Table 2.20. Case-control studies on tobacco smoking and oesophageal cancer (unspecified) or squamous-cell carcinoma of the oesophagus: main characteristics of study design

<table>
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<tr>
<th>Reference, Country and years of study</th>
<th>Number of cases and controls</th>
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Cases histologically confirmed  
Controls were selected among patients admitted in the same hospital of cases matched by age, hospital and period of admission. Patients hospitalized for trauma, and with experience of cancer or diseases related to alcohol or tobacco were excluded |
| Bosetti et al. (2000b) Italy and Switzerland 1992-1999 | Men: 356 cases and 878 controls  
Women: 48 cases and 192 controls | Incident cases were from the major teaching and general hospital of the study areas of Italy and Switzerland  
Cases histologically confirmed  
Controls were subjects admitted to the same hospitals as the cases for a wide spectrum of acute, non-neoplastic conditions excluding those related to smoking and alcohol consumption |
| | Multicenter study  
Cases histologically confirmed, but some cases of Paraguay a cytological or radiological diagnosis of oesophageal was accepted  
Controls were identified in the same hospitals from cases and also matched by sex and age (within 5 years) |
| | Multicenter study  
Cases histologically confirmed  
Controls aged 30-64 years were selected using a random digit dialing technique, whereas controls aged 65-79 years were randomly chosen from computerized listings of Medicare registrants |
| Sharp et al. (2001) UK 1993-1996 | Women: 159 cases and 159 controls  
| | Population-based case-control study conducted in three regions of England and eastern Scotland.  
Cases histologically confirmed  
Controls matched by age (within 5 years) and general practitioner |
| Gallus et al. (2001) Italy and Switzerland 1984-1999 | Women: 114 cases and 425 controls  
| | Cases under 79 years and histologically confirmed  
Controls were subjects admitted to the same hospitals as the cases for a wide spectrum of acute, non-neoplastic conditions excluding those related to smoking and alcohol consumption |
| Pacella-Norman et al. (2002) South Africa 1995-99 | Men: 87 cases and 804 controls  
Women: 37 cases and 1370 controls | Hospital-based case-control study  
Cases histologically confirmed  
Controls had cancers assumed as non associated with tobacco smoking or alcohol consumption |
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<tr>
<td>Gallus et al. (2003a) Italy and Switzerland 1992-1999</td>
<td>Men: 351 cases and 875 controls Women: 44 cases and 191 controls</td>
<td>Hospital-based case-control study Cases histologically confirmed Controls were matched with cases by age (within 5 year intervals), sex, and study centre</td>
</tr>
<tr>
<td>Lee et al. (2005) Taiwan 2000-2003</td>
<td>Men: 468 cases and 752 controls Women: 45 cases and 66 controls</td>
<td>Cases of squamous cell carcinoma confirmed histologically recruited in three hospital of Taiwan Controls selected from people who attended the same hospitals as the cases and matched with cases by sex and age (within 3 years)</td>
</tr>
<tr>
<td>Yang et al. (2005) China 2003-2004</td>
<td>Men: 119 cases and 119 controls Women: 66 cases and 66 controls</td>
<td>Population-based case-control study Cases confirmed histologically (179 squamous cell carcinoma and 6 adenocarcinomas analyzed together) Controls were recruited from residents in Yanting, Province of Sichuan, China</td>
</tr>
<tr>
<td>Znaor et al. (2003) India 1993-1999</td>
<td>Men: 566 cases, 1711 hospital controls and 1927 healthy controls</td>
<td>Cases histologically confirmed Hospital controls identified among patients with non-tobacco cancers. Also was selected controls among healthy hospital visitors</td>
</tr>
<tr>
<td>Lindblad et al. (2005) UK 1994-2001</td>
<td>140 cases and 10000 controls</td>
<td>Nested case-control study within the General Practitioners Research Database in the UK Cases were checked related histology by a sample of the cases with the General Practitioner (only 2.7% of discordance of database information and General Practitioner information) Controls were randomly selected from the total members of the cohort and frequency-matched by sex, age (within one year) and some calendar year</td>
</tr>
<tr>
<td>Jiang et al. (2006) China 1989-1991</td>
<td>Men: 19734 cases dead by Oesophageal cancer and 104846 controls</td>
<td>Cases (men ages 35-69 years) and controls were recruited from a large nationwide mortality survey in urban and rural China. Cause of death obtained from official death certificates and, if necessary, the medical records were revised Controls were males surviving spouses of deceased women (from any cause) and in the same age range of cases (older than 35 years)</td>
</tr>
<tr>
<td>Hashibe et al. (2007a) Czech Republic, Poland, Romania and Russia 2000-2002</td>
<td>Men: 170 cases of squamous cell carcinoma and 846 controls Women: 22 cases of squamous cell carcinoma and 268 controls</td>
<td>Multicenter hospital-based case-control study Cases histologically confirmed In-patients and out-patients controls were recruited in the same hospitals as the cases, frequency matched by age, and diseases not related to tobacco smoking or alcohol drinking</td>
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| Lee et al. (2007) Taiwan 1996-2004   | 447 cases and 1022 controls | Multicenter hospital-based case-control study  
Cases histologically confirmed and subdivided by anatomical regions of oesophagus (upper-third, middle-third, and lower-third)  
Controls were recruited among the one-day hospitalized patients in the same hospitals of cases, matched by sex, age (within 3 years) and time of hospitalization (within 4 weeks after each case was identified) |
| Randi et al. (2007) Italy and Switzerland 1984-1999 | Men: 52 cases and 678 controls | Hospital-based case-control study  
Cases histologically confirmed  
Controls selected in the same network of hospitals as cases for a wide spectrum of acute, non-neoplastic conditions, neither related to smoking or alcohol consumption nor to long-term diet modifications |
Women: 15 cases (squamous cell carcinoma and adenocarcinoma) and 170 controls | Hospital-based case-control study  
Cases histologically confirmed  
Controls selected in the same hospitals of cases and matched by age, sex and province (Alicante and Valencia) with diseases not related to tobacco smoking, alcohol intake and diet |
| Nasrollahzadeh et al. (2008) Iran 2003-2007 | Men: 150 cases and 278 controls  
Women: 150 cases and 293 controls | Population-based case-control study  
Cases histologically confirmed  
Controls recruited in the neighborhood of residence or village of the case and were also matched by age (within 2 years) and sex. |
| Pandeya et al. (2008) Australia 2001-2005 | 309 cases and 1580 controls | Population-based case-control study  
Cases histologically confirmed  
Controls randomly selected from the Australian electoral roll matched by 5-year age group and state of residence |
| Bosetti et al. (2008) Italy 1984-2000 | Men: 618 cases, 3781 hospital controls | Population-based case-control study  
Cases histologically confirmed  
Hospital controls identified among patients with acute non-neoplastic conditions and not related to tobacco smoking, alcohol consumption, or diet |