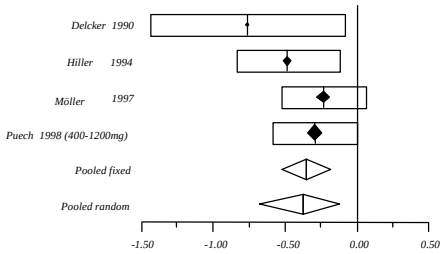
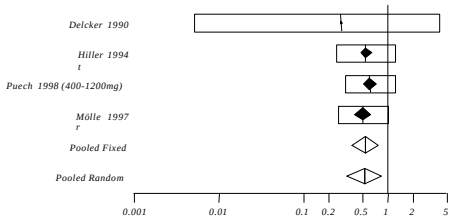
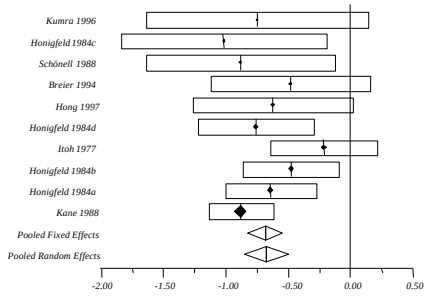
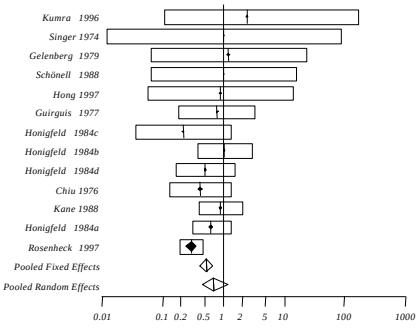
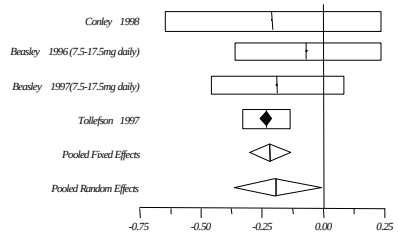
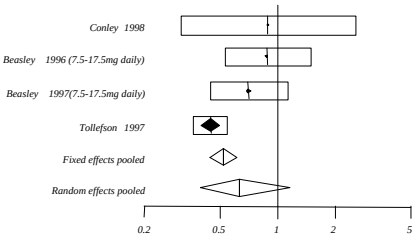
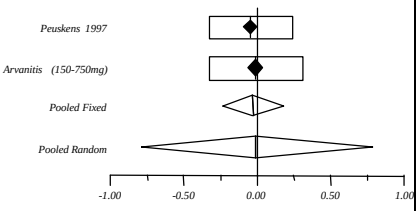
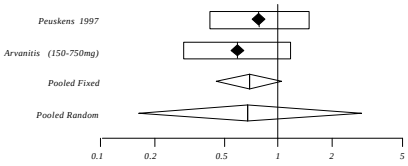
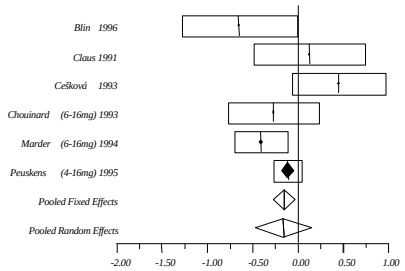
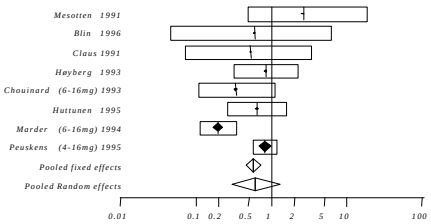
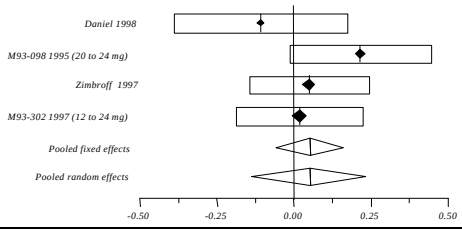
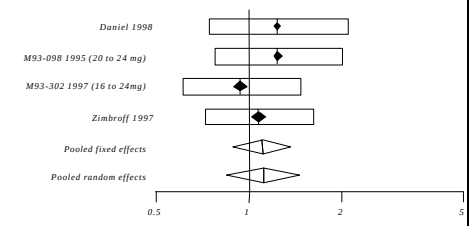
		Favours atypical Favours conventional
Amisulpiride *Efficacy* 4 short term trials (603 participants) (refs w7-w9)	Overall symptom reduction: standardised weighted mean difference (95% CI) -0.35 (-0.52 to –0.18) (Equivalent in terms of Brief Psychiatric Rating Scale score: 5.2 points) Positive symptoms: standardised weighted mean difference -0.25 (-0.42 to –0.07) Negative symptoms: standardised weighted mean difference –0 .28 (-0.45 to –0.10)	
Tolerability 4 short term trials (603 participants) (refs w7-w9)	Drop-out: Fixed effects OR (95% CI):0.55 (0.38 to 0.79) Number needed to treat: 9 (95% CI 5 to 22)	
Clozapine *Efficacy* 12 trials (1253 participants) (refs 20-w6, w11-w18)	(Data from short-term trials pooled) Overall symptom reduction standardised weighted mean difference -0.68 (95% CI -0.82 to –0.55) (Equivalent in terms of Brief Psychiatric Rating Scale score: 8.7 points) Positive symptoms: data not available Negative symptoms: data not available	
Tolerability 20 trials (1724 participants) (refs 20, 27-43)	Drop-out: Fixed effects OR: 0.52 (95% CI 0.40 to 0.67) Number need to treat (short term trials) : 31 (95% CI 14 to 200) Number need to treat (long term trials) : 4 (95% CI 2 to 5)	

Olanzapine *Efficacy* 4 short-term trials (2471 participants) (refs w28-w31)	Overall symptom reduction Fixed effects standardised weighted mean difference –0.22 (95% CI: -0.30 to –0.14) (Equivalent in terms of Brief Psychiatric Rating Scale score: 2.9 points) Positive symptoms Fixed effects standardised weighted mean difference -0.13 (95% CI: -0.21 to –0.05) Negative symptoms Fixed effects standardised weighted mean difference -0.19 (95% CI: -0.27 to –0.11)	
Tolerability 4 short-term trials (2471 participants) (refs w28-w31)	Drop-out: Fixed effects OR 0.52 (95% CI: 0.44 to 0.61) Random OR 0.63 (95% CI: 0.40 to 1.17) Number needed to treat: 7 (95% CI: 6 to 9)	
Quetiapine *Efficacy* 2 short-term trials (449 participants) (refs w32,w33)	Overall symptom reduction: fixed effects standardised weighted mean difference: -0.03 (95% CI -0.23 to 0.18) Positive symptoms: fixed effects standardised weighted mean difference: 0.008 (95% CI -0.302 to 0.317) Negative symptoms: fixed effects standardised weighted mean difference: 0.23 (95% CI -0.07 to 0.54)	
Tolerability 2 short-term trials (449 participants) (refs w32, w33)	Drop-out: Fixed effect OR 0.70 (95% CI: 0.46 to 1.06)	

Risperidone *Efficacy* 6 short-term trials (1611 participants) (refs w34-w39) and two long term trials (840 participants) (refs 17, w2)	Overall symptom reduction: Fixed effects standardised weighted mean difference -0.15 (95% CI -0.27 to –0.04) Random effects standardised weighted mean difference -0.16 (95% CI -0.47 to 0.16) Positive symptoms Fixed effects standardised weighted mean difference -0.12 (95% CI: -0.24 to 0.00) Negative symptom Fixed effects standardised weighted mean difference -0.15 (95% CI: –0.27 to –0.03)	
Tolerability 10 short term trials (2138 participants) (refs w34-w43)	Drop –out : Fixed effects OR 0.59 (95% CI: 0.46 to 0.74) Random effects OR: 0.62 (95% CI: 0.31 to 1.34) Number needed to treat: 11 (95% CI: 7 to 19)	
Sertindole *Efficacy* 4 trials (3 short term; 1 12 month; 1549 participants) (refs w3, w44-w46)	Overall symptom reduction: fixed effects standardised weighted mean difference 0.05 (95% CI: -0.06 to 0.16) Positive symptoms Negative symptoms	
Tolerability 4 trials (1549 participants) (res w3, w44-w46)	Drop-out: Fixed effects OR 1.10 (95% CI 0.89 to 1.36)	

Effect of atypical drugs compared with conventional antipsychotic drugs on efficacy and tolerability in patients with schizophrenia or related disorders (trials with no events not displayed)

(Equivalent Brief Psychiatric Rating Scale point difference and numbers need to treat presented when estimates of 95% confidence interval excludes 1 for both fixed and random effects models)

Number needed to treat indicates the number of patients that would be treated to prevent one patient dropping out.