

**Table 2.9. Cohort study of betel quid chewing and other cancers of the upper aerodigestive tract**

Reference, location, name of study	Cohort description	Exposure assessment	Organ site (ICD code)	Exposure categories	No. of cases/deaths	Relative risk (95% CI)*	Adjustment for potential confounders	Comments
Wen <i>et al.</i> (2005a) Taiwan, China	Cohort of 19 719 men ≥ 35 yrs (11 647 smokers) recruited during 1982-1992. All subjects personally interviewed. Vital status ascertained as of 31 December 2000 from computerized national death files. Prevalence of betel chewing in cohort 15.1% among smokers; 3.7% among nonsmokers.	Interviewer-administered standardized questionnaire	Nasopharynx (ICD-9:147)	Non tobacco smoking/non chewing	9	1.0	Age, alcohol consumption, education	Found that people start chewing mainly after start smoking
				Tobacco smoking only	18	1.3 (0.6-3.0)		
				Tobacco smoking + chewing	5	4.2 (1.5-11.4)		
			Oesophagus (ICD-9:150)	Non smoking/non chewing	5	1.0	Age, alcohol consumption, education	
				Tobacco smoking only	18	1.5 (0.6-4.3)		
				Tobacco smoking + chewing	5	3.1 (0.8-11.3)		