Table 3: Evidence table – Lohi et al. (2009b)

Study type	Non-randomised comparative cross sectional survey
Country	Finland
Number of patients	N=6849 Finnish adults
quality	1. Did the study have a clearly focused aim? Yes 2. Was the cohort recruited in an acceptable way? Yes 3. Was the exposure accurately measured to minimise bias? Yes 4. Was the outcome accurately measured to minimise bias? Yes 5. Have the authors identified all important confounding factors? Have they taken account of confounding factors in the design/analysis? Yes 6. Was the follow-up of subjects complete enough? Was the follow-up of subjects long enough? Yes - up to 20 years 7. What are the results? No increased malignany in those with undiagnosed CD 8. How precise are the results? Precise tight CI 9. Do you believe the results? Yes 10. Can the results be applied to the local population? Yes 11. Do the results fit with other available evidence? Yes 12. What are the implications of this study for practice? Nil
Study population	The Mini-Finland Health Survey in 1978-80, a nationally representative sample of 8000 persons from the population between 30 and 99 years old adults; participation rate was 90% (7217) and sera from 6990 individuals were available for this study Exclusion: previous diagnosis of coeliac disease or dermatitis herpetiformis (3 excluded for this reason) mean 51 years (range 30-95) 3680 females
Control	Patients from the sample with negative serology
Length of follow-up	n/a
Details of coeliac testing	Sera were stored at –20 °C and analysed for immunoglobulin A (IgA)-class tTG (Eu-t TG® umana IgA, Eurospital, Trieste, Italy); if positive, sera were analysed for both IgA EMA (a characteristic staining pattern at serum dilution 1:≥5 was considered positive) and another IgA tTG (Celikey®, Phadia, Freiburg, Germany) (for Eu-tTG, 7.0 AU/mL was the cut-off and for Celikey tTG, 5.0 AU/mL was the

	cut-off) (Celikey tTG and EMA was used in 128 randomly selected Eu-tTG-negative patients as there was an unexpectedly high Eu-tTG positivity in the sera for the Mini-Finland survey collected 22 years earlier)
Results	Results from serological testing: Eu-tTG-positives: 82% (565/6849) EMA positive: 12.9% (73/565) of Eu-tTG positives (52 females, mean age 50 years) or 10.6% (73/6849) of all patients Celikey tTG positive: 35.8% (202/565) (129 females, mean 59 years) of Eu-tTG positives or 29.5% (202/6849) of all patients

	Relative risk [a]					
	Celikey tTG negativity (95% CI) N=6647	Celikey tTG positivity (95% CI) N=202	p value	EMA negativity (95% CI) N=6776	EMA positivity (95% CI) N=73	p value
All cancer	1.00 (n=671)	0.91 (0.60, 1.37) (n=23)	0.64	1.00 (n=689)	0.67 (0.28,1.61) (n=5)	0.33
Lymphoproliferative diseases	1.00 (n=28)	2.76 (0.83, 9.16) (n=3)	0.15	1.00 (n=29)	**5.94 (1.41, 25.04) (n=2)**	**0.05**
Gastrointestinal cancer	1.00 (n=115)	1.38 (0.60, 3.14) (n=6)	0.47	1.00 (n=121)	0 (n=0)	0.12
Lung cancer	1.00 (n=83)	0.73 (0.18, 2.97) (n=2)	0.64	1.00 (n=85)	0 (n=0)	0.26
Breast cancer	1.00 (n=89)	0.64 (0.16, 2.59) (n=2)	0.49	1.00 (n=90)	0.71 (0.10, 5.07) (n=1)	0.71
Prostate cancer	1.00 (n=56)	0.54 (0.07, 3.90) (n=1)	0.50	1.00 (n=57)	0 (n=0)	0.41

[a] adjusted for sex and age

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Conflicts of interest	The authors report no conflicts of interest
Comments	

Definitions of abbreviations are given at the end of this document.