APPENDIX 14: NUTRITIONAL AND PHYSICAL INTERVENTIONS FOR MANIA – GRADE PROFILES

Nutritional interventions

Folic acid compared with placebo

Quality assessment							No of patients		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Folic acid	Placebo	Relative (95% CI)	Absolute		
Discontinuation (for any reason)												
1	randomised trials	very serious[1]	no serious inconsistency	no serious indirectness	very serious[2]	none	3/44 (6.8%)	1/44 (2.3%)	RR 0.05 (-0.04 to 0.13)	45 more per 1000 (from 40 fewer to 130 more)	⊕OOO VERY LOW	Critical
Mania (symptoms) (Better indicated by lower values)												
1	randomised trials	serious[1]	no serious inconsistency	no serious indirectness	very serious[2]	none	41	43	-	SMD 2.95 lower (3.58 to 2.32 lower)	⊕OOO VERY LOW	Critical

[1] Risk of bias in several domains.
[2] Optimal information size (for dichotomous outcomes, OIS = 300 events; for continuous outcomes, OIS = 400 participants) not met.

Physical interventions

Acupuncture compared with sham acupuncture

Quality assessment							No of patients		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Acupuncture	Sham	Relative (95% CI)	Absolute		
Discontinuation (for any reason)												
1	randomised trials	very serious[1]	no serious inconsistency	no serious indirectness	very serious[2]	none	5/10 (50%)	5/10 (50%)	RR 1 (0.42 to 2.4)	0 fewer per 1000 (from 290 fewer to 700 more)	⊕OOO VERY LOW	Critical
Mania (symptoms) (Better indicated by lower values)												
1	randomised trials	very serious[1]	no serious inconsistency	no serious indirectness	very serious[2]	none	5	7	-	SMD 0.68 lower (1.87 lower to 0.52 higher)	⊕OOO VERY LOW	Critical

[1] Risk of bias in several domains
[2] Optimal information size (for dichotomous outcomes, OIS = 300 events; for continuous outcomes, OIS = 400 participants) not met.

Transcranial magnetic stimulation (TMS) compared with sham TMS

Quality assessment							No of patients		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	TMS	Sham TMS	Relative (95% CI)	Absolute		
Discontinuation (for any reason)												
1	randomised trials	serious[1]	no serious inconsistency	no serious indirectness	very serious[2]	none	5/16 (31.3%)	1/9 (11.1%)	RR 2.81 (0.39 to 20.49)	201 more per 1000 (from 68 fewer to 1000 more)	⊕OOO VERY LOW	Critical
Mania (symptoms) (Better indicated by lower values)												
1	randomised trials	serious[1]	no serious inconsistency	no serious indirectness	very serious[2]	none	11	8	-	SMD 0.18 higher (0.74 lower to 1.09 higher)	⊕OOO VERY LOW	Critical

[1] Risk of bias in several domains
[2] Optimal information size (for dichotomous outcomes, OIS = 300 events; for continuous outcomes, OIS = 400 participants) not met.