**Appendix Table D137. Adverse effects with acetazolamide, 500 mg/day vs. placebo for migraine prevention in adults, results from low risk of bias randomized controlled clinical trial80**

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| **Adverse effect** | **Events/****Randomized with Acetazolamide** | **Events/****Randomized with Placebo** | **Rate, % with Active Drug [Placebo]** | **Relative Risk****(95% CI)** | **Absolute Risk Difference****(95% CI)** | **Number Needed to Treat****(95% CI)** | **Attributable Events****(95% CI)** |
| **Paresthesia** | **21/26** | **2/27** | **80.8 [7.4]** | **10.9 (2.8 to 41.9)** | **0.73 (0.55 to 0.91)** | **1 (1 to 2)** | **734 (553 to 914)** |
| **Fatigue, drowsiness, memory impairment, malaise, fasciculation** | **15/26** | **4/27** | **57.7 [14.8]** | **3.9 (1.5 to 10.2)** | **0.43 (0.20 to 0.66)** | **2 (2 to 5)** | **429 (196 to 661)** |
| Gastrointestinal intolerance | 3/26 | 2/27 | 11.5 [7.4] | 1.6 (0.3 to 8.6) | 0.04 (-0.12 to 0.20) | NS | NS |
| Hypokalemia | 1/26 | 0/27 | 3.8 [0.0] | 3.1 (0.1 to 73.1) | 0.04 (-0.06 to 0.14) | NS | NS |
| Hyperuricemia | 1/26 | 0/27 | 3.8 [0.0] | 3.1 (0.1 to 73.1) | 0.04 (-0.06 to 0.14) | NS | NS |
| Skin eruption | 0/26 | 2/27 | 0.0 [7.4] | 0.2 (0.0 to 4.1) | -0.07 (-0.19 to 0.04) | NS | NS |
| Fever and shivering | 0/26 | 1/27 | 0.0 [3.7] | 0.3 (0.0 to 8.1) | -0.04 (-0.13 to 0.06) | NS | NS |
| Dry mouth | 1/26 | 1/27 | 3.8 [3.7] | 1.0 (0.1 to 15.7) | 0.00 (-0.10 to 0.10) | NS | NS |
| Breast tension | 0/26 | 1/27 | 0.0 [3.7] | 0.3 (0.0 to 8.1) | -0.04 (-0.13 to 0.06) | NS | NS |
| Rhinitis | 1/26 | 2/27 | 3.8 [7.4] | 0.5 (0.1 to 5.4) | -0.04 (-0.16 to 0.09) | NS | NS |
| Tinnitus | 0/26 | 1/27 | 0.0 [3.7] | 0.3 (0.0 to 8.1) | -0.04 (-0.13 to 0.06) | NS | NS |
| Miscellaneous | 1/26 | 3/27 | 3.8 [11.1] | 0.3 (0.0 to 3.1) | -0.07 (-0.21 to 0.07) | NS | NS |

Bold = significant at 95% confidence limit when 95% CI of relative risk estimates do not include 1 and 95% CI of absolute risk difference estimates do not include 0

CI = confidence level; NS= not significant; Number needed to treat and number of attributable events were calculated for statistically significant differences