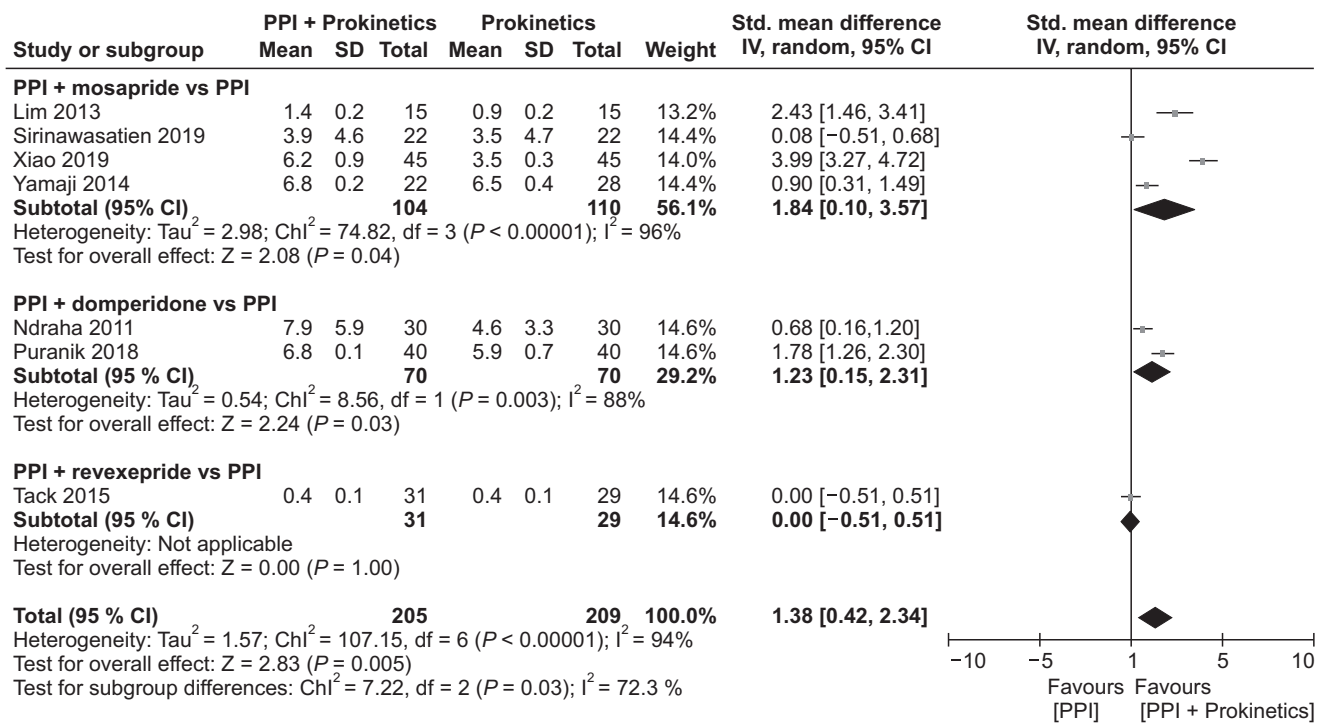
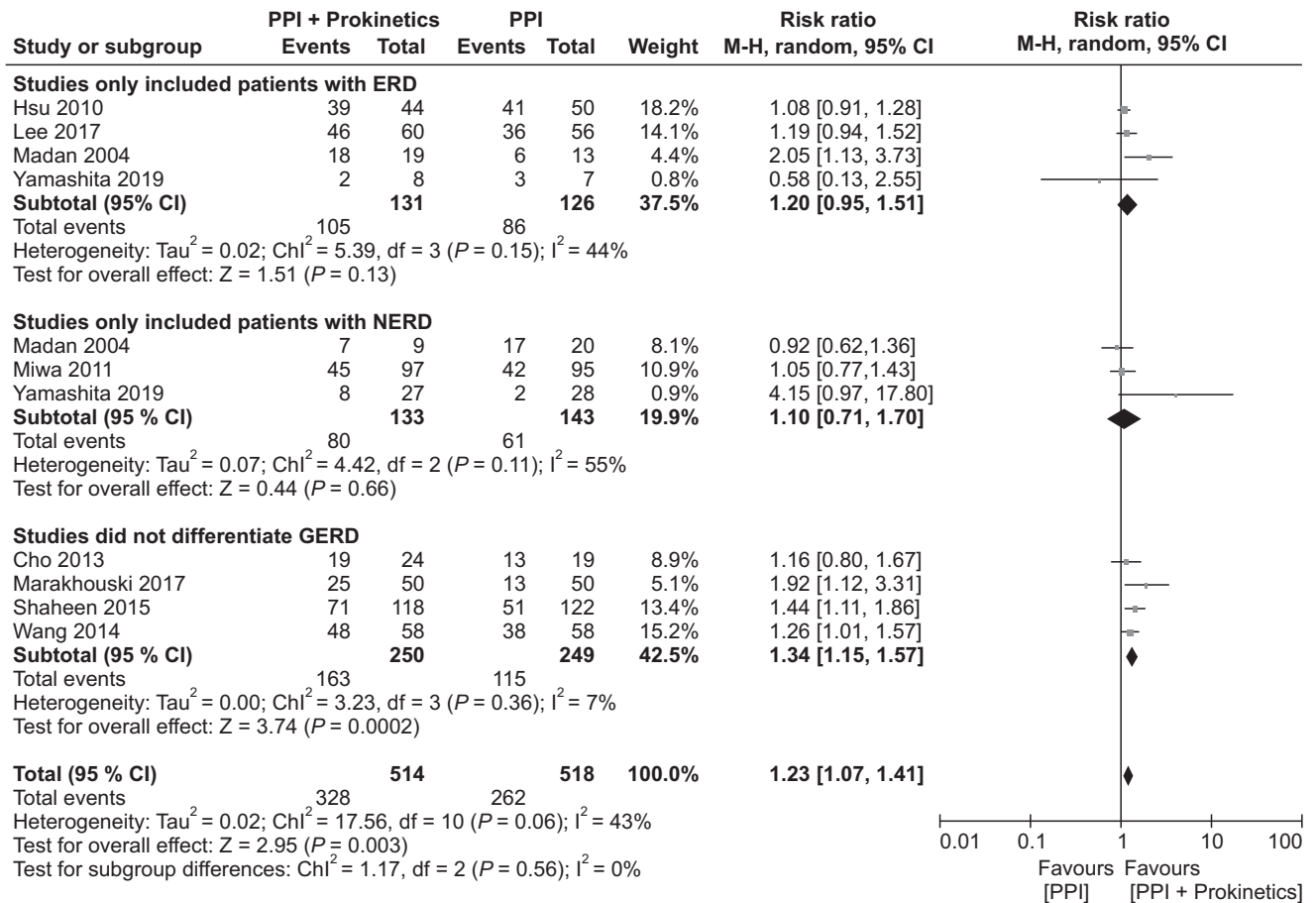


	Random sequence generation (selection bias)	Allocation concealment (selection bias)	Blinding of participants and personnel (performance bias)	Blinding of outcome assessment (detection bias)	Incomplete outcome data (attrition bias)	Selective reporting (reporting bias)	Other bias
Cho 2013	⊕	⊕	⊕	⊕	⊕	⊕	⊕
Hsu 2010	⊕	⊕	⊕	⊕	⊕	⊕	⊕
Lee 2017	⊕	⊕	⊕	⊕	⊕	⊕	⊕
Lim 2013	⊕	⊕	⊕	⊕	⊕	⊕	⊕
Madan 2004	⊕	⊕	⊕	⊕	⊕	⊕	⊕
Marakhouki 2017	⊕	⊕	⊕	⊕	⊕	⊕	⊕
Miwa 2011	⊕	⊕	⊕	⊕	⊕	⊕	⊕
Ndraha 2011	⊕	⊕	⊕	⊕	⊕	⊕	⊕
Puranik 2018	⊕	⊕	⊕	⊕	⊕	⊕	⊕
Shaheen 2015	⊕	⊕	⊕	⊕	⊕	⊕	⊕
Sirinawasatien 2019	⊕	⊕	⊕	⊕	⊕	⊕	⊕
Tack 2015	⊕	⊕	⊕	⊕	⊕	⊕	⊕
Wang 2014	⊕	⊕	⊕	⊕	⊕	⊕	⊕
Xiao 2019	⊕	⊕	⊕	⊕	⊕	⊕	⊕
Yamaji 2014	⊕	⊕	⊕	⊕	⊕	⊕	⊕
Yamashita 2019	⊕	⊕	⊕	⊕	⊕	⊕	⊕

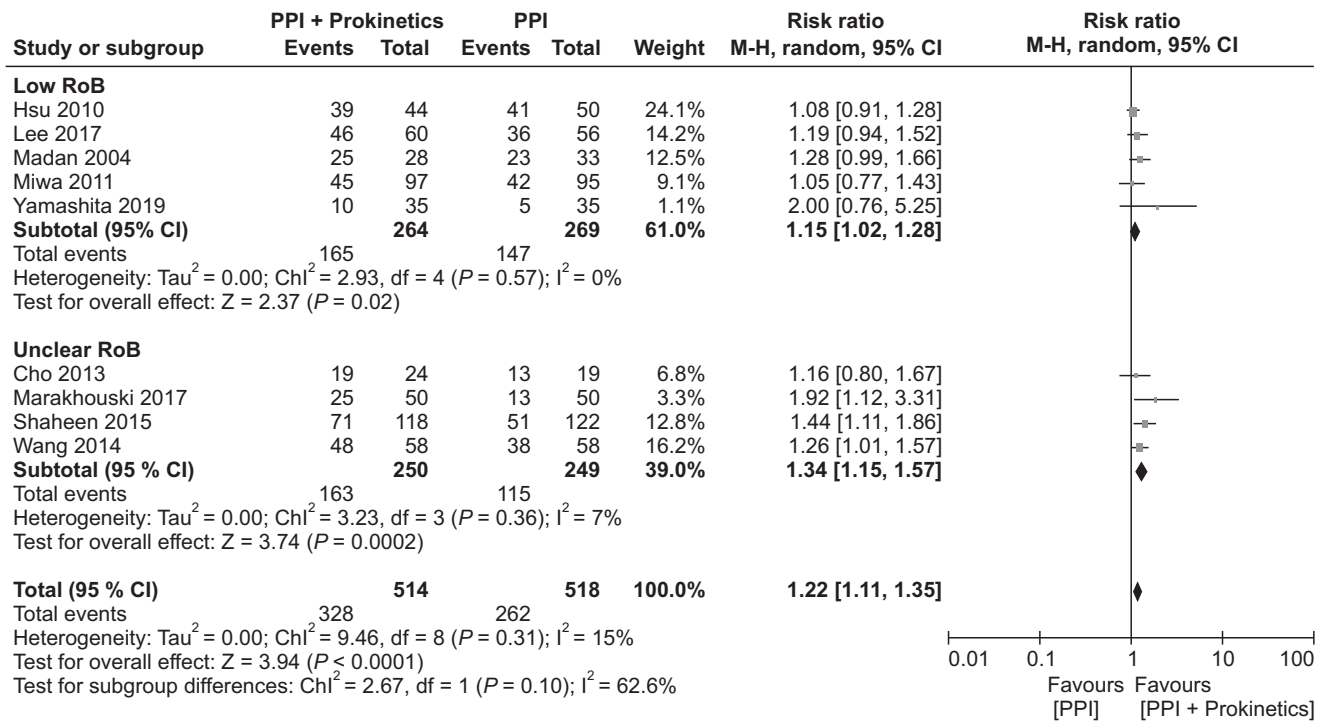
Supplementary Figure 1. Risk of bias of the enrolled studies.



Supplementary Figure 2. Forest plot comparing proton pump inhibitor (PPI) plus prokinetics and PPI monotherapy in patients with gastro-esophageal reflux disease in term of symptom improvement, subgrouped by individual prokinetic.



Supplementary Figure 3. Forest plot comparing proton pump inhibitor (PPI) plus prokinetics and PPI monotherapy in patients with gastroesophageal reflux disease in term of symptom improvement, subgrouped by gastroesophageal reflux disease subtype.



Supplementary Figure 4. Forest plot comparing proton pump inhibitor (PPI) plus prokinetics and PPI monotherapy in patients with gastro-esophageal reflux disease in term of symptom improvement, subgrouped by risk of bias.