Supplementary Materials: Diabetes and Hypertension Consistently Predict the Presence and Extent of Coronary Artery Calcification in Symptomatic Patients: A Systematic Review and Meta-Analysis

Rachel Nicoll, Ying Zhao, Pranvera Ibrahimi, Gunilla Olivecrona and Michael Henein

Table S1. Meta-analysis: Pooled risk factors and their ORs predicting CAC presence excluding Kovacic et al.

Risk Factors	Pooled OR (95% CI)	P for Overall Effect	Studies	Patient	Egger's Test		
				Numbers	Intercept	t Value	<i>p</i> -Value
Age (years)	1.07 (1.00–1.04)	0.04	[10,14,18]	1163	-	-	-
Male gender (yes/no)	1.74 (1.38–2.20)	<0.00001	[12,14,16–18]	11,594	-0.80	0.92	0.46
Hypertension (yes/no)	1.89 (1.59–2.23)	<0.00001	[10-12,14,16-18]	12,682	-0.21	0.12	0.91
Diabetes mellitus (yes/no)	1.45 (1.18–1.78)	<0.00001	[10-12,14,16-18]	12,682	-0.81	0.37	0.73
Smoking (yes/no)	1.53 (0.82–2.86)	0.18	[10-12,14,16-18]	12,682	5.89	1.35	0.25
Dyslipidaemia (yes/no)	1.60 (0.56–4.51)	0.38	[10,12,16,17]	10,853	2.87	1.39	0.39

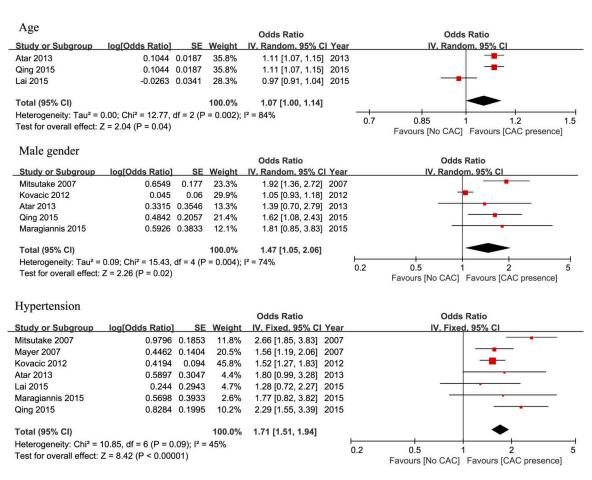


Figure S1. Cont.

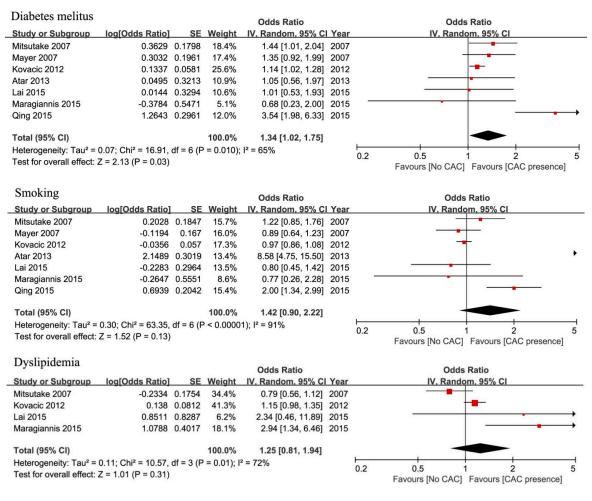


Figure S1. Forest Plots. Age (OR = 1.07, p = 0.04), male gender (OR = 1.47, p = 0.02), hypertension (OR = 1.71, p < 0.00001), and diabetes (OR = 1.34, p = 0.03) were predictive for CAC presence. Smoking and dyslipidaemia were not predictive.

Male gender

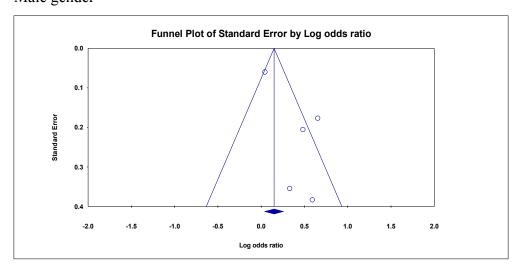
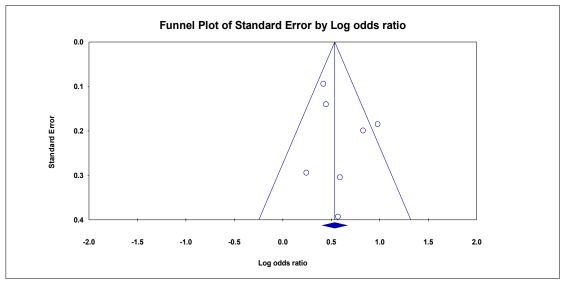
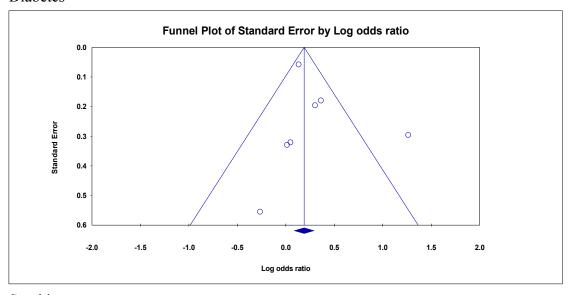


Figure S2. Cont.

Hypertension



Diabetes



Smoking

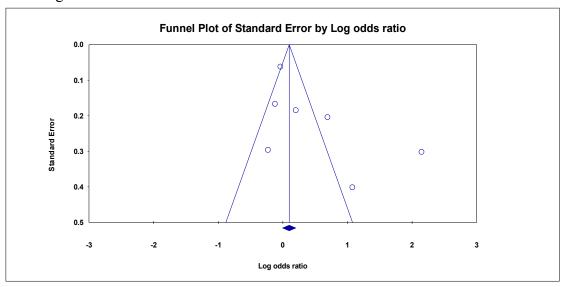


Figure S2. Cont.

Dyslipidaemia

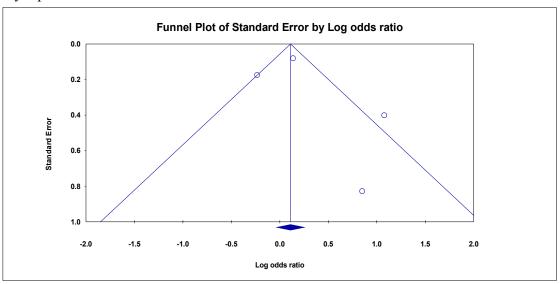


Figure S2. Funnel Plots.