Quantitative Bias Analysis of the Association between Occupational Radiation Exposure and Ischaemic Heart Disease Mortality in UK Nuclear Workers

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ONLINE SUPPLEMENT

Funding: This work was supported by the National Institute for Health Research (Policy Research Programme, Occupational Exposure to Ionising Radiation and Mortality from Ischaemic Heart Disease, PR-R14-0915-23004). The views expressed in this publication are those of the author(s) and not necessarily those of the NHS, the National Institute for Health Research or the Department of Health and Social Care.

Conflicts of Interest: RW is a member of the Technical Working Party of the UK Compensation Scheme for Radiation-Linked Diseases. Otherwise, the authors declare they have no actual or potential competing financial interests.

Acknowledgments: This study was approved by the University of Bristol Faculty of Health Sciences Research Ethics Committee (Application 40782) and by the NDA-PHE Research Governance Group, which includes representatives of employees, Sellafield Ltd, the Nuclear Decommission Authority (NDA) and Public Health England (PHE).

The authors would like to thank Less Scott (Public Health England, Centre for Radiation, Chemical and Environmental Hazards (CRCE)) for his help with exposure assessment and linkage of datasets, Will Atkinson (Nuvia) for his help with the SES-occupation coding scheme, Professor McNamee (University of Manchester) for her help with data identification, management and linkage, and Professor Agius (University of Manchester) for his medical and epidemiological contributions to study on which the current work is based.

Variable		Controls	Cases
Ν		715	715
Site	Springfield	330	330
	Sellafield	385	385
Socio-economic status	1.2 (highest)	13	10
	1-2 (highest)		
(longest-held occupation)	3	304	282
	4	360	384
	5 (lowest)	14	17
	missing	24	22
Start of employment at either	< 1950	20	30
site	1950-1959	507	494
510	1960-1969	153	155
	1900-1909	35	36
Age at start of employment	Mean (SD)	35.7 (8.4)	35.8 (8.4)
Age of death (or censoring)	<40	136	132
(years)	40-49	139	141
	50-59	212	216
	60-69	228	226
Main occupation	Other	363	345
(longest-held occupation)	Process worker	328	349
(longest-neid occupation)			
	unknown	24	21
Pre-employment smoking	Non/ex-smoker	151	129
status	Current smoker	305	407
	Unknown	259	179
Pre-employment Body Mass	<18.5	479	454
Index (BMI)	18.5-24.9	16	20
IIIdex (BivII)			
	25.0-29.9	180	201
	30+	26	24
	missing	14	16
Pre-employment diastolic	<70	13	19
blood pressure (mmHg)	70-85	352	298
1	86-99	233	256
	100+	78	111
	missing	39	31
Pre-employment systolic	<120	52	41
	120-138		
blood pressure (mmHg)		317	285
	138-159	231	247
	160+	76	111
	missing	39	31
Shiftwork (ever)	Never	242	228
× /	Ever	414	442
	Missing	59	45
Cumulativo NII amaguna	~ 95 0	270	012
Cumulative NIL ₈₅ exposure $(ID(A))$	<85.0	279	213
(dB(A)-years)	85.0-94.8	168	168
	94.9-99.7	126	164
	99.8+	138	167
	missing	4	3

Table S1. Nested matched case-control study population characteristics

Monitored for internal exposure	No Yes	323 392	315 400
Cumulative external radiation dose	(median (mSv), (IQR))	26.62 (6.05-95.15)	34.15 (8.87-144.84)
15 year lagged Cumulative external radiation dose	(median (mSv), (IQR))	37.20 (9.97-117.06)	44.43 (10.60-155.83)

				hed logistic ession [20]		GAM	
Variables		N (controls/cases)	Odds Ratio	95% Confidence Interval	Odds Ratio	Approximate 95% CI	
15-yr lagged	0-10.6	188/180	1		1		
Cumulative external	10.6-44.4	199/178	0.99	0.71-1.38	0.96	0.71-1.30	
radiation	44.4-155.8	183/178	1.10	0.78-1.55	1.08	0.77-1.50	
dose (mSv) ¹	155.8- 1,290.7	145/179	1.54	1.01-2.35	1.49	1.00-2.22	
~	Springfields	330/330	Not included		1		
Site	Sellafield	385/385			0.87	0.66-1.16	
Monitored for internal	no	323/315	1		1		
dose	yes	392/400	0.94	0.75-1.19	0.97	0.77-1.23	
Age of	<40	136/132	1		1		
death (or	40-49	139/141	3.13	0.33-29.59	1.01	0.71-1.43	
censoring) (years)	50-59	212/216	3.13	0.27-36.08	0.97	0.68-1.36	
(years)	60-69	228/226	1.81	0.11-29.39	0.92	0.64-1.32	
	<1950	20/30	1		1		
Start of employment	1950-1960	507/494	0.26	0.10-0.70	0.64	0.35-1.17	
at either site	1960-1970	153/155	0.27	0.05-1.34	0.69	0.36-1.33	
	1970+	35/36	0.26	0.01-6.40	0.68	0.31-1.50	
Age at start of employment	year		1.19	1.01-1.40	1.00	0.99-1.02	
	Other	363/345	1		1		
Main occupation	Process worker	328/349	0.99	0.59-1.67	0.94	0.56-1.59	
	unknown	24/21	0.00		0.00		
	1-2 (highest)	13/10	1		1		
Socio-	3	304/282	1.18	0.51-2.77	1.23	0.52-2.91	
economic Status	4	360/384	1.37	0.53-3.57	1.47	0.55-3.94	
Statuo	5 (lowest)	14/17	1.41	0.46-4.26	1.59	0.51-4.89	
	missing	24/22	>100		>100		

Table S2. Comparison associations between cumulative radiation dose from external sources (15-year lagged dose) and ischaemic heart disease mortality using matched logistic regression and Generalized Additive Model (GAM) estimation methods.

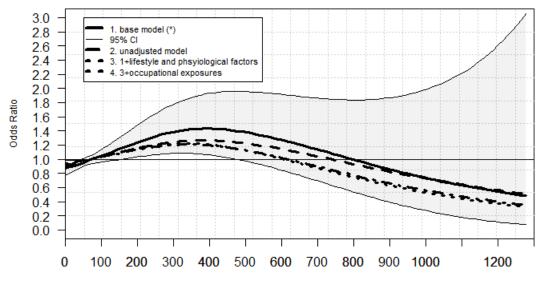
15-year lagged cumulative	Per 100	1.05	0.97-1.14	1.03	0.34-3.13	
cumulative	mSv					
exposure						

t	full model splines parameters			arameters unadjusted splines parameters	
estimate	95% lower limit	95% upper limit	estimate	95% lower limit	95% upper limit
0.929	0.782	1.104	0.953	0.824	1.103
1.103	0.419	2.900	1.079	0.484	2.403
0.972	0.845	1.117	0.979	0.872	1.098
0.869	0.45	1.679	0.897	0.519	1.550
0.972	0.875	1.080	0.979	0.897	1.068
1.157	0.62	2.162	1.12	0.666	1.884
0.927	0.683	1.258	0.943	0.731	1.217
2.072	0.173	24.832	1.76	0.219	14.12
1.028	0.682	1.550	0.995	0.705	1.403

 Table S3. Comparison parameters fully adjusted and unadjusted Generalized Additive Model (GAM)

Table S4. Comparison of distribution of non- and ex-smokers, current smokers and workers with missing information on tobacco smoking in cases and controls in the full study population and the subsample of the current study.

	Complete case-control popu	lation (1,220 matched pairs)	
	Non/ex-smokers (%)	Current smokers (%)	Missing (%)
Controls	285 (23.4)	567 (46.5)	368 (30.2)
Cases	207 (19.7)	667 (63.3)	179 (17.0)
Subset Rad	liation workers with complete	e career information (715 ma	tched pairs)
	Non/ex-smokers (%)	Current smokers (%)	Missing (%)
Controls	151 (21.1)	305 (42.7)	259 (36.2)
Cases	129 (18.0)	407 (56.9)	179 (25.0)



15-year lagged cumulative external dose, mSv [truncated at 600 mSv]

Figure S1. Dose-response association of GAM model for different sets of confounder adjustments. (*) base model adjusted for site, monitored for internal exposure, decade of exit, age at start of employment, main job and socio-economic status.

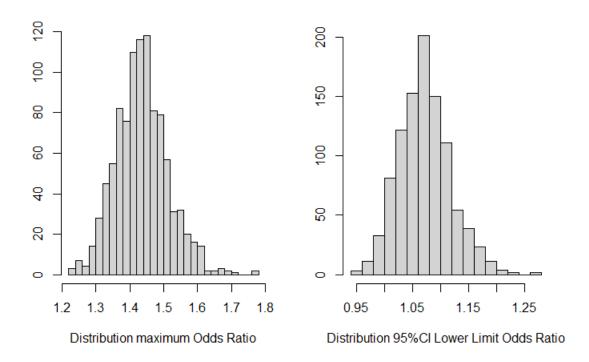


Figure S2. Distribution of maximum Odds Ratio (left) and 95% lower limit (right) for association between cumulative external radiation dose and ischaemic heart disease for 1,000 MCMC bootstrap samples.

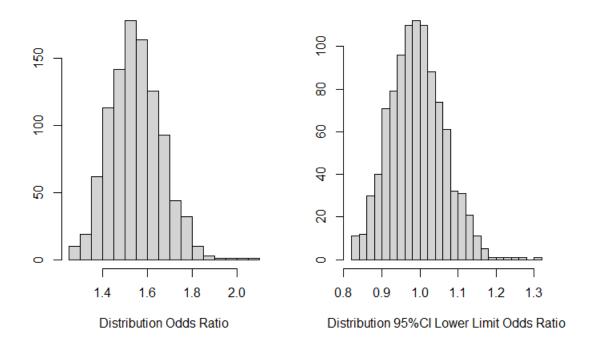


Figure S3. Histogram of Odds Ratios in highest quartile of cumulative external radiation dose from 1,000 bootstrap samples (left panel) and corresponding distribution of 95% lower limits (right panel).

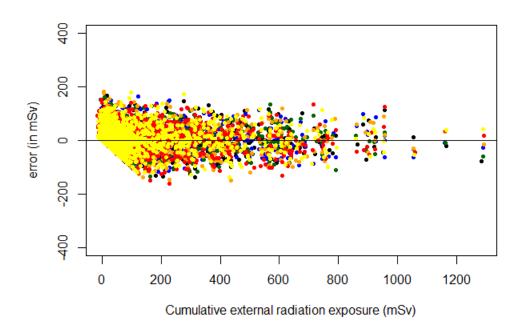


Figure S4. Illustration of measurement error for scenario (a) for 5 randomly selected MCMC samples (colours indicate different samples)

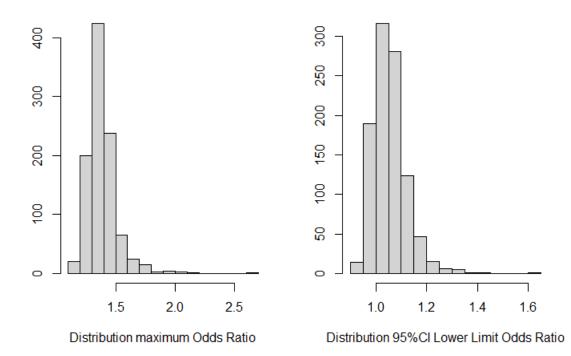


Figure S5. Distribution of maximum Odds Ratio (left) and 95% lower limit for 1,000 MCMC samples for scenario (a)

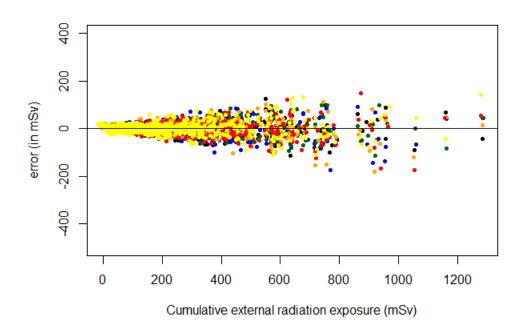


Figure S6. Illustration of measurement error for scenario (b) for 5 randomly selected MCMC samples (colours indicate different samples)

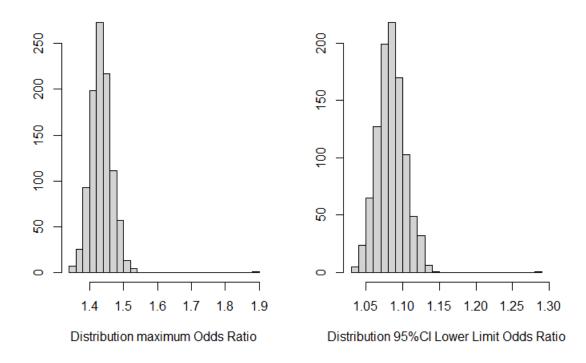


Figure S7. Distribution of maximum Odds Ratio (left) and 95% lower limit for 1,000 MCMC samples for scenario (b)

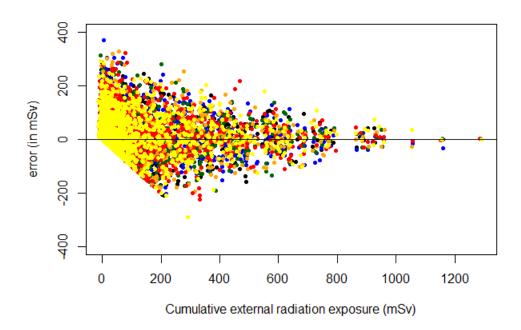


Figure S8. Illustration of measurement error for scenario (c) for 5 randomly selected MCMC samples (colours indicate different samples)

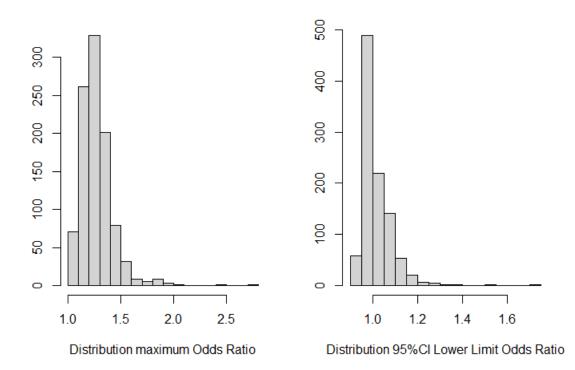


Figure S9. Distribution of maximum Odds Ratio (left) and 95% lower limit for 1,000 MCMC samples for scenario (c)

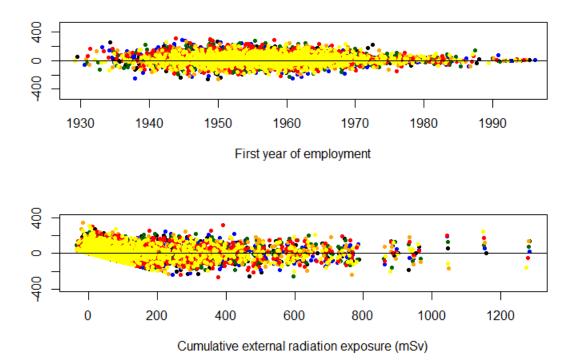


Figure S10. Illustration of measurement error for scenario (d) for 5 randomly selected MCMC samples (colours indicate different samples)

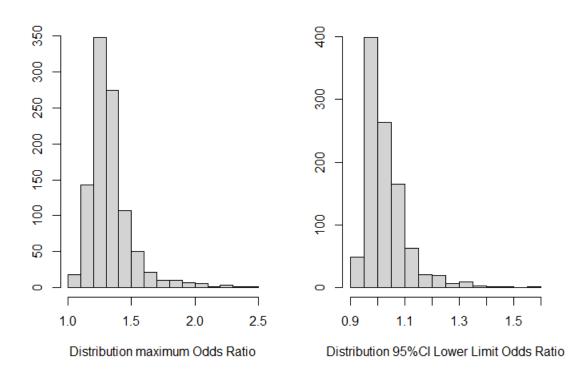


Figure S11. Distribution of maximum Odds Ratio (left) and 95% lower limit for 1,000 MCMC samples for scenario (d)

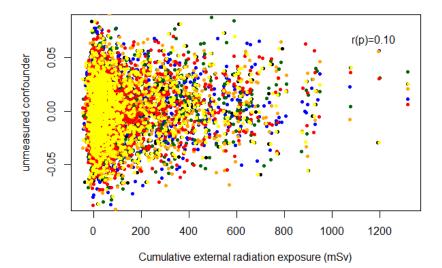


Figure S12. Illustration of patterns of cumulative external radiation dose and random 'unmeasured confounder', correlated with Pearson correlation (r(p)) of 0.10, for 5 randomly selected MCMC samples (colours indicate different samples)

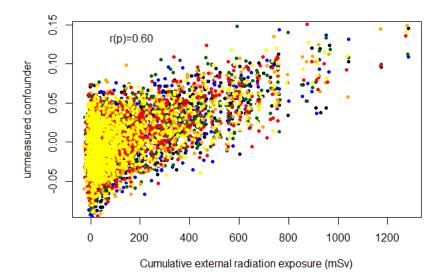


Figure S13. Illustration of patterns of cumulative external radiation dose and random 'unmeasured confounder', correlated with Pearson correlation (r(p)) of 0.30, for 5 randomly selected MCMC samples (colours indicate different samples)

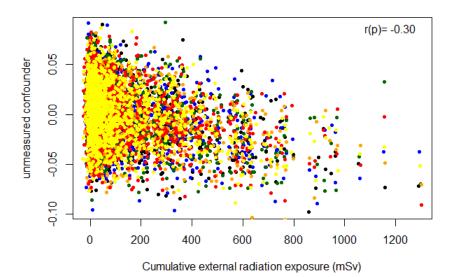


Figure S14. Illustration of patterns of cumulative external radiation dose and random 'unmeasured confounder', correlated with Pearson correlation (r(p)) of -0.30, for 5 randomly selected MCMC samples (colours indicate different samples)

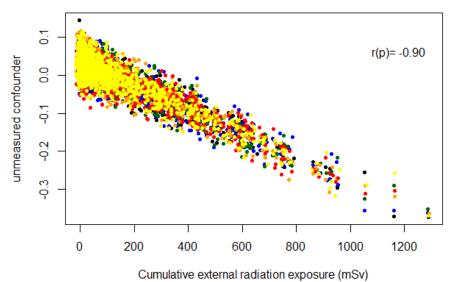


Figure S15. Illustration of patterns of cumulative external radiation dose and random 'unmeasured confounder', correlated with Pearson correlation (r(p)) of -0.90, for 5 randomly selected MCMC samples (colours indicate different samples)

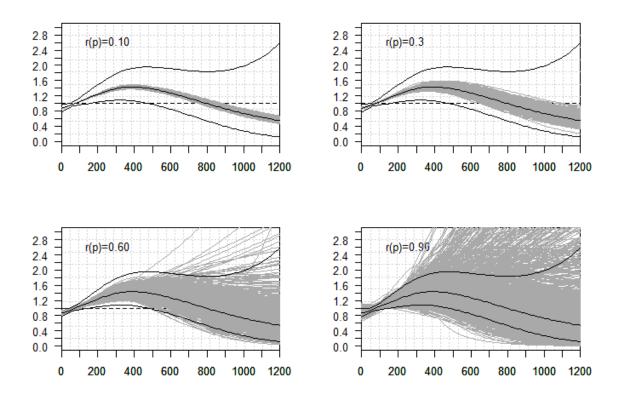


Figure S16. Comparative results of associations between cumulative external radiation dose and ischaemic heart disease mortality with models including an 'unmeasured confounder', modelled as a spline instead of a linear functional form, correlated with Pearson correlation coefficients r(p) ranging 0.10-0.90. Maximum odds ratios and range in 1,000 MCMC samples are 1.43 (1.38-1.49) for r(p)=0.10, 1.44 (1.31-1.59) for r(p)=0.30, 1.48 (1.21-6.41) for r(p)=0.60, and 3.23 (1.00-100.1) for r(p)=0.90. Corresponding percentage of samples with 95% lower limit >1 are 100%,100%,92.4% and 47.9%, respectively.

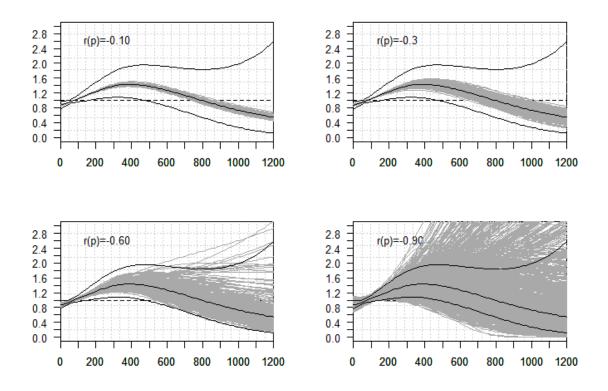


Figure S17. Comparative results of associations between cumulative external radiation dose and ischaemic heart disease mortality with models including an 'unmeasured confounder', modelled as a spline instead of a linear functional form, correlated with Pearson correlation coefficients r(p) ranging -0.10 to -0.90. Maximum odds ratios and range in 1,000 MCMC samples are 1.43 (1.37-1.51) for r(p)= -0.10, 1.44 (1.28-1.58) for r(p) = -0.30, 1.47 (1.21-3.40) for r(p)= -0.60, and 3.28 (1.02-61.4) for r(p)= -0.90. Corresponding percentage of samples with 95% lower limit >1 are 100%,100%,93.2% and 41.8%, respectively.