**Supplementary Table 4. Grade of evidence about terlipressin compared to dopamine and furosemide for hepatorenal syndrome**

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| **Terlipressin compared to dopamine and furosemide for hepatorenal syndrome** | | | | | | |
| **Patient or population:** patients with hepatorenal syndrome **Settings:** hospital **Intervention:** terlipressin **Comparison:** dopamine+furosemide | | | | | | |
| **Outcomes** | **Illustrative comparative risks\* (95% CI)** | | **Relative effect (95% CI)** | **No of Participants (studies)** | **Quality of the evidence (GRADE)** | **Comments** |
| Assumed risk | Corresponding risk |
|  | **Dopamine+furosemide** | **Terlipressin** |  |  |  |  |
| **survival** | **Study population** | | **RR 1.12**  (0.48 to 2.62) | 80 (1 study) | ⊕⊝⊝⊝ **very low**1,2 | Downgraded because of  risk of bias and inconsistency. |
| **200 per 1000** | **224 per 1000** (96 to 524) |
| **Moderate** | |
| **200 per 1000** | **224 per 1000** (96 to 524) |
| **serious adverse event** | See comment | See comment | Not estimable | 80 (1 study) | ⊕⊝⊝⊝ **very low**1,2 | Downgraded because of  risk of bias and inconsistency. |
| \*The basis for the **assumed risk** (e.g. the median control group risk across studies) is provided in footnotes. The **corresponding risk** (and its 95% confidence interval) is based on the assumed risk in the comparison group and the **relative effect** of the intervention (and its 95% CI).  **CI:** Confidence interval; **RR:** Risk ratio; | | | | | | |
| GRADE Working Group grades of evidence **High quality:** Further research is very unlikely to change our confidence in the estimate of effect.  **Moderate quality:** Further research is likely to have an important impact on our confidence in the estimate of effect and may change the estimate. **Low quality:** Further research is very likely to have an important impact on our confidence in the estimate of effect and is likely to change the estimate. **Very low quality:** We are very uncertain about the estimate. | | | | | | |
| 1 risk of bias 2 very small patients | | | | | | |