-2.58) for 11 years or shorter vs 13 years or longer. (p for trend 0.20)
	<u>-</u>	1010 (women)	_				"poor mental health"="fair" or "poor")		By employment situation (Worker) OR=1.21 (95%CI: 0.90-1.65) for 12 years vs 13 years or longer. OR=1.43 (95%CI: 1.00-2.07) for 11 years or shorter vs 13 years or longer. (p for trend 0.55)
		62 (women)							By employment situation (Retired) OR=1.13 (95%CI: 0.21-6.308) for 12 years vs 13 years or longer. OR=1.13 (95%CI: 0.21-9.98) for 11 years or shorter vs 13 years or longer. (p for trend test n.s.)
Ochi M et al. (2014) BMC Public Health. 14:359.	World Mental Health _ Japan (WMHJ) survey	734 (men) 948 (women)	— ≧20	Cross sectional	_	Education (0-11 years, 12 years, 13-15 years, 16- years)	Depression (WHO-CIDI 3.0)	Age, parental education, childhood characteristics (parental mental illness, childhood physical illness), adulthood annual household income	OR=1.05 (95%CI: 0.35-3.18) for 12 years vs 0-11 years. OR=1.59 (95%CI: 0.45-5.65) for 13-15 years vs 0-11 years. OR=3.14 (95%CI: 1.08-9.14) for 16- years vs 0-11 years. OR=2.39 (95%CI: 1.19-4.81) for 12 years vs 0-11 years. OR=1.95 (95%CI: 0.86-4.46) for 13-15 years vs 0-11 years. OR=1.95 (95%CI: 0.92-6.49) for 16- years vs 0-11 years.
Sakurai K et al. (2010) Soc		574 (men)	20-74	Cross sectional (Nationally representative	ve	Education (university graduates or higher, high	Psychological distress (measured by Japanese		OR=1.58 (95%CI: 1.00-2.52) for high school/technical college/two-year colleage vs university graduates. OR=2.19 (95%CI:.11-4.32) for junior high school or less vs university graduates. (p for trend 0.016)
Sci Med. 70:1832-1839.	_ -	621 (women)		community-based random sample of residents in Japan)	_	school/technical college/two-year colleage, junior high school or less)	version of the K6 scale. K6≧5=psychological distress)	Demographic variables(age, marital status)	OR=1.04 (95%CI: 0.58-1.86) for high school/technical college/two-year colleage vs university graduates. OR=1.62 (95%CI: 0.73-3.63) for junior high school or less vs university graduates. (p for trend 0.255)
Fushimi M et al. (2013) Community Ment Health J.	Northern Japan Occupational Health Promotion Centers Collaboration Study for	1069 (men)	NA	Cross sectional	_	Education (compulsory/senior hight school, some tertiary	Depressive Symptoms (CES-D≧16)	Age, employment status, employee type, job category, working hours per day, sleep duration, smoking	OR=1.07 (95%CI: 0.73-1.56) for some tertiary education vs compulsory/senior hight school. OR=0.98 (95%CI: 0.64-1.49) for graduate degree or higher vs compulsory/senior hight school.
49:236-242.	Mental Health(NOCS- MH)	1151 (women)				education, graduate degree or higher)	(CE3-D = 10)	behavior, alcohol consumption	OR=0.82 (95%CI: 0.58-1.14) for some tertiary education vs compulsory/senior hight school. OR=0.88 (95%CI: 0.46-1.65) for graduate degree or higher vs compulsory/senior hight school.
Kikuchi H et al. (2013) Psychogeriatrics. 13:229-236		971 (men)	65-74	Cross sectional (Community residents living in three Japanese municipallities; Bunkyo		Education attainment (college degree or higher(≧13 years), up to high	Psychological distress (K6≧5)	Age group, area, living arrangement, employmen status, physical limitation (Japanese version of eight-item short-	OR=1.33 (95%CI: 0.93-1.89) for up to high school vs college degree or higher.
		923 (women)		ward, Fuchu city, Oyam town)		school (<13 years))	(10=0)	form health survey)	OR=1,20 (95%CI: 0.82-1.75) for up to high school vs college degree or higher.
Smoking		968							OR=1.96 (95%CI: 1.47-2.60) for high school vs university.
Nishi N et al. (2004) Soc Sci Med. 58:1159-1170.		968 (men)	35-64	Cross sectional (Civil servants working Takarazuka City)	in —	Education (university, high school, junior high school)	Smoking (0—non-and ex- smoker, 1—current smoker)	Age	OR=2.07 (95%CI: 0.98-4.34) for junior high school vs university. (p for trend <0.001) OR=3.44 (95%CI: 1.53-7.73) for high school vs university.
		(women)							OR=5.48 (95%CI: 1.55-19.39) for junior high school vs university. (p for trend 0.002)
Hu L et al. (2007) J Occup Health. 49(6);443-52.	Annual survey on health, lifestyle habits and work stress among	707 (men)	20-64	Cross sectional	_	Education (elementary / junior high school, high school,	Smoking (current smoker)	Unadjusted	OR=1.90 (95%CI: 0.81-4.50) for elementary / junior high school vs university. OR=1.89 (95%CI: 1.30-2.64) for high school vs university. OR=1.54 (95%CI: 0.89-2.68) for junior college vs university.
	civil servants	598 (women)				Junior college, university)	(and the same of		OR=1.68 (95%CI: 0.28-9.66) for elementary / junior high school vs university. OR=0.58 (95%CI: 0.14-2.42) for high school vs university. OR=0.72 (95%CI: 0.24-2.18) for junior college vs university.

Author, published year	studycohort name	Sample size	Age at	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
Alcohol intake		SIEC	chuy		years				
Nishi N et al. (2004) Soc Sci Med. 58:1159-1170.	- -	968 (men) 393 (women)	35-64	Cross sectional (Civil servants working Takarazuka City)	in —	Education (university, high school, junior high school)	Alcohol drinking (0—three times a week or less, 1—almost daily or daily)		OR=0.83 (95%CI: 0.63-1.10) for high school vs university. OR=0.80 (95%CI: 0.39-1.61) for junior high school vs university. (p for trend 0.21) OR=2.42 (95%CI: 1.29-4.53) for high school vs university. OR=1.20 (95%CI: 0.29-4.91) for junior high school vs university. (p for trend 0.06)
Table2. Income and health	factors								
Author, published year	Studycohort name	Sample	Age at entry	Study design	Follow-up vears	Measures	Outcome	Adjusted variables	Relative risk
All cause mortality		Size	chuy		years				
Cancer mortality									
Cancer morbility									
CVD mortality									
CVD morbility									
Self-rated Health Honjo K et al. (2006). J Epidemiol. 146:223-232.	World Mental Health Japan (WMHJ) survey -	1314 (men) 1673 (women) 601 (women) 1010 (women)	≥ 20	Cross sectional	-	Adjusted household income (highest, 2nd highest, 2nd lowest, Lowest)	Self-rated physical health (asked to rate general physical health on a five-point scale; "good physical health"="excellent" or "very good" or "good", "poor physical health"="fair" or "poor")	Age, marital status, area	Adjusted household income model OR=0.90 (95%C1: 0.65-1.25) for 2nd highest vs highest. OR=1.04 (95%C1: 0.78-1.57) for 2nd lowest vs highest. OR=0.92 (95%C1: 0.66-1.28) for lowest vs highest. (p for trend n.s.) Adjusted household income model OR=1.02 (95%C1: 0.71-1.44) for 2nd highest vs highest. OR=1.38 (95%C1: 0.71-1.44) for 2nd highest vs highest. OR=1.57 (95%C1: 1.14-2.17) for 2nd lowest vs highest. (p for trend -0.001) By employment situation (Housewife) OR=1.26 (95%C1: 0.64-2.47) for 2nd highest vs highest. OR=1.10 (95%C1: 0.64-2.47) for 2nd highest vs highest. OR=1.58 (95%C1: 0.64-2.47) for 2nd highest vs highest. OR=1.59 (95%C1: 0.59-2.03) for 2nd lowest vs highest. (p for trend 0.13) By employment situation (Worker) OR=0.91 (95%C1: 0.59-1.38) for 2nd highest vs highest. OR=1.59 (95%C1: 0.59-1.39) for 2nd highest vs highest. OR=1.59 (95%C1: 0.50-1.39) for 2nd highest vs highest. OR=1.57 (95%C1: 1.05-2.30) for lowest vs highest. OR=1.57 (95%C1: 1.05-2.30) for 2nd lowest vs highest. OR=1.57 (95%C1: 1.05-2.30) for 2nd lowest vs highest. OR=1.57 (95%C1: 1.05-2.30) for 3nd highest vs highest.
Wang Net al. (2005) J Epidemiol. 5:155-162.	the Komo-Ise study -	2542 (men) 2634 (women)	44-77	Prospective cohort	7 years	Household income	Self-reported fair or poor health	Age, area	OR=1.41 (95%CI: 1.15-1.73) for 3.00 to 4.99 vs 10.00+. OR=1.36 (95%CI: 1.10-1.69) for 5.00 to 6.99 vs 10.00+. OR=1.21 (95%CI: 0.97-1.49) for 7.00 to 9.99 vs 10.00+. (p for trend <0.0001) OR=1.56 (95%CI:1.27-96) for less than 3.00 vs 10.00+ (million yen/year). OR=1.45 (95%CI:1.17-1.79) for 3.00 to 4.99 vs 10.00+. OR=1.57 (95%CI: 1.22-1.92) for 5.00 to 6.99 vs 10.00+. OR=1.27 (95%CI: 1.01-1.58) for 7.00 to 9.99 vs 10.00+. (p for trend <0.0001)
Psychological distress/depr	ession								
Fukuda Y et al. (2005) BMC Public Health	The Comprehensive Survey of the Living Conditions of People on – Health and Welfare (2001)	20030 (men) 21076 (women)	25-59	Cross sectional	-	Annual household income before tax, including benefits and inheritance (income quintile)	Stress (question: "Do you have any stress or worries in your daily life?" ansews: "yes" defined as being stressed.)	Age,marital status,occupation,per capita income, unemployment(%)	OR=1.10 (95%CI: 0.00-1.20) for 4th vs 5th. OR=1.07 (95%CI: 0.97-1.17) for 3th vs 5th. OR=1.09 (95%CI: 0.99-1.20) for 2th vs 5th. OR=1.15 (95%CI: 0.10-1.27) for 1th vs 5th. OR=1.16 (95%CI: 0.10-1.27) for 1th vs 5th. OR=1.10 (95%CI: 0.10-1.22) for 3th vs 5th. OR=1.14 (95%CI: 1.01-1.22) for 2th vs 5th. OR=1.16 (95%CI: 1.01-1.26) for 2th vs 5th. OR=1.26 (95%CI: 1.14-1.39) for 1th vs 5th.
Sakurai K et al. (2010) Soc Sci Med. 70:1832-1839.	<u> </u>	574 (men) 621 (men)	20-74	Cross sectional (Nationally representative community-based random sample of residents in Japan)	ve	Household income (>10 million yen per year, 5-9.99 milion yen per year, 2-4.99 million yen per year, <2 million yen per year, unknown)	Psychological distress (measured by Japanese version of the K6 scale. K6≧5=psychological distress)	Demographic variables (age, marital status)	OR=1.36 (95%CI: 0.64-2.91) for 5-9.99 milion yen per year vs >10 million yen per year. OR=2.03 (95%CI: 0.90-4.58) for 2-4.99 million yen per year vs >10 million yen per year. OR=1.26 (95%CI: 0.73-5.75) for <2 million yen per year vs >10 million yen per year. OR=1.24 (95%CI: 0.54-2.82) for unknown vs >10 million yen per year. (p for trend 0.001) OR=0.96 (95%CI: 0.52-1.78) for 5-9.99 milion yen per year vs >10 million yen per year. OR=0.63 (95%CI: 0.33-1.20) for 2-4.99 million yen per year vs >10 million yen per year. OR=0.66 (95%CI: 0.44-2.56) for <2 million yen per year vs >10 million yen per year. OR=0.56 (95%CI: 0.29-1.09) for unknown vs >10 million yen per year. (p for trend 0.325)

Author, published year	studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
	_	1314 (men)	_				Self-rated mental health(asked to rate general mental health on a five-point scale; "good mental health"="excellent" or "very good" or "good", "poor mental health"="fair" or "poor")	Age, marital status, area	Adjusted household income model OR=0.86 (95%CI: 0.61-1.21) for 2nd highest vs highest. OR=1.07 (95%CI: 0.75-1.53) for 2nd lowest vs highest. OR=1.11 (95%CI: 0.80-1.55) for lowest vs highest. (p for trend n.s.)
		1673 (women)	_						Adjusted household income model OR=0.98 (95%CI: 0.69-1.39) for 2nd highest vs highest. OR=1.11 (95%CI: 0.80-1.56) for 2nd lowest vs highest. OR=1.14 (95%CI: 0.83-1.56) for lowest vs highest. (p for trend 0.004)
Honjo K et al. (2006). J Epidemiol. 146:223-232.		601 (women)	≧20	Cross sectional	_	Adjusted household income (highest, 2nd highest, 2nd lowest, Lowest)			By employment situation (Housewife) OR=0.84 (95%CI: 0.43-1.60) for 2nd highest vs highest. OR=0.81 (95%CI: 0.44-1.50) for 2nd lowest vs highest. OR=0.82 (95%CI: 0.45-1.49) for lowest vs highest. (p for trend n.s.)
		1010 (women)	_						By employment situation (Worker) OR=1.00 (95%CI: 0.66-1.52) for 2nd highest vs highest. OR=1.39 (95%CI: 0.90-2.13) for 2nd lowest vs highest. OR=1.39 (95%CI: 0.94-2.05) for lowest vs highest. (p for trend 0.04)
		62 (women)							By employment situation (Retired) NA
Ochi M et al. (2014) BMC Public Health. 14:359.	World Mental Health	734 (men)	— ≧20	Cross sectional	_	Annual household income (<3 million yen, 3- < 10 million yen, 10+ million	Depression	Age, parental education, childhood characteristics (parental mental illness, childhood physical illness), adulthood	OR=0.91 (95%CI: 0.39-2.09) for 3- < 10 million yen vs < 3 million yen. OR=0.79 (95%CI: 0.31-2.02) for 10+ million yen vs < 3 million yen.
rubic Heatii. 14.339.	Japan (WMHJ) survey	948 (women)	= 20	Closs sectional		yen)	(WHO-CIDI 3.0)	education attainment	$ OR = 0.94 \ (95\% \ CI: 0.60-1.47) \ for \ 3-<10 \ million \ yen \ vs < 3 \ million \ yen. $ $ OR = 1.12 \ (95\% \ CI: 0.59-2.14) \ for \ 10+ \ million \ yen \ vs < 3 \ million \ yen. $
Miyake Y et al.(2012). BMC Psychiatry. 12:117.	Kyushu Okinawa Maternal and Child Health Study (KOMCHS)	1741 (women)	NA (age, years, mean± 31.2±4.4)	SD: Cross sectional	-	Household income (< 4,000,000 yen/year, 4,000,000-5,999,999 yen/year, >6,000,000 yen/year)	Antenatal depression (CES-D score ≥16)	Age, gestation, region of residence, family structure, history of depression, family history of depression, smoking, and secondhand smoke exposure at home and at work	OR=0.89 (95%CI: 0.67-1.19) for 4,000,000-5,999,999 yen/year vs 4,000,000 yen/year. OR=0.66 (95%CI: 0.47-0.92) for >6,000,000 yen/year vs 4,000,000 yen/year.
Smoking									
Fukuda Y et al. (2005) BMC	The Comprehensive Survey of the Living	20030 (men)	_			Annual household income before tax, including	Current smoker:"smoke	e Age,marital status,occupation,per capita income,	OR=1.11 (95%CI: 1.01-1.21) for 4th vs 5th (highest). OR=1.12 (95%CI: 1.02-1.23) for 3rd vs 5th (highest). OR=1.30 (95%CI: 1.18-1.43) for 2nd vs 5th (highest). OR=1.29 (95%CI: 1.17-1.43) for 1st (lowest) vs 5th (highest).
Fukuda Y et al. (2005) BMC Conference of People on Health Health and Welfare (2001)	21076 (women)	25-59	Cross sectional	_	benefits and inheritance (income quintile)	on occasion but not every day.	unemployment(%)	OR=1.12 (95%CI: 0.97-1.29) for 4th vs 5th (highest). OR=1.34 (95%CI: 1.16-1.54) for 3rd vs 5th (highest). OR=1.66 (95%CI: 1.44-1.90) for 2nd vs 5th (highest). OR=2.03 (95%CI: 1.76-2.33) for 1st (lowest) vs 5th (highest).	

Author, published year	studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
			18-54	_					Total OR=0.97 (95%CI: 0.88-1.08) for 2nd vs 1st (lowest). OR=0.83 (95%CI: 0.75-0.92) for 3rd vs 1st (lowest). OR=0.83 (95%CI: 0.75-0.91) for 4th vs 1st (lowest). OR=0.70 (95%CI: 0.63-0.77) for 5th (highest) vs 1st (lowest).
		20206	18-24	_	OR=0.99 (95%C1: 0.77-1.28) for 2nd vs 1st (lowest). OR=1.00 (95%C1: 0.77-1.28) for 2nd vs 1st (lowest). OR=1.10 (95%C1: 0.77-1.66.140) for 4dt vs 1st (lowest).	OR=1.00 (95%CI: 0.77-1.30) for 3rd vs 1st (lowest).			
		(men)	25-39						25-39 years old OR=0.93 (95%CI: 0.79-1.11) for 2nd vs 1st (lowest). OR=0.74 (95%CI: 0.63-0.88) for 3rd vs 1st (lowest). OR=0.73 (95%CI: 0.62-0.86) for 4th vs 1st (lowest). OR=0.60 (95%CI: 0.51-0.71) for 5th (highest) vs 1st (lowest).
	The Comprehensive Survey of the Living Conditions of People on		40-54	Cross sectional —		Current smoker:"smoke		40-54 years old OR=1.00 (95%CI: 0.85-1.16) for 2nd vs 1st (lowest). OR=0.89 (95%CI: 0.76-1.04) for 3rd vs 1st (lowest). OR=0.91 (95%CI: 0.76-1.05) for 4th vs 1st (lowest). OR=0.91 (95%CI: 0.67-0.88) for 5th (highest) vs 1st (lowest).	
Fukuda Y et al. (2005) Ann Epidemiol; 15:365-372	Conditions of People on Health and Welfare (2001)		18-54	Cross sectional	-	Annual household income before tax, including benefits and inheritance (income quintile)	every day"or " smoke on occasion but not every day.	Age, residence area, marital status, employment status other smoker	Total OR=0.79 (05%CI: 0.70-0.89) for 2nd vs 1st (lowest). OR=0.64 (95%CI: 0.57-0.72) for 3rd vs 1st (lowest). OR=0.64 (95%CI: 0.44-0.56) for 4th vs 1st (lowest). OR=0.41 (95%CI: 0.36-0.46) for 5th (highest) vs 1st (lowest).
		21093	18-24						18-24 years old OR=0.78 (95%CI: 0.58-1.06) for 2nd vs 1st (lowest). OR=0.63 (95%CI: 0.46-0.86) for 3rd vs 1st (lowest). OR=0.55 (95%CI: 0.40-0.75) for 4th vs 1st (lowest). OR=0.41 (95%CI: 0.29-0.57) for 5th (highest) vs 1st (lowest).
		(women)	25-39	-		OR=0.78 (95%CI: 0.65-0.92) for 2nd vs 1st (lowest). OR=0.06 (0.95%CI: 0.50-0.71) for 3rd vs 1st (lowest). OR=0.47 (95%CI: 0.39-0.56) for 4th vs 1st (lowest). OR=0.29 (95%CI: 0.23-0.35) for 5th (highest) vs 1st (lowest). 40.54 year old			OR=0.60 (95%CI: 0.50-0.71) for 3rd vs 1st (lowest). OR=0.47 (95%CI: 0.39-0.56) for 4th vs 1st (lowest). OR=0.29 (95%CI: 0.23-0.35) for 5th (hijhesh) vs 1st (lowest).
			40-54						40-54 yers old OR=0.84 (95%CI: 0.69-1.02) for 2nd vs 1st (lowest). OR=0.78 (95%CI: 0.64-0.95) for 3rd vs 1st (lowest). OR=0.60 (95%CI: 0.49-0.73) for 4th vs 1st (lowest). OR=0.64 (95%CI: 0.53-0.77) for 5th (highest) vs 1st (lowest).
Alcohol intake									
Fukuda Y et al. (2005) BMC	The Comprehensive Survey of the Living Conditions of People on —	20030 (men)	- 25-59	Cross sectional	_	Annual household income before tax, including	Excess alcohol consumption more than 2.0 "gou" per day	Age,marital status,occupation,per capita income,	OR=0.96 (95%CI: 0.87-1.06) for 4th vs 5th (highest). OR=0.99 (95%CI: 0.89-1.10) for 3rd vs 5th (highest). OR=1.03 (95%CI: 0.92-1.14) for 2nd vs 5th (highest). OR=0.99 (95%CI: 0.89-1.10) for 1st (lowest) vs 5th (highest).
Public Health	Health and Welfare (2001)	21076 (women)	23 37	Closs sectional		benefits and inheritance (income quintile)	(one "gou" is a measure of 180 ml of Japanese sake, contains almost 20g of ethanol)	unemployment(%)	OR=0.96 (95%CI: 0.78-1.17) for 4th vs 5th (highest). OR=1.04 (95%CI: 0.85-1.27) for 3rd vs 5th (highest). OR=1.06 (95%CI: 0.86-1.29) for 2nd vs 5th (highest). OR=1.28 (95%CI: 1.04-1.56) for 1st (lowest) vs 5th (highest).
	Hamamatsu Survey on	298 (men)	<u>-</u>				Problem drinking (The CAGE questionnaire: we defined problem		OR=5.29 (95%CI: 0.64-43.82) for 1 (lowest) vs 4 (highest) OR=1.60 (95%CI: 0.55-4.66) for 2 vs 4 (highest) OR=2.97(95%CI: 1.26-7.01) for 3 vs 4 (highest)
Hasegawa T et al. (2013) Industrial Health. 51:490-500.	Mental Health and	285 (woman)	15-79	Cross sectional	_	Annual family income in yen : ①<=19999999, ② 2000000-3999999, ③4000000-6999999, ④ >=7000000	drinking as alcohol dependence and alcohol abuse/harmful drinking proven to be detected by CAGE questionnaire under selfadministered questionnaire)		OR=0.43 (95%CI: 0.01–16.5) for 1 (lowest) vs 4 (highest) OR=4.86 (95%CI: 0.73–35.6) for 2 vs 4 (highest) OR=0.75 (95%CI: 0.09–6.01) for 3 vs 4 (highest)
Table3. Occupation and hea	alth outcome								
Author, published year	Studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
All cause mortality Honjo K et al. (2014) Int J.	IACC - 1	24460 (men)		Programa	16 years	Occupation	Allaman	An arrival artin attraction to the	Logistic estimate 0.171 for manual worker vs office worker (p<0.05). Logistic estimate 0.396 for other jobs vs office worker (p<0.05). Logistic estimate 0.633 for unemployment/homemakers vs office worker (p<0.05).
Behav Med. 21(5):737-49	JACC study —	32649 (women)	40-65	Prospective cohort	(mean follow up period: 14.7 years)	(office worker, manual worker, other jobs, unemployed/homemakers, missing)	All cause mortality Age, marital status, education level	Age, maritai status, education level	Logistic estimate -0.025 for manual worker vs office worker. Logistic estimate -0.089 for other jobs vs office worker. Logistic estimate 0.267 for unemployment/homemakers vs office worker (p<0.05).

Author, published year	studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
Zhu S et al. (2000) Environmental Health and	JACC study (as part of JACC study	1290 (men)	29-77	Prospective cohort	4.5 years	Job (yes: employed permanently / self-employed /	All cause mortality	Age, obesity, previous or current illness, positive attitude to	HR=1.95 (95%CI 1.01-3.77) for not having job vs having job.
Preventive Medicine. 5:66-74.	+ subjects aged 29-39, 77)	1479 (women)	2,-11	Trospective conore	4.5 years	other, no: part-time job / housewife / jobless)	An eadse mortality	life, living with spouse, drinking habit, smoking habit	HR=3.61~(95%CI~0.78-16.36) for not having job vs having job.
Fujino Y et al. (2007) Asian	1100 . 1	46465 (men)	- 40-79	B	Mean follow-up period 12.5 years	l: Type of jobs	4.11		HR=1.03 (95%CI: 0.95-1.11) for manual work vs office work. HR=1.04 (95%CI: 0.93-1.18) for others vs office work.
Pacific J Cancer Prev. 8:97- 104.	JACC study	64327 (women)	40-79	Prospective cohort	Mean follow-up period 12.9 years	d: (office work, manual work, others)	All cause mortality	Age , area	HR=0.86 (95%CI: 0.74-1.00) for manual work vs office work. HR=0.97 (95%CI: 0.83-1.15) for others vs office work.
Fujino Y et al. (2005) J	JACC study	15434 (men)	40-59	Prognactive cohort	10 years	Employment Status	All cause mortality	Age, smoking, alcohol consumption, education level,	RR=1.01 (95%CI: 0.86-1.18) for self-employed vs employed.
Occup Health. 47(6);510-517.	JACC study	10511 (women)	40-39	Prospective cohort	10 years	(employed, self-emplyed)	All cause mortality	perceived stress, past medical history, BMI, job type	RR=1.22 (95%CI: 0.90-1.64) for self-employed vs employed.
			35 years old and older						All ages OR=1.12(95%CI: 0.77-1.63) for blue-coller vs white-coller. OR=1.18 (95%CI: 0.83-1.69) for farmer and forestry wokers vs white-coller. OR=1.59 (95%CI: 1.08-2.34) for unemployed vs white-coller.
		4301 (men)	35-59						59 and younger OR=1.04 (95%CI: 0.57-1.88) for blue-coller vs white-coller. OR=1.52 (95%CI: 0.85-2.73) for farmer and forestry wokers vs white-coller. OR=1.39 (95%CI: 0.32-6.04) for unemployed vs white-coller.
Hirokawa K et al. (2006)			60-			Emploument Statues	All cause mortality		OR=1.16 (95%CI: 0.71-1.89) for blue-coller vs white-coller. OR=1.06 (95%CI: 0.68-1.68) for farmer and forestry wokers vs white-coller. OR=1.51 (95%CI: 0.96-2.38) for unemployed vs white-coller.
European J Epidemiol. 21:641-651	Jichi Medical School (JMS) cohort study		35 years old and older	Prospective cohort	Mean follow-up period:9.17 years	(white-coller, blue-coller, farmer and forestry wokers, unemployed)	All cause mortality	Age, educational level, employment status.	All ages OR=0.65 (95%CI: 0.37-1.12) for blue-coller vs white-coller. OR=0.51 (95%CI: 0.33-0.80) for farmer and forestry wokers vs white-coller. OR=0.76 (95%CI: 0.452-1.11) for unemployed vs white-coller. 98 and vouncer
		6780 (women)	35-59	<u></u>					OR=0.71 (95%CI: 0.33-1.51) for blue-coller vs white-coller. OR=0.43 (95%CI: 0.20-0.96) for farmer and forestry wokers vs white-coller. OR=0.75 (95%CI: 0.39-1.41) for unemployed vs white-coller.
			60-						60 and elder OR=0.60 (95%CI: 0.27-1.35) for blue-coller vs white-coller. OR=0.61 (95%CI: 0.34-1.08) for farmer and forestry wokers vs white-coller. OR=0.83 (95%CI: 0.50-1.37) for unemployed vs white-coller.
		541 (men)	65-74						HR=0.82 (95%CI: 0.45-1.50) for having job vs not having a job.
Murata C et al. (2005) J Epidemiol. 15:78-84.		694 (women)		Prospective cohort -(Residents of Nagano	4 years (100 person-years)	Job:"Are you engaged in any jobs?"; yes, no (job=include homework)	All cause mortality	Age, self-rated health, diagnosed illness, annual income, home ownership	HR=1.25 (95%CI: 0.64-2.42) for having job vs not having a job.
Epidemioi. 15:78-84.		295 (men) 464	- 75+	prefecture)	(100 person-years)	(Job=include nomework)		nome ownersnip	HR=0.60 (95%CI: 0.40-0.90) for having job vs not having a job.
 		(women) 285							HR=0.67 (95%CI: 0.45-0.99) for having job vs not having a job.
Sato T et al. (2008) Archives of Gerontorogy and	Residental census data of a rural town in	(men) 352	68-82	Prospective cohort	12 years	Active lifestyle (job;yes,no)	All cause mortality	Age,ADL,IADL,incontinence,cerebralapoplexy,self- ratedhealth,depression,exercise,andhealthpractices	HR=0.87 (95%CI: 0.58-1.29) of mortality for having job vs not having job.
Geriatrics. 47:327-339. Cancer mortality	Hokkaido	(women)				(100,) (0,110)		incurrent, acpression, excess, and neutropiacies	HR=0.54 (95%CI: 0.32-0.89) of mortality for having job vs not having job.
Hirokawa K et al. (2006) European J Epidemiol. 21:641-651	Jichi Medical School (JMS) Cohort Study	4301 (men) 6780 (women)	- 35-	Prospective cohort	Mean follow-up period 9.17 years	t: Emploument Statues (white-coller, blue-coller, farmer and forestry wokers, unemployed)	All cancer mortality	Age, educational level, employment status	OR=1.38 (95%CI: 0.78-2.47) for blue-coller vs white-coller. OR=1.29 (95%CI: 0.74-2.26) for farmer and forestry wokers vs white-coller. OR=1.26 (95%CI: 0.67-2.38) for unemployed vs white-coller. OR=0.58 (95%CI: 0.23-1.44) for blue-coller vs white-coller. OR=0.49 (95%CI: 0.22-1.07) for farmer and forestry wokers vs white-coller. OR=0.72 (95%CI: 0.38-1.35) for unemployed vs white-coller.
Kuwahara A et al. (2010).	JPHC Cohort study	518 (men)				Occupation			OR=0.7.2 (95%CL: 0.3-81.35) for unemployed vs winte-coner. HR=1.70 (95%CL: 0.0-2.86) for sales clerks vs office workers. HR=0.94 (95%CL: 0.54-1.64) for farmers vs office workers. HR=1.61 (95%CL: 9.8-2.65) for manual laborers vs office workers. HR=2.66 (95%CL: 1.26-5.59) for unemployees vs office workers.
Gastric Cancer. 13:222-230.	(among gastric cancer patients)	201 (women)	- 40-59	Prospective cohort	16 years	(professionals or office workers, sales clerks or others, farmers, manual laborers, unemployed)	Gastric cancer mortality	Age at diagnosis	HR=1.35 (95%CI: 0.45-4.10) for sales clerks vs office workers. HR=0.97 (95%CI: 0.32-2.94) for farmers vs office workers. HR=2.17 (95%CI: 0.76-6.21) for manual laborers vs office workers. HR=2.09 (95%CI: 0.75-5.84) for unemployees vs office workers.
Honjo K et al. (2014) Int J.	IACC Strake	24460 (men)	- 40.65	Programme and and	16 years	Occupation (cff)	All concernments I'	Age, marital status, population size, proportion of aged	Logistic estimate 0.098 for manual worker vs office worker. Logistic estimate 0.193 for other jobs vs office worker. Logistic estimate 0.151 for unemployment/homemakers vs office worker. Logistic estimate 0.114 for missing vs office worker.
Behav Med. 21(5):737-49	. 21(5):737-49	32649 (women)	40-65	Prospective cohort	(mean follow up period: 14.7 years)	(office worker, manual worker, other jobs, unemployed/homemakers, missing)	All cancer mortality	population, sampling methods, proportion of college graduates (%)	Logistic estimate 0.072 for manual worker vs office worker. Logistic estimate 0.085 for other jobs vs office worker. Logistic estimate 0.192 for unemployment/homenakers vs office worker. Logistic estimate 0.019 for missine vs office worker.

Author, published year	studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
Fujino Y et al. (2007) Asian		46465			Mean follow-up perio				HR=1.00 (95%CI: 0.89-1.13) for manual work vs office work.
Pacific J Cancer Prev. 8:97-	JACC study	(men)	40-79	Prospective cohort	12.5 years	Type of jobs	All cancer mortality	Age, area	HR=0.93 (95%CI: 0.77-1.13) for others vs office work.
104.		64327 (women)			Mean follow-up perio 12.9 years	od: (office work, manual work, others)			HR=0.83 (95%CI: 0.67-1.04) for manual work vs office work. HR=0.82 (95%CI: 0.64-1.05) for others vs office work.
		46465			Mean follow-up perio	od:			HR=0.87 (95%CI: 0.49-1.56) for manual work vs office work.
		(men)			12.5 years		Esophageal cancer mortality		HR=0.87 (95%CI: 0.33-2.29) for others vs office work.
		64327 (women)			Mean follow-up perio 12.9 years	od:	mortanty		HR=0.94 (95%CI: 0.09-8.96) for manual work vs office work. HR=2.91 (95%CI: 0.29-28.6) for others vs office work.
		46465			Mean follow-up perio	od:	G 1	=	HR=1.49 (95%CI: 1.10-2.01) for manual work vs office work.
		(men) 64327			12.5 years Mean follow-up perio	od:	Stomach cancer mortality		HR=1.09 (95%CI: 0.69-1.73) for others vs office work. HR=1.09 (95%CI: 0.59-2.00) for manual work vs office work.
		(women)			12.9 years			=	HR=1.02 (95%CI: 0.52-2.00) for others vs office work.
		46465 (men)			Mean follow-up perio 12.5 years	od:			HR=0.59 (95%CI: 0.38-0.92) for manual work vs office work. HR=0.50 (95%CI: 0.21-1.19) for others vs office work.
		64327			Mean follow-up perio	od:	Colon cancer mortality		HR=0.57 (95%CI: 0.30-1.07) for manual work vs office work.
		(women) 46465			12.9 years Mean follow-up perio	od:		_	HR=0.48 (95%CI: 0.22-1.02) for others vs office work. HR=0.96 (95%CI: 0.56-1.63) for manual work vs office work.
		(men)			12.5 years	_	Rectal cancer mortality		HR=0.87 (95%CI: 0.35-2.16) for others vs office work.
		64327 (women)			Mean follow-up perio 12.9 years	od:	recent content mortancy		HR=0.82 (95%CI: 0.30-2.24) for manual work vs office work. HR=0.87 (95%CI: 0.27-2.84) for others vs office work.
		46465			Mean follow-up perio	od:	-	_	HR=0.98 (95%CI: 0.67-1.41) for manual work vs office work.
		(men) 64327			12.5 years Mean follow-up perio	nd:	Liver cancer mortality		HR=1.33 (95%CI: 0.76-2.35) for others vs office work. HR=0.96 (95%CI: 0.43-2.10) for manual work vs office work.
		(women)			12.9 years			<u>-</u>	HR=0.75 (95%CI: 0.30-1.85) for others vs office work.
		46465 (men)			Mean follow-up perio	od:	Gall bladder cancer		HR=0.56 (95%CI: 0.23-1.37) for manual work vs office work. HR=0.31 (95%CI: 0.05-1.72) for others vs office work.
		64327			12.5 years Mean follow-up perio	od:	mortality		HR=1.37 (95%CI: 0.39-4.81) for manual work vs office work.
		(women) 46465			12.9 years Mean follow-up perio	nd.		=	HR=1.94 (95%CI: 0.51-7.39) for others vs office work. HR=1.01 (95%CI: 0.62-1.64) for manual work vs office work.
		(men)			12.5 years		Pancreas cancer		HR=0.74 (95%CI: 0.32-1.63) for others vs office work.
E V 1 (2007) A		64327			Mean follow-up perio 12.9 years	od:	mortality		HR=0.70 (95%CI: 0.34-1.46) for manual work vs office work. HR=0.79 (95%CI: 0.35-1.76) for manual work vs office work.
Fujino Y et al. (2007) Asian Pacific J Cancer Prev. 8:97-	JACC study	(women) 46465	40-79	Prospective cohort	Mean follow-up perio	od: Type of jobs		Age, area	HR=1.07 (95%CI: 0.83-1.36) for manual work vs office work.
104.	,	(men) 64327		p	12.5 years Mean follow-up perio	(office work, manual work, others)	Lung cancer mortality		HR=1.18 (95%CI: 0.82-1.70) for others vs office work.
		(women)			12.9 years			_	HR=0.58 (95%CI: 0.32-1.06) for manual work vs office work. HR=0.72 (95%CI: 0.36-1.40) for others vs office work.
		46465			Mean follow-up perio	od:	Prostate cancer	_	HR=0.97 (95%CI: 0.51-1.85) for manual work vs office work.
		(men) 46465			12.5 years Mean follow-up perio	od:	mortality	=	HR=1.00 (95%CI: 0.38-2.65) for others vs office work. HR=0.40 (95%CI: 0.18-0.89) for manual work vs office work.
		(men)			12.5 years	.	Kidney cancer mortality	rtality	HR=NA for others vs office work.
		64327 (women)			Mean follow-up period 12.9 years				HR=NA for manual work vs office work. HR=NA for others vs office work.
		46465			Mean follow-up perio	od:	Urothelial tract cancer	_	HR=0.77 (95%CI: 0.36-1.68) for manual work vs office work.
		(men) 64327			12.5 years Mean follow-up perio	od:	mortality		HR=0.52 (95%CI: 0.15-1.86) for others vs office work. HR=NA for manual work vs office work.
		(women) 46465			12.9 years	1		_	HR=NA for others vs office work.
		(men)			Mean follow-up perio 12.5 years	od:	Non-Hodkin's		HR=0.70 (95%CI: 0.34-1.42) for manual work vs office work. HR=1.05 (95%CI: 0.35-3.12) for others vs office work.
		64327			Mean follow-up perio	od:	lymphoma mortality		HR=0.84 (95%CI: 0.22-3.18) for manual work vs office work.
		(women) 64327			12.9 years Mean follow-up perio	od:		=	HR=2.26 (95%CI: 0.57-9.02) for others vs office work. HR=0.41 (95%CI: 0.19-0.92) for manual work vs office work.
		(women)			12.9 years		Breast cancer mortality	_	HR=0.46 (95%CI: 0.16-1.31) for others vs office work.
		64327 (women)			Mean follow-up perio 12.9 years	od:	Cervical cancer mortality		HR=2.52 (95%CI: 0.31-20.5) for manual work vs office work. HR=3.19 (95%CI: 0.34-29.7) for others vs office work.
		46465			Mean follow-up perio	od:	Multiple myeloma	_	HR=0.64 (95%CI: 0.26-1.59) for manual work vs office work.
		(men) 64327			12.5 years Mean follow-up perio	od:	mortality		HR=0.78 (95%CI: 0.17-3.48) for others vs office work. HR=NA for manual work vs office work.
		(women)			12.9 years			_	HR≡NA for others vs office work.
		46465 (men)			Mean follow-up perio 12.5 years	od:	Myeloid leukemia		HR=0.76 (95%CI: 0.33-1.76) for manual work vs office work. HR=0.27 (95%CI: 0.03-2.42) for others vs office work.
		64327			Mean follow-up perio	od:	mortality		HR=NA for manual work vs office work.
Cancer morbility		(women)			12.9 years				HR=NA for others vs office work.
CVD mortality									
C + D mortality		24460							Logistic estimate 0.105 for manual worker vs office worker.
Honio V et al (2014) I-4 I		24400 (men)			16 years	Occupation		Age, marital status, population size, proportion of aged	Logistic estimate 0.327 for other jobs vs office worker.
Honjo K et al. (2014) Int J. Behav Med. 21(5):737-49	JACC study		40-65	Prospective cohort	(mean follow up	(office worker, manual worker, other jobs,	CVD mortality	population, sampling methods, proportion of college	Logistic estimate 0.493 for unemployment/homemakers vs office worker (p<0.05). Logistic estimate -0.491 for Manual worker vs Office worker (p<0.05).
		32649 (womwn)			period: 14.7 years)	unemployed/homemakers, missing)		graduates (%)	Logistic estimate -0.561 for Other jobs vs Office worker.
									Logistic estimate -0.028 for Unemployment/homemakers vs Office worker.
		46465			Mean follow-up perio	od:			HR=0.80 (95%CI: 0.59-1.06) for manual work vs office work.
		(men)			12.5 years	<u> </u>	Ischemic heart diseases		HR=0.80 (95%CI: 0.50-1.28) for others vs office work.
		64327			Mean follow-up perio	od:	mortality		HR=0.82 (95%CI: 0.40-1.64) for manual work vs office work.
Fujino Y et al. (2007) Asian Pacific J Cancer Prev. 8:97-	JACC study	(women)	40-79	Prospective cohort	12.9 years	Type of jobs		- Age, area	HR=0.85 (95%CI: 0.39-1.83) for others vs office work.
104.	TACC study	46465	40-17	r rospective conort	Mean follow-up perio	(office work, manual work, others) od:		Age, area	HR=1.26 (95%CI: 0.99-1.60) for manual work vs office work.
		(men)			12.5 years		Cerebrovascular		HR=1.12 (95%CI: 0.79-1.60) for others vs office work.
						1	diseases mortality		HD 070 050 CT 051 110 C
		64327			Mean follow-up peric				HR=0.79 (95%C1: 0.54-1.16) for manual work vs office work
		64327 (women)			Mean follow-up perio 12.9 years	oa:			HR=0.79 (95%CI: 0.54-1.16) for manual work vs office work. HR=0.99 (95%CI: 0.65-1.50) for others vs office work.
		(women)				od:			HR=0.99 (95%CI: 0.65-1.50) for others vs office work. OR=0.74 (95%CI: 0.34-1.60) for blue-coller vs white-coller.
Hirokawa K et al. (2006)	Estimate 10 to 1	(women) 4301			12.9 years	Caralanna Catara			HR=0.99 (95%CI: 0.65-1.50) for others vs office work. OR=0.74 (95%CI: 0.34-1.60) for blue-coller vs white-coller. OR=0.37 (95%CI: 0.16-0.82) for farmer and forestry wokers vs white-coller.
European J Epidemiol.	Jichi Medical School (JMS) Cohort Study	(women) 4301 (men)	35-	Prospective cohort		end: Emploument Statues (white-coller, blue-coller,	CVD mortality	Age, educational level, employment status	HR=0.99 (95%CI: 0.65-1.50) for others vs office work. OR=0.74 (95%CI: 0.34-1.60) for blue-coller vs white-coller. OR=0.37 (95%CI: 0.16-0.82) for farmer and forestry wokers vs white-coller. OR1.27 (95%CI: 0.61-2.66) for unemployed vs white-coller.
		(women) 4301	35-	Prospective cohort	12.9 years Mean follow-up perio	.d. Emploument Statues	CVD mortality	Age, educational level, employment status	HR=0.99 (95%CI: 0.65-1.50) for others vs office work. OR=0.74 (95%CI: 0.34-1.60) for blue-coller vs white-coller. OR=0.37 (95%CI: 0.16-0.82) for farmer and forestry wokers vs white-coller.

CVD morbility Honjo K et al. (2014). Stroke.					years	Measures	Outcome	Adjusted variables	Relative risk
45:2592-2598.	JPHC Cohort study	14742 (women)	40-59	Prospective cohort	20 years	Occupation (professional/ manager, Office work, service/ sales Manual job)	, Stroke incidence	Age, marital status, geographical area	HR=1.53 (95%CI: 0.93-2.53) for office work vs professional/ manager. HR=1.97 (95%CI: 1.26-3.07) for service/ sales vs professional/ manager. HR=1.65 (95%CI: 1.07-2.56) for manual job vs professional/ manager.
	_	15434 (men)	_				Circulatory system diseases mortality		RR=0.85(95%CI: 0.62-1.18) for self-employed vs employed.
	_	10511 (women)	- -				(ICD10: I00-99)	_	RR=0.52(95%CI: 0.27-1.02) for self-employed vs employed.
Fujino Y et al. (2005) J	JACC study -	15434 (men)	40-59	Prospective cohort	10 years	Employment status	Cerebrovasculart diseases mortality	Age, smoking, alcohol consumption	RR=0.58(95%CI: 0.35-0.97) for self-employed vs employed.
Occup Health. 47(6);510-517.	JACC study	10511 (women)	40-39	r iospective conort	10 years	(employed, self-emplyed)	(ICD10: I60-69)	education level, perceived stress, past medical history BMI, job type	RR=0.46(95%CI: 0.19-1.12) for self-employed vs employed.
	_	15434 (men)	_				Ischemic heart diseases mortality	s	RR=1.28(95%CI: 0.68-2.40) for self-employed vs employed.
		10511 (women)					(ICD10: I20-25)		RR=0.18(95%CI: 0.02-1.81) for self-employed vs employed.
Self-rated Health		2542							OD-194/059/CI-159 215\frac{1}{15} = 0.0000000000000000000000000000000000
Wang Net al. (2005) J Epidemiol. 5:155-162.	the Komo-Ise study	(men) 2634	47-77	Prospective cohort	7 years	Employment	Self-reported fair or poor health	Age, area	OR=1.84 (95%CI: 1.58-2.15) for unemployment vs employment. OR=1.49 (95%CI: 1.31-1.70) for unemployment vs employment.
Nishi N et al. (2004) Soc Sci		(women) 968 (men)		Cross sectional		Employment grade	Poor self-rated health (0—excellent, very		OR=2.20 (95%CI: 1.52-3.17) for lower-level nonmanual vs higher-level nonmanual. OR=3.58(95%CI: 2.26-5.67) for manual vs higher-level nonmanual. (p for trend <0.001)
Med. 58:1159-1170.		393 (women)	35-64	(Civil servants working Takarazuka City)	in —	(higher-level nonmanual, lower-level nonmanual, manual)	good and good, l—fair and poor),	r ^{Age}	OR=1.38 (95%CI: 0.80-2.38) for lower-level nonmanual vs higher-level nonmanual. OR=1.94 (95%CI: 1.09-3.47) for manual vs higher-level nonmanual. (p for trend 0.02)
	-	1796 (men)	-	Cross sectional (Employees of a prefecture on the west					OR=1.63 (95%CI: 1.10-2.42) for profession vs administrative/managerial. OR=2.56 (95%CI: 1.68-3.89) for clerical vs administrative/managerial. OR=1.57 (95%CI: 0.97-2.53) for manual vs administrative/managerial. OR=1.56 (95%CI: 1.30-1.89) for inequality index for non-manual grades vs administrative/managerial. OR=0.59 (95%CI: 0.11-3.14) for administrative/managerial vs profession.
Martikainen P. (2004) Soc Sci Med. 59:1287-1295.		706 (women)	40-60	coast of Japan)	_ =	Employment grade (non-manual: administrative/managerial,professional,clerical	Poor self-rated health (SF-36)	realth Age	OR=1.04 (95%CI: 0.73-1.48) for clerical vs profession. OR=0.74 (95%CI: 0.38-1.45) for manual vs profession. OR=1.08 (95%CI: 0.77-1.51) for inequality index for non-manual grades vs profession.
Med. 39.1287-1293.	_	821 (men)	(Emp	Cross sectional (Employees of a		manual inequality index for non-manual grades)			OR=1.83 (95%CI: 1.11-3.04) for profession vs administrative/managerial. OR=2.26 (95%CI: 1.40-3.65) for clerical vs administrative/managerial. OR=2.28 (95%CI: 1.43-3.63) for manual vs administrative/managerial. OR=1.42 (95%CI: 1.12-1.80) for inequality index for non-manual grades vs administrative/managerial.
		287 (women)		prefecture on Takarazuk city)	sa .				OR=not estimated for administrative/managerial vs profession. OR=1.01 (95%C: 0.51-2.01) for clerical vs profession. OR=2.15 (95%C: 1.05-4.38) for manual vs profession. OR=1.28 (95%C: 0.65-2.54) for inequality index for non-manual grades vs profession.
Psycholgoical distress/depress	sion								OR=1.03 (95%CI:0.92-1.16) for maneger vs prforession.
Fukuda V et al. (2005) RMC	The Comprehensive Survey of the Living	20030 (men)	W 50			Occupation	Stress ("Do you have any stress or worries in	Age.marital status.occupation.per capita income,	OR=1.03 (57%C1-0.22-1.11) for clerk vs prforession. OR=1.09 (95%C1-0.98-1.11) for clerk vs prforession. OR=1.01 (95%C1-0.90-1.13) for sales work vs prforession. OR=0.73 (95%C1-0.95-1.21) for sales work vs prforession. OR=0.73 (95%C1-0.80-1.287) for agriculture vs prforession. OR=0.92 (95%C1-0.80-1.06) for Transport vs prforession. OR=0.98 (95%C1-0.80-1.08) for labour vs prforession. OR=0.93 (95%C1-0.92-1.15) for others vs prforession.
Public Health	onditions of People on – Health and Welfare (2001)	21076 (women)	- 25-59	Cross sectional	_	(profession, manager, clerk, sales work, service work, agriculture, transport, labour, othrs)	your daily life?" -"yes" were defined as being stressed.)	unemployment(%)	OR=1.32 (95%CI:1.18-1.47) for prforession vs housework. OR=1.20 (95%CI:1.09-1.33) for clerk vs housework. OR=1.19 (95%CI:1.06-1.34) for sales work vs housework. OR=1.14 (95%CI:1.03-1.28) for service work vs housework. OR=0.84 (95%CI:0.07-1.02) for agriculture vs housework. OR=0.84 (95%CI:0.09-1.18) for labour vs housework. OR=1.06 (95%CI:0.95-1.17) for others vs housework.
	Northern Japan Occupational Health	1069 (men)	_			Job category (clerical/administrative, professional, sales/service,			OR=1.02 (95%CI: 0.67-1.55) for professional vs clerical/administrative. OR=1.41 (95%CI: 0.87-2.27) for sales/service vs clerical/administrative. OR=1.32 (95%CI: 0.87-2.00) for technical vs clerical/administrative. OR=1.35 (95%CI: 0.82-2.23) for others vs clerical/administrative.
	Promotion Centers Collaboration Study for Mental Health (NOCS- MH)	1151 (women)	NA	Cross sectional	_	technical, others(on-site workers etc.))	Depressive Symptoms (CES-D≧16)	Age, education, employee type, job category, working hours per day, sleep duration, smoking behavior, alcohol consumption	OR=1.65 (95%CI: 1.07-2.56) for professional vs clerical/administrative. OR=0.97 (95%CI: 0.60-1.58) for sales/service vs clerical/administrative. OR=1.33 (95%CI: 0.83-2.11) for technical vs clerical/administrative. OR=0.67 (95%CI: 0.39-1.16) for others vs clerical/administrative.
	_	1069 (men)	_			Employee type			OR=0.88 (95%CI: 0.61-1.28) for manegerial class vs non-managerial class.
		(women)				(non-managerial class, manegerial class)			OR=0.91 (95%CI: 0.55-1.52) for manegerial class vs non-managerial class.
Miyake Y et al.(2012). BMC Psychiatry. 12:117.	Kyushu Okinawa Maternal and Child Health Study (KOMCHS)	1741 (women)	NA (age, years, mean±S 31.2±4.4)	D: Cross sectional	_	Vocation (unemployed, professional or technical, clerical or related occupation, sales, service, production, others)	Antenatal depression (CES-D≧16)	Age, gestation, region of residence, family structure, history of depression, family history of depression, smoking, and secondhand smoke exposure at home and at work	OR=0.60 (95%CI: 0.42-0.84) for professional or technical vs unemployed. OR=0.61 (95%CI: 0.42-0.87) for clerical or related occupation vs unemployed. OR=0.69 (95%CI: 0.38-1.23) for sales vs unemployed. OR=0.64 (95%CI: 0.37-1.08) for service vs unemployed. OR=0.92 (95%CI: 0.44-1.82) for production vs unemployed. OR=0.45 (95%CI: 0.13-1.22) forothers vs unemployed.
						Employment (yes, no)			OR=0.62 (95%CI: 0.47-0.82) for yes vs no.

Author, published year	studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
Inoue A et al. (2010) J Occupa Health. 52:227-240.	The Comprehensive Survey of the Living Conditions of People on Health and Welfare	9461 (men) 7717 (women)	15-83	Cross sectional	_	Occupation (professionals and technicians, managers, clerks, sales and service workers, production workers, others)	Psychological Distress (K6 ≧5)	Age, marital status, household income, employment contract, compary size	OR=1.03 (95%CI: 0.90-1.17) for prforessionals and technicians vs sales and service workers. OR=0.93 (95%CI: 0.76-1.14) for managers vs sales and service workers. OR=1.16 (95%CI: 0.91-3.9) for clerks vs sales and service workers. OR=1.02 (95%CI: 0.89-1.17) for production workers vs sales and service workers. OR=1.14 (95%CI: 0.83-1.57) for others vs sales and service workers. OR=1.12 (95%CI: 0.97-1.29) for prforessionals and technicians vs sales and service workers. OR=0.90 (95%CI: 0.54-1.51) for managers vs sales and service workers. OR=0.98 (95%CI: 0.86-1.13) for clerks vs sales and service workers. OR=0.99 (95%CI: 0.79-1.29) for prduction workers vs sales and service workers. OR=0.95 (95%CI: 0.70-1.28) for others vs sales and service workers.
Smoking									OR=1.14 (95%CI: 1.01-1.28) for manager vs profession.
Fukuda Y et al. (2005) BMC	(men	20030 (men)	25-59	Cross sectional	_	Occupation (profession, manager, clerk, sales work, service	Current smoker:"smoke every day"or " smoke	Age,marital status,occupation,per capita income,	OR=1.94 (95%CE: 0.84-1.06) for cleark vs profession. OR=1.31 (95%CE: 1.17-1.47) for sales work vs profession. OR=1.26 (95%CE: 1.12-1.47) for service vs profession. OR=1.61 (95%CE: 1.9.7-1.39) for agricuture vs profession. OR=1.61 (95%CE: 1.3-1.87) for transport vs profession. OR=1.49 (95%CE: 1.36-1.63) for labour vs profession. OR=1.88 (95%CE: 0.97-1.20) for others vs profession.
Public Health	Health and Welfare	21076 (women)				work, agriculture, transport, labour, othrs)	on occasion but not every day.	unemployment(%)	OR=1.08 (95%CI: 0.92-1.25) for profession vs housework. OR=0.97 (95%CI: 0.84-1.12) for cleark vs housework. OR=1.57 (95%CI: 1.35-1.84) for sales work vs housework. OR=1.58 (95%CI: 1.37-1.81) for service vs housework. OR=0.70 (95%CI: 0.52-0.96) for agricuture vs housework. OR=0.70 (95%CI: 0.94-1.28) for labour vs housework. OR=1.30 (95%CI: 0.12-1.28) for others vs housework.
		_	18-54	<u></u>					Total OR=2.35 (95%CI: 2.06-2.67) for unemployment vs employment.
		20206	18-24						18-24 years old OR=1.71 (95%CI: 1.34-2.20) for unemployment vs employment.
		(men)	25-39	_			Current smoker:"smoke every day"or " smoke on occasion but not every day.		25-39 years old OR=2.35 (95%CI: 2.06-2.67) for unemployment vs employment.
Fukuda Y et al. (2005) Ann	The Comprehensive Survey of the Living	•	40-54			Employment status		smoke Age residence area marital status income other smok	40-54 years old OR=1.71 (95%CI: 1.34-2.20) for unemployment vs employment.
Epidemiol; 15:365-372	Conditions of People on – Health and Welfare (2001)		18-54	Cross sectional	_	Employment status (unemployed, employed)			Total OR=2.35 (95%CI: 2.06-2.67) for unemployment vs employment.
		21093	18-24	<u></u>					18-24 years old OR=1.71 (95%CI: 1.34-2.20) for unemployment vs employment.
		(women)	25-39						25-39 years old OR=2.35 (95%CI: 2.06-2.67) for unemployment vs employment.
			40-54						40-54 years old OR=1.71 (95%CI: 1.34-2.20) for unemployment vs employment.
Nishi N et al. (2004) Soc Sci		968 (men)	35-64	Cross sectional (Civil servants working	yin —	Employment grade (higher-level nonmanual, lower-level nonmanual,	Smoking (0—non-and ex-	Age	OR=0.81 (95%CI: 0.58-1.13) for lower-level nonmanual vs higher-level nonmanual. OR=1.41 (95%CI: 0.76-2.63) for manual vs higher-level nonmanual. (p for trend 0.94)
Med. 58:1159-1170.		393 (women)	33 01	Takarazuka City)	, 	manual)	smoker, l—current smoker)		OR=0.66 (95%CI: 0.28-1.58) for lower-level nonmanual vs higher-level nonmanual. OR=0.70 (95%CI: 0.26-1.89) for manual vs higher-level nonmanual. (p for trend 0.49)
Hu L et al. (2007) J Occup Health. 49(6);443-52.	Annual survey on health, lifestyle habits	707 (men)	20-64	Construction of		Grade of employment (grade1 [highest grade]: chief or irector of bureau department, deputy head of breau / department,		Undinad	OR=1.00 (95%CI: 0.62-1.62) for grade2 vs grade1. OR=1.13 (95%CI: 0.71-1.81) for grade3 vs grade1.
Health. 49(6);443-52.	and work stress among civil servants	598 (women)	20-64	Cross sectional	_	professional equivalents; grade2 [middle grade]: head of section, subsection chief, professional equivalents; grade3 [lowest grade]: clerical staff)	(current smoker)	Unadjusted	OR=0.72 (95%CI: 0.31-2.93) for grade3 vs grade1.
Alcohol intake	·								OP-107 (050/ CL 0.02.1.22) for any open constraints
Fukuda Y et al. (2005) BMC	The Comprehensive Survey of the Living Conditions of People on –	20030 (men)	25-59	Cross sectional	_	Occupation (profession, manager, clerk, sales work, service	Excess alcohol consumption more than 2.0 "gou" per day	Age,marital status,occupation,per capita income,	OR=1.07 (95%CT: 0.93-1.22) for manager vs profession. OR=0.97 (95%CT: 0.85-1.1) for cleark vs profession. OR=1.18 (95%CT: 1.04-1.34) for sales work vs profession. OR=1.13 (95%CT: 0.98-1.29) for service vs profession. OR=1.20 (95%CT: 0.91-1.46) for agricuture vs profession. OR=1.29 (95%CT: 1.10-1.51) for transport vs profession. OR=1.29 (95%CT: 1.14-1.39) for labour vs profession. OR=0.91 (95%CT: 1.04.30) for others vs profession.
Public Health	Health and Welfare (2001)	21076 (women)				work, agriculture, transport, labour, othrs)	(one "gou" is a measur of 180 ml of Japanese sake, contains almost 20g of ethanol)	: unempioyment(%)	OR=1.34 (95%CI:1.06-1.70) for profession vs housework. OR=1.46 (95%CI: 1.19-1.80) for cleark vs housework. OR=1.91 (95%CI: 1.42-2.5) for sales work vs housework. OR=1.91 (95%CI: 0.79-1.86) for service vs housework. OR=1.21 (95%CI: 0.79-1.86) for agricuture vs housework. OR=1.34 (95%CI: 0.83-1.38) for labour vs housework. OR=1.34 (95%CI: 1.08-1.66) for others vs housework.

Author, published year	studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
Nishi N et al. (2004) Soc Sci Med. 58:1159-1170.		968 (men)	35-64	Cross sectional (Civil servants working i	n —	Employment grade (higher-level nonmanual, lower-level nonmanual,	Alcohol drinking (0—three times a week or less, 1—almost daily		OR=0.76 (95%CI: 0.54-1.06) for lower-level nonmanual vs higher-level nonmanual. OR=0.89 (95%CI: 0.49-1.62) for manual vs higher-level nonmanual. (p for trend 0.28)
		393 (women)		Takarazuka City)		manual)	or daily)		OR=0.50 (95%CT: 0.26-0.95) for lower-level nonmanual vs higher-level nonmanual. OR=0.27 (95%CT: 0.11-0.65) for manual vs higher-level nonmanual. (p for trend 0.02)
Hasegawa T et al. (2013)	Hamamatsu Survey on Mental Health and	298 (men)	45.70			Occupational type (specialist/technical, administrative/managerial,	Problem drinking (The CAGE questionnaire: we defined problem drinking as alcohol	Age, marital status, depressive symptoms, annual family	OR=0.82 (95%CI: 0.28-2.41) for administrative/managerial vs specialist/technical. OR=1.90 (95%CI: 0.54-6.73) for clerical vs specialist/technical. OR=0.49 (95%CI: 0.11-2.07) for sales vs specialist/technical. OR=1.64 (95%CI: 0.54-4.96) for service vs specialist/technical. OR=0.30 (95%CI: 0.10-0.88) for production process and related vs specialist/technical. OR=0.61 (95%CI: 0.18-2.13) forothers vs specialist/technical.
Industrial Health. 51:490-500.		285 (woman)	- 15-79 Cross see	Cross sectional	_	(specials recurring, a minimistaring miningerial, clerical, sales, service, production process and related, others)	dependence and alcoho abuse/harmful drinking proven to be detected by CAGE questionnaire under selfadministered questionnaire)	-	OR=139.37 (95%CI: 1.47-13242.89) for administrative/managerial vs specialist/technical. OR=3.70 (95%CI: 0.33-41.54) for clerical vs specialist/technical. OR=18.46 (95%CI: 0.77-44.279) for sales vs specialist/technical. OR=15.11 (95%CI: 1.02-222.94) for service vs specialist/technical. OR=NA for production process and related vs specialist/technical. OR=3.69 (95%CI: 0.14-9-69) forothers vs specialist/technical.
Table4. Type of Employmen	nt and health outcome								
Author, published year	Studycohort name	Sample size	Age at entry	Study design	Follow-up vears	Measures	Outcome	Adjusted variables	Relative risk
All cause mortality									
		16692 (women)							HR=1.48 (95%CI: 1.25-1.75) for part-time vs full-time. HR=1.44 (95%CI: 1.21-1.72) for self-employed vs full-time.
	_	11759 (women)							By education level (people who completed formal education at 16 years or older) HR=1.33 (95%CI: 1.09-1.63) for part-time vs full-time. HR=1.40 (95%CI: 1.12-1.73) for self-employed vs full-time.
Honjo K et al. (2015) J Epidemiol Community Health; 69;1012-1017.	JACC study	4933 (women)	40-59	Prospective cohort	20 years (mean follow up period; 17.7 years)	Employment status (full-time, part-time, self-employed)	All cause mortality	Age, area, education level, disease history at baseline, marital status, having children	By education level (people who completed formal education at 15 years or younger) HR=1.77 (95%CE: 1.10-2.07) for part-time vs full-time. HR=1.51 (95%CE: 1.10-2.07) for self-employed vs full-time.
		15461 (women)							By marital status (married) HR=1.42 (95%CE: 1.19-1.70) for part-time vs full-time. HR=1.37 (95%CE: 1.13-1.65) for self-employed vs full-time.
	_	1231 (women)							By marital status (unmarried) HR=1.91 (95%CI: 1.11-3.28) for part-time vs full-time. HR=2.12 (95%CI: 1.33-3.40) for self-employed vs full-time.
Fujino Y et al. (2007) Asian	JACC study	46465 (men)	40-79		Mean follow-up period 12.5 years	Type of employment			HR=1.08 (95%CI: 0.92-1.27) for part time vs employed. HR=1.14 (95%CI: 1.07-1.22) for self-emplyment vs emloyed. HR=1.25 (95%CI: 0.69-2.28) for housewife vs employed. HR=1.59 (95%CI: 1.47-1.71) for unemployed vs employed. HR=1.26 (95%CI: 1.14-1.40) for others vs employed.
Pacific J Cancer Prev. 8:97- 104.	JACC study	64327 (women)	40-79	Prospective cohort	Mean follow-up period 12.9 years	(employed, part time, self-employed, housewife, unemployed, others)	All cause mortality	Age, area	HR=1.09 (95%CI: 0.91-1.30) for part time vs employed. HR=1.18 (95%CI: 1.03-1.37) for self-emplyment vs emboyed. HR=1.15 (95%CI: 1.00-1.31) for housewife vs employed. HR=1.49 (95%CI: 1.30-1.71) for unemployed vs employed. HR=1.18 (95%CI: 0.99-1.40) for others vs employed.
Cancer mortality									HR=1.18 (95%CI: 0.93-1.50) for part time vs employed.
Fujino Y et al. (2007) Asian Pacific J Cancer Prev. 8:97-	JACC study -	46465 (men)	40-79	Prospective cohort	Mean follow-up period 12.5 years	: Type of employment (employed, part time, self-employed, housewife,	A.W	No. 100	HR=1.13 (95%CE 1.02-1.26) for self-emplyment vs embyed. HR=2.03 (95%CE 0.96-4.29) for housewife vs employed. HR=1.29 (95%CE 1.15-1.46) for unemployed vs employed. HR=1.26 (95%CE 1.107-1.47) for others vs employed.
104.	JACC study =	64327 (women)	40-79	riospective conort	Mean follow-up period 12.9 years	unemployed, others)	All cancer monanty	Age, area	HR=1.23 (95%CI: 0.95-1.59) for part time vs employed. HR=1.25 (95%CI: 1.01-1.56) for self-emplyment vs emloyed. HR=1.24 (95%CI: 1.10-1.52) for housewife vs employed. HR=1.43 (95%CI: 1.15-1.77) for unemployed vs employed. HR=1.40 (95%CI: 1.07-1.83) for others vs employed.
		46465 (men)			Mean follow-up period 12.5 years	:	Esophageal cancer		HR=1.45 (95%CI: 0.43-4.84) for part time vs employed. HR=1.33 (95%CI: 0.82-2.17) for self-emplyment vs emloyed. HR=NA for housewife vs employed. HR=1.98 (95%CI: 1.12-3.51) for unemployed vs employed. HR=1.94 (95%CI: 0.96-3.93) for others vs employed.
	_	64327 (women)			Mean follow-up period 12.9 years	:	mortality	_	HR=NA for part time vs employed. HR=0.40 (95%C1: 0.06-2.59) for self-emplyment vs emloyed. HR=0.41 (95%C1: 0.08-2.19) for housewife vs employed. HR=0.24 (95%C1: 0.04-1.42) for unemployed vs employed. HR=NA for others vs employed.
	_	46465 (men)			Mean follow-up period 12.5 years	:	Stomach cancer		HR=1.45 (95%CI: 0.85-2.47) for part time vs employed. HR=1.40 (95%CI: 1.10-1.77) for self-emplyment vs embyed. HR=1.53 (95%CI: 0.21-11.0) for housewife vs employed. HR=1.35 (95%CI: 1.02-1.79) for unemployed vs employed. HR=1.63 (95%CI: 1.15-2.30) for others vs employed.

Author, published year	studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
		64327 (women)	·		Mean follow-up period 12.9 years	:	mortality		HR=1.27 (95%CI: 0.68-2.36) for part time vs employed. HR=0.92 (95%CI: 0.53-1.59) for self-emplyment vs emloyed. HR=1.03 (95%CI: 0.63-1.70) for housewife vs employed. HR=1.13 (95%CI: 0.67-1.91) for unemployed vs employed. HR=1.18 (95%CI: 0.62-2.25) for others vs employed.
		46465 (men)			Mean follow-up period 12.5 years	- :		_	HR=0.50 (95%CI: 0.12-2.10) for part time vs employed. HR=1.01 (95%CI: 0.67-1.53) for self-emplyment vs emloyed. HR=4.95 (95%CI: 0.67-3.63) for housewife vs employed. HR=1.59 (95%CI: 0.99-2.55) for unemployed vs employed. HR=0.72 (95%CI: 0.33-1.60) for others vs employed.
		64327 (women)			Mean follow-up period 12.9 years	- :	Colon cancer mortality		HR=0.60 (95%CI: 0.24-1.47) for part time vs employed. HR=0.88 (95%CI: 0.46-1.69) for self-emplyment vs emloyed. HR=0.70 (95%CI: 0.38-1.29) for housewife vs employed. HR=0.72 (95%CI: 0.37-1.37) for unemployed vs employed. HR=0.88 (95%CI: 0.39-1.95) for others vs employed.
		46465 (men)			Mean follow-up period 12.5 years	- :		_	HR=1.26 (95%CI: 0.44-3.61) for part time vs employed HR=0.94 (95%CI: 0.59-1.49) for self-emplyment vs emloyed. HR=6.36 (95%CI: 0.86-47.1) for housewife vs employed. HR=1.29 (95%CI: 0.74-2.24) for unemployed vs employed. HR=1.20 (95%CI: 0.56-2.55) for others vs employed.
		64327 (women)			Mean follow-up period 12.9 years	- :	Rectal cancer mortality	,	HR=1.14 (95%CI: 0.39-3.31) for part time vs employed. HR=1.04 (95%CI: 0.41-2.62) for self-employment vs employed. HR=0.70 (95%CI: 0.28-1.72) for housewife vs employed. HR=1.14 (95%CI: 0.44-2.91) for unemployed vs employed. HR=1.79 (95%CI: 0.61-5.24) for others vs employed.
		46465 (men)			Mean follow-up period 12.5 years	- :		_	HR=1.86 (95%CI: 0.98-3.54) for part time vs employed. HR=1.22 (95%CI: 0.91-1.65) for self-emplyment vs emloyed. HR=NA for housewife vs employed. HR=1.84 (95%CI: 1.31-2.61) for unemployed vs employed. HR=1.39 (95%CI: 0.83-2.34) for others vs employed.
		64327 (women)			Mean follow-up period 12.9 years	- :	Liver cancer mortality		HR=1.91 (95%CI: 0.76-4.76) for part time vs employed. HR=1.49 (95%CI: 0.65-3.40) for self-emplyment vs emloyed. HR=2.01 (95%CI: 0.94-4.30) for housewife vs employed. HR=1.95 (95%CI: 0.87-4.36) for unemployed vs employed. HR=1.24 (95%CI: 0.43-3.53) for others vs employed.
		46465 (men)			Mean follow-up period 12.5 years	- :	Gall bladder cancer	_	HR=3.06 (95%CI: 0.80-11.6) for part time vs employed. HR=0.91 (95%CI: 0.38-2.17) for self-emplyment vs emloyed. HR=NA for housewife vs employed. HR=0.95 (95%CI: 0.84-5.02) for unemployed vs employed. HR=0.83 (95%CI: 0.21-3.29) for others vs employed.
		64327 (women)			Mean follow-up period 12.9 years	- :	mortality		HR=1.55 (95%CI: 0.47-5.12) for part time vs employed. HR=1.09 (95%CI: 0.36-3.31) for self-emplyment vs emloyed. HR=0.93 (95%CI: 0.32-2.66) for housewife vs employed. HR=1.96 (95%CI: 0.67-5.70) for unemployed vs employed. HR=1.74 (95%CI: 0.47-6.33) for others vs employed.
		46465 (men)			Mean follow-up period 12.5 years	- :	Pancreas cancer	_	HR=NA for part time vs employed. HR=1.28 (95%CI: 0.82-1.97) for self-emplyment vs emloyed. HR=5.43 (95%CI: 0.73-4(0.1) for housewife vs employed. HR=0.86 (95%CI: 0.50-1.48) for unemployed vs employed. HR=1.63 (95%CI: 0.89-2.99) for others vs employed.
		64327 (women)			Mean follow-up period 12.9 years	- :	mortality		HR=1.56 (95%CI: 0.52-4.67) for part time vs employed. HR=1.95 (95%CI: 0.77-4.92) for self-emplyment vs emloyed. HR=2.69 (95%CI: 1.13-6.37) for housewife vs employed. HR=3.08 (95%CI: 1.25-7.55) for unemployed vs employed. HR=3.51 (95%CI: 1.29-9.55) for others vs employed.
Fujino Y et al. (2007) Asian Pacific J Cancer Prev. 8:97- 104.	JACC study	46465 (men)	40-79	Prospective cohort	Mean follow-up period 12.5 years	Type of employment (employed, part time, self-employed, housewife, unemployed, others)	Lung cancer mortality	Age, area	HR=1.44 (95%CI: 0.91-2.28) for part time vs employed. HR=1.13 (95%CI: 0.91-1.41) for self-emplyment vs emloyed. HR=1.25 (95%CI: 0.17-8.97) for housewife vs employed. HR=1.12 (95%CI: 0.87-1.45) for unemployed vs employed. HR=1.17 (95%CI: 0.84-1.62) for others vs employed.
		64327 (women)			Mean follow-up period 12.9 years	:	Lung cancer mortanity		HR=1.11 (95%CI: 0.43-2.82) for part time vs employed. HR=1.83 (95%CI: 0.89-3.76) for self-emplyment vs emboyed. HR=2.09 (95%CI: 1.05-4.13) for housewife vs employed. HR=2.13 (95%CI: 1.04-4.38) for unemployed vs employed. HR=2.18 (95%CI: 0.94-5.06) for others vs employed.
	•	46465 (men)			Mean follow-up period 12.5 years	:	Prostate cancer mortality	_	HR=0.71 (95%CI: 0.16-3.11) for part time vs employed. HR=0.90 (95%CI: 0.50-1.62) for self-emplyment vs emloyed. HR=4.82 (95%CI: 0.63-36.6) for housewife vs employed. HR=1.15 (95%CI: 0.62-21.2) for unemployed vs employed. HR=0.99 (95%CI: 0.43-2.26) for others vs employed.
		46465 (men)			Mean follow-up period 12.5 years	-	Kidney cancer mortality	_	HR=NA for part time vs employed. HR=0.77 (95%CI: 0.31-1.91) for self-emplyment vs emloyed. HR=NA for housewife vs employed. HR=0.90 (95%CI: 0.31-2.59) for unemployed vs employed. HR=0.91 (95%CI: 0.22-3.65) for others vs employed.
	•				-	=	sames cancer mortality	•	

Author, published year	studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
	_	64327 (women)			Mean follow-up period 12.9 years	: -		_	HR=NA for part time vs employed. HR=0.31 (95%C1: 0.02-3.69) for self-emplyment vs emloyed. HR=0.53 (95%C1: 0.08-3.30) for housewife vs employed. HR=0.69 (95%C1: 0.10-4.86) for unemployed vs employed. HR=1.39 (95%C1: 0.16-11.6) for others vs employed.
		46465 (men)			Mean follow-up period 12.5 years	:	Urothelial tract cancer		HR=1.88 (9%%C: 0.52-6.74) for part time vs employed. HR=0.93 (9%C: 0.45-1.92) for self-emplyment vs emloyed. HR=NA for housewife vs employed. HR=1.05 (95%CI: 0.47-2.35) for unemployed vs employed. HR=0.89 (95%CI: 0.29-2.67) for others vs employed.
	_	64327 (women)			Mean follow-up period 12.9 years	:	mortality	_	HR=0.85 (95%CI: 0.14-5.20) for part time vs employed. HR=0.38 (95%CI: 0.07-1.19) for self-emplyment vs emloyed. HR=0.48 (95%CI: 0.12-1.95) for housewife vs employed. HR=0.51 (95%CI: 0.12-2.17) for unemployed vs employed. HR=0.75 (95%CI: 0.11-4.93) for others vs employed.
	_	46465 (men)			Mean follow-up period 12.5 years	:	Non-Hodkin's		HR=NA for part time vs employed. HR=0.80 (95%CI: 0.42-1.52) for self-emplyment vs emloyed. HR=NA for housewife vs employed. HR=1.07 (95%CI: 0.51-2.24) for unemployed vs employed. HR=0.69 (95%CI: 0.22-2.18) for others vs employed.
	_	64327 (women)			Mean follow-up period 12.9 years	:	lymphoma mortality	_	HR=0.93 (95%CI: 0.20-4.19) for part time vs employed. HR=0.93 (95%CI: 0.27-3.21) for self-emplyment vs emloyed. HR=1.52 (95%CI: 0.49-4.69) for housewife vs employed. HR=0.79 (95%CI: 0.22-2.88) for unemployed vs employed. HR=NA for others vs employed.
	_	46465 (men)			Mean follow-up period 12.5 years	:	Multiple myeloma		HR=NA for part time vs employed. HR=1.43 (95%C1: 0.60-3.39) for self-emplyment vs emloyed. HR=NA for housewife vs employed. HR=1.54 (95%C1: 0.55-4.25) for unemployed vs employed. HR=0.88 (95%C1: 0.17-4.43) for others vs employed.
		64327 (women)			Mean follow-up period 12.9 years	:	mortality	_	HR=0.51 (95%CI: 0.05-4.99) for part time vs employed. HR=0.68 (95%CI: 0.13-3.51) for self-emplyment vs emloyed. HR=1.59 (95%CI: 0.42-5.94) for housewife vs employed. HR=2.22 (95%CI: 0.53-9.22) for unemployed vs employed. HR=0.77 (95%CI: 0.07-7.90) for others vs employed.
	_	46465 (men)			Mean follow-up period 12.5 years	:	Myeloid leukemia		HR=1.07 (95% CI: 0.13-8.48) for part time vs employed. HR=1.22 (95% CI: 0.55-2.69) for self-emplyment vs emloyed. HR=NA for housewife vs employed. HR=1.04 (95% CI: 0.36-2.96) for unemployed vs employed. HR=0.42 (95% CI: 0.05-3.42) for others vs employed.
		64327 (women)			Mean follow-up period 12.9 years	:	mortality	_	HR=NA for part time vs employed. HR=NA for self-emplyment vs emloyed. HR=NA for housewife vs employed. HR=NA for unemployed vs employed. HR=NA for others vs employed.
		64327 (women)			Mean follow-up period 12.9 years	:	Breast cancer mortality		HR=1.60 (95%CI: 0.66-3.87) for part time vs employed. HR=1.84 (95%CI: 0.83-4.10) for self-emplyment vs emloyed. HR=1.60 (95%CI: 0.75-3.43) for housewife vs employed. HR=2.17 (95%CI: 0.90-5.21) for unemployed vs employed. HR=0.77 (95%CI: 0.16-3.59) for others vs employed.
		64327 (women)			Mean follow-up period 12.9 years	:	Cervical cancer mortality		HR=0.26 (95%CI: 0.03-2.27) for part time vs employed. HR=0.60 (95%CI: 0.15-2.36) for self-emplyment vs emloyed. HR=0.63 (95%CI: 0.19-2.07) for housewife vs employed. HR=0.75 (95%CI: 0.19-2.97) for unemployed vs employed. HR=0.85 (95%CI: 0.15-4.77) for others vs employed.
Cancer morbility									
CVD mortality									
		46465			Mean follow-up period	:	Ischemic heart diseases mortality	s	HR=0.71 (95%CT: 0.33-1.56) for part time vs employed. HR=1.11 (95%CT: 0.84-1.46) for self-emplyment vs emloyed. HR=NA for housewife vs employed. HR=1.64 (95%CT: 0.42-2.01) for unemployed vs employed. HR=1.30 (95%CT: 0.94-2.05) for others vs employed.
Fujino Y et al. (2007) Asian	IACC ctudy	(men)	40-79	Provincetive achort	12.5 years	Type of employment	Cerebrovascular diseases mortality	——————————————————————————————————————	HR=1.06 (95%CI: 0.67-1.69) for part time vs employed. HR=1.08 (95%CI: 0.88-1.32) for self-emplyment vs emloyed. HR=0.84 (95%CI: 0.11-6.04) for housewife vs employed. HR=1.58 (95%CI: 1.27-1.96) for unemployed vs employed. HR=1.24 (95%CI: 0.93-1.65) for others vs employed.
Pacific J Cancer Prev. 8:97- 104.	JACC study -	64327	1 0-79	Prospective cohort	Mean follow-up period	 (employed, part time, self-employed, housewife, unemployed, others) : 	Ischemic heart diseases mortality	— Age, area s	HR=0.86 (95%CI: 0.53-1.38) for part time vs employed. HR=0.90 (95%CI: 0.62-1.31) for self-emplyment vs emloyed. HR=0.86 (95%CI: 0.61-1.21) for housewife vs employed. HR=1.08 (95%CI: 0.76-1.53) for unemployed vs employed. HR=0.87 (95%CI: 0.56-1.35) for others vs employed.
		(women)			12.9 years		Cerebrovascular diseases mortality		HR=1.11 (95%CI: 0.55-2.24) for part time vs employed. HR=0.59 (95%CI: 0.32-1.10) for self-emplyment vs emloyed. HR=0.69 (95%CI: 0.40-1.20) for housewife vs employed. HR=0.95 (95%CI: 0.55-1.64) for unemployed vs employed. HR=0.61 (95%CI: 0.29-1.27) for others vs employed.
CVD morbility									
Self-rated Health									

Author, published year	studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
Psycholgoical distress/depr	ression								
Miyake Y et al.(2012). BMC Psychiatry. 12:117.	Kyushu Okinawa Maternal and Child Health Study (KOMCHS)	1741 (women)	NA (age, years, mean±SI 31.2±4.4)	D: Cross sectional	-	Employment status (unemployed, part-time employment, full-time employment, missing data)	Antenatal depression (CES-D ≧16)	Age, gestation, region of residence, family structure, history of depression, family history of depression, smoking, and secondhand smoke exposure at home and at work, household income, education	OR=0.66 (95%CI: 0.46-0.95) for part-time employment vs unemployed. OR=0.61 (95%CI: 0.48-0.90) for full-time employment vs unemployed. OR=0.24 (95%CI: 0.01-1.31) for missing data vs unemployed.
	Northern Japan	1069 (men)				Employment status			OR =1.05 (95% CI: 0.64-1.70) for no full-time work vs full-time work.
Fushimi M et al. (2013)	Occupational Health Promotion Centers	1151 (women)	_			(full-time work, no full-time work)	Depressive symptoms	Age, eduction, employment type, job category, working	OR =1.26 (95%CI: 0.84-1.88) for no full-time work vs full-time work.
Community Ment Health J. 49:236-242.	Collaboration Study for Mental Health	1069 (men)		Cross sectional	_	Working hours per day	(CES-D ≧ 16)	hours per day, sleep duration, smoking behavior, and aocohol consuption	OR=1.00 (95%CI: 0.76-1.32) for >8h work vs ≦8h work.
	(NOCS-MH)	1151 (women)	_			(≦8 h,>8h)			OR=1.37 (95%CI: 1.02-1.83) for >8h work vs \leq 8h work.
Kikuchi H et al. (2013) Psychogeriatrics. 13:229-236		971 (men)	- 65-74	Cross sectional (Community residents living in three Japanese municipallities; Bunkyo	_	Employment status (Not working, Part-time work(1-34 hours worked per week), Full-time work(≧35 hours worked per		Age group, area, living arrangement, education attainment, physical limitation (Japanese version of eight-item short- form health survey)	OR=0.98 (95%CI: 0.66-1.46) for part-time work vs not working. OR=1.02 (95%CI: 0.68-1.53) for full-time work vs not working.
		923 (women)		ward, Fuchu city, Oyama town)	1	week))		ionn neann survey)	OR=1.12 (95%CI: 0.75-1.68) for part-time work vs not working. OR=0.86 (95%CI: 0.48-1.52) for full-time work vs not working.
Inoue A et al. (2010) J	The Comprehensive Survey of the Living	9461 (men)	- 15-83	Cross sectional		Employment contract (permanent worker, temporary/contrct worker,	Psychological distress	Age, marital status, household income, occupation,	OR=0.92 (95%CI: 0.77-1.11) for temporary/contract woker vs permanent woker. OR=1.22 (95%CI: 1.01-1.46) for part-time woker vs permanent woker. OR=0.87 (95%CI: 0.54-1.41) for other vs permanent woker.
Occupa Health. 52:227-240.	Conditions of People on Health and Welfare	7717 (women)				part-time worker, others)	(K6 ≧5)	compary size	OR=1.18 (95%CI: 1.01-1.39) for temporary/contract woker vs permanent woker. OR=1.04 (95%CI: 0.92-1.17) for part-time woker vs permanent woker. OR=0.81 (95%CI: 0.50-1.30) for other vs permanent woker.
Kachi Y et al. (2014) Scand J Work Environ Health.	The Longitudinal Survey of Middleaged	8486 (men)	50-59	Prospective cohort	4 years	Employment	Serious psychological distress	or work,occupation,companysize,organizational	OR=2.32 (95%CI: 1.79-2.51) for precarious vs full-time permanent.
40(5):465-472	and Elderly Persons (LSMEP)	6736 (women)	_		.,	(full-time permanent, precarious)	(K6≧14)	tenure,cardiovascular disease risk,and K6 scores(all covariates measured at baseline)	OR=0.96 (95%CI: 0.72-1.29) for precarious vs full-time permanent.
Smoking									
Alcohol intake		200					Problem drinking		OD 000/050/CI 010 5 10 5
Hasegawa T et al. (2013)	Hamamatsu Survey on Mental Health and	298 (men)	15-79	Cross sectional		Employment type	(The CAGE questionnaire: we	Age, marital status, depressive symptoms, annual family	OR=0.99 (95%CI: 0.19–5.12) for part-time vs full-time. OR=1.32 (95%CI: 0.52–3.33) for self-employed vs full-time.
Industrial Health. 51:490-500.	. Measures against Suicide in2008	285 (woman)	13-79	Cross sectional	_	(full-time, part-time, self-employed)	defined problem drinking as alcohol	income, employment types, occupational types, company size, working hours	OR=0.29 (95%CI: 0.04-2.32) for part-time vs full-time. OR=11.33 (95%CI: 0.95-135.53) for self-employed vs full-time.
		(utilikilig as alcollot		
Table5. Marital status and	health outcome	<u> </u>					urniking as aconor		
Author, published year	health outcome Studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
		Sample		Study design	years	Measures		Adjusted variables	Relative risk
Author, published year		Sample size 24460 (men) 32649		Study design Prospective cohort		Measures Marital status (married, separted/never married)		Adjusted variables Age, education level, occupation	
Author, published year All cause mortality Honjo K et al. (2014) Int J.	Studycohort name	Sample size 24460 (men)	entry		16 years (mean follow up		Outcome	•	Relative risk Logistic estimate 0.411 for separated/never married vs married (p<0.05).
Author, published year All cause mortality Honjo K et al. (2014) Int J. Behav Med. 21(5):737-49 Honjo K et al. (2015) J Epidemiol Community Health; 69;1012-1017. Zhu S et al. (2000) Environmental Health and	JACC study JACC study JACC study JACC study JACC study (as part of JACC study studiests and 20.30	Sample size 24460 (men) 32649 (women) 16692 (women) 1290 (men)	- 40-65	Prospective cohort	vears 16 years (mean follow up period: 14.7 years) 20 years (mean follow up	Marital status (married, separted/never married) Marital status (married, divorced/separated/widowed,never married) Living with supouse	Outcome All cause mortality	Age, education level, occupation Age, area Age, obesity, previous or current illness, positive attitude to	Relative risk Logistic estimate 0.411 for separated/never married vs married (p<0.05). Logistic estimate 0.192 for separated/never married vs married (p<0.05). HR=1.16 (95%CI: 0.92-1.45) for divorced/separated/widowed vs married.
Author, published year All cause mortality Honjo K et al. (2014) Int J. Behav Med. 21(5):737-49 Honjo K et al. (2015) J Epidemiol Community Health; 69;1012-1017. Zhu S et al. (2000)	JACC study JACC study JACC study JACC study JACC study (as part of JACC study studiest a and 20.30	Sample size 24460 (men) 32649 (women) 16692 (women) 1290 (men) 1479 (women)	- 40-65 40-59	Prospective cohort Prospective cohort	vears 16 years (mean follow up period: 14.7 years) 20 years (mean follow up period; 17.7 years)	Marital status (married, separted/never married) Marital status (married, divorced/separated/widowed,never married)	Outcome All cause mortality All cause mortality	Age, education level, occupation Age, area	Relative risk Logistic estimate 0.411 for separated/never married vs married (p<0.05). Logistic estimate 0.192 for separated/never married vs married (p<0.05). HR=1.16 (95%CI: 0.92-1.45) for divorced/separated/widowed vs married. HR=2.00 (95%CI: 1.26-3.92) for never married vs married.
Author, published year All cause mortality Honjo K et al. (2014) Int J. Behav Med. 21(5):737-49 Honjo K et al. (2015) J Epidemiol Community Health; 69;1012-1017. Zhu S et al. (2000) Environmental Health and Preventive Medicine. 5:66-74. Sato T et al. (2008) Archives of Gerontoropy and	JACC study JACC study JACC study JACC study (as part of JACC study + subjects aged 29-39, 77) Residental census data of a rural town in -	Sample size 24460 (men) 32649 (women) 16692 (women) 1290 (men) 1479 (women) 285 (men)	- 40-65 40-59	Prospective cohort Prospective cohort	vears 16 years (mean follow up period: 14.7 years) 20 years (mean follow up period; 17.7 years)	Marital status (married, separted/never married) Marital status (married, divorced/separated/widowed,never married) Living with supouse	Outcome All cause mortality All cause mortality	Age, education level, occupation Age, area Age, obesity, previous or current illness, positive attitude to life, job, drinking habit, smoking habit Age,ADL,IADL,incontinence,cerebral apoplexy,self-rated	Relative risk Logistic estimate 0.411 for separated/never married vs married (p<0.05). Logistic estimate 0.192 for separated/never married vs married (p<0.05). HR=1.16 (95%CI: 0.92-1.45) for divorced/separated/widowed vs married. HR=2.00 (95%CI: 1.26-3.92) for never married vs married. HR=2.61 (95%CI: 1.26-5.41) for not living with spouse vs living with spouse.
Author, published year All cause mortality Honjo K et al. (2014) Int J. Behav Med. 21(5):737-49 Honjo K et al. (2015) J Epidemiol Community Health; 69;1012-1017. Zhu S et al. (2000) Environmental Health and Preventive Medicine. 5:66-74. Sato T et al. (2008) Archives	JACC study JACC study JACC study JACC study (as part of JACC study + subjects aged 29-39, 77) Residental census data	Sample size 24460 (men) 32649 (women) 16692 (women) 1290 (men) 1479 (women)	- 40-65 40-59 - 29-77	Prospective cohort Prospective cohort Prospective cohort	vears 16 years (mean follow up period: 14.7 years) 20 years (mean follow up period; 17.7 years) 4.5 years	Marital status (married, separted/never married) Marital status (married, divorced/separated/widowed,never married) Living with supouse (yes, no: widowed / divorced / unmarried)	Outcome All cause mortality All cause mortality All cause mortality	Age, education level, occupation Age, area Age, obesity, previous or current illness, positive attitude to life, job, drinking habit, smoking habit	Relative risk Logistic estimate 0.411 for separated/never married vs married (p<0.05). Logistic estimate 0.192 for separated/never married vs married (p<0.05). HR=1.16 (95%CI: 0.92-1.45) for divorced/separated/widowed vs married. HR=2.00 (95%CI: 1.26-3.92) for never married vs married. HR=2.61 (95%CI: 1.26-5.41) for not living with spouse vs living with spouse. HR=2.94 (95%CI: 1.32-6.57) for not living with spouse vs living with spouse.
Author, published year All cause mortality Honjo K et al. (2014) Int J. Behav Med. 21(5):737-49 Honjo K et al. (2015) J Epidemiol Community Health; 69;1012-1017. Zhu S et al. (2000) Environmental Health and Preventive Medicine. 5:66-74. Sato T et al. (2008) Archives of Gerontorogy and Geriatrics. 47:327-339.	JACC study JACC study JACC study (as part of JACC study + subjects aged 29-39, 77) Residental census data of a rural town in Hokkaido	Sample size 24460 (men) 32649 (women) 16692 (women) 1290 (men) 1479 (women) 285 (men) 352	- 40-65 40-59 - 29-77	Prospective cohort Prospective cohort Prospective cohort Prospective cohort	vears 16 years (mean follow up period: 14.7 years) 20 years (mean follow up period: 17.7 years) 4.5 years	Marital status (married, separted/never married) Marital status (married, divorced/separated/widowed,never married) Living with supouse (yes, no: widowed / divorced / unmarried) Marital status:married or single	Outcome All cause mortality All cause mortality All cause mortality All cause mortality	Age, education level, occupation Age, area Age, obesity, previous or current illness, positive attitude to life, job, drinking habit, smoking habit Age,ADL,IADL,incontinence,cerebral apoplexy,self-rated health, depression,exercise, health practices Age, area, occupation, educational background, smoking	Relative risk Logistic estimate 0.411 for separated/never married vs married (p<0.05). Logistic estimate 0.192 for separated/never married vs married (p<0.05). HR=1.16 (95%CI: 0.92-1.45) for divorced/separated/widowed vs married. HR=2.00 (95%CI: 1.26-3.92) for never married vs married. HR=2.61 (95%CI: 1.26-5.41) for not living with spouse vs living with spouse. HR=0.65 (95%CI: 0.40-1.06) for married compared with single.
Author, published year All cause mortality Honjo K et al. (2014) Int J. Behav Med. 21(5):737-49 Honjo K et al. (2015) J Epidemiol Community Health; 69;1012-1017. Zhu S et al. (2000) Environmental Health and Preventive Medicine. 5:66-74. Sato T et al. (2008) Archives of Gerontorogy and Geriatrics. 47:327-339.	JACC study JACC study JACC study JACC study (as part of JACC study + subjects aged 29-39, 77) Residental census data of a rural town in -	Sample size 24460 (men) 32649 (women) 16692 (women) 1290 (men) 1479 (women) 285 (men) 352 (women)	- 40-65 40-59 - 29-77 - 68-82	Prospective cohort Prospective cohort Prospective cohort	vears 16 years (mean follow up period: 14.7 years) 20 years (mean follow up period; 17.7 years) 4.5 years	Marital status (married, separted/never married) Marital status (married, divorced/separated/widowed,never married) Living with supouse (yes, no: widowed / divorced / unmarried) Marital status:married or single	Outcome All cause mortality All cause mortality All cause mortality	Age, education level, occupation Age, area Age, obesity, previous or current illness, positive attitude to life, job, drinking habit, smoking habit Age,ADL,IADL,incontinence,cerebral apoplexy,self-rated health, depression,exercise, health practices	Relative risk Logistic estimate 0.411 for separated/never married vs married (p<0.05). Logistic estimate 0.192 for separated/never married vs married (p<0.05). HR=1.16 (95%CI: 0.92-1.45) for divorced/separated/widowed vs married. HR=2.00 (95%CI: 1.26-3.92) for never married vs married. HR=2.61 (95%CI: 1.26-5.41) for not living with spouse vs living with spouse. HR=2.94 (95%CI: 1.32-6.57) for not living with spouse vs living with spouse. HR=0.65 (95%CI: 0.40-1.06) for married compared with single. HR=0.70 (95%CI: 0.46-1.08) formarried compared with single. RR=1.52 (95%CI: 0.81-2.85) for single vs married. RR=1.63 (95%CI: 0.79-3.29) for divorced vs married.
Author, published year All cause mortality Honjo K et al. (2014) Int J. Behav Med. 21(5):737-49 Honjo K et al. (2015) J Epidemiol Community Health; 69;1012-1017. Zhu S et al. (2000) Environmental Health and Preventive Medicine. 5:66-74. Sato T et al. (2008) Archives of Gerontorogy and Geriatrics. 47:327-339. Iwasaki M et al.(2002) Int J Epidemiol.; 31:1208-1218	JACC study JACC study JACC study (as part of JACC study + subjects aged 29-39, 77) Residental census data of a rural town in Hokkaido	Sample size 24460 (men) 32649 (women) 16692 (women) 1290 (men) 1479 (women) 285 (men) 352 (women) 5628 (men)	- 40-65 40-59 - 29-77 - 68-82 - 40-69	Prospective cohort Prospective cohort Prospective cohort Prospective cohort	vears 16 years (mean follow up period: 14.7 years) 20 years (mean follow up period; 17.7 years) 4.5 years 12 years	Marital status (married, separted/never married) Marital status (married, divorced/separated/widowed,never married) Living with supouse (yes, no: widowed / divorced / unmarried) Marital status:married or single	Outcome All cause mortality All cause mortality All cause mortality All cause mortality	Age, education level, occupation Age, area Age, obesity, previous or current illness, positive attitude to life, job, drinking habit, smoking habit Age,ADL,IADL,incontinence,cerebral apoplexy,self-rated health, depression,exercise, health practices Age, area, occupation, educational background, smoking habit, alcohol consumption, body mass index, chronic	Relative risk Logistic estimate 0.411 for separated/never married vs married (p<0.05). Logistic estimate 0.192 for separated/never married vs married (p<0.05). HR=1.16 (95%CI: 0.92-1.45) for divorced/separated/widowed vs married. HR=2.00 (95%CI: 1.26-3.92) for never married vs married. HR=2.61 (95%CI: 1.26-5.41) for not living with spouse vs living with spouse. HR=2.94 (95%CI: 1.32-6.57) for not living with spouse vs living with spouse. HR=0.65 (95%CI: 0.40-1.06) for married compared with single. HR=0.70 (95%CI: 0.46-1.08) formarried compared with single. RR=1.52 (95%CI: 0.79-3.29) for divorced vs married. RR=1.11 (95%CI: 0.79-3.29) for divorced vs married. RR=2.19 (95%CI: 1.17-4.09) for single vs married. RR=2.19 (95%CI: 1.17-4.09) for single vs married.
Author, published year All cause mortality Honjo K et al. (2014) Int J. Behav Med. 21(5):737-49 Honjo K et al. (2015) J Epidemiol Community Health; 69:1012-1017. Zhu S et al. (2000) Environmental Health and Preventive Medicine. 5:66-74. Sato T et al. (2008) Archives of Gerontorogy and Geriatrics. 47:327-339.	JACC study JACC study JACC study (as part of JACC study + subjects aged 29-39, 77) Residental census data of a rural town in Hokkaido	Sample size 24460 (men) 32649 (women) 16692 (women) 1290 (men) 1479 (women) 285 (men) 352 (women) 5628 (men) 5932 (women)	- 40-65 40-59 - 29-77 - 68-82	Prospective cohort Prospective cohort Prospective cohort Prospective cohort	vears 16 years (mean follow up period: 14.7 years) 20 years (mean follow up period: 17.7 years) 4.5 years	Marital status (married, separted/never married) Marital status (married, divorced/separated/widowed,never married) Living with supouse (yes, no: widowed / divorced / unmarried) Marital status:married or single Marriage (married, single, divorced, widowed)	Outcome All cause mortality All cause mortality All cause mortality All cause mortality All cause mortality	Age, education level, occupation Age, obesity, previous or current illness, positive attitude to life, job, drinking habit, smoking habit Age,ADL.IADL,incontinence,cerebral apoplexy,self-rated health, depression,exercise, health practices Age, area, occupation, educational background, smoking habit, alcohol consumption, body mass index, chronic disease	Relative risk Logistic estimate 0.411 for separated/never married vs married (p<0.05). Logistic estimate 0.192 for separated/never married vs married (p<0.05). HR=1.16 (95%CI: 0.92-1.45) for divorced/separated/widowed vs married. HR=2.00 (95%CI: 1.26-3.92) for never married vs married. HR=2.61 (95%CI: 1.26-5.41) for not living with spouse vs living with spouse. HR=2.94 (95%CI: 1.32-6.57) for not living with spouse vs living with spouse. HR=0.65 (95%CI: 0.40-1.06) for married compared with single. HR=0.70 (95%CI: 0.40-1.08) formarried compared with single. RR=1.52 (95%CI: 0.81-2.85) for single vs married. RR=1.61 (95%CI: 0.79-3.29) for divorced vs married. RR=1.11 (95%CI: 0.79-3.29) for divorced vs married. RR=2.19 (95%CI: 0.71-2.09) for widowed vs married. RR=0.30 (95%CI: 0.71-2.21) for widowed vs married. HR=0.65 (95%CI: 2.46-18.0) for separated/divorced vs married. HR=0.69 (95%CI: 0.14-1.09) for widowed vs married. HR=0.69 (95%CI: 0.44-1.09) for widowed vs married. HR=0.69 (95%CI: 0.44-1.09) for widowed vs marriesd. HR=0.40 (95%CI: 0.14-0.96) for widowed 3+ years vs marriesd. (p for trend 0.04) %in relation to duration of widowhood.
Author, published year All cause mortality Honjo K et al. (2014) Int J. Behav Med. 21(5):737-49 Honjo K et al. (2015) J Epidemiol Community Health; 69:1012-1017. Zhu S et al. (2000) Environmental Health and Preventive Medicine. 5:66-74. Sato T et al. (2008) Archives of Gerontorogy and Geriatrics. 47:327-339. Iwasaki M et al.(2002) Int J Epidemiol.; 31:1208-1218	JACC study JACC study JACC study (as part of JACC study + subjects aged 29-39, 77) Residental census data of a rural town in Hokkaido	Sample size 24460 (men) 32649 (women) 16692 (women) 1290 (men) 1479 (women) 285 (men) 352 (women) 5628 (men) 5932 (women)	- 40-65 40-59 - 29-77 - 68-82 - 40-69	Prospective cohort Prospective cohort Prospective cohort Prospective cohort	vears 16 years (mean follow up period: 14.7 years) 20 years (mean follow up period; 17.7 years) 4.5 years 12 years	Marital status (married, separted/never married) Marital status (married, divorced/separated/widowed,never married) Living with supouse (yes, no: widowed / divorced / unmarried) Marital status:married or single Marriage (married, single, divorced, widowed) Marital status (married, separated/divorced, widowed) Marital status (married, separated/divorced, widowed)	Outcome All cause mortality All cause mortality All cause mortality All cause mortality All cause mortality	Age, education level, occupation Age, area Age, obesity, previous or current illness, positive attitude to life, job, drinking habit, smoking habit Age,ADL,IADL,incontinence,cerebral apoplexy,self-rated health, depression,exercise, health practices Age, area, occupation, educational background, smoking habit, alcohol consumption, body mass index, chronic disease Age, number of children, years of education, smorking status,occupation, alcohol intake Age, number of children, years of education, smorking	Relative risk Logistic estimate 0.411 for separated/never married vs married (p<0.05). Logistic estimate 0.192 for separated/never married vs married (p<0.05). HR=1.16 (95%CI: 0.92-1.45) for divorced/separated/widowed vs married. HR=2.00 (95%CI: 1.26-3.92) for never married vs married. HR=2.61 (95%CI: 1.26-5.41) for not living with spouse vs living with spouse. HR=0.65 (95%CI: 0.40-1.06) for married compared with single. HR=0.70 (95%CI: 0.40-1.06) for married compared with single. HR=0.70 (95%CI: 0.46-1.08) formarried compared with single. RR=1.16 (95%CI: 0.70-2.32) for divorced vs married. RR=1.11 (95%CI: 0.62-2.00) for widowed vs married. RR=1.19 (95%CI: 0.11-4.09) for single vs married. RR=0.50 (95%CI: 0.71-2.16) for widowed vs married. HR=0.65 (95%CI: 2.46-18.0) for separated/divorced vs married. HR=0.65 (95%CI: 0.71-1.46) for widowed vs married. HR=0.65 (95%CI: 0.71-1.46) for widowed vs married. HR=0.66 (95%CI: 0.72-1.71-46) for widowed vs married. HR=0.66 (95%CI: 0.71-1.46) for widowed vs married. HR=0.66 (95%CI: 0.71-1.46) for widowed vs married. HR=0.66 (95%CI: 0.71-1.74) for widowed vs married. HR=0.66 (95%CI: 0.71-1.74) for widowed vs married.

Author, published year	studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
Sakauchi F. (2007) Asian Pacific J Cancer Prev;8:123- 128	JACC study	497808 person-years (men) 701160 person-years (women)	40-79	Prospective cohort	Mean follow-up period 12.5 years Mean follow-up period 12.9 years	Marital status (married, widowed, divorced/separated, single)	All cause mortality	Age, area	HR=1.28 (95%CI: 1.17-1.39) for spouse dead vs married. HR=1.39 (95%CI: 1.18-1.67) for divorced/separated vs married. HR=1.81 (95%CI: 1.48-2.20) for single vs married. HR=1.04 (95%CI: 0.98-1.11) for spouse dead vs married. HR=1.23 (95%CI: 1.03-1.40) for divorced/separated vs married HR=1.23 (95%CI: 1.28-1.84) for single vs married.
Cancer mortality									
Iwasaki M et al.(2002) Int J Epidemiol.; 31:1208-1218	the Komo-Ise study	5628 (men) 5932 (women)	40-69	Prospective cohort	7 years	Marriage (married, single, divorced, widowed)	All cancer mortality	Age, area	RR=0.53 (95%C1: 0.13-2.20) for single vs married. RR=0.37 (95%C1: 0.05-2.63) for divorced vs married. RR=0.78 (95%C1: 0.32-1.92) for widowed vs married. RR=1.10 (95%C1: 0.34-3.57) for single vs married. RR=1.10 (95%C1: 0.34-3.57) for divorced vs married. RR=1.11 (95%C1: 0.12-4.93) for divorced vs married. RR=1.11 (95%C1: 0.12-4.04) for widowed vs married.
Ikeda A et al. (2007) BMC Public Health. 7:73	JACC study	37781 (men) 52283 (women)	40-79	Prospective cohort	11 years (mean follow-up period: 9.9 years) (892998 person years)	Marital status (married, wodowed, divorced, single)	All cancer mortality	Age, body mass index, smoking status, alcohol intalke, education, minutes of walking, hours of doing sports, employment status, stress, having children, history of hypertension, history of diabetes.	RR=1.22 (95%CI: 1.02-1.45) for widowed men vs married men. RR=1.01 (95%CI: 0.68-1.50) for divorced men vs married men. RR=0.91 (95%CI: 0.56-1.47) for single men vs married men. RR=0.96 (95%CI: 0.84-1.11) for widowed women vs married women. RR=1.02 (95%CI: 0.70-1.47) for divorced women vs married women.
Sakauchi F. (2007) Asian Pacific J Cancer Prev;8:123- 128	JACC study	497808 person-years (men) 701160 person-years (women)	40-79	Prospective cohort	Mean follow-up period 12.5 years Mean follow-up period 12.9 years	Marital Status (married, widowed, divorced/separated, single)	All cancer mortality	Age, area	RR=1.25 (95%CI: 0.84-1.87) for single women vs married women. HR=1.10 (95%CI: 0.84-1.87) for divorced/separated vs married. HR=1.01 (95%CI: 0.80-1.41) for single vs married. HR=0.94 (95%CI: 0.63-1.41) for single vs married. HR=1.30 (95%CI: 0.89-1.12) for spouse dead vs married. HR=1.33 (95%CI: 0.10-1.76) for divorced/separated vs married. HR=1.33 (95%CI: 0.95-1.83) for single vs married.
		497808 person-years (men) 701160 person-years (women)			Mean follow-up period 12.5 years Mean follow-up period 12.9 years	_	Esophagus cancers mortality		HR=1.49 (95%CI: 0.72-3.09) for spouse dead vs married. HR=0.70 (95%CI: 0.10-4.99) for divorced/separated vs married. HR=0.72 (95%CI: 0.10-5.19) for single vs married. HR=0.76 (95%CI: 0.29-2.04) for spouse dead vs married. HR=NA for divorced/separated vs married. HR=3.07 (95%CI: 0.42-33) for single vs married.
		497808 person-years (men)			Mean follow-up period 12.5 years	- : -	Stomach cancers mortality	_	HR=1.17 (95%CI: 0.84-1.63) for spouse dead vs married. HR=1.29 (95%CI: 0.67-2.49) for divorced/separated vs married. HR=0.93 (95%CI: 0.39-2.25) for single vs married.
		701160 person-years (women)			Mean follow-up period 12.9 years	: -	mortanty	_	HR=0.86 (95%CI: 0.64-1.16) for spouse dead vs married. HR=1.27 (95%CI: 0.63-2.58) for divorced/separated vs married. HR=1.31 (95%CI: 0.58-2.95) for single vs married.
		497808 person-years (men)			Mean follow-up period 12.5 years	<u>-</u>	Colon cancers mortality	,	HR=1.14 (95%CI: 0.60-2.19) for spouse dead vs married. HR=0.48 (95%CI: 0.07-3.44) for divorced/separated vs married. HR=1.32 (95%CI: 0.33-5.38) for single vs married.
		701160 person-years (women)			Mean follow-up period 12.9 years	: _		_	HR=1.10 (95%CI: 0.76-1.59) for spouse dead vs married. HR=1.86 (95%CI: 0.82-4.24) for divorced/separated vs married. HR=0.88 (95%CI: 0.22-3.57) for single vs married.
		497808 person-years (men)			Mean follow-up period 12.5 years	: _	Rectum cancers		HR=2.47 (95%CI: 1.40-4.37) for spouse dead vs married. HR=1.32 (95%CI: 0.33-5.34) for divorced/separated vs married. HR=0.75 (95%CI: 0.11-5.43) for single vs married.
		701160 person-years (women)			Mean follow-up period 12.9 years	: _	mortality	_	HR=1.18 (95%CI: 0.63-2.19) for spouse dead vs married. HR=2.87 (95%CI: 1.03-8.01) for divorced/separated vs married. HR=1.88 (95%CI: 0.45-7.76) for single vs married.
		497808 person-years (men)			Mean follow-up period 12.5 years	Ŀ	Liver cancers mortality		HR=0.87 (9%C1: 0.52-1.47) for spouse dead vs married. HR=1.07 (95%C1: 0.44-2.60) for divorced/separated vs married. HR=0.52 (95%C1: 0.13-2.08) for single vs married.
		701160 person-years (women)			Mean follow-up period 12.9 years	E	Liver cancers mortality		HR=1.19 (95%CI: 0.84-1.69) for spouse dead vs married. HR=1.84 (95%CI: 0.86-3.95) for divorced/separated vs married. HR=0.33 (95%CI: 0.05-2.38) for single vs married.
		497808 person-years (men)			Mean follow-up period 12.5 years		Gall bladder cancers	_	HR=1.23 (95%CI: 0.44-3.44) for spouse dead vs married. HR=5.07 (95%CI: 1.57-16.4) for divorced/separated vs married. HR=NA for single vs married.
		701160 person-years (women)			Mean follow-up period 12.9 years		mortality		HR=1.47 (95%CI: 0.82-2.61) for spouse dead vs married. HR=0.80 (95%CI: 0.11-5.82) for divorced/separated vs married. HR=1.13 (95%CI: 0.16-8.24) for single vs married.
		497808 person-years (men)			Mean follow-up period 12.5 years	 :	Pancreas cancers	_	HR=1.31 (95%CI: 0.72-2.37) for spouse dead vs married. HR=1.62 (95%CI: 0.51-5.07) for divorced/separated vs married. HR=1.47 (95%CI: 0.36-5.97) for single vs married.
		701160 person-years (women)			Mean follow-up period 12.9 years		mortality	_	HR=0.56 (95%CI: 0.36-0.86) for spouse dead vs married. HR=1.47 (95%CI: 0.65-3.33) for divorced/separated vs married. HR=0.33 (95%CI: 0.05-2.36) for single vs married.

Author, published year	studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
Sakauchi F. (2007) Asian Pacific J Cancer Prev;8:123- 128	JACC study	497808 person-years (men)	40-79	Prospective cohort	Mean follow-up period 12.5 years	g: Marital Status (married, widowed, divorced/separated, single)	Lung cancers mortality	Age, area	HR=1.05 (95%CI: 0.76-1.45) for spouse dead vs married. HR=0.96 (95%CI: 0.45-2.01) for divorced/separated vs married. HR=1.34 (95%CI: 0.64-2.83) for single vs married.
		701160 person-years (women)			Mean follow-up period 12.9 years	l: 		_	HR=1.10 (95%CI: 0.78-1.55) for spouse dead vs married. HR=0.90 (95%CI: 0.33-2.43) for divorced/separated vs married. HR=2.25 (95%CI: 1.05-4.82) for single vs married.
		497808 person-years (men)			Mean follow-up period 12.5 years	l:	Prostate cancers mortality		HR=1.18 (95%CI: 0.63-2.22) for spouse dead vs married. HR=2.17 (95%CI: 0.69-6.85) for divorced/separated vs married. HR=NA for single vs married.
		497808 person-years (men)			Mean follow-up period 12.5 years		Kidney cancers	_	HR=1.05 (95%CI: 0.25-4.47) for spouse dead vs married. HR=NA for divorced/separated vs married. HR=NA for single vs married.
		701160 person-years (women)			Mean follow-up period 12.9 years	- I:	mortality	_	HR=1.28 (95%CI: 0.32-5.21) for spouse dead vs married. HR=4.61 (95%CI: 0.58-36.8) for divorced/separated vs married. HR=NA for single vs married.
		497808 person-years (men)			Mean follow-up period 12.5 years	- I:	Urothelial tract cancers	_	HR=1.48 (95%CI: 0.67-3.29) for spouse dead vs married. HR=1.22 (95%CI: 0.17-8.83) for divorced/separated vs married. HR=NA for single vs married.
		701160 person-years (women)			Mean follow-up period 12.9 years		mortality		HR=1.01 (95%CI: 0.42-2.41) for spouse dead vs married. HR=3.68 (95%CI: 0.85-16.0) for divorced/separated vs married. HR=NA for single vs married.
		497808 person-years (men)			Mean follow-up period 12.5 years	 l: 	Non-Hodgkin's lymphoma cancers	_	HR=1.82 (95%CI: 0.78-4.26) for spouse dead vs married. HR=1.19 (95%CI: 0.17-8.60) for divorced/separated vs married. HR=4.88 (95%CI: 1.50-15.9) for single vs married.
		701160 person-years (women)			Mean follow-up period 12.9 years		nortality		HR=0.61 (95%CI: 0.27-1.42) for spouse dead vs married. HR=NA for divorced/separated vs married. HR=1.22 (95%CI: 0.17-8.86) for single vs married.
		497808 person-years (men)			Mean follow-up period 12.5 years		Multiple myeloma	_	HR=1.89 (95%CI: 0.57-6.34) for spouse dead vs married. HR=NA for divorced/separated vs married. HR=NA for single vs married.
		701160 person-years (women)			Mean follow-up period 12.9 years		cancers mortality		HR=0.94 (95%CI: 0.40-2.17) for spouse dead vs married. HR=NA for divorced/separated vs married. HR=NA for single vs married.
		497808 person-years (men)			Mean follow-up period 12.5 years	 I:	Myeloid leukemia	_	HR=1.50 (95%CI: 0.35-6.39) for spouse dead vs married. HR=NA for divorced/separated vs married. HR=NA for single vs married.
		701160 person-years (women)			Mean follow-up period 12.9 years	 I:	cancers mortalityeloid leukemia		HR=1.19 (95%CI: 0.44-3.19) for spouse dead vs married. HR=NA for divorced/separated vs married. HR=NA for single vs married.
		701160 person-years (women)			mean follow-up period 12.9 years		Brest cancers mortality	_	HR=1.75 (95%CI: 0.97-3.17) for spouse dead vs married. HR=1.61 (95%CI: 0.50-5.15) for divorced/separated vs married. HR=2.04 (95%CI: 0.64-6.53) for single vs married.
		701160 person-years (women)			mean follow-up period		Cervix uteri cancers mortality	_	HR=0.52 (95%CI: 0.15-1.82) for spouse dead vs married. HR=NA for divorced/separated vs married. HR=3.53 (95%CI: 0.83-15.0) for single vs married.
Cancer morbility									
CVD mortality									RR=2.27 (95%CI: 0.94-5.47) for single vs married.
		5628 (men)					All circulatory system disease mortality		RR=1.24 (95%CI: 0.30-5.07) for divorced vs married. RR=1.57 (95%CI: 0.68-3.62) for widowed vs married.
		5932 (women)					disease mortality	_	RR=2.61 (95%CI: 1.01-6.73) for single vs married. RR=1.34 (95%CI: 0.32-5.61) for divorced vs married. RR=1.50 (95%CI: 0.68-3.31) for widowed vs married.
Iwasaki M et al.(2002) Int J	the Komo-Ise study	5628 (men)	40-69	Prospective cohort	7 years	Marriage	Ischaemic heart disease	Age, area	RR=3.02 (95%CI: 0.64-14.15) for single vs married. RR=2.21 (95%CI: 0.29-16.55) for divorced vs married. RR=2.75 (95%CI: 0.81-9.31) for widowed vs married.
Epidemiol.; 31:1208-1218		5932 (women)			. y	(married, single, divorced, widowed)	mortality		RR=3.29 (95%CI: 0.38-28.11) for single vs married. RR for divorced compared with married and for widowed vs married are not available.
		5628 (men)					Cerebrovascular disease	3	RR=1.94 (95%CI: 0.43-8.81) for single vs married. RR=1.72 (95%CI: 0.23-12.80) for divorced vs married. RR=2.36 (95%CI: 0.71-7.87) for widowed vs married.
		5932 (women)					mortality		RR=1.91 (95%CI: 0.44-8.35) for single vs married. RR=1.23 (95%CI: 0.16-9.31) for divorced vs married. RR=1.86 (95%CI: 0.67-5.18) for widowed vs married.

Author, published year	studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
		37781 (men)					Stroke mortality		RR=1.51 (95%CI: 1.14-2.00) for widowed men vs married men. RR=1.13 (95%CI: 0.53-2.39) for divorced men vs married men. RR=2.29 (95%CI: 1.12-4.69) for single men vs married men.
		52283 (women)					(ICD10: I60-I69)	_	RR=1.10 (95%CI: 0.90-1.35) for widowed women vs married women. RR=1.31 (95%CI: 0.76-2.26) for divorced women vs married women. RR=0.87 (95%CI: 0.38-1.97) for single women vs married women.
Ikeda A et al. (2007) BMC	JACC study	37781 (men)	40-79	Proceeding school	11 years (mean follow-up period: 9.9 years) (892998 person years)	Marital status (married, wodowed, divorced, single)	Coronary heart disease	Age, body mass index, smoking status, alcohol intalke, education, minutes of walking, hours of doing sports,	RR=1.60 (95%CI: 1.07-2.40) for widowed men vs married men. RR=1.73 (95%CI: 0.76-3.90) for divorced men vs married men. RR=3.46 (95%CI: 1.57-7.58) for single men vs married men.
Public Health. 7:73	JACC study	52283 (women)	40-79	Prospective cohort			mortality (ICD10: I20-25)	employment status, stress, having children, history of hypertension, history of diabetes.	RR=1.14 (95%CI: 0.83-1.56) for widowed women vs married women. RR=0.82 (95%CI: 0.29-2.26) for divorced women vs married women. RR=1.07 (95%CI: 0.33-3.46) for single women vs married women.
		37781 (men)					CVD mortality		RR=1.46 (95%CI: 1.20-1.77) for widowed men vs married men. RR=1.50 (95%CI: 0.98-2.29) for divorced men vs married men. RR=2.95 (95%CI: 1.96-4.45) for single men vs married men.
		52283 (women)					(ICD10: 101-199)	RR=1.07 (95%CI: 0.93-1.23) for widowed women vs married women. RR=0.95 (95%CI: 0.62-1.46) for divorced women vs married women. RR=1.47 (95%CI: 0.94-2.30) for single women vs married women.	
		497808 person-years (men)			Mean follow-up period 12.5 years	l: 	Ischemic heart diseases		HR=1.59 (95%CI: 1.17-2.17) for spouse dead vs married HR=1.43 (95%CI: 0.71-2.88) for divorced/separated vs married HR=2.16 (95%CI: 1.07-4.36) for single vs married
Sakauchi F. (2007) Asian Pacific J Cancer Prev;8:123-	JACC study	701160 person-years (women)	40-79	Prospective cohort	Mean follow-up period 12.9 years	_ Marital Status	mortality	−Age, area	HR=0.99 (95%CI: 0.77-1.25) for spouse dead vs married. HR=1.31 (95%CI: 0.67-2.57) for divorced/separated vs married. HR=1.43 (95%CI: 0.67-3.05) for single vs married.
128		497808 person-years (men) 701160			Mean follow-up period 12.5 years	(married, widowed, divorced/separated, single) :	Cerebrovascular diseases mortality		HR=1.20 (95%CI: 0.95-1.52) for spouse dead vs married HR=0.84 (95%CI: 0.43-1.61) for divorced/separated vs married HR=1.65 (95%CI: 0.88-3.08) for single vs married HR=1.14 (95%CI: 0.98-1.33) for spouse dead vs married.
CVD morbility		person-years (women)			Mean follow-up period 12.9 years	l:	uncuses morality		HR=1.31 (95%CI: 0.88-2.05) for divorced/separated vs married. HR=0.96 (95%CI: 0.83-2.05) for divorced/separated vs married. HR=0.96 (95%CI: 0.53-1.74) for single vs married.
-		24162 (men)					Total stroke incidence		HR=1.26 (95%CI: 1.13-1.41) for having marital transition vs not having.
	-	25626 (women) 24162 (Cobort study (men) 45.4			Median follow-up period: 15.0 years	Marital transition (no: continuously lived with their spouse from pre baseline, yes: stopped living with their spouse before baseline)	Total stroke incidence	_	HR=1.26 (95%CI: 1.09-1.45) for having marital transition vs not having.
Honjo K et al. (2016)	JPHC Cohort study		nen) 45-64	Prospective cohort				HR=1.48 (95%CI: 1.24-1.78) for having marital transition vs not having.	
Stroke;47:991-998	of the conort study	25626 (women)	43-04	Prospective conort			Ischemic stroke	(with child, parent, and others)	HR=1.35 (95%CI: 1.10-1.65) for having marital transition vs not having.
		24162 (men)							HR=1.16 (95%CI: 1.01-1.10) for having marital transition vs not having.
Self-rated Health		25626 (women)					incidence		HR=1.16 (95%CI: 0.95-1.42) for having marital transition vs not having.
		25.42							OR=1.06 (95%CI: 0.46-2.48) for Separated vs Married.
		2542 (men)							OR=1.61 (95%CI: 1.09-2.38) for Divorced vs Married. OR=0.82 (95%CI: 0.61-1.11) for Widowed vs Married.
Wang Net al. (2005) J Epidemiol. 5:155-162.	the Komo-Ise study		47-77	Prospective cohort	_	Marital status (married, single, widowed, divorced)	Self-reported fair or poor health	Age, area	OR=1.44 (95%CI: 1.10-1.89) for Single vs Married. OR=1.20(95%CI: 0.57-2.49) for Separated vs Married.
		2634 (women)							OR=1.28 (95%CI: 0.93-1.75) for Divorced vs Married. OR=1.09 (95%CI: 0.93-1.29) for Widowed vs Married.
		(women)							OR=1.014(95%CI: 0.87-1.49) for Single vs Married.
Psycholgoical distress/depr		20030					Stress		OR=0.82 (95%CI: 0.75-0.88) for single vs married.
Fukuda Y et al. (2005) BMC	The Comprehensive Survey of the Living Conditions of People on	(men)	25.50	Constant and		Marital status	(question: "Do you have any stress or	Age,occupation, income, per capita income,	OR=0.97 (95%CI: 0.67-1.41) for widow vs married. OR=1.06 (95%CI: 0.88-1.27) for divorced vs married.
Public Health	Health and Welfare (2001)	21076 (women)	25-59	Cross sectional	_	(married, single, widowed, divorced)	worries in your daily life?" ansews: "yes" defined as being stressed.)	unemployment(%)	OR=0.73 (95%CI: 0.66-0.80) for single vs married. OR=0.92 (95%CI: 0.76-1.11) for widow vs married. OR=1.16 (95%CI: 1.01-1.34) for divorced vs married.
Smoking									
		<u>-</u>	18-54	<u>—</u>					Total OR=0.81 (95%CI: 0.75-0.87) for other vs married.
		20206	18-24						18-24 years old OR=0.32 (95%CI: 0.21-0.49) for other vs married.
		(men)	25-39	_					25-39 years old OR=0.68 (95%CI: 0.61-0.76) for other vs married.
Fukuda Y et al. (2005) Ann	The Comprehensive Survey of the Living	The Comprehensive 40-54 Survey of the Living additions of People on Health and Welfare 18-54	Cross sectional		Employment status	Current smoker:"smoke every day"or " smoke		40-54 years old OR=1.17 (95%CI: 1.03-1.32) for other vs married.	
Epidemiol; 15:365-372	Health and Welfare		Cross sectional	_	(unemployed, employed)	on occasion but not every day.	Age, residence area, marital status,income, other smoker	Total OR=1.42 (95%CI: 1.29-1.56) for other vs married.	
	(2001)	18-24						18-24 years old OR=0.49 (95%CI: 0.36-0.67) for other vs married.	
		25-39	_				25-39 years old OR=1.31 (95%CI: 1.14-1.51) for other vs married.		
		<u> </u>	40-54						40-54 years old OR=2.53 (95%CI: 2.15-2.97) for other vs married.

Author, published year	studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
Fukuda Y et al. (2005) BMC Public Health	The Comprehensive Survey of the Living Conditions of People on – Health and Welfare (2001)	20030 (men) 21076 (women)	25-59	Cross sectional	=	Marital status (married, single, widowed or divorced)	Current smoker:"smoke every day"or " smoke on occasion but not every day.	Age,occupation, income, per capita income, unemployment(%)	OR=0.72 (95%CI: 0.66-0.78) for single vs married. OR=1.35 (95%CI: 0.93-1.95) for widow vs married. OR=1.89 (95%CI: 0.55-2.31) for divorced vs married. OR=1.00 (95%CI: 0.89-1.14) for single vs married. OR=1.07 (95%CI: 0.82-1.40) for widow vs married. OR=2.67 (95%CI: 2.30-3.09) for divorced vs married.
Hu L et al. (2007) J Occup Health. 49(6);443-52.	Annual survey on health, lifestyle habits and work stress among civil servants	707 (men) 598 (women)	20-64	Cross sectional	_	Marital status (married, single, other (divorced, separated, widowed))	Smoking (current smoker)	Unadjuted	OR=0.50 (95%CI: 0.28-0.91) for single vs married. OR=1.39 (95%CI: 0.53-3.66) for other vs married. OR=4.35 (95%CI: 1.88-10.05) for single vs married. OR=4.68 (95%CI: 1.60-13.66) for other vs married.
Alcohol intake									
Fukuda Y et al. (2005) BMC Public Health	The Comprehensive Survey of the Living Conditions of People on – Health and Welfare (2001)	20030 (men) 21076 (women)	25-59	Cross sectional	-	Marital status (married, single, widowed or divorced)	Excess alcohol consumption (more than 2.0 "gou" per day (one "gou" is a measure of 180 ml of Japanese sake, contains almost 20g of ethanol))	Age,occupation, income, per capita income, unemployment(%)	OR=0.6209%CI: 0.56-0.68) for single vs married. OR=0.8309%CI: 0.55-1.25) for widow vs married. OR=1.10(95%CI: 0.91-1.33) for divorced vs married. OR=1.00 (95%CI: 0.82-1.21) for single vs married. OR=0.76 (95%CI: 0.49-1.19) for widow vs married. OR=1.68 (95%CI: 1.33-2.11) for divorced vs married.
Hasegawa T et al. (2013) Industrial Health. 51:490-500.	Hamamatsu Survey on Mental Health and Measures against Suicide in2008 –	298 (men) 285 (woman)	15-79	Cross sectional	-	Marital status (married, single, separated)	Problem drinking (The CAGE questionnaire: we defined problem drinking as alcohol dependence and alcoho abuse/hamful drinking proven to be detected by CAGE questionnaire under selfadministered questionnaire)	-	OR=0.36 (95%CI: 0.11–1.20) for single vs married OR=0.27 (95%CI: 0.03–2.42) for separated vs married OR=0.84 (95%CI: 0.10–7.00) for single vs married OR=5.03 (95%CI: 0.72–35.4) for separated vs married
Table6. Residence characte	r and health outcome								
Author, published year	studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
Murata C et al. (2005) J Epidemiol. 15:78-84.	- - -	541 (men) 694 (women) 295 (men) 464 (women)	65-74 ≦75	Prospective cohort — (Residents in Matsukaw Nagano Prefecture.)	4 years va. (100 person-years)	Social relationships (living arrangement)	All cause mortality	Age, self-rated health, diagnosed illness, other social relationships, annual income, and home ownership	HR=0.87 (95%CI: 0.12-6.50) for living alone vs multi-generation household. HR=0.96 (95%CI: 0.55-1.68) for living couple vs multi-generation household. HR=0.42 (95%CI: 0.10-1.84) for living alone vs multi-generation household. HR=1.01 (95%CI: 0.49-2.07) for living couple vs multi-generation household. HR=0.49 (95%CI: 0.12-2.03) for living alone vs multi-generation household. HR=0.35 (95%CI: 0.49-1.48) for living couple vs multi-generation household. HR=0.35 (95%CI: 0.19-1.97) for living alone vs multi-generation household. HR=0.10 (95%CI: 0.19-1.97) for living couple vs multi-generation household.
Sato T et al. (2008) Arch Gerontol Geriatr. 47(3)327- 39.	Residental census data of a rural town in Hokkaido	285 (men) 352 (women)	68-82	Prospective cohort	12 years	Social network (living arrangement; cohabitation, alone) *The living arrangement was either "living alone" or "cohabitation".	All cause mortality	Age,ADL,IADL,incontinence,cerebral apoplexy,self-rated health, depression,exercise, health practices	HR=0.48 (95%CI: 0.22-1.06) for cohabitation vs living alone. HR=0.86 (95%CI: 0.41-1.78) for cohabitation vs living alone.
Ikeda A et al. (2009) Heart;95:577-583	JPHC Cohort Study -	43393 (men)	40-69	Prospective cohort	median follow-up period: 11.0 years	Living arrangement (alone, spouse, spouse+parent spouse+child, spouse+child+parent, parent, child, child+parent, others)		Age, public health center area, stress, health behavior variables (smoking, alcohol drinking, psysical activity, body mass index)	HR=1.09 (95%CI: 0.92-1.31) for living alone vs living with spouse only.
		47594 (women)							HR=0.76 (95%C: 0.87-1.03) for Iving with spouse and parent vs Iiving with spouse only. HR=0.98 (95%C: 0.85-1.07) for Iving with spouse, and child vs Iiving with spouse only. HR=0.88 (95%C: 0.73-1.06) for Iving with spouse, child and parent vs Iiving with spouse only. HR=1.88 (95%C: 1.46-2.42) for Iving with parent vs Iiving with spouse only. HR=1.04 (95%C: 0.90-1.20) for Iving with child vs Iiving with spouse only. HR=1.01 (95%C: 0.75-1.37) for Iving with child vs Iiving with spouse only. HR=1.9 (95%C: 0.97-1.73) for Iving others compared to Iving with spouse only.
Iwasaki M et al.(2002) Int J Epidemiol.; 31:1208-1218	the Komo-Ise study -		40-69	Prospective cohort	7 years	Household size per each additional person	All cause mortality	Age, area, occupation, educational background, smoking habit, alcohol consumption, body mass index, chronic disease	HR=0.95 (95%CI: 0.85-1.07) for living with spouse and child vs living with spouse only. HR=0.88 (95%CI: 0.73-1.06) for living with spouse, child and parent vs living with spouse only. HR=1.88 (95%CI: 1.46-2.42) for living with parent vs living with spouse only. HR=1.04 (95%CI: 0.90-1.20) for living with child vs living with spouse only. HR=1.01 (95%CI: 0.75-1.37) for living with child and parent vs living with spouse only.

Author, published year	studycohort name	Sample size	Age at entry	Study design	Follow-up years	Measures	Outcome	Adjusted variables	Relative risk
Cancer morbility									
EVD mortality Ikeda A et al. (2009) Heart:95:577-583	JPHC Cohort Study	43393 (men)	40-69	Prospective cohort	median follow-up period: 11.0 years	Living arrangement (alone, spouse, spouse+paren spouse+child, spouse+child+parent, parent, child,		Age, public health center area, stress, health behavior variables (smoking, alcohol drinking, psysical activity, body	HR=1.43 (95%CI: 0.73-2.81) for living alone vs living with spouse only. HR=0.57 (95%CI: 0.23-1.42) for living with spouse and parent vs living with spouse only. HR=1.11 (95%CI: 0.79-1.57) for living with spouse and child vs living with spouse only. HR=1.00 (95%CI: 0.31-8.0) for living with spouse, child and parent vs living with spouse only. HR=2.02 (95%CI: 1.03-3.98) for living with parent vs living with spouse only. HR=1.54 (95%CI: 0.82-2.65) for living with child vs living with spouse only. HR=0.81 (95%CI: 0.25-2.65) for living with child and parent vs living with spouse only. HR=3.78 (95%CI: 1.95-7.32) for living others compared to living with spouse only.
Heart, 955 / 1-365		47594 (women)		·		child+parent, others)	moratamy	mass index)	HR=2.72 (95%CI: 1.37-5.38) for living alone vs living with spouse only. HR=1.45 (95%CI: 0.42-4.97) for living with spouse and parent vs living with spouse only. HR=1.26 (95%CI: 0.96-2.0) for living with spouse and child vs living with spouse only. HR=1.00 (95%CI: 0.36-2.79) for living with spouse, child and parent vs living with spouse only. HR=4.94 (95%CI: 0.95-3.62) for living with parent vs living with spouse only. HR=1.85 (95%CI: 0.95-3.62) for living with child vs living with spouse only. HR=2.73 (95%CI: 0.78-9.51) for living with child and parent vs living with spouse only. HR=0.80 (95%CI: 0.11-6.00) for living others compared to living with spouse only.
		5628 (men)					CVD mortality		RR=0.94 (95%CI: 0.81-1.09) for per each additional person.
		5932 (women)						_	RR=0.87 (95%CI: 0.69-1.09) for per each additional person.
Iwasaki M et al.(2002) Int J	the Komo-Ise study	5628 (men)	40-69	Prospective cohort	7 years	Household size per each additional person	Ischemic heart disease	Age, area, occupation, educational background, smoking habit, alcohol consumption, body mass index, chronic	RR=0.81 (95%CI: 0.60-1.10) for per each additional person.
Epidemiol.; 31:1208-1218		5932 (women) 5628		-	-		mortality	disease	RR=0.83 (95%CI: 0.48-1.44) for per each additional person.
		5028 (men) 5932					Cerebrovascular		RR=0.88 (95%CI: 0.69-1.13) for per each additional person.
CVD morbility		(women)					diseases mortality		RR=0.94 (95%CI: 0.67-1.32) for per each additional person.
Ikeda A et al. (2009) Heart;95:577-583	JPHC Study	43393 (men)	40-69	Prospective cohort	median follow-up period: 11.0 years	Living arrangement (alone, spouse, spouse+paren spouse+child, spouse+child+parent, parent, child, child+parent, others)		Age, public health center area, stress, health behavior variables (smoking, alcohol drinking, psysical activity, body mass index)	HR=1.23 (95%CI: 0.74-2.02) for living alone vs living with spouse only. HR=1.09 (95%CI: 0.54-1.50) for living with spouse and parent vs living with spouse only. HR=1.04 (95%CI: 0.83-1.35) for living with spouse, child and parent vs living with spouse only. HR=1.06 (95%CI: 0.76-1.41) for living with spouse, child and parent vs living with spouse only. HR=1.06 (95%CI: 0.63-1.81) for living with spouse, child and parent vs living with spouse only. HR=0.84 (95%CI: 0.52-1.37) for living with child vs living with spouse only. HR=0.17 (95%CI: 0.63-2.16) for living with child and parent vs living with spouse only. HR=1.71 (95%CI: 0.13-1.29) for living others compared to living with spouse only. HR=3.03 (95%CI: 0.92-3.39) for living alone vs living with spouse only. HR=3.03 (95%CI: 1.33-3.35) for living with spouse and parent vs living with spouse only. HR=2.00 (95%CI: 1.13-3.35) for living with spouse and child vs living with spouse only. HR=2.00 (95%CI: 1.01-34) for living with spouse, child and parent vs living with spouse only.
Self-rated Health		(women)							HR=0.70 (5%CI: 0.09-5.17) for living with parent vs living with spouse only. HR=0.00 (95%CI: 1.16-3.43) for living with child vs living with spouse only. HR=1.17 (95%CI: 0.07-4.06) for living with child vs living with spouse only. HR=0.55 (95%CI: 0.07-4.06) for living with child and parent vs living with spouse only.
Sen-rated Health		2542						Age, area, education, occupation, marital status, house hold	OR=1.03 (95%CI: 0.97-1.09) for per each additional person.
Wang Net al. (2005) J Epidemiol. 5:155-162.	the Komo-Ise study	(men) 2634 (women)	47-77	Prospective cohort	7 years	Household size: per each additional person	Self-reported fair or poor health	house hold income, physical activity, sleeping alcohol habit smoking habit, check-up, BMI, social isolation, social support factors.	OR=0.96 (95%CI: 0.96-1.08) for per each additional person.
Psycholgoical distress/depre	ession								OR MARK ENGLY Managed and Conference of the Conf
Kikuchi H et al. (2014) Soc Psychiatry Psychiatr Epidemiol. 49;823-830		931 (men) 876	65-74	Cross sectional (Community residents living in three Japanese municipallities: Bunkyo		Living arrangement (living with spouse only, living with spouse and other family, living with other family without spouse, living alone)	g High nonspecific psychological distress (K6≧5)	Age, residence, education, employment status, physical limitation, moderate to vigorous physical activity	OR=NA for living with spouse and other family vs living with spouse only OR=2.85 (95%CI: 1.51-5.39) for living with other family without spouse vs living with spouse only. OR=1.99 (95%CI: 1.15-3.46) for living alone vs living with spouse only. OR=1.53 (95%CI: 1.03-2.28) for living with a spouse and other family vs living with spouse only. (p<0.05)
		(women)		ward, Fuchu city, Oyam town)	a		•		OR=NA for living with other family without spouse vs living with spouse only. OR=1.81 (95%CI: 1.08-3.05) for living alone vs living with spouse only.
Kikuchi H et al. (2013)		971 (men)	65-74	Cross sectional study (Community residents living in three Japanese		Living arrangements (living with others, living	Psychological distress	Age, group, area, education attainment, employment status,	OR=1.55 (95%CI: 0.94-2.56) for living alone vs living with others.
Psychogeriatrics. 13:229-236		923 (women)	05-74	municipallities: Bunkyo ward, Fuchu city, Oyam town)	_	alone)	(K6≧5)	physical limitation (Japanese version of eight-item short- form health survey)	OR=1.49 (95%CI: 0.94-2.36) for living alone vs living with others.
Smoking									

社会決定要因	健康指標	検索式
	死亡·罹患	japan[ad] AND "Educational Status"[mh] AND ("mortality"[mh] OR "morbidity"[mh]) NOT "animals"[mh:noexp] AND English[lang] NOT (Case Reports[ptyp] OR Clinical Study[ptyp] OR Review[ptyp] OR systematic[sb] OR Letter[ptyp] OR Guideline[ptyp] OR
教育歴	その他	Editorial[ptyp] OR Comment[sb] OR Clinical Trial[ptyp] OR Meta-Analysis[ptyp]) japan[ad] AND "Educational Status"[mh] AND ("mental disorders"[mh] OR "stress, psychological"[mh] OR "smoking"[mh] OR "drinking behavior"[mh]) NOT "animals"[mh:noexp] AND English[lang] NOT (Case Reports[ptyp] OR Clinical Study[ptyp]
		OR Review[ptyp] OR systematic[sb] OR Letter[ptyp] OR Guideline[ptyp] OR Editorial[ptyp] OR Comment[sb] OR Clinical Trial[ptyp] OR Meta-Analysis[ptyp])
		japan[ad] AND "Income"[mh] AND ("mortality"[mh] OR "morbidity"[mh])
所得•収入	その他	japan[ad] AND "Income"[mh] AND ("mental disorders"[mh] OR "stress, psychological"[mh] OR "smoking"[mh] OR "drinking behavior"[mh]) NOT "animals"[mh:noexp] AND English[lang]
	死亡·罹患	japan[ad] AND "Occupations"[mh] AND ("mortality"[mh] OR "morbidity"[mh]) NOT "animals"[mh:noexp] AND English[lang]
職業	その他	japan[ad] AND "Occupations"[mh] AND ("mental disorders"[mh] OR "stress, psychological"[mh] OR "smoking"[mh] OR "drinking behavior"[mh]) NOT "animals"[mh:noexp] AND English[lang]
	死亡·罹患	japan[ad] AND "Employment"[mh] AND ("mortality"[mh] OR "morbidity"[mh]) NOT "animals"[mh:noexp] AND English[lang]
雇用形態	その他	japan[ad] AND "Employment"[mh] AND ("mental disorders"[mh] OR "stress, psychological"[mh] OR "smoking"[mh] OR "drinking behavior"[mh]) NOT "animals"[mh:noexp] AND English[lang]
	死亡·罹患	japan[ad] AND "Marital Status"[mh] AND ("mortality"[mh] OR "morbidity"[mh]) NOT "animals"[mh:noexp] AND English[lang]
婚姻形態		japan[ad] AND "Marital Status"[mh] AND ("mental disorders"[mh] OR "stress, psychological"[mh] OR "smoking"[mh] OR "drinking behavior"[mh]) NOT "animals"[mh:noexp] AND English[lang]
	死亡·罹患	japan[ad] AND "Residence Characteristics"[mh] AND ("mortality"[mh] OR "morbidity"[mh]) NOT "animals"[mh:noexp] AND English[lang]
居住形態	その他	japan[ad] AND "Residence Characteristics"[mh] AND ("mental disorders"[mh] OR "stress, psychological"[mh] OR "smoking"[mh] OR "drinking behavior"[mh]) NOT "animals"[mh:noexp] AND English[lang]
	死亡·罹患	japan[ad] AND "Social Support"[mh] AND ("mortality"[mh] OR "morbidity"[mh]) NOT "animals"[mh:noexp] AND English[lang]
ソーシャルサポー	その他	japan[ad] AND "Social Support"[mh] AND ("mental disorders"[mh] OR "stress, psychological"[mh] OR "smoking"[mh] OR "drinking behavior"[mh]) NOT "animals"[mh:noexp] AND English[lang]