

Supplementary Material 1: Characteristics of enrolled studies

Figure S1. Flowchart of search strategy.

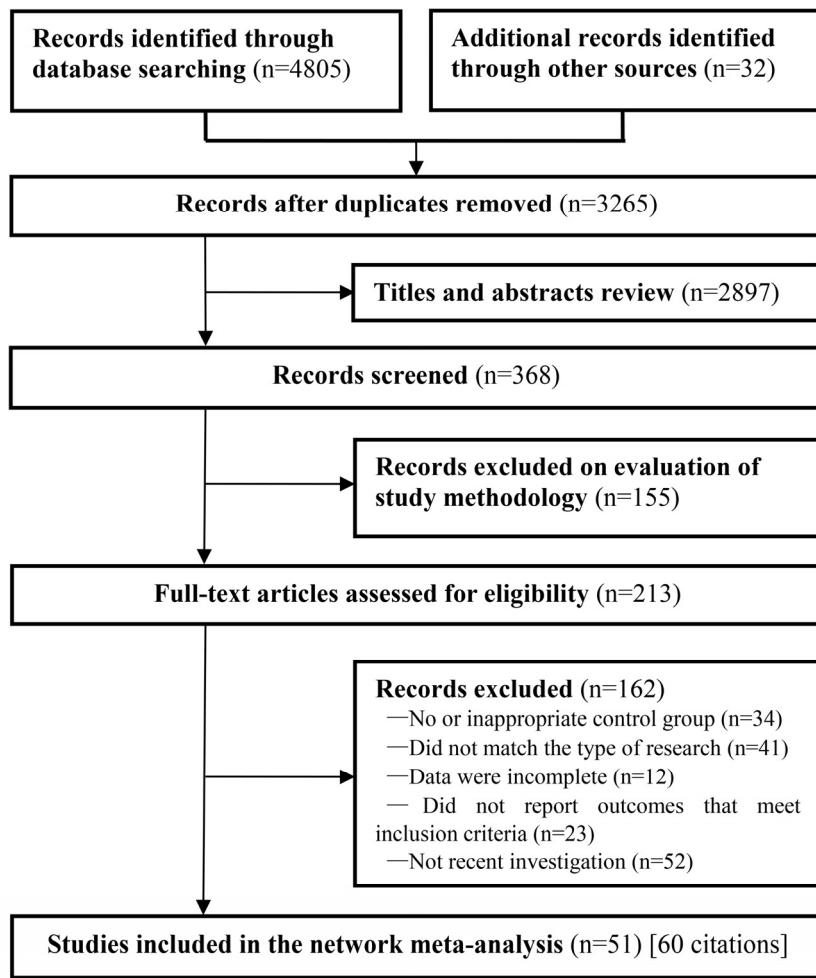


Table S1. Main characteristics of the studies included in the systematic assessment.

Autho rs (Publi cation year)	Recr uitin g area	Study design	Participant characteristics					Treatment characteristics				Ma in out co me par am eter s	
			Sample size (interve ntion/c ontrol)	Male (n,%)	Mean age (range, years)	Antibiotic in use	Indication	Setting	Experimental intervention	Compa rator arm	Dosage (CFU/d ay)	Duration	
Ahma d et al (2013)	Iran	RCT, double -blind	66 (33/33)	44 (65.7 %)	9.09±3.1 2 (3~14)	Amoxillin, furazolido ne	<i>H. pylori</i> eradicatio n	Single site hospital	<i>Lactobacillus acidophilus</i> + <i>Lactobacillus rhamnosus</i> + <i>Lactobacillus bulgaricus</i> + <i>Lactobacillus casei</i> + <i>Streptococcus thermophilus</i> + <i>Bifidobacterium infantis</i> + <i>Bifidobacterium breve</i>	Placebo	1 billion	5 weeks	1, 2
Allen et al (2013)	UK	RCT, double -blind, multi- center, two-gr oup	2941 (1471/1 470)	2268 (77.1 2%)	NA	Penicillin, cephalospo rin, quinolones , etc.	NA	Multiple hospitals	<i>Lactobacillus acidophilus</i> + <i>Bifidobacterium bifidum</i> + <i>Bifidobacterium lactis</i>	Placebo	60 billion	3 weeks	1, 2, 3

		Prospective,										
Armuz zi et al (2001)	Italy	RCT, double -blind, single- center	60 (30/30)	25 (41.7 %)	40±12	Clarithromycin, tinidazole	<i>H. pylori</i> eradication	Asymptomatic, teaching hospital	<i>Lactobacillus rhamnosus</i> GG Placebo	12 billion	2 weeks	1, 3
Arvola et al (1999)	Finland	RCT, double -blind	119 (61/58)	NA	4.7 (2 weeks~1 1 years)	NA	Acute reproductive tract infection	In-patient	<i>Lactobacillus rhamnosus</i> GG Placebo	40 billion	7~10 days	1, 2, 3, 4, 5
Beaus oleil et al (2007)	Canada	Prospective, RCT, double -blind, single- center	I: 89 (44/45)	43 (48.3 %)	68.8±14. 5; C: 72.9±13. 4	β-lactams, macrolides , quinolones	Respiratory infection, etc.	Single site hospital	<i>Lactobacillus acidophilus</i> <i>CL1285 + Lactobacillus casei</i> Placebo	25 billion for first 2 days, 50 billion for rest of antibiotic use	Various; the duration of antibiotic use	1, 2, 3
Bravo et al (2008)	Spain	RCT	86(41/45)	20 (23.3 %)	49.78±2 0.5	Amoxicillin	Acute infection	Out-patient	<i>Saccharomyces boulardii</i> Placebo	10.2 billion	12 days	1

Can et al (2006)	Turkey	Prospective, RCT, double-blind	151 (73/78)	139 (92.1 %)	NA	β-lactams	NA	In-patient, one teaching hospital	<i>Saccharomyces boulardii</i>	Placebo	NA	NA	NA	1, 3
Cimperman et al (2011)	USA	RCT, double-blind	31 (15/16)	11 (47.8 %)	I: 42.8; C: 63.6	β-lactams, macrolides, quinolones, etc.	a, chronic obstructive pulmonary disease, bronchitis	Acute general medical floor	<i>Lactobacillus reuteri ATCC 55730</i>	Placebo	0.2 billion	4 weeks	4 weeks	1
Cindoruk et al (2007)	Turkey	Prospective, RCT, double-blind	124 (62/62)	44 (35.5 %)	I: 45.82±1.35; C: 47.56±1.53	Amoxicillin, clarithromycin	<i>H. pylori</i> eradication	NA	<i>Saccharomyces boulardii</i>	Placebo	1 g	2 weeks	2 weeks	1, 3
Conway et al (2007) (a)	UK	RCT, double-blind, three-arm	238 (118/120)	114 (42.2 %)	Bio: 37.8±25.5; C: 38.2±23.5	NA	NA	Rural general practice	<i>Streptococcus thermophilus</i> + <i>Lactobacillus acidophilus</i> + <i>Bifidobacterium anamals subsp. lactus</i>	Placebo	1 billion	12 days	12 days	1, 3
Conway et al	UK	RCT, double-blind	251 (131/120)	111 (42.1 %)	Com: 37.1±23.5	NA	NA	Rural general	<i>Streptococcus thermophilus</i> + <i>Lactobacillus delbrueckii</i>	Placebo	2 billion	12 days	12 days	1, 3

(2007)	-blind, (b)	0)	%)	C: 38.2±23.		pratice	<i>bulgaris</i>						
	three-a rm			5									
	RCT, double -blind,			Ampicillin									
				,									
Corre a et al (2005)	Brazi l	formul a-contr olled,	157 (80/77)	60 (38.2 %)	21.94±9. 8; C: 22.19±1	n, cephalospo rin,	NA	Hospital ambulato ry care	<i>Bifidobacterium lactis</i> + <i>Streptococcus thermophilus</i>	Placebo	Approx imately 5 billion	15 days	1, 4
	paralle l-grou p			0.7	penicillin, oxacillin, etc.								
Cremo nini et al (2002) (a)	RCT, triple- blind, paralle l group		42 (21/21)	43 (44.3 %)	18~61	NA	<i>H. pylori</i> eradicatio n	Asympto matic	<i>Lactobacillus rhamnosus</i> GG	Placebo	12 billion	2 weeks	1, 3
Cremo nini et al (2002) (b)	RCT, triple- blind, paralle l group		42 (21/21)	43 (44.3 %)	18~61	NA	<i>H. pylori</i> eradicatio n	Asympto matic	<i>Saccharomyces boulardii</i>	Placebo	10 billion	2 weeks	1, 3
Cremo nini et	RCT, triple-	43 (22/21)	43 (44.3	18~61	NA	<i>H. pylori</i> eradicatio	Asympto matic	<i>Lactobacillus acidophilus</i> + <i>Bifidobacterium lactis</i>	Placebo	10 billion	2 weeks	1, 3	

al (2002)	blind, paralle l group		%)			n							
de Vrese et al (2011)	RCT, double -blind	59 (30/29)	NA	NA	Clarithrom ycin, amoxicilli n	<i>H. pylori</i> eradicatio n	Out-pati ent	<i>Lactobacillus acidophilus</i> <i>LA-5</i> + <i>Bifidobacterium animalis</i> <i>ssp. lactis BB-12</i> + <i>Streptococcus thermophilus</i>	Placebo	0.75 billion	5 weeks	1, 3	
Dietric h et al (2014)	RCT, double -blind	258 (151/10 7)	131 (50.8 <td>70.8±15. 6; C: 70.8±16. 5</td> <td>I: Penicillin, cephalospo ryin, quinolones , etc.</td> <td>Pulmonary infection, genitourin ary infection, biliary infection, sepsis, etc.</td> <td>A large internal medicine departme nt in primary hospital</td> <td><i>Lactobacillus casei</i> <i>DN-114001</i></td> <td>Placebo</td> <td>20 billion</td> <td>12 weeks</td> <td>1, 2</td>	70.8±15. 6; C: 70.8±16. 5	I: Penicillin, cephalospo ryin, quinolones , etc.	Pulmonary infection, genitourin ary infection, biliary infection, sepsis, etc.	A large internal medicine departme nt in primary hospital	<i>Lactobacillus casei</i> <i>DN-114001</i>	Placebo	20 billion	12 weeks	1, 2	
Duma n et al (2005)	Prospe ctive, RCT, multi- center, open label	389 (204/18 5)	190 (48.8 <td>45.68±1 2.7; C: 44.65±1 3.9</td> <td>Amoxicilli n, clarithrom ycin</td> <td><i>H. pylori</i> eradicatio n</td> <td>Multiple hospitals</td> <td><i>Saccharomyces boulardii</i></td> <td>Placebo</td> <td>1 g</td> <td>2 weeks</td> <td>1, 2, 3</td>	45.68±1 2.7; C: 44.65±1 3.9	Amoxicilli n, clarithrom ycin	<i>H. pylori</i> eradicatio n	Multiple hospitals	<i>Saccharomyces boulardii</i>	Placebo	1 g	2 weeks	1, 2, 3	
Engelb	USA	RCT	40(20/2	9	37.2	Amoxicilli	Healthy	Out-pati	<i>Bifidobacterium lactis Bl-04</i>	Placebo	41	3 weeks	1

rekts n et al (2009)		0)	(22.5 %)	n		ent	+ <i>Bifidobacterium lactis</i> <i>Bi-07 + Lactobacillus</i> <i>acidophilus NCFM +</i> <i>Lactobacillus paracasei</i> <i>Lpc-37 + Bifidobacterium</i> <i>bifidum Bb-02</i>	billion					
Erdev e et al (2004)	Turk ey	RCT, no treatm ent	466 (244/22 2)	NA	1~15	Salbactam- ampicillin, azithromyc in	NA	NA	<i>Saccharomyces boulardii</i>	Placebo	NA	NA	1
Fox et al (2015)	Austr alia	Prospe ctive, RCT, double -blind, paralle l, multisi te, stratifi	I: 41 (58.5 7%)	6.8±2.7, C: 6.3±3.2; (1~12)	β-lactams, macrolides , tetracyclin es	Otitis, pharyngiti s, chest infection, etc.	Multisite general care	<i>Lactobacillus rhamnosus GG</i> + <i>Bifidobacterium</i> <i>lactis Bb-12 + Lactobacillus</i> <i>acidophilus La-5</i>	Placebo	19.4 billion	Various; the duration of antibiotic use plus 1 week	1, 3	

Gao et al (2010) (a)	USA	ed RCT, double -blind, single- center, three-a rm, dose-r anging RCT, double -blind, single- center, three-a rm, dose-r anging	170 (86/84)	85 (50.3 %)	I: 60±6; C: 60±6	Penicillin, cephalospo- rin, clindamyci n	NA	Single site hospital	<i>Lactobacillus acidophilus</i> <i>CL1285 + Lactobacillus casei LBC80R</i>	Placebo	100 billion	6~19 days; started within 36h of antibiotic therapy prescribed and continued 5 additional days after antibiotic completion	1, 2, 3
Gao et al (2010) (b)	USA	ed RCT, double -blind, single- center, three-a rm, dose-r anging	169 (85/84)	88 (51.8 %)	I: 60±6; C: 60±6	Penicillin, cephalospo- rin, clindamyci n	NA	Single site hospital	<i>Lactobacillus acidophilus</i> <i>CL1285 + Lactobacillus casei LBC80R</i>	Placebo	50 billion	6~19 days; started within 36h of antibiotic therapy prescribed and continued 5 additional days after antibiotic completion	1, 2, 3
Hicks et al (2007)	UK	RCT, double -blind	135 (69/66)	62 (45.9 %)	I: 1; C: 5 73.7±11. 73.9±10.	Respirator y tract infection, urinary tract	NA	Three hospitals	<i>Lactobacillus casei</i> <i>DN-114001 + Streptococcus thermophilus +</i> <i>Lactobacillus bulgaricus</i>	Placebo	40.74 billion	Various; started within 48h of starting antibiotic therapy and continued 1 week after stopping antibiotics	1

Hurdu c et al (2009)	Rom ania	Rando mized, open trail	90 (48/42)	39 (43.3 %)	11.5	Amoxicilli n, Clarithro mycin	<i>H. pylori</i> eradicatio n	Out-pati ent	<i>Saccharomyces boulardii</i>	Antibiot ics-only	500 mg		
Kim et al (2008)	Kore a	Rando mized, prospe ctive, open-l abeled study	347(168 /179)	160 (46.1 %)	I: 48.1 ± 12.4 ; C: 53.7 ± 12.0	Clarithro mycin, amoxicilli n	<i>H. pylori</i> eradicatio n	Out-pati ent	<i>Lactobacillus acidophilus</i> <i>HY 2177 + Lactococcus</i> <i>casei HY 2743 +</i> <i>Bifidobacterium longum HY</i> <i>8001 + Streptococcus</i> <i>thermophilus B-1</i>	Antibiot ics-only	101.2 million	>3 weeks	1, 3
Konin g et al (2008)	The Neth erlan ds	RCT, double -blind, placeb o-cont rolled, paralle l	38 (19/19)	NA	18~65	Amoxicilli n	NA	Single site hospital	<i>Bifidobacterium bifidum</i> + <i>Bifidobacterium lactis</i> + <i>Bifidobacterium longum</i> + <i>Enterococcus faecium</i> + <i>Lactobacillus acidophilus</i> + <i>Lactobacillus paracasei</i> + <i>Lactobacillus plantarum</i> + <i>Lactobacillus rhamnosus</i> + <i>Lactobacillus salivarius</i>	Placebo	10 billion	2 weeks	1, 2, 3
Konin g et al (2010)	The Neth erlan	RCT, double -blind,	30 (17/13)	19 (63.3 %)	I: 59.9 ± 13.3 ; C: 63.4	Care as usual	Chronic obstructiv e	Single site hospital	<i>Bifidobacterium bifidum</i> + <i>Bifidobacterium lactis</i> + <i>Enterococcus faecium</i> +	Placebo	9 billion	2 weeks	1

	ds	parallel				± 7.4	pulmonary	<i>Lactobacillus acidophilus</i> + <i>Lactobacillus paracasei</i> + <i>Lactobacillus plantarum</i> + <i>Lactobacillus rhamnosus</i> + <i>Lactobacillus salivarius</i>				
Kotowska et al (2005)	Poland	RCT, double-blind	246 (119/127)	121 (50%)	I: 39.3±29; C: 39.3±4.1	Cefuroxime, amoxicilli n, penicillin, clarithrom ycin, roxithromy cin, etc.	Bronchitis, otitis, pneumoni a, tonsillitis, reproducti ve tract infection	Three teaching hospital and two clinics	<i>Saccharomyces boulardii</i>	Placebo	500 mg	NA
Lionetti et al (2006)	Italy	RCT	40 (20/20)	21 (52.5%)	I: 11.0 (3.3~18) ; C: 9.9 (4.3~17. 6)	Amoxicilli n, clarithrom ycin, tinidazole	<i>H. pylori</i> eradication	Out-patient	<i>Lactobacillus reuteri</i> ATCC 55730	Placebo	0.1 billion	20 days
Lonne et al (2010)	Sweden	RCT, double-blind	163 (80/83)	79 (48.5%)	I:47; C: 43	NA	Air way infection, skin/soft tissue infection,	Single site hospital	<i>Lactobacillus plantarum</i>	Placebo	10 billion	Various; started within 48h of the introduction of antibiotic therapy and continued 1 week after termination of

Meren stein et al (2009)	USA	RCT, double -blind	125 (61/64)	64 (51.2 %)	I: 2.9±1.5; C: 3.2±1.3	NA	Upper respiratory tract infection	Primary care office	<i>Lactococcus lactis</i> + <i>Lactococcus plantarum</i> + <i>Lactococcus rhamnosus</i> + <i>Lactococcus casei</i> + <i>Lactococcus lactis</i> subsp. <i>diacetylactis</i> + <i>Leuconostoc</i> <i>cremoris</i> + <i>Bifidobacterium</i> <i>longum</i> + <i>Bifidobacterium</i> <i>breve</i> + <i>Lactobacillus</i> <i>acidophilus</i> + <i>Saccharomyces florentinus</i> (yeast)	Placebo	NA	10 days	1, 3
Morro w et al (2010)	USA	Prospe ctive, RCT, double -blind	146 (73/73)	60 (42.0 %)	I: 52.5±19. 3; C: 54.6±16. 3	NA	Ventilator- associated pneumoni a	Single site hospital	<i>Lactobacillus rhamnosus</i> GG	Placebo	4 billion	NA	1, 3
Myllyl uoma et al (2005)	Finla nd	RCT, double -blind	47 (23/24)	18 (38.3 %)	Amoxicilli n, clarithrom ycin	<i>H. pylori</i> eradicatio n	Small compani es near research	<i>Lactobacillus rhamnosus</i> GG + <i>Lactobacillus rhamnosus</i> <i>LC705</i> + <i>Bifidobacterium</i> <i>breve</i> <i>Bb99</i> +	Placebo	13 billion for first	4 weeks	1, 3	

center *Propionibacterium freudenreichii* ssp. *shermanii* week,
JS 6.5 billion
for the followi
ng 3 weeks

Nista et al (2004)	Italy	Prospective, RCT, double-blind, single center	106 (54/52)	55 %	I: 46±13; C: 43±13	Amoxicillin, clarithromycin	<i>H. pylori</i> eradication	Single site hospital	<i>Bacillus clausii</i>	Placebo	6 billion	2 weeks	1, 3
Ouwehand et al (2014) (a)	Finland	RCT, triple-hand, dose-response	335 (168/167)	168 (50%)	High dose: 50.5±11.0; C: 50.0±11.0	Broad spectrum penicillin, cephalosporin, clindamycin	Respiratory tract infection, urinary tract infection	Single site hospital	<i>Lactobacillus acidophilus</i> + <i>Lactobacillus paracasei</i> <i>Lpc-37</i> + <i>Bifidobacterium lactis</i> <i>Bi-07</i> + <i>Bifidobacterium lactis</i> <i>Bl-04</i>	Placebo	4.17 billion	10~21 days; length of antibiotic administration plus 1 week	1, 2, 3
Ouwehand et al	Finland	RCT, triple-hand,	335 (168/167)	168 (%)	Low dose: 49.3±11.	Broad spectrum penicillin,	Respiratory tract infection,	Single site hospital	<i>Lactobacillus acidophilus</i> + <i>Lactobacillus paracasei</i> <i>Lpc-37</i> + <i>Bifidobacterium</i>	Placebo	17 billion	10~21 days; length of antibiotic administration plus 1	1

		dose-r e		4; C: 50.0±11. e	cephalospo rin, 0 clindamyci	urinary tract infection	<i>lactis Bi-07 + Bifidobacterium lactis Bl-04</i>		week				
(2014)													
(b)													
Plum mer et al (2004)	UK	RCT, double -blind	138 (69/69)	NA	NA	NA	In-patien t	<i>Lactobacillus acidophilus + Bifidobacterium bifidum</i>	Placebo	20 billion	20 days	1, 2	
Pozzo ni et al (2012)	Italy	RCT, double -blind, single- center, paralle l-grou p	204 (106/98)	137 (39.8 <td>I: 79.9±9 .9; C: 78.5±9.7</td> <td>β-lactams, quinolones , etc.</td> <td>Single site hospital</td> <td><i>Saccharomyces boulardii</i></td> <td>Placebo</td> <td>10 billion</td> <td>Various; started within 48h of the start of antibiotic therapy and continued 1 week after discontinuation of antibiotics</td> <td>1, 2, 3</td>	I: 79.9±9 .9; C: 78.5±9.7	β-lactams, quinolones , etc.	Single site hospital	<i>Saccharomyces boulardii</i>	Placebo	10 billion	Various; started within 48h of the start of antibiotic therapy and continued 1 week after discontinuation of antibiotics	1, 2, 3	
Ruszcz ynski et al (2008)	Pola nd	RCT, double -blind	240 (120/12 0)	110 (45.9 <td>I: 54.8±45. 3; C: 53.5±44.</td> <td>Penicillins, broad spectrum penicillin, cephalospo</td> <td>Otitis, upper respiratory tract infection,</td> <td>Two hospitals and one private practice</td> <td><i>Lactobacillus rhamnosus (E/N, Oxy and Pen)</i></td> <td>Placebo</td> <td>4 billion</td> <td>Various; the duration of the antibiotic treatment</td> <td>1, 2, 3</td>	I: 54.8±45. 3; C: 53.5±44.	Penicillins, broad spectrum penicillin, cephalospo	Otitis, upper respiratory tract infection,	Two hospitals and one private practice	<i>Lactobacillus rhamnosus (E/N, Oxy and Pen)</i>	Placebo	4 billion	Various; the duration of the antibiotic treatment	1, 2, 3

Safdar et al (2008)	USA	RCT, double-blind, single-center	39 (23/16)	I: 39 (97.5 %) 66.56±1 C:72.47 ±11	β-lactams, infection, skin/soft tissue infection, etc.	tract infection, site hospital	Single	<i>Lactobacillus acidophilus</i>	Placebo	60 billion	2 weeks
Sampaolis et al (2010)	Canada	RCT, double-blind, multi-center	437 (216/22 1)	I: 234 (53.5 %) 59.5±18.1 C: 58.1±19.1	β-lactams, macrolides, quinolones, clindamycin, etc.	urinary tract infection, skin/soft tissue infection, etc.	Pulmonary infection, etc.	<i>Lactobacillus acidophilus</i> CL1285 + <i>Lactobacillus casei</i>	Placebo	25 billion	Various; administered for first 2 days, and continued 5 days for remaini ng

									treatme				
									nt				
									period				
Shan et al (2013)	Chin a	RCT	283 (139/144)	NA	4	Cefepime, cefoperazone, sulbactam, amoxicillin, erythromycin, etc.	Pneumonia, a, asthma, lower respiratory tract infection	Single site hospital	<i>Saccharomyces boulardii</i>	Placebo	500 mg	2 weeks	1, 3
Sheu et al (2002)	Chin a	RCT	160 (80/80)	78 (48.8 %)	I: 47.8; C: 45.9	Amoxicillin n, clarithromycin	<i>H. pylori</i> eradication	Out-patient	<i>Lactobacillus +</i> <i>Bifidobacterium</i>	Antibiotics-only	10 billion	1 week	1, 3
Song et al (2010)	Kore a	RCT, double -blind, multi- center	214 (103/111)	132 (61.7 %)	I: 61±15; C: 60±16	Prospective, β-lactams, macrolides , quinolones , etc.	Pulmonary infection	10 tertiary hospitals	<i>Lactobacillus rhamnosus</i> <i>R0011 + Lactobacillus</i> <i>acidophilus R0052</i>	Placebo	4 billion	2 weeks	1, 3
Souza et al	Brasi l	RCT, double	70 (35/35)	32 (45.7 %)	I: 56.17±2	β-lactams, quinolones	NA	In-patient, single	<i>Lactobacillus casei +</i> <i>Bifidobacterium breve</i>	Placebo	1.83 billion	Various	1, 3

(2012)		-blind	%)	0.47; C: 54±21.8	, etc.		site hospital						
				4									
Sullivan et al (2003)	Sweden	RCT	24 (12/12)	7 (29.2 %)	28 (21~48)	Clindamycin	Healthy	Out-patient	<i>Lactobacillus</i> <i>acidophilus NCFB 1748 +</i> <i>Bifidobacterium lactis Bb 12</i> <i>+ Lactobacillus paracasei</i> <i>subsp. paracasei F19</i>	Placebo	50 billion	2 weeks	1
Sykorá et al (2005)	UK	RCT, double -blind, paralle l-grou p	86 (39/47)	34 (39.5 %)	I: 12.6±3.3 ; C: 12.9±3.7	Amoxicillin, clarithromycin	<i>H. pylori</i> eradicatio n	3 sites hospital general care	<i>Lactobacillus casei</i> <i>DN-114001</i>	Placebo	10 billion	1 week	1, 3
Szajewska et al (2009)	Poland	RCT, double -blind	64 (34/30)	39 (47%)	I: 12.3±2.7 ; C: 11.9±3.1	Amoxicillin, clarithromycin	<i>H. pylori</i> eradicatio n	In-patien t	<i>Lactobacillus rhamnosus</i> GG	Placebo	2 billion	1 week	1, 3
Szymański et al (2008)	Poland	RCT, double -blind	78 (40/38)	44 (56.4 %)	I: 8 (3~14); C: 7 (1~15)	Amoxicillin, penicillin, cephalospo	Otitis, respiratory tract infection,	Pediatric hospitals and out-patie	<i>Bifidobacterium longum</i> <i>PL03 + Lactobacillus</i> <i>rhamnosus KL53A +</i> <i>Lactobacillus plantarum</i>	Placebo	0.2 billion	Various; the duration of the antibiotic treatment	1, 3

					rin, macrolides	scarlet fever, etc.	nts clinics , etc.	PL02			
Thom as et al (2001)	USA	Prospective, RCT, double -blind	150 (65/85)	I: 143 (53.6 %) 57.2±18; C: 54.4±17. 4	β-lactams	NA	In-patient site hospital	<i>Lactobacillus rhamnosus</i> GG	Placebo	20 billion	2 weeks 1
Tursi et al (2004)	Italy	Prospective, RCT	70 (35/35)	I: 58.2 (27~71); C: 54.3 (31~66)	Amoxicilli n, tinidazole	<i>H. pylori</i> eradicatio n	Out-patient	<i>Lactobacillus casei</i> subsp. <i>casei</i> DG	Antibiotics-only	16 billion	10 days 1, 3
Vande rhoof et al (1999)	USA	RCT, double -blind	184 (88/96)	85 (45.2 %) 4	Amoxicilli n, clarithrom ycin, cefprozil	Otitis, pharangiti s, bronchitis, dermatolo gical, sinusitis	Pediatric hospital	<i>Lactobacillus rhamnosus</i> GG	Placebo	10 billion for childre n weighi ng <12 kg, 20 billion for weighi ng >12	1, 4, 5

										kg	
Wenus et al (2008)	Norway	RCT, double-blind	87 (46/41)	I: 41 (47.1 %)	58.8±16.5; C: 56.2±18.7	β-lactams (more than 60% patients)	NA	Single site hospital	<i>Lactobacillus rhamnosus</i> GG + <i>Lactobacillus acidophilus</i> La-5+ <i>Bifidobacterium lactis</i> Bb-12	Placebo 52.5 billion	2 weeks 1, 2
Yoon et al (2011)	Korea	Prospective, RCT, open-label	337 (151/186)	I: 151 (44.8 %)	53.7±11.1; C: 55.0±12.5	Moxifloxacin, amoxicillin	<i>H. pylori</i> eradication	Out-patient	<i>Lactobacillus acidophilus</i> HY 2177 + <i>Lactobacillus casei</i> HY 2743 + <i>Bifidobacterium longum</i> HY 8001 + <i>Streptococcus thermophilus</i> B-1	Antibiotics-only 15.18 billion	4 weeks 1, 3
Zheng et al (2012)	China	Prospective, RCT, multi-center, open-label	372 (193/179)	I: 244 (65.6 %)	13.9±9.3 ; C: 15.8±10	Penicillin, cephalosporin, macrolides	Pneumonia	In-patient	<i>Clostridium butyricum</i> + <i>Bifidobacterium infantis</i>	Placebo 5 billion	1 week 1

Abbreviations: NA=Not applicable; *H. pylori*=*Helicobacter pylori*; CFU=Colony forming unit; C=control; I=intervention; RCT=randomized controlled trials; 1=incidence of diarrhea; 2=*Clostridium difficile* infection rate; 3=total occurrence of adverse events; 4=mean duration of diarrhea; 5=mean stool frequency.