**Supplementary Table 2. Grade of evidence about terlipressin compared to noradrenaline for hepatorenal syndrome**

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| **Terlipressin compared to noradrenaline for hepatorenal syndrome** | | | | | | |
| **Patient or population:** patients with hepatorenal syndrome **Settings:** hospital **Intervention:** terlipressin **Comparison:** noradrenaline | | | | | | |
| **Outcomes** | **Illustrative comparative risks\* (95% CI)** | | **Relative effect (95% CI)** | **No of Participants (studies)** | **Quality of the evidence (GRADE)** | **Comments** |
| Assumed risk | Corresponding risk |
|  | **Noradrenaline** | **Terlipressin** |  |  |  |  |
| **HRS reversal** | **Study population** | | **RR 1.17**  (0.95 to 1.44) | 361 (7 studies) | ⊕⊝⊝⊝ **very low**1,2,3 | Downgraded because of  risk of bias and inconsistency. |
| **434 per 1000** | **508 per 1000** (412 to 625) |
| **Moderate** | |
| **500 per 1000** | **585 per 1000** (475 to 720) |
| **survival** | **Study population** | | **RR 1.33**  (1.01 to 1.76) | 252 (4 studies) | ⊕⊝⊝⊝ **very low**1,2,3 | Downgraded because of  risk of bias and inconsistency. |
| **381 per 1000** | **507 per 1000** (385 to 670) |
| **Moderate** | |
| **514 per 1000** | **684 per 1000** (519 to 905) |
| **serious adverse event** | **Study population** | | **RR 1.2**  (0.39 to 3.72) | 275 (5 studies) | ⊕⊝⊝⊝ **very low**1,2,3 | Downgraded because of  risk of bias and inconsistency. |
| **36 per 1000** | **44 per 1000** (14 to 136) |
| **Moderate** | |
| **0 per 1000** | **0 per 1000** (0 to 0) |
| \*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 outcomes different 3 small patients | | | | | | |