

# A Meta-Analytic Evaluation of Day Care Attendance and Risk of Childhood ALL

International Workshop on Risk Factors for  
Childhood Leukemia (ICNIRP/WHO/BfS)

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Kevin Urayama, Xiaomei Ma, & Patricia Buffler



University of California, Berkeley  
School of Public Health

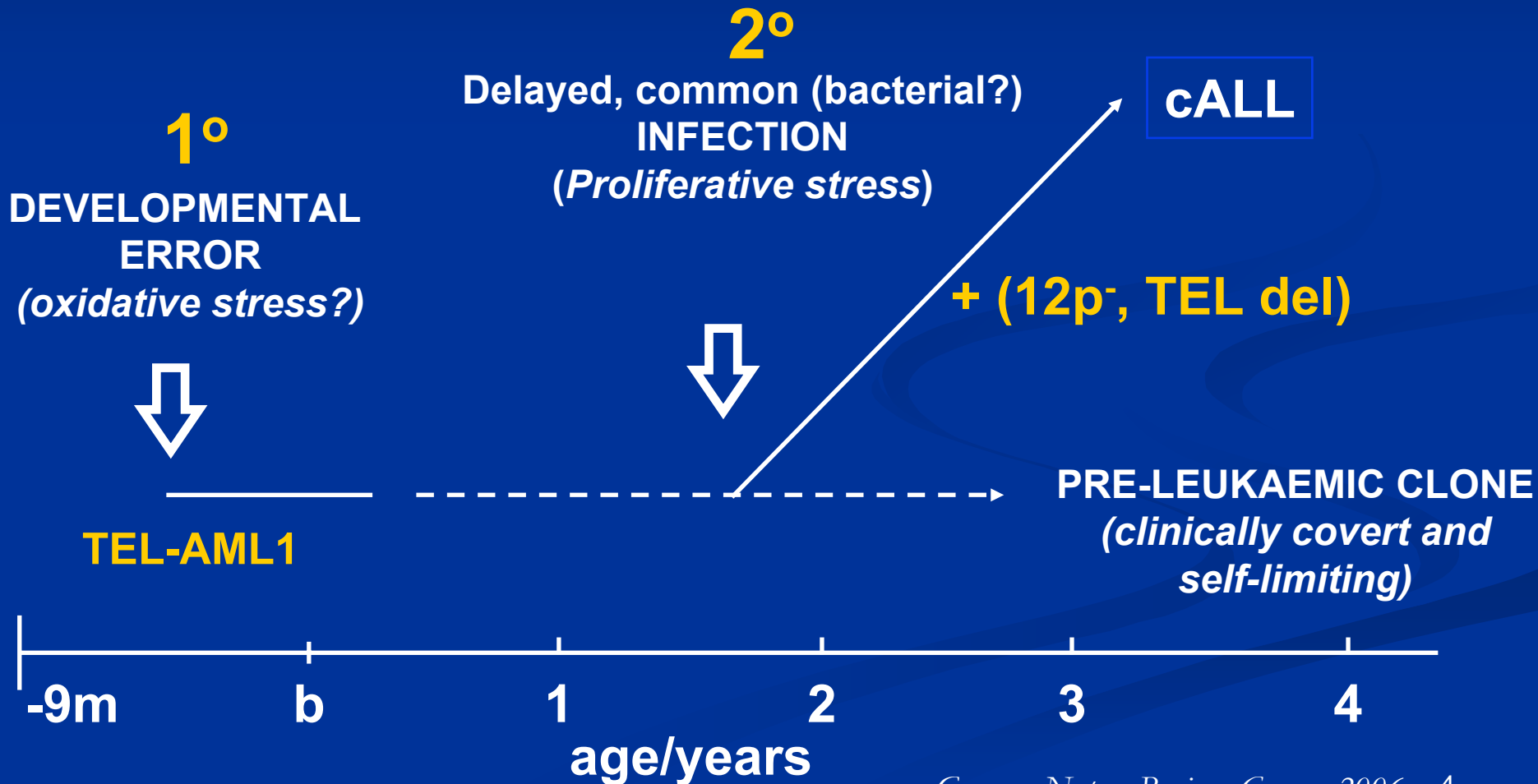
# Outline of Presentation

- Hypotheses on the role of infections in childhood leukemia
- Day care attendance finding in the Northern California Childhood Leukemia Study (NCCCLS)
- Meta-analysis of studies of day care attendance/social activity and risk of childhood leukemia

# *Hypotheses on Infections*

- Describes childhood leukemia as a rare response to one or more common infections acquired by personal contact
- Kinlen's Hypothesis ('population mixing')
  - Childhood leukemia may be caused by a viral infection or infections, the transmission of which is promoted by population-mixing.
- Greaves' Hypothesis ('delayed infections')
  - Childhood leukemia, especially cALL, may arise as a consequence of a rare abnormal response due to a delay in the of exposure to common infection(s)

# A 2 Step Model for the Natural History of cALL



# Surrogate measures used to assess the role of infections in childhood leukemia

## Social Contacts

- Child's birth order/family structure
- **Child's social contacts through day care, playgroups, etc.**
- Parental social contacts at work
- Population mixing

## Infections

- Childs infections
- Maternal infections during pregnancy

## Immune modulating

- Breastfeeding
- Vaccinations

## QUESTION

Are infections associated with childhood leukemia?

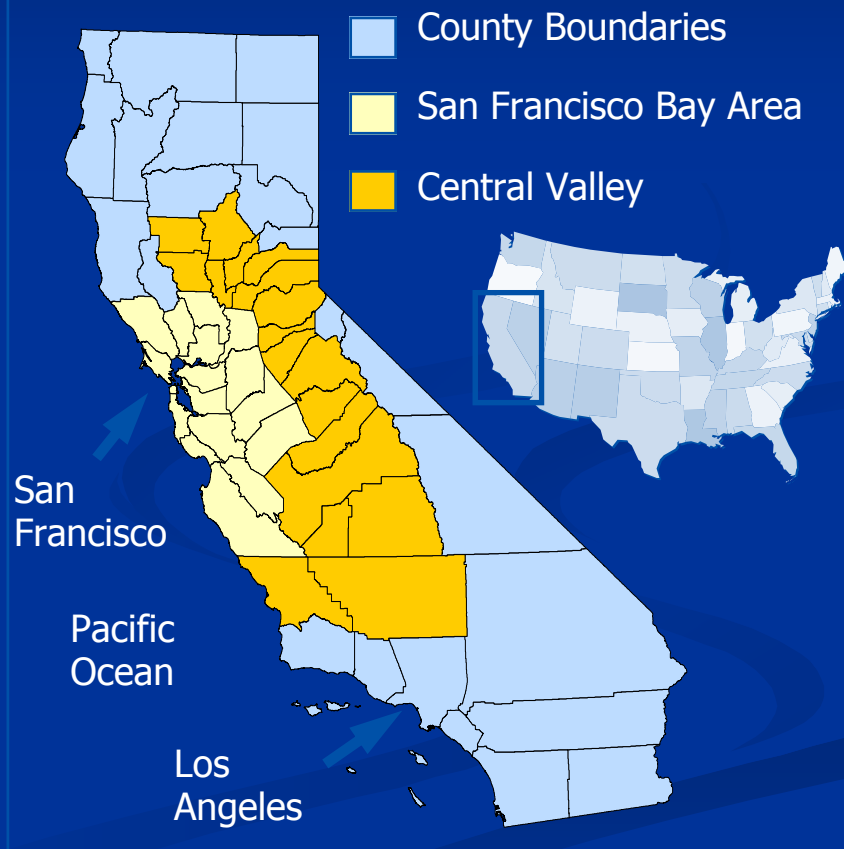
# Day Care Attendance

- In developed countries, contact with other children is the main source of exposure to common infections.
- Day care attendance increases the risk of infections.
- Hypothesis: Day care attendance, as a surrogate for exposure to infections during early childhood, is associated with a reduced risk of acute lymphoblastic leukemia

# Northern California Childhood Leukemia Study (NCCLS)

- Population-based matched case-control study of childhood leukemia
- Incident cases ascertained from 9 major pediatric clinical centers in N. & C. California
- Controls individually matched (date of birth, sex, Hispanic status, and maternal race)
- 42% Hispanic

**Map of NCCLS Study Area**



# Day care Attendance Data

- Data collected through an in-home personal interview
- Information obtained for each day care attended:
  - Age started day care
  - Months attended
  - Mean hours per week attended
  - Number of other children at day care
- Total child-hours of exposure summary measure



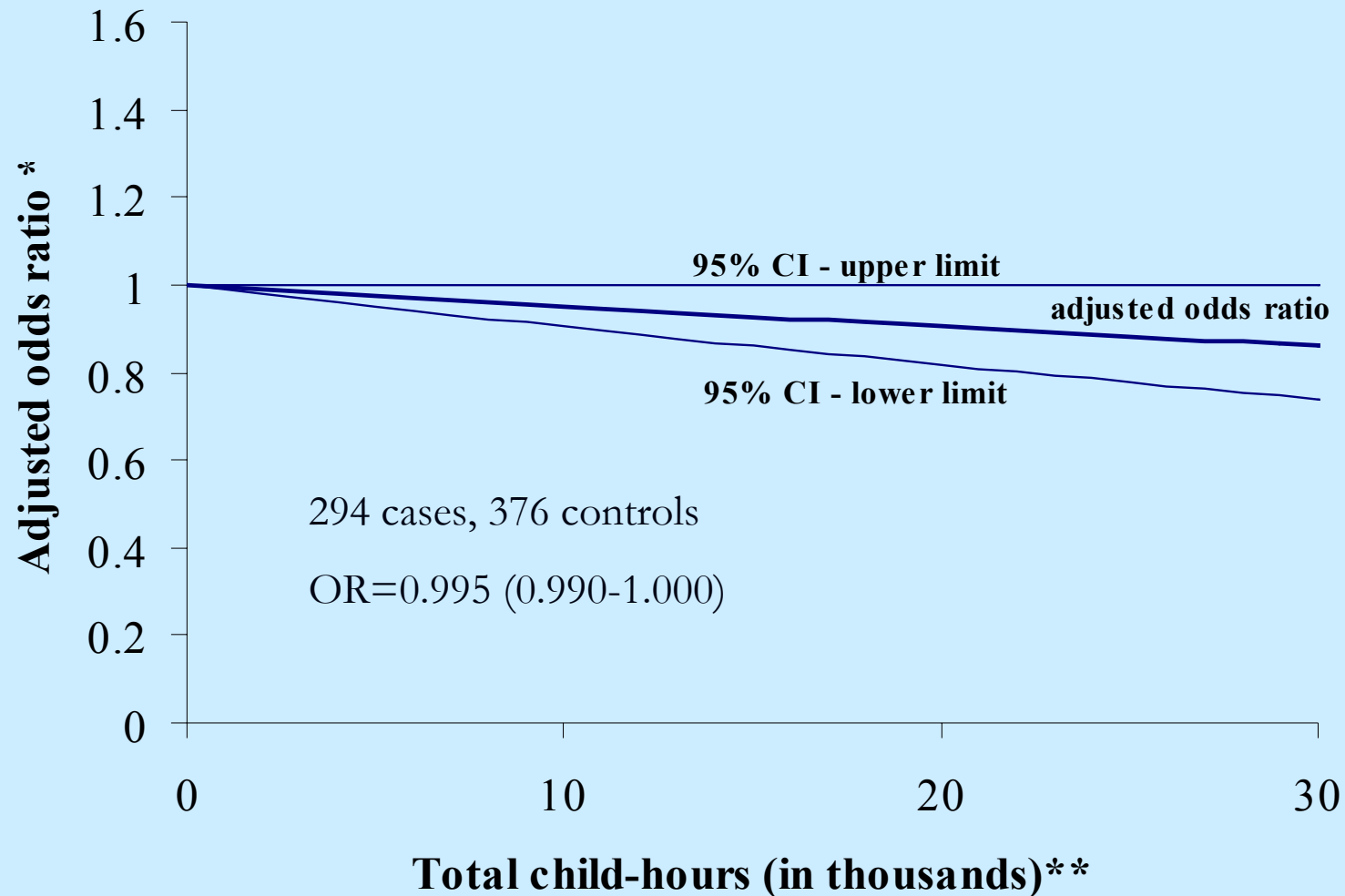
# Total Child-hours Calculation

$$\text{No. other children} \times \text{Months attended} \times \text{Mean hrs/wk} \times 4.35 \text{ wks/mo} = \text{Child-hours}$$

1st	10	5	5	4.35	1,087.5
2nd	6	4	7	4.35	730.8
3rd	13	6	6	4.35	2,035.8

Total child-hours 3,854.1

# Total Child-hours and Risk of ALL



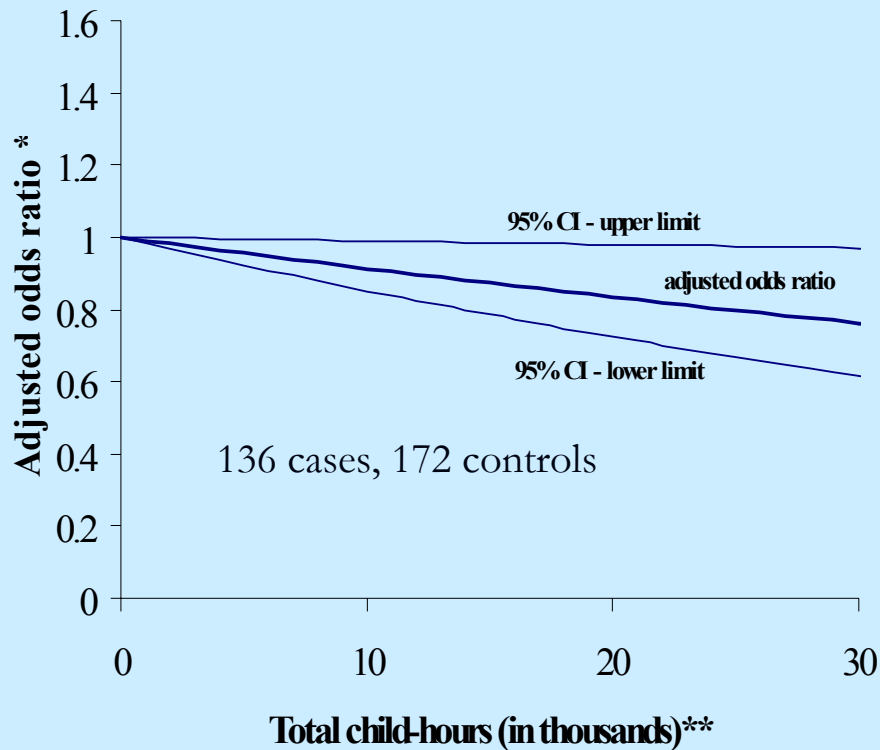
\*Adjusted for annual household income and maternal education

\*\*Total child-hours censored at reference date

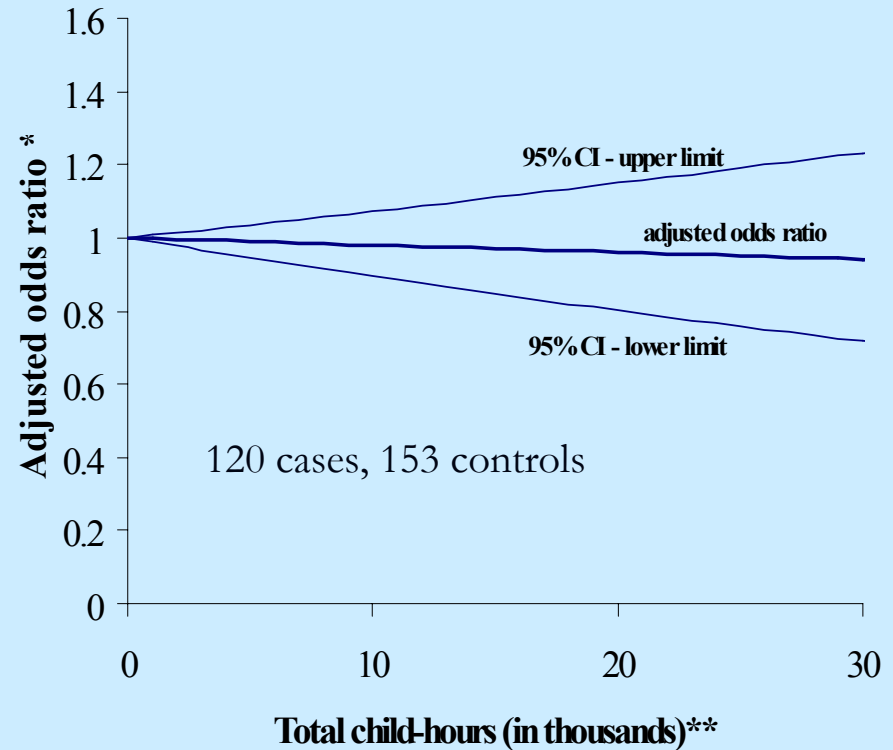
*Data from Ma et al., Cancer Epidemiology Biomarkers and Prevention, 2005.*

# Total Child-hours and Risk of ALL by Race/Ethnicity

## Non-Hispanic White



## Hispanic



\*Adjusted for annual household income and maternal education

\*\*Total child-hours censored at reference date

*Data from Ma et al., Cancer Epidemiology Biomarkers and Prevention, 2005.*

# Day Care Attendance Characteristics in NH-Whites & Hispanics

Variables	Cases			Controls			Case vs cont. in Whites
	White	Hisp	P	White	Hisp	P	
Total child-hrs, k	8.0	1.9	0.01	12.3	2.1	<0.001	0.06
Age started, mo.	30.0	54.0	<0.001				
Mo. of stay	12.5	3.0	<0.001				
Hrs/week	8.5	6.8	0.21	6.0	6.0	0.01	
# children at day care	9.4	3.8	<0.01				
# children in household	1.0	2.0	<0.001			<0.01	

Median values are presented; Data censored on reference data

P-values are from nonparametric Wilcoxon rank-sum tests. (From Ma et al., CEBP, 2005)

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	White	Hisp	P	White	Hisp	P	
Total child-hrs, k	8.0	1.9	<0.01	12.3	2.1	<0.001	0.06
Age started, mo.				30.0	49.0	<0.001	
Mo. of stay				18.8	3.0	<0.001	
Hrs/week				13.7	8.0	<0.01	0.01
# children at day care				10.1	5.0	<0.01	
# children in household				1.0	2.0	<0.001	

Median values are presented; Data censored on reference data

P-values are from nonparametric Wilcoxon rank-sum tests. *(From Ma et al., CEBP, 2005)*

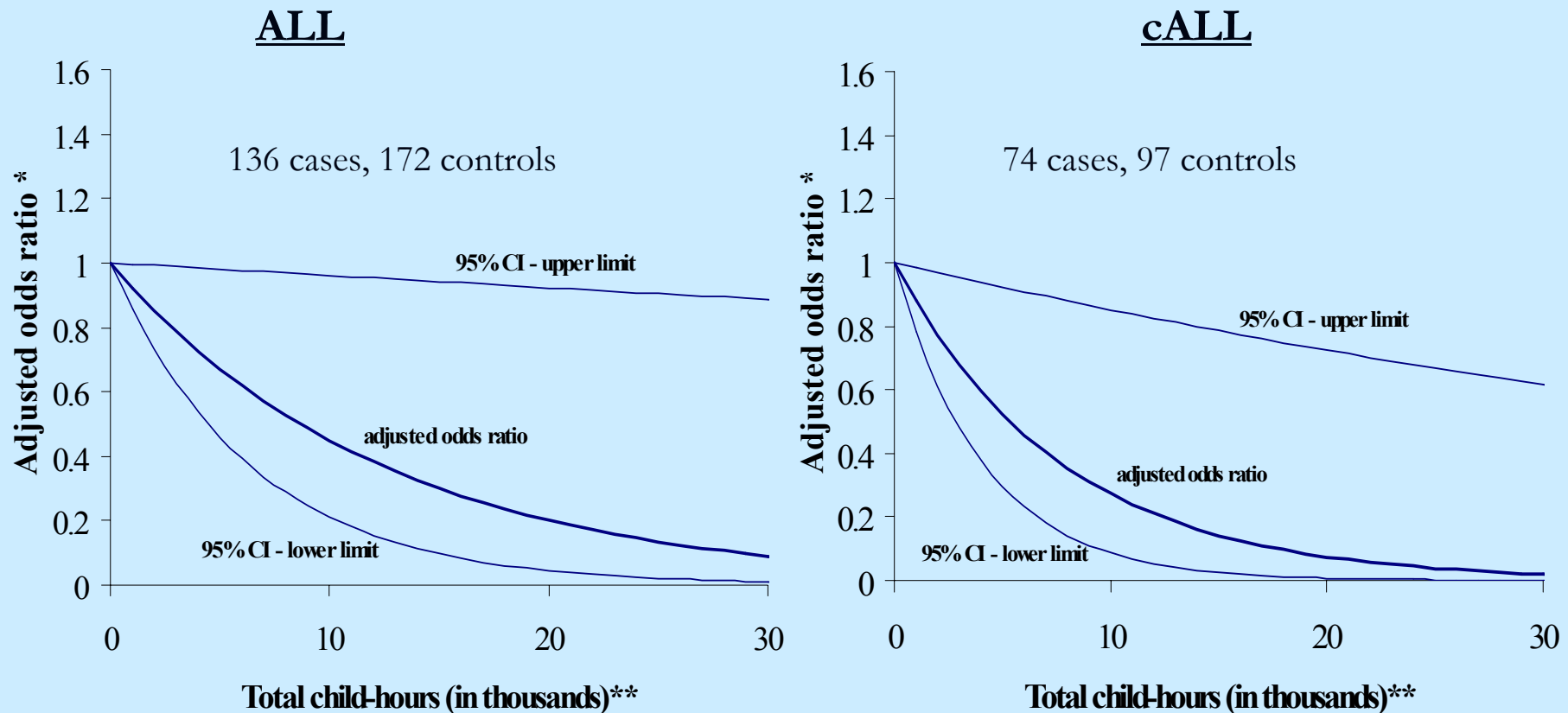
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	White	Hisp	P	White	Hisp	P	
Total child-hrs, k	8.0	1.9	0.01	12.3	2.1	0.01	0.06
Age started, mo.	30.0			30.0			0.06
Mo. of stay	12.5			18.8			0.32
Hrs/week	8.5			13.7	6.9	0.01	0.01
# children at day care	9.4			10.1			0.26
# children in household	1.0			1.0		0.01	0.72

Median values are presented; Data censored on reference data

P-values are from nonparametric Wilcoxon rank-sum tests. (From Ma et al., CEBP, 2005)

# Total Child-hours during Infancy and Risk of ALL and cALL in NH-Whites



\*Adjusted for annual household income and maternal education

\*\*Total child-hours censored at 1 year of age

*Data from Ma et al., Cancer Epidemiology Biomarkers and Prevention, 2005.*

# Summary of NCCLS Results

- In Non-Hispanic White children, increasing child-hours of exposure is associated with reduced risk of ALL.
- In Non-Hispanic White children, the reduction in risk is stronger in cALL and when censoring day care on the 1<sup>st</sup> year of life.



# Meta-analysis of Studies of Day Care Attendance and Risk of Childhood ALL

## Objectives:

- 1) Identify all previous studies on day care attendance/social activity and risk of childhood leukemia
- 2) Calculate combined risk estimates and 95% confidence intervals
- 3) Evaluate the overall consistency and strength of association while identifying the various sources of between-study heterogeneity

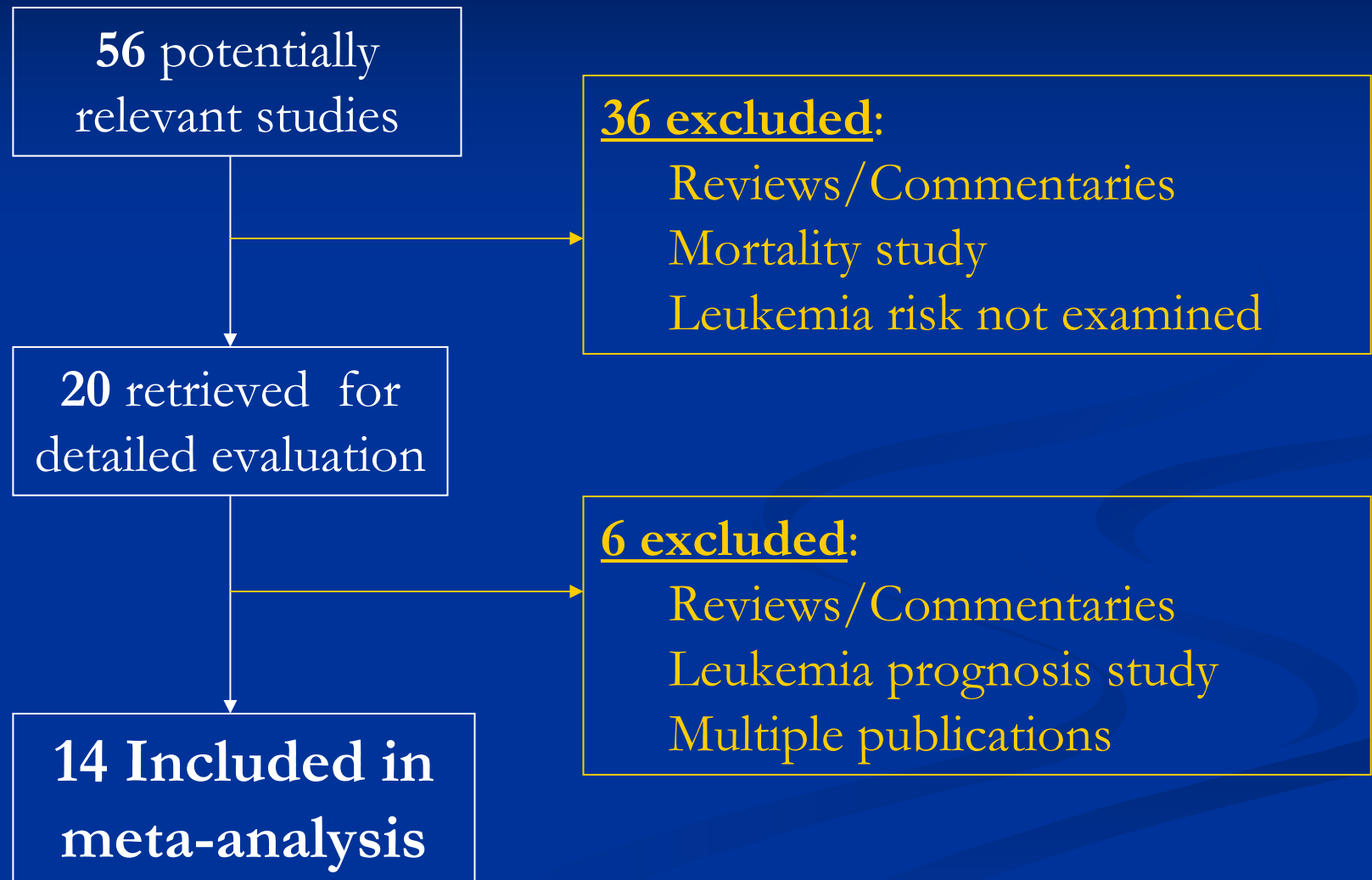
# Definitions

- Outcome: Clinically diagnosed ALL, acute leukemia or leukemia in children between 0 and 19 years of age.
- Exposure: Day care attendance and/or social activity
  - Such as formal day care, nursery school, play groups, mother and toddler groups, preschool, “social activity”, etc.

# Search Method

- Searched the PubMed database using the terms “childhood leukemia” and “childhood cancer” in combination with terms including:
  - Infections
  - Day care
  - Child care
  - Social contact
- Bibliographies of publications on infections and childhood leukemia

# Flow Diagram of Inclusion/Exclusion



# 14 Studies Included in Analysis

Study, Year	Location	Disease	Age	Case/cont
Petridou et al., 1993	Greece	Leukemia	0-14	136/187
Roman et al., 1994	UK	ALL	0-4	38/112
Petridou et al., 1997	Greece	Leukemia	0-14	153/300
Schuz et al., 1999	Germany	AL, c-ALL	1.5-14	921/921
Dockerty et al., 1999	New Zealand	ALL	15 mo – 14	90/266
Infante-Rivard et al., 2000	Canada	ALL	0-9	433/416
Rosenbaum et al., 2000	USA	ALL	0-14	158/499
Neglia et al., 2000	USA	ALL, c-ALL	1-14	1744/1879
Chan et al., 2002	Hong Kong	AL, c-ALL	2-14	98/228
Perrillat et al., 2002	France	AL	2-15	246/237
Jourdan-Da Silva et al., 2004	France	AL, ALL	1-15	387/525
Gilham et al., 2005	UK	ALL, c-ALL	2-14	1272/6238
Ma et al., 2005 (NH-Whites)	USA	ALL, c-ALL	1-14	136/172
Ma et al., 2005 (Hispanics)	USA	ALL, c-ALL	1-14	120/153
Kamper-Jorgensen et al., 2008	Denmark	ALL, c-ALL	0-15	176/1571

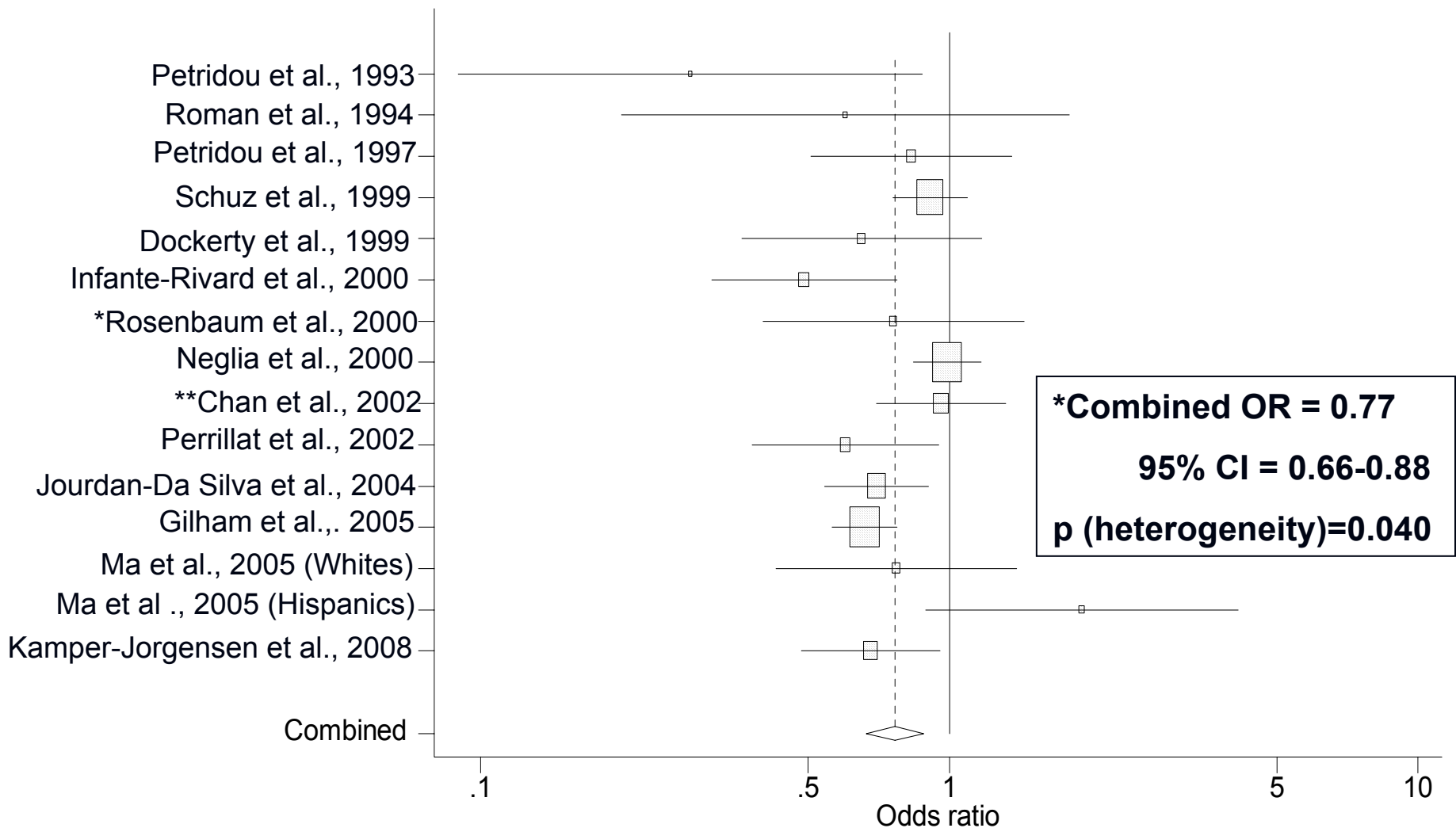
# Definitions of Exposure in Analysis

Study, Year	Exposure Type	Time of Exposure
Petridou et al., 1993	Attendance at creche (No/Yes)	< 2 yrs of age
Roman et al., 1994	Preschool playgroup (No/Yes)	Year before dx
Petridou et al., 1997	Day care (No/Yes)	Birth to dx
Schuz et al., 1999	Deficit in social contacts (No/Yes)	< 2 yrs of age
Dockerty et al., 1999	Reg. contact outside home (No/Yes)	< 1 yr of age
Infante-Rivard et al., 2000	Entry $\leq$ 2 yrs old vs. no day care	< 2 yrs of age
Rosenbaum et al., 2000	>36 mo. of care vs. stayed home	Birth to dx
Neglia et al., 2000	Day care before age 2 (No/Yes)	< 2 yrs of age
Chan et al., 2002	Index & family day care measure	< 1 yr of age
Perrillat et al., 2002	Day care (No/Yes)	Birth to dx
Jourdan-Da Silva et al., 2004	Day care (No/Yes)	Birth to dx
Gilham et al., 2005	Social activity (No/Yes)	< 1 yr of age
Ma et al., 2005 (NH-Whites)	Day care (No/Yes)	< 1 yr of age
Ma et al., 2005 (Hispanics)	Day care (No/Yes)	< 1 yr of age
Kamper-Jorgensen et al., 2008	Child care (No/Yes)	< 2 yrs of age

# Main Meta-analysis

- Random effects model
- Main analysis:
  - Day care/social activity and ALL (14 studies)
  - If study reported multiple ORs by time period of day care attendance/social activity, then OR for earliest time period was used

# Day care Attendance/Social Activity (ever/never) & Childhood ALL



\*Stayed home vs. >36 months of care

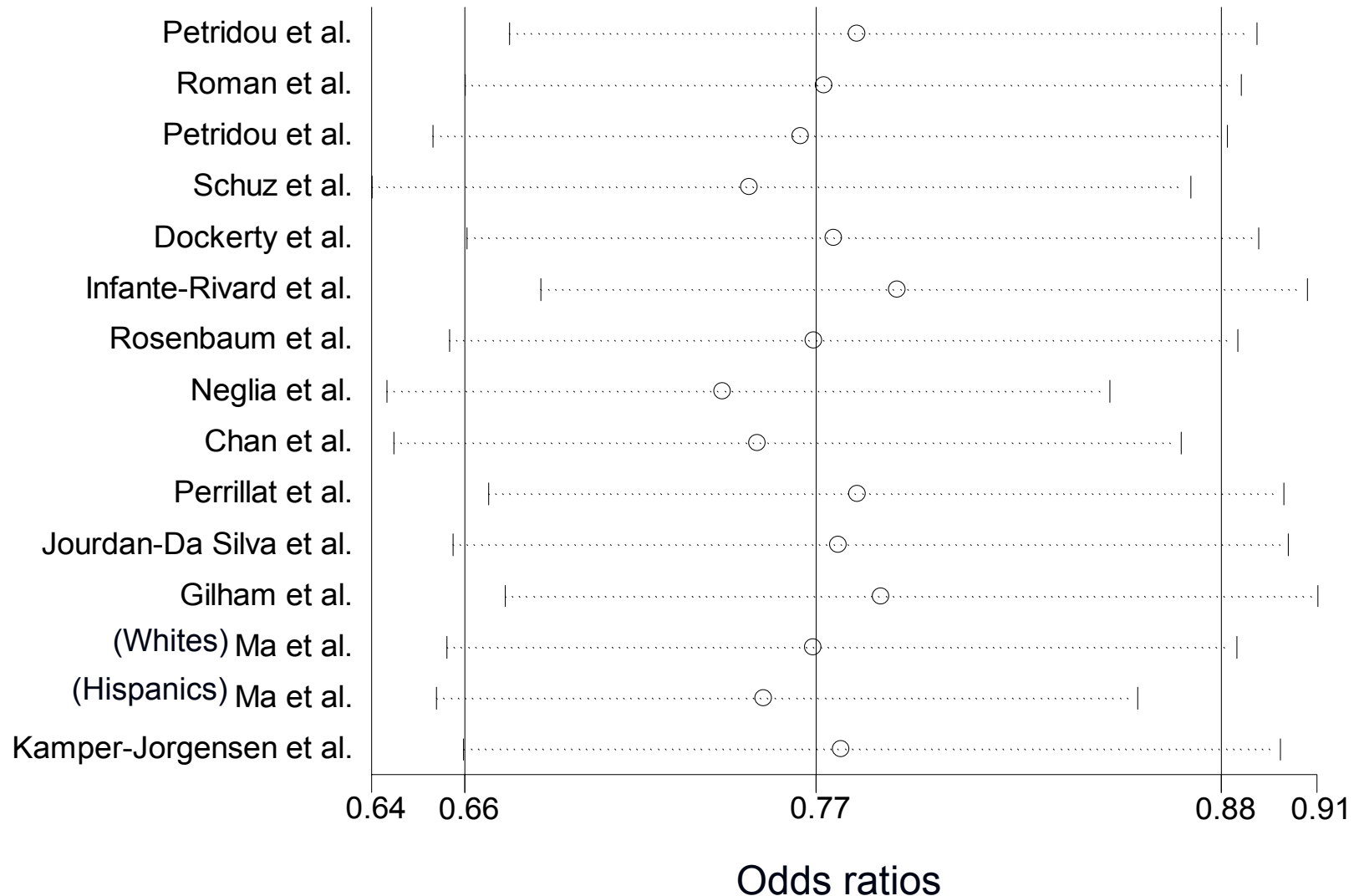
\*\*3-part index and family day care measure (trend)



# Influence Analysis of Individual Study Results

Meta-analysis random-effects estimates (exponential form)

Study omitted

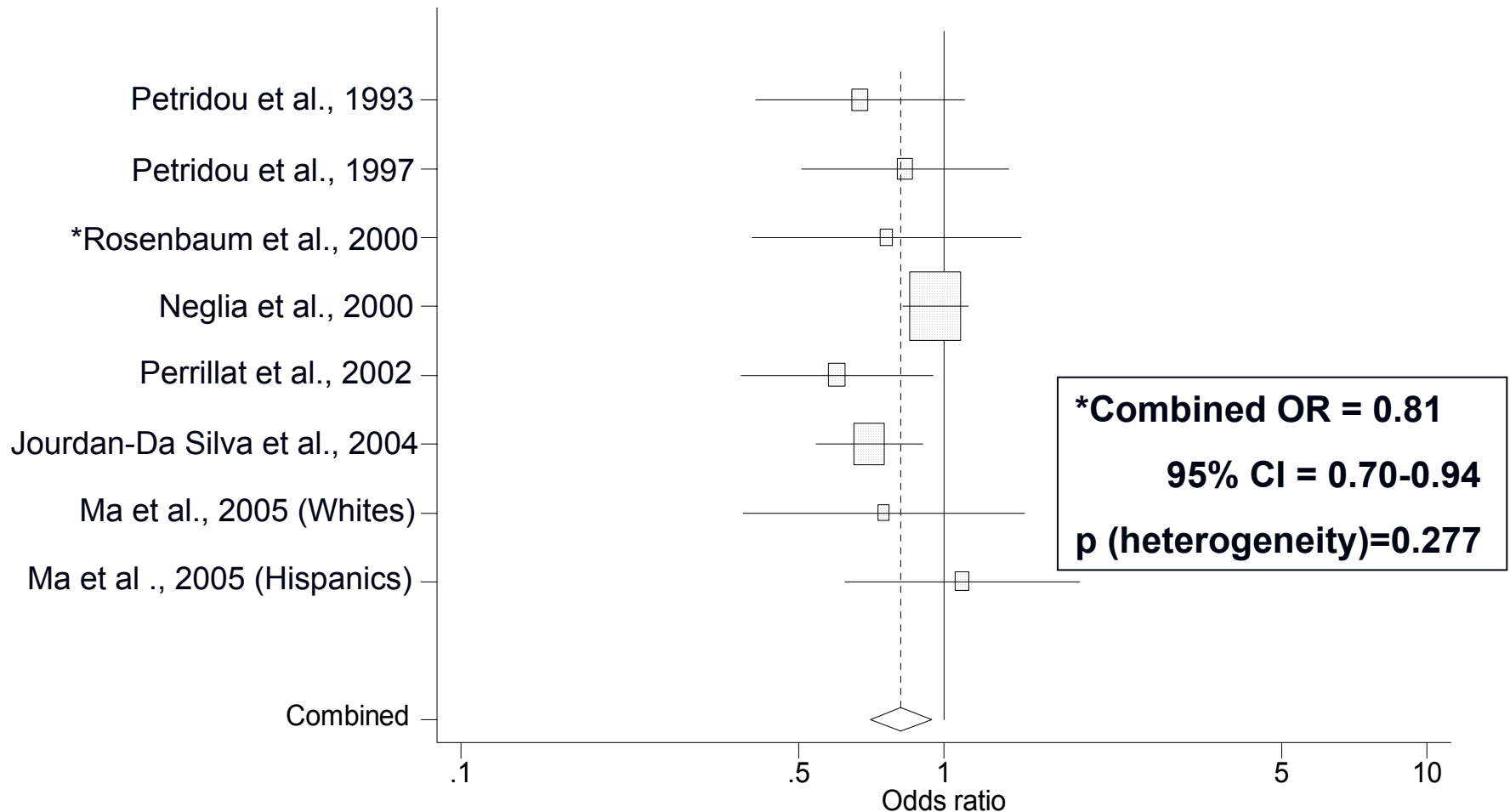


# Subgroup Meta-analysis

- Random effects model
- Subgroup analyses:
  - Day care/social activity unspecified timing and ALL (7 studies)
  - Day care/social activity at age <1 or <2 and ALL (9 studies)

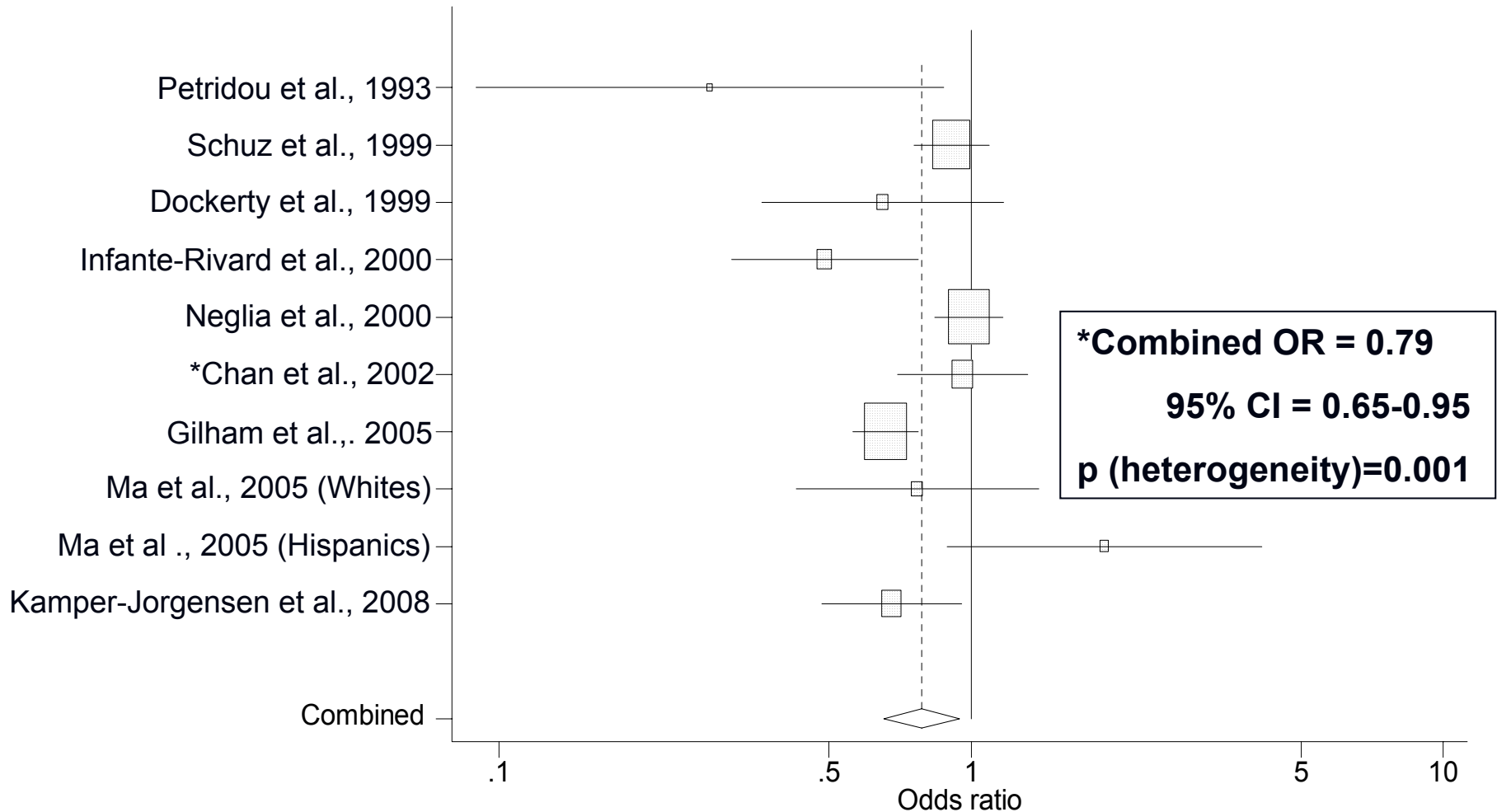
# Day care attendance/social activity & childhood ALL

## *Unspecified Timing*



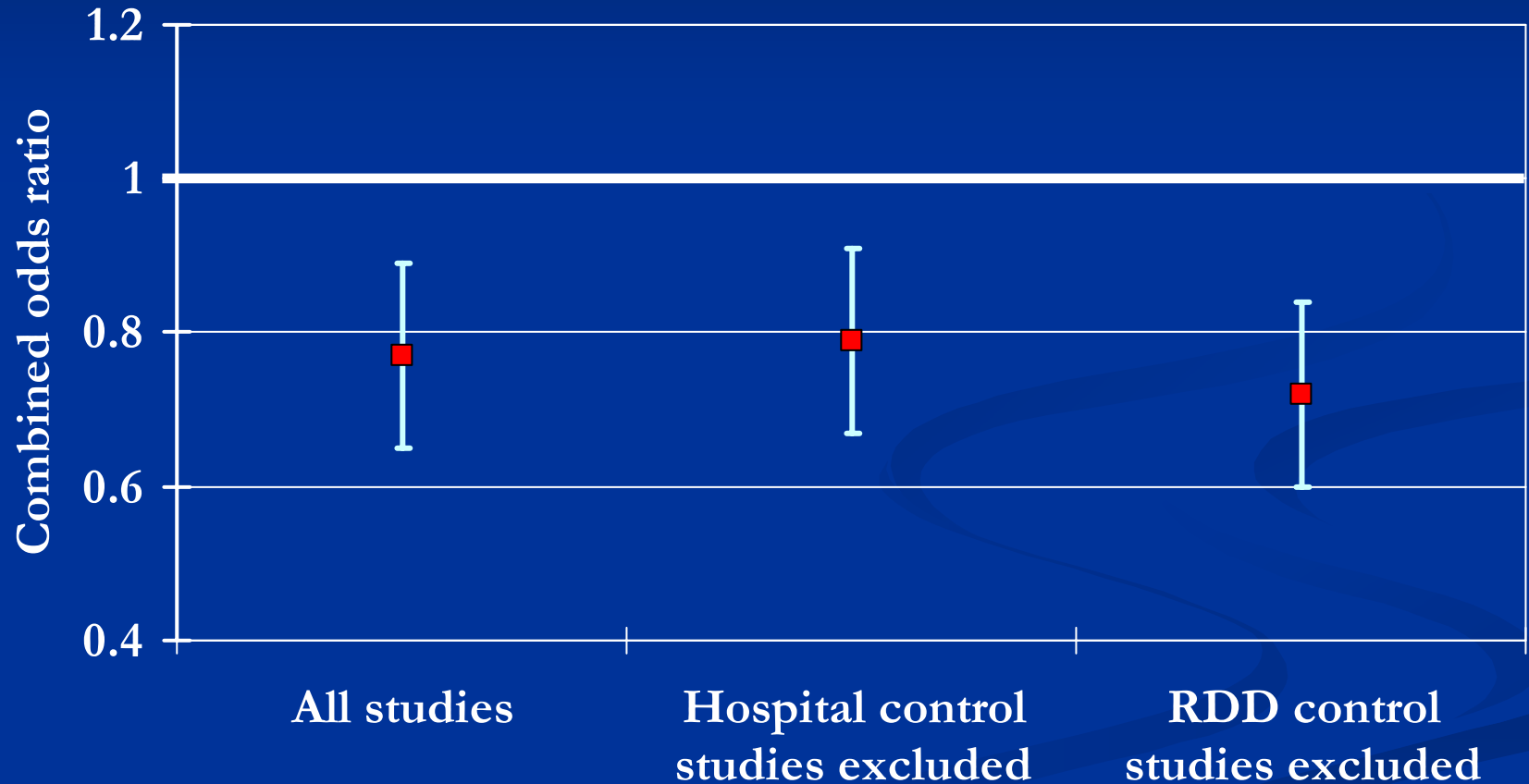
\*Stayed home vs. >36 months of care

# Day care attendance/social activity & Childhood ALL *<1 or <2 years of age*



\*3-part index and family day care measure (trend)

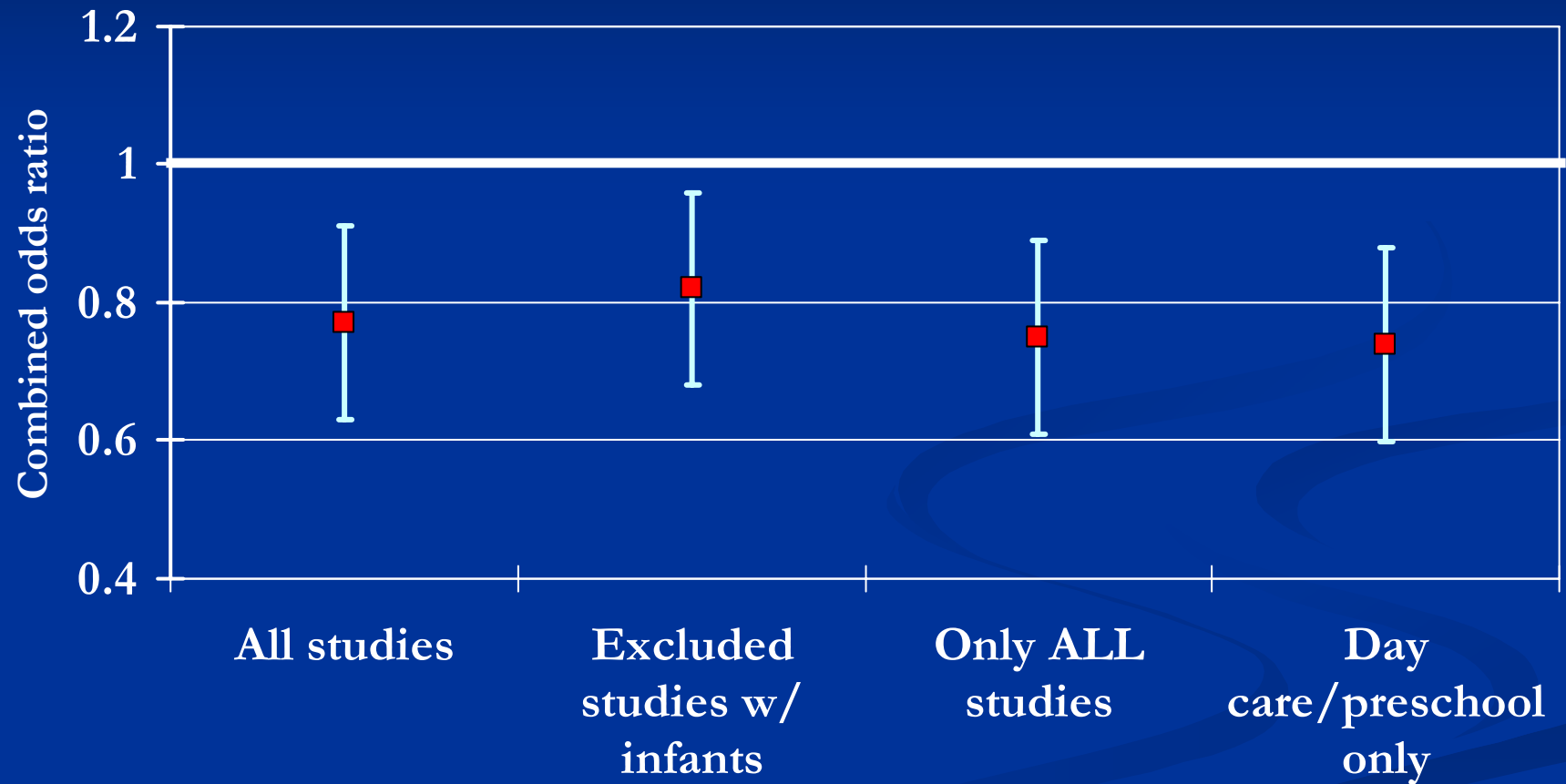
# Heterogeneity: *Selection Bias*



# Heterogeneity: *Information Bias*

- Recall bias
  - All studies are case-control in design
  - The 1 records-based study showed a reduced risk  
OR= 0.68, 95% CI=0.48-0.95
- Exposure misclassification
  - Only day care attendance (4 studies excluded)
- Disease misclassification
  - Infants in study pop. (6 studies excluded)
  - Only ALL studies (5 studies excluded)

# Heterogeneity: *Information Bias*



# Heterogeneity: *Others*

## Confounding

- All studies adjusted for major confounders (e.g. age, sex, SES and race/ethnicity if applicable)

## Publication bias

- None observed based on visual evaluation of funnel graphs and the Begg and Mazumdar adjusted rank correlation test



# Summary of Results

- Day care attendance/social activity is associated with a statistically significant reduced risk of childhood ALL
- Similar results were found for cALL, although based on a smaller number of studies (7)

# Summary of Results

- Age at start of daycare/social activity does not appear to significantly affect results
- Individual study biases do appear to contribute to study heterogeneity, but do not completely account for the reduced risk observed.

# Future Directions

- Studies should attempt to obtain detailed accounts of the extent of social contacts in the day care setting.
- Understand the relationships and contributions of the various sources of exposure to infections.
- Evaluate the influence of genetic susceptibility on the relationship between exposure to infections and childhood ALL.

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- National Cancer Institute (NCI)
- Children with Leukaemia (CwL) Charity, UK

**Thank you for your attention!**

# Inclusion/Exclusion Criteria

- Language: English
- Publication date: Jan. 1966 to April 2008
- Study design: Cohort or case-control
- Exposure: day care attendance or social activity
- Outcome: leukemia in children aged 0-19 years
- Location: any
- Race/ethnicity: any
- Used most recent for multiple publications

# Sources of Heterogeneity

- Exposure assessment and classification
- Timing of exposure
- Disease classification
- Age groups
- Location of study
- Control selection
- Adjustment for confounding

# Statistical Analysis

- Fixed effects model: assumes that the true effect of the exposure is the same value in each study; differences due to random variation
  - ORs are weighted according to a measure of the quantity of information they contain
- Random effects model: assumes a different underlying effect for each study
  - Relatively more weight is given to smaller studies



# 14 Studies Included in Analysis

Study, Year	Location	Disease	Years Dx	Age
Petridou et al., 1993	Greece	Leukemia	1987-1992	0-14
Roman et al., 1994	UK	ALL	1972-1989	0-4
Petridou et al., 1997	Greece	Leukemia	1993-1994	0-14
Schuz et al., 1999	Germany	AL, c-ALL	1980-1997	1.5-14
Dockerty et al., 1999	New Zealand	ALL	1990-1993	15 mo – 14
Infante-Rivard et al., 2000	Canada	ALL	1989-1995	0-9
Rosenbaum et al., 2000	USA	ALL	1980-1991	0-14
Neglia et al., 2000	USA	ALL, c-ALL	1989-1993	1-14
Chan et al., 2002	Hong Kong	AL, c-ALL	1994-1997	2-14
Perrillat et al., 2002	France	AL	1995-1999	2-15
Jourdan-Da Silva et al., 2004	France	AL, ALL	1995-1998	1-15
Gilham et al., 2005	UK	ALL, c-ALL	1991-1996	2-14
Ma et al., 2005 (NH-Whites)	USA	ALL, c-ALL	1995-2002	1-14
Ma et al., 2005 (Hispanics)	USA	ALL, c-ALL	1995-2002	1-14
Kamper-Jorgensen et al., 2008	Denmark	ALL, c-ALL	1989-2004	0-15

# Characteristics of Studies

Study	Exposure	Timing	Cases (n)	OR (95% CI)
Petridou	Attendance at creche	Before age 2	136	<b>0.28 (0.09-0.88)</b>
Roman	Preschool playgroup	Year before dx	38	0.60 (0.20-1.80)
Petridou	Day care	Birth to dx	153	0.83 (0.51-1.37)
Schuz	Deficit in social contacts	Before age 2	921	0.91 (0.90-1.30)
Dockerty	Contact outside home	First year of life	90	0.65 (0.36-1.17)
Infante-Rivard	Day care	Birth to age 2	433	<b>0.49 (0.31-0.77)</b>
Rosenbaum	Duration of care	Birth to dx	158	0.76 (0.70-2.52)
Neglia	Day care	Before age 2	1,744	0.99 (0.84-1.17)
Chan	Day care measure	First year of life	98	0.96 (0.70-1.32)
Perrillat	Day care	Birth to dx	246	<b>0.6 (0.4-1.0)</b>
Jourdan-Da Silva	Day care	Birth to dx	387	<b>0.7 (0.6-1.0)</b>
Gilham	Social activity	First year of life	1,272	<b>0.66 (0.56-0.77)</b>
Ma (White)	Day care	First year of life	136	0.77 (0.43-1.40)
Ma (Hispanic)	Day care	First year of life	120	1.92 (0.89-4.13)
Kamper-Jorgensen	Childcare	Birth to age 2	176	<b>0.68 (0.48-0.95)</b>