Supplemental material

Supplementary Table 1. PRISMA-P (Preferred Reporting Items for Systematic review and Meta-Analysis Protocols) 2015 checklist: recommended items to address in a systematic review protocol*.

Section and topic	Item No	Checklist item	Reported on page (with quotes from the text if necessary)
ADMINISTRATIVE INFORMATION			
Title:			
Identification	1a	Identify the report as a protocol of a systematic review	P.1 (Title) and P.6 (last sentence of the Introduction)
Update	1b	If the protocol is for an update of a previous systematic review, identify as such	P.6
Registration	2	If registered, provide the name of the registry (such as PROSPERO) and registration number	P.6 (*"PROSPERO (CRD42021295352)"*)
Authors:			
Contact	3a	Provide name, institutional affiliation, e-mail address of all protocol authors; provide physical mailing address of corresponding author	P.1-2 (Title page)
Contributions	3b	Describe contributions of protocol authors and identify the guarantor of the review	P.15 and P.16 (section 4. and "*Contributions of authors' statement*")
Amendments	4	If the protocol represents an amendment of a previously completed or published protocol, identify as such and list changes; otherwise, state plan for documenting important protocol amendments	N/A (but the search algorithm is an update of Cortese et al. in Lancet Psychiatry 2018; see section 2.2.1. and supplementary material)
Support:			
Sources	5a	Indicate sources of financial or other support for the review	P. 16 ("*Role of funding source*")
Sponsor	5b	Provide name for the review funder and/or sponsor	N/A
Role of sponsor or funder	5c	Describe roles of funder(s), sponsor(s), and/or institution(s), if any, in developing the protocol	N/A
INTRODUCTION			

Rationale	6	Describe the rationale for the review in the context of what is already known	P. 5-6 (the entire Introduction)
Objectives	7	Provide an explicit statement of the question(s) the review will address with reference to participants, interventions, comparators, and outcomes (PICO)	P. 6 (last paragraph of the Introduction)
METHODS			
Eligibility criteria	8	Specify the study characteristics (such as PICO, study design, setting, time frame) and report characteristics (such as years considered, language, publication status) to be used as criteria for eligibility for the review	P. 7-9 (sections 2.1.1. and 2.1.2. and 2.1.3. and 2.1.4.)
Information sources	9	Describe all intended information sources (such as electronic databases, contact with study authors, trial registers or other grey literature sources) with planned dates of coverage	P. 9-10 (sections 2.2.1. and 2.2.2.)
Search strategy	10	Present draft of search strategy to be used for at least one electronic database, including planned limits, such that it could be repeated	P. 9-10 and supplementary material
Study records:			
Data management	11a	Describe the mechanism(s) that will be used to manage records and data throughout the review	P. 11 (section 2.2.3.)
Selection process	11b	State the process that will be used for selecting studies (such as two independent reviewers) through each phase of the review (that is, screening, eligibility and inclusion in meta-analysis)	P. 11 (section 2.2.3.)
Data collection process	11c	Describe planned method of extracting data from reports (such as piloting forms, done independently, in duplicate), any processes for obtaining and confirming data from investigators	P. 11 (sections 2.2.3. and 2.3.)
Data items	12	List and define all variables for which data will be sought (such as PICO items, funding sources), any pre-planned data assumptions and simplifications	P. 11 (section 2.3.
Outcomes and prioritization	13	List and define all outcomes for which data will be sought, including prioritization of main and additional outcomes, with rationale	P. 8 (section 2.1.3.)
Risk of bias in individual studies	14	Describe anticipated methods for assessing risk of bias of individual studies, including whether this will be done at the outcome or study level, or both; state how this information will be used in data synthesis	P. 12
Data synthesis	15a	Describe criteria under which study data will be quantitatively synthesised	P. 12 (section 2.5.1.)
	15b	If data are appropriate for quantitative synthesis, describe planned summary measures, methods of handling data and methods of combining data from studies, including any planned exploration of consistency (such as I^2, Kendall's τ)	P.13-14 (section 2.5.2.)
	15c	Describe any proposed additional analyses (such as sensitivity or subgroup analyses, meta-regression)	P. 14 (assessment of the distribution of clinical and methodological variables that could act as effect modifiers across treatment comparisons, NMA meta-regressions and subgroup analysis)
	15d	If quantitative synthesis is not appropriate, describe the type of summary planned	N /A

Meta-bias(es)	16	Specify any planned assessment of meta-bias(es) (such as publication bias across studies, selective reporting within studies)	P. 12-14 (section 2.4.)
Confidence in cumulative evidence	17	Describe how the strength of the body of evidence will be assessed (such as GRADE)	P. 13 (*"The Confidence In Network Meta-Analysis (CINeMA) software will be used to assess the confidence of evidence contributing to each network estimate"*)

*** It is strongly recommended that this checklist be read in conjunction with the PRISMA-P Explanation and Elaboration (cite when available) for important clarification on the items. Amendments to a review protocol should be tracked and dated. The copyright for PRISMA-P (including checklist) is held by the PRISMA-P Group and is distributed under a Creative Commons Attribution Licence 4.0.**

From: Shamseer L, Moher D, Clarke M, Ghersi D, Liberati A, Petticrew M, Shekelle P, Stewart L, PRISMA-P Group. Preferred reporting items for systematic review and meta-analysis protocols (PRISMA-P) 2015: elaboration and explanation. BMJ. 2015 Jan 2;349(jan02 1):g7647.

Supplementary Table 2. PRISMA NMA Checklist of Items to Include When Reporting A Systematic Review Involving a Network Meta-analysis.

Section/Topic	Item #	Checklist Item	Reported on Page #
TITLE			
Title	1	Identify the report as a systematic review *incorporating a network meta-analysis (or related form of meta-analysis).*	P. 1 (Title) and P. 6 (last sentence of the Introduction)
ABSTRACT			
Structured summary	2	Provide a structured summary including, as applicable: **Background:** main objectives **Methods:** data sources; study eligibility criteria, participants, and interventions; study appraisal; and *synthesis methods, such as network meta-analysis.* **Results:** number of studies and participants identified; summary estimates with corresponding confidence/credible intervals; *treatment rankings may also be discussed. Authors may choose to summarize pairwise comparisons against a chosen treatment included in their analyses for brevity.* **Discussion/Conclusions:** limitations; conclusions and implications of findings. **Other:** primary source of funding; systematic review registration number with registry name.	P. 3 P.3 P.3 N/A (protocol article) N/A (protocol article) P.3
INTRODUCTION			
Rationale	3	Describe the rationale for the review in the context of what is already known*, including mention of why a network meta-analysis has been conducted.*	P. 5-6
Objectives	4	Provide an explicit statement of questions being addressed, with reference to participants, interventions, comparisons, outcomes, and study design (PICOS).	P. 6 (last paragraph of the Introduction)

METHODS			
Protocol and registration	5	Indicate whether a review protocol exists and if and where it can be accessed (e.g., Web address); and, if available, provide registration information, including registration number.	P. 6 (registration in PROSPERO)
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. *Clearly describe eligible treatments included in the treatment network, and note whether any have been clustered or merged into the same node (with justification).*	P. 7-9 (sections 2.1.1. and 2.1.2. and 2.1.3. and 2.1.4.)
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.	P. 9-10 (sections 2.2.1 and 2.2.2 + supplementary material)
Search	8	Present full electronic search strategy for at least one database, including any limits used, such that it could be repeated.	P. 9-10 (and supplementary material)
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).	P. 11 (section 2.2.3.)
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.	P. 11-12 (sections 2.2.3. and 2.3.)
Data items	11	List and define all variables for which data were sought (e.g., PICOS, funding sources) and any assumptions and simplifications made.	P. 11-12 (section 2.3.)
Geometry of the network	**S1**	Describe methods used to explore the geometry of the treatment network under study and potential biases related to it. This should include how the evidence base has been graphically summarized for presentation, and what characteristics were compiled and used to describe the evidence base to readers.	P. 13 (section 2.5.2.; only protocol article at this stage)
Risk of bias within 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.	P. 12 (section 2.4.)
Summary measures	13	State the principal summary measures (e.g., risk ratio, difference in	P. 12-13 (sections 2.5.1 and 2.5.2.)

		means). *Also describe the use of additional summary measures assessed, such as treatment rankings and surface under the cumulative ranking curve (SUCRA) values, as well as modified approaches used to present summary findings from meta-analyses.*	
Planned methods of analysis	14	Describe the methods of handling data and combining results of studies for each network meta-analysis. This should include, but not be limited to: • *Handling of multi-arm trials;* • *Selection of variance structure;* • *Selection of prior distributions in Bayesian analyses; and* • *Assessment of model fit.*	P. 13 (section 2.5.2.; only protocol article at this stage) N/A *"A common estimate for the heterogeneity variance will be assumed for all comparisons in the entire network, and we will assess the presence of statistical heterogeneity using the magnitude of the heterogeneity variance parameter (τ2) and total I^2 statistic."* N/A *"Incoherence between direct and indirect sources of evidence will be statistically assessed globally, by comparison of the fit and parsimony of consistency and inconsistency models [24], and locally, by calculation of the difference between direct and indirect estimates in all closed loops in the network [25]."*
Assessment of Inconsistency	**S2**	Describe the statistical methods used to evaluate the agreement of direct and indirect evidence in the treatment network(s) studied. Describe efforts taken to address its presence when found.	P. 13-14 *("The Confidence In Network Meta-Analysis (CINeMA) software will be used to assess the confidence of evidence contributing to each network estimate [27]. This tool is based on a methodological framework which shows how much information each study contributes to the results from NMA by considering six domains: within-study bias, reporting bias, indirectness, imprecision, heterogeneity, and incoherence."*)
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).	P. 12-14 (section 2.4. + assessment of the distribution of clinical and methodological variables that could act as effect modifiers across treatment comparisons, NMA meta-regressions and subgroup analysis)
Additional analyses	16	Describe methods of additional analyses if done, indicating which were pre-specified. This may include, but not be limited to, the following:	

		• Sensitivity or subgroup analyses;	P. 14 (section 2.5.3.)
		• Meta-regression analyses;	P. 13 (*"To determine whether the results are affected by possible effect modifiers, we will conduct a network meta-regression for outcomes according to the following variables: study sponsorship, treatment duration, comorbid psychiatric disorders, study risk of bias, mean baseline severity, and percentage of participants treated with stable doses of medications in RCTs."*)
		• *Alternative formulations of the treatment network; and*	N/A
		• *Use of alternative prior distributions for Bayesian analyses (if applicable).*	N/A
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.	N/A (protocol article)
Presentation of network structure	**S3**	Provide a network graph of the included studies to enable visualization of the geometry of the treatment network.	N/A (protocol article)
Summary of network geometry	**S4**	Provide a brief overview of characteristics of the treatment network. This may include commentary on the abundance of trials and randomized patients for the different interventions and pairwise comparisons in the network, gaps of evidence in the treatment network, and potential biases reflected by the network structure.	N/A (protocol article)
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.	N/A (protocol article)
Risk of bias within studies	19	Present data on risk of bias of each study and, if available, any outcome level assessment.	N/A (protocol article)
Results of individual studies	20	For all outcomes considered (benefits or harms), present, for each study: 1) simple summary data for each intervention group, and 2) effect estimates and confidence intervals. *Modified approaches*	N/A (protocol article)

		may be needed to deal with information from larger networks.	
Synthesis of results	21	Present results of each meta-analysis done, including confidence/credible intervals. *In larger networks, authors may focus on comparisons versus a particular comparator (e.g. placebo or standard care), with full findings presented in an appendix. League tables and forest plots may be considered to summarize pairwise comparisons.* If additional summary measures were explored (such as treatment rankings), these should also be presented.	N/A (protocol article)
Exploration for inconsistency	**S5**	Describe results from investigations of inconsistency. This may include such information as measures of model fit to compare consistency and inconsistency models, *P* values from statistical tests, or summary of inconsistency estimates from different parts of the treatment network.	N/A (protocol article)
Risk of bias across studies	22	Present results of any assessment of risk of bias across studies for the evidence base being studied.	N/A (protocol article)
Results of additional analyses	23	Give results of additional analyses, if done (e.g., sensitivity or subgroup analyses, meta-regression analyses*, alternative network geometries studied, alternative choice of prior distributions for Bayesian analyses,* and so forth).	N/A (protocol article)
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).	N/A (protocol article)
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). *Comment on the validity of the assumptions, such as transitivity and consistency. Comment on any concerns regarding network geometry (e.g., avoidance of certain comparisons).*	N/A (protocol article)
Conclusions	26	Provide a general interpretation of the results in the context of other evidence, and implications for future research.	N/A (protocol article)

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. This should also include information regarding whether funding has been received from manufacturers of treatments in the network and/or whether some of the authors are content experts with professional conflicts of interest that could affect use of treatments in the network.	P. 14 (*"Role of funding source"*)

PICOS = population, intervention, comparators, outcomes, study design.
* Text in italics indicates wording specific to reporting of network meta-analyses that has been added to guidance from the PRISMA statement.
† Authors may wish to plan for use of appendices to present all relevant information in full detail for items in this section.

From: Hutton B, Salanti G, Caldwell DM, Chaimani A, Schmid CH, Cameron C, Ioannidis JP, Straus S, Thorlund K, Jansen JP, Mulrow C, Catalá-López F, Gøtzsche PC, Dickersin K, Boutron I, Altman DG, Moher D. The PRISMA Extension Statement for Reporting of Systematic Reviews Incorporating Network Meta-analyses of Health Care Interventions: Checklist and Explanations. Ann Intern Med. 2015;162(11):777-784.

Appendix. Search syntax for each database (in alphabetical order).

A. BIOSIS Previews

TOPIC: (adhd OR hkd OR addh OR hyperkine* OR "attention deficit*" OR hyper-activ* OR hyperactiv* OR overactive OR inattentive OR impulsiv*) AND **TOPIC:** (Adderall OR Amphetamine OR Desoxyn* OR Phenopromin OR Amfetamine OR Phenamine OR Centramina OR Fenamine OR Levoamphetamine OR Dexamfetamine OR Dexamphetamine OR Dexedrine OR Dextroamphetamine OR DextroStat OR Oxydess OR Methylamphetamine OR Methylenedioxyamphetamine OR Methamphetamine OR Chloroamphetamine OR Metamfetamine OR Deoxyephedrine OR Desoxyephedrine OR Ecstasy OR Atomoxetine OR Biphentin OR Bupropion OR Amfebutamone OR Zyntabac OR Quomen OR Wellbutrin OR Zyban OR Catapres* OR Clonidine OR Klofenil OR Clofenil OR Chlophazolin OR Gemiton OR Hemiton OR Isoglaucon OR Klofelin OR Clopheline OR Clofelin OR Dixarit OR Concerta OR Daytrana OR Methylphenidate OR Equasym OR Methylin OR Tsentedrin OR Centedrin OR Phenidylate OR Ritalin* OR Duraclon OR Elvanse OR Focalin OR Dexmethylphenidate OR Guanfacine OR Estulic OR Tenex OR Kapvay OR Lisdexamfetamine OR Vyvanse OR Medikinet OR Metadate OR Modafinil OR Nexiclon OR Quillivant OR Strattera OR Viloxazine OR Qelbree OR Vivalan) AND **TOPIC:** (RCT OR ((clinical OR control*) NEAR/10 trial*) OR crossover OR "cross over" OR cross-over OR randomi* OR (random* NEAR/1 (allocat* OR assign* OR select*)) OR blind* OR placebo OR "control group") Indexes=BIOSIS Previews Timespan=All years

B. EMBASE

1. exp Attention Deficit Disorder with Hyperactivity/ or (adhd or hkd or addh or hyperkine* or "attention deficit*" or hyper-activ* or hyperactiv* or overactive or inattentive or impulsiv*).ti,ab.
2. exp Amphetamines/ or exp Bupropion/ or exp Clonidine/ or exp Methylphenidate/ or exp Dexmethylphenidate/ or exp Guanfacine/ or (Adderall or Amphetamine or Desoxyn* or Phenopromin or Amfetamine or Phenamine or Centramina or Fenamine or Levoamphetamine or Dexamfetamine or Dexamphetamine or Dexedrine or Dextroamphetamine or DextroStat or Oxydess or Methylamphetamine or Methylenedioxyamphetamine or Methamphetamine or Chloroamphetamine or Metamfetamine or Deoxyephedrine or Desoxyephedrine or Ecstasy or Atomoxetine or Biphentin or Bupropion or Amfebutamone or Zyntabac or Quomen or Wellbutrin or Zyban or Catapres* or Clonidine or Klofenil or Clofenil or Chlophazolin or Gemiton or Hemiton or Isoglaucon or Klofelin or Clopheline or Clofelin or Dixarit or Concerta or Daytrana or Methylphenidate or Equasym or Methylin or Tsentedrin or Centedrin or Phenidylate or Ritalin* or Duraclon or Elvanse or Focalin or Dexmethylphenidate or Guanfacine or Estulic or Tenex or Kapvay or Lisdexamfetamine or Vyvanse or Medikinet or Metadate or Modafinil or Nexiclon or Quillivant or Strattera OR Viloxazine OR Qelbree OR Vivalan).ti,ab.

3. (random$ or factorial$ or crossover$ or (cross over$) or cross-over$ or placebo$ or (doubl$ adj blind$) or (singl$ adj blind$) or assign$ or allocat$ or volunteer$).mp. or crossover-procedure/ or double-blind procedure/ or randomized controlled trial/ or single-blind procedure/
4. limit 3 to human

5. 1 and 2 and 4

C. ERIC

((SU.EXACT.EXPLODE("Attention Deficit Disorders") OR ti(adhd OR hkd OR addh OR hyperkine* OR "attention deficit*" OR hyper-activ* OR hyperactiv* OR overactive OR inattentive OR impulsiv*) OR ab(adhd OR hkd OR addh OR hyperkine* OR "attention deficit*" OR hyper-activ* OR hyperactiv* OR overactive OR inattentive OR impulsiv*)) AND (ti(Adderall OR Amphetamine OR Desoxyn* OR Phenopromin OR Amfetamine OR Phenamine OR Centramina OR Fenamine OR Levoamphetamine OR Dexamfetamine OR Dexamphetamine OR Dexedrine OR Dextroamphetamine OR DextroStat OR Oxydess OR Methylamphetamine OR Methylenedioxyamphetamine OR Methamphetamine OR Chloroamphetamine OR Metamfetamine OR Deoxyephedrine OR Desoxyephedrine OR Ecstasy OR Atomoxetine OR Biphentin OR Bupropion OR Amfebutamone OR Zyntabac OR Quomen OR Wellbutrin OR Zyban OR Catapres* OR Clonidine OR Klofenil OR Clofenil OR Chlophazolin OR Gemiton OR Hemiton OR Isoglaucon OR Klofelin OR Clopheline OR Clofelin OR Dixarit OR Concerta OR Daytrana OR Methylphenidate OR Equasym OR Methylin OR Tsentedrin OR Centedrin OR Phenidylate OR Ritalin* OR Duraclon OR Elvanse OR Focalin OR Dexmethylphenidate OR Guanfacine OR Estulic OR Tenex OR Kapvay OR Lisdexamfetamine OR Vyvanse OR Medikinet OR Metadate OR Modafinil OR Nexiclon OR Quillivant OR Strattera) OR ab(Adderall OR Amphetamine OR Desoxyn* OR Phenopromin OR Amfetamine OR Phenamine OR Centramina OR Fenamine OR Levoamphetamine OR Dexamfetamine OR Dexamphetamine OR Dexedrine OR Dextroamphetamine OR DextroStat OR Oxydess OR Methylamphetamine OR Methylenedioxyamphetamine OR Methamphetamine OR Chloroamphetamine OR Metamfetamine OR Deoxyephedrine OR Desoxyephedrine OR Ecstasy OR Atomoxetine OR Biphentin OR Bupropion OR Amfebutamone OR Zyntabac OR Quomen OR Wellbutrin OR Zyban OR Catapres* OR Clonidine OR Klofenil OR Clofenil OR Chlophazolin OR Gemiton OR Hemiton OR Isoglaucon OR Klofelin OR Clopheline OR Clofelin OR Dixarit OR Concerta OR Daytrana OR Methylphenidate OR Equasym OR Methylin OR Tsentedrin OR Centedrin OR Phenidylate OR Ritalin* OR Duraclon OR Elvanse OR Focalin OR Dexmethylphenidate OR Guanfacine OR Estulic OR Tenex OR Kapvay OR Lisdexamfetamine OR Vyvanse OR Medikinet OR Metadate OR Modafinil OR Nexiclon OR Quillivant OR Strattera OR Viloxazine OR Qelbree OR Vivalan))) AND (ti(RCT OR ((clinical OR control*) NEAR/10 trial*) OR crossover OR "cross over" OR cross-over OR randomi* OR (random* NEAR/1 (allocat* OR assign* OR select*)) OR blind* OR placebo OR "control group") OR ab(RCT OR ((clinical OR control*) NEAR/10 trial*) OR crossover OR "cross over" OR cross-over OR randomi* OR (random* NEAR/1 (allocat* OR assign* OR select*)) OR blind* OR placebo OR "control group"))

D. International Clinical Trials Registry Platform (WHO ICTRP)

(adhd OR hkd OR addh OR hyperkine* OR "attention deficit*" OR hyper-activ* OR hyperactiv* OR overactive OR inattentive OR impulsiv*) in Condition Field AND (Adderall OR Amphetamine OR Desoxyn* OR Phenopromin OR Amfetamine OR Phenamine OR Centramina OR Fenamine OR Levoamphetamine OR Dexamfetamine OR Dexamphetamine OR Dexedrine OR Dextroamphetamine OR DextroStat OR Oxydess OR Methylamphetamine OR Methylenedioxyamphetamine OR Methamphetamine OR Chloroamphetamine OR Metamfetamine OR Deoxyephedrine OR Desoxyephedrine OR Ecstasy OR Atomoxetine OR Biphentin OR Bupropion OR Amfebutamone OR Zyntabac OR Quomen OR Wellbutrin OR Zyban OR Catapres* OR Clonidine OR Klofenil OR Clofenil OR Chlophazolin OR Gemiton OR Hemiton OR Isoglaucon OR Klofelin OR Clopheline OR Clofelin OR Dixarit OR Concerta OR Daytrana OR Methylphenidate OR Equasym OR Methylin OR Tsentedrin OR Centedrin OR Phenidylate OR Ritalin* OR Duraclon OR Elvanse OR Focalin OR Dexmethylphenidate OR Guanfacine OR Estulic OR Tenex OR Kapvay OR Lisdexamfetamine OR Vyvanse OR Medikinet OR Metadate OR Modafinil OR Nexiclon OR Quillivant OR Strattera OR Viloxazine OR Qelbree OR Vivalan) in Intervention Field

E. MEDLINE

1. exp Attention Deficit Disorder with Hyperactivity/ or (adhd or hkd or addh or hyperkine* or "attention deficit*" or hyper-activ* or hyperactiv* or overactive or inattentive or impulsiv*).ti,ab.

2. exp Amphetamines/ or exp Bupropion/ or exp Clonidine/ or exp Methylphenidate/ or exp Dexmethylphenidate/ or exp Guanfacine/ or (Adderall or Amphetamine or Desoxyn* or Phenopromin or Amfetamine or Phenamine or Centramina or Fenamine or Levoamphetamine or Dexamfetamine or Dexamphetamine or Dexedrine or

Dextroamphetamine or DextroStat or Oxydess or Methylamphetamine or Methylenedioxyamphetamine or Methamphetamine or Chloroamphetamine or Metamfetamine or Deoxyephedrine or Desoxyephedrine or Ecstasy or Atomoxetine or Biphentin or Bupropion or Amfebutamone or Zyntabac or Quomen or Wellbutrin or Zyban or Catapres* or Clonidine or Klofenil or Clofenil or Chlophazolin or Gemiton or Hemiton or Isoglaucon or Klofelin or Clopheline or Clofelin or Dixarit or Concerta or Daytrana or Methylphenidate or Equasym or Methylin or Tsentedrin or Centedrin or Phenidylate or Ritalin* or Duraclon or Elvanse or Focalin or Dexmethylphenidate or Guanfacine or Estulic or Tenex or Kapvay or Lisdexamfetamine or Vyvanse or Medikinet or Metadate or Modafinil or Nexiclon or Quillivant or Strattera or Viloxazine or Qelbree or Vivalan).ti,ab.

3. (randomized controlled trial or controlled clinical trial).pt. or random$.ab. or placebo.ab. or drug therapy.fs. or trial.ab. or groups.ab.

4. exp animals/ not humans.sh.

5. 3 not 4

6. 1 and 2 and 5

F. ProQuest Dissertations & Theses: UK & Ireland and ProQuest Dissertations & Theses A&I

((ti(adhd OR hkd OR addh OR hyperkine* OR "attention deficit*" OR hyper-activ* OR hyperactiv* OR overactive OR inattentive OR impulsiv*) OR ab(adhd OR hkd OR addh OR hyperkine* OR "attention deficit*" OR hyper-activ* OR hyperactiv* OR overactive OR inattentive OR impulsiv*)) AND (ti(Adderall OR Amphetamine OR Desoxyn* OR Phenopromin OR Amfetamine OR Phenamine OR Centramina OR Fenamine OR Levoamphetamine OR Dexamfetamine OR Dexamphetamine OR Dexedrine OR Dextroamphetamine OR DextroStat OR Oxydess OR Methylamphetamine OR Methylenedioxyamphetamine OR Methamphetamine OR Chloroamphetamine OR Metamfetamine OR Deoxyephedrine OR Desoxyephedrine OR Ecstasy OR Atomoxetine OR Biphentin OR Bupropion OR Amfebutamone OR Zyntabac OR Quomen OR Wellbutrin OR Zyban OR Catapres* OR Clonidine OR Klofenil OR Clofenil OR Chlophazolin OR Gemiton OR Hemiton OR Isoglaucon OR Klofelin OR Clopheline OR Clofelin OR Dixarit OR Concerta OR Daytrana OR Methylphenidate OR Equasym OR Methylin OR Tsentedrin OR Centedrin OR Phenidylate OR Ritalin* OR Duraclon OR Elvanse OR Focalin OR Dexmethylphenidate OR Guanfacine OR Estulic OR Tenex OR Kapvay OR Lisdexamfetamine OR Vyvanse OR Medikinet OR Metadate OR Modafinil OR Nexiclon OR Quillivant OR Strattera) OR ab(Adderall OR Amphetamine OR Desoxyn* OR Phenopromin OR Amfetamine OR Phenamine OR Centramina OR Fenamine OR Levoamphetamine OR Dexamfetamine OR Dexamphetamine OR Dexedrine OR Dextroamphetamine OR DextroStat OR Oxydess OR Methylamphetamine OR Methylenedioxyamphetamine OR Methamphetamine OR Chloroamphetamine OR Metamfetamine OR Deoxyephedrine OR Desoxyephedrine OR Ecstasy OR Atomoxetine OR Biphentin OR Bupropion OR Amfebutamone OR Zyntabac OR Quomen OR Wellbutrin OR Zyban OR Catapres* OR Clonidine OR Klofenil OR Clofenil OR Chlophazolin OR Gemiton OR Hemiton OR Isoglaucon OR Klofelin OR Clopheline OR Clofelin OR Dixarit OR Concerta OR Daytrana OR Methylphenidate OR Equasym OR Methylin OR Tsentedrin OR Centedrin OR Phenidylate OR Ritalin* OR Duraclon OR Elvanse OR Focalin OR Dexmethylphenidate OR Guanfacine OR Estulic OR Tenex OR Kapvay OR Lisdexamfetamine OR Vyvanse OR Medikinet OR Metadate OR Modafinil OR Nexiclon OR Quillivant OR Strattera OR Viloxazine OR Qelbree OR Vivalan))) AND (ti(RCT OR ((clinical OR control*) NEAR/10 trial*) OR crossover OR "cross over" OR cross-over OR randomi* OR (random* NEAR/1 (allocat* OR assign* OR select*)) OR blind* OR placebo OR "control group") OR ab(RCT OR ((clinical OR control*) NEAR/10 trial*) OR crossover OR "cross over" OR cross-over OR randomi* OR (random* NEAR/1 (allocat* OR assign* OR select*)) OR blind* OR placebo OR "control group"))

G. PsycINFO

1. exp Attention Deficit Disorder with Hyperactivity/ or (adhd or hkd or addh or hyperkine* or "attention deficit*" or hyper-activ* or hyperactiv* or overactive or inattentive or impulsiv*).ti,ab.
2. exp Bupropion/ or exp Clonidine/ or exp Methylphenidate/ or (Adderall or Amphetamine or Desoxyn* or Phenopromin or Amfetamine or Phenamine or Centramina or Fenamine or Levoamphetamine or Dexamfetamine or Dexamphetamine or Dexedrine or Dextroamphetamine or DextroStat or Oxydess or Methylamphetamine or Methylenedioxyamphetamine or Methamphetamine or Chloroamphetamine or Metamfetamine or Deoxyephedrine or Desoxyephedrine or Ecstasy or Atomoxetine or Biphentin or Bupropion or Amfebutamone or Zyntabac or Quomen or Wellbutrin or Zyban or Catapres* or Clonidine or Klofenil or Clofenil or Chlophazolin or Gemiton or Hemiton or Isoglaucon or Klofelin or Clopheline or Clofelin or Dixarit or Concerta or Daytrana or Methylphenidate or Equasym or Methylin or Tsentedrin or Centedrin or Phenidylate or Ritalin* or Duraclon or Elvanse or Focalin or Dexmethylphenidate or Guanfacine or Estulic or Tenex or Kapvay or Lisdexamfetamine or Vyvanse or Medikinet or Metadate or Modafinil or Nexiclon or Quillivant or Strattera OR Viloxazine OR Qelbree OR Vivalan).ti,ab.

3. (double-blind or random* assigned or control).tw. 4. and/1-3
5. limit 4 to human

H. PubMed

("Attention Deficit Disorder with Hyperactivity"[Mesh] OR adhd[tiab] OR hkd[tiab] OR addh[tiab] OR hyperkine*[tiab] OR "attention deficit*"[tiab] OR hyper-activ*[tiab] OR hyperactiv*[tiab] OR overactive[tiab] OR inattentive[tiab] OR impulsiv*[tiab]) AND ("Amphetamines"[Mesh] OR "Bupropion"[Mesh] OR "Clonidine"[Mesh] OR "Methylphenidate"[Mesh] OR "Dexmethylphenidate"[Mesh] OR "Guanfacine"[Mesh] OR Adderall[tiab] OR Amphetamine[tiab] OR Desoxyn*[tiab] OR Phenopromin[tiab] OR Amfetamine[tiab] OR Phenamine[tiab] OR Centramina[tiab] OR Fenamine[tiab] OR Levoamphetamine[tiab] OR Dexamfetamine[tiab] OR Dexamphetamine[tiab] OR Dexedrine[tiab] OR Dextroamphetamine[tiab] OR DextroStat[tiab] OR Oxydess[tiab] OR Methylamphetamine[tiab] OR Methylenedioxyamphetamine[tiab] OR Methamphetamine[tiab] OR Chloroamphetamine[tiab] OR Metamfetamine[tiab] OR Deoxyephedrine[tiab] OR Desoxyephedrine[tiab] OR Ecstasy[tiab] OR Atomoxetine[tiab] OR Biphentin[tiab] OR Bupropion[tiab] OR Amfebutamone[tiab] OR Zyntabac[tiab] OR Quomen[tiab] OR Wellbutrin[tiab] OR Zyban[tiab] OR Catapres*[tiab] OR Clonidine[tiab] OR Klofenil[tiab] OR Clofenil[tiab] OR Chlophazolin[tiab] OR Gemiton[tiab] OR Hemiton[tiab] OR Isoglaucon[tiab] OR Klofelin[tiab] OR Clopheline[tiab] OR Clofelin[tiab] OR Dixarit[tiab] OR Concerta[tiab] OR Daytrana[tiab] OR Methylphenidate[tiab] OR Equasym[tiab] OR Methylin[tiab] OR Tsentedrin[tiab] OR Centedrin[tiab] OR Phenidylate[tiab] OR Ritalin*[tiab] OR Duraclon[tiab] OR Elvanse[tiab] OR Focalin[tiab] OR Dexmethylphenidate[tiab] OR Guanfacine[tiab] OR Estulic[tiab] OR Tenex[tiab] OR Kapvay[tiab] OR Lisdexamfetamine[tiab] OR Vyvanse[tiab] OR Medikinet[tiab] OR Metadate[tiab] OR Modafinil[tiab] OR Nexiclon[tiab] OR Quillivant[tiab] OR Strattera[tiab] OR Viloxazine[tiab] OR Qelbree[tiab] OR Vivalan[tiab]) AND (randomized controlled trial[pt] OR controlled clinical trial[pt] OR randomized[tiab] OR placebo[tiab] OR clinical trials as topic[mesh:noexp] OR randomly[tiab] OR trial[ti]) NOT (animals[mh] NOT humans[mh])

I. SIGLE

(adhd OR hkd OR addh OR hyperkine* OR "attention deficit*" OR hyper-activ* OR hyperactiv* OR overactive OR inattentive OR impulsiv*) AND (Adderall OR Amphetamine OR Desoxyn* OR Phenopromin OR Amfetamine OR Phenamine OR Centramina OR Fenamine OR Levoamphetamine OR Dexamfetamine OR Dexamphetamine OR Dexedrine OR Dextroamphetamine OR DextroStat OR Oxydess OR Methylamphetamine OR Methylenedioxyamphetamine OR Methamphetamine OR Chloroamphetamine OR Metamfetamine OR Deoxyephedrine OR Desoxyephedrine OR Ecstasy OR Atomoxetine OR Biphentin OR Bupropion OR Amfebutamone OR

Zyntabac OR Quomen OR Wellbutrin OR Zyban OR Catapres* OR Clonidine OR Klofenil OR Clofenil OR Chlophazolin OR Gemiton OR Hemiton OR Isoglaucon OR Klofelin OR Clopheline OR Clofelin OR Dixarit OR Concerta OR Daytrana OR Methylphenidate OR Equasym OR Methylin OR Tsentedrin OR Centedrin OR Phenidylate OR Ritalin* OR Duraclon OR Elvanse OR Focalin OR Dexmethylphenidate OR Guanfacine OR Estulic OR Tenex OR Kapvay OR Lisdexamfetamine OR Vyvanse OR Medikinet OR Metadate OR Modafinil OR Nexiclon OR Quillivant OR Strattera OR Viloxazine OR Qelbree OR Vivalan)

J. The Cochrane Library

#1 MeSH descriptor: [Attention Deficit Disorder with Hyperactivity] explode all trees
#2 (adhd or hkd or addh or hyperkine* or "attention deficit*" or hyper-activ* or hyperactiv* or overactive or inattentive or impulsiv*):ti,ab
#3 MeSH descriptor: [Amphetamines] explode all trees
#4 MeSH descriptor: [Bupropion] explode all trees
#5 MeSH descriptor: [Clonidine] explode all trees
#6 MeSH descriptor: [Methylphenidate] explode all trees
#7 MeSH descriptor: [Dexmethylphenidate] explode all trees
#8 MeSH descriptor: [Guanfacine] explode all trees
#9 (Adderall or Amphetamine or Desoxyn* or Phenopromin or Amfetamine or Phenamine or Centramina or Fenamine or Levoamphetamine or Dexamfetamine or Dexamphetamine or Dexedrine or Dextroamphetamine or DextroStat or Oxydess or Methylamphetamine or Methylenedioxyamphetamine or Methamphetamine or Chloroamphetamine or Metamfetamine or Deoxyephedrine or Desoxyephedrine or Ecstasy or Atomoxetine or Biphentin or Bupropion or Amfebutamone or Zyntabac or Quomen or Wellbutrin or Zyban or Catapres* or Clonidine or Klofenil or Clofenil or Chlophazolin or Gemiton or Hemiton or Isoglaucon or Klofelin or Clopheline or Clofelin or Dixarit or Concerta or Daytrana or Methylphenidate or Equasym or Methylin or Tsentedrin or Centedrin or Phenidylate or Ritalin* or Duraclon or Elvanse or Focalin or Dexmethylphenidate or Guanfacine or Estulic or Tenex or Kapvay or Lisdexamfetamine or Vyvanse or Medikinet or Metadate or Modafinil or Nexiclon or Quillivant or Strattera or Viloxazine or Qelbree or Vivalan):ti,ab #10 #1 or #2

#11 #3 or #4 or #5 or #6 or #7 or #8 or #9 #12 #10 and #11

K. Web of Science

TOPIC: (adhd OR hkd OR addh OR hyperkine* OR "attention deficit*" OR hyper-activ* OR hyperactiv* OR overactive OR inattentive OR impulsiv*) AND **TOPIC:** (Adderall OR Amphetamine OR Desoxyn* OR Phenopromin OR Amfetamine OR Phenamine OR Centramina OR Fenamine OR Levoamphetamine OR Dexamfetamine OR Dexamphetamine OR Dexedrine OR Dextroamphetamine OR DextroStat OR Oxydess OR Methylamphetamine OR Methylenedioxyamphetamine OR Methamphetamine OR Chloroamphetamine OR Metamfetamine OR Deoxyephedrine OR Desoxyephedrine OR Ecstasy OR Atomoxetine OR Biphentin OR Bupropion OR Amfebutamone OR Zyntabac OR Quomen OR Wellbutrin OR Zyban OR Catapres* OR Clonidine OR Klofenil OR Clofenil OR Chlophazolin OR Gemiton OR Hemiton OR Isoglaucon OR Klofelin OR Clopheline OR Clofelin OR Dixarit OR Concerta OR Daytrana OR Methylphenidate OR Equasym OR Methylin OR Tsentedrin OR Centedrin OR Phenidylate OR Ritalin* OR Duraclon OR Elvanse OR Focalin OR Dexmethylphenidate OR Guanfacine OR Estulic OR Tenex OR Kapvay OR Lisdexamfetamine OR Vyvanse OR Medikinet OR Metadate OR Modafinil OR Nexiclon OR Quillivant OR Strattera OR Viloxazine OR Qelbree OR Vivalan) AND **TOPIC:** (RCT OR ((clinical OR control*) NEAR/10 trial*) OR crossover OR "cross over" OR cross-over OR randomi* OR (random* NEAR/1 (allocat* OR assign* OR select*)) OR blind* OR placebo OR "control group") Indexes=SCI-EXPANDED, SSCI, CPCI-S, CPCI-SSH Timespan=All years