Table B.2.b. CVD incidence: Association between sedentary behaviour and CVD incidence among adults (in alphabetical order by author)
See the Supplementary materials for description of evidence of US PAGAC *(24)* by outcome

Systematic review evidence Review credibility	No. of studies/ Study design No. of participants	Quality Assessment					Description of evidence Summary of findings	Certainty
		Risk of bias	Inconsistency	Indirectness †	Imprecision	Other		
Ahmad 2017 *(1)* Moderate	22 reviews and 1 case-control study N=655	No serious risk of bias	No serious inconsistency	Serious indirectness	Serious imprecision	None	One case-control study found a significantly higher risk of MI among those self-reporting ≥215 min/day of ST vs. <70 min/day of ST (RR=1.58 [95% CI, 1.05 to 2.36]). There was no difference in MI risk among those reporting >130-214 min/day of ST vs. <70 min/day (RR = 0.96 [95% CI, 0.64 and 1.44]).	VERY LOW[a]
Bailey 2019 *(3)* Moderate	5 prospective cohort studies N=224,414	No serious risk of bias	No serious inconsistency	Serious indirectness	No serious imprecision	None	Mean age of sample ranged from 44 to 64 years and mean follow-up ranged from 2.7 to 13 years. All studies used a single-item self-report measure of total daily sitting time; cutpoints for categories of sitting time were not consistent across studies (range for highest sitting category was ≥7.1 hrs to 16 hs/day and range for the lowest sitting category was <4 hrs to <8 hrs/day). All studies but one adjusted for physical activity. Higher total daily sitting time was associated with significantly increased risk of CVD when not adjusted for PA levels (HR = 1.29 [95% CI, 1.27 to 1.30]; the risk was attenuated but remained significant with adjustment for PA (HR = 1.14 [95% CI, 1.04 to 1.23]).	MODERATE[b]

Abbreviations: CI = confidence interval; CVD = cardiovascular disease; HR = hazard ratio; hrs = hours; MI = myocardial infarction; min = minutes; PA =physical activity; RR = risk ratio

† Serious indirectness indicates measurement of intermediate/indirect outcomes or heterogeneity in exposures and comparisons assessed; certainty of evidence was not always downgraded for indirectness if it was not judged to impact the certainty in the findings for the outcome evaluated in the review

[a] Certainty of evidence downgraded given serious indirectness in measures of sedentary behaviour and serious imprecision in measures of effects
[b] Certainty of evidence upgraded given no significant study limitations