

**SUPPLEMENTARY TABLE S1. Summary of individual studies in INHANCE consortium pooled data version 1.1, by region and study period\***

Study Location (Reference†)	Recruitment period	Case subjects			Control subjects‡	
		Source	Participation rate, %	Age eligibility, years	Source	Participation rate, %
<b>Europe</b>						
Milan, Italy <sup>9</sup>	1984–1989	Hospital	95§	<80	Hospital (unhealthy)	95§
Aviano, Italy <sup>3</sup>	1984–1989	Hospital	>95§	>18	Hospital (unhealthy)	95§
Paris, France <sup>4*</sup>	1987–1992	Hospital	95§	NA	Hospital (unhealthy)	95§
Italy (Aviano, Milan, Latina)¶¶ <sup>6</sup>	1990–1999	Hospital	>95	18–80	Hospital (unhealthy)	95
Switzerland <sup>13</sup>	1991–1997	Hospital	95	<80	Hospital (unhealthy)	95
Central Europe (Banska Bystrica, Bucharest, Budapest, Lodz, Moscow)¶¶ <sup>10</sup>	1998–2003	Hospital	96	≥15	Hospital (unhealthy)	97
Rome <sup>5</sup>	2002–2007	Hospital	98	NA	Hospital (unhealthy)	94
<b>North America</b>						
New York¶¶ <sup>14</sup>	1981–1990	Hospital	91	21–80	Hospital (unhealthy)	97
Seattle, WA <sup>17</sup>	1985–1995	Cancer	54.4,	18–65	Random digit dialing	63,
Boston, MA <sup>16</sup>	1999–2003	Hospital	88.7	≥18	Resident list	48.7
Iowa <sup>18</sup>	1993–2006	Hospital	87	>17	Hospital (healthy)	92
North Carolina <sup>15</sup>	1994–1997	Hospital	88	>17	Hospital (unhealthy)	86
Tampa, FL <sup>8</sup>	1994–2003	Hospital	98	≥18	Cancer screening clinic	90
Los Angeles, CA <sup>7</sup>	1999–2004	Cancer	49	18–65	Neighborhood	67.5
Houston, TX <sup>19</sup>	2001–2006	Hospital	95	≥18	Hospital visitors	>80
<b>Latin America</b>						
Puerto Rico <sup>11</sup>	1992–1995	Cancer	71	21–79	Residential records	83
Latin America (Buenos Aires, Havana, Goiânia, Pelotas, Porto Alegre, Rio de Janeiro, São Paulo)¶¶ (NA)	2000–2003	Hospital	95	15–79	Hospital (unhealthy)	86
<b>International</b>						
International (Italy, Spain, Ireland, Poland, Canada, Australia, Cuba, India, Sudan)¶¶ <sup>12</sup>	1992–1997	Hospital	88.7	NA	Hospital/ Community	87.3

\*INHANCE = International Head and Neck Cancer Epidemiology; NA = not applicable/not available.

†Representative publication in which study methods are described.

‡All studies frequency matched control subjects to case subjects on age and sex. Additional frequency matching factors included study center (Italy, Central Europe, Latin America, and International multicenter studies), hospital (France study), ethnicity (Tampa study), and neighborhood (Los Angeles study).

§Participation rate was not formally assessed, estimated response rate reported.

¶ Multicenter study.

¶¶Two response rates are reported because data were collected in two population-based case-control studies, the first from 1985–1989 among men and the second from 1990–1995 among men and women

\* Study not included in present analysis because all subjects were regular smokers.