Supplementary material BMJ Open

First author		publicatio n		ы	ts		No. of trials	participan ts	protocol	Outcomes	of adverse events	bias	for random error	GRADE	
Campbell	Cannabino ids for treatment of chronic non-cancer pain; a systematic review of randomize d trials	2017	Systematic Review	nabinoids; Smoloed cannabis, cromucosa I extracts of cannabis- based medicine, and synthetic cannabino ids: nabilone, dronobinol and a novel THC analogue.	c pain, fibromyaig ia, rheumatoi d arthritis, and missed chronic pain.	Dissertation Abstracts (Proquest), Academic Search Premier (EBSCO), Clinical Trials.gov, Trials.gov, Trials.central.org, individual pharmaceutical company trials sites for El Lilly and GlaveSmithKline, OAlster (OCLC) and Google Scholar. Meditics. Elberg.	18 trials comparing the intervention with placebo	766	No No	The primary outcome was pain in adoption with chronic non-cancer pain. The secondary outcomes were sleep, fraction, and quality of life.		Yes, except for reporting bias, publication bias and for profit bias		No Yes	Overall there is evidence that carnabinoids are safe and mediatily effective in meuropathic pain with preliminary evidence of efficacy in fibrowrapids and rheumanid arthotis. Did not pool data for meta-analysis of data was described qualitatively.  Selective
4	Cannabino ida for Chronic Neuropathi c Pain: A Systematic Review and Meta- analysis		Review and Meta- analysis	, nabilene and nabisimols		Codimen Ulberry, POGOPHIO, Chickarhish, per, and Coople Scholar, and Google Scholar, and Google Scholar, and Society of Anesthesiology, the Unropean Society of Anaschesiology, International Association for the Study of Pain, Anenican Society of Registral Anesthesia and Pain Medicine, European Society of Registral Anesthesia and Pain Anesthesia and Pain Anesthesia and Pain Anesthesia and Pain Anesthesia and Pain Therapy of the Unropean Society of Registral Anesthesia and Pain Therapy in the United Pain Control of Pain, In the last 2 years were also searched.	trials comparing the intervention with placebol			The primary outcome was intensity of pain recorded after a minimum of 2 wavelet following initiation of selective carmelational of selective carmelational of selective carmelational observations, expenses on an INIS (II—no peak to administration, expenses or on an INIS (II—no peak to administration), expenses on an INIS (II—no peak to administration) of the III—no peak to a selection is pain soones (INIS/IVAS) by 2500 kt 2 weeks of administration of a limit of the III of II			adjustment for multiple teating was not performed as per recommend ations in the Cochrane Handbook.		connabined provide a small analysis to small analysis benefit is patients with cheoric neuropathic pain.
chez et. al	Systematic Review and Meta-anal ysis of Cannabis Treatment for Chronic Pain			synthetic derivates of THC, such as dronabinol , nabilone, or benzopyra noperidine (a synthetic nitrogen analog of THC)	pathologic al or traumatic origin		18	7	No	The primary outcome was intensity of pain as secred by memical rang scales. The Secondary outcomes were CNS related events.		Yes, except for reporting bias, detection bias and for profit bias		No	Currently available evisionic suggests evisionic suggests the cannabits threatment is moderately efficacious for breatment of chronic pain, but beneficial effects may be partially (or completely) offset by potentially serious harms.
	The Effectiven ess of Cannabino ids in the Managem ent of Chronic Nonrnalign ant Neuropothi c Pain: A Systematic Review	2015	Systematic Review	Phytecan nabinoids; smoked cannabis, cannabis, cannabis, cannabis, estracts (CBME) in the form of comucosa: I sprays (nabisimol 5), waporized cannabis, and synthetic cannabinoids; dronabinoids; dronabinoil nabilona, and CT-3	c pain	Publick, Embase, Web Of Science, and all workense-based medicine reviews and databases (Cochrane Database of Systematic Chok Database of Systematic Chib, Database of Trials Register (CCTR))		771	No	Outcomes considered wave reduction in pain intensity and adverse exverts.	Yes	Yes, except for, respecting bias, publication bias and for profit bias	No	No	Canable-Based medicinal extracts used in different populations of chronic non-malignare, neuropathic pain patients may provide effective analysis in coordinate that conditions that are refractively to other departments.
Mücke et. al	Cannobles products for adults with chronic neuropathi c pain	2018	Cochrane Review	Phytocan nabinoids: oromucosa I spray containing THC or THC/CBD mite, smoked camabis containing THC, THC and CBD as extract of cannabis sative L., and synthetic cannabino ids: nabilione, dronabinol		Cochrane Library, MTDLINE and TMBASE.  Following clinical trials databases were searched for additional data including unpublished data:  US National Institute and US National Institute	16 (15 of the trials comparing the intervention n with placebo)	1750	Yes	Primary autocomes: Protrispant-reported plan- relief of 50% or greater. We preferred composite neuropating plan plan plan plan measures were used by studies; Pott: [Putting and plan plan measures were used by studies; Pott: [Putting and plan measures were used by studies; Pott: [Putting and plan measures were used by studies; Pott: [Putting and plan measures were used by studies; Improved: Studies; Serious adverse events (solicely); Serious adverse (solicely); Serious adverse sevents typically include security potally include security potal	Yes	Yes	No	Yes	The potential benefits of cannolsh-based of cannolsh-based controlsh-based controlsh-based controlsh-based controlsh-based controlsh-based controlsh-based controlsh-based specific controlsh-based specific controlsh-based specific controlsh-based specific based controlsh-based controlsh
al	Efficacy of Cannabla- Bassed Medicines for Pain Managem ent: A Systematic Review and Meta- Analysis of Randomize d Controllad Trials		Meta- Analysis	oigarettes/ vaporizer, and synthetic cannabino ids: dromabinol and and CT-3, ajulemic acid, synthetic introgen analog of tetrahydro	(cuncer and non- cancer) pain and acute postoperat ive pain	MEDINE/Pubmed and in Google Scholer of in Google Scholer Medical Subject Heading (MeSH) Serms	43 trials comparing the intervention with both 'active drugs' and placebo	2457	No	The distorters measure with the control of the cont	Yes	Yes, except for, respecting blas, publication blas and for profit blas	No	No	The current systematic review taggests that cannabinoid-based medicines might be effective for choosing on immedicines might be effective for choosing on immedicines might be principled on immedicines might be principled in the control of the con
et. al	Are connabinol ds an effective and safe treatment option in the management of pain? A qualitative systematic review		Karelaur	synthetic nitrogen analogue of THC (NIB), oral benzopyra noperidine (BPP), and intramuscu lar levonantra dol	chronic non- malignant pain, and cancer pain	MEDLINE, EMBASE, Oxford Pain Dotabase, and Cochrane Library	9	222	No	Outcome measures for pain intensity; pain relief the use of supplementary analgesis; patients' preferences; and adverse effects.	Yes	Yes, except for, reporting blas, publication blas and for profit blas		No	Consistency of the control of the co
	and adverse effects of medical marijuans for chronic noncancer pain		Review	or waporitaer containing delta-9- THC	c pain	MEDUINE, EMBASE, and the International Plant Pla	6 trials comparing intervention n with placebo. Placebo being ciganettes or vaporizer containing 0% delta-9 THC or with cannabinoi d removal	226	No	For outcomes, pair socress were reconstant out of the vicual analysis society with the vicual analysis scale (VAS) or an alternative numerical pair rating soil. If pairwise rating soil, if pairwise rating soil, if pairwise reasons of effectiveness were included (piece, function, and quality of life. Frequency of soilous and most commonly reconstitutions of the vicual pairwise soil pairwise defectives.		Yes, except for, respecting the respecting bias, publication bias and for profit bias		No	There is evidence for the use of loved for the use of loved seem medical marijaans in refractory neuropathic pain no conjunction with traditional conjunction with traditional control of the control of
	A systematic review of the analgesic officacy of cannabinoi d medication s in the manageme nt of acute pain Cannabino		Review	Levonantra dol, nabilone, AZD1940, GW842166 , dronabinol , ± -9-THC	postoperat ive pain	MEDUNI, EMBASE, Cochrane Übeary, and the World Health Organization International Clinical Trials Registry Platform	comparing intervention n with placebo, Ketoprofen Pethidine, Naprosen, and Ibuprofen	611	Yes	The primary outcome was the qualitative analysis of the analgesic efficacy of cannobleoids in the management of acute pain compared to placebi or active comparator. The secondary outcome was the qualitative analysis of the reported adverse effects	,	Yes, except for, publication blas and for profit blas		Yes	Based on the available randomized controlled trial evidence, cannabinoids have no role in the management of acute pain.
al	Cannabino ids for fibromyalg ia	2016	Cochrane	Nabilone	Fibromyalg	Cochrane Library, MEDUINE and EMBASE	2 trials comparing the intervention n with either (1) placebo or (3) amitriptyli ne	72 (46)	Yes	Primary outcomes: Participant-reported pain- Participant-reported pain- Participant-reported pain- Participant-pain- Participant-	Yes	Yes, except for publication blas.	No	Yes	We found no connrioning, umbased, high quality evidence connrioning, umbased, high quality evidence suggesting that nasiones is of value in reading people with the country people with sociatability of in ambitione was fow in people with fibromystigs.