

Table 2.24. Meta Analysis of second-hand tobacco smoke and leukaemias and lymphomas

Reference, study location and period	Organ site (ICD code)	Characteristics of cases	Characteristics of controls	Exposure assessment	Exposure categories	Pooled OR (95% CI); p-value	Adjustment for potential confounders	Comments
Lee <i>et al.</i> (2009)	All leukemias, ALL.	Twelve case-control studies published between 1990 and 2008 on the associations between paternal smoking status (ever vs. never) and childhood leukemia risk. When there were several reports from the same study, most recent one was included in the analysis.	12 case-control studies to evaluate the association between paternal smoking and childhood leukemia risk. Lifetime paternal smoking status (N= 6; 4830 cases and 5010 controls), paternal smoking status before pregnancy (N= 11; 5540 cases and 10311 controls) and after birth of the child (N= 4; 1280 cases and 1362 controls) were evaluated.		<p><i>Overall paternal smoking</i></p> <p>All leukemia (n=6)</p> <p>ALL (n=5)</p> <p><i>Before pregnancy</i></p> <p>All leukemia (n=11)</p> <p>ALL (n=9)</p> <p><i>After birth</i></p> <p>All leukemia (n=4)</p> <p>ALL (n=4)</p>	<p>1.13 (1.04–1.24); p = 0.006</p> <p>1.07 (1.00–1.14) p = 0.04</p> <p>1.12 (1.04–1.21) p = 0.002</p> <p>1.17 (1.04–1.30) p = 0.007</p> <p>1.12 (0.96–1.32) p = 0.16</p> <p>1.15 (0.94–1.39) p = 0.17</p>		There was no evidence of significant heterogeneity among studies (P > 0.3). In terms of publication bias, all P-values from Begg's and Egger's tests were >0.08 and >0.15, respectively, except for the association between paternal smoking status before pregnancy of the child and all childhood leukemias (P = 0.03 and 0.05, respectively), due to the significant result from the smallest study. Leukemia Research 33 (2009) 250–258