Supplementary Table 1. Cochrane Rapid Review Methods - Interim Recommendations

1. Setting the research question- Topic refinement.	
Involve key stakeholders (e.g., review users such as consumers, health professionals, policymakers, decision-makers) to set and refine the review question, eligibility criteria, and outcomes of interest. Consult with stakeholders to ensure fit for purpose and regarding any ad hoc changes as the review progresses.	Pg3, para 5, line 2
Develop a protocol that includes review questions, PICOS, and inclusion and exclusion criteria.	Protocol available on request
2. Setting eligibility criteria	
Clearly define the population, intervention, and comparator	Pg 2 para 4 lines 1-4
Limit the number of interventions and comparators	Pg 2 para 4 lines 5-6
Limit the number of outcomes, with a focus on those most important for decision-making o Consider date restrictions with a clinical or methodological justification	Pg3, para 4 lines 4-7
Limit the publication language to English; add other languages only if justified	Pg 2 para 4 line 3
Place emphasis on higher quality study designs (e.g. systematic reviews[2]); consider a stepwise approach to study design inclusion.	n/a – given the rapidly developing literature no systematic reviews have been conducted at the time
3. Searching	
Involve an Information Specialist.	
Consider peer review of at least one search strategy (e.g., MEDLINE).	Statement added to confirm (pg 4 para 2, line 6)
Always search Cochrane CENTRAL, MEDLINE (e.g., via PubMed) and Embase (if available access).	Pg 4 para 2 line 1 (note no articles were identified on Cochrane Central in preliminary searches so this database was not included in the search strategy)
Searching of specialized databases (e.g., PsycInfo, CINAHL) is recommended for certain topics but should be restricted to 1-2 additional sources, or omitted if time and resources are limited.	N/A
Limit literature searches to English language; add other languages only if justified.	Pg 2 para 4 line 3
Limit grey literature and supplemental searching. If justified, search study registries and screen reference lists of other reviews, or included studies AFTER screening of the abstracts and full texts. Screening reference lists can detect studies that were missed during the searches of the electronic databases or	Pg 4 para 2 line 1

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eligible studies that were erroneously excluded during literature screening.	
4. Study selection	
Title & Abstract Screening	
Using a standardized title and abstract form, conduct a pilot exercise using the same 30-50 abstracts for the entire screening team to calibrate and test the review form.	Statement added to confirm systematic totle and abstract screening pg 4 para 3, Line 6-7
Use two reviewers for dual screen of at least 20% (ideally more) of abstracts, with conflict resolution	Pg 4 para 2 line 6
Use one reviewer to screen the remaining abstracts.	Pg 4 para 2 line 6
Use a second reviewer to screen all excluded abstracts, and resolve conflicts.	Pg 4 para 2 line 6
Full Text Screening	
Using a standardized full text form, conduct a pilot exercise using the same 5-10 full-text articles for the entire screening team to calibrate and test the review form.	n/a due to small number of full text articles
Use one reviewer to screen all included full text articles	Pg 4 para 3 line 6 -8
Use a second reviewer to screen all excluded full text articles. *Software should be used to make screening more efficient	Pg 4 para 3 line 6 -8
Data extraction	
Use a single reviewer to extract data using a piloted form.	Pg 4 para 4 line 1-2
Use a second reviewer to check for correctness and completeness of extracted data.	Pg 4 para 4 line 1-2
Limit data extraction to a minimal set of required data items.	Pg 4 para 4 line 4-6
Consider using data from existing systematic reviews to reduce time spent on data extraction.	n/a no sys reviews identified in the review
Risk of bias assessment	
Use a valid risk of bias tool, if available for the included study designs.	Pg 5 para 1 line 2-5
Use a single reviewer to rate risk of bias, with full verification of all judgements (and support statements) by a second reviewer.	Pg 5 para 1 line 1
Limit risk of bias ratings to the most important outcomes.	n/a
Data synthesis	
Synthesize evidence narratively.	Pg 5 para 2 line 2
Standards for conducting a meta-analysis for a systematic review also apply to a RR; consider a meta-analysis only if appropriate (i.e., studies are similar enough to pool). This will also depend on the nature of the data and	n/a due to small number of studies noted Pg 5 para 2 line 1

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information provided in the individual studies identified.	
Use a single reviewer to grade the certainty of evidence, with verification of all judgements (and footnoted rationales) by a second reviewer.	Due to the small number of articles and the observational nature of the studies, grading of evidence was not formally conducted as all studies were considered as providing weak evidence for intervention. The limited evidence is noted in the discussion pg19 para 3 line 2 and pg19 para 4 line 1.