

Appendix 3: Excluded studies

	Study # 1	Study # 2	Study # 3	Study # 4	Study # 5
Title	<i>Csf diversion in aneurysmal subarachnoid hemorrhage: How low should we go?</i>	<i>Gradual External Ventricular Drainage Weaning Reduces The Risk of Shunt Dependency After Aneurysmal Subarachnoid Hemorrhage: a Pooled Analysis</i>	<i>A comment to: "Gradual External Ventricular Drainage Weaning Reduces The Risk of Shunt Dependency After Aneurysmal Subarachnoid Hemorrhage: a Pooled Analysis"</i>	<i>Continuous cerebral spinal fluid drainage associated with complications in patients admitted with subarachnoid hemorrhage</i>	<i>An early EVD clamp trial approach for subarachnoid hemorrhage is associated with a lower ventriculoperitoneal shunt rate, shorter length of stay, and fewer EVD complications-a retrospective study</i>
Authors	Fugate J; Rabenstein A; Wijdicks E; Freeman W; Lanzino G.	Jabbarli R; Pierscianek D; Rolz R; Reinhard M; Darkwah Oppong M; Scheiwe C; Dammann P; Kaier K; Wrede KH; Shah M; Zentner J; Sure U.	Lilja-Cyron A; Mathiesen T.	Olson DM; Zomorodi M; Britz GW; Zomorodi AR; Amato A; Graffagnino C.	Rao S; Wolcott ZC; Chung DY; Sheriff F; Khawaja A; Patel AB; Kimberly WT; Rordorf GA.
Year of publication	2014	2018	2018	2013	2017
Journal	Neurology CONFERENCE START: 2014 Apr 26 CONFERENCE END: 2014 May 3 2014;82(10 SUPPL. 1): Lippincott Williams and Wilkins MISC1 - 20140527 2014	Operative Neurosurgery (hagerstown, md 2018;15(5):498-504 United States.nlm (Medline)	Operative neurosurgery 2018;(5):504-504 2018	Journal of neurosurgery ;119(4):974-980 United States American Association of Neurological Surgeons (1224 West Main Street Suite 450, Charlottesville VA 22903, United States)	Neurocritical care 2017; Conference: 15th Annual Meeting of the Neurocritical Care Society, NCS 2017. United States. 27(2 Supplement 1):S3 Netherlands Humana Press Inc. 2017
Objective	To evaluate the feasibility of	To evaluate the role of external ventricular	Comment to existing article	To explore whether continuous or	To determine the optimal approach of

	randomizing patients with aneurysmal subarachnoid haemorrhage and hydrocephalus to "aggressive" vs "conventional" cerebrospinal drainage	drainage (EVD) weaning on risk of shunt dependency after SAH		intermittent CSF drainage was superior for reducing vasospasm	gradual wean vs. early clamp trial in nontraumatic SAH requiring EVD
Study design	2-center, prospective, randomized pilot study	Observational cohort study		Randomized clinical trial	Retrospective study
Intervention	Aggressive CSF drainage with EVD open to 5 mmHg vs. conventional CSF drainage with EVD open to 15 mmHg	Rapid weaning vs. gradual weaning of EVD treatment in SAH survivors		Continuous CSF drainage with intermittent intracranial pressure (ICP) monitoring (open-EVD group) vs. continuous ICP monitoring with intermittent CSF drainage (monitor-ICP group)	Gradual wean vs. early clamp trial in nontraumatic SAH requiring EVD
Patients	20 (13 in the aggressive group)	965 (455 in the rapid wean group and 510 in the gradual weaning group)		60 patients (division between groups unknown)	200
Outcomes		Development and timing of shunt dependency		Incidence of cerebral artery vasospasm	VP shunt rate NICU and hospital LOS EVD duration EVD related infections
Reason(s) for exclusion	Wrong intervention Full-text not available	Wrong study design	Wrong study design	Wrong intervention	Wrong study design Full-text not available