評価対象論文リスト（要因：食物繊維、アウトカム：認知症・認知機能低下）

評価判定日：2024/4/24

②日本人集団の個別疫学研究

1	Kimura Y, Yoshida D, Ohara T, et al. Long-term association of vegetable and fruit intake with risk of dementia in Japanese older adults: the Hisayama study. BMC Geriatr. 2022;22(1):257. doi:10.1186/s12877-022-02939-2
2	Yamagishi K, Maruyama K, Ikeda A, et al. Dietary fiber intake and risk of incident disabling dementia: the Circulatory Risk in Communities Study. Nutritional Neuroscience. 2023;26(2):148-155. doi:10.1080/1028415X.2022.2027592

■コホート研究（コホートのプール解析含む）

Reference			Study subjects						Category	Number among cases	Relative risk (95%CI or p)	P for trend	Confounding variables considered	Magnitude of association
Author	Title	Year	Study period	Number of subjects	Source of subjects	Event followed	Number of incident cases or deaths	Participant's race						
Yasumi Kimura	Long-term association of vegetable and fruit intake with risk of dementia in Japanese older adults: the Hisayama study	2022	1988–2012	1071	residents aged 40 and older in the town of Hisayama, Fukuoka	dementia diagnosed according to DSM-III-R	759 subjects died, 464 subjects developed dementia	Japanese	Ref: Q1 (n = 267)	120	1	0.03	Adjusted for age, sex, educational level, history of stroke, diabetes, systolic blood pressure, use of antihypertensive agents, electrocardiogram abnormalities, total cholesterol, body mass index, current drinking, current smoking, regular exercise, and intakes of total energy, protein, fat, and carbohydrate	
									Q2 (n = 268)	117	0.82 (0.65 − 1.09)			-
									Q3 (n = 268)	111	0.80 (0.65 − 1.11)			-
									Q4 (n = 268)	116	0.73 (0.56 − 0.96)			↓
									Ref: Q1 (n = 267)	118	1	0.31	Adjusted for age, sex, educational level, history of stroke, diabetes, systolic blood pressure, use of antihypertensive agents, electrocardiogram abnormalities, total cholesterol, body mass index, current drinking, current smoking, regular exercise, and intakes of total energy, protein, fat, and carbohydrate	
									Q2 (n = 268)	116	0.87 (0.67 − 1.13)			-
									Q3 (n = 268)	108	0.76 (0.58 − 0.99)			↓
									Q4 (n = 268)	122	0.90 (0.69 − 1.17)			-
									Ref: Q1 (n = 267)	75	1	0.049	Adjusted for age, sex, educational level, history of stroke, diabetes, systolic blood pressure, use of antihypertensive agents, electrocardiogram abnormalities, total cholesterol, body mass index, current drinking, current smoking, regular exercise, and intakes of total energy, protein, fat, and carbohydrate	
									Q2 (n = 268)	72	0.75 (0.54 − 1.05)			-
									Q3 (n = 268)	64	0.72 (0.52 − 1.03)			-
									Q4 (n = 268)	75	0.69 (0.49 − 0.98)			↓

									Group	Cases	HR (95% CI)	p	Adjustment	
									Ref: Q1 (n = 267)	69	1	0.56	Adjusted for age, sex, educational level, history of stroke, diabetes, systolic blood pressure, use of antihypertensive agents, electrocardiogram abnormalities, total cholesterol, body mass index, current drinking, current smoking, regular exercise, and intakes of total energy, protein, fat, and carbohydrate	
									Q2 (n = 268)	59	0.73 (0.51 − 1.04)			−
									Q3 (n = 268)	76	0.88 (0.63 − 1.23)			−
									Q4 (n = 268)	82	1.03 (0.74 − 1.44)			−
									Ref: Q1 (n = 267)	35	1	0.24	Adjusted for age, sex, educational level, history of stroke, diabetes, systolic blood pressure, use of antihypertensive agents, electrocardiogram abnormalities, total cholesterol, body mass index, current drinking, current smoking, regular exercise, and intakes of total energy, protein, fat, and carbohydrate	
									Q2 (n = 268)	40	1.16 (0.73 − 1.84)			−
									Q3 (n = 268)	37	1.16 (0.72 − 1.86)			−
									Q4 (n = 268)	32	0.77 (0.44 − 1.21)			−
									Ref: Q1 (n = 267)	44	1	0.07	Adjusted for age, sex, educational level, history of stroke, diabetes, systolic blood pressure, use of antihypertensive agents, electrocardiogram abnormalities, total cholesterol, body mass index, current drinking, current smoking, regular exercise, and intakes of total energy, protein, fat, and carbohydrate	
									Q2 (n = 268)	38	0.79 (0.51 − 1.24)			−
									Q3 (n = 268)	29	0.63 (0.39 − 1.02)			↓
									Q4 (n = 268)	33	0.68 (0.43 − 1.09)			−
Yamagishi K	Dietary fiber intake and risk of incident disabling dementia: the Circulatory Risk in Communities Study	2022	1985-2020	3739	three communities, Ikawa, Yao, and Kyowaaged 40–69 years	dementia	670 subjects developed dementia	Japanese						
									Ref: Q1 (n = 934)	170	1	0.03	adjusted for smoking status; alcohol drinking; and fish, meat, and sodium consumption.	
									Q2 (n = 935)	160	0.83 (0.67–1.04)			
									Q3 (n = 935)	163	0.81 (0.65–1.02)			
									Q4 (n = 935)	177	0.74 (0.57–0.96)			