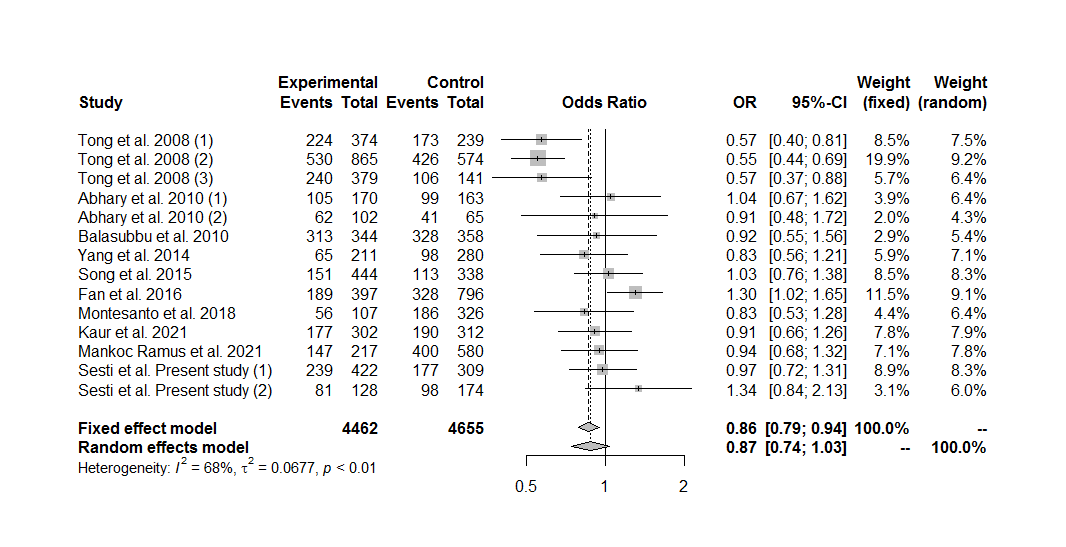
**Supplementary Material**

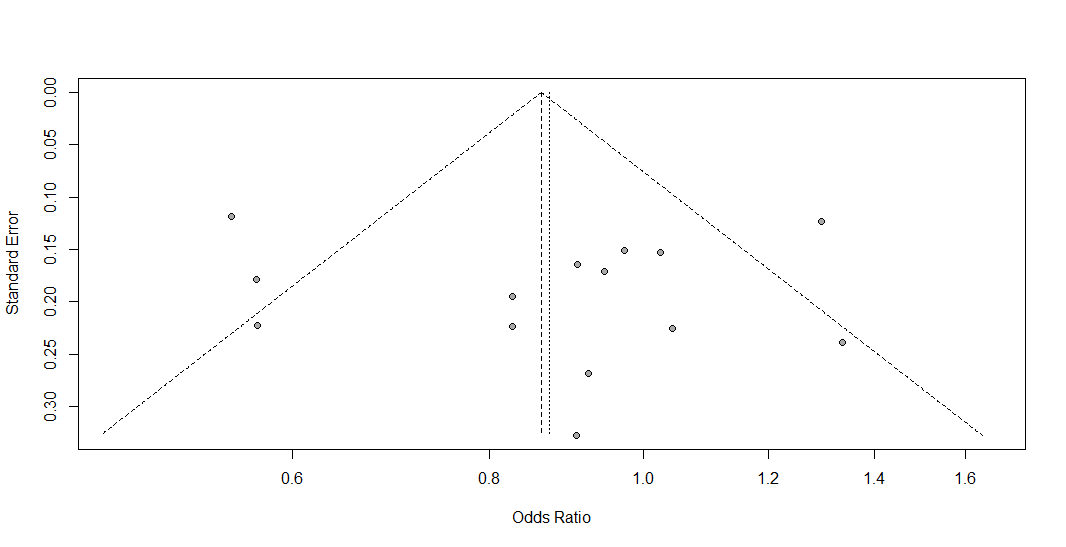
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**Supplementary Figures**

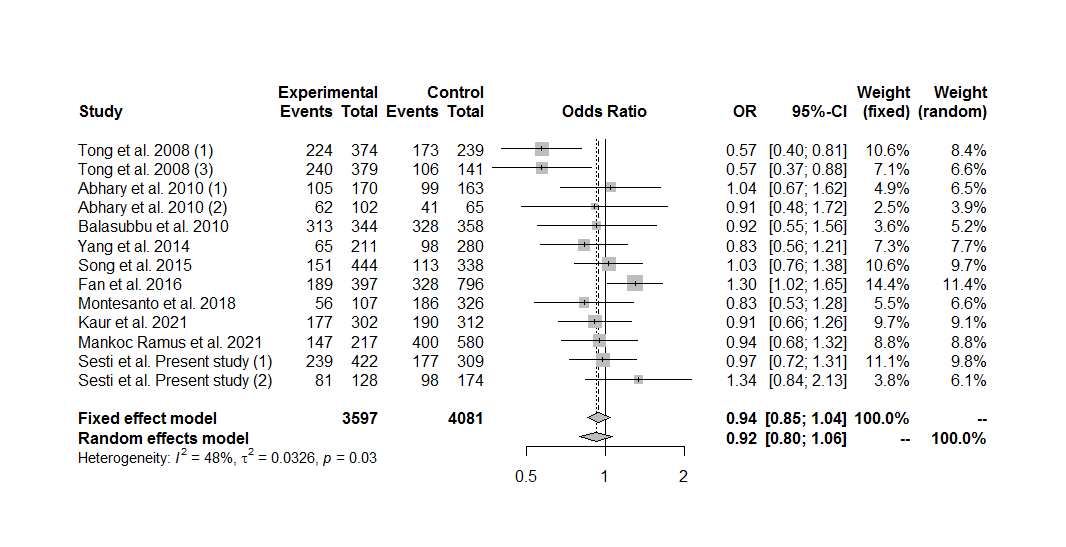
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| **Figure S121** | Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in non-Asians, including only the sets with controls in Hardy-Weinberg equilibrium, under the dominant genetic model for the minor allele (CC+AC vs. AA) | **140** |
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| **Figure S128** | Forest plot of the association between the *EPO* polymorphisms and diabetic retinopathy, including only the sets with controls in Hardy-Weinberg equilibrium, by comparing the GCC haplotype with TTA haplotype | **147** |

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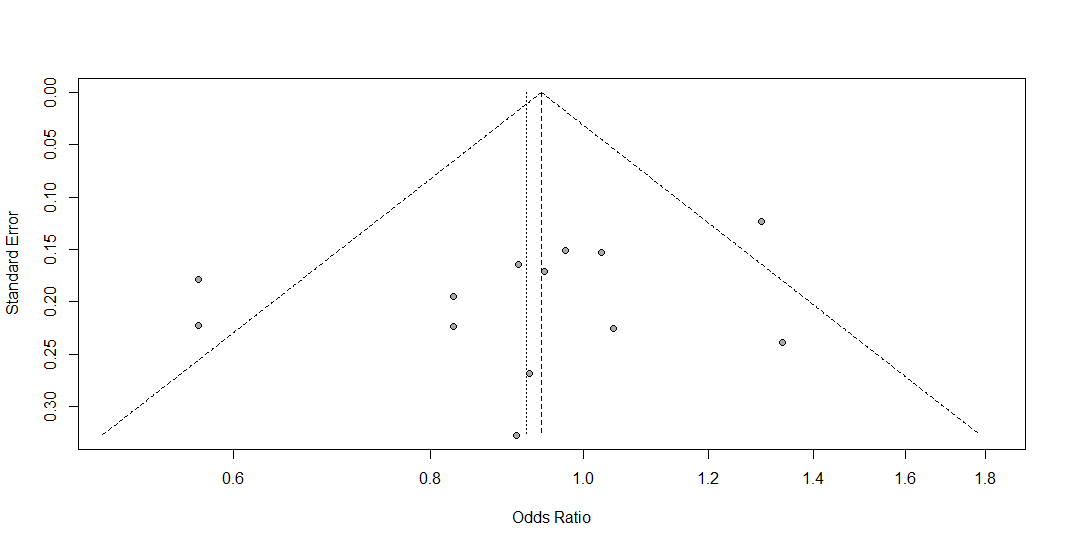
**Figure S1.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, under the dominant genetic model for the minor allele (GG+TG vs. TT).

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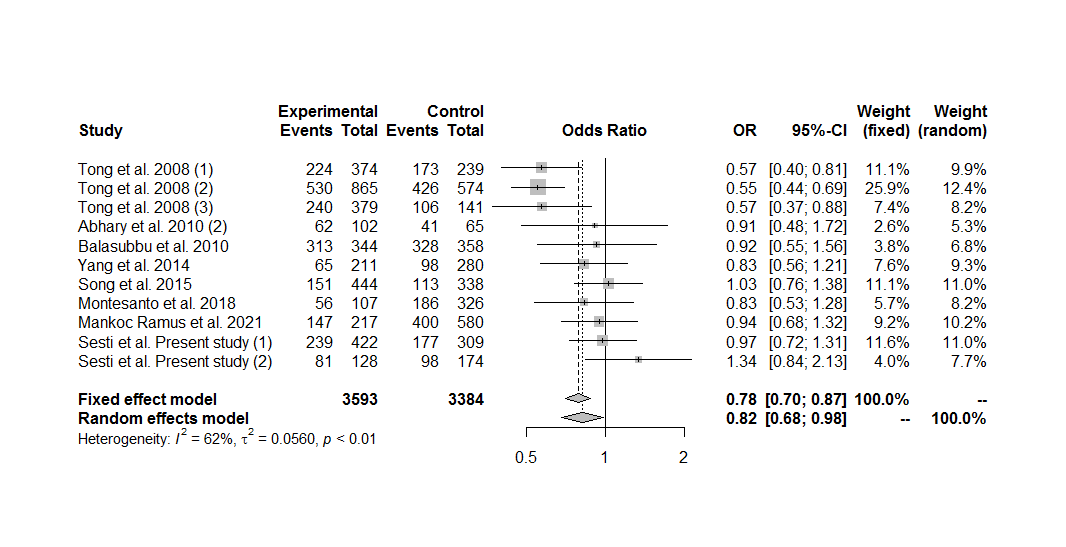
**Figure S2.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, under the dominant genetic model for the minor allele (GG+TG vs. TT).

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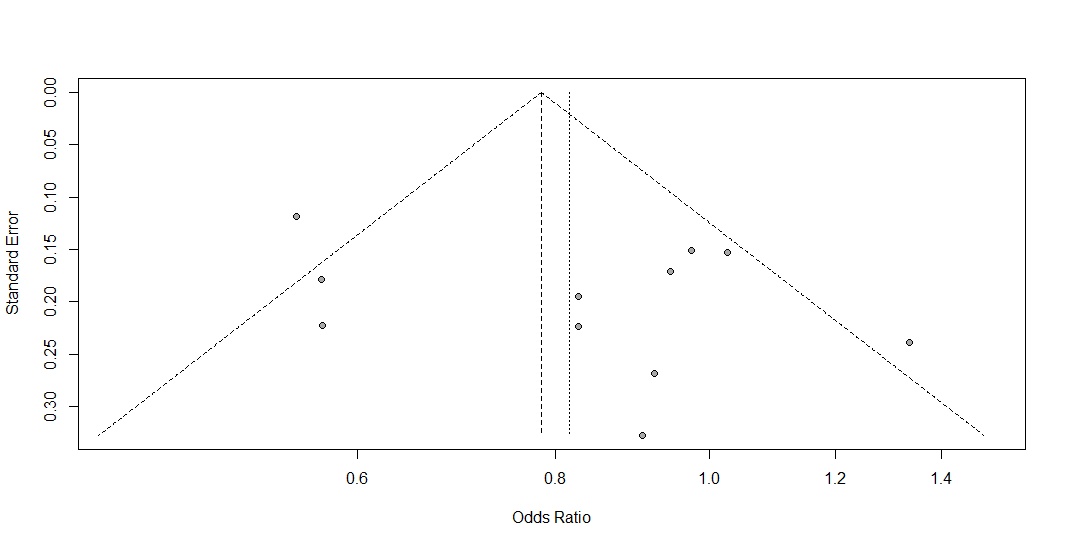
**Figure S3.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis without the cohort #2 by Tong et al. (2008), under the dominant genetic model for the minor allele (GG+TG vs. TT).



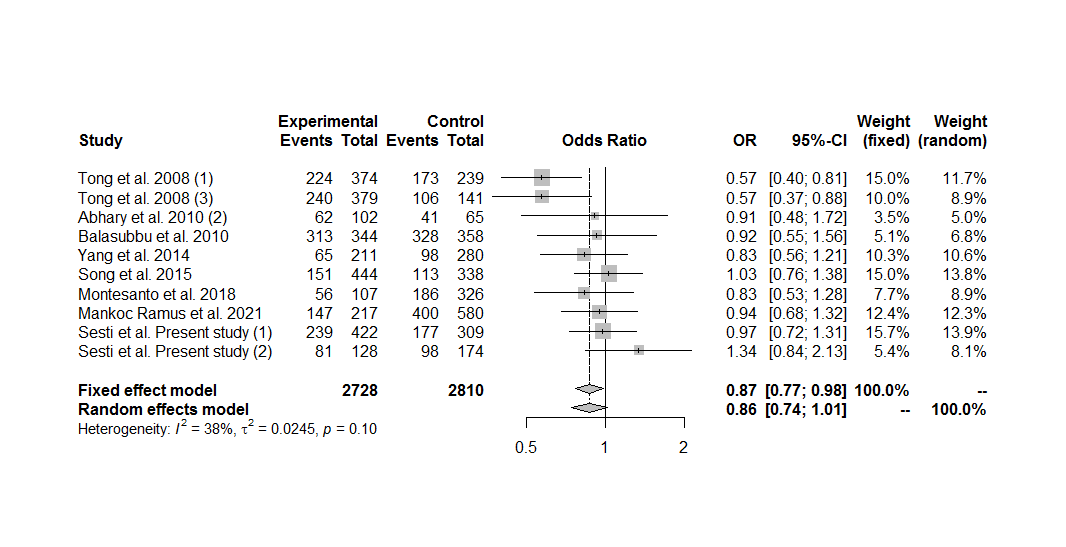
**Figure S4.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis without the cohort #2 by Tong et al. (2008), under the dominant genetic model for the minor allele (GG+TG vs. TT).



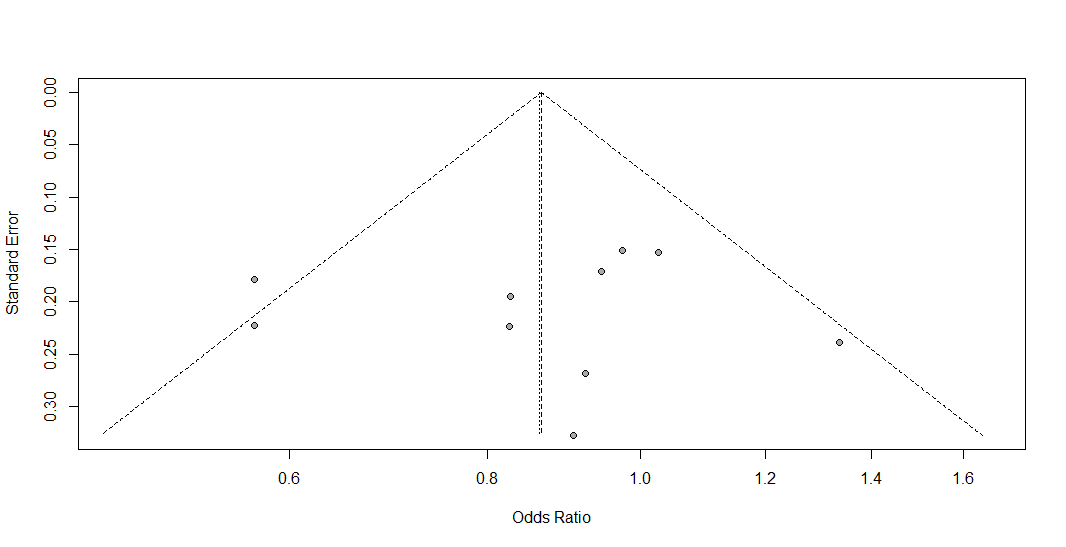
**Figure S5.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the dominant genetic model for the minor allele (GG+TG vs. TT).

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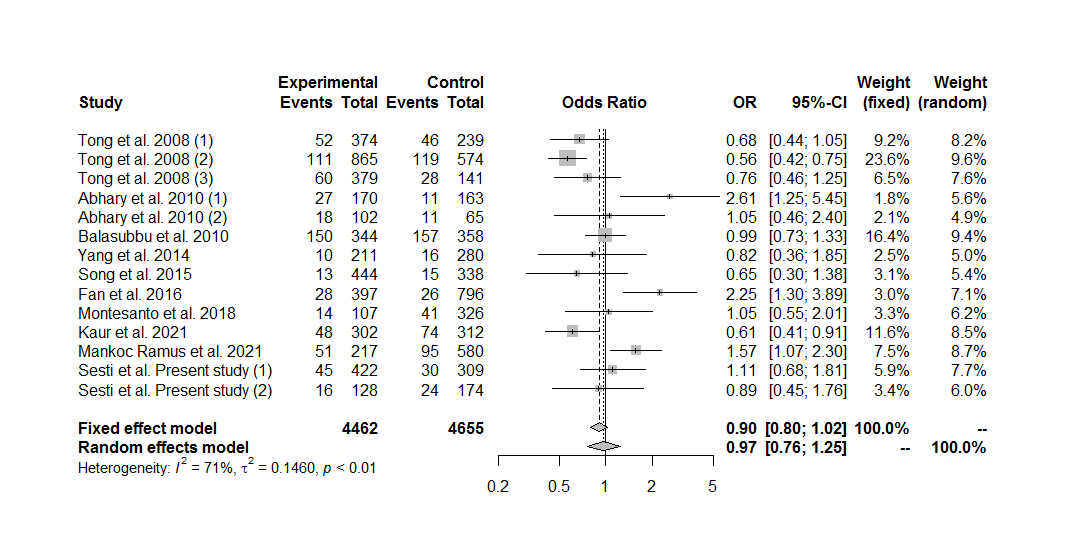
**Figure S6.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the dominant genetic model for the minor allele (GG+TG vs. TT).



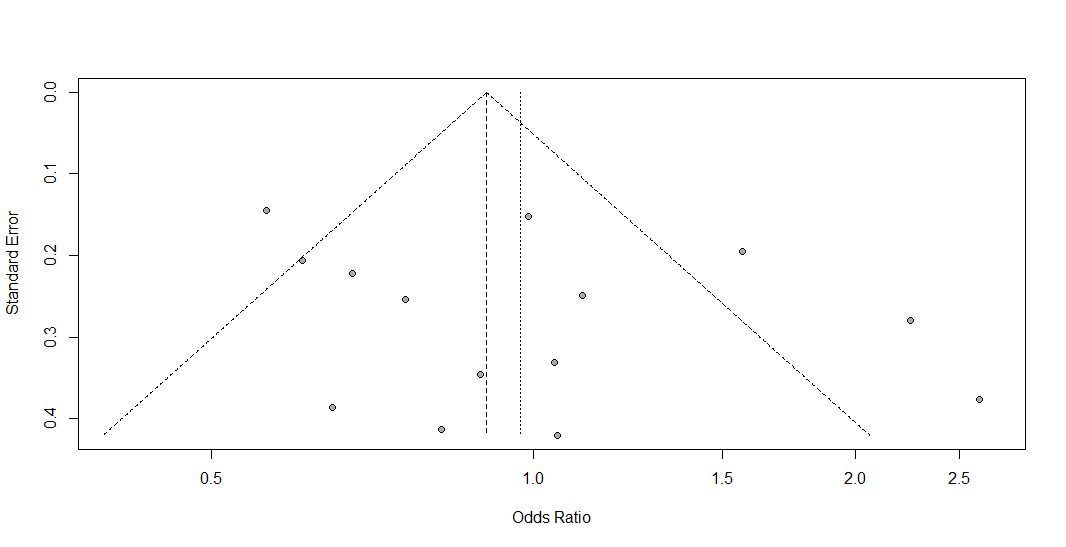
**Figure S7.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, including only the sets with controls in Hardy-Weinberg equilibrium and excluding the cohort #2 by Tong et al. (2008), under the dominant genetic model for the minor allele (GG+TG vs. TT).

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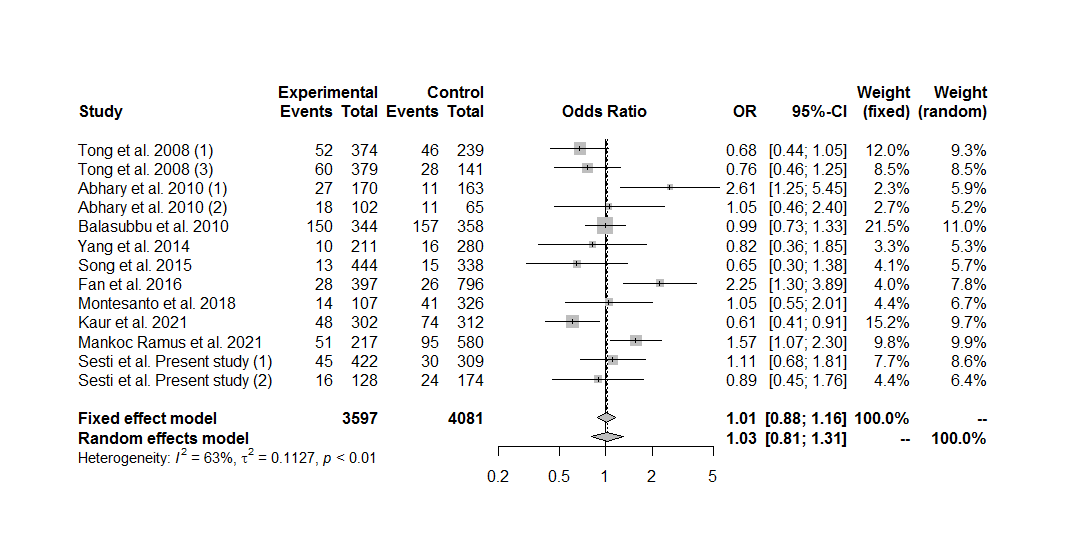
**Figure S8.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, including only the sets with controls in Hardy-Weinberg equilibrium and excluding the cohort #2 by Tong et al. (2008), under the dominant genetic model for the minor allele (GG+TG vs. TT).

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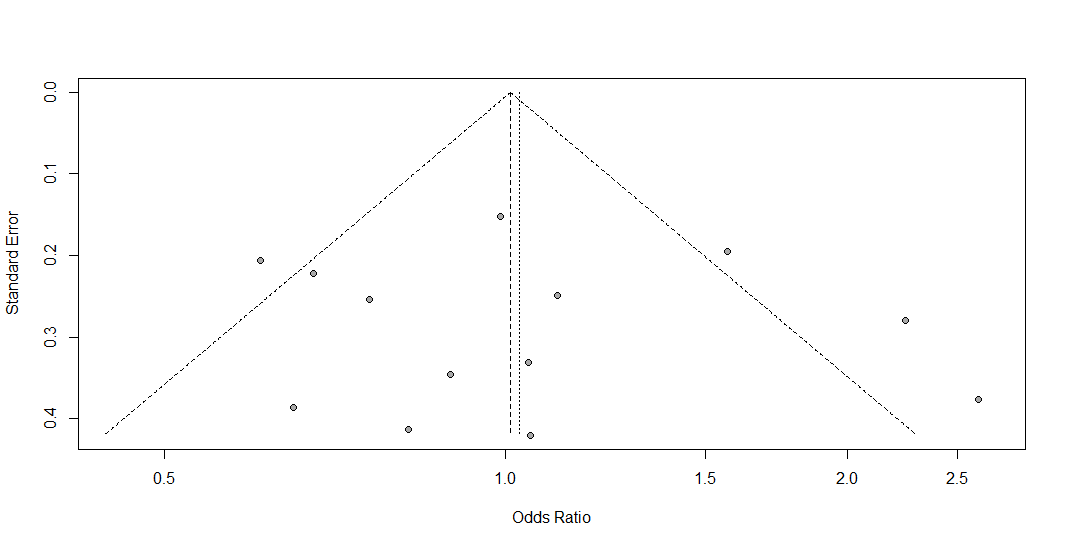
**Figure S9.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, under the recessive genetic model for the minor allele (GG vs. TG+TT).

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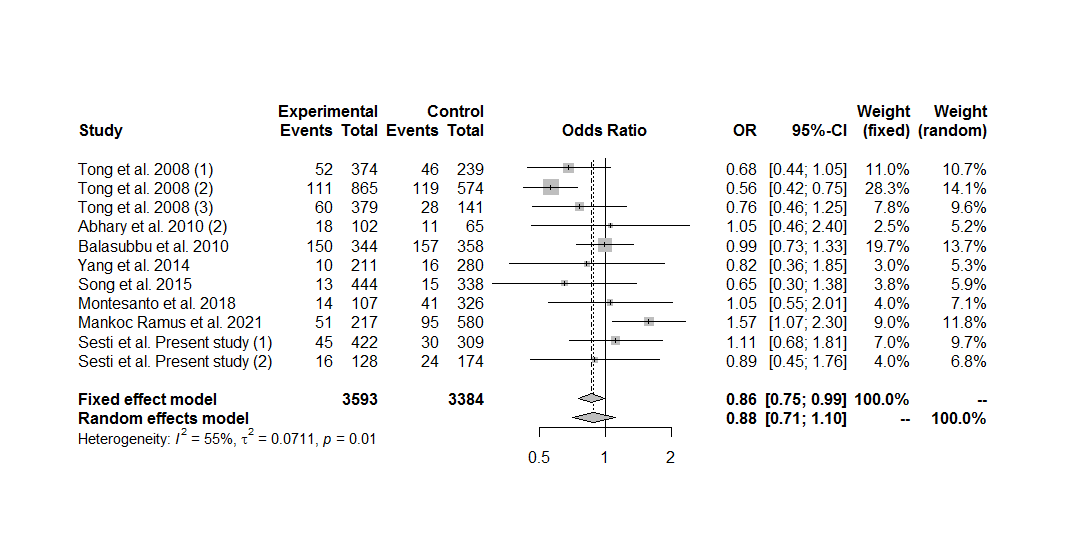
**Figure S10.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, under the recessive genetic model for the minor allele (GG vs. TG+TT).

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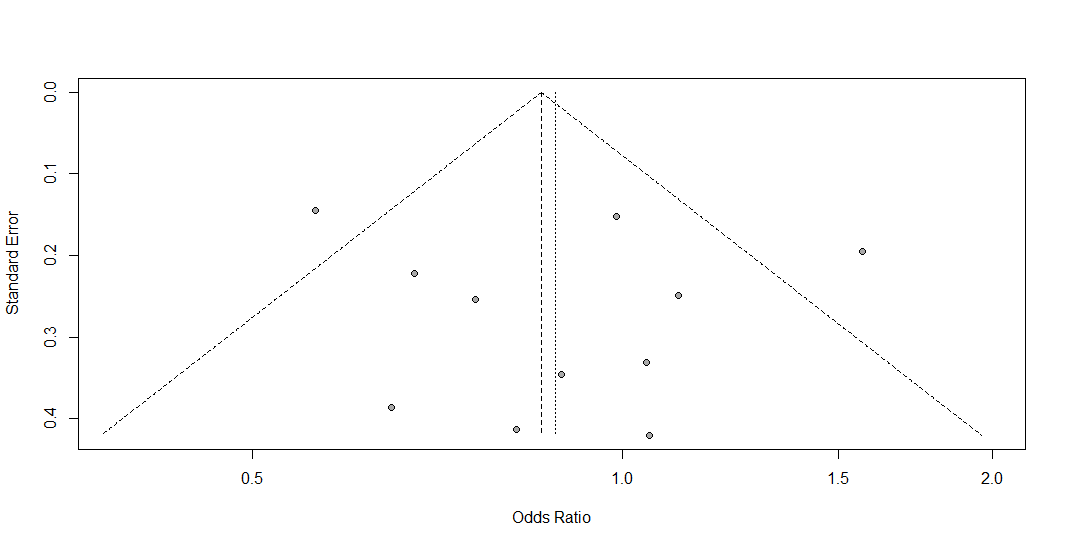
**Figure S11.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis without the cohort #2 by Tong et al. (2008), under the recessive genetic model for the minor allele (GG vs. TG+TT).

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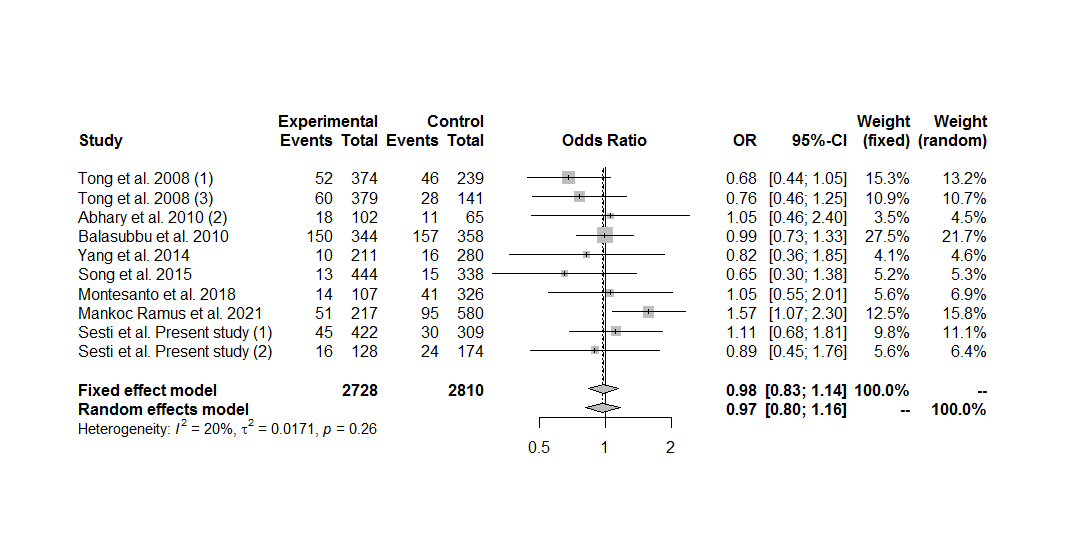
**Figure S12.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis without the cohort #2 by Tong et al. (2008), under the recessive genetic model for the minor allele (GG vs. TG+TT).

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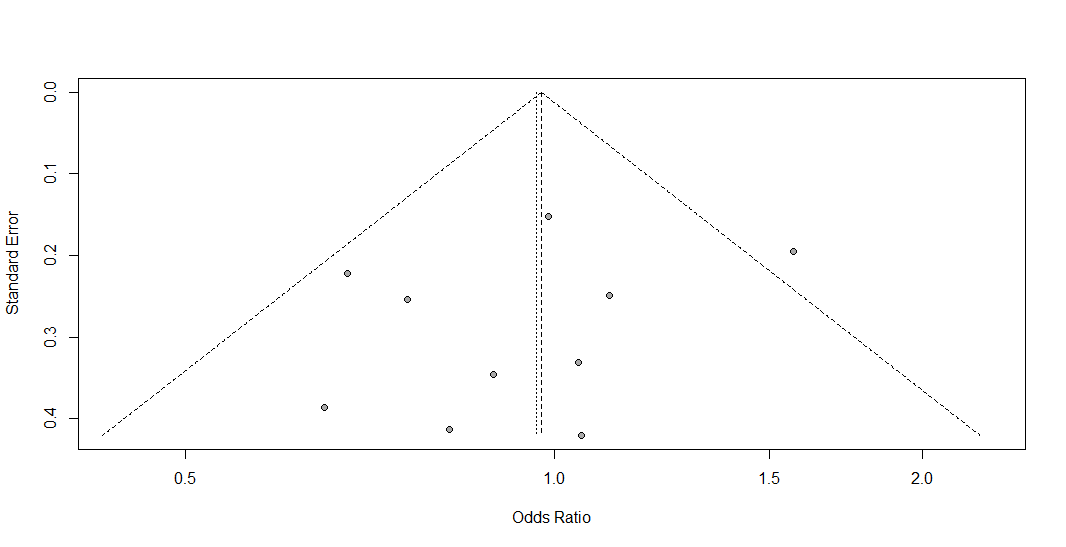
**Figure S13.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the recessive genetic model for the minor allele (GG vs. TG+TT).

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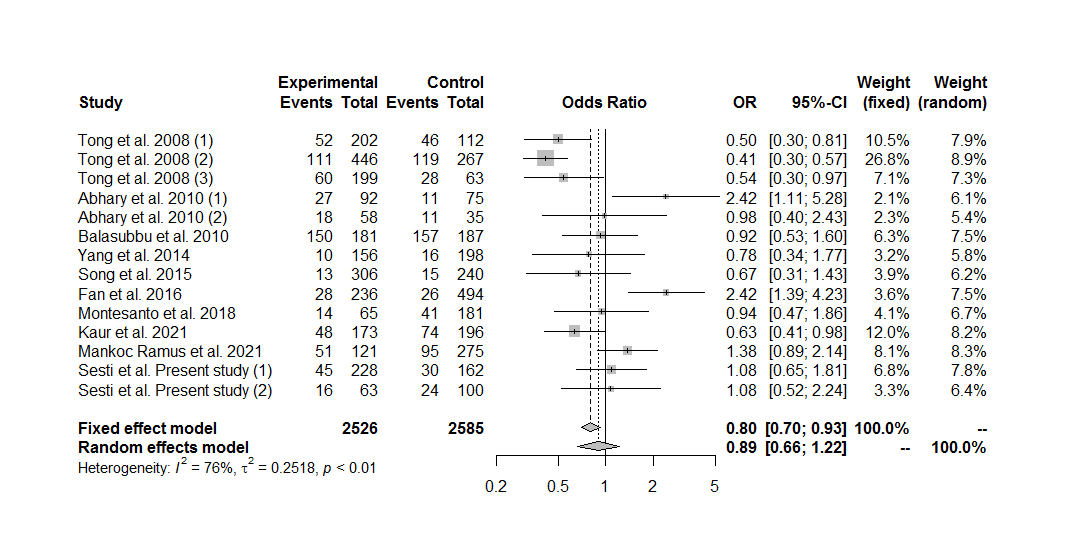
**Figure S14.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the recessive genetic model for the minor allele (GG vs. TG+TT).

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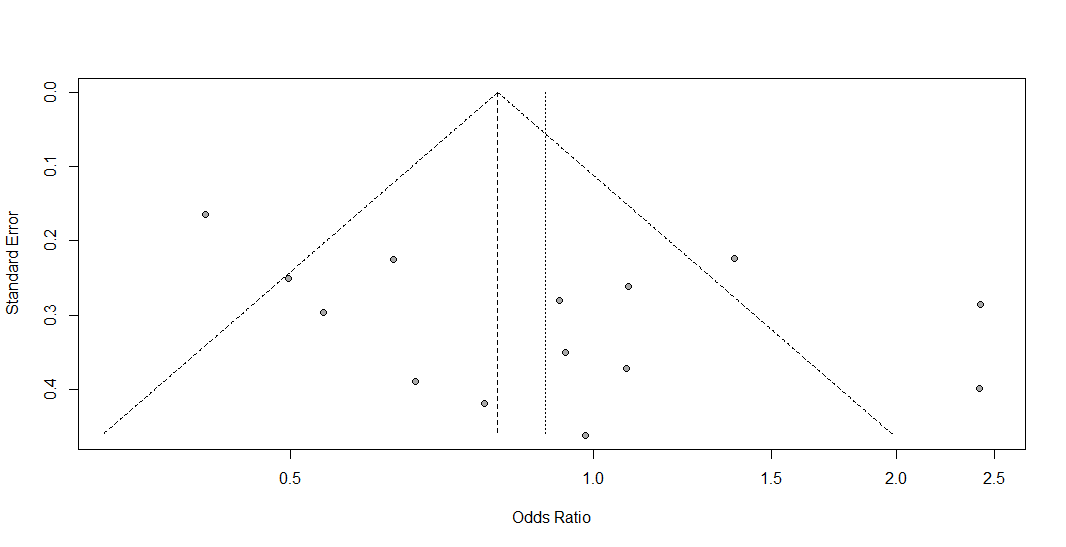
**Figure S15.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, including only the sets with controls in Hardy-Weinberg equilibrium and excluding the cohort #2 by Tong et al. (2008), under the recessive genetic model for the minor allele (GG vs. TG+TT).

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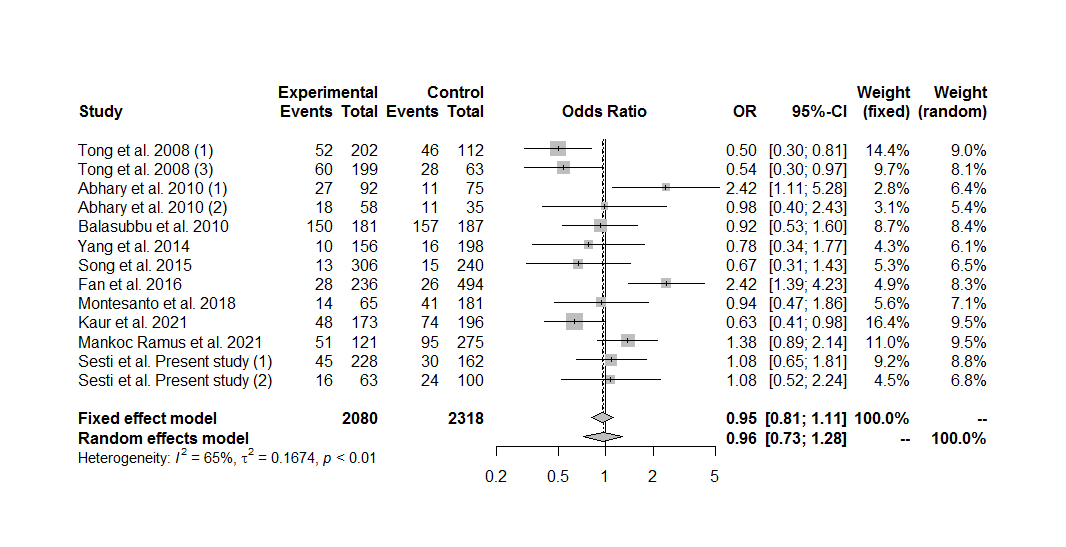
**Figure S16.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, including only the sets with controls in Hardy-Weinberg equilibrium and excluding the cohort #2 by Tong et al. (2008), under the recessive genetic model for the minor allele (GG vs. TG+TT).

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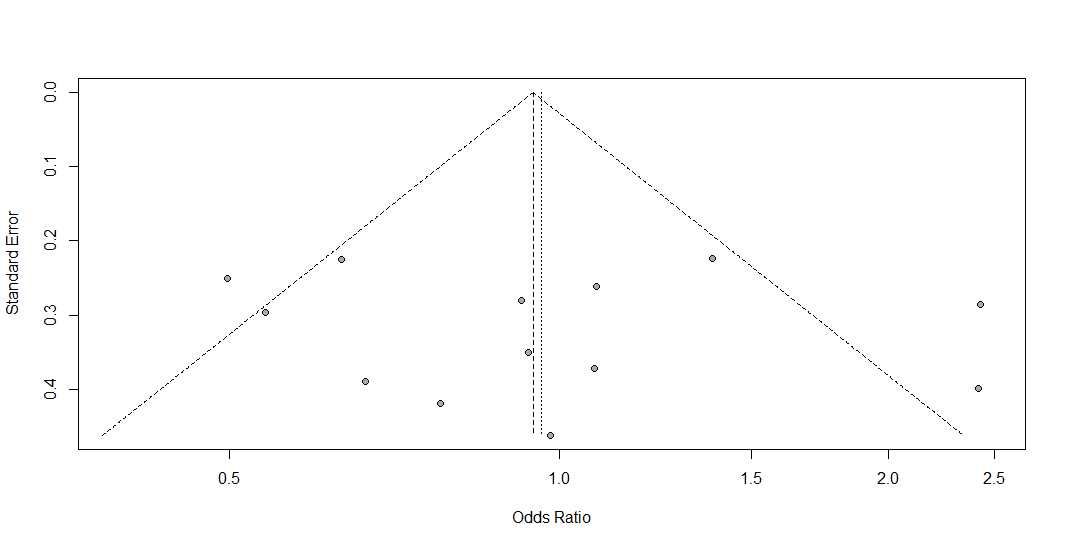
**Figure S17.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, under the homozygous additive genetic model for the minor allele (GG vs. TT).

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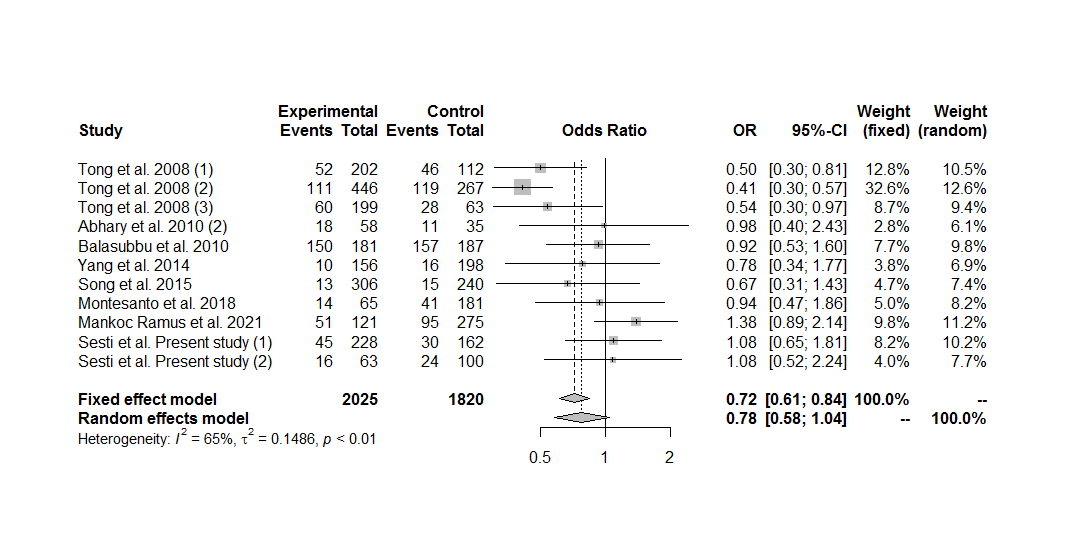
**Figure S18.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, under the homozygous additive genetic model for the minor allele (GG vs. TT).

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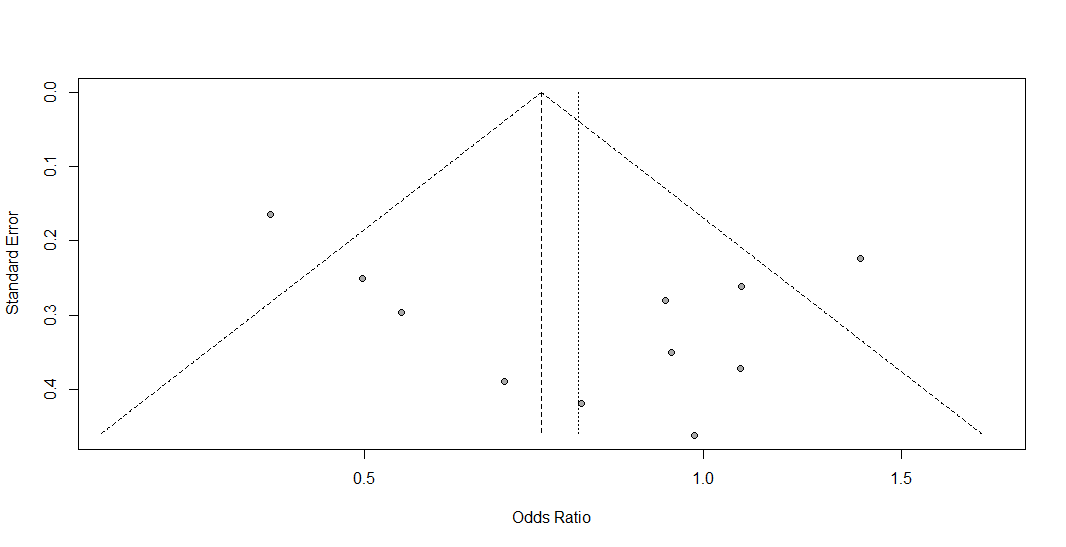
**Figure S19.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis without the cohort #2 by Tong et al. (2008), under the homozygous additive genetic model for the minor allele (GG vs. TT).

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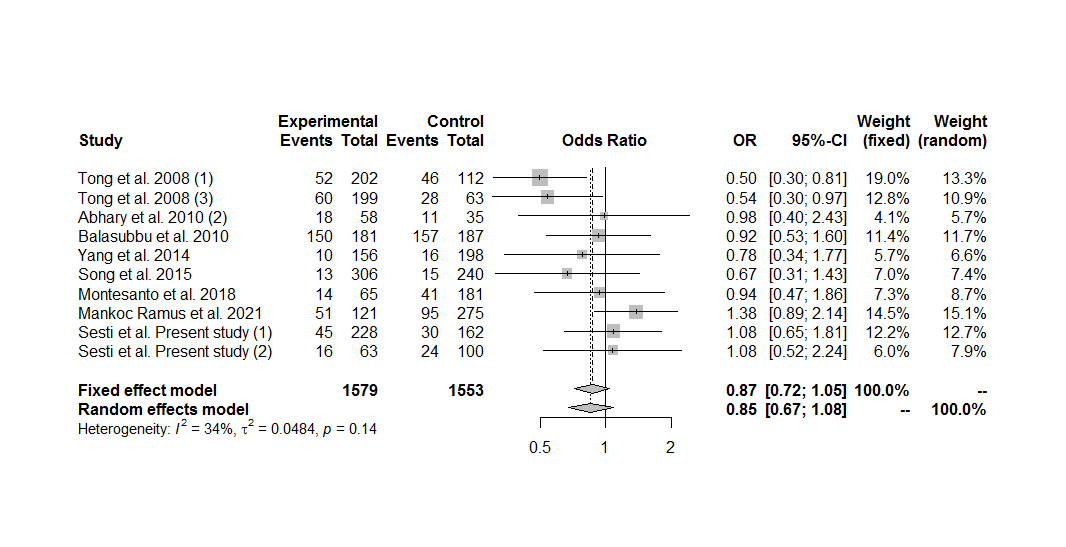
**Figure S20.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis without the cohort #2 by Tong et al. (2008), under the homozygous additive genetic model for the minor allele (GG vs. TT).

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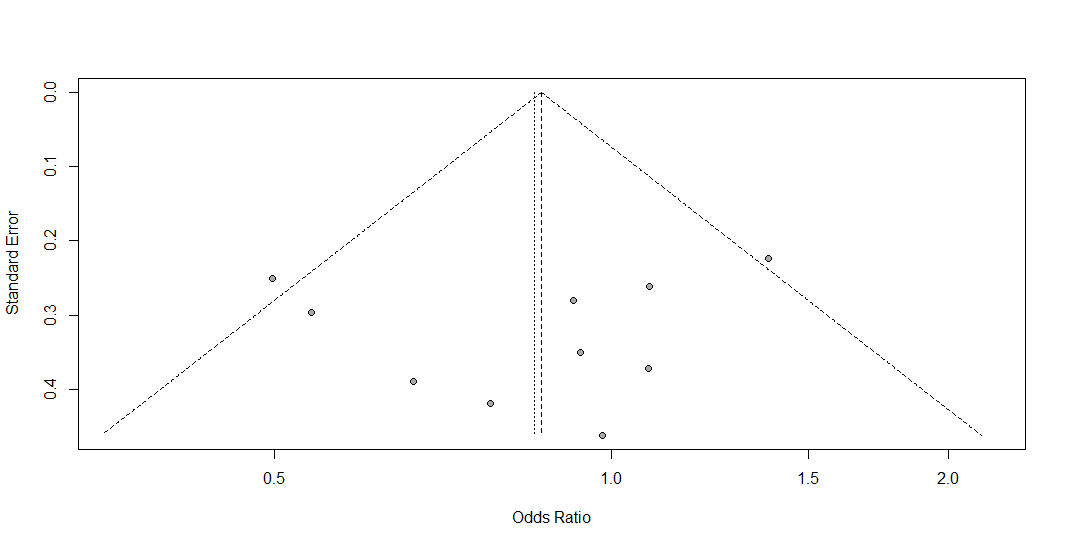
**Figure S21.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the homozygous additive genetic model for the minor allele (GG vs. TT).

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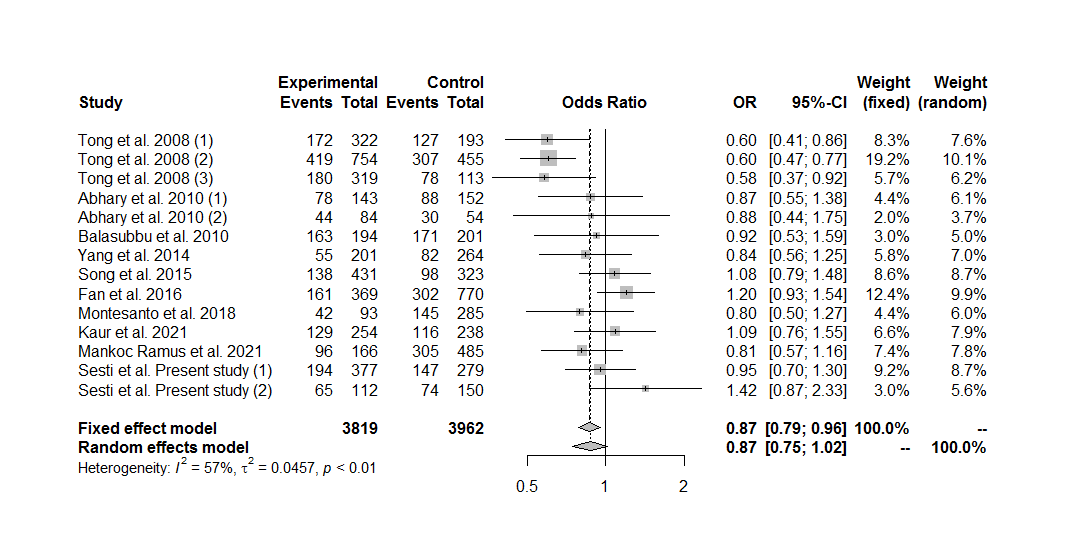
**Figure S22.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the homozygous additive genetic model for the minor allele (GG vs. TT).

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**Figure S23.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, including only the sets with controls in Hardy-Weinberg equilibrium and excluding the cohort #2 by Tong et al. (2008), under the homozygous additive genetic model for the minor allele (GG vs. TT).

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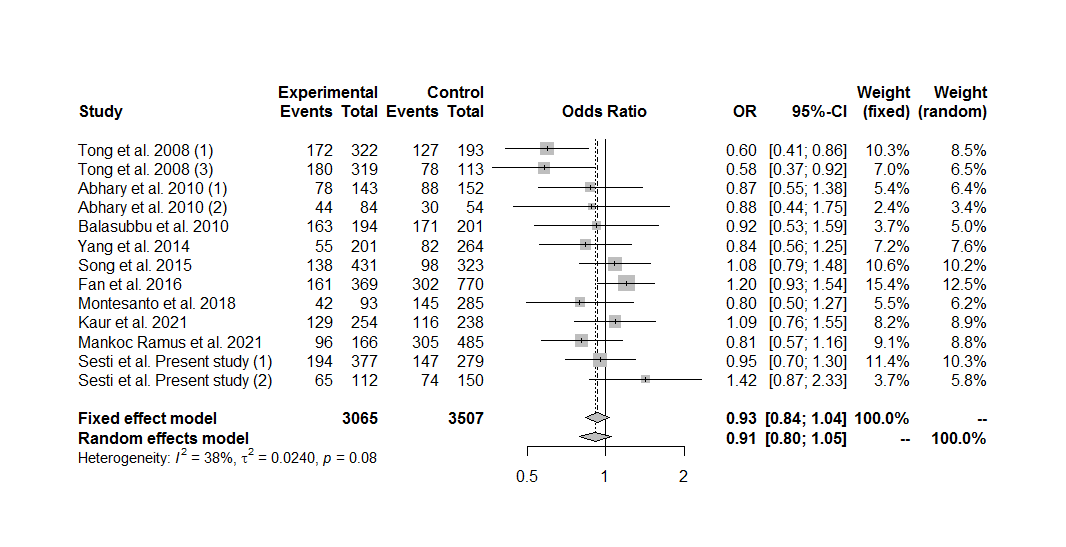
**Figure S24.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, including only the sets with controls in Hardy-Weinberg equilibrium and excluding the cohort #2 by Tong et al. (2008), under the homozygous additive genetic model for the minor allele (GG vs. TT).

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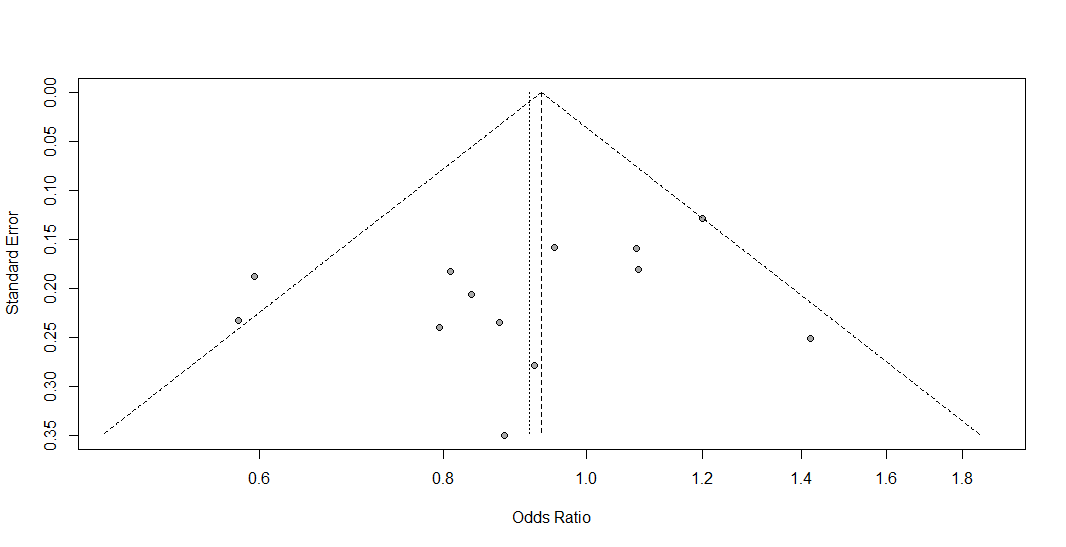
**Figure S25.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, under the heterozygous additive genetic model for the minor allele (TG vs. TT).

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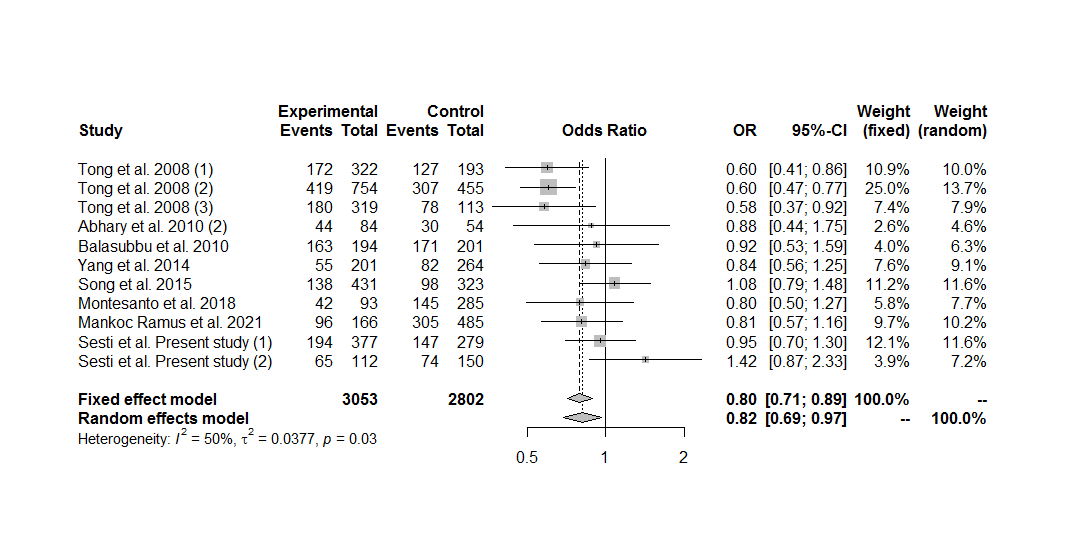
**Figure S26.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, under the heterozygous additive genetic model for the minor allele (TG vs. TT).

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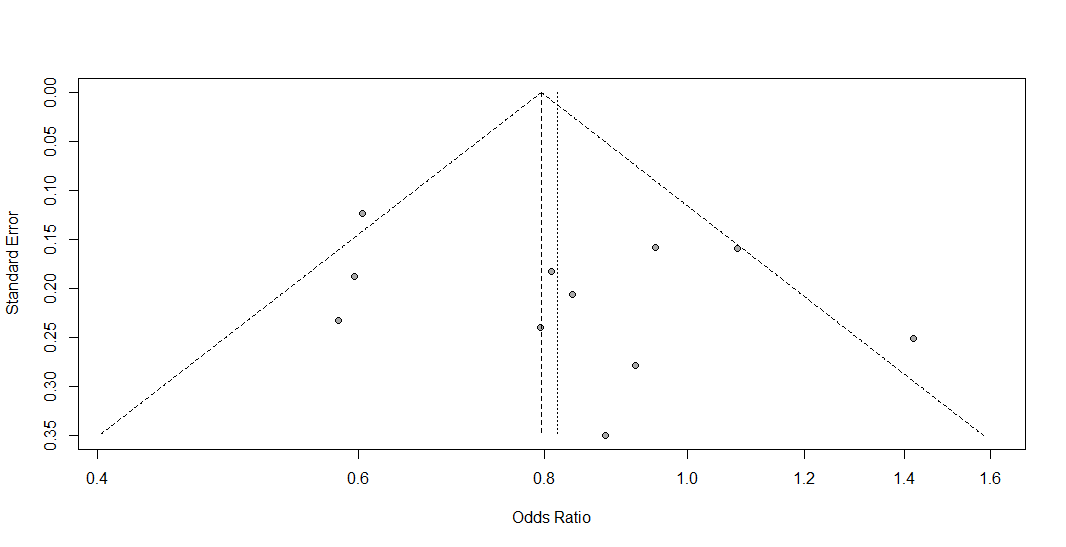
**Figure S27.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis without the cohort #2 by Tong et al. (2008), under the heterozygous additive genetic model for the minor allele (TG vs. TT).

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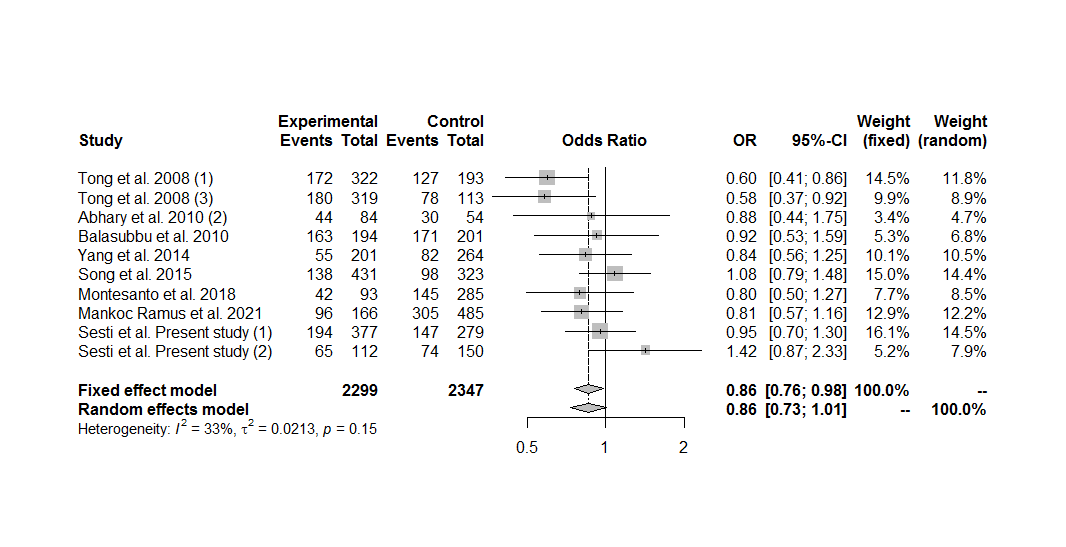
**Figure S28.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis without the cohort #2 by Tong et al. (2008), under the heterozygous additive genetic model for the minor allele (TG vs. TT).

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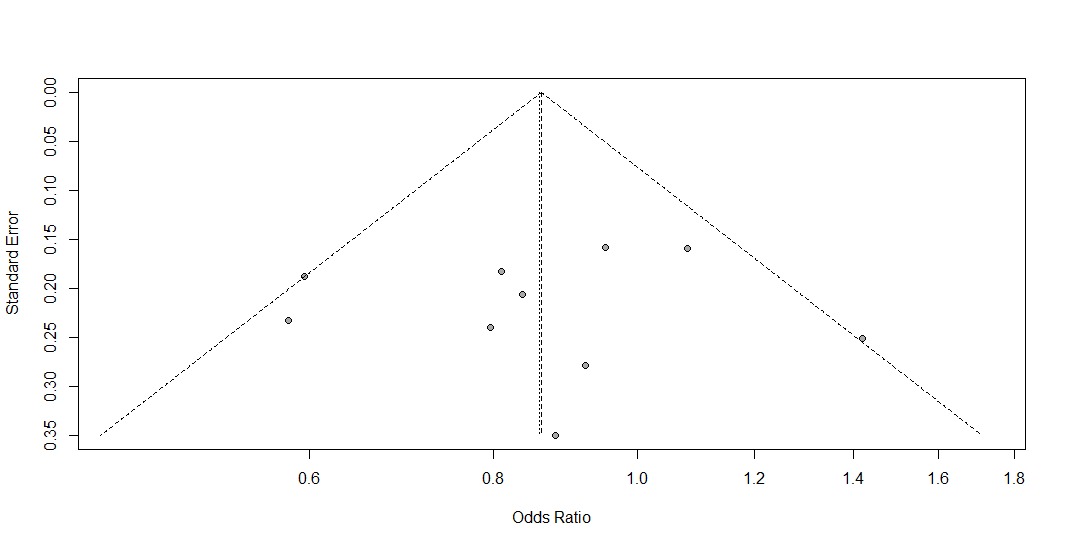
**Figure S29.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the heterozygous additive genetic model for the minor allele (TG vs. TT).

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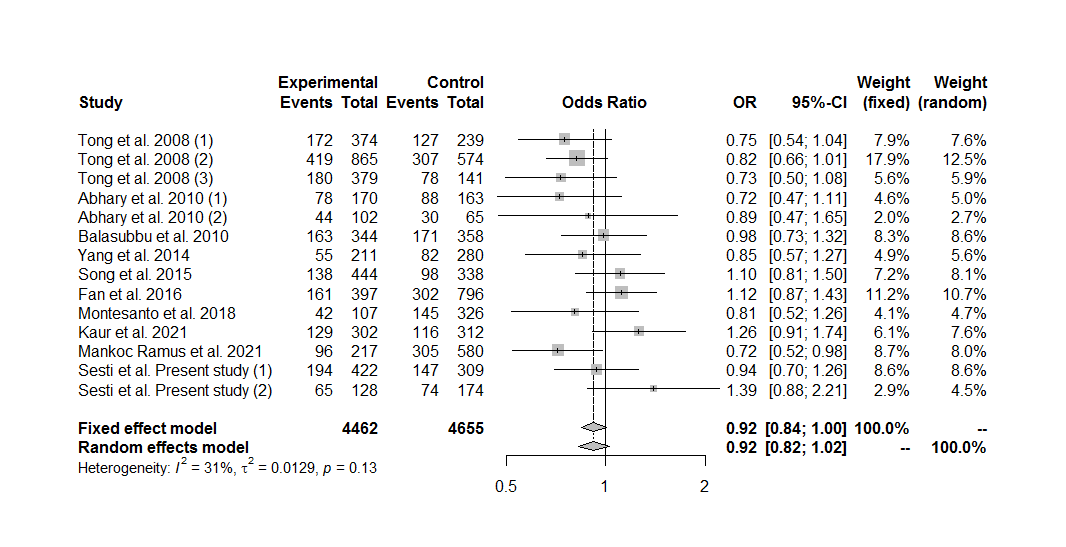
**Figure S30.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the heterozygous additive genetic model for the minor allele (TG vs. TT).

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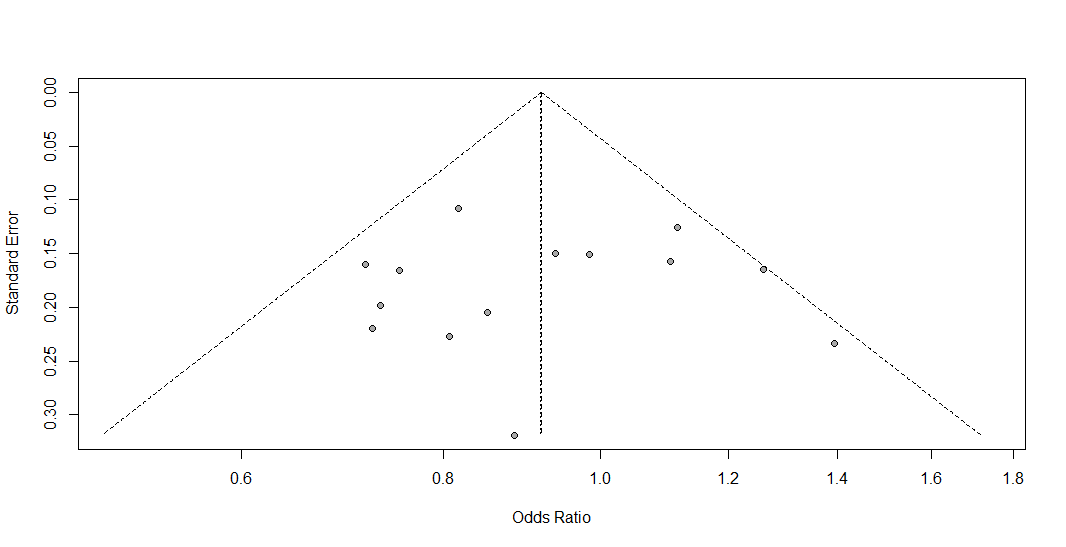
**Figure S31.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, including only the sets with controls in Hardy-Weinberg equilibrium and excluding the cohort #2 by Tong et al. (2008), under the heterozygous additive genetic model for the minor allele (TG vs. TT).

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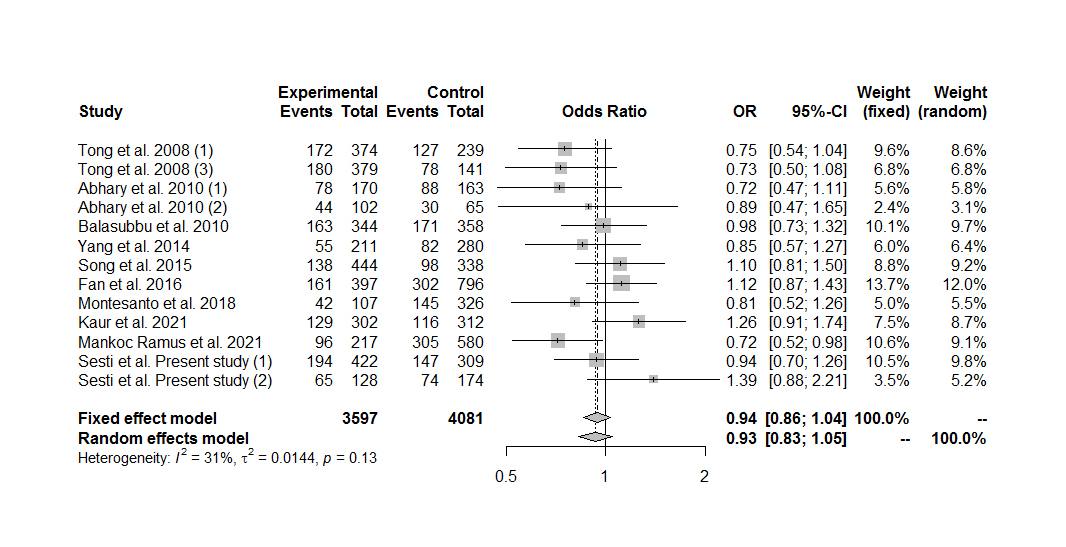
**Figure S32.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, including only the sets with controls in Hardy-Weinberg equilibrium and excluding the cohort #2 by Tong et al. (2008), under the heterozygous additive genetic model for the minor allele (TG vs. TT).

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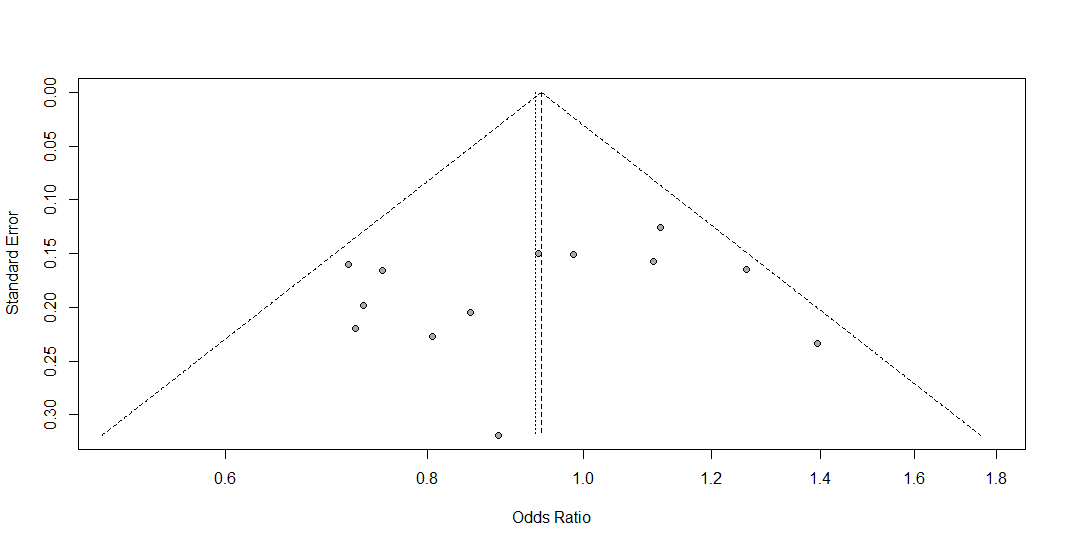
**Figure S33.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, under the overdominant genetic model (TG vs. GG+TT).

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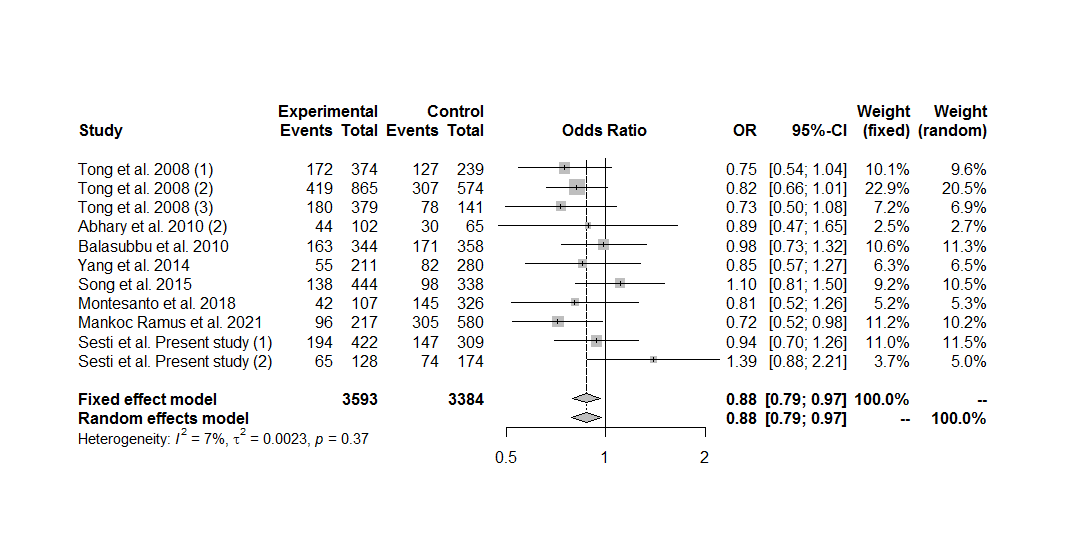
**Figure S34.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, under the overdominant genetic model (TG vs. GG+TT).

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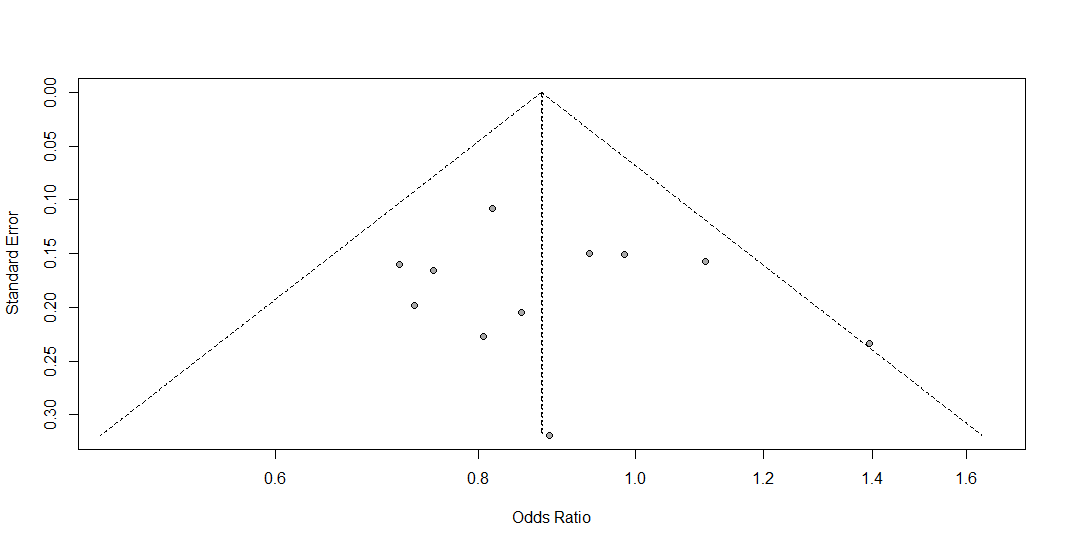
**Figure S35.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis without the cohort #2 by Tong et al. (2008), under the overdominant genetic model (TG vs. GG+TT).

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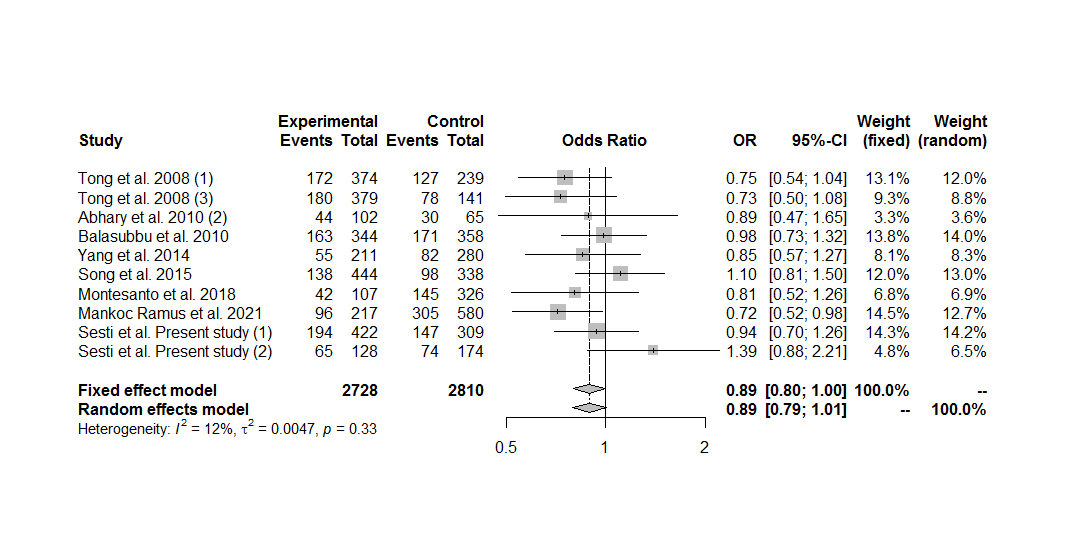
**Figure S36.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis without the cohort #2 by Tong et al. (2008), under the overdominant genetic model (TG vs. GG+TT).

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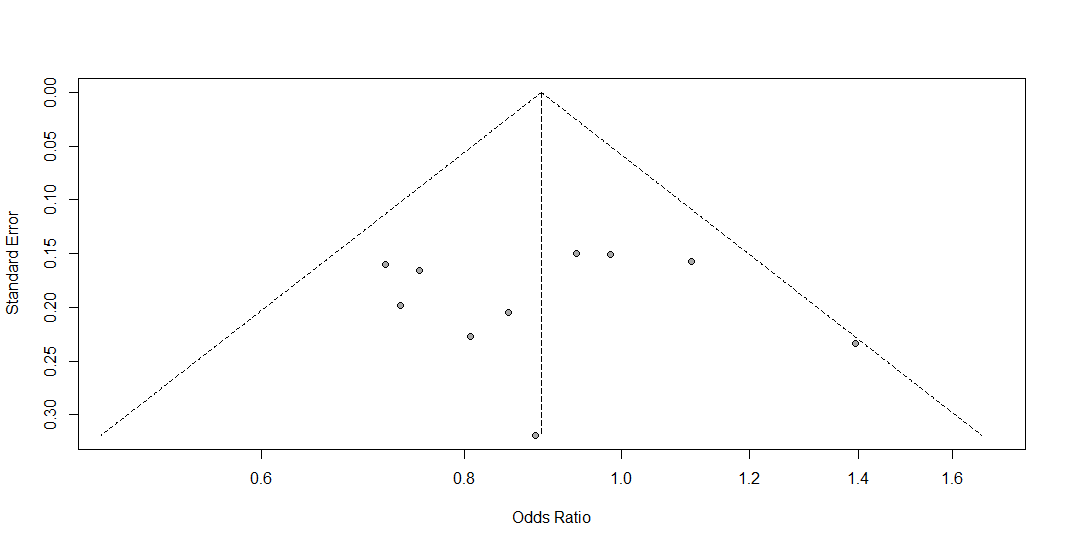
**Figure S37.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the overdominant genetic model (TG vs. GG+TT).

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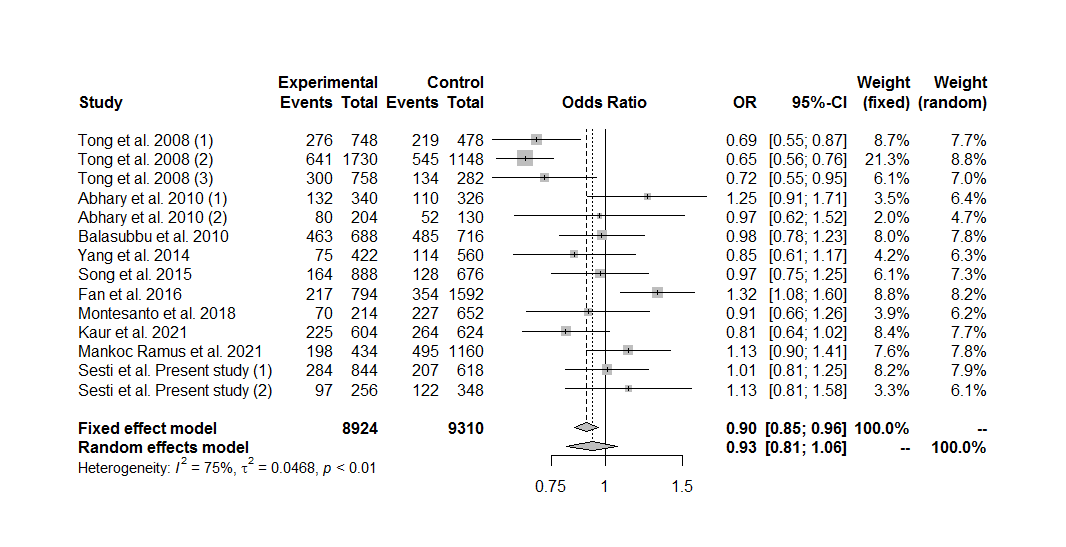
**Figure S38.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the overdominant genetic model (TG vs. GG+TT).

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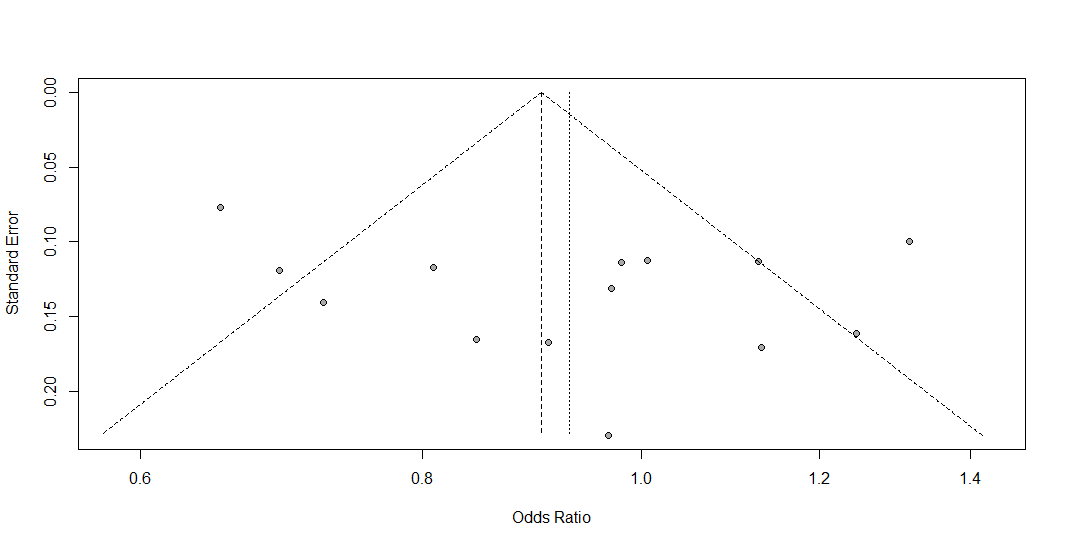
**Figure S39.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, including only the sets with controls in Hardy-Weinberg equilibrium and excluding the cohort #2 by Tong et al. (2008), under the overdominant genetic model (TG vs. GG+TT).

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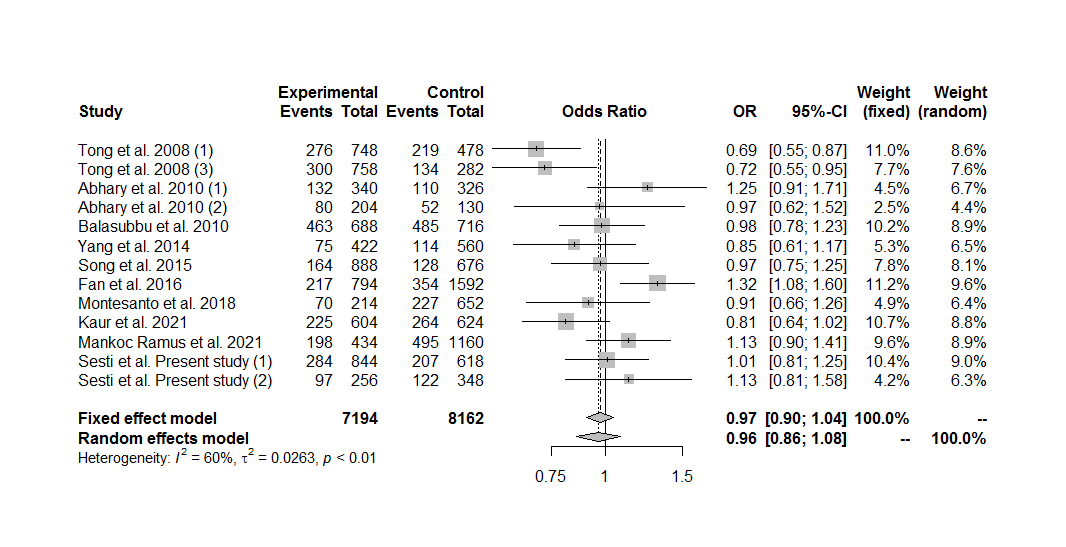
**Figure S40.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, including only the sets with controls in Hardy-Weinberg equilibrium and excluding the cohort #2 by Tong et al. (2008), under the overdominant genetic model (TG vs. GG+TT).

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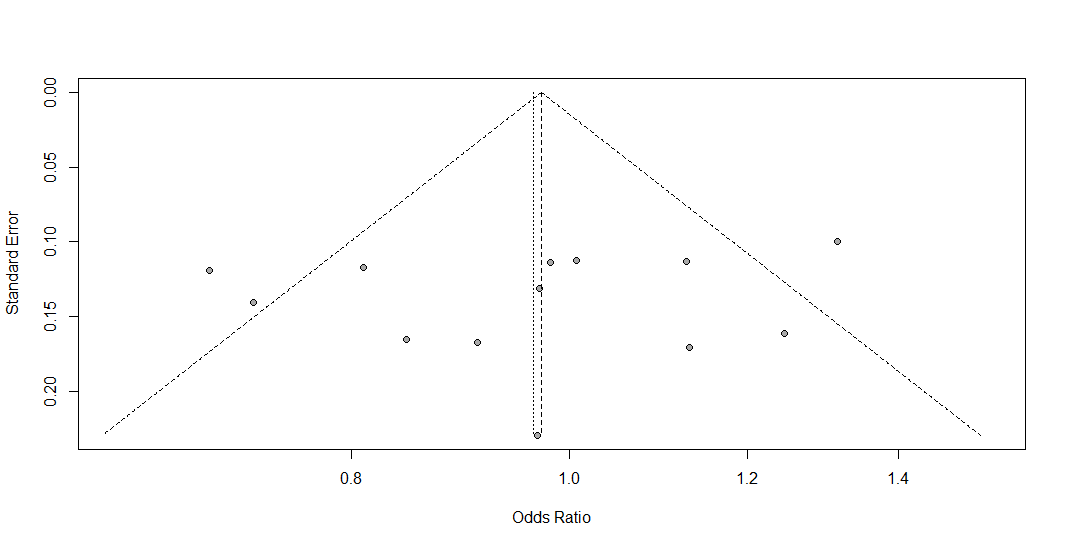
**Figure S41.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, under the allele contrast genetic model (G vs. T).

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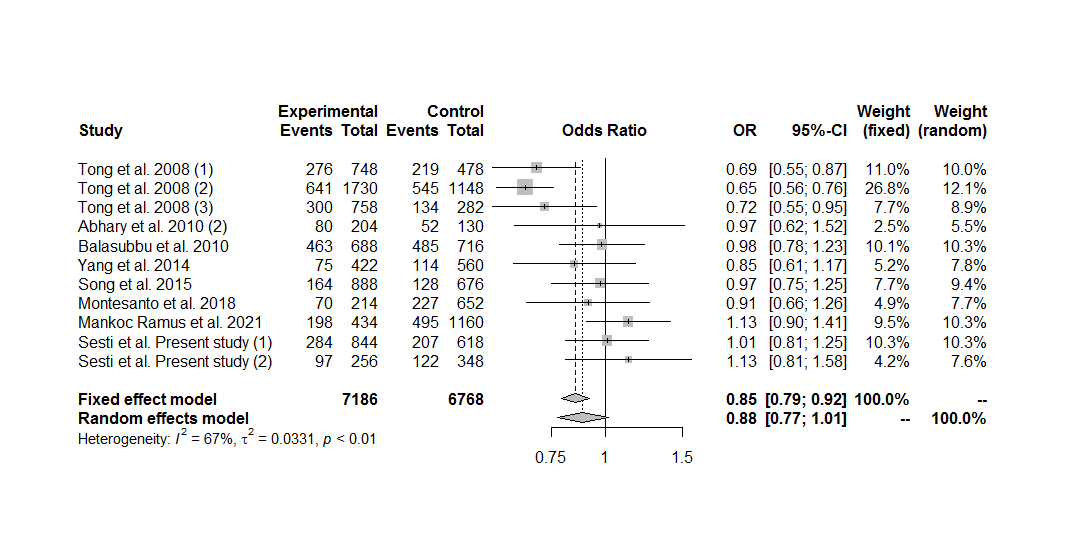
**Figure S42.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, under the allele contrast genetic model (G vs. T).

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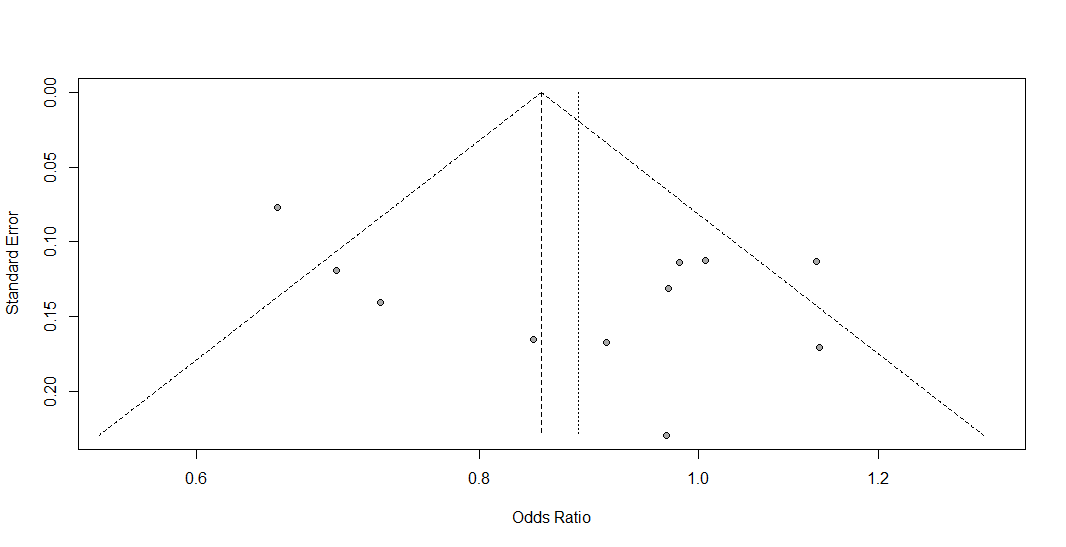
**Figure S43.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis without the cohort #2 by Tong et al. (2008), under the allele contrast genetic model (G vs. T).

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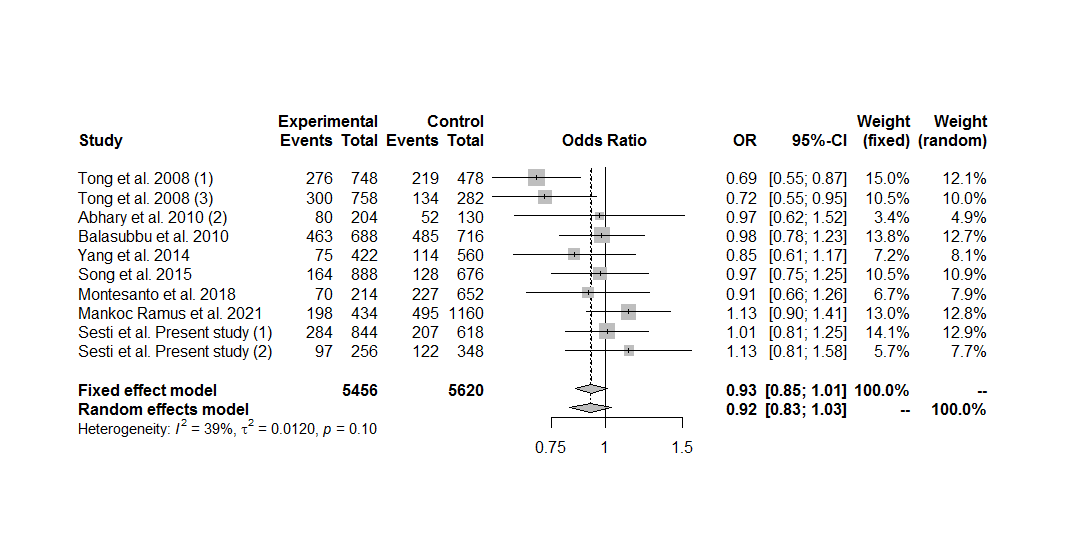
**Figure S44.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis without the cohort #2 by Tong et al. (2008), under the allele contrast genetic model (G vs. T).

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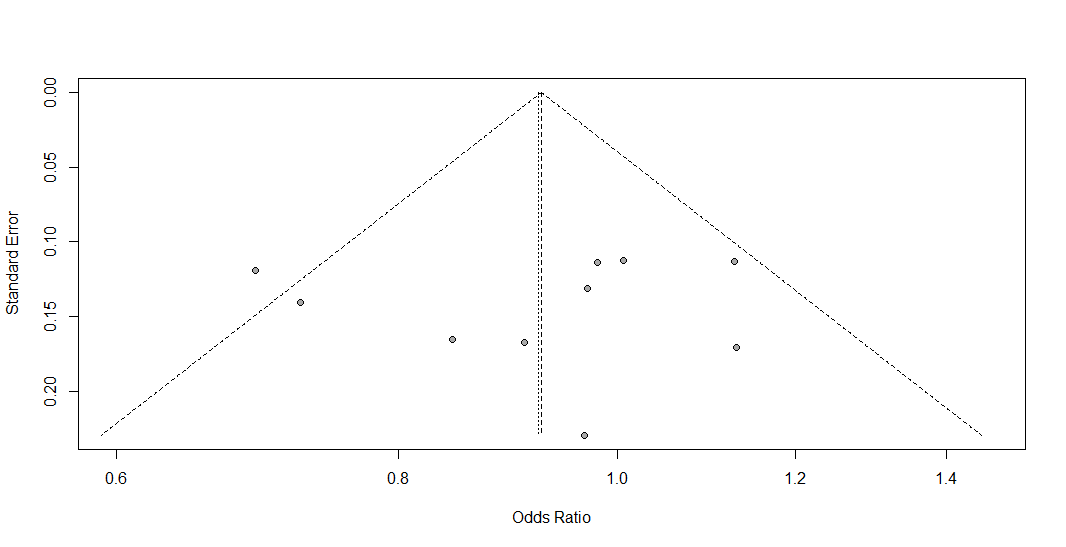
**Figure S45.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the allele contrast genetic model (G vs. T).

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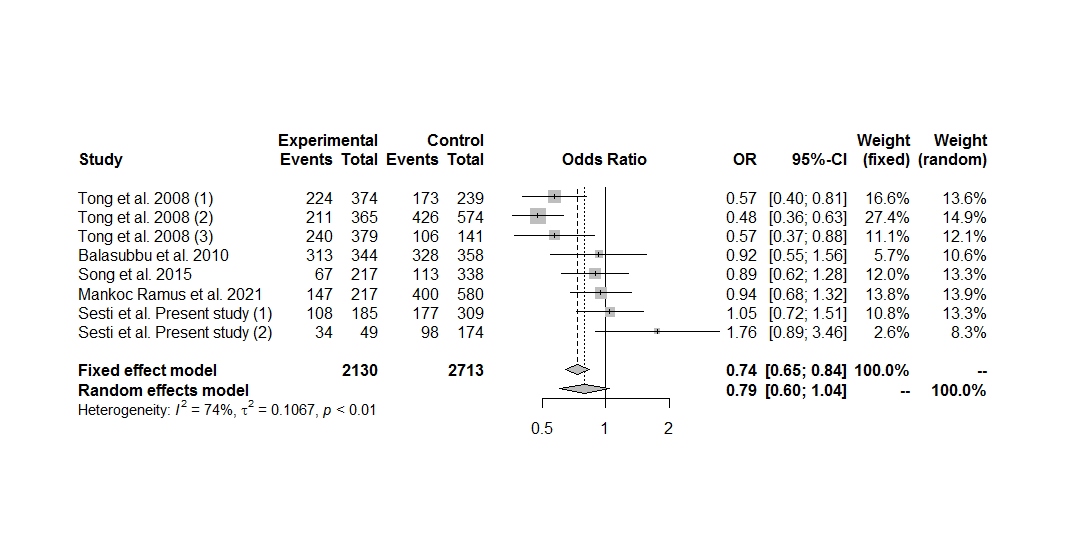
**Figure S46.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the allele contrast genetic model (G vs. T).

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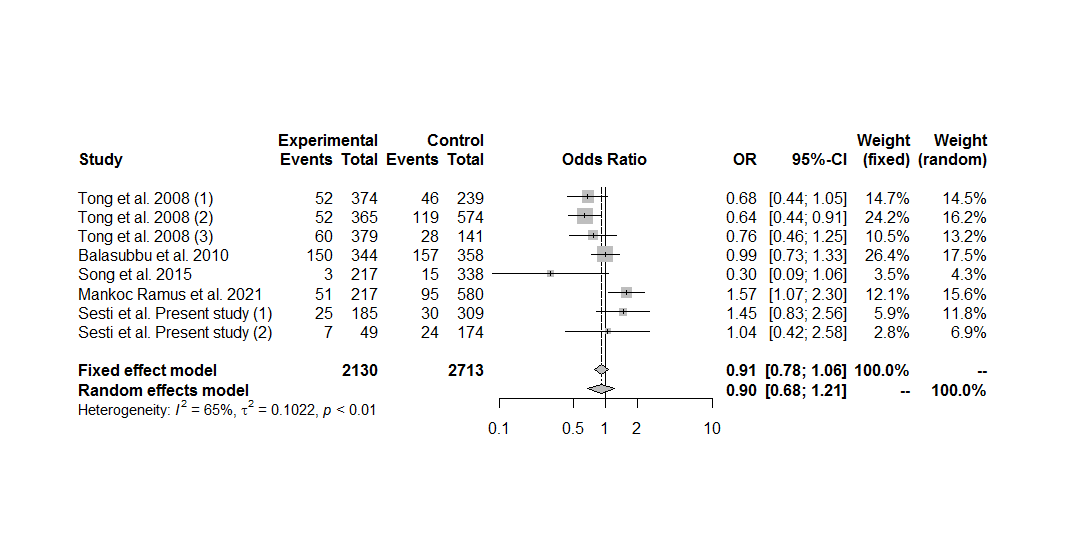
**Figure S47.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, including only the sets with controls in Hardy-Weinberg equilibrium and excluding the cohort #2 by Tong et al. (2008), under the allele contrast genetic model (G vs. T).

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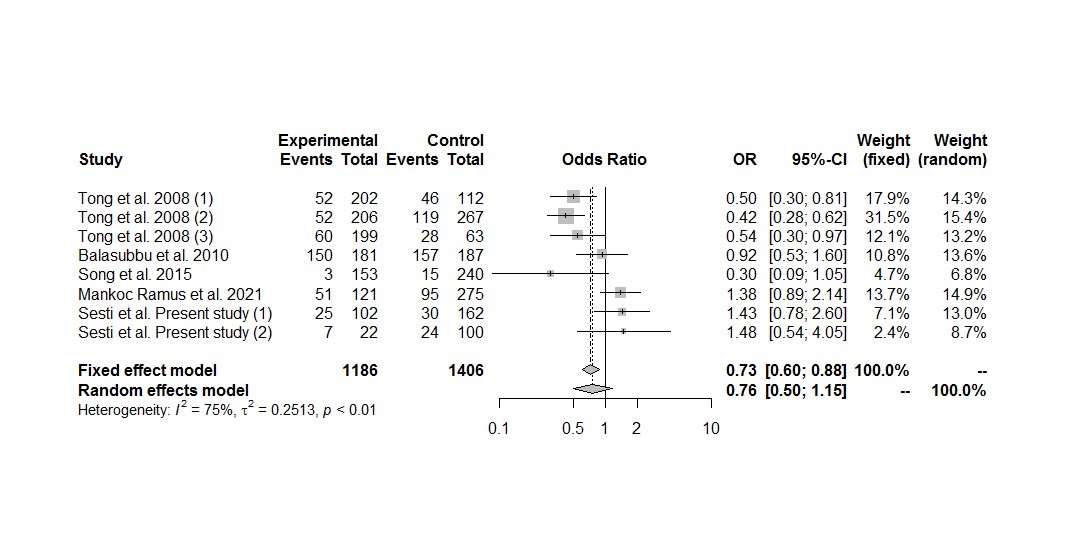
**Figure S48.** Funnel plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in the overall group analysis, including only the sets with controls in Hardy-Weinberg equilibrium and excluding the cohort #2 by Tong et al. (2008), under the allele contrast genetic model (G vs. T).

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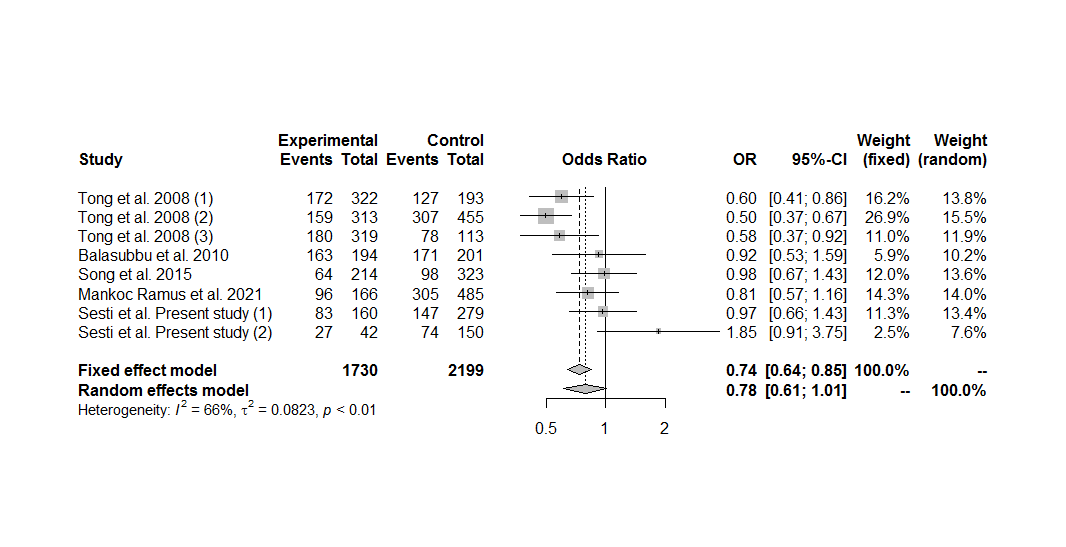
**Figure S49.** Forest plot of the association between the *EPO* rs1617640 polymorphism and proliferative diabetic retinopathy, including only the sets with controls in Hardy-Weinberg equilibrium, under the dominant genetic model for the minor allele (GG+TG vs. TT).

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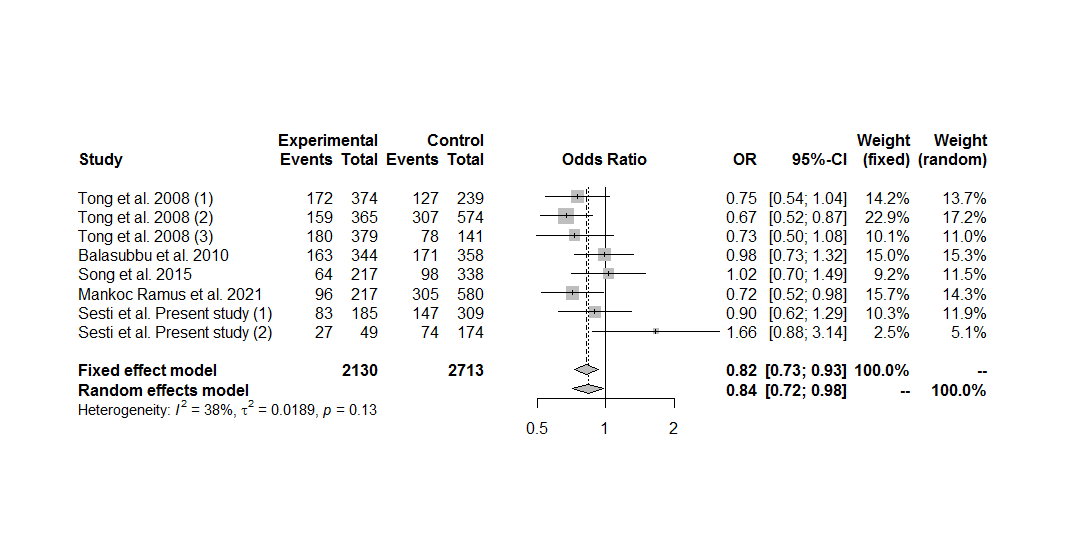
**Figure S50.** Forest plot of the association between the *EPO* rs1617640 polymorphism and proliferative diabetic retinopathy, including only the sets with controls in Hardy-Weinberg equilibrium, under the recessive genetic model for the minor allele (GG vs. TG+TT).

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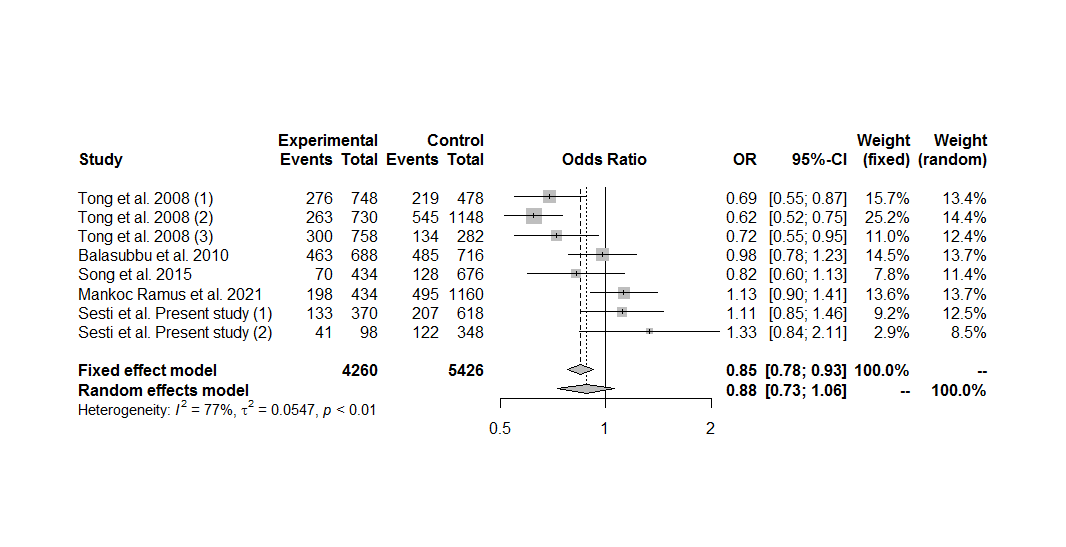
**Figure S51.** Forest plot of the association between the *EPO* rs1617640 polymorphism and proliferative diabetic retinopathy, including only the sets with controls in Hardy-Weinberg equilibrium, under the homozygous additive genetic model for the minor allele (GG vs. TT).

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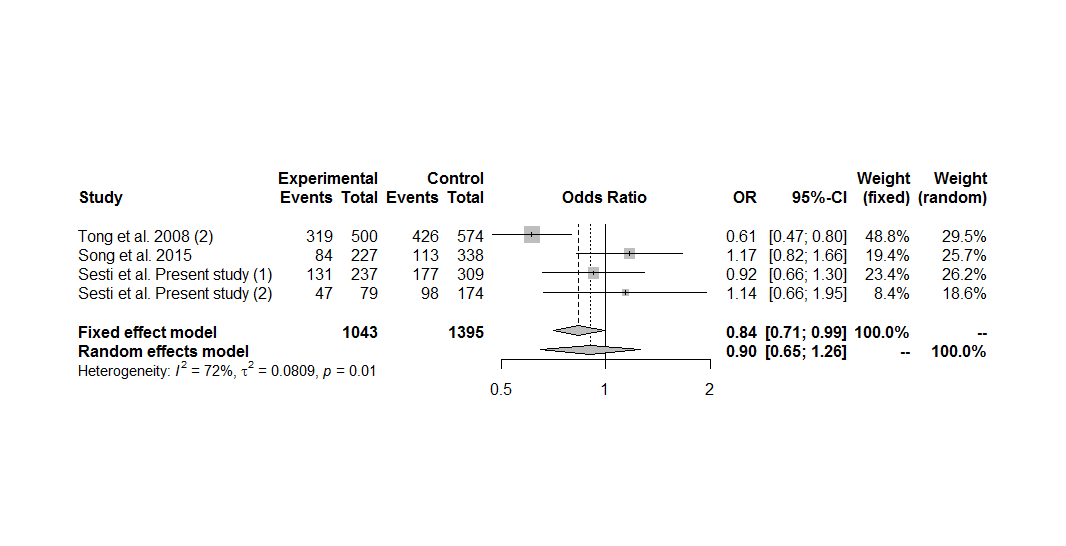
**Figure S52.** Forest plot of the association between the *EPO* rs1617640 polymorphism and proliferative diabetic retinopathy, including only the sets with controls in Hardy-Weinberg equilibrium, under the heterozygous additive genetic model for the minor allele (TG vs. TT).

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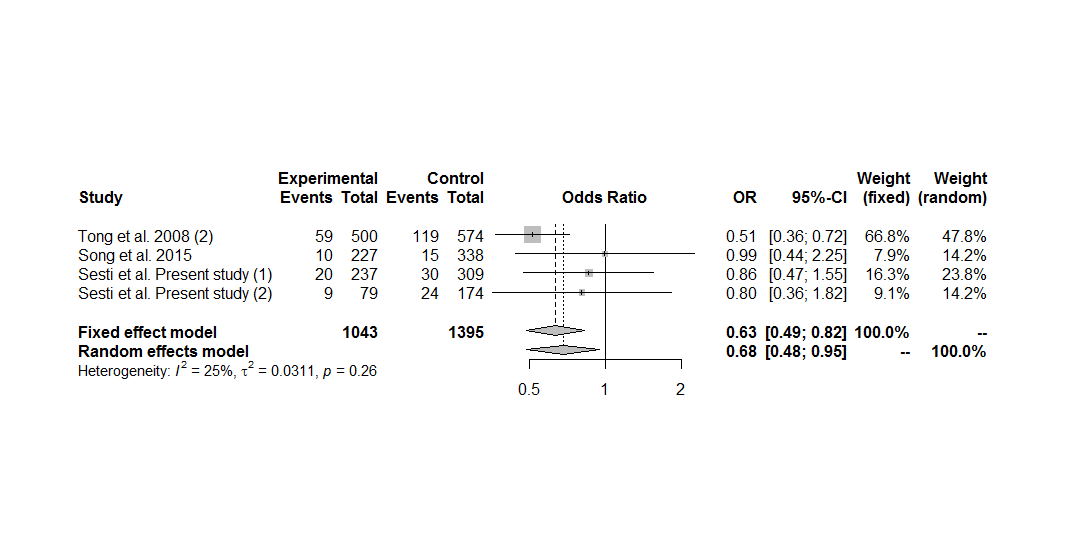
**Figure S53.** Forest plot of the association between the *EPO* rs1617640 polymorphism and proliferative diabetic retinopathy, including only the sets with controls in Hardy-Weinberg equilibrium, under the overdominant genetic model (TG vs. GG+TT).

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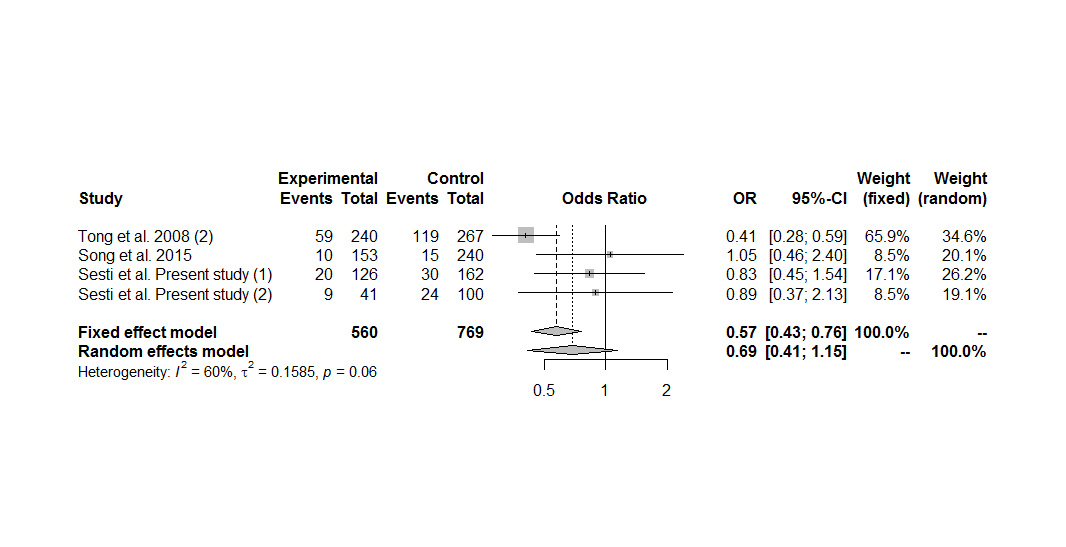
**Figure S54.** Forest plot of the association between the *EPO* rs1617640 polymorphism and proliferative diabetic retinopathy, including only the sets with controls in Hardy-Weinberg equilibrium, under the allele contrast genetic model (G vs. T).

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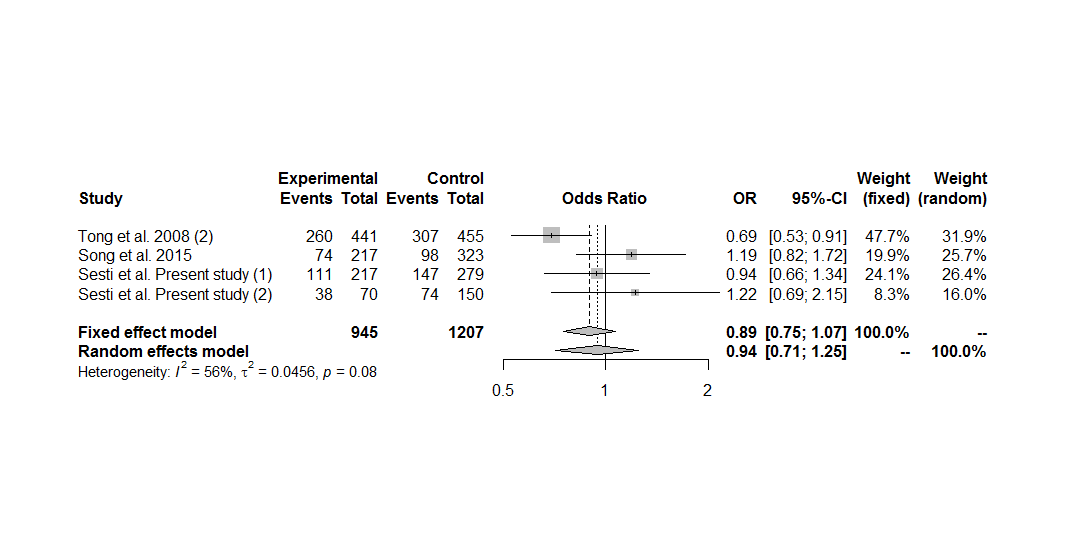
**Figure S55.** Forest plot of the association between the *EPO* rs1617640 polymorphism and non-proliferative diabetic retinopathy, including only the sets with controls in Hardy-Weinberg equilibrium, under the dominant genetic model for the minor allele (GG+TG vs. TT).

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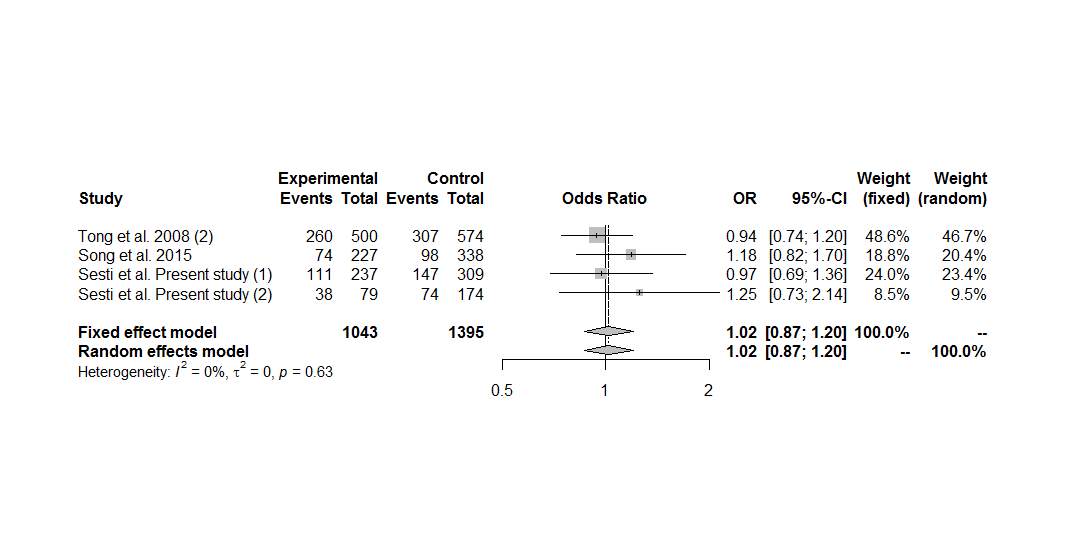
**Figure S56.** Forest plot of the association between the *EPO* rs1617640 polymorphism and non-proliferative diabetic retinopathy, including only the sets with controls in Hardy-Weinberg equilibrium, under the recessive genetic model for the minor allele (GG vs. TG+TT).

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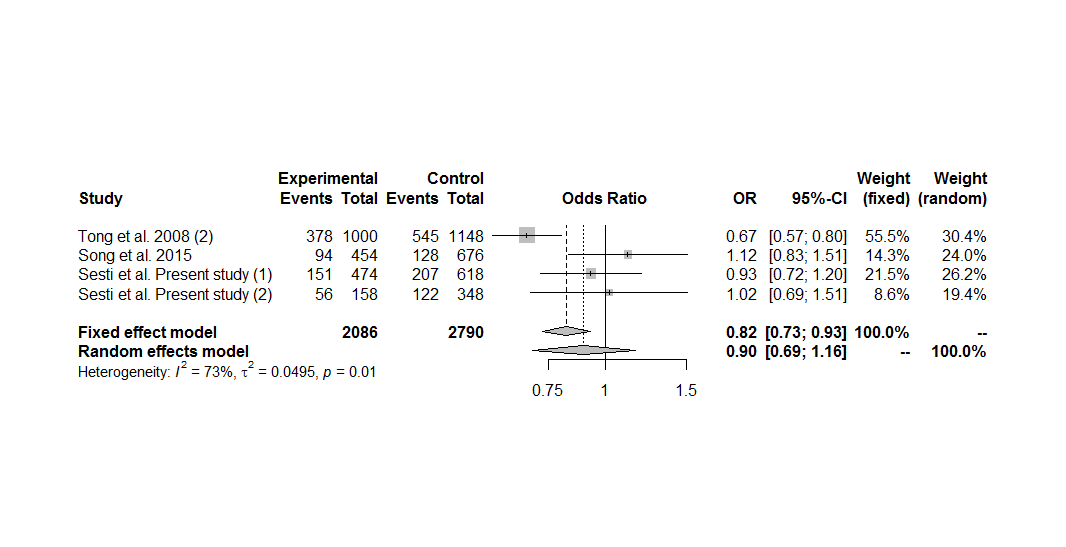
**Figure S57.** Forest plot of the association between the *EPO* rs1617640 polymorphism and non-proliferative diabetic retinopathy, including only the sets with controls in Hardy-Weinberg equilibrium, under the homozygous additive genetic model for the minor allele (GG vs. TT).

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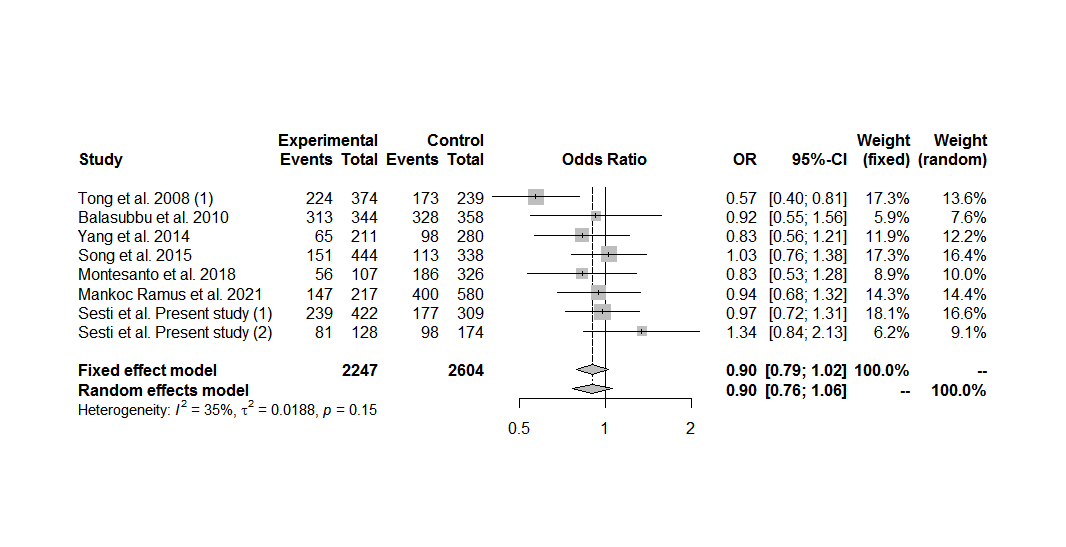
**Figure S58.** Forest plot of the association between the *EPO* rs1617640 polymorphism and non-proliferative diabetic retinopathy, including only the sets with controls in Hardy-Weinberg equilibrium, under the heterozygous additive genetic model for the minor allele (TG vs. TT).

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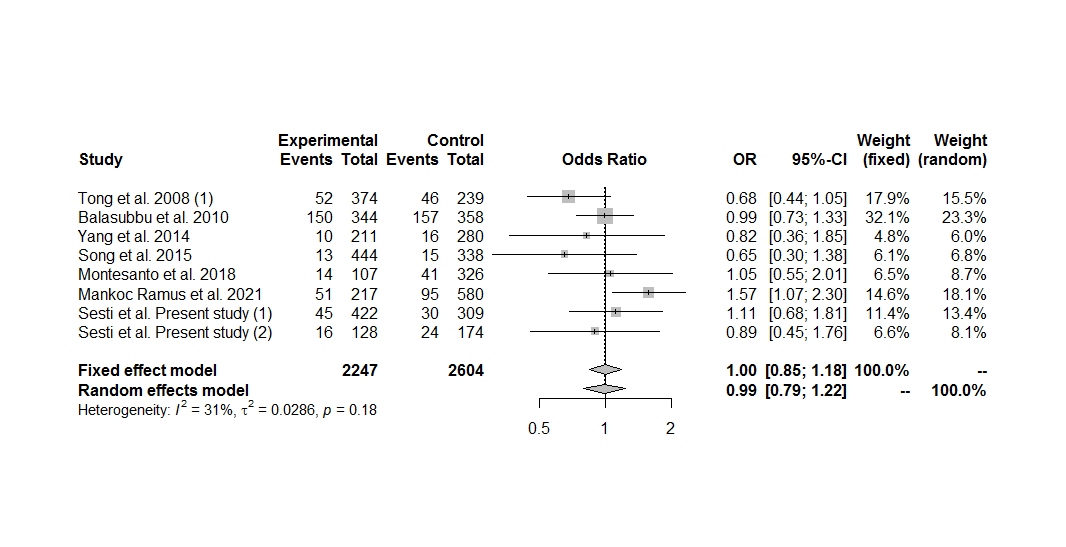
**Figure S59.** Forest plot of the association between the *EPO* rs1617640 polymorphism and non-proliferative diabetic retinopathy, including only the sets with controls in Hardy-Weinberg equilibrium, under the overdominant genetic model (TG vs. GG+TT).

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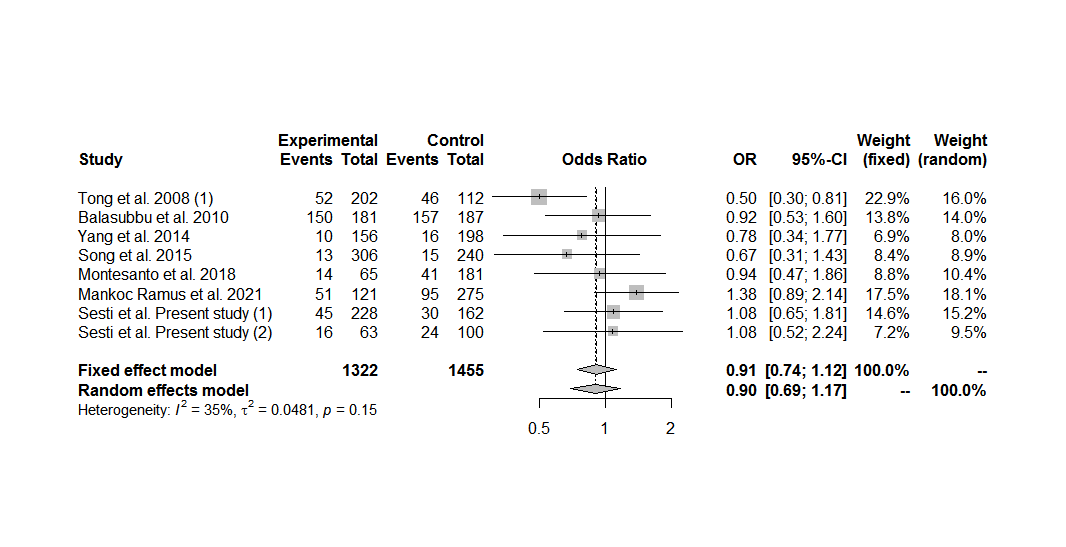
**Figure S60.** Forest plot of the association between the *EPO* rs1617640 polymorphism and non-proliferative diabetic retinopathy, including only the sets with controls in Hardy-Weinberg equilibrium, under the allele contrast genetic model (G vs. T).

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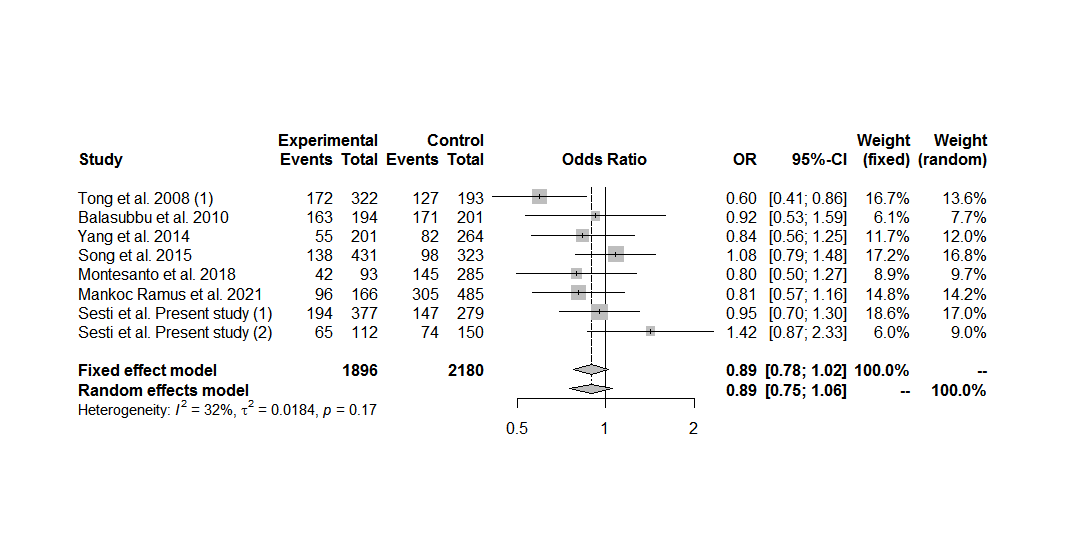
**Figure S61.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in subjects with type 2 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the dominant genetic model for the minor allele (GG+TG vs. TT).

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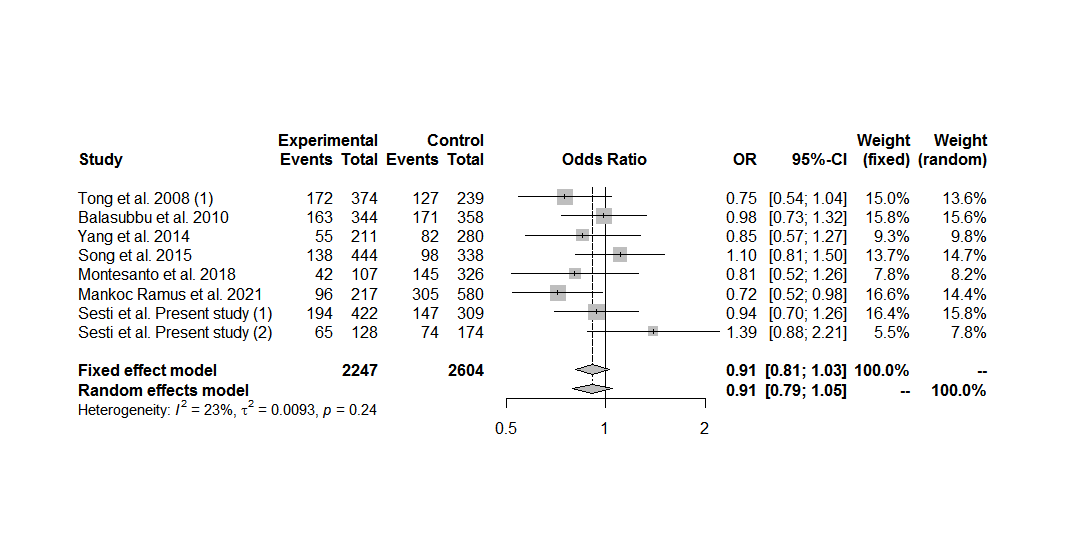
**Figure S62.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in subjects with type 2 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the recessive genetic model for the minor allele (GG vs. TG+TT).

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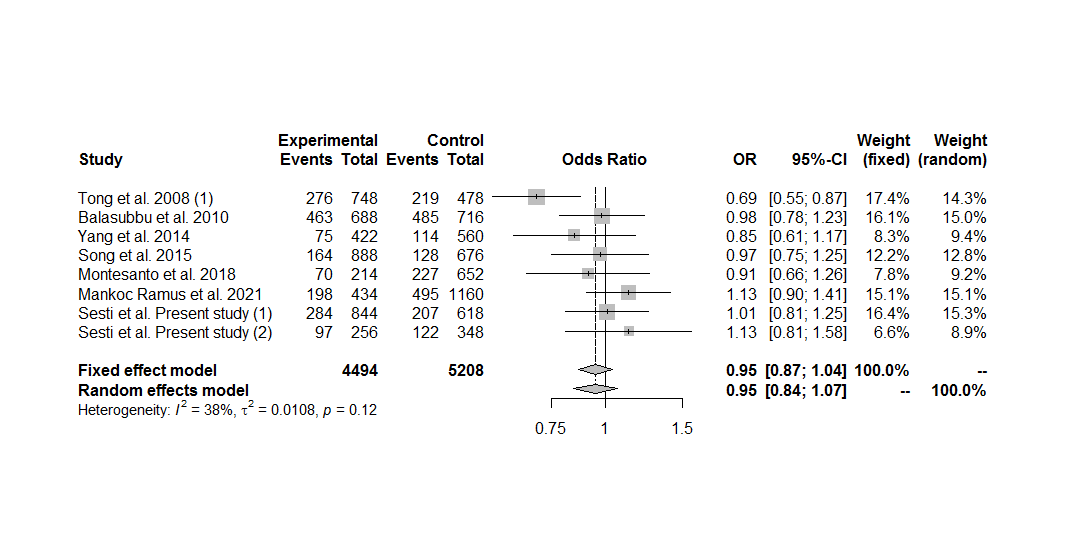
**Figure S63.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in subjects with type 2 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the homozygous additive genetic model for the minor allele (GG vs. TT).

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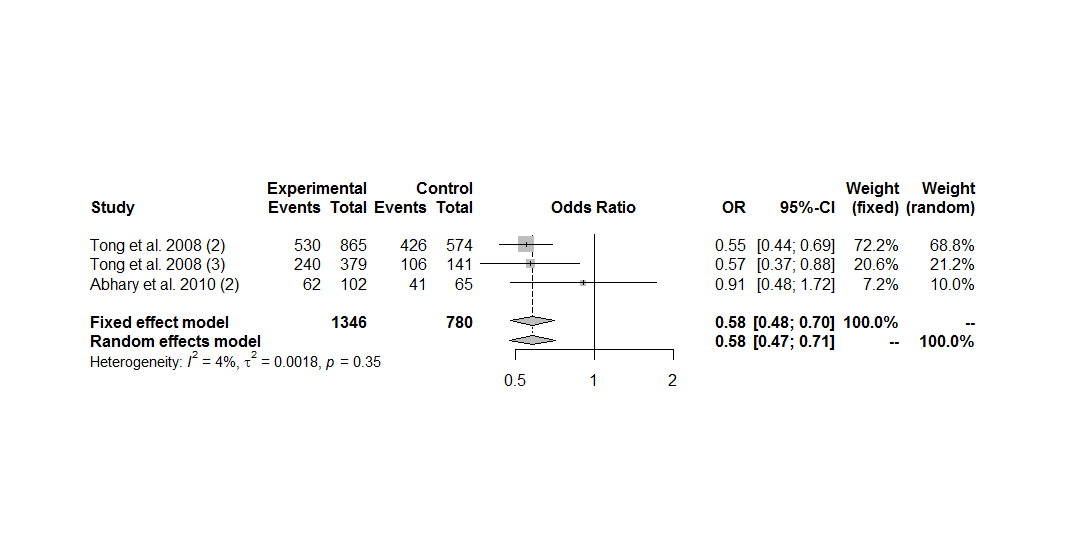
**Figure S64.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in subjects with type 2 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the heterozygous additive genetic model for the minor allele (TG vs. TT).

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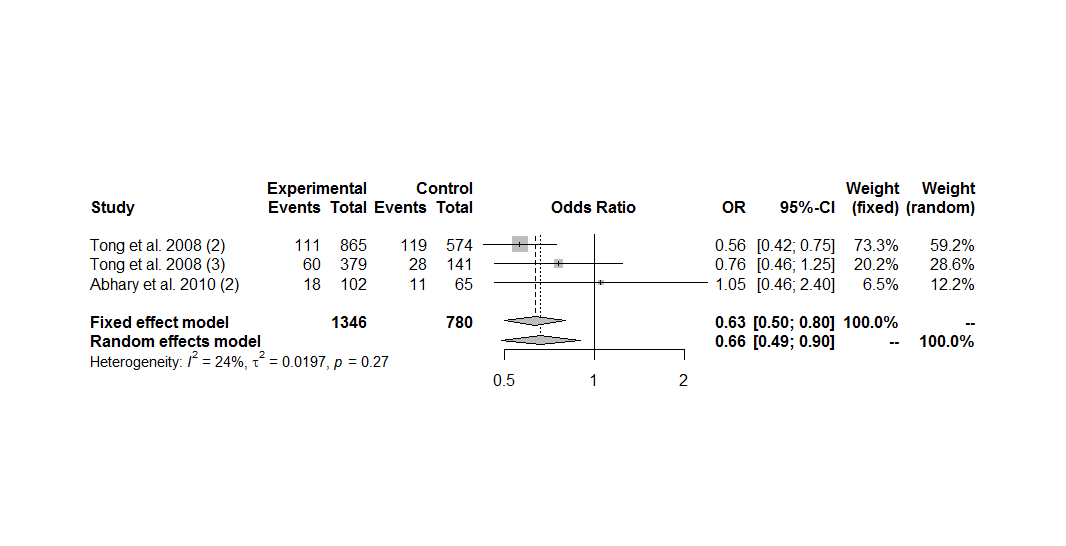
**Figure S65.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in subjects with type 2 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the overdominant genetic model (TG vs. GG+TT).

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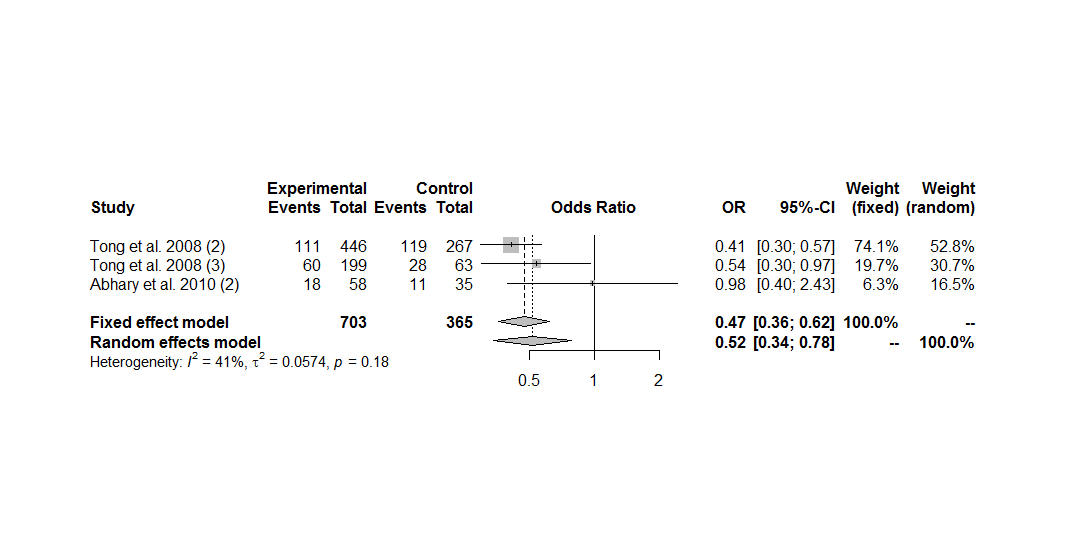
**Figure S66.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in subjects with type 2 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the allele contrast genetic model (G vs. T).

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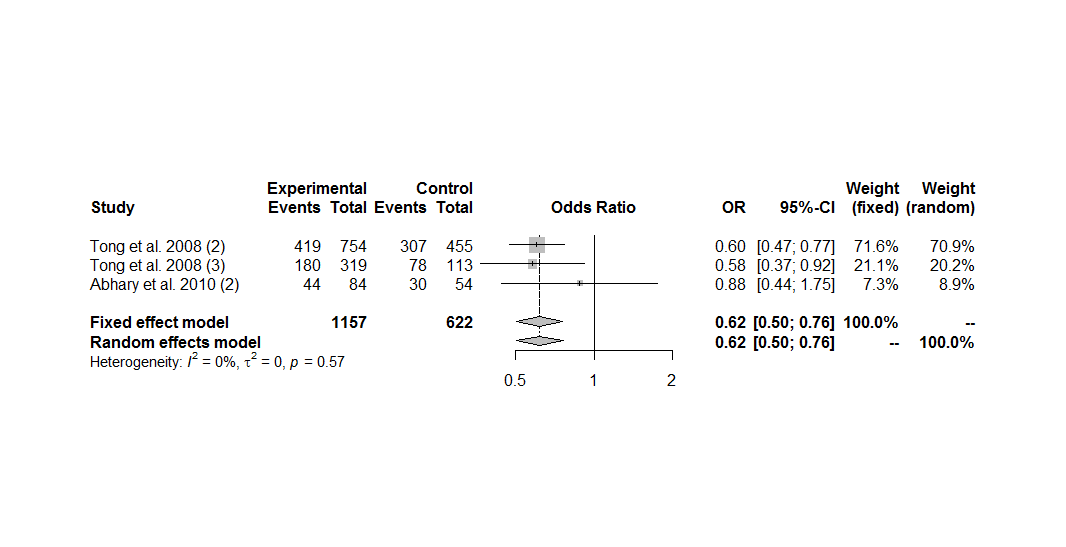
**Figure S67.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in subjects with type 1 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the dominant genetic model for the minor allele (GG+TG vs. TT).

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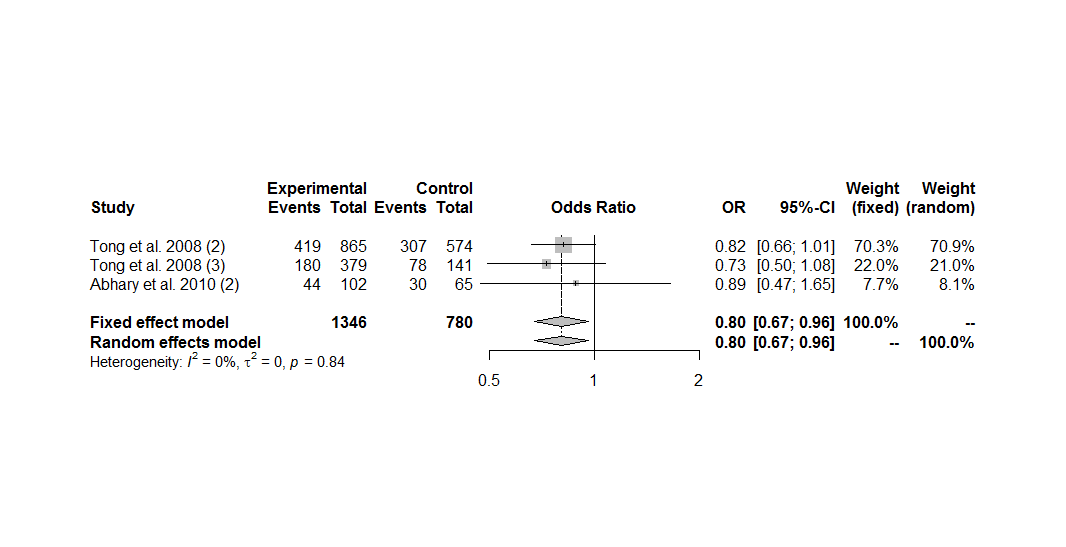
**Figure S68.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in subjects with type 1 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the recessive genetic model for the minor allele (GG vs. TG+TT).

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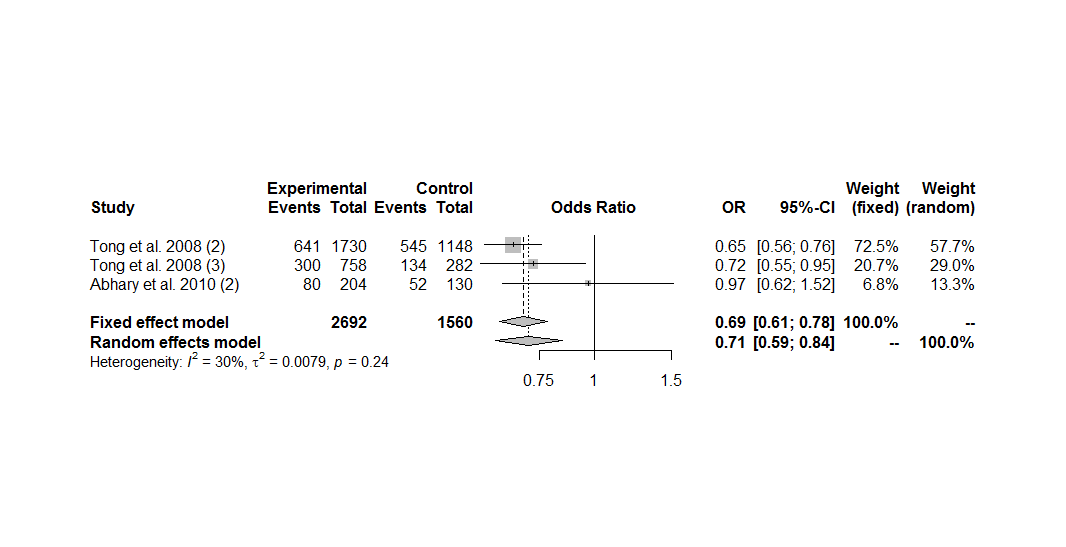
**Figure S69.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in subjects with type 1 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the homozygous additive genetic model for the minor allele (GG vs. TT).

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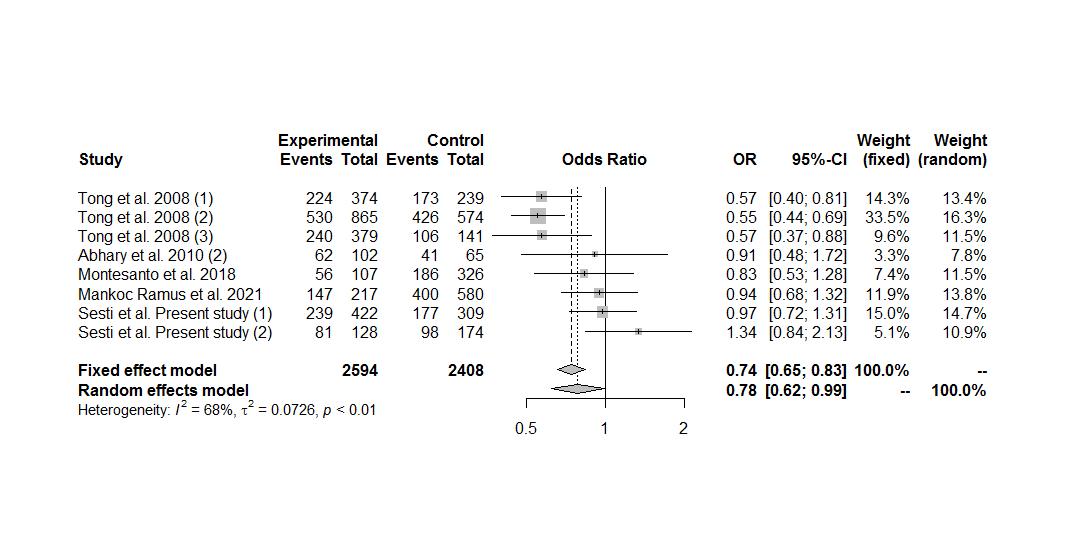
**Figure S70.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in subjects with type 1 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the heterozygous additive genetic model for the minor allele (TG vs. TT).

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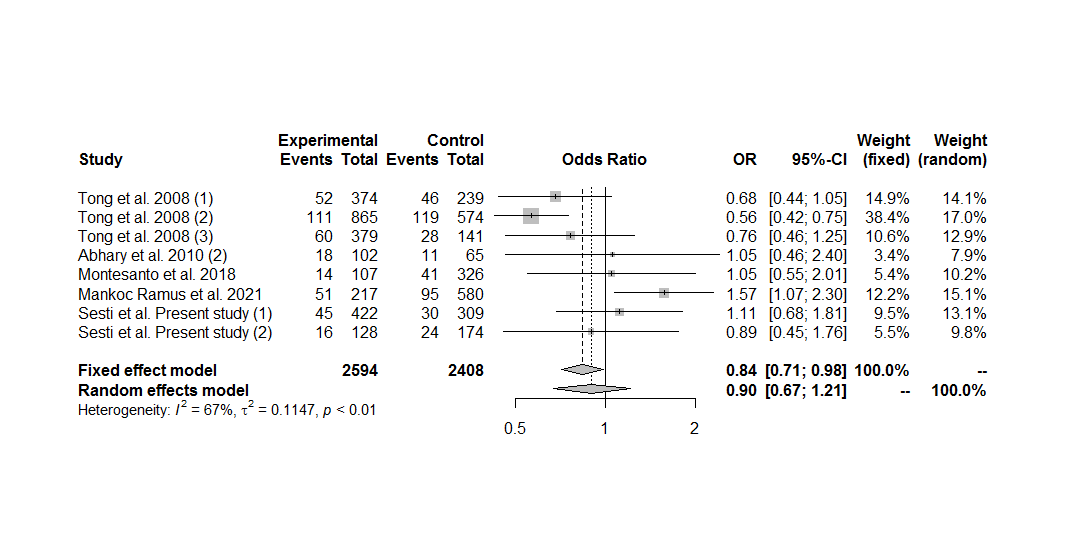
**Figure S71.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in subjects with type 1 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the overdominant genetic model (TG vs. GG+TT).

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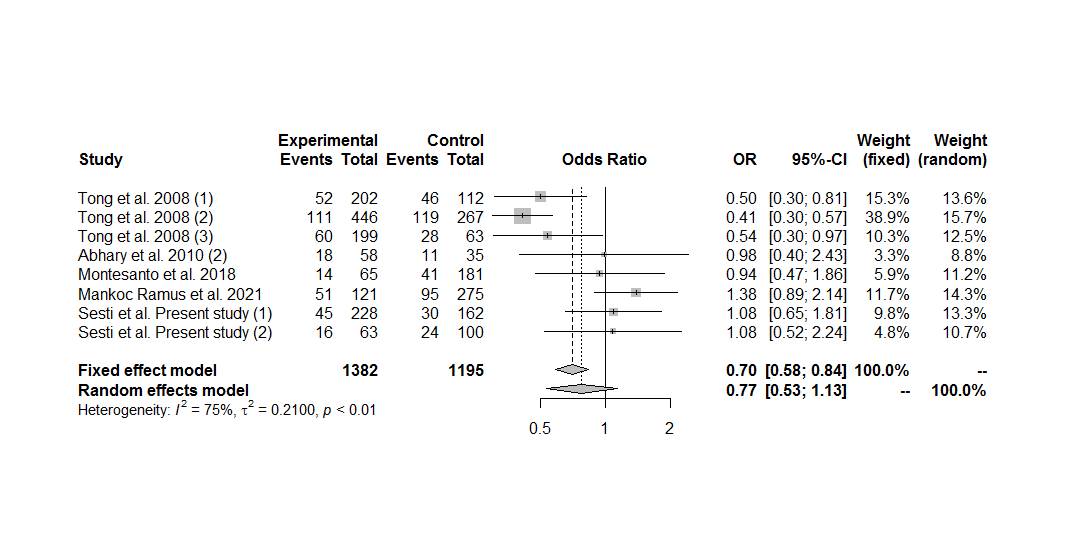
**Figure S72.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in subjects with type 1 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the allele contrast genetic model (G vs. T).

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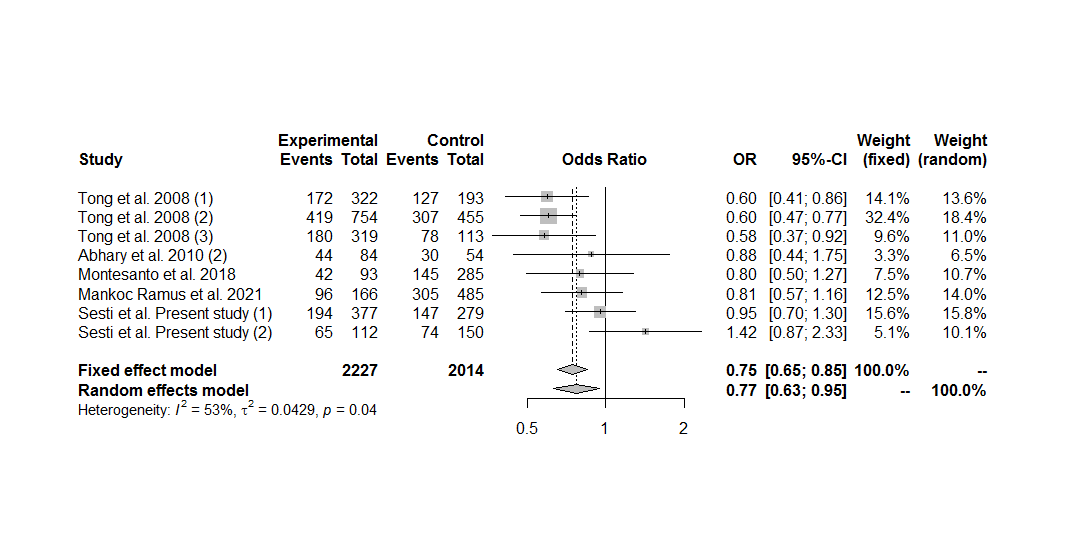
**Figure S73.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in non-Asians, including only the sets with controls in Hardy-Weinberg equilibrium, under the dominant genetic model for the minor allele (GG+TG vs. TT).

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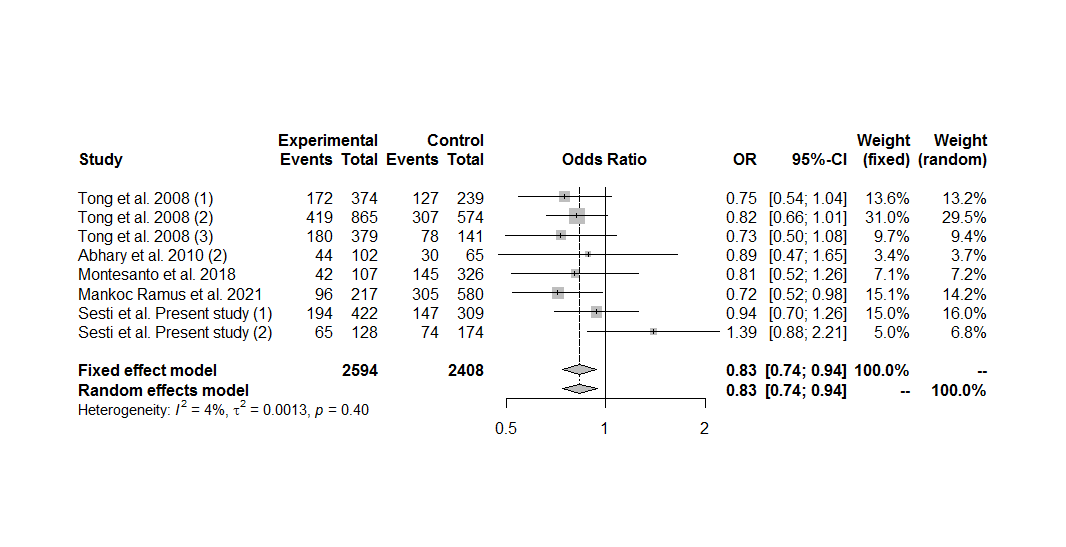
**Figure S74.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in non-Asians, including only the sets with controls in Hardy-Weinberg equilibrium, under the recessive genetic model for the minor allele (GG vs. TG+TT).

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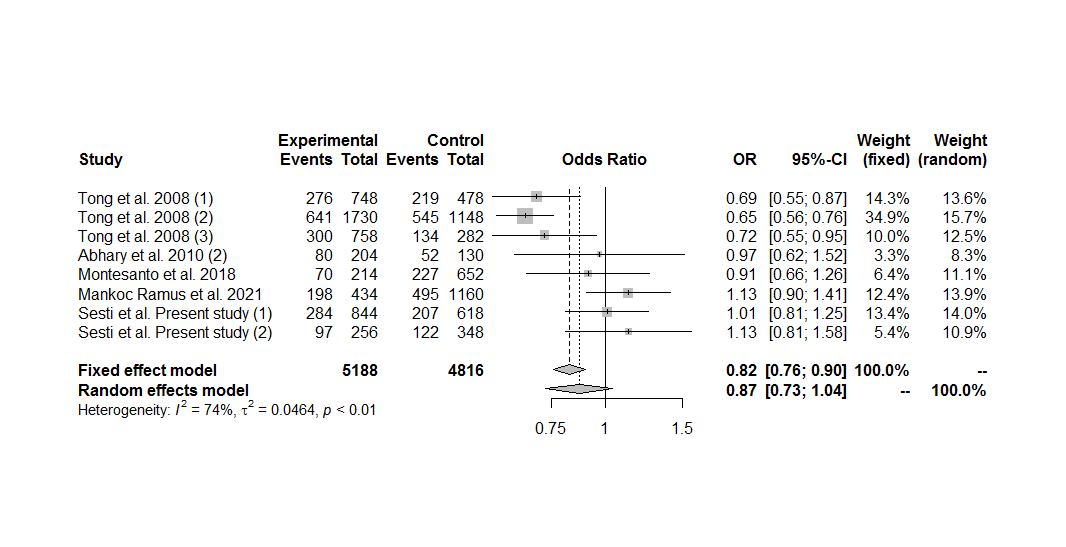
**Figure S75.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in non-Asians, including only the sets with controls in Hardy-Weinberg equilibrium, under the homozygous additive genetic model for the minor allele (GG vs. TT).

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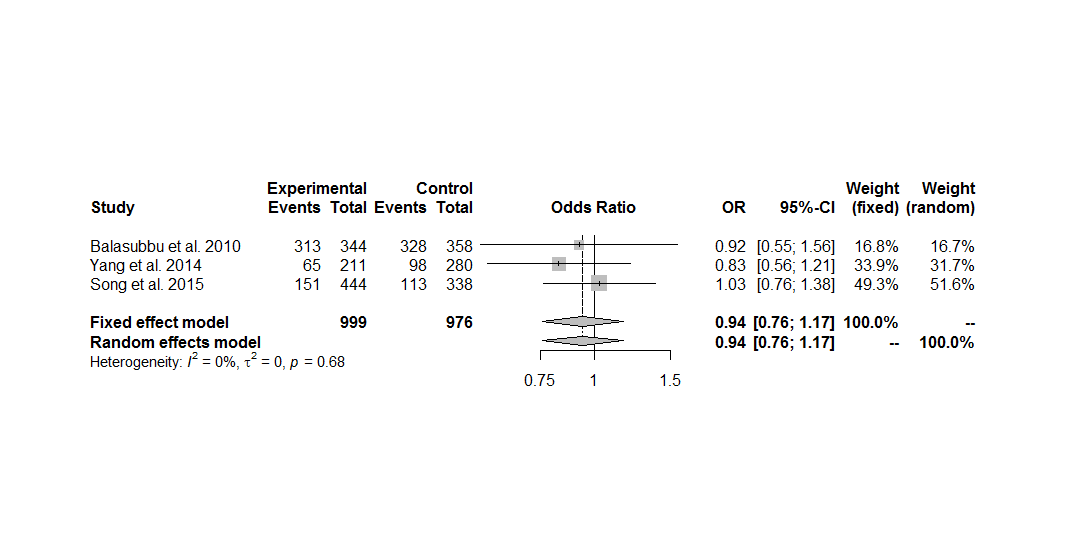
**Figure S76.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in non-Asians, including only the sets with controls in Hardy-Weinberg equilibrium, under the heterozygous additive genetic model for the minor allele (TG vs. TT).

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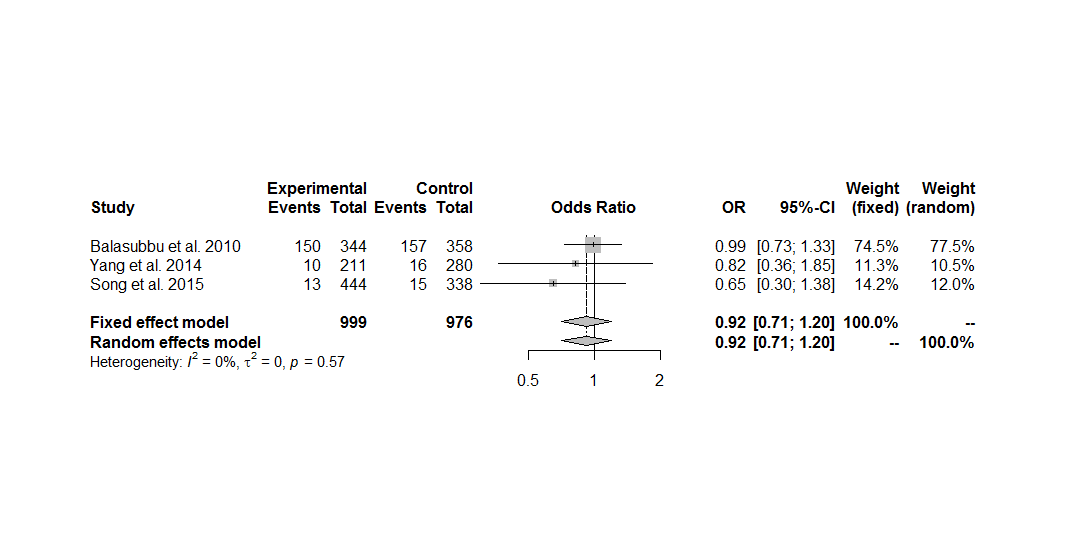
**Figure S77.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in non-Asians, including only the sets with controls in Hardy-Weinberg equilibrium, under the overdominant genetic model (TG vs. GG+TT).

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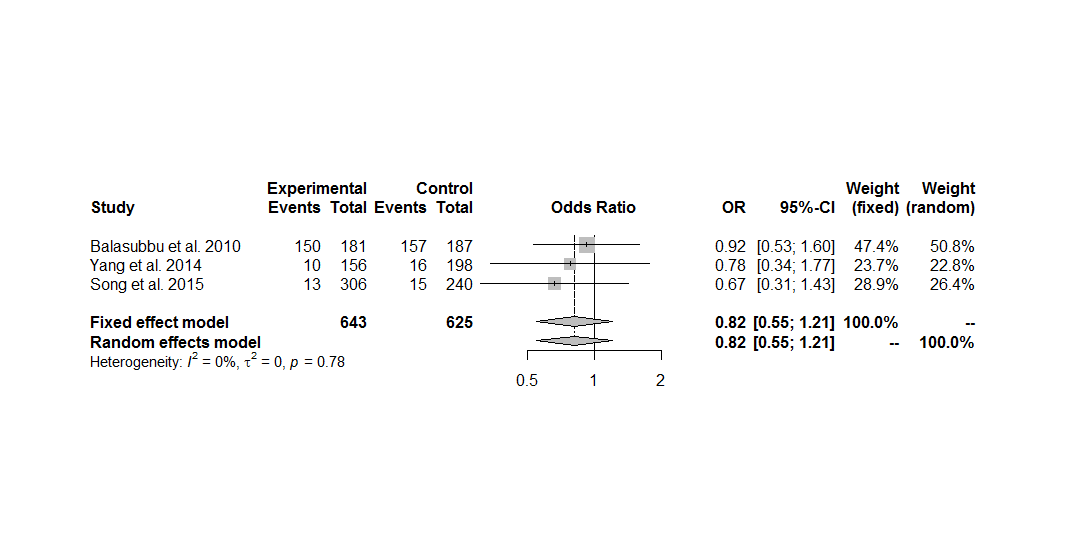
**Figure S78.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in non-Asians, including only the sets with controls in Hardy-Weinberg equilibrium, under the allele contrast genetic model (G vs. T).

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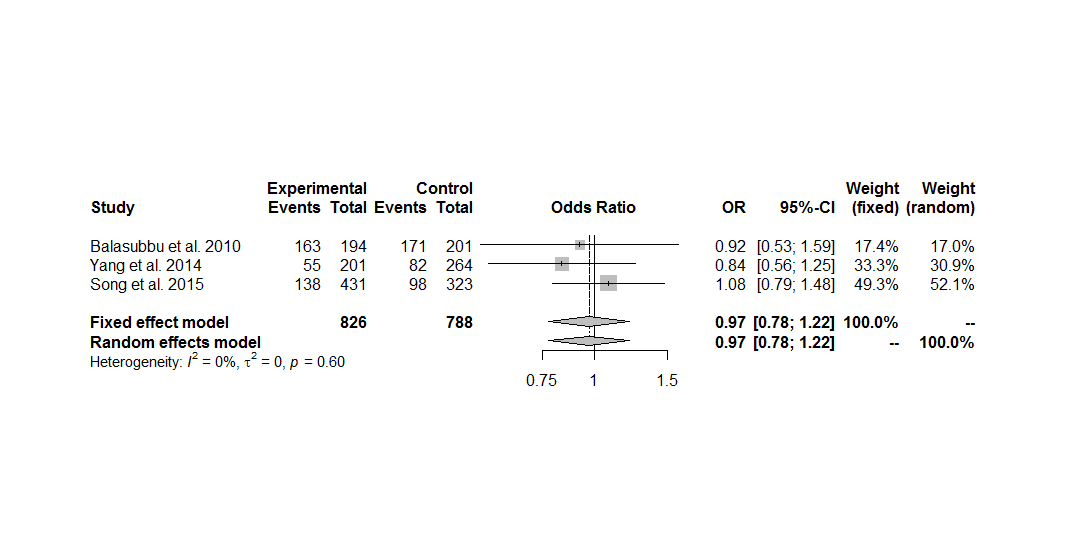
**Figure S79.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in Asians, including only the sets with controls in Hardy-Weinberg equilibrium, under the dominant genetic model for the minor allele (GG+TG vs. TT).

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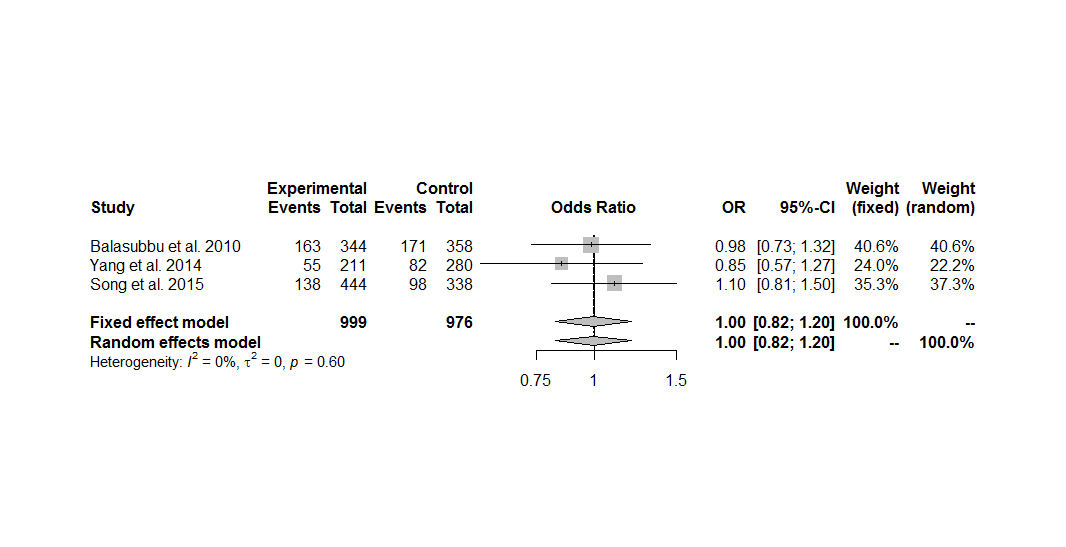
**Figure S80.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in Asians, including only the sets with controls in Hardy-Weinberg equilibrium, under the recessive genetic model for the minor allele (GG vs. TG+TT).

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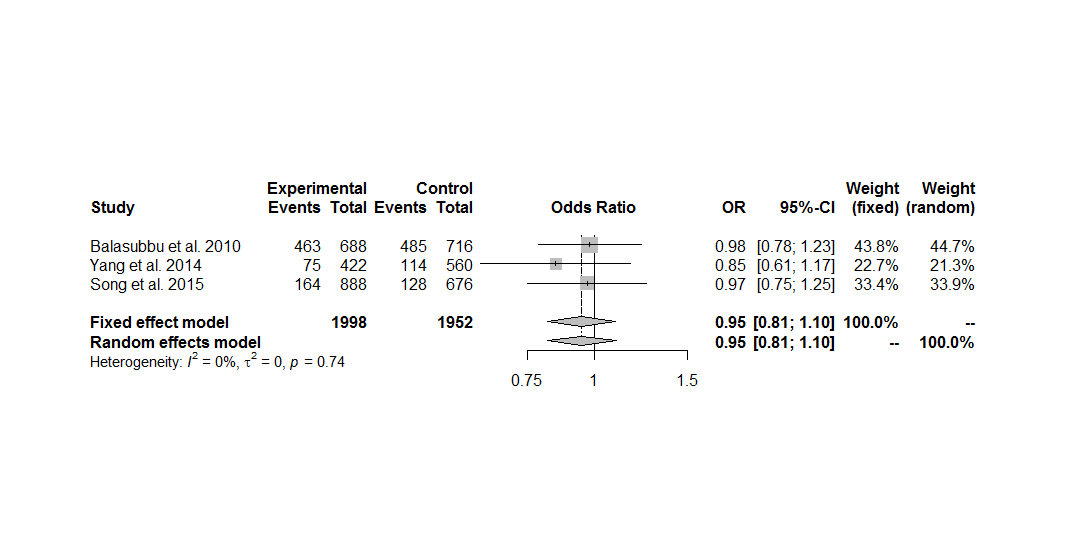
**Figure S81.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in Asians, including only the sets with controls in Hardy-Weinberg equilibrium, under the homozygous additive genetic model for the minor allele (GG vs. TT).

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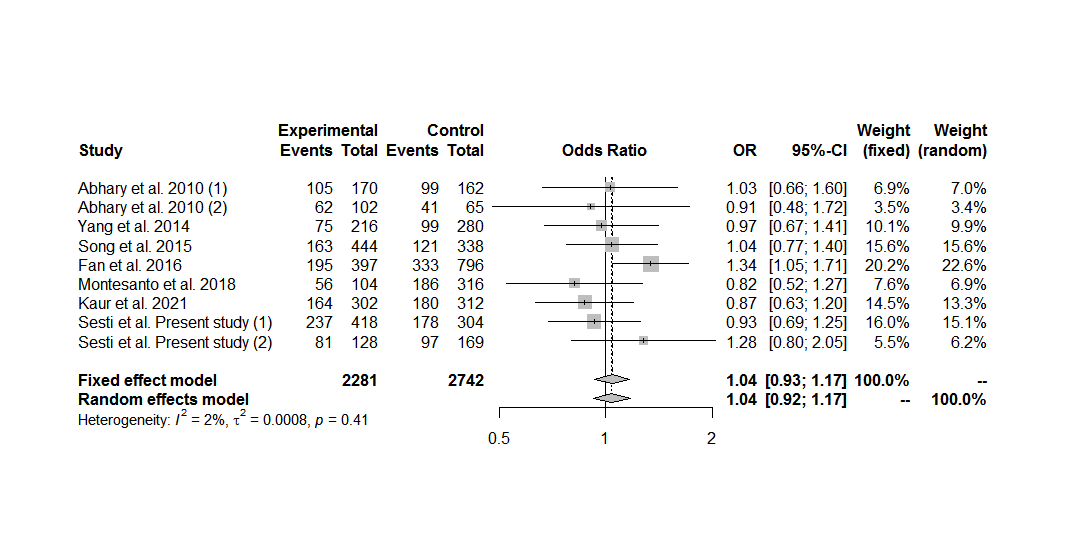
**Figure S82.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in Asians, including only the sets with controls in Hardy-Weinberg equilibrium, under the heterozygous additive genetic model for the minor allele (TG vs. TT).

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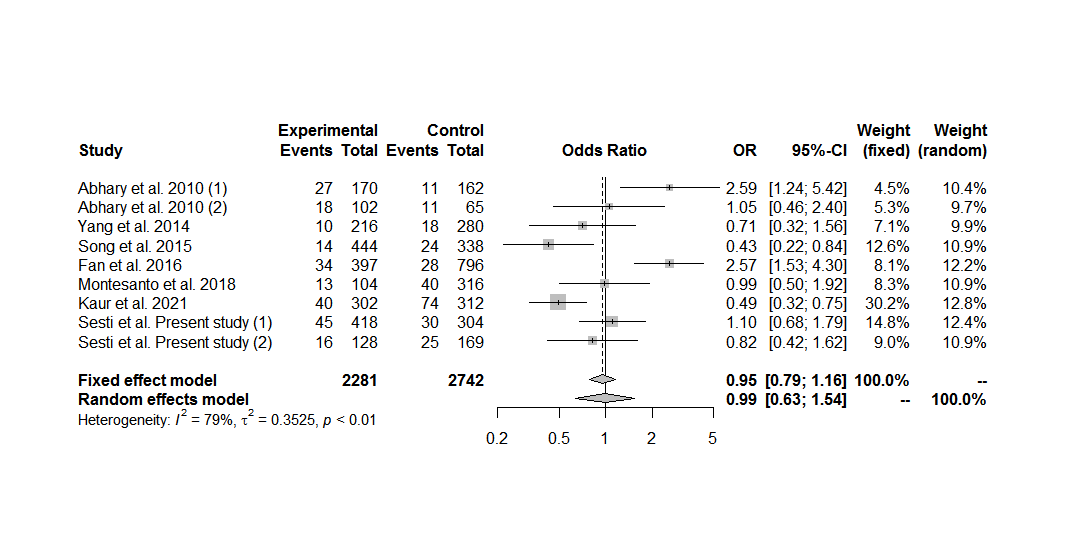
**Figure S83.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in Asians, including only the sets with controls in Hardy-Weinberg equilibrium, under the overdominant genetic model (TG vs. GG+TT).

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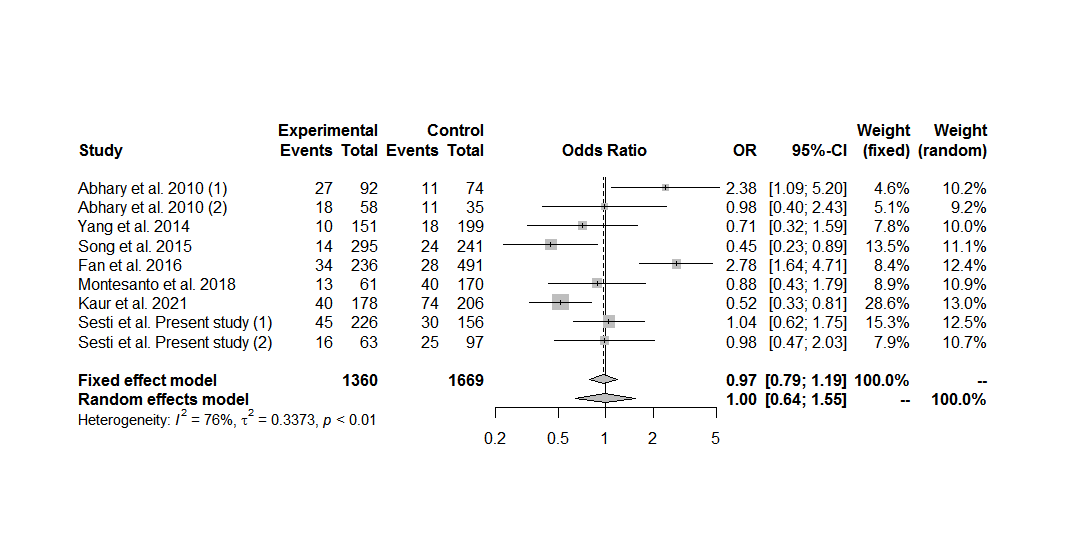
**Figure S84.** Forest plot of the association between the *EPO* rs1617640 polymorphism and diabetic retinopathy in Asians, including only the sets with controls in Hardy-Weinberg equilibrium, under the allele contrast genetic model (G vs. T).

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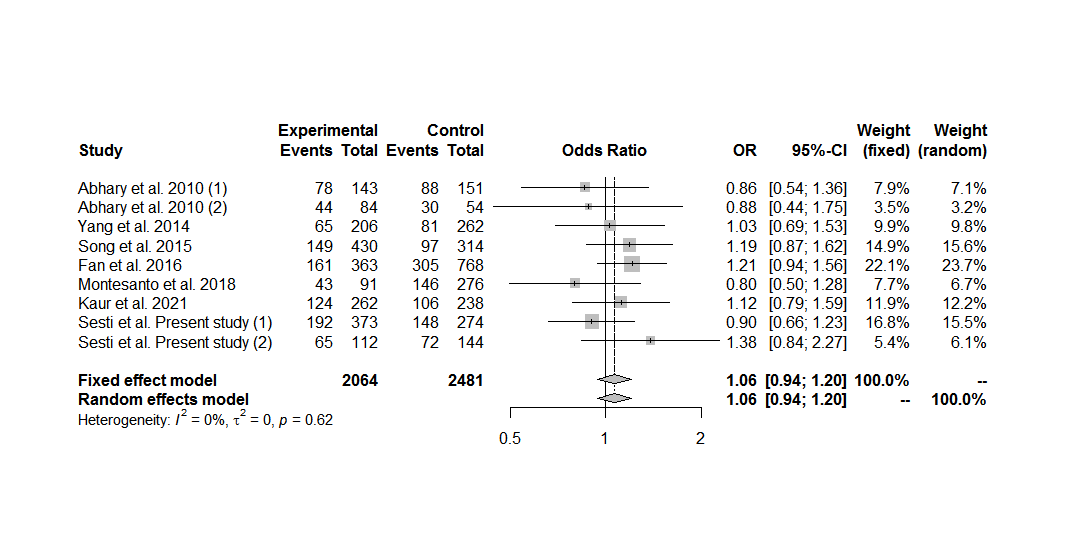
**Figure S85.** Forest plot of the association between the *EPO* rs507392 polymorphism and diabetic retinopathy in the overall group analysis, under the dominant genetic model for the minor allele (CC+TC vs. TT).

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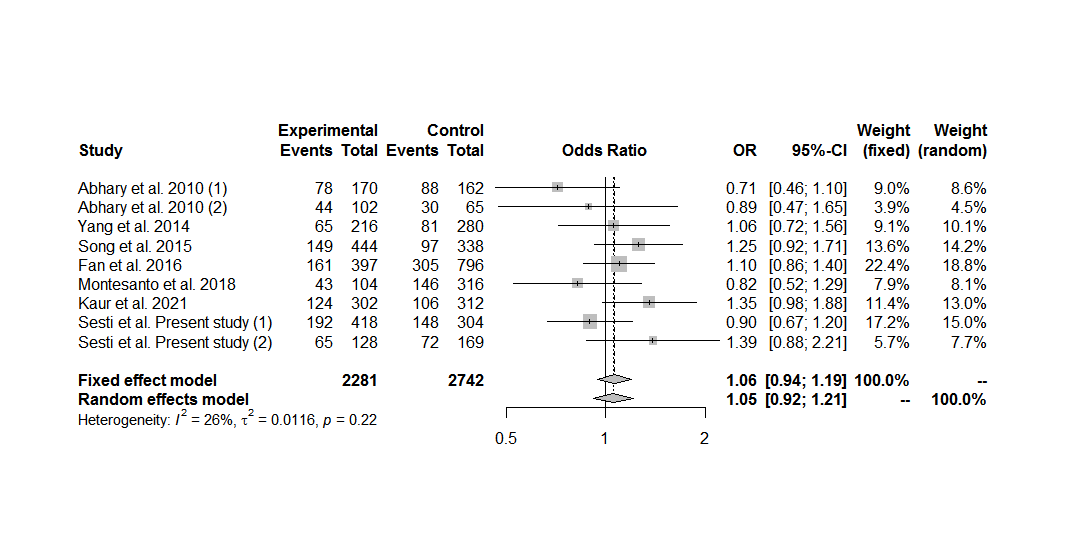
**Figure S86.** Forest plot of the association between the *EPO* rs507392 polymorphism and diabetic retinopathy in the overall group analysis, under the recessive genetic model for the minor allele (CC vs. TC+TT).

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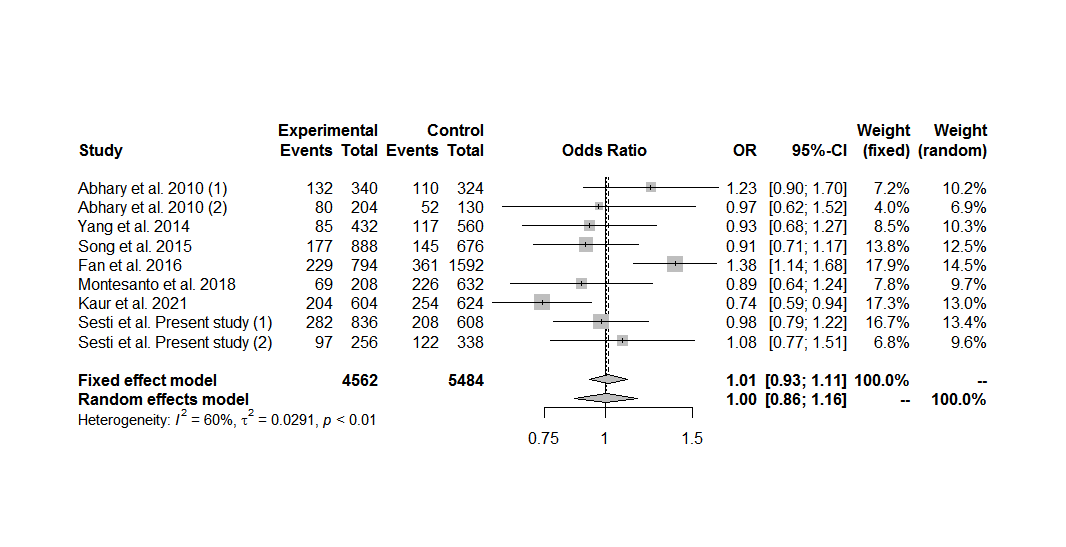
**Figure S87.** Forest plot of the association between the *EPO* rs507392 polymorphism and diabetic retinopathy in the overall group analysis, under the homozygous additive genetic model for the minor allele (CC vs. TT).

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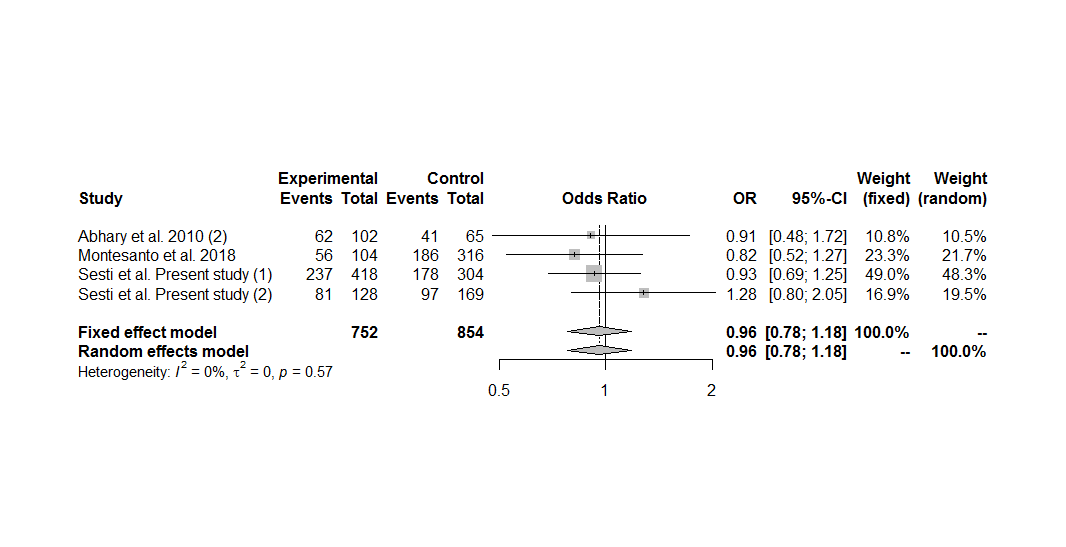
**Figure S88.** Forest plot of the association between the *EPO* rs507392 polymorphism and diabetic retinopathy in the overall group analysis, under the heterozygous additive genetic model for the minor allele (TC vs. TT).

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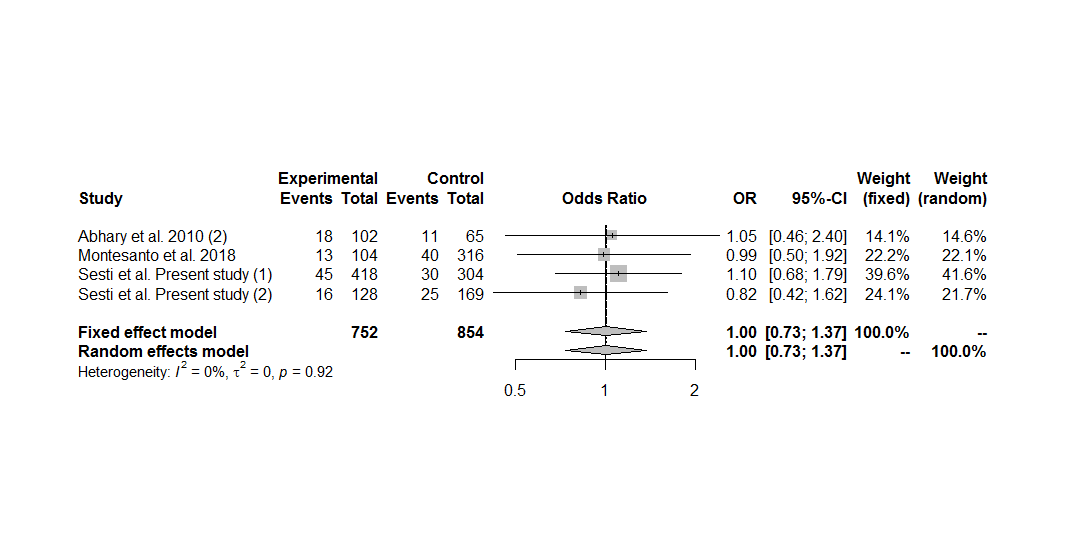
**Figure S89.** Forest plot of the association between the *EPO* rs507392 polymorphism and diabetic retinopathy in the overall group analysis, under the overdominant genetic model (TC vs. CC+TT).

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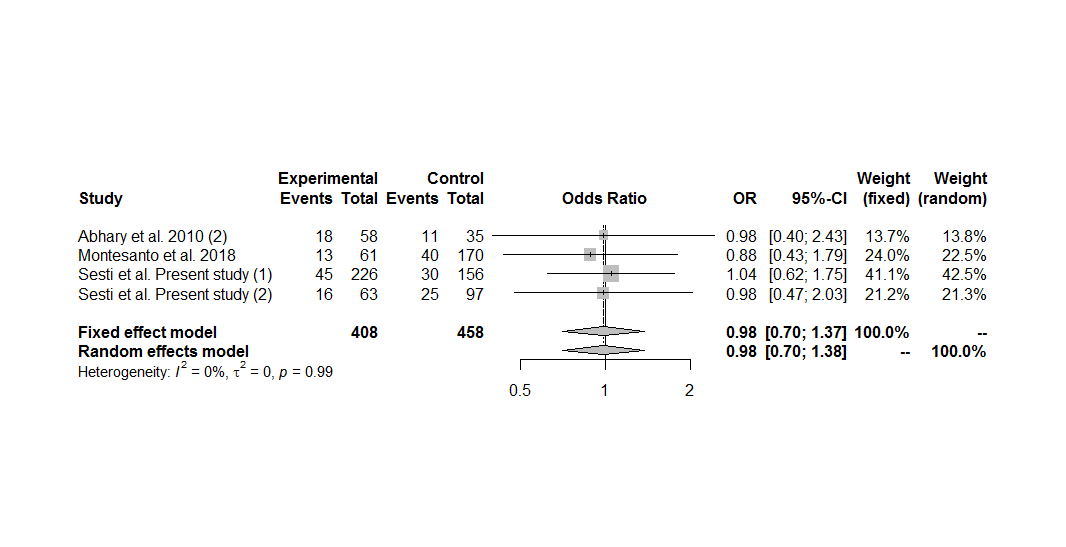
**Figure S90.** Forest plot of the association between the *EPO* rs507392 polymorphism and diabetic retinopathy in the overall group analysis, under the allele contrast genetic model (C vs. T).

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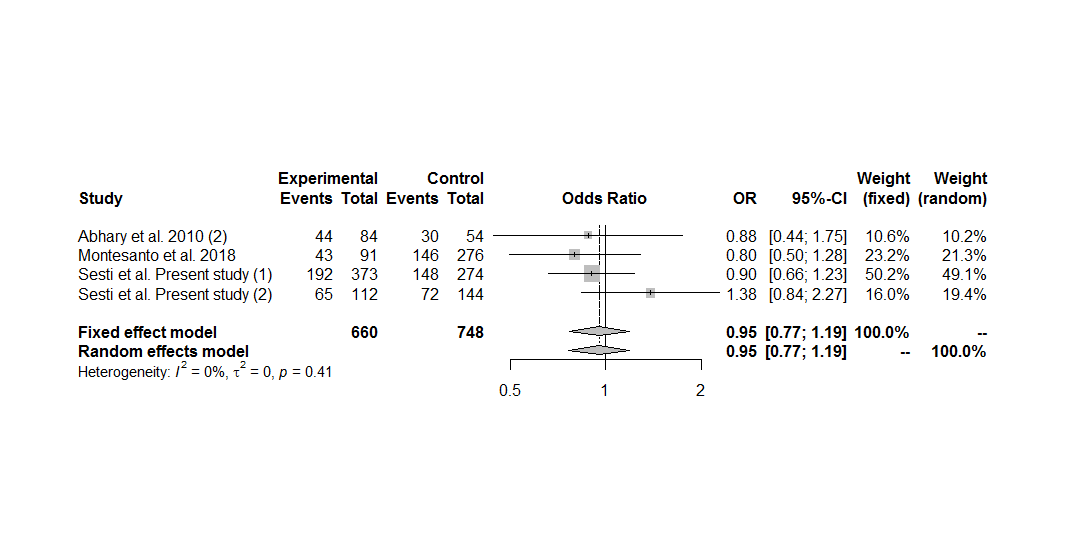
**Figure S91.** Forest plot of the association between the *EPO* rs507392 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the dominant genetic model for the minor allele (CC+TC vs. TT).

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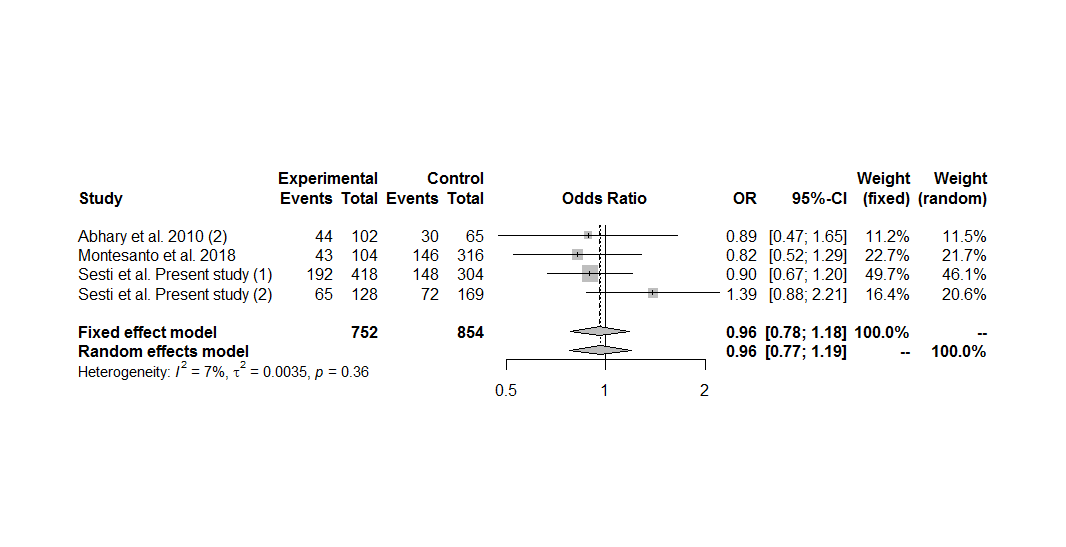
**Figure S92.** Forest plot of the association between the *EPO* rs507392 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the recessive genetic model for the minor allele (CC vs. TC+TT).

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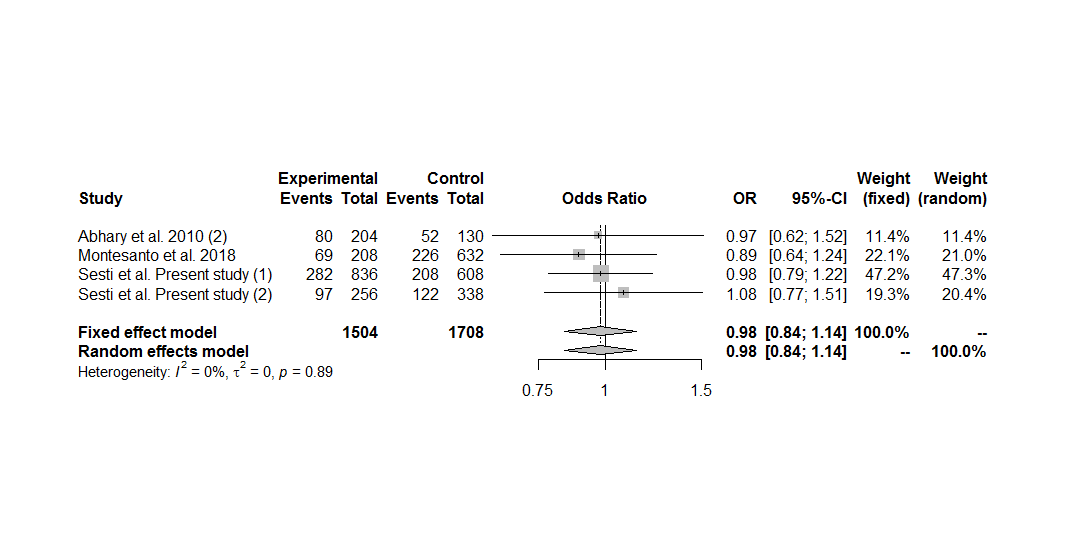
**Figure S93.** Forest plot of the association between the *EPO* rs507392 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the homozygous additive genetic model for the minor allele (CC vs. TT).

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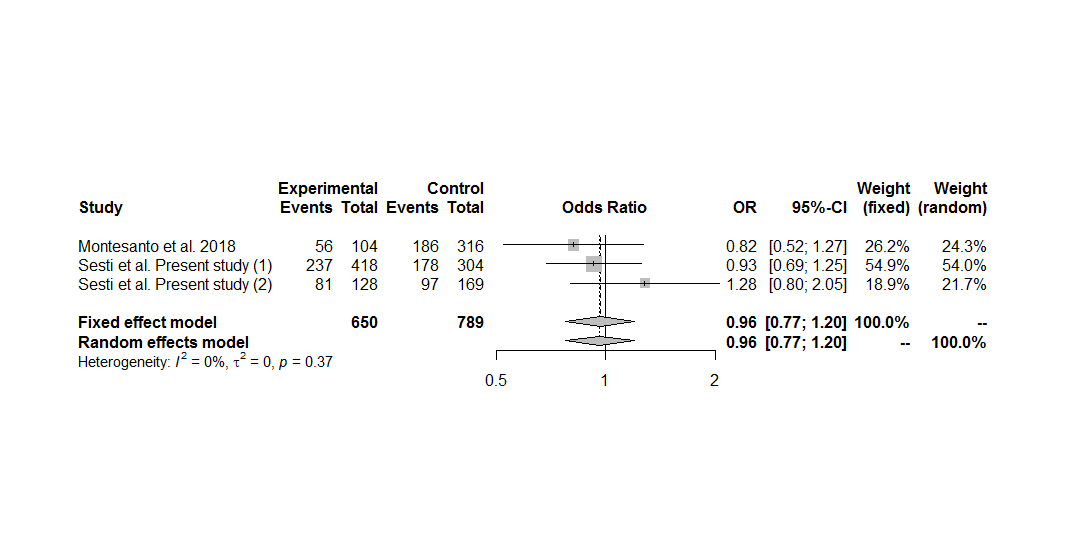
**Figure S94.** Forest plot of the association between the *EPO* rs507392 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the heterozygous additive genetic model for the minor allele (TC vs. TT).

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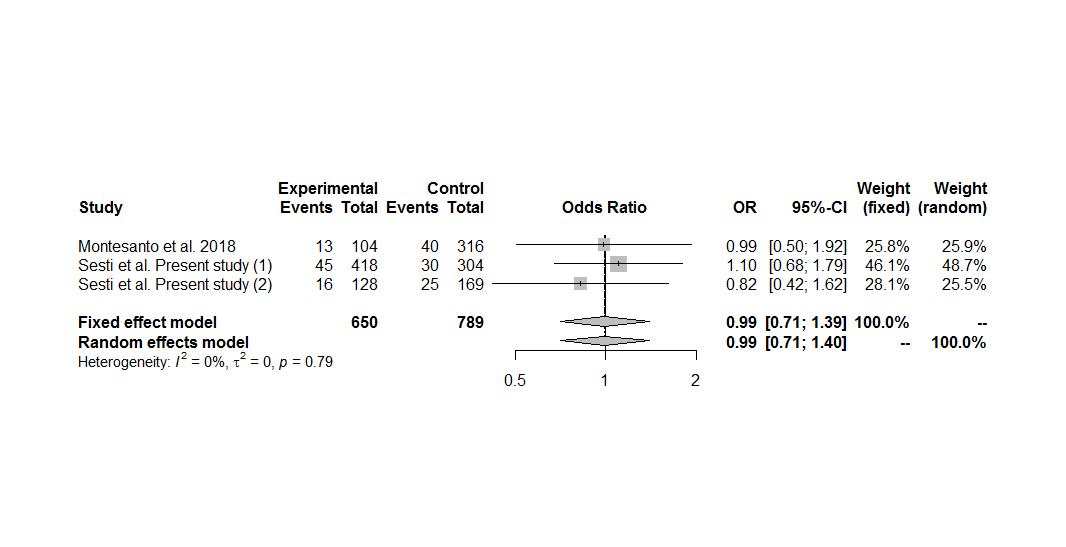
**Figure S95.** Forest plot of the association between the *EPO* rs507392 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the overdominant genetic model (TC vs. CC+TT).

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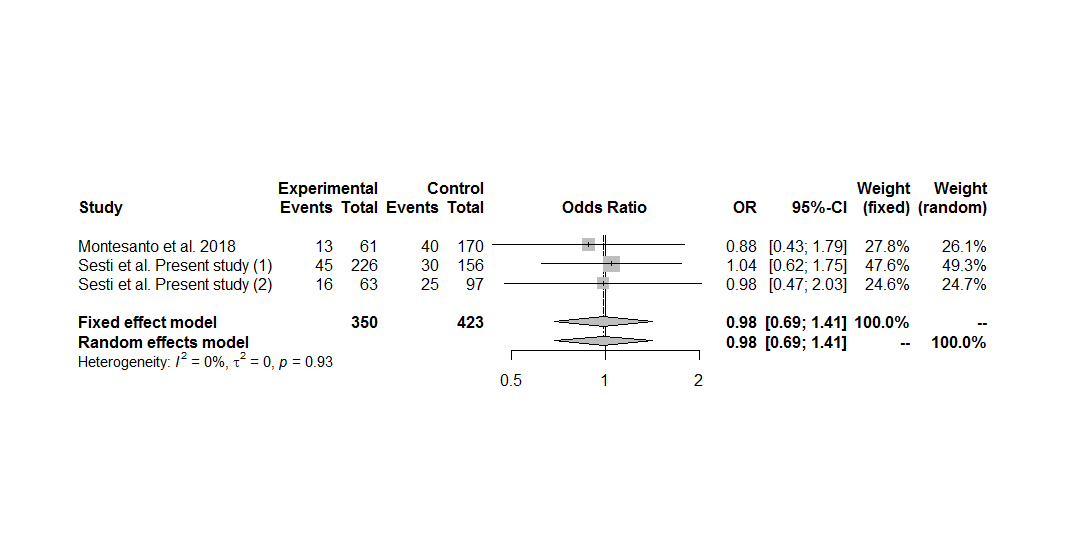
**Figure S96.** Forest plot of the association between the *EPO* rs507392 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the allele contrast genetic model (C vs. T).

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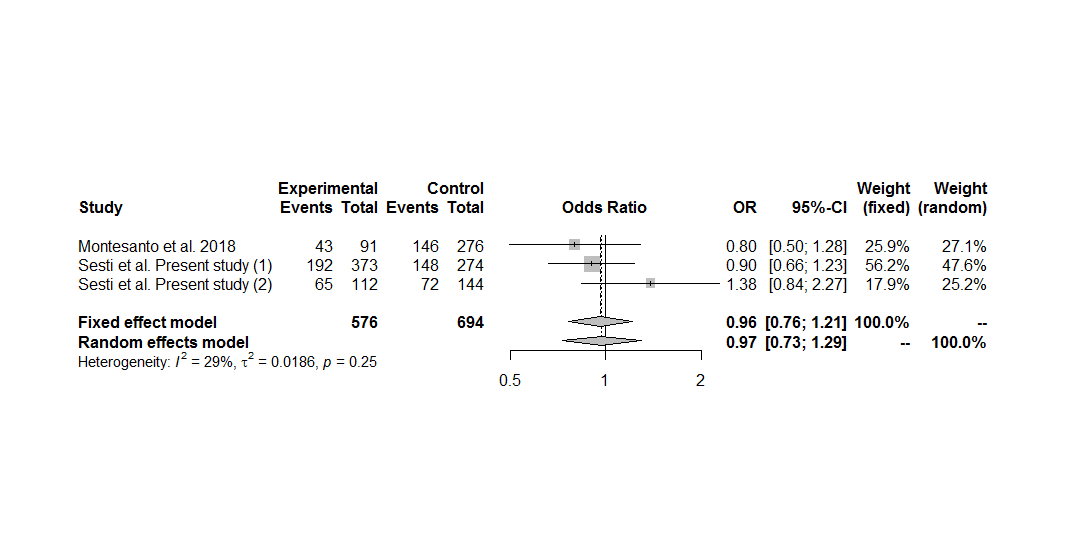
**Figure S97.** Forest plot of the association between the *EPO* rs507392 polymorphism and diabetic retinopathy in subjects with type 2 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the dominant genetic model for the minor allele (CC+TC vs. TT).

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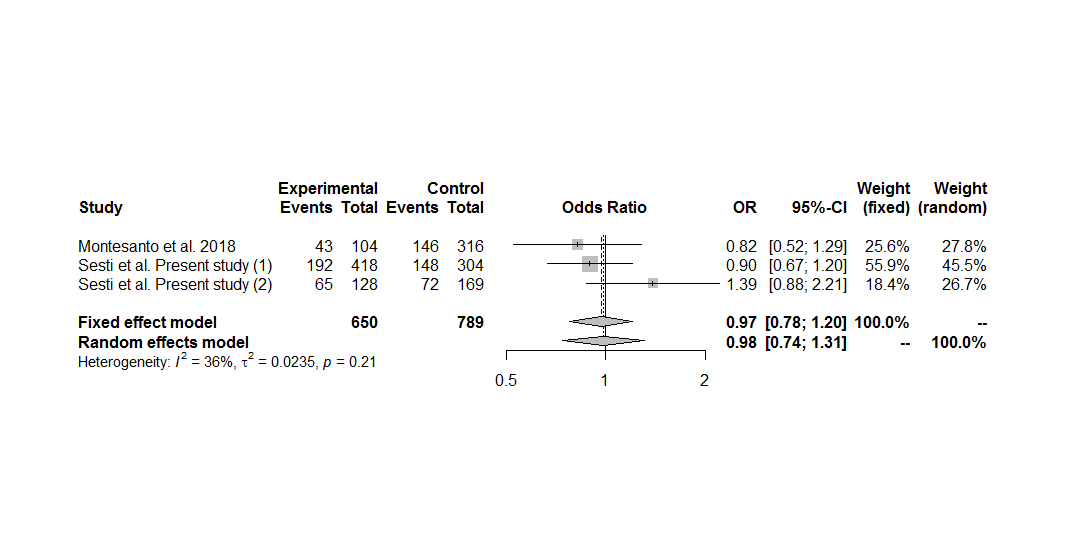
**Figure S98.** Forest plot of the association between the *EPO* rs507392 polymorphism and diabetic retinopathy in subjects with type 2 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the recessive genetic model for the minor allele (CC vs. TC+TT).

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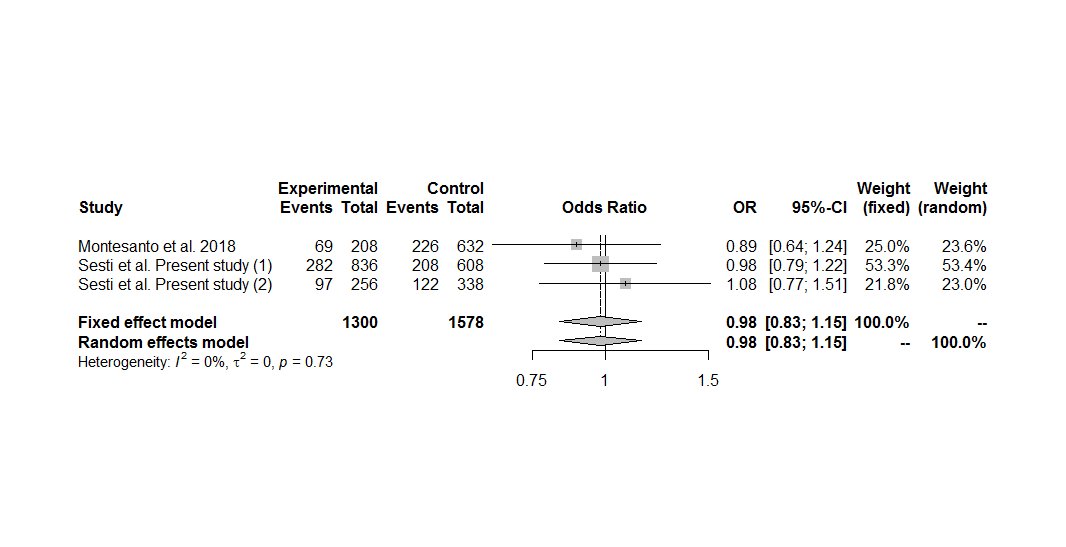
**Figure S99.** Forest plot of the association between the *EPO* rs507392 polymorphism and diabetic retinopathy in subjects with type 2 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the homozygous additive genetic model for the minor allele (CC vs. TT).



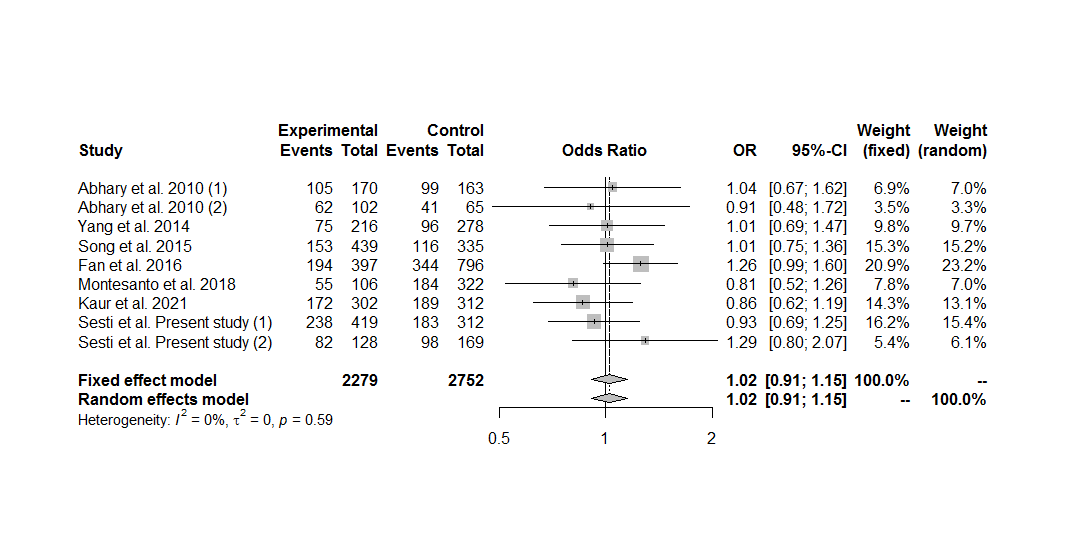
**Figure S100.** Forest plot of the association between the *EPO* rs507392 polymorphism and diabetic retinopathy in subjects with type 2 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the heterozygous additive genetic model for the minor allele (TC vs. TT).

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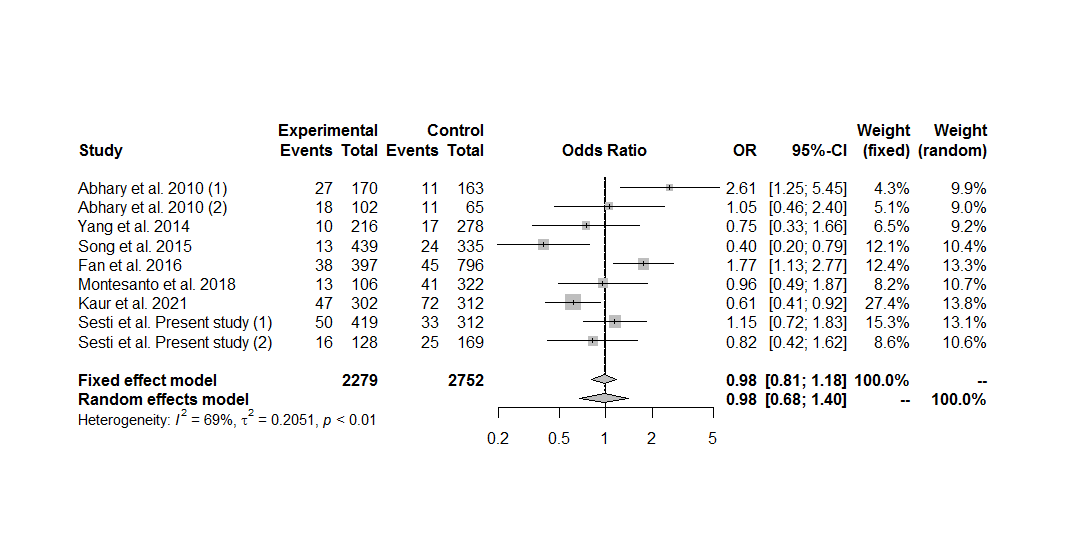
**Figure S101.** Forest plot of the association between the *EPO* rs507392 polymorphism and diabetic retinopathy in subjects with type 2 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the overdominant genetic model (TC vs. CC+TT).

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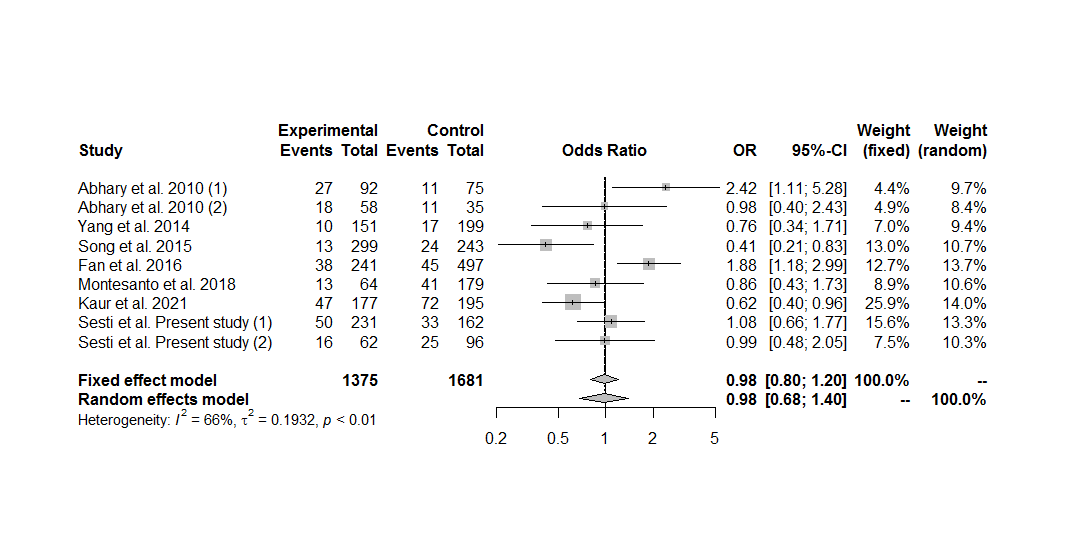
**Figure S102.** Forest plot of the association between the *EPO* rs507392 polymorphism and diabetic retinopathy in subjects with type 2 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the allele contrast genetic model (C vs. T).

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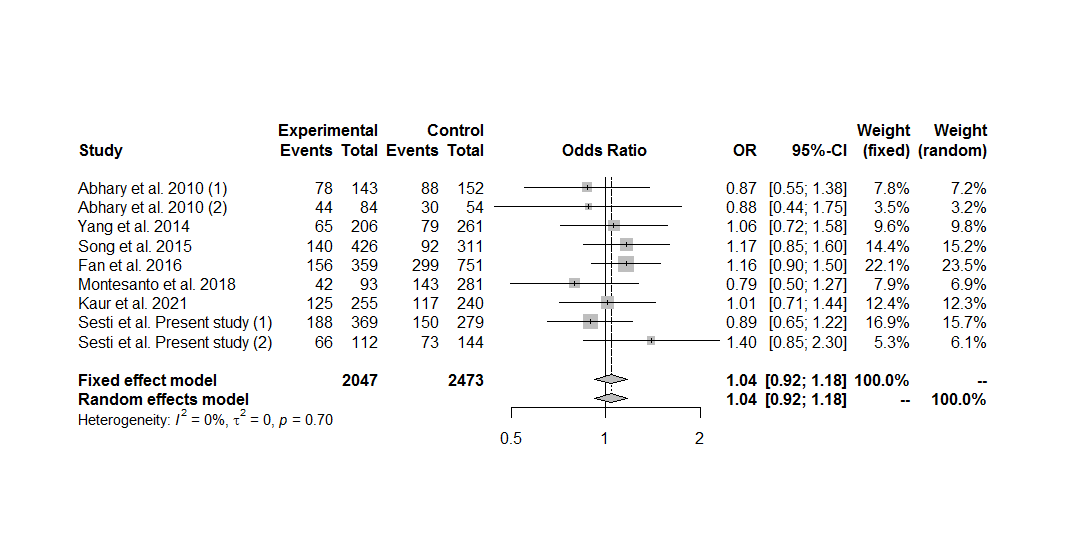
**Figure S103.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in the overall group analysis, under the dominant genetic model for the minor allele (CC+AC vs. AA).

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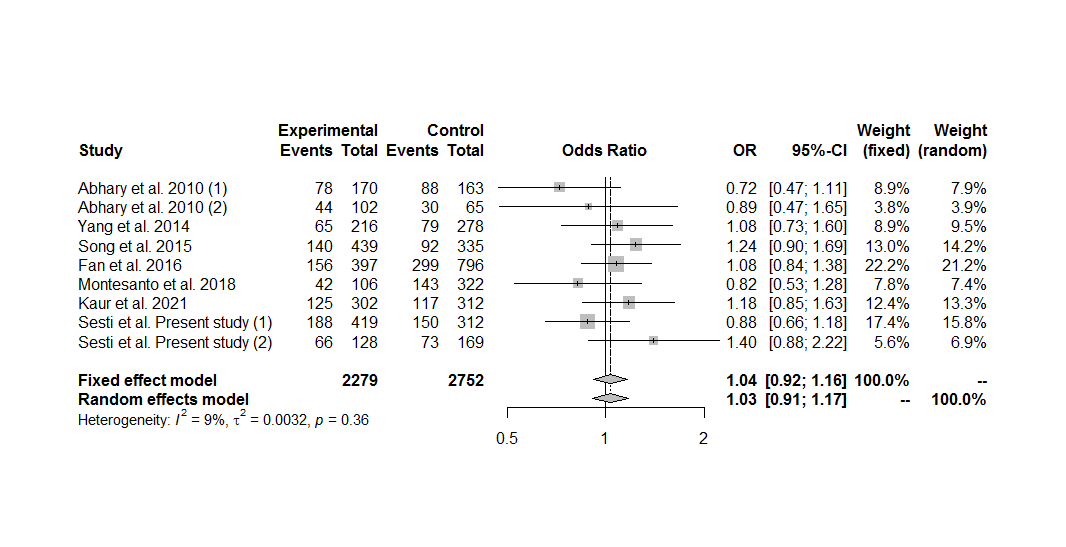
**Figure S104.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in the overall group analysis, under the recessive genetic model for the minor allele (CC vs. AC+AA).

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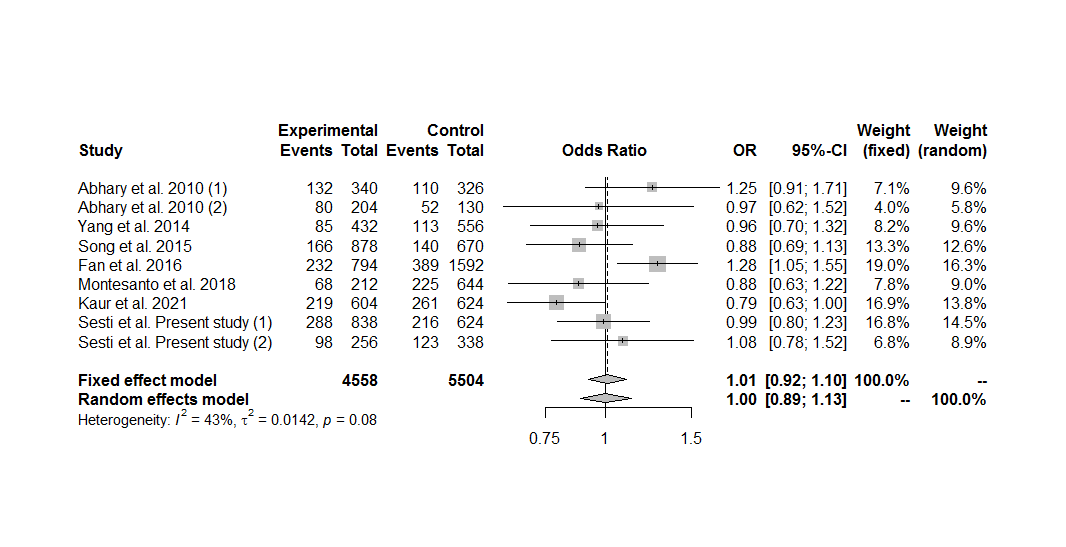
**Figure S105.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in the overall group analysis, under the homozygous additive genetic model for the minor allele (CC vs. AA).

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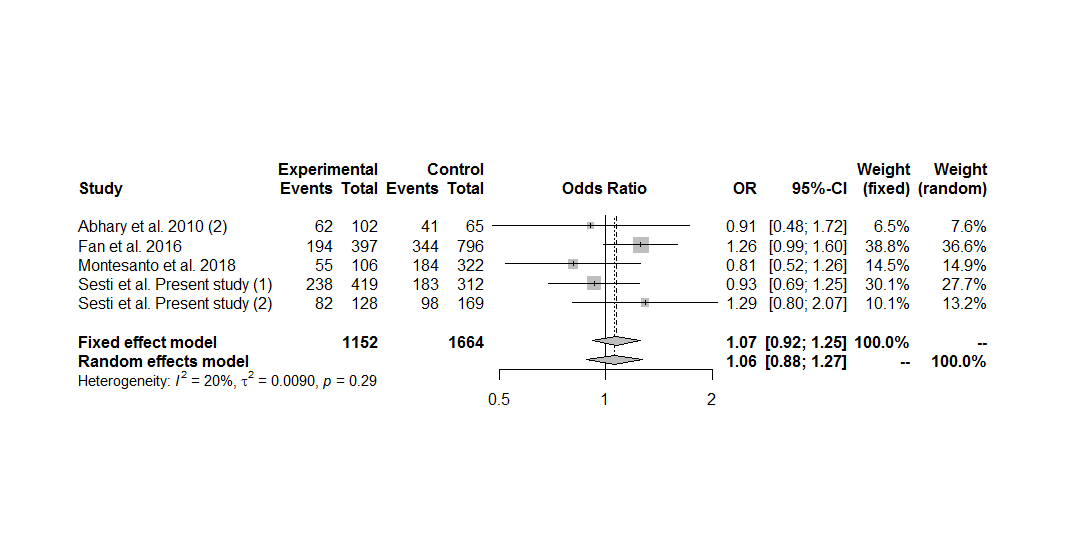
**Figure S106.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in the overall group analysis, under the heterozygous additive genetic model for the minor allele (AC vs. AA).

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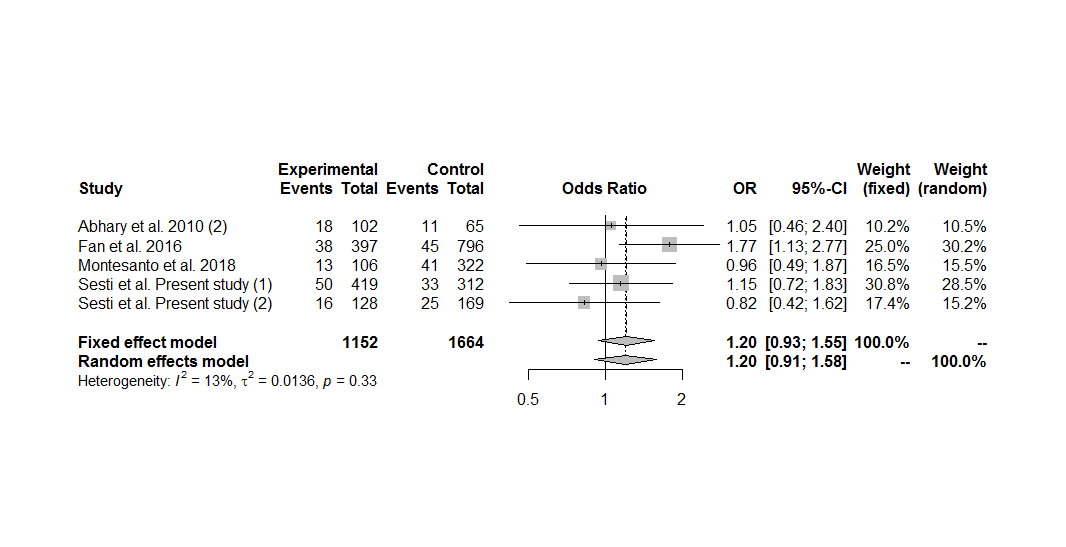
**Figure S107.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in the overall group analysis, under the overdominant genetic model (AC vs. CC+AA).

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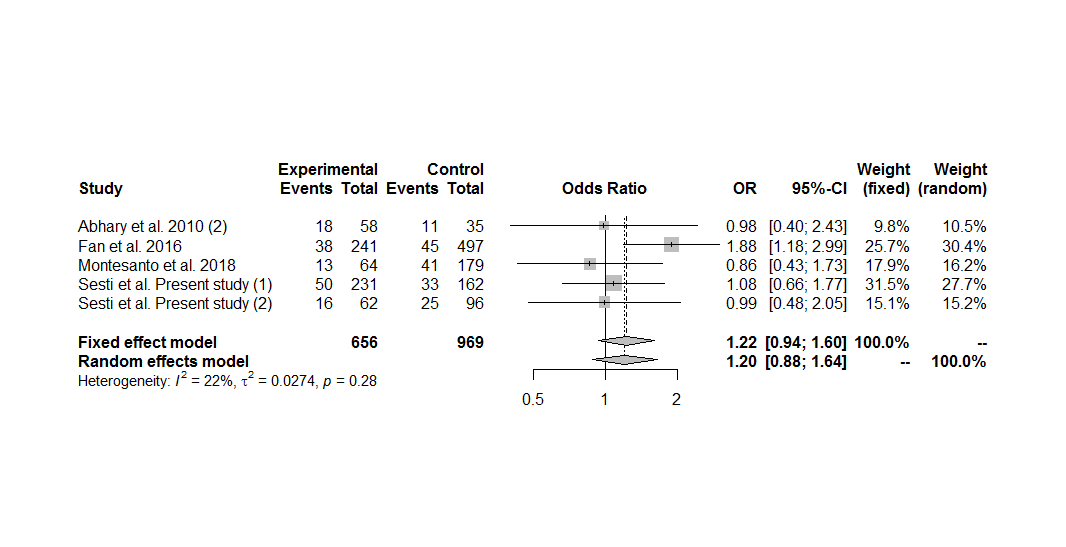
**Figure S108.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in the overall group analysis, under the allele contrast genetic model (C vs. A).

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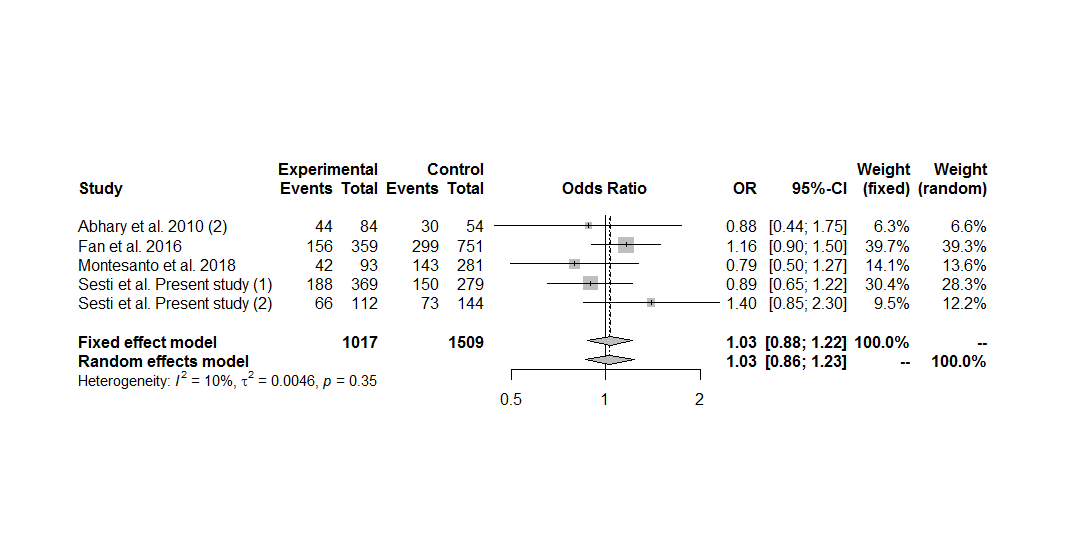
**Figure S109.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the dominant genetic model for the minor allele (CC+AC vs. AA).

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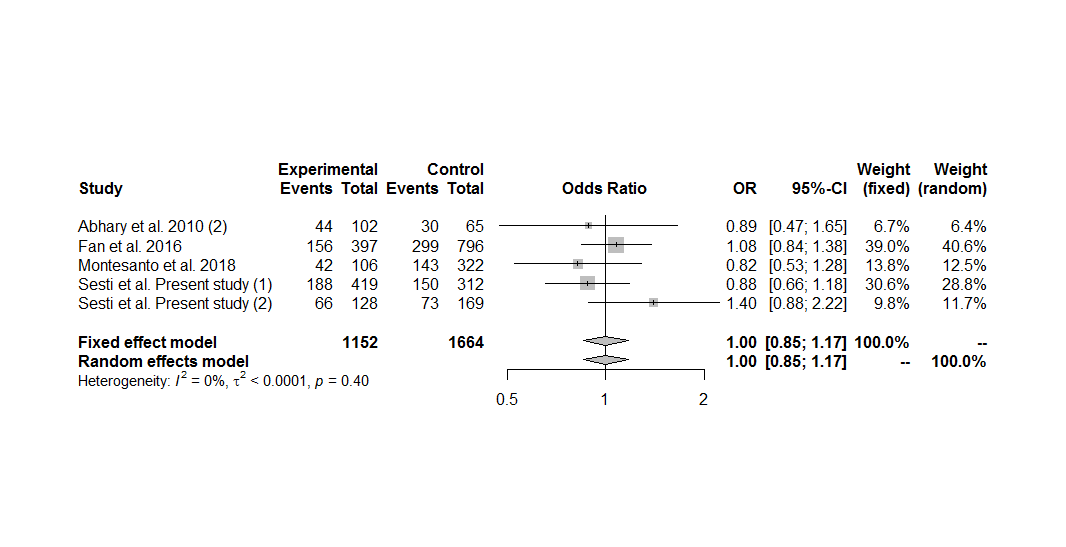
**Figure S110.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the recessive genetic model for the minor allele (CC vs. AC+AA).

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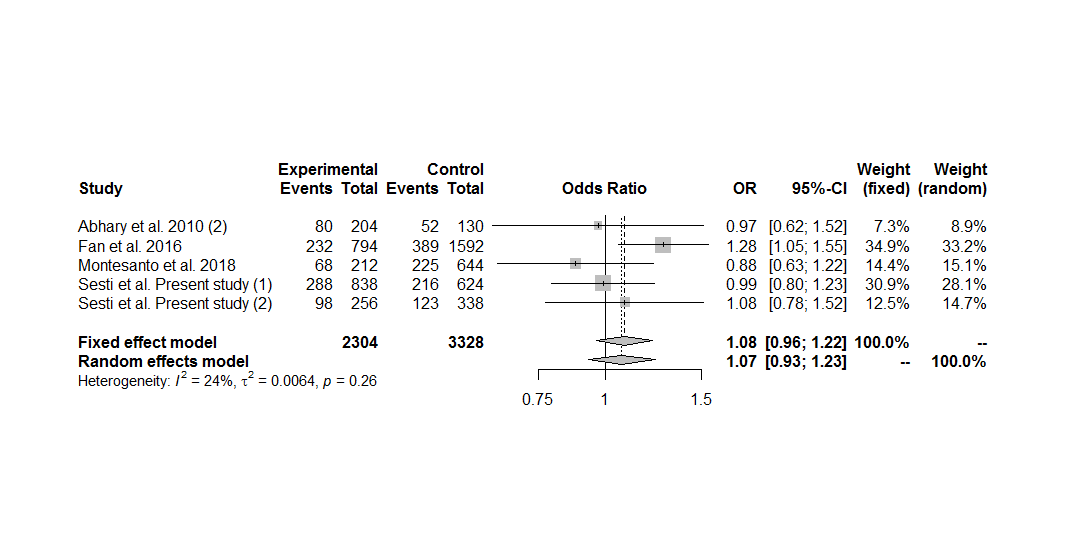
**Figure S111.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the homozygous additive genetic model for the minor allele (CC vs. AA).

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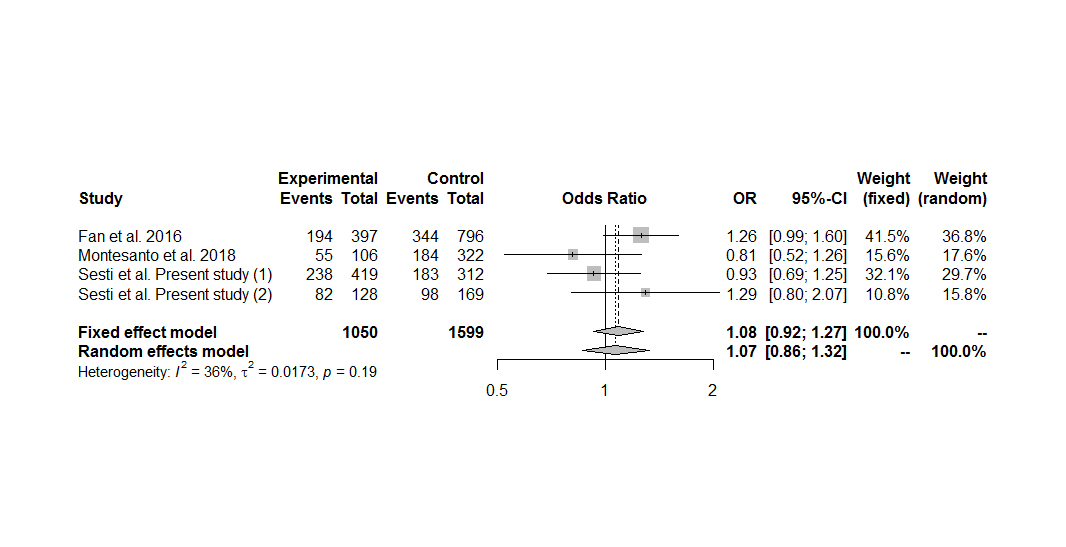
**Figure S112.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the heterozygous additive genetic model for the minor allele (AC vs. AA).

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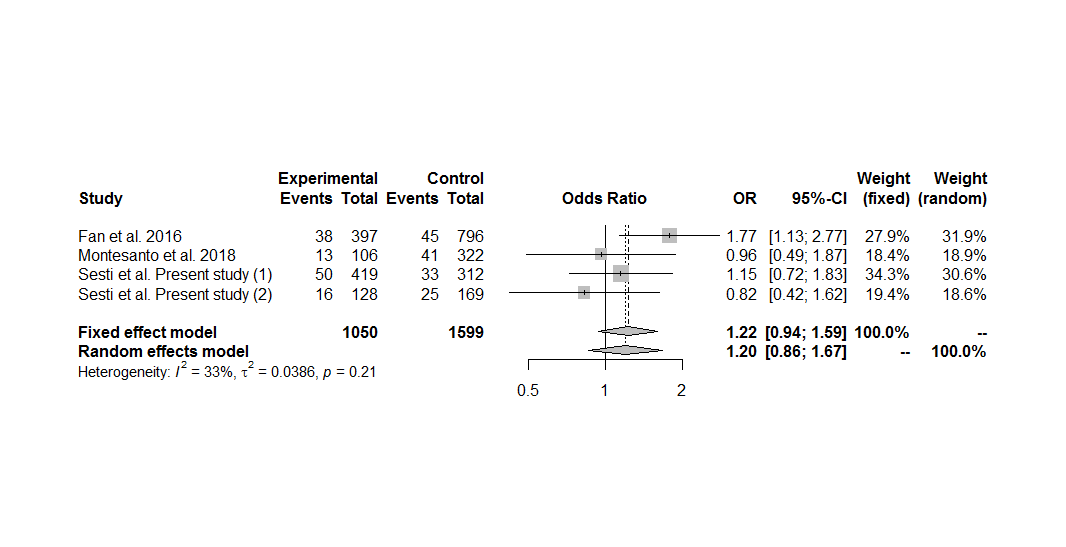
**Figure S113.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the overdominant genetic model (AC vs. CC+AA).

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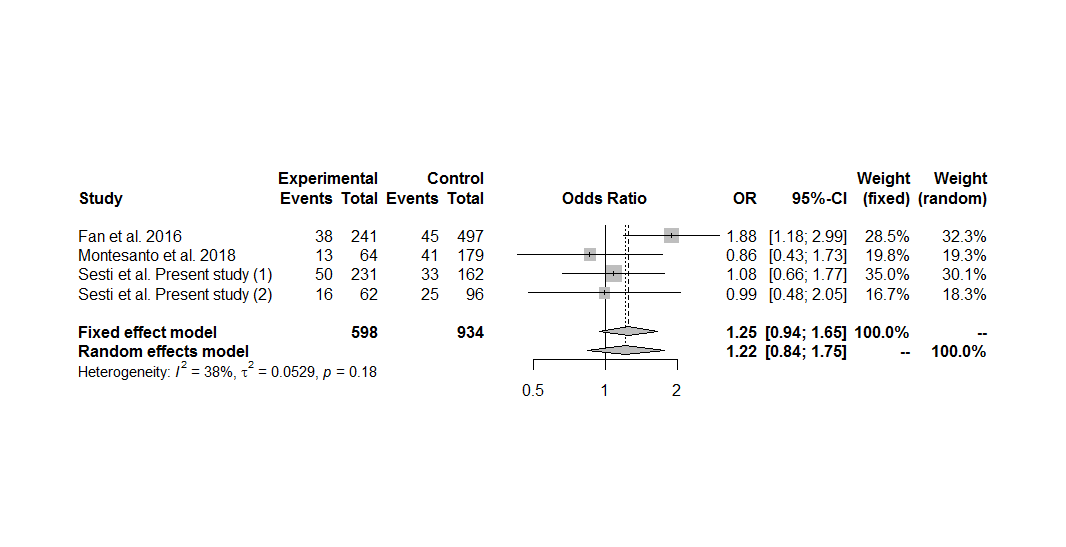
**Figure S114.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in the overall group analysis including only the sets with controls in Hardy-Weinberg equilibrium, under the allele contrast genetic model (C vs. A).

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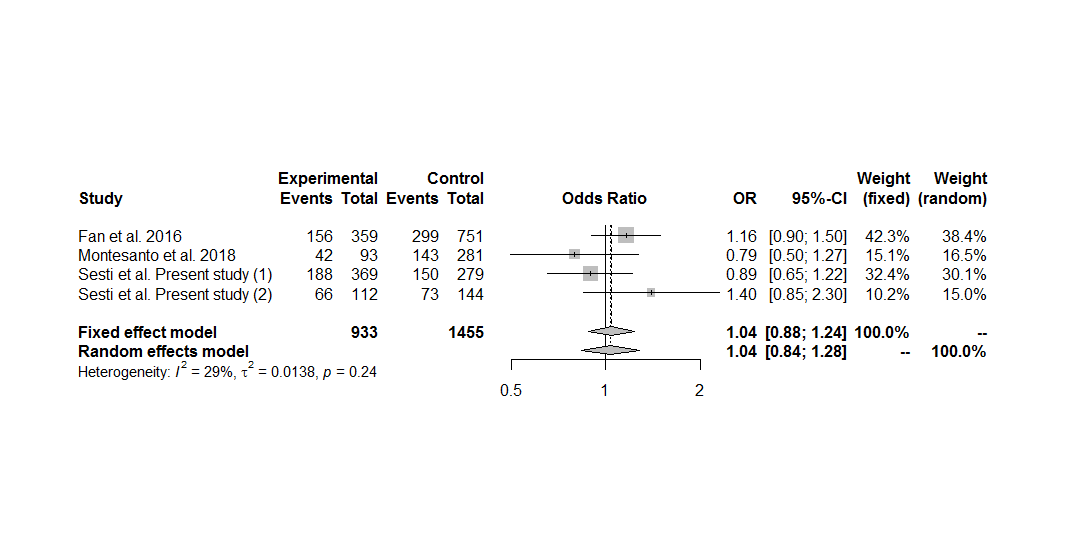
**Figure S115.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in subjects with type 2 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the dominant genetic model for the minor allele (CC+AC vs. AA).

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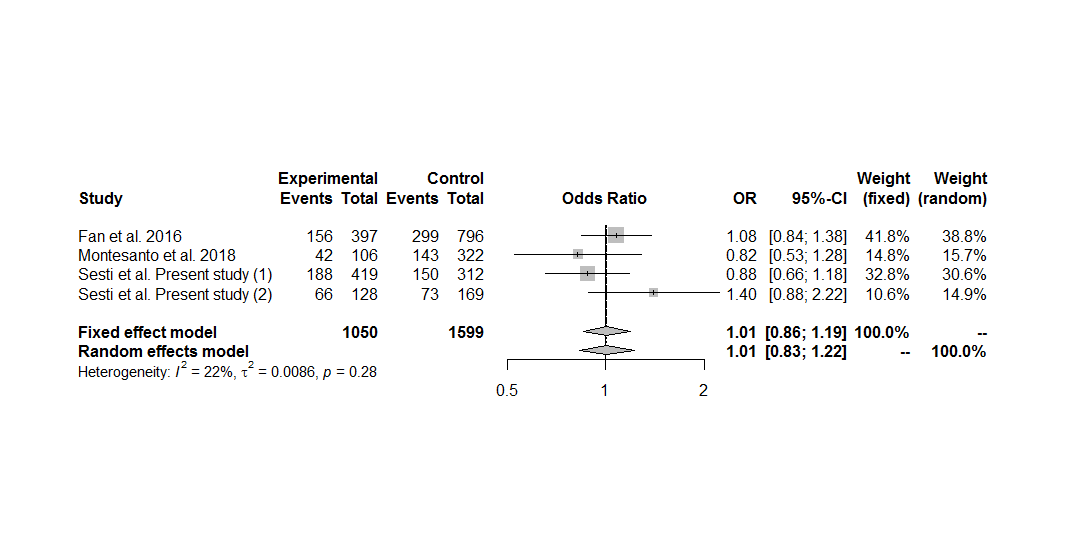
**Figure S116.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in subjects with type 2 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the recessive genetic model for the minor allele (CC vs. AC+AA).

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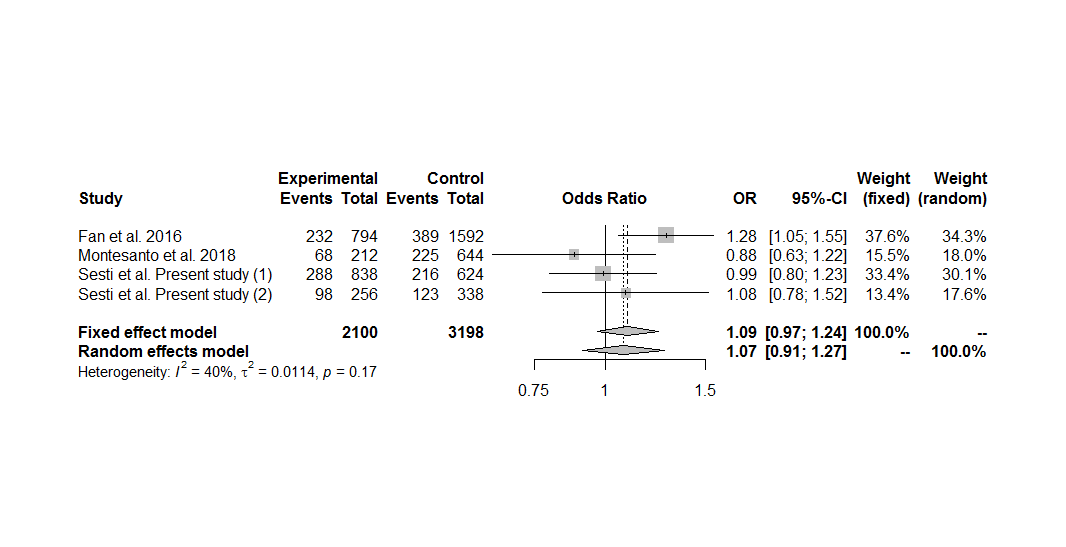
**Figure S117.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in subjects with type 2 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the homozygous additive genetic model for the minor allele (CC vs. AA).

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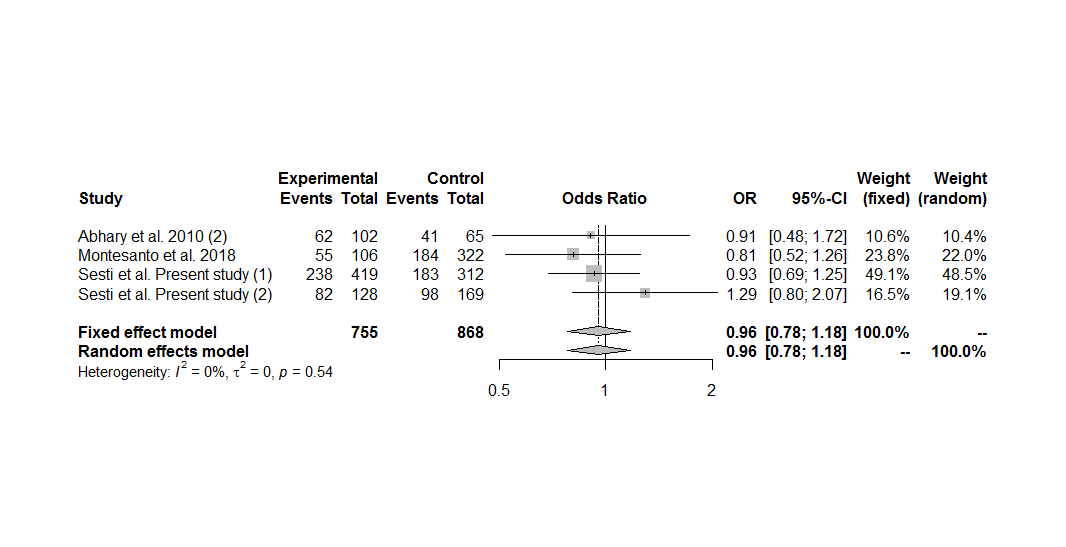
**Figure S118.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in subjects with type 2 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the heterozygous additive genetic model for the minor allele (AC vs. AA).

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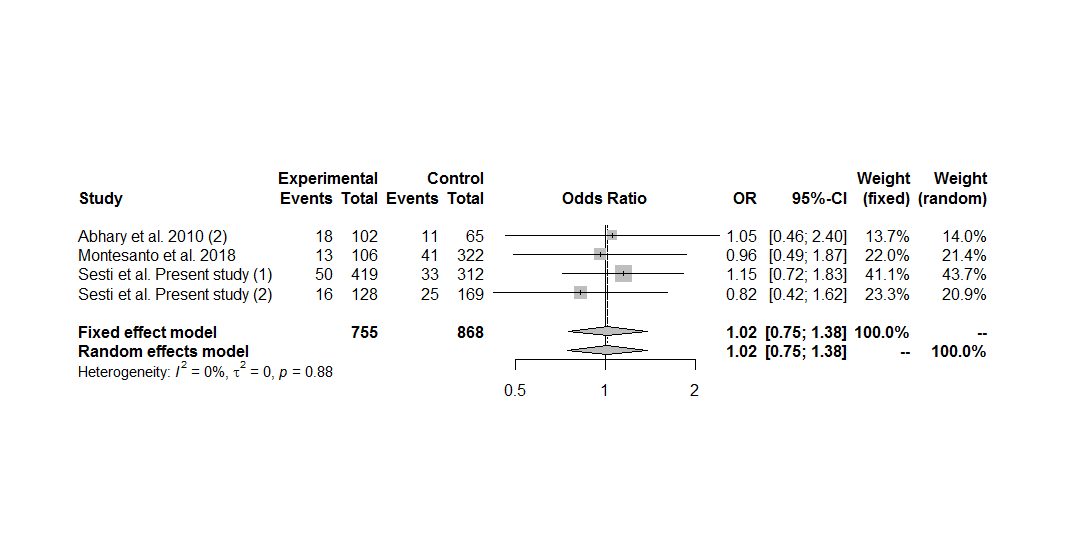
**Figure S119.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in subjects with type 2 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the overdominant genetic model (AC vs. CC+AA).

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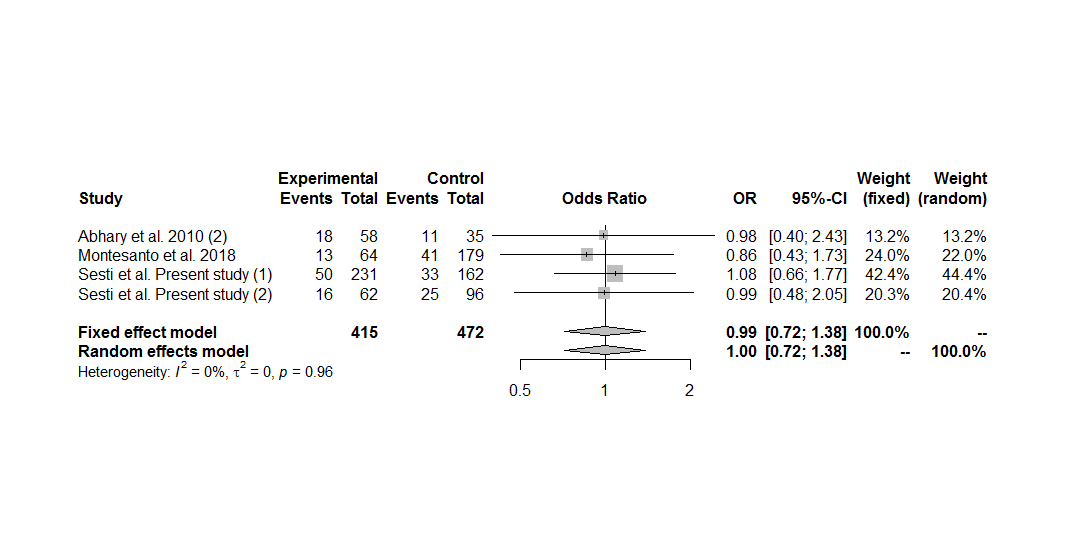
**Figure S120.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in subjects with type 2 diabetes, including only the sets with controls in Hardy-Weinberg equilibrium, under the allele contrast genetic model (C vs. A).

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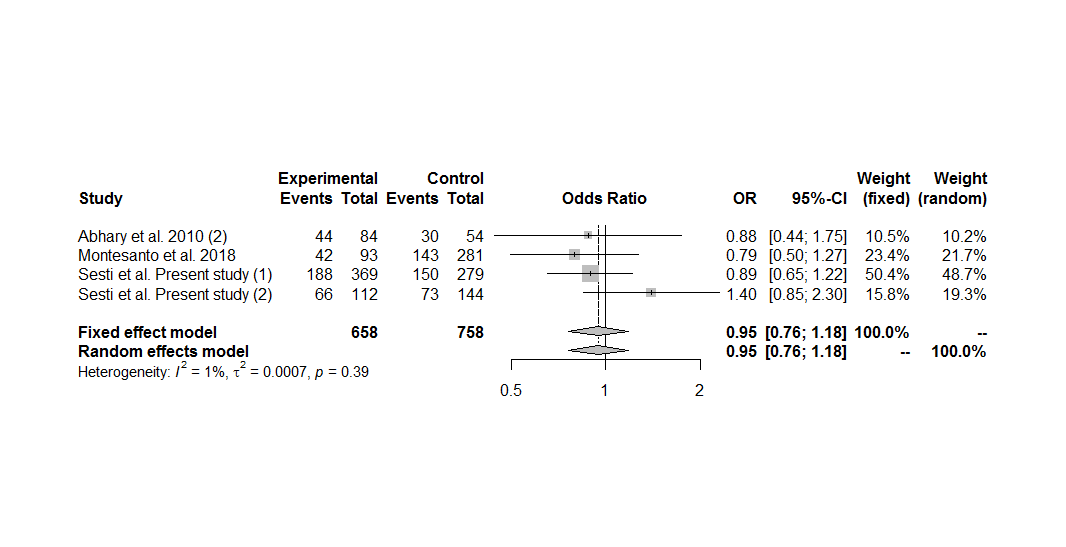
**Figure S121.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in non-Asians, including only the sets with controls in Hardy-Weinberg equilibrium, under the dominant genetic model for the minor allele (CC+AC vs. AA).

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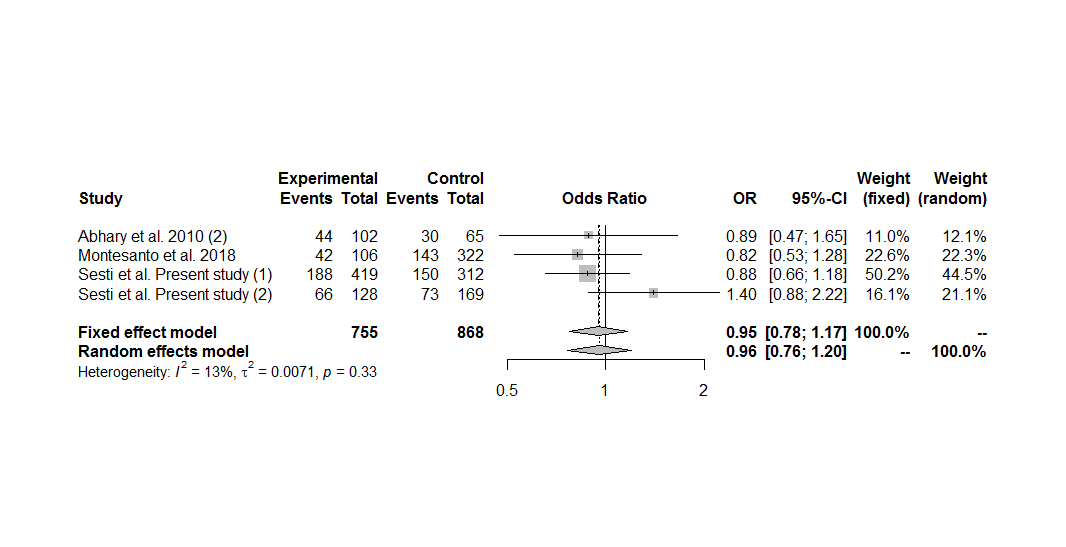
**Figure S122.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in non-Asians, including only the sets with controls in Hardy-Weinberg equilibrium, under the recessive genetic model for the minor allele (CC vs. AC+AA).

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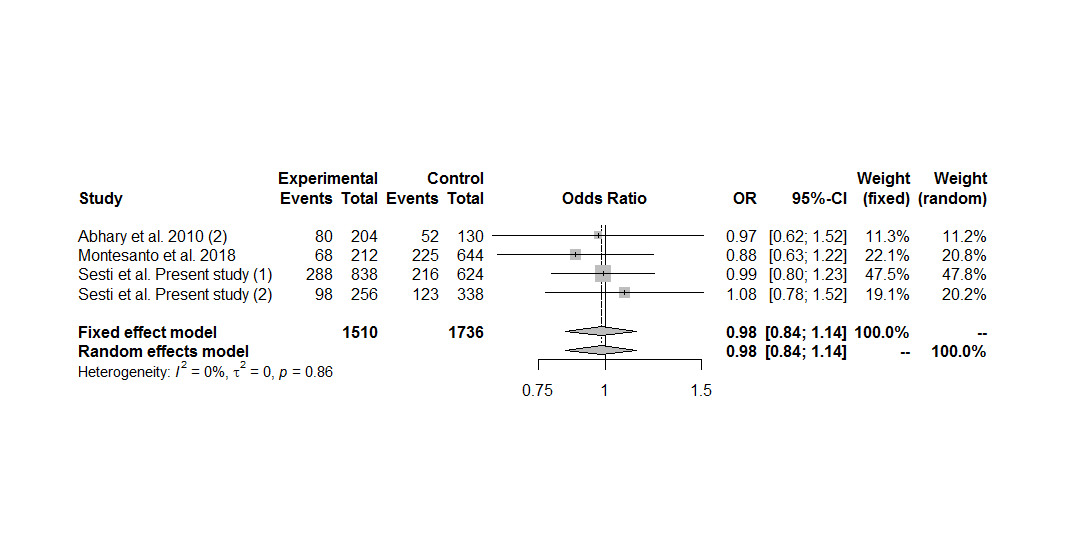
**Figure S123.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in non-Asians, including only the sets with controls in Hardy-Weinberg equilibrium, under the homozygous additive genetic model for the minor allele (CC vs. AA).

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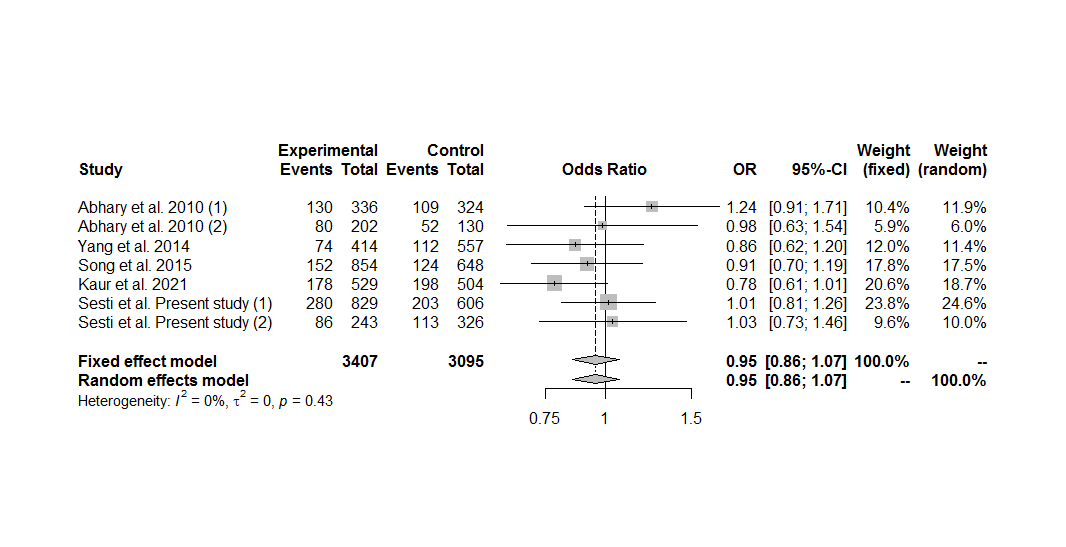
**Figure S124.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in non-Asians, including only the sets with controls in Hardy-Weinberg equilibrium, under the heterozygous additive genetic model for the minor allele (AC vs. AA).

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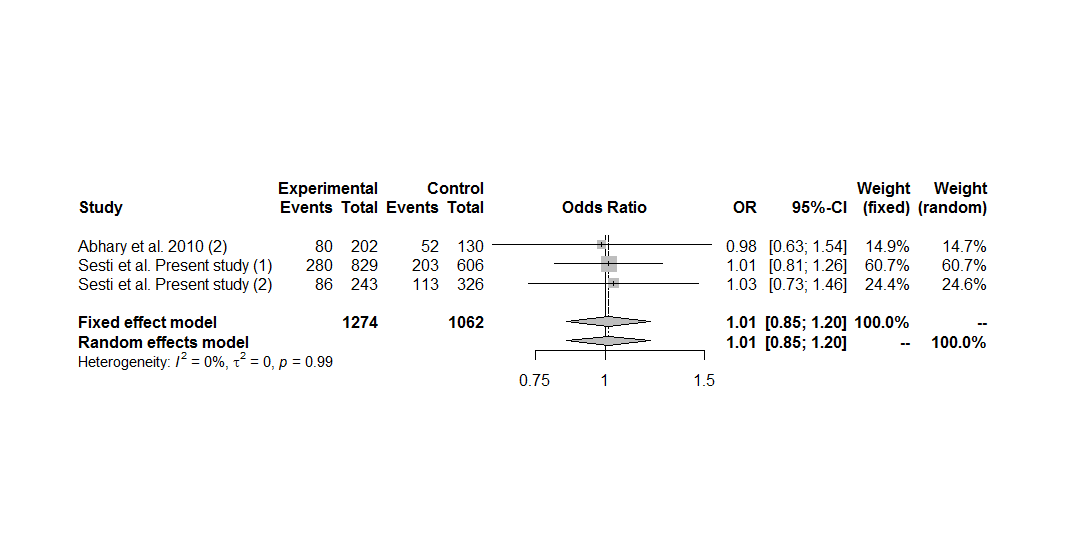
**Figure S125.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in non-Asians, including only the sets with controls in Hardy-Weinberg equilibrium, under the overdominant genetic model (AC vs. CC+AA).

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**Figure S126.** Forest plot of the association between the *EPO* rs551238 polymorphism and diabetic retinopathy in non-Asians, including only the sets with controls in Hardy-Weinberg equilibrium, under the allele contrast genetic model (C vs. A).



**Figure S127.** Forest plot of the association between the *EPO* polymorphisms and diabetic retinopathy in the overall group analysis, by comparing the GCC haplotype with TTA haplotype.



**Figure S128.** Forest plot of the association between the *EPO* polymorphisms and diabetic retinopathy, including only the sets with controls in Hardy-Weinberg equilibrium, by comparing the GCC haplotype with TTA haplotype.