

Table SI. Methodological quality assessment for cohort studies and case series included in the meta-analysis using the Institute of Health Economics Quality Appraisal tool.

[illegible]

Results and  
conclusions

Q	N	Y	Y	N	Y	Y	Y	N	Y	Y	Y	Y	Y
R	N	N	Y	N	N	N	Y	N	Y	N	N	N	N
S	Y	Y	N	N	N	N	N	N	N	N	N	N	N
T	N	Y	Y	N	N	Y	Y	N	Y	Y	Y	Y	Y
V	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y

Competing  
interests and  
sources of  
support

W	N	N	N	N	N	N	N	N	N	N	N	N	N
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A, Was the hypothesis/aim/objective of the study clearly stated? B, Was the study conducted prospectively? C, Were the cases collected in more than one centre? D, Were patients recruited consecutively? E, Were the characteristics of the patients included in the study described? F, Were the eligibility criteria (i.e. inclusion and exclusion criteria) for entry into the study clearly stated? G, Did patients enter the study at a similar point in the disease? H, Was the intervention of interest clearly described? I, Were additional interventions (co-interventions) clearly described? J, Were relevant outcome measures established *a priori*? K, Were outcome assessors blinded to the intervention that patients received? L, Were the relevant outcomes measured using appropriate objective/subjective methods? M, Were the relevant outcome measures made before and after the intervention? O, Were the statistical tests used to assess the relevant outcomes appropriate? Q, Was follow-up long enough for important events and outcomes to occur? R, Were losses to follow-up reported? S, Did the study provide estimates of random variability in the data analysis of relevant outcomes? T, Were the adverse events reported? V, Were the conclusions of the study supported by results? W, Were both competing interests and sources of support for the study reported? Y, yes; N, no; U, unclear from study report; P, partially reported.

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Table SII. Methodological quality assessment for RCT, nRCT and single-arm studies included in the meta-analysis using the Methodological Index for Non-randomized Studies tool.

First author, year	A clearly stated aim	Inclusion of consecutive patients	Prospective collection of data	Endpoints appropriate to the aim of the study	Unbiased assessment of the study endpoint	Follow-up period appropriate to the aim of the study	Loss to follow up less than 5%	Prospective calculation of the study size	Total	Quality	(Refs.)
Peng, 2023	2	2	2	2	2	2	1	0	13	High	(39)
Wang, 2023	2	2	2	2	2	2	1	0	13	High	(38)
Zhu, 2022	2	2	2	2	2	2	1	0	13	High	(41)

Each item was scored 0-2 points. A score of 0 indicates no report; a score of 1 indicates that it was reported but with insufficient information; a score of 2 indicates that adequate information was reported and provided. RCT, randomized controlled trial.