

Online supplementary appendix B: GRADE assessment: Conservative treatment compared to index admission appendectomy for acute non-complicated appendicitis in children

Quality assessment							№ of patients		Effect		Quality	Importance
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	conservative treatment	index admission appendectomy	Relative (95% CI)	Absolute (95% CI)		
Complication (assessed with: According to Kirby A. et al. The journal of infection 2015:105)												
5	observational studies	very serious ^a	very serious ^b	not serious	not serious	none	3/189 (1.6%)	4/253 (1.6%)	RR 1.04 (0.38 to 2.86)	1 more per 1'000 (from 10 fewer to 29 more)	⊕○○○ VERY LOW	IMPORTANT
Treatment efficacy (assessed with: According to Kirby A. et al. The journal of infection 2015:105)												
5	observational studies	very serious ^a	very serious ^b	not serious	not serious	none	140/189 (74.1%)	249/253 (98.4%)	RR 0.85 (0.75 to 0.97)	148 fewer per 1'000 (from 30 fewer to 246 fewer)	⊕○○○ VERY LOW	IMPORTANT
Readmission (assessed with: According to Kirby A. et al. The journal of infection 2015:105)												
5	observational studies	very serious ^a	very serious ^b	not serious	not serious	none	47/189 (24.9%)	6/253 (2.4%)	RR 3.05 (1.27 to 7.32)	49 more per 1'000 (from 6 more to 150 more)	⊕○○○ VERY LOW	IMPORTANT

CI: Confidence interval; RR: Risk ratio

Explanations

a. Very serious risk of bias: Randomisation in 1 study, and patient or physician choice cohorts in 5 studies

b. Very serious inconsistency: Studies reported higher complication rates (n=2), equal complication rates (n=2), and less complication rates (n=2) after initial appendectomy as compared to conservative treatment