

Supplementary Materials: Air Pollution and Otitis Media in Children: A Systematic Review of Literature

Summary of Assessed Quality of Included Studies

Table S1. Study quality using Newcastle-Ottawa Quality Assessment Scale for cohort studies.

Study Name and the Author	Representativeness	Selection of Non-Exposed Cohorts	Ascertainment of Exposure	Outcome of Interest not Present at Start	Comparability †	Assessment of Outcome	Adequate Follow up Time	Adequate Follow up of Cohorts	Score/10
Aguilera, Pedersen [1])	*	*	*	*	**	-	*	*	8
Brauer, Gehring [2]	*	*	*	*	**	-	*	*	8
Deng, Lu [3])	*	*	-	*	**	-	*	*	7
Deng, Lu [4])	*	*	-	*	**	-	*	*	7
Dostal, Prucha [5])	*	*	-	*	*	*	*	*	7
Jedrychowski, Galas [6])	*	*	*	*	**	-	*	*	8
MacIntyre, Gehring [7])	*	*	*	*	**	**	*	*	9
Brauer, Karr [8])	*	*	*	*	**	*	*	*	9
Pettigrew, Gent [9]	*	*	-	*	**	*	-	-	6

† Key confounders identified: socio-economic status and maternal smoking.

Table S2. Exposure to NO₂, PM_{2.5}, PM_{2.5} absorbance or PM₁₀ and otitis media in children – summary results of cohort studies.

Study and Sample Size	Exposure Window	Level of Exposure NO ₂	OR/RR and 95% CI NO ₂	Level of Exposure PM _{2.5}	OR/RR and 95% CI PM _{2.5}	Level of Exposure PM _{2.5} Absorbance	OR/RR and 95% CI PM _{2.5} Absorbance	Level of Exposure PM ₁₀ Absorbance	OR/RR and 95% CI PM ₁₀ Absorbance
Aguilera, Pedersen (1) INMA <i>n</i> = 2199 *	Entire prenatal	10 µg/m ³	1.18 (0.98, 1.41)	N/A	N/A	N/A	N/A	N/A	N/A
	1st trimester	10 µg/m ³	1.11 (0.99, 1.24)	N/A	N/A	N/A	N/A	N/A	N/A
	2nd trimester	10 µg/m ³	1.16 (0.98, 1.37)	N/A	N/A	N/A	N/A	N/A	N/A
	3rd trimester	10 µg/m ³	1.12 (0.98, 1.29)	N/A	N/A	N/A	N/A	N/A	N/A
	1st year of life	10 µg/m ³	1.15 (1.01, 1.31)	N/A	N/A	N/A	N/A	N/A	N/A
Brauer, Gehring (2) PIAMA <i>n</i> = 2984 (1 st year) <i>n</i> = 2970 (2 nd year)	1st year of life	3 µg/m ³	1.17 (1.03,1.34)	10 µg/m ³	1.13 (0.98, 1.32)	0.5 µg/m ³	1.11 (0.98, 1.26)	N/A	N/A
	1st 2 years of life	3 µg/m ³	1.14 (1.03,1.27)	10 µg/m ³	1.13 (1.00, 1.27)	0.5 µg/m ³	1.10 (1.00, 1.22)	N/A	N/A
Brauer, Gehring (2) LISA <i>n</i> = 620 (1 st year) <i>n</i> = 605 (2 nd year)	1st year of life	3 µg/m ³	1.09 (0.78,1.54)	10 µg/m ³	1.19 (0.73, 1.92)	0.5 µg/m ³	1.12 (0.83, 1.51)	N/A	N/A
	1st 2 years of life	3 µg/m ³	1.14 (0.87,1.49)	10 µg/m ³	1.24 (0.84, 1.83)	0.5 µg/m ³	1.10 (0.86, 1.41)	N/A	N/A
Deng, Lu (3) <i>n</i> = 1617	prenatal	12 µg/m ³	1.10 (0.76, 1.60)	N/A	N/A	N/A	N/A	7 µg/m ³	0.95 (0.73, 1.23)
	postnatal	13 µg/m ³	1.16 (0.73, 1.83)	N/A	N/A	N/A	N/A	6 µg/m ³	1.36 (0.95, 1.94)
Deng, Lu (4) <i>n</i> = 1617	1st trimester	17 µg/m ³	0.89 (0.57, 1.37)	N/A	N/A	N/A	N/A	15 µg/m ³	0.91 (0.67, 1.26)
	2nd trimester	15 µg/m ³	1.20 (0.83, 1.74)	N/A	N/A	N/A	N/A	14 µg/m ³	1.03 (0.77, 1.39)
	3rd trimester	14 µg/m ³	1.10 (0.77, 1.56)	N/A	N/A	N/A	N/A	16 µg/m ³	0.89 (0.65, 1.22)
MacIntyre, Karr (10) British Colombia <i>n</i> = 45,513	During birth	10 µg/m ³	1.09 (1.07, 1.12)	1.8 µg/m ³	0.91 (0.89, 0.93)	1.1 µg/m ³	0.94 (0.93, 0.96)	N/A	N/A
MacIntyre, Gehring (7) BAMSE, <i>n</i> = 3,821 GASPII, <i>n</i> = 678 INMA Asturias, <i>n</i> = 360 INMA Gipuzkoa, <i>n</i> = 437 INMA Sabadell, <i>n</i> = 402 INMA Valencia, <i>n</i> = 559 LISA South, <i>n</i> = 3,321 LISA North, <i>n</i> = 2,460 PIAMA, <i>n</i> = 3,475 Combined	During birth	10 µg/m ³	1.01 (0.81, 1.27)	5 µg/m ³	0.95 (0.66, 1.38)	1 unit	1.19 (0.63, 2.21)	10 µg/m ³	0.94 (0.78, 1.14)
	During birth	10 µg/m ³	1.02 (0.84, 1.23)	5 µg/m ³	0.75 (0.46, 1.22)	1 unit	0.79 (0.55, 1.12)	10 µg/m ³	0.84 (0.59, 1.2)
	During birth	10 µg/m ³	1.1 (0.89, 1.36)	N/A	N/A	N/A	N/A	N/A	N/A
	During birth	10 µg/m ³	1.64 (1.03, 2.63)	N/A	N/A	N/A	N/A	N/A	N/A
	During birth	10 µg/m ³	0.94 (0.76, 1.15)	5 µg/m ³	0.8 (0.34, 1.87)	1 unit	0.87 (0.53, 1.43)	10 µg/m ³	1.06 (0.56, 1.98)
	During birth	10 µg/m ³	1.13 (0.95, 1.34)	N/A	N/A	N/A	N/A	N/A	N/A
	During birth	10 µg/m ³	1.05 (0.86, 1.29)	5 µg/m ³	1.06 (0.58, 1.94)	1 unit	1.08 (0.63, 1.87)	10 µg/m ³	1.23 (0.73, 2.07)
	During birth	10 µg/m ³	0.9 (0.33, 2.44)	5 µg/m ³	0.85 (0.13, 5.42)	1 unit	2.47 (0.51, 12)	10 µg/m ³	1.21 (0.11, 14)
	During birth	10 µg/m ³	1.15 (1.03, 1.29)	5 µg/m ³	2.06 (1.25, 3.39)	1 unit	1.42 (1.06, 1.91)	10 µg/m ³	1.61 (0.86, 3.01)
	During birth	10 µg/m ³	1.09 (1.02, 1.16)	5 µg/m ³	1.06 (0.75, 1.49)	1 unit	1.08 (0.83, 1.39)	10 µg/m ³	0.98 (0.84, 1.14)

Table S3. Study quality using Newcastle-Ottawa Quality Assessment Scale for case-control and case-crossover studies.

Study Name and the Author	Adequate Case Definition	Representativeness of Cases	Selection of Controls	Definition of Controls	Comparability †	Assessment of Exposure	Method of Ascertainment	Nonresponse Rate	Score/10
Daigler, Markello [11] †	*	-	*	*	-	-	*	*	5
da Costa, Navarro [12] †	*	*	*	*	-	-	*	*	5
Xiao, Liu [13] †	*	*	*	*	**	*	*	*	9
Kousha and Castner[14] †	*	*	*	*	**	*	*	*	9
Strickland, Hao [15] †	*	*	*	*	**	*	*	*	9
Zemek, Szyszkowicz [16] †	*	*	*	*	**	*	*	*	7

† Key confounders identified: socio-economic status and maternal smoking

Table S4. Study quality of time series studies using quality assessment tool adapted from Zaza et al (Maximum score in brackets).

Study Name and the Author	Study Design (7)	Population Eligibility and Sampling Described (4)	Valid and Reliable Exposure Measures (2)	Valid and Reliable Outcome Measures (2)	Appropriate Statistical Methods (3)	Multilevel Analyses (2)	Interpretation (1)	Confounding and Bias Addressed (3)	Score/23
Gestro, Condemini [17]	2	4	2	2	3	2	1	3	19

Table S5. Study quality using Newcastle-Ottawa Quality Assessment Scale for cross-sectional studies.

Study Name and the Author	Representativeness	Sample Size	Non-Respondents	Ascertainment of Exposure	Comparability †	Assessment of Outcome	Statistical Test	Score/10
Harvey [18]	*	-	-	-	-	**	-	3
Bhattacharyya and Shapiro [19]	*	*	-	*	-	*	*	5
Bhopal, Phillimore [20]	*	*	-	*	-	-	*	4
Heinrich, Hoelscher [21]	*	*	-	*	**	-	*	6
Heinrich, Hoelscher [22]	*	*	-	*	**	-	*	6
Sprem and Branica [23]	-	-	-	*	-	**	-	3
Ribeiro and Cardoso [24]	*	-	*	*	-	-	*	4
Holtby, Elliott [25]	*	*	*	-	-	*	-	4

† Key confounders identified: socio-economic status and maternal smoking

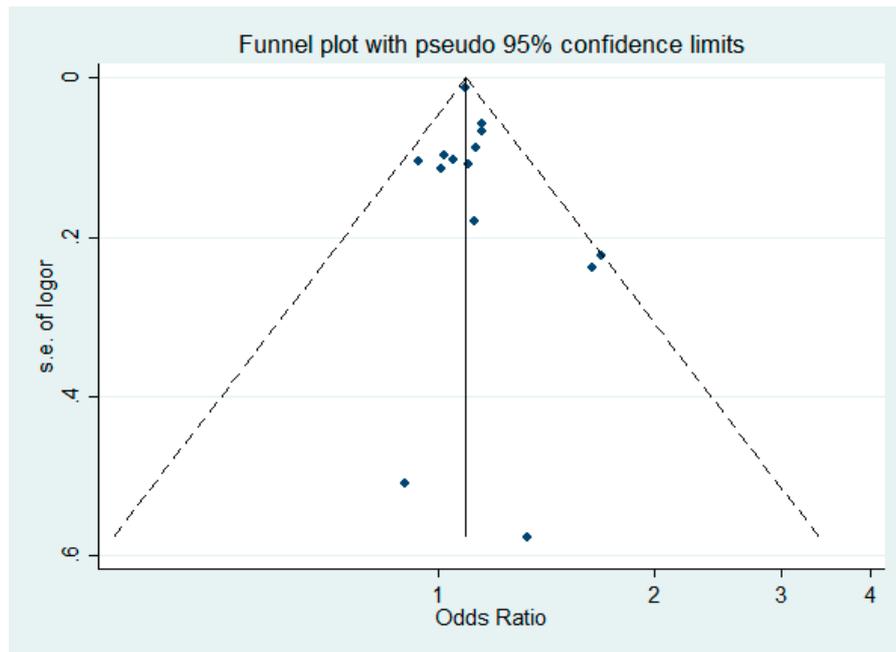


Figure S1. Funnel plot for the studies investigating associations between birth or first year of life NO₂ exposure and subsequent otitis media in children.

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