

Table S1. Data extraction form for systematic review.

Review title or ID	
Study ID (<i>surname of first author and year first full report of study was published e.g., Smith 2001</i>)	
General information	
Date form completed (<i>dd/mm/yyyy</i>)	
Name/ID of person extracting data	
Reference details	
Study author contact details	
Publication type (<i>e.g., full report, abstract, letter</i>)	
Notes:	

Study eligibility

Study Characteristics	Eligibility criteria <i>(Insert inclusion criteria for each characteristic as defined in the Protocol)</i>	Eligibility criteria met?			Location in text or source <i>(pg & ¶/fig/table/other)</i>
		Yes	No	Unclear	
Type of study	Randomised Controlled Trial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Case Reports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Cohort Studies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Participants		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Types of intervention		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Types of comparison		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Types of outcome measures		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
INCLUDE <input type="checkbox"/>	EXCLUDE <input type="checkbox"/>				
Reason for exclusion					

Notes:

DO NOT PROCEED IF STUDY EXCLUDED FROM REVIEW

Characteristics of included studies
Methods

	Descriptions as stated in report/paper	Location in text or source <i>(pg no/fig/table/other)</i>
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Author and Year		
Study Design (<i>e.g., parallel, crossover, non-RCT</i>)		
Sample Size		
Characteristics of patients		
Dosing practice		
Clinical outcomes		
Dosing recommendations		
Ethical approval needed/obtained for study	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unclear	
Notes:		

Other information

Study funding sources (<i>including role of funders</i>)		
Possible conflicts of interest (<i>for study authors</i>)		
Notes:		

Quality Assessment Tool for included studies

Table S2. Newcastle-Ottawa Quality Assessment Form for Cohort Studies

Items	Number of stars
Selection	
Representative of exposed studies ^A	
Selection of non-exposed ^B	
Ascertainment of exposure ^C	
Demonstration of outcome ^D	
Comparability	
Comparability of cohort studies on basis of design ^E	
Outcomes	
Assessment of outcomes ^F	
Adequacy of follow-up ^G	
Quality Score	
A: *=truly representative or somewhat representative of average in target population B: *=Drawn from the same community C: *=Secured record or structured review D: *=Yes, - = No E: *= Study controls for age, gender, and other factors. F: *=Record linkage or blind assessment, **=Both G: *=follow-up of all subjects	

Risk of Bias assessment

Domain	Risk of bias			Location in text or source (<i>pg no./fig/table/other</i>)
	Low	High	Unclear	
Random sequence generation <i>(selection bias)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Allocation concealment <i>(selection bias)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Blinding of participants and personnel <i>(performance bias)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<i>(if separate judgement by outcome(s) required)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Blinding of outcome assessment <i>(detection bias)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<i>(if separate judgement by outcome(s) required)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Incomplete outcome data <i>(attrition bias)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<i>(if separate judgement by outcome(s) required)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Selective outcome reporting? <i>(reporting bias)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other bias	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Notes:

Table S3: The Joanna Briggs Institute (JBI) Critical Appraisal Checklist for Case Reports

Major Components	Response Options			
	Yes	No	Unclear	Not Applicable
1. Were patient's demographic characteristics clearly described?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Was the patient's history clearly described and presented as a timeline?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Was the current clinical condition of the patient on presentation clearly described?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Were diagnostic tests or assessment methods and the results clearly described?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Was the intervention(s) or treatment procedure(s) clearly described?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Was the post-intervention clinical condition clearly described?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Were adverse events (harms) or unanticipated events identified and described?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Does the case report provide takeaway lessons?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall appraisal: Include <input type="checkbox"/> Exclude <input type="checkbox"/> Seek further info <input type="checkbox"/>				