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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Study | Follow-up, years | Country | Sex | Cases/subjects | Age, years | Mehionine intake,highest versus lowest | RR (95 % CI), highest versus lowest  | Adjustment | Methionine intakeassessment |
| Flood, 2002 | 8.5 | USA | Women | 490/45264  | 40-93 | ＞0.91 vs ＜0.58 g/1000 kcal | 0.93 (0.66-1.3) | Intake s of energy, dietary folate, alcohol, calcium, and vitamin D. | Self-administered FFQ |
| Ishihara, 2007 | 5.8 | Japan | Men and women | 526 /81184 | 45-74 | Men:2.171 vs 1.245 g/dWomen:2.065 vs 1.188 g/d  | Men:0.98 (0.60-1.62) Women:1.52 (0.85-2.72)  | Age, study area, BMI, physical activity, smoking, supplement use, and intakes of alcohol, calcium, vitamin D, and meat. | Self-administered FFQ  |
| Kabat, 2008 | 16.4 | Canada | Women | 617 /49654  | 40-59 | ＞2.48 vs＜1.78 g/d | 0.99 (0.76-1.28) | Age, BMI, smoking, education, menopausal status, oral contraceptive use, hormone replacement therapy, and intake of energy and alcohol. | Self-administered FFQ  |
| de Vogel, 2008 | 13.3 | Netherlands | Men and women | 2349 /4168  | 55-69 | Men:2.093 vs 1.366 g/d Women:1.841 vs 1.154 g/d  | Men:0.79 (0.50-1.25) Women:0.76 (0.46-1.26)  | Age, BMI, smoking, family history of CRC, and intakes of alcohol, energy, meat, fat, fiber, calcium, folate, riboflavin, vitamin B-6 and iron. | Self-administered FFQ  |
| Schernhammer, 2008 | 18 | USA | Men | 277 /47371  | 40-75 | ≥2.55 vs ≤1.81 g/d | 0.60 (0.40-0.89) | Age, BMI, screening sigmoidoscopy, family history of CRC, smoking, physical activity, history of colon polyps, multivitamin use, aspirin use, and intakes of energy, beef, calcium, folate, vitamin B6, B12 and alcohol. | Self-administered FFQ |
| Schernhammer, 2008 | 22 | USA | Women | 389/88691  | 34-59 | ≥2.21 vs ≤1.50 g/d | 0.92 (0.68-1.26) | Age, BMI, screening sigmoidoscopy, family history of CRC, smoking, physical activity, history of colon polyps, multivitamin use, aspirin use, and intakes of energy, beef, calcium, folate, vitamin B6, B12 and alcohol. | Self-administered FFQ |
| Shrubsole, 2009 | 9 | China | Women | 394/ 72861  | 40-70 | 2.07 vs 1.26 g/d | 1.2 (0.8-1.8) | Age, BMI, educational, income, smoking, physical activity, hormone replacement therapy, menopausal status, family history of CRC, NSAIDs use, vitamin B supplement, history of colorectal polyps or diabetes, and intakes of energy, vegetables, fruits, red meats, and calcium and alcohol | Interview-based FFQ |
| Razzak, 2012 | 18 | USA | Women | 1289/41836  | 55-69 | ≥2.23 vs ≤1.36 g/d | 0.72 (0.54-0.96) | Age, BMI, waist-to-hip ratio, smoking, exogenous estrogen use, physical activity, history of diabetes, and daily intakes of total energy, total fat, sucrose, red meat, calcium, vitamin E and alcohol.  | Self-administered FFQ |

**Table S1**. Characteristics of the included prospective studies.

BMI, body mass index; CRC, colorectal cancer; FFQ, Food-frequency questionnaire; NSAIDs, nonsteroidal anti-inflammatory drug; RR, relative risk; CI, confidence interval.