

## Trial eligibility criteria and patient baseline characteristics

**S4 Table:** Dataset

Data on all eligible trials. ID number corresponds to reference number.(1-50)(51-62).

ID number	1	2	3
Name of Biological Agent	ABA	ABA	ABA
Name of Co-allocation	PLA	PLA	MTX
DMARD History	TT IR	DMARD IR	DMARD IR
csDMARD Handling at Randomisation	CON	DIS	DIS
MTX Handling at Randomisation	CON	DIS	CON
TT Handling at Randomisation	DIS	DIS	NR
Max Disease Duration	NR	ES	NR
Min 66 SJC	10	10	10
Min 68 TJC	12	12	12
Min CRP	10 mg/mL<	NR	10 mg/mL<
Min ESR	NR	28	NR
RF status of all trial patients	Mix	Mix	Mix
Baseline female percentage	78.0	75.0	79.1
Baseline age	53.2	49.9	51.1
Baseline RF percentage	73.2	80.7*	80.7
Baseline anti-CCP percentage	NR	NR	NR
Baseline DAS28	6.5	7.0#	6.4
Baseline CRP	44.0	32.0	31.3
Baseline ESR	NR	32.8	NR
Baseline 66 SJC	22.4	23.7	21.6
Baseline 68 TJC	31.7	30.8	31.4
Baseline RA duration	11.9	3.3	8.6
Baseline MD global (VAS)	68.3	73.2	67.8
Baseline PT global (VAS)	69.4	72.2	62.7
Baseline pain (VAS)	70.5	70.2	64.2
Baseline HAQ	1.8	1.5*	1.7
n, randomised in active arm	262	32	433
n, randomised in control arm	131	32	219
Outcome week	24	12	26
Active arm: n, achieving ACR20	129	17	288
Active arm: total in ACR20 analysis	256	32	424
Active arm: n, achieving DAS28-remission	26	NR	63
Active arm: total in DAS28-remission analysis	256	NR	424
Control arm: n, achieving ACR20	26	10	85
Control arm: total in ACR20 analysis	133	32	214
Control arm: n, achieving DAS28-remission	1	NR	6
Control : total in DAS28-remission analysis	133	NR	214
Risk of Bias§	L/L/L/L/L	L/L/L/L/L	L/L/L/L/L

## Trial eligibility criteria and patient baseline characteristics

10	9	8	7	6	5	4
TOC	ABA	ABA	TOC	TOC	TOC	TOC
MTX	MTX	MTX	MTX	PLA	MTX	MTX
TT IR	DMARD IR	DMARD IR	DMARD IR	DMARD IR	DMARD IR	DMARD IR
DIS	DIS	DIS	DIS	CON	DIS	DIS
CON	CON	CON	CON	CON	CON	CON
DIS	DIS	NAIVE	DIS	NU	DIS	DIS
NR	NR	NR	NR	NR	NR	NR
6	10	10	6	6	6	10
8	12	12	8	8	8	10
10 mg/mL<	10 mg/mL<	10 mg/mL<	10 mg/mL<	10 mg/mL<	10 mg/mL<	10 mg/mL<
28	NR	NR	28	28	28	28
Mix	Mix	Mix	Mix	Mix	Mix	Mix
81.6	70.4	85.0	81.5	82.0	82.5	77.0
53.7	55.2	49.2	50.7	53.3	52.4	50.5
77.1	94.4	86.3	77.0	80.7*	82.5	87.9
NR	NR	NR	NR	NR	NR	NR
6.8	6.5 <sup>a</sup>	6.9	6.8	6.7	6.6	6.5
32.3	30.5	29.3	25.0	26.0	22.5	28.0
51.7	NR	48.4	50.5	48.5	46.4	41.0
18.9	21.6	20.8	20.1	19.4	17.0	16.7
31.1	30.0	31.1	32.3	29.8	28.6	23.8
12.0	9.3	8.1	7.6	6.9	9.2	10.9
66.9	62.7	63.6*	63.9	63.7	62.9	63.6
70.5	59.8	63.3*	64.2	66.0	62.9	65.4
64.4	63.3	60.2*	58.6	58.3	55.5	60.4
1.7	1.0	1.8	1.6	1.5	1.5	1.5*
175	115	156	205	805	399	50
160	119	110	204	415	392	49
24	26	28	24	24	24	16
85	69	104	120	488	224	36
170	115	156	205	803	398	49
40	NR	18	47	241	105	17
132	NR	156	171	803	315	49
16	42	46	54	101	106	20
158	119	110	204	413	393	49
1	NR	3	2	24	8	4
64	NR	110	121	413	212	49
L/L/L/L/L	L/L/L/L/L	L/L/L/L/L	L/L/L/L/L	L/L/L/L/L	L/L/L/L/U/L	L/L/L/L/L

## Trial eligibility criteria and patient baseline characteristics

17	16	15	14	13	12	11
ETA	RIT	RIT	RIT	RIT	INF	INF
MTX	MTX	MTX	MTX	MTX	MTX	MTX
DMARD naïve	DMARD IR	DMARD IR	DMARD IR	TT IR	DMARD naïve	DMARD IR
NU	DIS	NU	DIS	DIS	NAIVE	NU
NU	CON	CON	CON	CON	NAIVE	CON
NAIVE	DIS	NR	NAIVE	DIS	NAIVE	NAIVE
ES	NR	NR	NR	NR	EA	NR
10	8	8	8	8	6*	6
12	8	8	8	8	8*	6
20 mg/mL<	15 mg/mL<	15 mg/mL<	4.5-7 mg/mL<	15 mg/mL<	20 mg/mL<	20 mg/mL<
28	28	28	28	28	NR	28
Mix	Pos	Pos	Mix	Mix	Mix	Mix
76.5	80.0	77.5	83.4	81.0	81*	80.5
52.8	51.1	54.0	51.7	52.4	52.2	53.5
73.5	100.0	100.0	74.3	79.0	65.0	80.5
NR	NR	NR	NR	NR	NR	NR
5.5	6.8	6.9	6.5	6.9	6.6 <sup>†</sup>	6.4 <sup>†</sup>
27.8	31.5	30.5	24*	37.4	42.0	30.5
NR	40.5	52.5	NR	48.2	NR	NR
22.4	21.5	21.0	20.2	23.2	19.2*	19.0
33.7	33.5	32.0	29.5	33.5	28.3*	28.0
6.8	10.1	11.5	7.0	11.9	8.7*	8.7
63.6*	63.6*	63.6*	63.6*	63.6*	63.6*	63.0
63.3*	63.3*	63.3*	63.3*	63.3*	63.3*	64.0
60.2*	60.2*	60.2*	60.2*	60.2*	60.2*	66.5
1.5*	1.5*	1.5*	1.5*	1.9	1.3	1.8
229	128	40	172	311	10	86
229	128	40	172	209	10	88
24	24	24	24	24	14	30
187	66	29	86	152	6	42
231	122	40	170	298	10	83
62	NR	NR	16	45	NR	NR
205	NR	NR	170	298	NR	NR
166	34	15	40	36	2	17
228	122	40	172	201	10	84
26	NR	NR	4	4	NR	NR
193	NR	NR	172	201	NR	NR
L/L/L/L/L	L/L/L/L/L	L/L/L/L/L	L/L/L/L/L	L/L/L/L/L	U/L/L/H/L	L/L/L/L/L

## Trial eligibility criteria and patient baseline characteristics

24	23	22	21	20	19	18
GOL	ETA	ADA	ADA	ADA	ADA	ETA
MTX	PLA	PLA	MTX	MTX	PLA	MTX
DMARD naive	DMARD IR	DMARD IR	DMARD IR	DMARD IR	DMARD IR	DMARD IR
NU	DIS	DIS	DIS	DIS	CON	DIS
NAIVE	DIS	DIS	CON	CON	CON	CON
NAIVE	NR	NU	NAIVE	NAIVE	NR	NR
NR	NR	NR	NR	NR	NR	NR
4	10	10	6	6	6	6
4	12	12	9	9	9	6
15 mg/mL<	20 mg/mL<	20 mg/mL<	NR	10 mg/mL<	NR	NR
28	28	28	NR	NR	NR	NR
Mix	Mix	Mix	Mix	Mix	Mix	Mix
84.3	75.0	78.5	78.3	74.7	79.4	84.3
49.7	52.0	53.1	56.6	51.2	55.4	49.7
80.7*	79.0	80.7	80.7*	85.5	62.9	86.0
NR	NR	NR	NR	NR	NR	NR
6.2	7.2#	7.1	6.3 <sup>‡</sup>	6.1 <sup>‡</sup>	6.1 <sup>‡</sup>	6.6#
25.0	44.0	54.8	25.8	18.0	15.0	23.3
NR	37.0	55.9	NR	NR	NR	28.7
15.4	25.0	20.2	17.1	19.2	21.1	19.0
28.2	34.0	34.6	28.3	27.7	27.5	28.0
3.2	11.5	11.1	11.7	11.0	10.4	13.0
61.0	69.0	67.7	58.8	61.7	59.8	61.7
6.0	69.5	72.2	57.4	53.5	53.4	60.0
6.3	66.0	70.1	55.0	56.1	55.4	52.0
1.5	1.7	1.9	1.6	1.5	1.4	1.5
159	81	113	67	207	318	59
160	83	110	62	200	318	30
24	13	26	24	24	24	24
98	48	52	45	131	168	42
159	78	113	67	207	318	59
40	NR	NR	NR	NR	NR	NR
159	NR	NR	NR	NR	NR	NR
79	18	21	9	59	111	8
160	80	110	62	200	318	30
18	NR	NR	NR	NR	NR	NR
160	NR	NR	NR	NR	NR	NR
L/L/L/L/L/L	L/L/L/L/L/L	L/L/L/L/L/L	L/L/L/L/L/L	L/L/L/L/L/L	L/L/L/L/L/L	L/L/L/L/L/L

## Trial eligibility criteria and patient baseline characteristics

31	30	29	28	27	26	25
TOC	ADA	ETA	CER	ADA	GOL	GOL
PLA	PLA	SSZ	PLA	PLA	PLA	MTX
DMARD IR	DMARD IR	DMARD IR	DMARD IR	DMARD IR	TT IR	DMARD IR
DIS	DIS	NU	DIS	DIS	CON	NU
DIS	DIS	NU	DIS	DIS	CON	CON
NR	NU	NAIVE	NAIVE	NAIVE	NU	NAIVE
NR	NR	ES	NR	NR	NR	NR
6	10	6	9	10	4	4
6	12	10	9	12	4	4
10 mg/mL<	20 mg/mL<	20 mg/mL<	10 mg/mL<	20 mg/mL<	NR	15 mg/mL<
30	28	28	28	NR	NR	28
Mix	Mix	Mix	Mix	Mix	Mix	Mix
78.6	81.0	80.8	83.7	78.1	79.5	81.6
54.5	51.4	51.5	48.7	55.2	54.5	52.0
80.7	87.5	80.7*	100.0	87.6	72.5	83.3
NR	NR	NR	NR	NR	72.0	80.7
6.6#	7.1	6.9#	6.3	6.6#	6.3	6.1
50.0	59.5	11.6	11.5	61.8	9.0	8.8
68.0	52.7	38.4	33.2	NR	NR	NR
13.8	19.5	19.2	20.6	19.2	14.0	12.4
18.0	31.0	31.3	29.0	24.1	26.5	23.0
8.3	9.7	6.2	9.5	9.2	9.7	5.7
63.6*	65.1	63.6*	72.0	75.2	63.0	58.6
63.3*	74.6	63.3*	66.0	68.0	66.5	55.8
60.2*	72.9	58.7	56.5	65.5	69.5	58.6
1.5*	1.7	1.6	1.5	1.5	1.7	1.3
55	70	104	111	91	153	89
54	70	52	109	87	155	133
12	12	24	24	24	14	14
43	40	74	50	40	54	49
55	70	100	111	91	153	89
NR	NR	NR	NR	NR	13	14
NR	NR	NR	NR	NR	153	89
6	7	14	10	12	28	44
53	70	50	109	87	155	133
NR	NR	NR	NR	NR	1	2
NR	NR	NR	NR	NR	155	133
L/L/L/L/L	L/L/L/L/L	L/L/L/L/L	L/L/L/L/L	L/L/L/L/L	L/L/L/L/L	L/L/L/L/L

## Trial eligibility criteria and patient baseline characteristics

38	CER	CER	37	36	35	34	33	32
MTX	MTX	INF	MTX	MTX	ETA	GOL	RIT	TOC
DMARD IR	DMARD IR	DMARD IR	DMARD IR	DMARD IR	DMARD IR	DMARD IR	DMARD naive	DMARD IR
NU	DIS	NU	DIS	DIS	NU	NU	NU	CON
CON	CON	CON	CON	CON	CON	CON	NAIVE	CON
NU	NU	NR	DIS	DIS	NAIVE	NAIVE	NR	DIS
ES	ES	NR	NR	NR	NR	NR	ES	NR
9	9	6	10	10	6	6	8	6
9	9	6	10	10	6	6	8	6
15 mg/mL<	15 mg/mL<	20 mg/mL<	NR	NR	15 mg/mL<	15 mg/mL<	10 mg/mL<	10 mg/mL<
30	30	28	NR	NR	28	28	NR	28
Mix	Mix	Mix	Mix	Mix	Mix	Mix	Mix	Mix
83.9	82.9	78.1	86.5	86.5	80.0	80.0	81.0	81.0
52.0	51.7	55.2	49.2	49.2	54.5	54.5	48.0	55.4
77.7	80.7	80.7*	80.7*	80.7*	80.7*	80.7*	86.0	80.7*
NR	NR	NR	NR	NR	NR	NR	NR	NR
6.8	6.9	6.0 $\alpha$	6.1 $\alpha$	6.1 $\alpha$	6.4	6.4	7.1	6.5
14.0	16.0	41.5	15.2	15.2	20.5	20.5	31.0	18.2
42.7	44.0	NR	NR	NR	NR	NR	NR	46.4
21.0	21.5	14.3	23.0	23.0	13.5	13.5	20.8	19.8
30.2	30.5	18.4	21.2	21.2	25.0	25.0	32.9	29.9
5.9	6.1	8.3	8.7*	8.7*	6.9	6.9	0.4	8.6
64.8	63.6*	63.6*	77.5	77.5	60.5	60.5	63.6*	62.4
61.5	63.3*	63.3*	68.0	68.0	67.5	67.5	63.3*	62.1
61.2	60.2*	60.2*	56.4	56.4	70.0	70.0	60.2*	56.3
1.6	1.5*	1.5*	1.1	1.1	1.5	1.5	1.8	1.5*
246	393	50	29	29	35	35	251	412
127	199	50	29	29	35	35	252	207
24	24	14	12	12	16	16	24	24
141	228	30	26	26	21	21	183	183
246	388	49	29	29	35	35	250	409
23	NR	NR	NR	NR	2	2	NR	157
246	NR	NR	NR	NR	35	35	NR	409
11	27	11	10	10	13	13	147	52
127	198	47	29	29	35	35	250	205
1	NR	NR	NR	NR	0	0	NR	3
127	NR	NR	NR	NR	35	35	NR	205
L/L/L/H/L	L/L/L/L/L	L/L/L/L/L/L	U/L/U/U/L/L	U/L/U/U/L/L	L/L/L/L/U/L	L/L/L/L/U/L	L/L/L/L/L/L	L/L/L/L/L

## Trial eligibility criteria and patient baseline characteristics

45		44	43	42	41	40	39
CER	TOF	TOF	GOL	ABA	ADA	INF	
MTX	PLA	PLA	PLA	MTX	MTX	MTX	MTX
DMARD IR	DMARD IR	DMARD IR	DMARD IR	DMARD naive	DMARD IR	DMARD IR	DMARD IR
DIS	DIS	DIS	DIS	NU	DIS	CON	CON
CON	DIS	DIS	DIS	NAIVE	CON	CON	CON
NAIVE	NU	DIS	NR	NR	NAIVE	NAIVE	NAIVE
NR	NR	NR	NR	EA	NR	NR	NR
9	6	6	6	10	6	6	6
9	6	6	6	12	9	6	6
10 mg/mL<	4.5-7 mg/mL<	4.5-7 mg/mL<	20 mg/mL<	4.5-7 mg/mL<	NR	NR	NR
28	28	28	28	NR	NR	NR	NR
Mix	Mix	Mix	Mix	Pos	Mix	Mix	Mix
69.2	88.0	85.5	81.1	77.6	78.7	81.6	81.6
54.3	53.5	51.4	52.6	49.9	53.0	52.5	52.5
76.1	75.9	80.7*	80.7*	96.4	87.2	81.7	81.7
NR	NR	NR	NR	89.0	NR	NR	NR
6.2	6.6	6.7	5.9	6.3	6.4	5.7 <sup>a</sup>	5.7 <sup>a</sup>
12.5	24.0	21.2	23.6	33.5	21.0	14.0	14.0
25.1	46.8	52.4	NR	NR	NR	NR	NR
22.5	17.1	16.6	12.9	22.4	22.5	15.0	15.0
30.0	26.5	29.2	15.2	31.1	33.7	22.0	22.0
9.6	9.6	7.9	8.7	0.5	6.7	8.1	8.1
71.0	64.3	63.6*	58.6	63.6*	81.4	62.5	62.5
66.0	64.2	63.3*	54.3	63.3*	72.0	56.5	56.5
58.7	62.1	60.2*	55.4	60.2*	64.8	60.0	60.0
1.4	1.5	1.5	1.0	1.7	1.7	1.5	1.5
126	50	244	102	256	35	360	360
121	59	122	110	255	12	363	363
24	12	13	14	12	12	22	22
56	29	144	51	164	19	199	199
124	49	241	101	256	35	343	343
9	6	14	13	41	NR	106	106
97	49	229	97	256	NR	343	343
27	13	32	20	134	4	87	87
119	59	120	105	253	12	341	341
2	2	5	2	20	NR	48	48
65	59	104	94	253	NR	341	341
L/L/L/L/L	L/L/L/L/L	L/L/L/L/L	L/L/L/L/L	L/L/L/L/L	U/L/L/L/L	L/L/L/H/L	L/L/L/H/L

## Trial eligibility criteria and patient baseline characteristics

52	51	50	49	48	47	46
GOL	TOF	GOL	ABA	ADA	CER	CER
MTX	MTX	MTX	MTX	MTX	MTX	PLA
DMARD IR	DMARD IR	DMARD IR	DMARD IR	DMARD naive	DMARD IR	DMARD IR
NU	NU	NR	DIS	NU	NU	CON
CON	CON	CON	CON	NAIVE	CON	NU
NAIVE	NU	NU	DIS	NAIVE	NU	NU
NR	NR	NR	NR	EA	ES	ES
6	6	4	10	6	9	6
6	6	4	12	8	9	6
10 mg/mL<	4.5-7 mg/mL<	15 mg/mL<	10 mg/mL<	15 mg/mL<	15 mg/mL<	20 mg/mL<
NR	28	28	NR	28	30	28
Pos	Mix	Mix	Mix	Mix	Mix	Mix
81.6	82.0	83.9	79.5	74.0	84.9	74.4
52.7	53.3	50.8	53.4	50.5	51.2	55.7
80.7*	66.6	80.7*	80.7*	88.0	86.2	87.4
NR	70.7	NR	NR	84.0	NR	NR
6.0	6.6	5.6	6.0	6.0	6.3	6.2
19.0	15.3	20.5	33.9	28.5	15.0	16.5
NR	48.4	NR	NR	NR	46.9	50.0
12.0	16.7	11.6	17.1	12.5	17.0	14.6
23.3	28.1	13.2	21.7	16.0	19.3	16.9
4.7	7.7	8.7	7.3	4.3	5.7	5.6
63.6*	63.6*	56.2	63.6*	62.5	63.3	60.9
63.3*	63.3*	48.4	65.4	63.5	55.3	56.8
60.2*	60.2*	50.9	60.2*	65.0	58.2	56.8
1.6	1.5	1.0	1.4	1.6	1.1	1.1
395	204	89	62	515	82	116
197	108	90	66	517	77	114
14	26	14	24	26	12	12
231	101	62	47	361	63	78
395	196	86	61	515	82	116
NR	11	27	15	175	13	19
NR	177	86	61	515	82	116
49	30	24	14	295	22	17
197	106	88	66	517	77	114
NR	1	3	1	88	0	1
NR	92	88	66	517	77	114
L/L/L/L/L	L/L/L/L/L	L/L/L/L/L	L/L/L/L/L	L/L/L/L/L	L/L/L/L/L	L/L/L/L/L



## Trial eligibility criteria and patient baseline characteristics

59	TOF	TOF	TOF	TOF	INF	ADA	TOF	53
MTX	MTX	MTX	MTX	MTX	DMARD naive	MTX	MTX	CER
DMARD IR	TT IR	DMARD IR	DMARD IR	DMARD IR	DMARD IR	DMARD IR	DMARD IR	PLA
DIS	DIS	NU	NU	NU	DIS	DIS	DIS	DMARD IR
CON	CON	CON	CON	NAIVE	CON	CON	CON	CON
DIS	DIS	NU	NU	NR	NR	NR	DIS	NU
NR	NR	NR	NR	EA	NR	NR	NR	NR
6	6	6	6	6	6	6	6	6
6	6	6	6	8	9	9	6	8
4.5-7 mg/mL<	4.5-7 mg/mL<	4.5-7 mg/mL<	4.5-7 mg/mL<	NR	NR	NR	4.5-7 mg/mL<	10 mg/mL<
28	28	28	28	NR	NR	NR	28	28
Mix	Mix	Mix	Mix	Mix	Mix	Mix	Mix	Mix
80.7	82.7	84.4	84.4	68.9	90.6	90.6	85.4	78.0
52.5	54.9	53.4	53.4	51.8	49.1	49.1	50.3	55.1
82.9	63.1	76.0	76.0	65.6	79.7	79.7	85.5	74.4
NR	72.1	85.0	85.0	58.0	NR	NR	NR	66.3
6.1	6.5	6.3	6.3	5.3	5.0 <sup>a</sup>	5.0 <sup>a</sup>	6.0	6.4
18.4	18.0	14.9	14.9	36.9	2.4	2.4	19.5	9.2
NR	47.3	50.4	50.4	NR	NR	NR	NR	37.6
14.9	16.7	14.1	14.1	11.4	12.5	12.5	14.7	17.0
21.5	28.3	23.7	23.7	13.8	19.7	19.7	17.1	23.1
9.1	12.2	9.0	9.0	0.4	6.8	6.8	8.4	5.6
53.3	64.9	58.2	58.2	63.6*	63.8	63.8	59.4	63.6*
57.4	63.3	56.8	56.8	63.3*	61.4	61.4	56.1	63.3*
53.1	63.2	57.3	57.3	60.2*	58.5	58.5	53.3	60.2*
1.3	1.6	1.4	1.4	1.4	1.4	1.4	1.3	1.5
71	133	321	321	15	65	65	28	851
69	132	160	160	14	63	63	28	212
12	13	26	26	22	24	24	12	12
40	55	159	159	13	40	40	26	435
71	132	309	309	15	65	65	27	851
10	8	19	19	NR	NR	NR	NR	136
60	119	265	265	NR	NR	NR	NR	851
25	32	39	39	4	23	23	4	55
69	131	154	154	14	63	63	28	212
4	2	2	2	NR	NR	NR	NR	12
60	120	129	129	NR	NR	NR	NR	212
L/L/L/L/L	L/L/L/L/L	L/L/L/L/H/L	L/L/L/L/H/L	L/L/H/H/H/L	L/L/L/L/L	L/L/L/L/L	L/L/L/L/L	L/L/L/L/L

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62	INF	MTX	DMARD IR	NU	CON	NR	NR	3	8	NR	28	Mix	85.0	48.4	80.7*	NR	6.4 <sup>‡</sup>	24*	NR	19.2*	28.3*	7.5	63.6*	63.3*	60.2*	1.5*	87	86	18	66	87	NR	NR	42	86	NR	NR	NR	L/L/L/L/U/L
60	ADA	MTX	DMARD naive	DIS	NAIVE	NAIVE	EA	8	10	15 mg/mL<	28	Mix	81.4	54.0	84.4	84.1	6.6	30.0	60.8	16.9	13.2	0.3	66.0	65.2	60.2*	1.2	171	163	26	129	171	53	171	92	163	24	163	L/L/L/L/L/L	
61	TOF	PLA	DMARD IR	CON	CON	NU	NR	4	4	4.5-7 mg/mL<	28	Mix	81.7	52.5	73.5	69.2	6.3	17.4	50.4	14.4	24.8	8.7	59.9	58.7	57.1	1.4	318	159	26	164	315	24	284	49	159	4	153	L/L/L/L/L/L	

ABA, abatacept; ACR20, American College of Rheumatology 20% improvement criteria; ADA, adalimumab; Anti-CCP, anti-cyclic citrullinated peptide; BL, baseline; CER, certolizumab; CON, continued; DAS28, disease activity score in 28 joints; DIS, Discontinued; csDMARD, conventional synthetic disease modifying antirheumatic drugs; ETA, etanercept; GOL, golimumab; HAQ, health assessment questionnaire; INF, infliximab; IR, inadequate responders; MD global, physicians global assessment (0-100); Min, minimum; MTX, methotrexate; NR, Not reported; NU, Not using; OR, odds ratio; PLA, placebo; PT global, patient global assessment; RIT, rituximab; RF, rheumatoid factor; SJC, swollen joint count; TJC, tender joint count; TOC, tocilizumab; TOF, tofacitinib; TT, Targeted therapy; VAS, visual analogue scale (0-100).

\*Median values for the dataset imputed

# Calculated from DAS28-ESR(4) formula:  $0.56 \cdot \sqrt{TJC28} + 0.28 \cdot \sqrt{SJC28} + 0.70 \cdot \ln(ESR) + 0.014 \cdot GH$

‡ Calculated from DAS28-CRP(4) formula:  $0.56 \cdot \sqrt{TJC28} + 0.28 \cdot \sqrt{SJC28} + 0.36 \cdot \ln(CRP+1) + 0.014 \cdot GH + 0.96$

§Risk of bias rated as L, low; U, unclear; H, high per domain: Allocation concealment/ Blinding of participants and personnel/ Blinding of outcome assessment/ Incomplete outcome data/ Selective reporting

Reference List

## Trial eligibility criteria and patient baseline characteristics

- (1) Genovese MC, Becker JC, Schiff M, Luggen M, Sherrer Y, Kremer J, et al. Abatacept for rheumatoid arthritis refractory to tumor necrosis factor alpha inhibition. *N Engl J Med* 2005 Sep 15;353(11):1114-23.
- (2) Moreland LW, Alten R, Van den Bosch F, Appelboom T, Leon M, Emery P, et al. Costimulatory blockade in patients with rheumatoid arthritis: a pilot, dose-finding, double-blind, placebo-controlled clinical trial evaluating CTLA-4Ig and LEA29Y eighty-five days after the first infusion. *Arthritis Rheum* 2002 Jun;46(6):1470-9.
- (3) Kremer JM, Genant HK, Moreland LW, Russell AS, Emery P, Abud-Mendoza C, et al. Effects of abatacept in patients with methotrexate-resistant active rheumatoid arthritis: a randomized trial. *Ann Intern Med* 2006 Jun 20;144(12):865-76.
- (4) Maini RN, Taylor PC, Szechinski J, Pavelka K, Broll J, Balint G, et al. Double-blind randomized controlled clinical trial of the interleukin-6 receptor antagonist, tocilizumab, in European patients with rheumatoid arthritis who had an incomplete response to methotrexate. *Arthritis Rheum* 2006 Sep;54(9):2817-29.
- (5) Kremer JM, Blanco R, Brzosko M, Burgos-Vargas R, Halland AM, Vernon E, et al. Tocilizumab inhibits structural joint damage in rheumatoid arthritis patients with inadequate responses to methotrexate: results from the double-blind treatment phase of a randomized placebo-controlled trial of tocilizumab safety and prevention of structural joint damage at one year. *Arthritis Rheum* 2011 Mar;63(3):609-21.
- (6) Genovese MC, McKay JD, Nasonov EL, Mysler EF, da Silva NA, Alecock E, et al. Interleukin-6 receptor inhibition with tocilizumab reduces disease activity in rheumatoid arthritis with inadequate response to disease-modifying antirheumatic drugs: the tocilizumab in combination with traditional disease-modifying antirheumatic drug therapy study. *Arthritis Rheum* 2008 Oct;58(10):2968-80.
- (7) Smolen JS, Beaulieu A, Rubbert-Roth A, Ramos-Remus C, Rovensky J, Alecock E, et al. Effect of interleukin-6 receptor inhibition with tocilizumab in patients with rheumatoid arthritis (OPTION study): a double-blind, placebo-controlled, randomised trial. *Lancet* 2008 Mar 22;371(9617):987-97.
- (8) Schiff M, Keiserman M, Coddling C, Songcharoen S, Berman A, Nayiager S, et al. Efficacy and safety of abatacept or infliximab vs placebo in ATTEST: a phase III, multi-centre, randomised, double-blind, placebo-controlled study in patients with rheumatoid arthritis and an inadequate response to methotrexate. *Ann Rheum Dis* 2008 Aug;67(8):1096-103.
- (9) Kremer JM, Westhovens R, Leon M, Di GE, Alten R, Steinfeld S, et al. Treatment of rheumatoid arthritis by selective inhibition of T-cell activation with fusion protein CTLA4Ig. *N Engl J Med* 2003 Nov 13;349(20):1907-15.

## Trial eligibility criteria and patient baseline characteristics

- (10) Emery P, Keystone E, Tony HP, Cantagrel A, van VR, Sanchez A, et al. IL-6 receptor inhibition with tocilizumab improves treatment outcomes in patients with rheumatoid arthritis refractory to anti-tumour necrosis factor biologicals: results from a 24-week multicentre randomised placebo-controlled trial. *Ann Rheum Dis* 2008 Nov;67(11):1516-23.
- (11) Maini R, St Clair EW, Breedveld F, Furst D, Kalden J, Weisman M, et al. Infliximab (chimeric anti-tumour necrosis factor alpha monoclonal antibody) versus placebo in rheumatoid arthritis patients receiving concomitant methotrexate: a randomised phase III trial. ATTRACT Study Group. *Lancet* 1999 Dec 4;354(9194):1932-9.
- (12) Quinn MA, Conaghan PG, O'Connor PJ, Karim Z, Greenstein A, Brown A, et al. Very early treatment with infliximab in addition to methotrexate in early, poor-prognosis rheumatoid arthritis reduces magnetic resonance imaging evidence of synovitis and damage, with sustained benefit after infliximab withdrawal: results from a twelve-month randomized, double-blind, placebo-controlled trial. *Arthritis Rheum* 2005 Jan;52(1):27-35.
- (13) Cohen SB, Emery P, Greenwald MW, Dougados M, Furie RA, Genovese MC, et al. Rituximab for rheumatoid arthritis refractory to anti-tumor necrosis factor therapy: Results of a multicenter, randomized, double-blind, placebo-controlled, phase III trial evaluating primary efficacy and safety at twenty-four weeks. *Arthritis Rheum* 2006 Sep;54(9):2793-806.
- (14) Emery P, Deodhar A, Rigby WF, Isaacs JD, Combe B, Racewicz AJ, et al. Efficacy and safety of different doses and retreatment of rituximab: a randomised, placebo-controlled trial in patients who are biological naive with active rheumatoid arthritis and an inadequate response to methotrexate (Study Evaluating Rituximab's Efficacy in MTX iNadequate rEsponders (SERENE)). *Ann Rheum Dis* 2010 Sep;69(9):1629-35.
- (15) Edwards JC, Szczepanski L, Szechinski J, Filipowicz-Sosnowska A, Emery P, Close DR, et al. Efficacy of B-cell-targeted therapy with rituximab in patients with rheumatoid arthritis. *N Engl J Med* 2004 Jun 17;350(25):2572-81.
- (16) Emery P, Fleischmann R, Filipowicz-Sosnowska A, Schechtman J, Szczepanski L, Kavanaugh A, et al. The efficacy and safety of rituximab in patients with active rheumatoid arthritis despite methotrexate treatment: results of a phase IIB randomized, double-blind, placebo-controlled, dose-ranging trial. *Arthritis Rheum* 2006 May;54(5):1390-400.
- (17) Klareskog L, van der Heijde D, de Jager JP, Gough A, Kalden J, Malaise M, et al. Therapeutic effect of the combination of etanercept and methotrexate compared with each treatment alone in patients with rheumatoid arthritis: double-blind randomised controlled trial. *Lancet* 2004 Feb 28;363(9410):675-81.

## Trial eligibility criteria and patient baseline characteristics

- (18) Weinblatt ME, Kremer JM, Bankhurst AD, Bulpitt KJ, Fleischmann RM, Fox RI, et al. A trial of etanercept, a recombinant tumor necrosis factor receptor:Fc fusion protein, in patients with rheumatoid arthritis receiving methotrexate. *N Engl J Med* 1999 Jan 28;340(4):253-9.
- (19) Furst DE, Schiff MH, Fleischmann RM, Strand V, Birbara CA, Compagnone D, et al. Adalimumab, a fully human anti tumor necrosis factor-alpha monoclonal antibody, and concomitant standard antirheumatic therapy for the treatment of rheumatoid arthritis: results of STAR (Safety Trial of Adalimumab in Rheumatoid Arthritis). *J Rheumatol* 2003 Dec;30(12):2563-71.
- (20) Keystone EC, Kavanaugh AF, Sharp JT, Tannenbaum H, Hua Y, Teoh LS, et al. Radiographic, clinical, and functional outcomes of treatment with adalimumab (a human anti-tumor necrosis factor monoclonal antibody) in patients with active rheumatoid arthritis receiving concomitant methotrexate therapy: a randomized, placebo-controlled, 52-week trial. *Arthritis Rheum* 2004 May;50(5):1400-11.
- (21) Weinblatt ME, Keystone EC, Furst DE, Moreland LW, Weisman MH, Birbara CA, et al. Adalimumab, a fully human anti-tumor necrosis factor alpha monoclonal antibody, for the treatment of rheumatoid arthritis in patients taking concomitant methotrexate: the ARMADA trial. *Arthritis Rheum* 2003 Jan;48(1):35-45.
- (22) van de Putte LB, Atkins C, Malaise M, Sany J, Russell AS, Van Riel PL, et al. Efficacy and safety of adalimumab as monotherapy in patients with rheumatoid arthritis for whom previous disease modifying antirheumatic drug treatment has failed. *Ann Rheum Dis* 2004 May;63(5):508-16.
- (23) Moreland LW, Schiff MH, Baumgartner SW, Tindall EA, Fleischmann RM, Bulpitt KJ, et al. Etanercept therapy in rheumatoid arthritis. A randomized, controlled trial. *Ann Intern Med* 1999 Mar 16;130(6):478-86.
- (24) Emery P, Fleischmann RM, Moreland LW, Hsia EC, Strusberg I, Durez P, et al. Golimumab, a human anti-tumor necrosis factor alpha monoclonal antibody, injected subcutaneously every four weeks in methotrexate-naive patients with active rheumatoid arthritis: twenty-four-week results of a phase III, multicenter, randomized, double-blind, placebo-controlled study of golimumab before methotrexate as first-line therapy for early-onset rheumatoid arthritis. *Arthritis Rheum* 2009 Aug;60(8):2272-83.
- (25) Keystone EC, Genovese MC, Klareskog L, Hsia EC, Hall ST, Miranda PC, et al. Golimumab, a human antibody to tumour necrosis factor {alpha} given by monthly subcutaneous injections, in active rheumatoid arthritis despite methotrexate therapy: the GO-FORWARD Study. *Ann Rheum Dis* 2009 Jun;68(6):789-96.

## Trial eligibility criteria and patient baseline characteristics

- (26) Smolen JS, Kay J, Doyle MK, Landewe R, Matteson EL, Wollenhaupt J, et al. Golimumab in patients with active rheumatoid arthritis after treatment with tumour necrosis factor alpha inhibitors (GO-AFTER study): a multicentre, randomised, double-blind, placebo-controlled, phase III trial. *Lancet* 2009 Jul 18;374(9685):210-21.
- (27) Miyasaka N. Clinical investigation in highly disease-affected rheumatoid arthritis patients in Japan with adalimumab applying standard and general evaluation: the CHANGE study. *Mod Rheumatol* 2008;18(3):252-62.
- (28) Fleischmann R, Vencovsky J, van Vollenhoven RF, Borenstein D, Box J, Coteur G, et al. Efficacy and safety of certolizumab pegol monotherapy every 4 weeks in patients with rheumatoid arthritis failing previous disease-modifying antirheumatic therapy: the FAST4WARD study. *Ann Rheum Dis* 2009 Jun;68(6):805-11.
- (29) Combe B, Codreanu C, Fiocco U, Gaubitz M, Geusens PP, Kvien TK, et al. Etanercept and sulfasalazine, alone and combined, in patients with active rheumatoid arthritis despite receiving sulfasalazine: a double-blind comparison. *Ann Rheum Dis* 2006 Oct;65(10):1357-62.
- (30) van de Putte LB, Rau R, Breedveld FC, Kalden JR, Malaise MG, Van Riel PL, et al. Efficacy and safety of the fully human anti-tumour necrosis factor alpha monoclonal antibody adalimumab (D2E7) in DMARD refractory patients with rheumatoid arthritis: a 12 week, phase II study. *Ann Rheum Dis* 2003 Dec;62(12):1168-77.
- (31) Nishimoto N, Yoshizaki K, Miyasaka N, Yamamoto K, Kawai S, Takeuchi T, et al. Treatment of rheumatoid arthritis with humanized anti-interleukin-6 receptor antibody: a multicenter, double-blind, placebo-controlled trial. *Arthritis Rheum* 2004 Jun;50(6):1761-9.
- (32) Yazici Y, Curtis JR, Ince A, Baraf H, Malamet RL, Teng LL, et al. Efficacy of tocilizumab in patients with moderate to severe active rheumatoid arthritis and a previous inadequate response to disease-modifying antirheumatic drugs: the ROSE study. *Ann Rheum Dis* 2012 Feb;71(2):198-205.
- (33) Tak PP, Rigby WF, Rubbert-Roth A, Peterfy CG, van Vollenhoven RF, Stohl W, et al. Inhibition of joint damage and improved clinical outcomes with rituximab plus methotrexate in early active rheumatoid arthritis: the IMAGE trial. *Ann Rheum Dis* 2011 Jan;70(1):39-46.
- (34) Kay J, Matteson EL, Dasgupta B, Nash P, Durez P, Hall S, et al. Golimumab in patients with active rheumatoid arthritis despite treatment with methotrexate: a randomized, double-blind, placebo-controlled, dose-ranging study. *Arthritis Rheum* 2008 Apr;58(4):964-75.
- (35) Lan JL, Chou SJ, Chen DY, Chen YH, Hsieh TY, Young M, Jr. A comparative study of etanercept plus methotrexate and methotrexate alone in Taiwanese patients with active rheumatoid arthritis: a 12-week, double-blind, randomized, placebo-controlled study. *J Formos Med Assoc* 2004 Aug;103(8):618-23.

## Trial eligibility criteria and patient baseline characteristics

- (36) Abe T, Takeuchi T, Miyasaka N, Hashimoto H, Kondo H, Ichikawa Y, et al. A multicenter, double-blind, randomized, placebo controlled trial of infliximab combined with low dose methotrexate in Japanese patients with rheumatoid arthritis. *J Rheumatol* 2006 Jan;33(1):37-44.
- (37) Keystone E, Heijde D, Mason D, Jr., Landewe R, Vollenhoven RV, Combe B, et al. Certolizumab pegol plus methotrexate is significantly more effective than placebo plus methotrexate in active rheumatoid arthritis: findings of a fifty-two-week, phase III, multicenter, randomized, double-blind, placebo-controlled, parallel-group study. *Arthritis Rheum* 2008 Nov;58(11):3319-29.
- (38) Smolen J, Landewe RB, Mease P, Brzezicki J, Mason D, Luijtens K, et al. Efficacy and safety of certolizumab pegol plus methotrexate in active rheumatoid arthritis: the RAPID 2 study. A randomised controlled trial. *Ann Rheum Dis* 2009 Jun;68(6):797-804.
- (39) Westhovens R, Yocum D, Han J, Berman A, Strusberg I, Geusens P, et al. The safety of infliximab, combined with background treatments, among patients with rheumatoid arthritis and various comorbidities: a large, randomized, placebo-controlled trial. *Arthritis Rheum* 2006 Apr;54(4):1075-86.
- (40) Chen DY, Chou SJ, Hsieh TY, Chen YH, Chen HH, Hsieh CW, et al. Randomized, double-blind, placebo-controlled, comparative study of human anti-TNF antibody adalimumab in combination with methotrexate and methotrexate alone in Taiwanese patients with active rheumatoid arthritis. *J Formos Med Assoc* 2009 Apr;108(4):310-9.
- (41) Westhovens R, Robles M, Ximenes AC, Nayiager S, Wollenhaupt J, Durez P, et al. Clinical efficacy and safety of abatacept in methotrexate-naive patients with early rheumatoid arthritis and poor prognostic factors. *Ann Rheum Dis* 2009 Dec;68(12):1870-7.
- (42) Takeuchi T, Harigai M, Tanaka Y, Yamanaka H, Ishiguro N, Yamamoto K, et al. Golimumab monotherapy in Japanese patients with active rheumatoid arthritis despite prior treatment with disease-modifying antirheumatic drugs: results of the phase 2/3, multicentre, randomised, double-blind, placebo-controlled GO-MONO study through 24 weeks. *Ann Rheum Dis* 2013 Sep 1;72(9):1488-95.
- (43) Fleischmann R, Kremer J, Cush J, Schulze-Koops H, Connell CA, Bradley JD, et al. Placebo-controlled trial of tofacitinib monotherapy in rheumatoid arthritis. *N Engl J Med* 2012 Aug 9;367(6):495-507.
- (44) Fleischmann R, Cutolo M, Genovese MC, Lee EB, Kanik KS, Sadis S, et al. Phase IIb dose-ranging study of the oral JAK inhibitor tofacitinib (CP-690,550) or adalimumab monotherapy versus placebo in patients with active rheumatoid arthritis with an inadequate response to disease-modifying antirheumatic drugs. *Arthritis Rheum* 2012 Mar;64(3):617-29.

## Trial eligibility criteria and patient baseline characteristics

- (45) Choy E, McKenna F, Vencovsky J, Valente R, Goel N, Vanlunen B, et al. Certolizumab pegol plus MTX administered every 4 weeks is effective in patients with RA who are partial responders to MTX. *Rheumatology (Oxford)* 2012 Jul;51(7):1226-34.
- (46) Yamamoto K, Takeuchi T, Yamanaka H, Ishiguro N, Tanaka Y, Eguchi K, et al. Efficacy and safety of certolizumab pegol without methotrexate co-administration in Japanese patients with active rheumatoid arthritis: the HIKARI randomized, placebo-controlled trial. *Mod Rheumatol* 2014 Jul;24(4):552-60.
- (47) Yamamoto K, Takeuchi T, Yamanaka H, Ishiguro N, Tanaka Y, Eguchi K, et al. Efficacy and safety of certolizumab pegol plus methotrexate in Japanese rheumatoid arthritis patients with an inadequate response to methotrexate: the J-RAPID randomized, placebo-controlled trial. *Mod Rheumatol* 2014 Sep;24(5):715-24.
- (48) Kavanaugh A, Fleischmann RM, Emery P, Kupper H, Redden L, Guerette B, et al. Clinical, functional and radiographic consequences of achieving stable low disease activity and remission with adalimumab plus methotrexate or methotrexate alone in early rheumatoid arthritis: 26-week results from the randomised, controlled OPTIMA study. *Ann Rheum Dis* 2013 Jan;72(1):64-71.
- (49) Takeuchi T, Matsubara T, Nitobe T, Suematsu E, Ohta S, Honjo S, et al. Phase II dose-response study of abatacept in Japanese patients with active rheumatoid arthritis with an inadequate response to methotrexate. *Mod Rheumatol* 2013 Mar;23(2):226-35.
- (50) Tanaka Y, Harigai M, Takeuchi T, Yamanaka H, Ishiguro N, Yamamoto K, et al. Golimumab in combination with methotrexate in Japanese patients with active rheumatoid arthritis: results of the GO-FORTH study. *Ann Rheum Dis* 2012 Jun;71(6):817-24.
- (51) van Vollenhoven RF, Fleischmann R, Cohen S, Lee EB, Garcia Meijide JA, Wagner S, et al. Tofacitinib or adalimumab versus placebo in rheumatoid arthritis. *N Engl J Med* 2012 Aug 9;367(6):508-19.
- (52) Weinblatt ME, Bingham CO, III, Mendelsohn AM, Kim L, Mack M, Lu J, et al. Intravenous golimumab is effective in patients with active rheumatoid arthritis despite methotrexate therapy with responses as early as week 2: results of the phase 3, randomised, multicentre, double-blind, placebo-controlled GO-FURTHER trial. *Ann Rheum Dis* 2013 Mar;72(3):381-9.
- (53) Weinblatt ME, Fleischmann R, Huizinga TW, Emery P, Pope J, Massarotti EM, et al. Efficacy and safety of certolizumab pegol in a broad population of patients with active rheumatoid arthritis: results from the REALISTIC phase IIIb study. *Rheumatology (Oxford)* 2012 Dec;51(12):2204-14.



## Trial eligibility criteria and patient baseline characteristics

- (54) Tanaka Y, Suzuki M, Nakamura H, Toyozumi S, Zwillich SH. Phase II study of tofacitinib (CP-690,550) combined with methotrexate in patients with rheumatoid arthritis and an inadequate response to methotrexate. *Arthritis Care Res (Hoboken)* 2011 Aug;63(8):1150-8.
- (55) Kim H-Y, Lee S-K, Song YW, Yoo D-H, Koh E-M, Yoo B, et al. A randomized, double-blind, placebo-controlled, phase III study of the human anti-tumor necrosis factor antibody adalimumab administered as subcutaneous injections in Korean rheumatoid arthritis patients treated with methotrexate. *APLAR Journal of Rheumatology* 2007;10(1):April.
- (56) Durez P, Malghem J, Nzeusseu TA, Depresseux G, Lauwerys BR, Westhovens R, et al. Treatment of early rheumatoid arthritis: a randomized magnetic resonance imaging study comparing the effects of methotrexate alone, methotrexate in combination with infliximab, and methotrexate in combination with intravenous pulse methylprednisolone. *Arthritis Rheum* 2007 Dec;56(12):3919-27.
- (57) van der Heijde D, Tanaka Y, Fleischmann R, Keystone E, Kremer J, Zerbini C, et al. Tofacitinib (CP-690,550) in patients with rheumatoid arthritis receiving methotrexate: twelve-month data from a twenty-four-month phase III randomized radiographic study. *Arthritis Rheum* 2013 Mar;65(3):559-70.
- (58) Burmester GR, Blanco R, Charles-Schoeman C, Wollenhaupt J, Zerbini C, Benda B, et al. Tofacitinib (CP-690,550) in combination with methotrexate in patients with active rheumatoid arthritis with an inadequate response to tumour necrosis factor inhibitors: a randomised phase 3 trial. *Lancet* 2013 Feb 9;381(9865):451-60.
- (59) Kremer JM, Cohen S, Wilkinson BE, Connell CA, French JL, Gomez-Reino J, et al. A phase IIb dose-ranging study of the oral JAK inhibitor tofacitinib (CP-690,550) versus placebo in combination with background methotrexate in patients with active rheumatoid arthritis and an inadequate response to methotrexate alone. *Arthritis Rheum* 2012 Apr;64(4):970-81.
- (60) Takeuchi T, Yamanaka H, Ishiguro N, Miyasaka N, Mukai M, Matsubara T, et al. Adalimumab, a human anti-TNF monoclonal antibody, outcome study for the prevention of joint damage in Japanese patients with early rheumatoid arthritis: the HOPEFUL 1 study. *Ann Rheum Dis* 2014 Mar;73(3):536-43.
- (61) Kremer J, Li ZG, Hall S, Fleischmann R, Genovese M, Martin-Mola E, et al. Tofacitinib in combination with nonbiologic disease-modifying antirheumatic drugs in patients with active rheumatoid arthritis: a randomized trial. *Ann Intern Med* 2013 Aug 20;159(4):253-61.
- (62) Zhang F-C, Hou Y, Huang F, Wu D-H, Bao C-D, Ni L-Q, et al. Infliximab versus placebo in rheumatoid arthritis patients receiving concomitant methotrexate: A preliminary study from China. *APLAR Journal of Rheumatology* 2006;9(2):August.