

Supplementary material

Table A1 Search strategy for the systematic literature search.

Categories [AND]	Search terms [OR]
Colon	Colon[MeSH], colon[Title/Abstract], colorectal[Title/Abstract], rectum[Title/Abstract]
Polyps	Colonic polyps[MeSH], polyps[MeSH], polyp*[Title/Abstract], lesion[Title/Abstract], adenoma[MeSH], adenoma[Title/Abstract], adenomatous[Title/Abstract], neoplasia[Title/Abstract], Neoplasm*[MeSH]
Colon capsule endoscopy	Colon capsule endoscopy[Title/Abstract], capsule endoscopy[Title/Abstract], capsule endoscopy[MeSH]

Table A2 Risk of bias inf included studies.

Author, year	Patient selection	Risk of bias			Flow and Timing
		Index test	Reference standard		
Rex, 2015	😊	😊	😊		😊
Voska, 2019	😊	😊	😊		😊
Holleran, 2014	😊	😊	😊		😊
Rondonotti, 2014	😊	😊	😊		😊
Kobaek-Larsen, 2017	😊	😊	😊		😊
Pecere, 2019	😊	😊	😊		😊
Parodi, 2018	😊	😊	😊		😊
Kroijer, 2019	😊	😊	😊		😊
Eliakim, 2009	😊	😊	😊		😊
Spada, 2011	😊	😊	😊		😊
Hagel, 2014	😊	😊	😊		😊
Morgan, 2016	😊	😊	😊		😊

The study of Adrian-de-Ganzo et al was not evaluated with QUADAS-2 as it was not a diagnostic accuracy study.

😊, Low risk of bias.

😊, High risk of bias.

😐, Unclear risk of bias.

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Table A3 Study-related adverse events for CCE and OC examinations.

Author, year	Mild adverse events (n, %)	Related to (n, %)			Moderate/ serious adverse events (n)	Related to (n, %)	
		Bowel preparation	CCE	OC		CCE	OC
Rex, 2015 [19]	142 (20.6)	128 (90.1)	3 (2.1)	11 (7.7)	0	-	-
Voska, 2019 [22]	6 (2.7)	2 (33.3)	-	4 (66.6)	0	-	-
Holleran, 2014 [14]	0 (0)	-	-	-	1	-	1 (100)
Rondonotti, 2014 [24]	0 (0)	-	-	-	0	-	-
Kobaek- Larsen, 2017 [21]	0 (0)	-	-	-	7	-	7 (100)
Pecere, 2019 [23]	45 (25.3)	45 (100)	-	-	0	-	-
Adrian-de- Ganzo, 2015 [25]	4 (1.7)	-	1 (25.0)	3 (75.0)	0	-	-
Parodi, 2018 [26]	15 (8.5)	-	9 (60)	6 (40)	0	-	-
Kroijer, 2019 [27]	12 (6.7)	12 (100)	-	-	0	-	-
Eliakim, 2009 [20]	7 (7.1)	7 (100)	-	-	0	-	-
Spada, 2011 [28]	8 (7.3)	5 (62.5)	2 (25.0)	1 (12.5)	0	-	-
Hagel, 2014 [18]	1 (4.2)	1 (100)	-	-	0	-	-
Morgan, 2016 [29]	0 (0)	-	-	-	0	-	-
Total	240 (10.3)	200 (83.3)	15 (6.3)	25 (10.4)	8	-	8 (100)

CCE, colon capsule endoscopy; OC, optical colonoscopy.

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Table A4 Sensitivity and specificity of CCE in included studies.

Author, year	Any polyps	Sensitivity (%)			Specificity (%)		
		Polyps ≥ 6 mm	Polyps ≥ 10 mm	Adenoma ≥ 6 mm	Any polyps	Polyps ≥ 6 mm	Polyps ≥ 10 mm
Rex, 2015 [19]	-	87	85	91	-	94	97
Voska, 2019 [22]	82	79	88	-	100	97	83
Holleran, 2014 [14]	95	-	89	-	-	86	-
Rondonotti, 2014 [24]	-	88	93	-	-	65	-
Kobaek-Larsen, 2017 [21]*	-	-	87 ^a	-	-	-	96
Pecere, 2019 [23]	-	-	-	81	85	-	-
Adrian-de- Ganzo, 2015 [25] ^t	-	-	-	-	-	-	-
Parodi, 2018 [26]	-	91	89	95	91	-	-
Kroijer, 2019 [27]	88 [§]	-	-	-	-	-	92
Eliakim, 2009 [20]	-	89	88	-	-	76	-
Spada, 2011 [28]	-	84	88	90	93	-	-
Hagel, 2014 [18]	82	72 ^c	75 ^c	-	-	86	64
Morgan, 2016 [29]	-	93	100	-	-	-	91 [#]
						80	95
						80	93

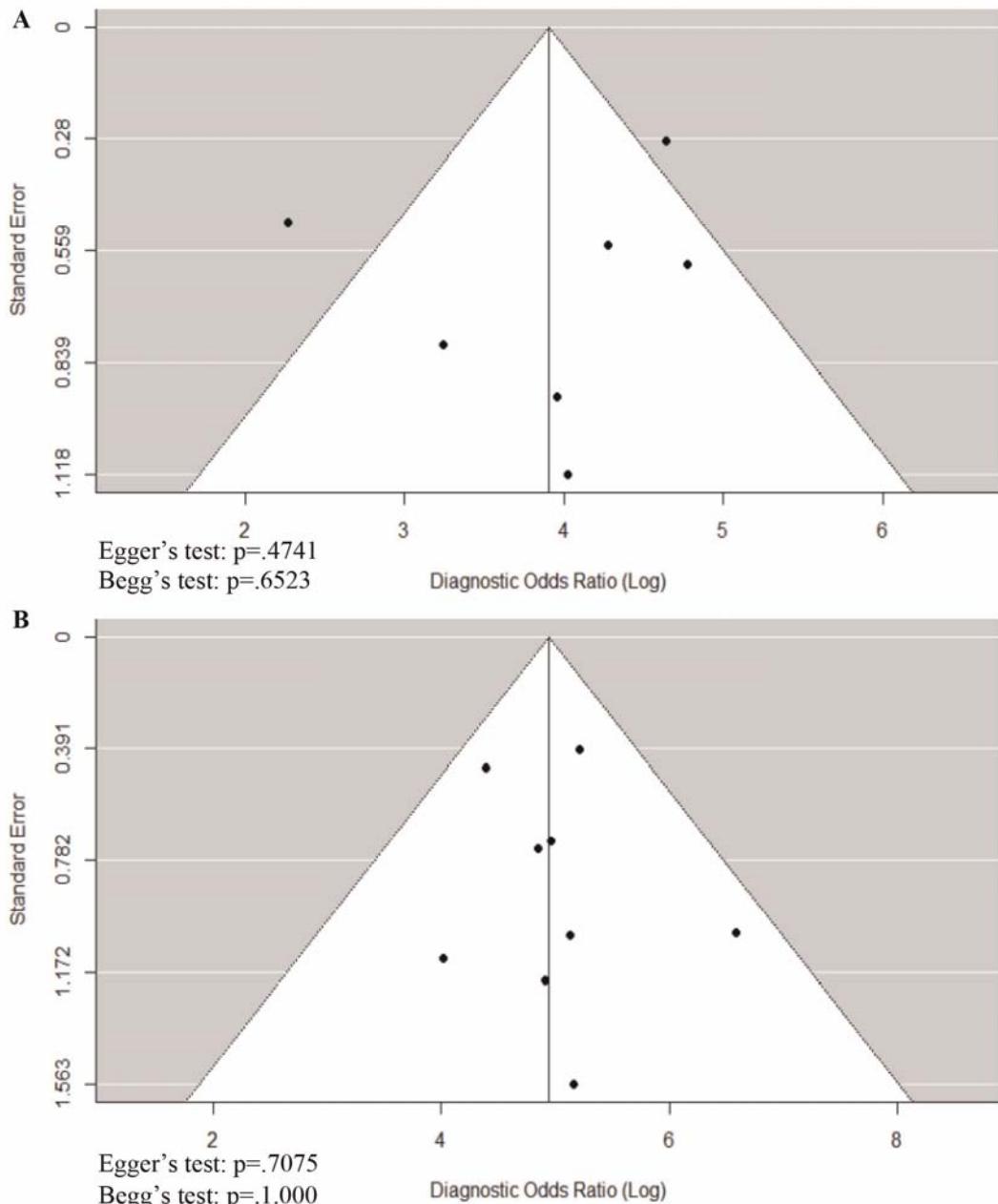
* Polyps > 9 mm.

^t Parallel study groups for CCE & OC, no per-patient or per-polyp analysis possible.

[#] Per-polyp analysis.

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Fig. A1 Funnel plots for publication bias of studies with polyps ≥ 6 mm (A, n=7) and ≥ 10 mm (B, n=9).



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Fig. A2 Pooled diagnostic odds ratios for polyps ≥ 6 mm (A) and ≥ 10 mm (B).

