Appendix A: Supplement I and II

AMSTAR 2: a critical appraisal tool for systematic reviews that include randomised or non-randomised studies of healthcare interventions, or both

For Yes:		Optional (recommended)		
	Population Intervention Comparator group Outcome	□ Timeframe for follow-up		Yes No
2.		ntain an explicit statement that the review t of the review and did the report justify an		
For Parti	ial Yes:	For Yes:		
	or state that they had a written or guide that included ALL the g:	As for partial yes, plus the protocol should be registered and should also have specified:		
	0			Yes
\checkmark	review question(s)	\Box a meta-analysis/synthesis plan,	\checkmark	Partial Yes
\checkmark	a search strategy	if appropriate, and		No
	inclusion/exclusion criteria	 a plan for investigating causes of heterogeneity 		
\checkmark	a risk of bias assessment	□ justification for any deviations		
		from the protocol		
3.	Did the review authors explain	their selection of the study designs for incl	usion i	n the review?
	, the review should satisfy ONE of			
	<i>Explanation for</i> including only R	-		Yes
	OR Explanation for including on		\checkmark	No
	OR Explanation for including bo	th RCTs and NRSI		
4.	Did the review authors use a co	omprehensive literature search strategy?		
	ial Yes (all the following):	For Yes, should also have (all the following):		
\checkmark	searched at least 2 databases	searched the reference lists /		Yes
đ	(relevant to research question)	bibliographies of included studies	\checkmark	Partial Yes
\checkmark	provided key word and/or search strategy	 studies searched trial/study registries 		No
\checkmark	justified publication restrictions	\checkmark included/consulted content		
	(e.g. language)	experts in the field		
		\checkmark where relevant, searched for		
		grey literature		
		\checkmark conducted search within 24		
		months of completion of the review		
5.	Did the review authors perform			
	either ONE of the following:			
\checkmark		ntly agreed on selection of eligible studies	\checkmark	Yes
	and achieved consensus on which			No
		ple of eligible studies <u>and</u> achieved good with the remainder selected by one		
	reviewer.			

AMSTAR 2: a critical appraisal tool for systematic reviews that include randomised or non-randomised studies of healthcare interventions, or both

Hor Vee	Did the review authors perform , either ONE of the following:				
For res \Box	at least two reviewers achieved consensus on which data to extract from included studies Ves				
	OR two reviewers extracted data from a sample of eligible studies <u>and</u> achieved good agreement (at least 80 percent), with the remainder extracted by one reviewer.				110
7.	Did the review authors provide	a list of o	excluded studies and justify the ex	clusion	is?
For Part	ial Yes:	For Yes	s, must also have:		
	provided a list of all potentially relevant studies that were read in full-text form but excluded from the review		Justified the exclusion from the review of each potentially relevant study		Yes Partial Yes No
8.	Did the review authors describe	e the incl	uded studies in adequate detail?		
For Part	ial Yes (ALL the following):	For Yes followin	s, should also have ALL the ng:		
\checkmark	described populations		described population in detail		Yes
\checkmark	described interventions		described intervention in		Partial Yes
\checkmark	described comparators		detail (including doses where relevant)		No
\checkmark	described outcomes		described comparator in detail		
\checkmark	described research designs		(including doses where relevant)		
			described study's setting		
		\checkmark	timeframe for follow-up		
9.	Did the review authors use a sa individual studies that were inc		y technique for assessing the risk of the review?	of bias	(RoB) in
RCTs	individual studies that were inc	luded in	the review?	of bias	(RoB) in
RCTs For Part		For Yes		of bias	(RoB) in
RCTs For Part from	individual studies that were inc	For Yes from:	the review?	of bias	
RCTs For Part from	individual studies that were include ial Yes, must have assessed RoB unconcealed allocation, and	For Yes	the review? s, must also have assessed RoB allocation sequence that was	of bias	(RoB) in Yes Partial Yes
RCTs For Part from	individual studies that were inc ial Yes, must have assessed RoB unconcealed allocation, <i>and</i> lack of blinding of patients and	For Yes from:	the review?		Yes
RCTs For Part from	individual studies that were inc ial Yes, must have assessed RoB unconcealed allocation, <i>and</i> lack of blinding of patients and assessors when assessing outcomes (unnecessary for	For Yes from:	the review? s, must also have assessed RoB allocation sequence that was not truly random, <i>and</i> selection of the reported result from among multiple		Yes Partial Yes No Includes only
RCTs For Part from	individual studies that were inc ial Yes, must have assessed RoB unconcealed allocation, <i>and</i> lack of blinding of patients and assessors when assessing outcomes (unnecessary for objective outcomes such as all-	For Yes from:	the review? s, must also have assessed RoB allocation sequence that was not truly random, <i>and</i> selection of the reported result from among multiple measurements or analyses of a		Yes Partial Yes No
RCTs For Part from	individual studies that were inc ial Yes, must have assessed RoB unconcealed allocation, <i>and</i> lack of blinding of patients and assessors when assessing outcomes (unnecessary for	For Yes from:	the review? s, must also have assessed RoB allocation sequence that was not truly random, <i>and</i> selection of the reported result from among multiple		Yes Partial Yes No Includes only
RCTs For Part from	individual studies that were inc ial Yes, must have assessed RoB unconcealed allocation, <i>and</i> lack of blinding of patients and assessors when assessing outcomes (unnecessary for objective outcomes such as all-	For Yes from:	the review? s, must also have assessed RoB allocation sequence that was not truly random, <i>and</i> selection of the reported result from among multiple measurements or analyses of a		Yes Partial Yes No Includes only
RCTs For Part from	individual studies that were inc ial Yes, must have assessed RoB unconcealed allocation, <i>and</i> lack of blinding of patients and assessors when assessing outcomes (unnecessary for objective outcomes such as all- cause mortality)	For Yes from:	the review? s, must also have assessed RoB allocation sequence that was not truly random, <i>and</i> selection of the reported result from among multiple measurements or analyses of a specified outcome		Yes Partial Yes No Includes only
RCTs For Part from	individual studies that were inc ial Yes, must have assessed RoB unconcealed allocation, <i>and</i> lack of blinding of patients and assessors when assessing outcomes (unnecessary for objective outcomes such as all- cause mortality) ial Yes, must have assessed from confounding, <i>and</i>	For Yes	the review? s, must also have assessed RoB allocation sequence that was not truly random, <i>and</i> selection of the reported result from among multiple measurements or analyses of a specified outcome s, must also have assessed RoB: methods used to ascertain exposures and outcomes, <i>and</i>		Yes Partial Yes No Includes only NRSI Yes Partial Yes
RCTs For Part from	individual studies that were inc ial Yes, must have assessed RoB unconcealed allocation, <i>and</i> lack of blinding of patients and assessors when assessing outcomes (unnecessary for objective outcomes such as all- cause mortality) ial Yes, must have assessed	For Yes	the review? s, must also have assessed RoB allocation sequence that was not truly random, <i>and</i> selection of the reported result from among multiple measurements or analyses of a specified outcome s, must also have assessed RoB: methods used to ascertain exposures and outcomes, <i>and</i> selection of the reported result		Yes Partial Yes No Includes only NRSI Yes Partial Yes No
RCTs For Part from	individual studies that were inc ial Yes, must have assessed RoB unconcealed allocation, <i>and</i> lack of blinding of patients and assessors when assessing outcomes (unnecessary for objective outcomes such as all- cause mortality) ial Yes, must have assessed from confounding, <i>and</i>	For Yes	the review? s, must also have assessed RoB allocation sequence that was not truly random, <i>and</i> selection of the reported result from among multiple measurements or analyses of a specified outcome s, must also have assessed RoB: methods used to ascertain exposures and outcomes, <i>and</i>	· · · · · · · · · · · · · · · · · · ·	Yes Partial Yes No Includes only NRSI Yes Partial Yes
RCTs For Part from	individual studies that were inc ial Yes, must have assessed RoB unconcealed allocation, <i>and</i> lack of blinding of patients and assessors when assessing outcomes (unnecessary for objective outcomes such as all- cause mortality) ial Yes, must have assessed from confounding, <i>and</i> from selection bias	For Yes	the review? s, must also have assessed RoB allocation sequence that was not truly random, <i>and</i> selection of the reported result from among multiple measurements or analyses of a specified outcome s, must also have assessed RoB: methods used to ascertain exposures and outcomes, <i>and</i> selection of the reported result from among multiple measurements or analyses of a		Yes Partial Yes No Includes only NRSI Yes Partial Yes No Includes only RCTs
RCTs For Part □ □ NRSI For Part RoB: ✓ ✓	individual studies that were inc ial Yes, must have assessed RoB unconcealed allocation, <i>and</i> lack of blinding of patients and assessors when assessing outcomes (unnecessary for objective outcomes such as all- cause mortality) ial Yes, must have assessed from confounding, <i>and</i> from selection bias	For Yes	the review? s, must also have assessed RoB allocation sequence that was not truly random, <i>and</i> selection of the reported result from among multiple measurements or analyses of a specified outcome s, must also have assessed RoB: methods used to ascertain exposures and outcomes, <i>and</i> selection of the reported result from among multiple measurements or analyses of a specified outcome		Yes Partial Yes No Includes only NRSI Yes Partial Yes No Includes only RCTs

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11. If meta-analysis was performed did the review authors use appropriate combination of results?	method	ls for statistical
RCTs For Yes:		
 The authors justified combining the data in a meta-analysis 		Yes
 AND they used an appropriate weighted technique to combine 		No
study results and adjusted for heterogeneity if present.		No meta-analysis
 AND investigated the causes of any heterogeneity 		conducted
For NRSI		
For Yes:		
The authors justified combining the data in a meta-analysis		Yes
AND they used an appropriate weighted technique to combine		No
study results, adjusting for heterogeneity if present		No meta-analysis
AND they statistically combined effect estimates from NRSI that were adjusted for confounding, rather than combining raw data, or justified combining raw data when adjusted effect estimates were not available	(conducted
AND they reported separate summary estimates for RCTs and NRSI separately when both were included in the review		
12. If meta-analysis was performed, did the review authors assess the poten individual studies on the results of the meta-analysis or other evidence s		
For Yes:		
□ included only low risk of bias RCTs		Yes
□ OR, if the pooled estimate was based on RCTs and/or NRSI at variable		No
RoB, the authors performed analyses to investigate possible impact of	\checkmark	,
RoB on summary estimates of effect.		conducted
13. Did the review authors account for RoB in individual studies when interesults of the review?	rpretin	g/ discussing the
For Yes:		
□ included only low risk of bias RCTs		Yes
OR, if RCTs with moderate or high RoB, or NRSI were included the review provided a discussion of the likely impact of RoB on the results	\checkmark	No
14. Did the review authors provide a satisfactory explanation for, and disc heterogeneity observed in the results of the review?	ussion o	f, any
For Yes:		
 There was no significant heterogeneity in the results OB if betangageneity was present the outbors performed on investigation of 	_	Vac
□ OR if heterogeneity was present the authors performed an investigation of sources of any heterogeneity in the results and discussed the impact of this	□ √	Yes No
on the results of the review	V	INO
15. If they performed quantitative synthesis did the review authors carry or investigation of publication bias (small study bias) and discuss its likely the review?		
For Yes:		
\Box performed graphical or statistical tests for publication bias and discussed		Yes
the likelihood and magnitude of impact of publication bias		No
	\checkmark	No meta-analysis conducted

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16.	Did the review authors report any potential sources of conflict of it they received for conducting the review?	nterest, inc	cluding any funding
For Yes	:		
	The authors reported no competing interests OR		Yes
	The authors described their funding sources and how they managed		No
	potential conflicts of interest		

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Section/topic	#	Checklist item	Reported on page #
TITLE			
Title	1	Identify the report as a systematic review, meta-analysis, or both.	1
ABSTRACT			
Structured summary	2	Provide a structured summary including, as applicable: background; objectives; data sources; study eligibility criteria, participants, and interventions; study appraisal and synthesis methods; results; limitations; conclusions and implications of key findings; systematic review registration number.	2
INTRODUCTION			
Rationale	3	Describe the rationale for the review in the context of what is already known.	3
Objectives	4	Provide an explicit statement of questions being addressed with reference to participants, interventions, comparisons, outcomes, and study design (PICOS).	3
METHODS			
Protocol and registration	5	Indicate if a review protocol exists, if and where it can be accessed (e.g., Web address), and, if available, provide registration information including registration number.	Prospero (ID = CRD42021279400).
Eligibility criteria	6	Specify study characteristics (e.g., PICOS, length of follow-up) and report characteristics (e.g., years considered, language, publication status) used as criteria for eligibility, giving rationale.	4
Information sources	7	Describe all information sources (e.g., databases with dates of coverage, contact with study authors to identify additional studies) in the search and date last searched.	4
Search	8	Present full electronic search strategy for at least one database, including any limits used, such that it could be repeated.	4
Study selection	9	State the process for selecting studies (i.e., screening, eligibility, included in systematic review, and, if applicable, included in the meta-analysis).	4
Data collection process	10	Describe method of data extraction from reports (e.g., piloted forms, independently, in duplicate) and any processes for obtaining and confirming data from investigators.	5
Data items	11	List and define all variables for which data were sought (e.g., PICOS, funding sources) and any assumptions and simplifications made.	5
Risk of bias in individual studies	12	Describe methods used for assessing risk of bias of individual studies (including specification of whether this was done at the study or outcome level), and how this information is to be used in any data synthesis.	5
Summary measures	13	State the principal summary measures (e.g., risk ratio, difference in means).	No Apply
Synthesis of results	14	Describe the methods of handling data and combining results of studies, if done, including measures of consistency (e.g., I^2) for each meta-analysis.	No Apply



Section/topic	#	Checklist item	Reported on page #
Risk of bias across studies	15	Specify any assessment of risk of bias that may affect the cumulative evidence (e.g., publication bias, selective reporting within studies).	No Apply
Additional analyses	16	Describe methods of additional analyses (e.g., sensitivity or subgroup analyses, meta-regression), if done, indicating which were pre-specified.	No Apply
RESULTS			
Study selection	17	Give numbers of studies screened, assessed for eligibility, and included in the review, with reasons for exclusions at each stage, ideally with a flow diagram.	5
Study characteristics	18	For each study, present characteristics for which data were extracted (e.g., study size, PICOS, follow-up period) and provide the citations.	Table 1
Risk of bias within studies	19	Present data on risk of bias of each study and, if available, any outcome level assessment (see item 12).	Table 2
Results of individual studies	20	For all outcomes considered (benefits or harms), present, for each study: (a) simple summary data for each intervention group (b) effect estimates and confidence intervals, ideally with a forest plot.	No Apply
Synthesis of results	21	Present results of each meta-analysis done, including confidence intervals and measures of consistency.	No Apply
Risk of bias across studies	22	Present results of any assessment of risk of bias across studies (see Item 15).	No Apply
Additional analysis	23	Give results of additional analyses, if done (e.g., sensitivity or subgroup analyses, meta-regression [see Item 16]).	No Apply
DISCUSSION			
Summary of evidence	24	Summarize the main findings including the strength of evidence for each main outcome; consider their relevance to key groups (e.g., healthcare providers, users, and policy makers).	10
Limitations	25	Discuss limitations at study and outcome level (e.g., risk of bias), and at review-level (e.g., incomplete retrieval of identified research, reporting bias).	14
Conclusions	26	Provide a general interpretation of the results in the context of other evidence, and implications for future research.	14
FUNDING			
Funding	27	Describe sources of funding for the systematic review and other support (e.g., supply of data); role of funders for the systematic review.	15

From: Moher D, Liberati A, Tetzlaff J, Altman DG, The PRISMA Group (2009). Preferred Reporting Items for Systematic Reviews and Meta-Analyses: The PRISMA Statement. PLoS Med 6(7): e1000097. doi:10.1371/journal.pmed1000097

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