SUPPLEMENTARY MATERIALS

Pooled outcomes of endoscopic sleeve gastroplasty and how does it compare to laparoscopic sleeve gastrectomy at 12-months? A systematic review and meta-analysis

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SUPPLEMENTARY LEGEND

Supplementary Fig. 1 Flow diagram of study selection.

Supplementary Fig. 2 Forest plot, 1-month outcomes of ESG.

Supplementary Fig. 3 Forest plot, 6-month outcomes of ESG.

Supplementary Fig. 4 Forest plot, TWL at 12 months.

Supplementary Fig. 5 Forest plot, EWL at 12 months.

Supplementary Fig. 6 Forest plot, BMI at 12 months.

Supplementary Fig. 7 Forest plot, all adverse events.

Supplementary Fig. 8 Forest plot, bleeding.

Supplementary Fig. 9 Forest plot, GERD.

Supplementary Fig. 10 Funnel plot – all studies.

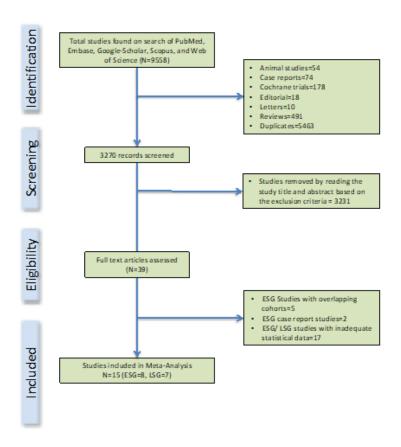
Supplementary Table 1 Study quality assessment.

Appendix-A: Literature search strategy

Appendix-B: MOOSE checklist. From: Stroup DF, Berlin JA, Morton SC et al. for the Meta-analysis Of Observational Studies in Epidemiology (MOOSE) Group. Meta-analysis of Observational Studies in Epidemiology. A Proposal for Reporting. JAMA. 2000;283(15):2008-2012. doi: 10.1001/jama.283.15.2008

Appendix-C: PRISMA checklist. 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

Supplementary Fig. 1 Flow diagram of study selection.



ESG: 1-month outcomes

Group by	Study name	Statisti	cs for eac	h study		Mea	n and 95	% CI	
Results		Mean	Lower limit	Upper limit					
ВМІ	Algahtani, 2019b	30.500	30.221	30.779					
BMI	Bhandari, 2019b	32.450	31.209	33.691					
BMI	Lopez-Nava, 2017b	35.500	34.710	36.290					
ВМІ	Sartoretto, 2018 Ausb	33.500	32.485	34.515					
BMI	Sartoretto, 2018 USb	31.200	29.896	32.504					
BMI		32.630	31.006	34.255					•
EWL	Algahtani, 2019e	40.200	38.012	42.388					, ,
EWL	Lopez-Nava, 2017e	24.800	22.668	26.932					
EWL	Sartoretto, 2018 Ause	29.400	26.436	32.364				_ −₁	■ I
EWL	Sartoretto, 2018 USe	39.200	21.799	56.601				-	
EWL		31.715	29.284	34.147					
TWL	Algahtani, 2019t	8.900	8.720	9.080					1
TWL	Bhandari, 2019t	8.260	7.355	9.165				ı	
TWL	Fayad, 2019t	9.900	9.282	10.518					
TWL	Lopez-Nava, 2017t	7.700	7.195	8.205					
TWL	Sartoretto, 2018 Aust	8.700	7.959	9.441				.	
TWL	Sartoretto, 2018 USt	9.100	5.503	12.697			-•	- ∣	
TWL		8.731	7.216	10.246					
					-40.00	-20.00	0.00	20.00	40.0

ESG: 6-month outcomes

Group by	Study name	Stati	stics for each	study		Mea	an and 95%	6 CI	
Results		Mean	Lower limit	Upper limit					
ВМІ	Alqahtani, 2019b	29.000	28.672	29.328	- 1	1	- 1		- 1
ВМІ	Barrichello, 2019b	29.210	28.838	29.582		- 1			
ВМІ	Bhandari, 2019b	29.160	28.293	30.027		- 1			
BMI	Lopez-Nava, 2017b	32.000	31.321	32.679		- 1			
ВМІ	Sartoretto, 2018 Ausb	31.700	30.932	32.468		- 1			
ВМІ	Sartoretto, 2018 USb	27.700	26.171	29.229		- 1			
ВМІ	Saumoy, 2018 b	33.940	32.882	34.998					
BMI		30.403	28.977	31.829		- 1		•	
EWL .	Alqahtani, 2019e	64.300	60.817	67.783				·	
EWL	Barrichello, 2019e	56.150	52.915	59.385		- 1			ГΙ
EWL	Lopez-Nava, 2017e	47.800	43.157	52.443				-	
EWL	Morales, 2018e	64.930	56.713	73.147		- 1		- 1 -	
EWL	Sartoretto, 2018 Ause	49.200	42.833	55.567		- 1		-=-	
WL	Sartoretto, 2018 USe	72.100	67.738	76.462		- 1			-
WL		59.369	56.951	61.788		- 1			-
WL	Algahtani, 2019t	13.700	13.279	14.121		- 1			
ΓWL	Barrichello, 2019t	14.250	13.508	14.992		- 1			
WL	Bhandari, 2019t	14.250	12.589	15.911		- 1			
WL	Fayad, 2019t	19.500	18.033	20.967		- 1		•	
ΓWL	Lopez-Nava, 2017t	15.800	14.679	16.921		- 1			
ΓWL	Morales, 2018t	15.450	14.499	16.401			-	- 1	
WL	Sartoretto, 2018 Aust	14.000	12.463	15.537			-	- 1	
WL	Sartoretto, 2018 USt	17.700	16.936	18.464		- 1		ı	
WL	Saumoy, 2018 t	13.430	12.148	14.712		- 1	■	- 1	
ΓWL		15.335	14.052	16.618		- 1	_	- 1	
					-80.00	-40.00	0.00	40.00	80.0

Supplementary Fig. 4 Forest plot, TWL at 12 months.

%TWL at 12-months

Group by	Study name	Outcome	Statis	stics for each	study		Mea	an and 95	<u>% С</u> I	
Intervention			Mean	Lower limit	Upper limit					
ESG	Alqahtani, 2019	TWL	15.000	14.523	15.477	- 1	- 1			- 1
ESG	Barrichello, 2019	TWL	15.060	14.324	15.796	- 1	- 1	•	•	
ESG	Fayad, 2019	TWL	21.300	19.601	22.999	- 1	- 1		-	
ESG	Lopez-Nava, 2017	TWL	18.200	16.605	19.795	- 1	- 1		.	
ESG	Morales, 2018	TWL	17.530	16.310	18.750	- 1	- 1	- 1 -	•	
ESG	Saumoy, 2018	TWL	15.800	14.154	17.446	- 1	- 1		•	
ESG	•		17.080	15.054	19.106	- 1	- 1		•	
LSG	El-Matbouly, 2018	TWL	23.100	20.655	25.545	- 1	- 1		 	
LSG	Wang, 2016	TWL	34.400	32.971	35.829	- 1	- 1		_	
LSG	Talebpour, 2018	TWL	33.320	30.699	35.941	- 1	- 1		≣∣	
LSG	, ,		30.452	27.411	33.493		- 1		•	
						-80.00	-40.00	0.00	40.00	80.00

Supplementary Fig. 5 Forest plot, EWL at 12 months.

%EWL at 12-months

Group by	Study name	Outcome	Statis	tics for each	study		Mea	an and 95%	<u>6 C</u> I	
Intervention			Mean	Lower limit	Upper limit					
ESG	Alqahtani, 2019	EWL	67.500	64.258	70.742		- 1	- 1		
ESG	Barrichello, 2019	EWL	59.410	55.786	63.034	- 1	- 1			
ESG	Lopez-Nava, 2017	EWL	52.600	47.657	57.543	- 1	- 1		■	-
ESG	Morales, 2018	EWL	75.400	61.706	89.094	- 1	- 1		-	-
ESG			62.995	51.346	74.644	- 1	- 1			
LSG	Lemaitre, 2016	EWL	64.000	61.928	66.072	- 1	- 1			Ĭ
LSG	El-Matbouly, 2018	EWL	49.480	44.179	54.781	- 1	- 1			
LSG	Wang, 2016	EWL	77.100	74.055	80.145	- 1	- 1			
LSG	Alvarenga, 2016	EWL	86.000	84.631	87.369	- 1	- 1			k
LSG	Zachariah, 2013	EWL	72.390	70.313	74.467	- 1	- 1			
LSG	Talebpour, 2018	EWL	65.450	59.977	70.923	- 1	- 1			-
LSG	,,		69.252	60.075	78.430		- 1	- 1		-
						-80.00	-40.00	0.00	40.00	80.00

Supplementary Fig. 6 Forest plot, BMI at 12 months.

BMI at 12-months

Group by	Study name	Outcome	Statis	stics for each	study		Mea	an and 95%	<u>6 C</u> I	
Intervention			Mean	Lower limit	Upper limit					
ESG	Alqahtani, 2019	BMI	28.600	28.253	28.947	- 1				- 1
ESG	Barrichello, 2019	BMI	28.910	28.488	29.332	- 1				
ESG	Bhandari, 2019	BMI	27.210	26.295	28.125	- 1	- 1			
ESG	Lopez-Nava, 2017	BMI	31.800	30.963	32.637	- 1				
ESG	Saumoy, 2018	BMI	33.510	32.377	34.643	- 1	- 1			
ESG			29.984	27.650	32.317	- 1	- 1			_
LSG	Lemaitre, 2016	BMI	32.100	31.536	32.664	- 1	- 1		i	
LSG	El-Matbouly, 2018	BMI	23.160	20.736	25.584	- 1			-	_
LSG	Wang, 2016	BMI	27.900	27.127	28.673	- 1	- 1			
LSG	Golomb, 2015	BMI	29.900	29.256	30.544	- 1	- 1			.
LSG	Zachariah, 2013	BMI	25.870	25.474	26.266	- 1				
LSG	Talebpour, 2018	BMI	36.090	34.493	37.687	- 1	- 1			
LSG	, ,		29.255	27.090	31.420		- 1	- 1		-
						-40.00	-20.00	0.00	20.00	40.00

Supplementary Fig. 7 Forest plot, all adverse events.

Adverse events

Group by	Study name	Statis	tics for each	study		Event rate and 95% CI					
Intervention		Event rate	Lower limit	Upper limit							
ESG	Algahtani, 2019	0.035	0.025	0.048	- 1	- 1		- 1	- 1		
ESG	Barrichello, 2019	0.021	0.008	0.054			•				
ESG	Bhandari, 2019	0.009	0.001	0.134			⊢				
ESG	Fayad, 2019	0.052	0.017	0.148							
ESG	Lopez-Nava, 2017	0.003	0.000	0.050			-				
ESG	Morales, 2018	0.027	0.010	0.070			.				
ESG	Sartoretto, 2018	0.043	0.014	0.125			■-				
ESG	Saumoy, 2018	0.016	0.004	0.060							
ESG		0.029	0.018	0.044			l l				
LSG	Lemaitre, 2016	0.150	0.121	0.184							
LSG	Wang, 2016	0.157	0.089	0.262			-	.			
LSG	Alvarenga, 2016	0.114	0.096	0.135							
LSG	Zachariah, 2013	0.035	0.018	0.069		- 1		- 1			
LSG	Talebpour, 2018	0.200	0.098	0.364		- 1	-	- 1			
LSG		0.118	0.084	0.164			•	- 1			
					-1.00	-0.50	0.00	0.50	1.00		

Supplementary Fig. 8 Forest plot, bleeding.

Bleeding

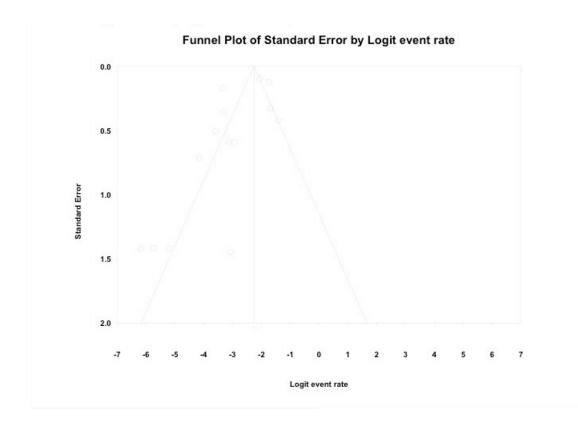
Group by	Study name					Event r	ate and	95% CI	
Intervention		Event rate	Lower limit	Upper limit					
ESG	Alqahtani, 2019	0.007	0.003	0.015		3371		- 1	- 1
ESG	Barrichello, 2019	0.010	0.003	0.040					
ESG	Bhandari, 2019	0.009	0.001	0.134			-		
ESG	Fayad, 2019	0.034	0.009	0.128			-		
ESG	Morales, 2018	0.007	0.001	0.046			+		
ESG	Sartoretto, 2018	0.029	0.007	0.107			-		
ESG	Saumoy, 2018	0.004	0.000	0.059			+		
ESG		0.011	0.007	0.018					
LSG	Lemaitre, 2016	0.024	0.014	0.042					
LSG	Wang, 2016	0.029	0.007	0.107			-		
LSG	Alvarenga, 2016	0.029	0.021	0.042					
LSG	Zachariah, 2013	0.002	0.000	0.034			+		
LSG	Talebpour, 2018	0.014	0.001	0.191	- 1		\vdash		
LSG		0.026	0.019	0.037	- 1		•		
					-1.00	-0.50	0.00	0.50	1.00

Supplementary Fig. 9 Forest plot, GERD.

GERD

Group by	Study name					Event r	ate and	95% CI	
Intervention		Event rate	Lower limit	Upper limit					
ESG	Alqahtani, 2019	0.001	0.000	0.008			•	- 1	1
ESG	Barrichello, 2019	0.003	0.000	0.040					
ESG	Bhandari, 2019	0.009	0.001	0.134			•		
ESG	Fayad, 2019	0.009	0.001	0.123			•		
ESG	Morales, 2018	0.003	0.000	0.052					
ESG	Sartoretto, 2018	0.007	0.000	0.104			•		
ESG	Saumoy, 2018	0.004	0.000	0.059					
ESG		0.004	0.001	0.011					
LSG	Lemaitre, 2016	0.093	0.070	0.122					
LSG	Wang, 2016	0.029	0.007	0.107			-		
LSG	Alvarenga, 2016	0.060	0.047	0.076					
LSG	Zachariah, 2013	0.002	0.000	0.034			+		
LSG	Talebpour, 2018	0.014	0.001	0.191			-		
LSG		0.058	0.035	0.093			•		
					-1.00	-0.50	0.00	0.50	1.00

Supplementary Fig. 10 Funnel plot – all studies.



Supplementary Table 1 Study quality assessment.

	Selection				Comparability	Outcome			Score	Quality
	Representativeness of the average adult in community	Cohort size	Information on weight-loss outcomes	Outcome not present at start	factors comparable between the groups	Adequate clinical assessment	Follow up time of 12- months	Adequacy of follow-up		
Study	population based: 1; multi-center: 0.5; single-center: 0	> 40 patients: 1; 39 to 20: 0.5; < 20: 0	information with clarity: 1; information derived from percentage value: 0.5; unclear: 0	not present: 1; present: 0	yes: 1; no: 0	yes: 1; no: 0	yes: 1; not mentioned: 0	all patients followed up: 1; > 50% followed up: 0.5; < 50% followed up OR not mentioned: 0	Max=8	High > 6, medium 4 to 6, low < 4
Alqahtani, 2019	0	1	1	1	1	1	1	0	6	Medium
Barrichello, 2019	0.5	1	1	1	1	1	1	0.5	7	High
Bhandari, 2019	0	1	1	1	1	1	1	0.5	6.5	High
Fayad, 2019	0	1	1	1	1	1	1	0	6	Medium
Lopez- Nava, 2017	0	1	1	1	1	1	1	0	6	Medium
Morales, 2018	0	1	1	1	1	1	1	0	6	Medium
Sartoretto, 2018	0.5	1	1	1	1	1	1	0	6.5	High
Saumoy, 2018	0	1	1	1	1	1	1	0	6	Medium
Lemaitre, 2016	0	1	1	1	1	1	1	0	6	Medium
El- Matbouly, 2018	0	1	1	1	1	1	1	0	6	Medium
Wang, 2016	0	1	1	1	1	1	1	0	6	Medium
Golomb, 2015	0	1	1	1	1	1	1	0	6	Medium
Alvarenga, 2016	0	1	1	1	1	1	1	0	6	Medium
Zachariah, 2013	0	1	1	1	1	1	1	0	6	Medium
Talebpour, 2018	0	0.5	1	1	1	1	1	0	5.5	Medium

Appendix-A: Literature search strategy

Endoscopic sleeve gastroplasty versus laparoscopic sleeve gastrectomy: A systematic review and comparative meta-analysis.

	a	b	С
			Obesity/weight loss
MeSH	"Endoscopy,	"Gastrectomy"[Mesh]	"Overnutrition"[Mesh]
	Gastrointestinal"[Mesh]	"Gastroplasty"[Mesh]	(includes obesity and all
		"Bariatric Surgery"[Mesh]	its subtypes
			"Weight Loss"[Mesh]
Emtree	'gastrointestinal	'gastrectomy'/exp	'overnutrition'/exp
	endoscopy¹/exp	'gastroplasty'/exp	body weight loss'/exp
Emtree	'sleeve gastrectomy'/exp		
Keywords	Sleeve	Gastrectomy	Obese
	Endoscopy	Gastrectomies	Obesity
	Endoscopic	Gastroplasty	Weight
	Endoscopies	Gastroplasties	Overweight
		Bariatric therapy	
		Bariatric surgery	
		Gastric resection	

https://bestpractice.bmj.com/info/toolkit/learn-ebm/study-design-search-filters/

Medline randomised controlled trial strategy

- 1. "randomized controlled trial".pt.
- 2. {random\$ or placebo\$ or single blind\$ or double blind\$ or triple blind\$).ti,ab.
- 3. (retraction of publication or retracted publication).pt.
- 4. or/1-3
- 5. (animals not humans).sh.
- {{comment or editorial or meta-analysis or practice-guideline or review or letter) not "randomized controlled trial").pt.
- (random sampl\$ or random digit\$ or random effect\$ or random survey or random regression).ti,ab. not "randomized controlled trial".pt.
- 8. 4 not (5 or 6 or 7)

Embase RCT filte

- ${\bf 1.} \quad \hbox{\{random\$ or placebo\$ or single blind\$ or double blind\$ or triple blind\$).} ti,ab.$
- 2. RETRACTED ARTICLE/

Appendix-B: MOOSE checklist. From: Stroup DF, Berlin JA, Morton SC et al. for the Meta-analysis Of Observational Studies in Epidemiology (MOOSE) Group. Meta-analysis of Observational Studies in Epidemiology. A Proposal for Reporting. JAMA. 2000;283(15):2008-2012. doi: 10.1001/jama.283.15.2008

MOOSE Checklist for Meta-analyses of Observational Studies

Item No	Recommendation	Reported on Page No
Reporting	of background should include	
1	Problem definition	4
2	Hypothesis statement	-
3	Description of study outcome(s)	4
4	Type of exposure or intervention used	4-6
5	Type of study designs used	5-7
6	Study population	6
Reporting	of search strategy should include	
7	Qualifications of searchers (eg, librarians and investigators)	5
8	Search strategy, including time period included in the synthesis and key words	5
9	Effort to include all available studies, including contact with authors	6
10	Databases and registries searched	5
11	Search software used, name and version, including special features used (eg, explosion)	-
12	Use of hand searching (eg, reference lists of obtained articles)	5
13	List of citations located and those excluded, including justification	-
14	Method of addressing articles published in languages other than English	-
15	Method of handling abstracts and unpublished studies	5
16	Description of any contact with authors	6
Reporting	of methods should include	
17	Description of relevance or appropriateness of studies assembled for assessing the hypothesis to be tested	6-8
18	Rationale for the selection and coding of data (eg, sound clinical principles or convenience)	6-8
19	Documentation of how data were classified and coded (eg, multiple raters, blinding and interrater reliability)	6-8
20	Assessment of confounding (eg, comparability of cases and controls in studies where appropriate)	6-8
21	Assessment of study quality, including blinding of quality assessors, stratification or regression on possible predictors of study results	6-8
22	Assessment of heterogeneity	7-8

23	Description of statistical methods (eg, complete description of fixed or random effects models, justification of whether the chosen models account for predictors of study results, dose-response models, or cumulative meta-analysis) in sufficient detail to be replicated	7-8
24	Provision of appropriate tables and graphics	Tables 1,2, Figs 1-10
Reporting	of results should include	
25	Graphic summarizing individual study estimates and overall estimate	Figs 2-10
26	Table giving descriptive information for each study included	Table 1
27	Results of sensitivity testing (eg. subgroup analysis)	Table 2 Reported
Item No	Recommendation	on Page No
Reporting	of discussion should include	
29	Quantitative assessment of bias (eg, publication bias)	10, fig 11
30	Justification for exclusion (eg, exclusion of non-English language citations)	-
31	Assessment of quality of included studies	Supple table-1
Reporting	of conclusions should include	
32	Consideration of alternative explanations for observed results	11-13
33	Generalization of the conclusions (ie, appropriate for the data presented and within the domain of the literature review)	11-13
34	Guidelines for future research	12
35	Disclosure of funding source	2

Appendix-C: PRISMA checklist. 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

Section/topic	#	Checklist item	Reported on page #		
TITLE					
Title	1	Identify the report as a systematic review, meta-analysis, or both.	1		
ABSTRACT	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.	3		
INTRODUCTION					
Rationale	3	Describe the rationale for the review in the context of what is already known.	4		
Objectives	4	Provide an explicit statement of questions being addressed with reference to participants, interventions, comparisons, outcomes, and study design (PICOS).	4		
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.	5-8		
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.	5-8		
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.	5-8		
Search	8	Present full electronic search strategy for at least one database, including any limits used, such that it could be repeated.	5-8		
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).	5-8		
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.	5-8		
Data items	11	List and define all variables for which data were sought (e.g., PICOS, funding sources) and any assumptions and simplifications made.	5-8		
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.	5-8		

Summary measures	13	State the principal summary measures (e.g., risk ratio, difference in means).	5-8
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.	5-8

Page 1 of 2

		Page 1 or 2	
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).	6
Additional analyses	16	Describe methods of additional analyses (e.g., sensitivity or subgroup analyses, meta-regression), if done, indicating which were prespecified.	7
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.	8-9
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.	8-9
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).	8-9, supple table-1
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.	8-9
Synthesis of results	21	Present the main results of the review. If meta-analyses are done, include for each, confidence intervals and measures of consistency	8-9
Risk of bias across studies	22	Present results of any assessment of risk of bias across studies (see Item 15).	Supple tabl-1
Additional analysis	23	Give results of additional analyses, if done (e.g., sensitivity or subgroup analyses, meta-regression [see Item 16]).	8-9
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).	11-13
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).	12
Conclusions	26	Provide a general interpretation of the results in the context of other evidence, and implications for future research.	13
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.	2