Table SII. *Relative risks[a] (RRs) of cutaneous squamous cell carcinoma (SCC) after organ transplantation in relation to human leukocyte antigen (HLA) types*

	Cases *n* (%)	Controls *n* (%)	Adjusted RR[a,b] (95% CI)	*p*-value*
HLA-A3				
Not carrier	133 (64)	134 (71)	Ref	
Carrier	58 (28)	48 (25)	1.4 (0.8–2.6)	0.21
Missing (%)	16 (8)	7 (4)		
HLA-A11				
Not carrier	172 (83)	161 (85)	Ref	
Carrier	19 (9)	21 (11)	0.6 (0.3–1.4)	0.24
Missing (%)	16 (8)	7 (4)		
HLA-B27				
Not carrier	167 (81)	161 (85)	Ref	
Carrier	26 (13)	21 (11)	1.2 (0.5–2.6)	0.70
Missing (%)	14 (7)	7 (4)		
HLA-DR1				
Not carrier	124 (60)	128 (68)	Ref	
Carrier	41 (20)	32 (17)	1.6 (0.9–3.1)	0.14
Missing (%)	42 (20)	29 (15)		
HLA-DR7				
Not carrier	143 (69)	135 (71)	Ref	
Carrier	22 (11)	25 (13)	1.0 (0.4–2.1)	0.91
Missing (%)	42 (20)	29 (15)		
HLA-DR homozygosity				
Heterozygote	114 (55)	102 (54)	Ref	
Homozygote	51 (25)	58 (31)	0.7 (0.4–1.2)	0.20
Missing (%)	42 (20)	29 (15)		

Controls were matched to cases by age (± 5 years) and calendar period of transplantation (± 5 years) and were further required to be alive and free of cancer at the time of the case SCC diagnosis.

[a]Relative risks were estimated by odds ratios and 95% confidence intervals (CI) using multivariate conditional logistic regression models.

[b]Estimates adjusted for sex of the recipient and total accumulated dose of azathioprine, cyclosporine and corticosteroids.

*Statistical significance (*p*-value) was estimated with likelihood ratio tests.