

***Cite this as:*** Po HU, Ming-yuan HUANG, Xin-yang HU, Xiao-jie XIE, Mei-xiang XIANG, Xian-bao LIU, Jian-an WANG, 2015. Meta-Analysis of C242T polymorphism in CYBA genes: risk of acute coronary syndrome is lower in Asians but not in Caucasians. *Journal of Zhejiang University-Science B (Biomedicine & Biotechnology)*, 16(5):370-379. [doi:10.1631/jzus.B1400241]

# **Meta-Analysis of C242T polymorphism in CYBA genes: Risk of Acute Coronary Syndrome is lower in Asians but not in Caucasians**

**Key words:** CYBA, C242T polymorphism, Acute coronary syndrome

# Research Summary

This meta-analysis mainly focused on the association between the C242T polymorphism and ACS

Table 4 Results of meta-analysis for CYBA gene C242T polymorphism and acute coronary syndrome<sup>4</sup>

Genotype contrasts <sup>4</sup>	Population <sup>4</sup>	study number <sup>4</sup> (case/control),n(n/n) <sup>4</sup>	Model for analysis <sup>4</sup>	OR (95% CI) <sup>4</sup>	P <sub>heterogeneity</sub> <sup>4</sup>	I <sup>2</sup> (%) <sup>4</sup>	P value <sup>4</sup>	<sup>4</sup>
Allele comparison <sup>4</sup> (T versus C) <sup>4</sup>	Total <sup>4</sup>	10(6102/8669) <sup>4</sup>	REM <sup>4</sup>	0.91 (0.78, 1.05) <sup>4</sup>	<0.001 <sup>4</sup>	74 <sup>4</sup>	0.18 <sup>4</sup>	<sup>4</sup>
	Asian <sup>4</sup>	4 (2536/5550) <sup>4</sup>	FEM <sup>4</sup>	0.73 (0.64, 0.83) <sup>4</sup>	0.18 <sup>4</sup>	39 <sup>4</sup>	<0.001 <sup>4</sup>	
	Caucasian <sup>4</sup>	6 (3566/3119) <sup>4</sup>	FEM <sup>4</sup>	1.06 (0.99, 1.14) <sup>4</sup>	0.33 <sup>4</sup>	13 <sup>4</sup>	0.11 <sup>4</sup>	
Dominant model <sup>4</sup> (TT+CT versus CC) <sup>4</sup>	Total <sup>4</sup>	10(6102/8669) <sup>4</sup>	REM <sup>4</sup>	0.90 (0.75, 1.07) <sup>4</sup>	<0.001 <sup>4</sup>	71 <sup>4</sup>	0.22 <sup>4</sup>	<sup>4</sup>
	Asian <sup>4</sup>	4 (2536/5550) <sup>4</sup>	FEM <sup>4</sup>	0.71 (0.62, 0.82) <sup>4</sup>	0.21 <sup>4</sup>	34 <sup>4</sup>	<0.001 <sup>4</sup>	
	Caucasian <sup>4</sup>	6 (3566/3119) <sup>4</sup>	FEM <sup>4</sup>	1.07 (0.97, 1.19) <sup>4</sup>	0.47 <sup>4</sup>	0 <sup>4</sup>	0.16 <sup>4</sup>	
Recessive model <sup>4</sup> (TT versus CT+CC) <sup>4</sup>	Total <sup>4</sup>	10(6102/8669) <sup>4</sup>	FEM <sup>4</sup>	1.04 (0.91, 1.18) <sup>4</sup>	0.19 <sup>4</sup>	27 <sup>4</sup>	0.58 <sup>4</sup>	<sup>4</sup>
	Asian <sup>4</sup>	4 (2536/5550) <sup>4</sup>	FEM <sup>4</sup>	0.63 (0.39, 1.02) <sup>4</sup>	0.31 <sup>4</sup>	16 <sup>4</sup>	0.06 <sup>4</sup>	
	Caucasian <sup>4</sup>	6 (3566/3119) <sup>4</sup>	FEM <sup>4</sup>	1.08 (0.94, 1.24) <sup>4</sup>	0.33 <sup>4</sup>	13 <sup>4</sup>	0.26 <sup>4</sup>	
Homozygote comparison <sup>4</sup> (TT versus CC) <sup>4</sup>	Total <sup>4</sup>	10(6102/8669) <sup>4</sup>	FEM <sup>4</sup>	1.05 (0.91, 1.21) <sup>4</sup>	0.07 <sup>4</sup>	43 <sup>4</sup>	0.51 <sup>4</sup>	<sup>4</sup>
	Asian <sup>4</sup>	4 (2536/5550) <sup>4</sup>	FEM <sup>4</sup>	0.57 (0.35, 0.92) <sup>4</sup>	0.2 <sup>4</sup>	35 <sup>4</sup>	0.02 <sup>4</sup>	
	Caucasian <sup>4</sup>	6 (3566/3119) <sup>4</sup>	FEM <sup>4</sup>	1.11 (0.96, 1.29) <sup>4</sup>	0.27 <sup>4</sup>	21 <sup>4</sup>	0.16 <sup>4</sup>	

OR: Odds ratio; 95% CI: 95% confidence interval; REM: random-effects model; FEM: fix-effects model.<sup>4</sup>

# ***Innovation points***

- Our results suggest that the *C242T* polymorphism might be a protective factor against developing ACS in the Asian population
- In the overall population and especially with Caucasians, no significant association was uncovered
- Further researches will be needed to identify the confounding factors which modified the protective effect of T allele among Caucasians.