Supplementary Table 1 Characteristics of the included studies

Study and Publication year	Country	Study design	Sample size (cases/ controls)	Sex (M/F)	Mean Age (years)	Phenotype	Mutation or polymorphisms	Cases			Controls			HWE	Method
								aa	ab*	bb	aa	ab	bb		
Yu/2011[9]	China	Case-control	611(286/325)	Cases: 214/72 Controls: 172/153	Cases: 56.3 Controls: 55.79	CHD	T-455C	90	131	47	112	157	54	Yes	Real-time fluorescence quantitative PCR
							C-482T	89	131	48	112	159	52	Yes	
Sediri/2011[10]	Tunisia	Case-control	687(326/361)	Cases: 326/0 Controls: 361/0	Cases: 53.8 Controls: 51.1	MI	Sst I	266	53	7	315	45	1	Yes	PCR-RFLP
Abd El-Aziz/2011[12]	Egypt	Case-control	300(200/100)	Cases: 67/33 Controls: 32/18	Cases: 52.9 Controls: 50.7	MI	Sst I	150	42	8	70	10	20	Yes	PCR-RFLP
AshokKumar/2010[15]	India	Case-control	832(416/416)	Cases: 322/94 Controls: 315/101	Cases: 53.23 Controls: 53.59	CHD	Sst I	189	193	34	218	176	22	Yes	PCR-RFLP

Bhanushali/2010[11]	India	Case-control	240(50/190)	Cases: 82/8 Controls: 146/44	Cases: 47 Controls: 48	CHD	Sst I	-	-	-	-	-	-	Yes	PCR-RFLP
Muendlein/2008[16]	Austria	Cross-section	557(332/225)	Cases: 264/68 Controls: 123/102	Cases: 62.5 Controls: 61.5	CHD	C-482T	162	143	27	117	87	21	Yes	Real-time fluorescence quantitative PCR
Martinelli/2007[17]	Italy	Case-control	913(669/244)	Cases: 544/125 Controls: 168/76	Cases: 60.7 Controls: 58.7	CHD	T-455C	244	300	125	97	118	29	Yes	Immobilized oligonucleotide probes array
Dallongeville/2006[18]	France	Case-control	917(442/475)	Cases: 442/0 Controls: 475/0	Cases: 35-64 Controls: 35-64	CHD and MI	C-482T	237	155	35	255	185	31	Yes	PCR-RFLP
Tobin/2004[19]	UK	Case-control	1054(549/505)	Cases: 372/177 Controls: 313/192	Cases: 61.9 Controls: 58.6	MI	C-482T	291	233	23	283	193	29	Yes	Immobilized oligonucleotide probes array
							T-455C	211	284	52	214	229	62	Yes	
							C1100T	298	209	40	296	172	37	Yes	

Liu/2004[20]	USA	Nested case-control	758(385/373)	Cases: 385/0 Controls: 373/0	Cases: 60 Controls: 59	MI	Sst I	295	77	6	297	60	4	Yes	PCR-RFLP
Chhabra/2004[21]	India	Case-control	309(158/151)	Cases: 139/19 Controls: 139/12	Cases: 53.25 Controls: 52.45	CHD	Sst I	66	76	16	71	66	14	Yes	PCR-RFLP
Wong/2003[22]	UK	Cohort	2808(187/2621)	Cases: 187/0 Controls: 2621/0	Cases: 56.67 Controls: 56.01	CHD	C1100T ,C-428T, Sst I	-	-	-	-	-	-	-	PCR-RFLP
Izar/2003[23]	Brazil	Case-control	224(112/112)	Cases: 65/47 Controls: 66/46	Cases: 46 Controls: 45(Median)	CHD	Sst I	81	23	3	71	32	1	Yes	PCR-RFLP
Olivieri/2002[24]	Italy	Cross-section	800(549/251)	Cases: 449/100 Controls: 168/83	Cases: 60.4 Controls: 57.6	CHD	T-455C	194	253	102	110	118	23	Yes	Immobilized oligonucleotide probes array
							C1100T	298	205	46	126	108	17	Yes	
							Sst I	452	97	0	214	37	0	Yes	

Russo/2001[25]	USA	Cohort	2485(202/2283)	Cases: 146/56 Controls: 1133/1150	-	CHD	Sst I	-	-	-	-	-	-	Yes	PCR-RFLP
Kee/1999[30]	UK	Case-control	1375(761/614)	Cases: 761/0 Controls: 614/0	-	MI	Sst I	501	112	1	645	113	3	Yes	PCR-RFLP
Wick/1995[26]	Germany	Case-control	313(212/101)	-	-	CHD	Sst I	170	42	0	85	16	0	Yes	PCR-RFLP
Vavatsi/1995[27]	Greece	Case-control	149(95/54)	Cases: 85/10 Controls: 46/9	Cases: 51 Controls: 50	CHD	Sst I	69	20	0	36	12	2	Yes	PCR-RFLP
Rigoli/1995[28]	Italy	Case-control	124(62/62)	Cases: 43/19 Controls: 42/20	Cases: 58.2 Controls: 57.6	CHD	Sst I	41	21	0	52	10	0	Yes	PCR-RFLP
Miettinen/1994[29]	Finland	Case-control	132(82/50)	Cases: 78/4 Controls: 42/8	Cases: 40.8 Controls: 38.7	CHD	Sst I	62	19	1	37	12	1	Yes	PCR-RFLP

MI: myocardial infarction; AMI: acute myocardial infarction; CHD: coronary heart disease; HWE: Hardy-Weinberg Equilibrium; PCR: polymerase chain reaction; RFLP: restriction fragment length polymorphism

-: not reported.

Supplementary Table 2 Quality assessment of the included studies

Study	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Quality
Yu/2011[9]	1	1	0	0	1	1	1	1	6
Sediri/2011[10]	0	1	0	1	1	1	1	1	6
Abd El-Aziz/2011[12]	0	0	1	1	2	1	1	1	7
AshokKumar/2010[15]	1	0	1	1	2	1	1	1	8
Bhanushali/2010[11]	1	0	0	1	1	1	1	1	6
Muendlein/2008[16]	1	1	0	0	1	1	1	1	7
Martinelli/2007[17]	1	1	0	1	1	1	1	1	7
Dallongeville/2006[18]	1	0	0	0	1	1	1	1	5
Tobin/2004[19]	1	1	1	1	1	1	1	1	8
Liu/2004[20]	0	1	1	1	1	1	1	1	7
Chhabra/2004[21]	1	0	0	1	1	1	1	1	6
Wong/2003[22]	1	1	1	0	1	1	1	1	7
Izar/2003[23]	1	1	1	1	2	1	1	1	9
Olivieri/2002[24]	1	0	0	1	0	1	1	1	5
Russo/2001[25]	1	1	1	1	1	1	1	0	7
Kee/1999[30]	1	1	0	1	1	1	1	0	6
Wick/1995[26]	1	0	0	1	0	1	1	1	5
Vavatsi/1995[27]	1	0	0	1	1	1	1	1	6
Rigoli/1995[28]	1	0	0	1	2	1	1	1	7
Miettinen/199[29]	1	1	1	1	1	1	1	1	8

For case-control and cross-sectional studies

Q1: Is the case definition adequate?

a) yes, with independent validation □ b) yes, eg record linkage or based on self-reports c) no description

Q2: Representativeness of the cases

a) consecutive or obviously representative series of cases □b) potential for selection biases or not stated

Q3: Selection of Controls

a) community controls □ b) hospital controls c) no description

Q4: Definition of Controls

a) no history of disease (endpoint) □ b) no description of source

Q5: Comparability of cases and controls on the basis of the design or analysis

a) study controls for age □ b) study controls for any additional factor

Q6: Ascertainment of exposure

a) secure record □ b) structured interview where blind to case/control status □

c) interview not blinded to case/control status d) written self-report or medical record only

e) no description

Q7: Same method of ascertainment for cases and controls

a) yes □b) no

Q8: Non-Response rate

a) same rate for both groups □ b) non respondents described c) rate different and no designation

For cohort studies

Q1: Representativeness of the exposed cohort

a) truly representative of the average population in the community □ b) somewhat representative of the average population in the community

c) selected group of users d) no description of the derivation of the cohort

Q2:Selection of the non exposed cohort

a) drawn from the same community as the exposed cohort □b) drawn from a different source

c) no description of the derivation of the non-exposed cohort
Q3: Ascertainment of exposure
a) secure record □ b) structured interview □
c) written self-report d) no description
Q4: Demonstration that outcome of interest was not present at start of study
a) yes □ b) no
Q5: Comparability of cohorts on the basis of the design or analysis
a) study controls for age b) study controls for any additional factor Outcome
Q6: Assessment of outcome
a) independent blind assessment □ b) record linkage □
c) self-report d) no description
Q7: Was follow-up long enough for outcomes to occur
a) yes □ b) no
Q8: Adequacy of follow up of cohorts
a) complete follow up - all subjects accounted for □
b) subjects lost to follow up unlikely to introduce bias - small number lost > 70 % follow up, or description provided of those lost
c) follow up rate < 70% and no description of those lost
d) no statement

Supplementary Table 3 Studies with multivariable OR

Study	Polymorphism	Univariate OR (95% CI)	Multivariable OR (95% CI)	Adjusted factors
Sediri/2011[10]	Sst I	1.54 (1.02-2.34)	2.02 (1.11-3.67)	age, diabetes, dyslipidemia, BMI and smoking
Muendlein/2008[16]	C-482T	1.14 (0.81-1.60)	1.18（0.8-1.75）	age, sex, T2DM, BMI, hypertension, and smoking
Martinelli/2007[17]	T-455C	1.15 (0.85-1.55)	1.82 (1.05–3.18)	age, sex, smoke, hypertension, diabetes, BMI,

				creatinine, LDL-cholesterol, HDL-cholesterol, TG, ApoC-III and hs-CRP
Dallongeville/2006[18]	C-482T	0.95 (0.73-1.23)	0.91 (0.69-1.22)	age
Liu/2004[20]	Sst I	1.13 (0.80-1.61)	1.25 (0.74–2.10)	age, cigarette smoking, BMI, alcohol intake, physical activity, history of diabetes mellitus, history of high cholesterol, history of hypertension, and use of multivitamins
Wong/2003[22]	Sst I	0.72 (0.45-1.15)	0.70 (0.44-1.12)	age and practice and triglyceride levels
Olivieri/2002[24]	Sst I	1.24 (0.82-1.87)	0.97 (0.59–1.59)	age, gender, smoking status, presence of diabetes and hypertension, cholesterol, triglycerides, apoA-I, and apoB.

BMI: body mass index; T2DM: type 2 diabetes mellitus; LDL: low density lipoprotein; HDL: high density lipoprotein; TG: triglyceride; hs-CRP: high sensitivity C-reaction protein.