

Author Year of systematic review	Search methods reported	Comprehensive search	Inclusion criteria reported	Selection bias avoided	Validity criteria reported	Validity assessed appropriately	Methods used to combine studies reported	Findings combined appropriately	Conclusions supported by data	Overall scientific quality (higher score is better)
Asenjo Lobos 2010 ⁸⁰	Yes	Yes	Yes	Yes	Yes	Yes; excluded studies where sequence generation was at high risk of bias or where allocation was clearly not concealed.	Yes	Yes	Yes	7
Barbui 2008 ⁸¹	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	7
Barbui 2009 ⁸²	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	7
Cipriani 2005 (Fluoxetine) ⁸³	Yes	Yes	Yes	Yes	Yes	Yes; no variation to analyze.	Yes	Can't tell for suicide; reported no differences between fluoxetine and control AD among 4 studies but analysis of heterogeneity not reported.	Yes	6
Cipriani 2005 (Lithium) ⁸⁴	Yes	Yes	Yes	Yes; study flow diagram provided reasons for exclusion.	Yes	No; reported allocation concealment, blinding and ITT analysis; no analysis based on quality, despite some variation in use of blinding.	Yes	Yes	Yes	6
Cipriani 2009 ⁸⁵	Yes	Yes	Yes	Yes	Yes	Yes; those rated C (inadequate) excluded from analysis.	Yes	Yes	Yes	7
Craig 2009 ⁸⁶	No; no mention of search terms.	No; no supplemental sources.	Yes	No; detailed results of study selection not reported, no reasons for exclusions described.	No	Can't tell; within GRADE evaluation of quality of evidence, deducted points for internal validity limitations; but, unclear as to the scope of the internal validity domains assessed.	Yes	Yes	Yes	3

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Robinson 2011 ⁹³	Yes	Yes	Yes	Can't tell; numbers of exclusions reported at each stage, but reasons not reported.	Yes	No; reported results of validity assessment in table and paragraph, but did not appear to account for variation in synthesis.	Yes	No; only 1 comparison with >1 study and did not combine data and did not explain reasons for this.	Yes	4
Sakinofsky 2007 (Parts 1 & 2) ^{94, 95}	Partially; start date provided, but no end date.	Yes; several databases were used.	Can't tell; RCTs were the main focus but of necessity; it also considered other categories of investigations of the outcome of treatment.	No; no information related to number of articles found, included, and excluded.	No; did not describe criteria used to differentiate between good and deficiencies.	Yes; critical assessment of the quality of design, conduct and analysis of the studies was performed and reported according to authors' constructed schema of level of evidence.	Yes	Yes; report of findings follow simplified scheme of evidence constructed by authors.	Yes	4
Soomro 2008 ⁹⁶	Yes	No; no hand-searching, reference list searching, or asking experts noted.	Yes	No	Yes	Yes	No	Yes	Yes	4
Van Lieshout 2010 ⁹⁷	Yes	Yes	Yes	Yes; study flow diagram provided reasons for exclusion.	Yes	Yes; only included studies with a Jadad score of ≥ 3 .	Yes; used GRADE approach to rate strength of evidence.	Yes; no significant heterogeneity reported.	Yes	7
Williams 2009 ⁹⁸ & Williams 2009 ⁹⁹	Yes	Yes	Yes	Yes; study flow diagram in Pediatrics publication, ⁹⁹ reasons for exclusion for individual trials provided in Evidence Report. ⁹⁸	Yes	Yes; excluded poor quality studies.	Yes	Yes; did not conduct meta-analyses due to heterogeneity.	Yes	7
Ziamba 2010 ¹⁰¹	Yes	Yes; searched references lists which led to identification of FDA meta-analysis.	No	No; not reported.	No	Can't tell; only reported one study, described as the highest level of evidence they found.	No	No; methods not reported.	Yes	2