

Obstetrics & Gynecology Science

Heba Ramadan. Thyroid-gynecologic interaction

Supplementary Table 5. Group 2 case-control studies which screened for different types of gynecological cancers in females with thyroid dysfunction

Study ID	Cancer type	Thyroid status	Total No. of patient with thyroid status	No. of patient had cancer	Total No. without thyroid status	No. of control had cancer
Study 1a	Gynecologic cancers	Hypothyroidism	44,852	97	44,852	95
Study 1b	Gynecologic cancers	Hyperthyroidism	296,872	876	296,872	1,063
Study 4	Cervical cancer	Hypothyroidism	143,451	7,197	810,562	31,218
Study 10a	Ovarian cancer mortality	Hypothyroidism	4,456	15	69,119	172
Study 10b	Ovarian cancer mortality	Hyperthyroidism	1,501	8	69,119	172
Study10c	Female genital tract except ovary mortality	Hypothyroidism	4,456	6	69,119	85
Study 10d	Female genital tract except ovary mortality	Hyperthyroidism	1,501	2	69,119	85
Study 15a	Uterine cancer	Hashimoto hypothyroidism	1,369	1	5,476	2
Study 15b	Cervical cancer	Hashimoto hypothyroidism	1,369	0	5,476	5
Study 15c	Ovarian cancer	Hashimoto hypothyroidism	1,369	0	5,476	1
Study 16a	Uterine cancer	Grave disease hyperthyroidism	3,885	2	15,540	15
Study 16b	Cervical cancer	Grave disease hyperthyroidism	3,885	3	15,540	30
Study 16c	Ovarian cancer	Grave disease hyperthyroidism	3,885	0	15,540	14
Study 17a	Uterine cancer	Hypothyroidism	12,168	123	164,670	1,176
Study 17b	Uterine cancer	Hyperthyroidism	1,010	15	164,670	1,176
Study 17c	Ovarian cancer	Hypothyroidism	12,168	92	164,670	1,052
Study 17d	Ovarian cancer	Hyperthyroidism	1,010	6	164,670	1,052

ID, identity document.