

## Appendix J: Excluded studies

### RQ A

No searches conducted for this question

### RQB

RQB Excluded studies – Original Search	
Reference	Reason for Exclusion
Buonsenso,D, Barone,G, Valentini,P, Pierri,F, Riccardi,R, Chiaretti,A, Utility of intranasal Ketamine and Midazolam to perform gastric aspirates in children: a double-blind, placebo controlled, randomized study, BMC paediatrics, 14, 67-, 2014	Already in
Cakir,E, Kut,A, Ozkaya,E, Gedik,A H, Midyat,L, Nursoy,M, Bronchoscopic evaluation in childhood pulmonary tuberculosis: risk factors of airway involvement and contribution to the bacteriologic diagnosis, The Pediatric infectious disease journal, 32, 921-923, 2013	Referenece already included
Capelozzi,V.L., Faludi,E.P., Balthazar,A.B., Ferneznian,S.D.M., Filho,J.V.B., Parra,E.R., Bronchoalveolar lavage improves diagnostic accuracy in patients with diffuse lung disease, Diagnostic cytopathology, 41, 1-8, 2013	Study included adults
Chan,H.S., Sun,A.J., Hoheisel,G.B., Bronchoscopic aspiration and bronchoalveolar lavage in the diagnosis of sputum smear-negative pulmonary tuberculosis, Lung, 168, 215-220, 1990	Study included adults
Chavalittamrong,B., How to diagnose mycobacterial infections in children. An outline of principles, Clinical pediatricsClin Pediatr (Phila), 12, 277-280, 1973	Narrative review
Chierakul,N, Anantasetagoon,T, Chaiprasert,A, Tingtoy,N, Diagnostic value of gastric aspirate smear and polymerase chain reaction in smear-negative pulmonary tuberculosis, Respirology (Carlton, Vic.), 8, 492-496, 2003	Study included adults
De,B J., Azevedo,I., Burren,C.P., Le,Bourgeois M., Lallemand,D., Scheinmann,P., The value of flexible bronchoscopy in childhood pulmonary tuberculosis, Chest, 100, 688-692, 1991	Summary report
Dhand,R., De,A., Ganguly,N.K., Gupta,N., Jaswal,S., Malik,S.K., Kohli,K.K., Factors influencing the cellular response in bronchoalveolar lavage and peripheral blood of patients with pulmonary tuberculosis, Tubercle, 69, 161-173, 1988	Study included adults
Dhand,R., De,A., Gupta,N., Jaswal,S., Kohli,K.K., Malik,S.K., Ganguly,N.K., Cellular composition of bronchoalveolar lavage fluid in patients with pulmonary tuberculosis, The Indian journal of medical research, 87, 555-560, 1988	Study included adults
Dickson,S J., Brent,A, Davidson,R N., Wall,R, Comparison of bronchoscopy and gastric washings in the investigation of smear-negative pulmonary tuberculosis, Clinical infectious diseases : an official publication of the Infectious Diseases Society of AmericaClin Infect Dis, 37, 1649-1653, 2003	Study included adults
Dunleavy,A., Breen,R.A.M., Perrin,F., Lipman,M.C.I., Is bronchodilation required routinely before diagnostic sputum induction? Evidence from studies with tuberculosis, Thorax, 63, 473-474, 2008	Correspondence
Forbes,G.B., Hurford,J.V., Smith,B.J.D., Springett,V.H., The laryngeal swab in early and convalescent cases of pulmonary tuberculosis, Lancet, 141-142, 1948	Study included adults
Franchi,L.M., Cama,R.I., Gilman,R.H., Montenegro-James,S., Sheen,P., Detection of Mycobacterium tuberculosis in nasopharyngeal aspirate samples in children, Lancet, 352, 1681-1682, 1998	Correspondence
George,P M., Mehta,M, Dhariwal,J, Singanayagam,A, Raphael,C E., Salmasi,M,	Study included adults

RQB Excluded studies – Original Search	
Connell,D W., Molyneaux,P, Wickremasinghe,M, Jepson,A, Kon,O M, Post-bronchoscopy sputum: improving the diagnostic yield in smear negative pulmonary TB, <i>Respiratory medicine</i> , 105, 1726-1731, 2011	
Giammona,S.T., Zekowitz,P.S., Superheated nebulized saline and gastric lavage to obtain bacterial cultures in primary pulmonary tuberculosis in children, <i>American journal of diseases of children</i> (1960), 117, 198-200, 1969	Not a comparative study
Gluskowski,J., Zajackowska,J., The role of bronchoscopy in the diagnosis of enlargement of the hilar and-or mediastinal lymph nodes, <i>Polish medical journal</i> , 11, 1180-1187, 1972	Study included adults
Gomes,I., Trindade,E., Vidal,O., Yeep,O., Amendoeira,I., Marques,A., Diagnosis of sputum smear-negative forms of pulmonary tuberculosis by transthoracic fine-needle aspiration, <i>Tubercle</i> , 72, 210-213, 1991	Not a comparative study
Goussard,P, Gie,R, The role of bronchoscopy in the diagnosis and management of pediatric pulmonary tuberculosis, <i>Expert review of respiratory medicine</i> , 8, 101-109, 2014	Narrative review
Goussard,P, Gie,R P., Kling,S, Andronikou,S, Lucas,S, Janson,J, Roussouw,G, Bronchoscopic assessment of airway involvement in children presenting with clinically significant airway obstruction due to tuberculosis, <i>Pediatric pulmonology</i> , 48, 1000-1007, 2013	Not pulmonary TB
Gupta,N., Garg,U.C., Dhand,R., Kaur,A., Ganguly,N.K., Enzyme levels in bronchoalveolar lavage fluid and serum of active pulmonary tuberculosis patients, <i>Enzyme</i> , 41, 108-111, 1989	Study included adults
Hutchison,J.H., Bronchoscopic studies in primary tuberculosis in childhood, <i>The Quarterly journal of medicine</i> , 18, 21-49, 1949	Narrative review
Jalleh,R.D., Kuppusamy,I., Parameswary,V., Yeow,C.S., Fiberoptic bronchoscopy in the diagnosis of pulmonary tuberculosis--a Malaysian experience, <i>Singapore medical journal</i> , 34, 55-57, 1993	Study included adults
Joel,D.R., Steenhoff,A.P., Mullan,P.C., Phelps,B.R., Tolle,M.A., Ho-Foster,A., Mabikwa,V., Kgathi,B.G., Ncube,R., Anabwani,G.M., Diagnosis of paediatric tuberculosis using sputum induction in Botswana: programme description and findings, <i>The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease</i> , 18, 328-334, 2014	Not a comparative study
Khan,M.S., Dar,O., Sismanidis,C., Shah,K., Godfrey-Faussett,P., Improvement of tuberculosis case detection and reduction of discrepancies between men and women by simple sputum-submission instructions: a pragmatic randomised controlled trial, <i>Lancet</i> , 369, 1955-1960, 2012	Study included adults
Kiwanuka,J., Graham,S.M., Coulter,J.B., Gondwe,J.S., Chilewani,N., Carty,H., Hart,C.A., Diagnosis of pulmonary tuberculosis in children in an HIV-endemic area, Malawi, <i>Annals of tropical paediatrics</i> , 21, 5-14, 2001	Study is not concerned with specimen collection
Laff,H.I., Golberg,M., Russell,W.F.J., Bronchoscopy in primary tuberculosis of childhood, <i>American review of tuberculosis</i> , 74, 267-289, 1956	Case reports
Laven,G.T., Diagnosis of tuberculosis in children using fluorescence microscopic examination of gastric washings, <i>The American review of respiratory disease</i> , 115, 743-749, 1977	Not a comparative study
Lee,J.E., Lee,B.J., Roh,E.Y., Kim,D.K., Chung,H.S., Lee,C.-H., The diagnostic accuracy of tuberculosis real-time polymerase chain reaction analysis of computed tomography-guided bronchial wash samples, <i>Diagnostic microbiology and infectious disease</i> , 71, 51-56, 2011	Study included adults
Leon Muinos,E., Perez Del Molino,M.L., Lado Lado,F.L., Pazo Nunez,M., Pardo,F., Use of ligase chain reaction for the rapid diagnosis of lymph node tuberculosis,	Study included adults

### RQB Excluded studies – Original Search

Scandinavian journal of infectious diseases, 36, 724-726, 2004	
Levy,H., Feldman,C., Kallenbach,J.M., The diagnostic yield of prebronchoscopy sputa and bronchial washings in patients with biopsy-proven pulmonary tuberculosis, South African medical journal = Suid-Afrikaanse tydskrif vir geneeskundeSAMJ, S.Afr.med.j., 75, 527-528, 1989	Study included adults
Li,L.M., Bai,L.Q., Yang,H.L., Xiao,C.F., Tang,R.Y., Chen,Y.F., Chen,S.M., Liu,S.S., Zhang,S.N., Ou,Y.H., Niu,T.I., Sputum induction to improve the diagnostic yield in patients with suspected pulmonary tuberculosis, The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease, 3, 1137-1139, 1999	Study included adults
Masjedi,M.R., Jamaati,H.R., Amin,F.K., Velayati,A.A., Detection of Mycobacterium tuberculosis in bronchial washing of smear-positive patients after sputum conversion, Monaldi archives for chest disease = Archivio Monaldi per le malattie del torace / Fondazione clinica del lavoro, IRCCS [and] Istituto di clinica fisiologica e malattie apparato respiratorio, Universita di Napoli, Secondo ateneoMonaldi Arch Chest Dis, 55, 212-215, 2000	Study includes adults
McWilliams,T., Wells,A.U., Harrison,A.C., Lindstrom,S., Cameron,R.J., Foskin,E., Induced sputum and bronchoscopy in the diagnosis of pulmonary tuberculosis, Thorax, 57, 1010-1014, 2002	Study included adults
Milojevic,B., Babic,I., Bauk,V., Bacteriological investigation in Bronchoscopy. The Laryngoscope, 75, 68-73, 1965	Outcome data not presented in a usable format
Mohan,A., Pande,J.N., Sharma,S.K., Rattan,A., Guleria,R., Khilnani,G.C., Bronchoalveolar lavage in pulmonary tuberculosis: a decision analysis approach, QJM : monthly journal of the Association of Physicians 88, 269-276, 1995	Study included adults
Muruganandan,S., Bartlett,J., Jayaram,L., Rodrigues,M., Hunt,J., Bastiampillai,S., Comparison between bronchial washing (BW) and bronchoalveolar lavage (BAL) in patients who are smear negative or unable to expectorate sputum with suspected pulmonary tuberculosis (TB) [Abstract], Respirology (Carlton, Vic.), 19, 126-, 2014	Abstract
Parry,C.M., Kamoto,O., Harries,A.D., Wirima,J.J., Nyirenda,C.M., Nyangulu,D.S., Hart,C.A., The use of sputum induction for establishing a diagnosis in patients with suspected pulmonary tuberculosis in Malawi, Tubercle and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease, 76, 72-76, 1995	Study includes adults
Planting,N.S., Visser,G.L., Nicol,M.P., Workman,L., Isaacs,W., Zar,H.J., Safety and efficacy of induced sputum in young children hospitalised with suspected pulmonary tuberculosis, The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease, 18, 8-12, 2014	Study already included
Price,C.G., Proceedings: Bronchoscopy in children, Bulletin of the International Union against Tuberculosis, 49 suppl 1, 73-, 1974	Study is not concerned with pulmonary TB
Qureshi,U A, Gupta,A K., Mahajan,B, Qurieshi,MA, Altaf,U, Parihar,R, Bhau,K S, Microbiological diagnosis of pulmonary tuberculosis in children: comparative study of induced sputum and gastric lavage, Indian journal of paediatrics, 78, 1429-1430, 2011	Interim report
Radanov,R., Dobrev,P., Hristov,S., Results of bronchologic investigations in primary pulmonary tuberculosis and some non-specific pulmonary diseases in children from 0-8 years of age, Nauchni trudove na Visshia meditsinski institut, SofiaNauchni Tr Vissh Med Inst Sofia, 51, 19-23, 1972	Study is not concerned with specimen collection
Rao,K.P., Nagpaul,D.R., Bacteriological diagnosis of pulmonary tuberculosis - -	Narrative review

**RQB Excluded studies – Original Search**

sputum microscopy, Bulletin of the International Union against Tuberculosis 44, 67-77, 1970	
Richards,W.F., The role of bronchoscopy in primary pulmonary tuberculosis in children, British journal of diseases of the chest, 56, 49-56, 1962	Study is not concerned with specimen collection
Ruiz Jimenez,M, Guillen MS Prieto Tato,L M., Cacho Calvo,J B., Alvarez Garcia,A, Soto Sanchez,B, Ramos Amador,JT., "Induced sputum versus gastric lavage for the diagnosis of pulmonary tuberculosis in children", BMC infectious diseases, 13, 222-, 2013	Study already included
Sarma,O.A., Kumari,C.S., A review of 150 cases of tuberculosis in children, Indian paediatrics, 13, 143-146, 1976	Study is not concerned with specimen collection
Sinha,S.K., Chatterjee,M., Bhattacharya,S., Pathak,S.K., Mitra,R.Basu, Karak,K., Mukherjee,M., Diagnostic evaluation of extrapulmonary tuberculosis by fine needle aspiraton (FNA) supplemented with AFB smear and culture, Journal of the Indian Medical Association, 101, 588-1, 2003	Study included adults
Starke,J.R., Taylor-Watts,K.T., Tuberculosis in the pediatric population of Houston, Texas, Pediatrics, 84, 28-35, 1989	Descriptive study
Studdy,P.R., Rudd,R.M., Gellert,A.R., Uthayakumar,S., Sinha,G., Geddes,D.M., Bronchoalveolar lavage in the diagnosis of diffuse pulmonary shadowing, British journal of diseases of the chest, 78, 46-54, 1984	Study includes adults
Surve,T Y., Rathod,A D., Role of naso-gastric aspirate in HIV-positive children presenting with respiratory symptoms, Journal of tropical paediatrics, 52, 451-453, 2006	Correspondence
Tevola,K., Bronchial aspiration in the diagnosis of pulmonary tuberculosis, Scandinavian journal of respiratory diseases.Supplementum, 89, 151-154, 1974	Study included adults
Thakur,A., Coulter,J.B., Zutshi,K., Pande,H.K., Sharma,M., Banerjee,A., Richardson,K., Hart,C.A., Laryngeal swabs for diagnosing tuberculosis, Annals of tropical paediatrics, 19, 333-336, 1999	Not a comparative study
Uskul,B.T., Turker,H., Kant,A., Partal,M., Comparison of bronchoscopic washing and gastric lavage in the diagnosis of smear-negative pulmonary tuberculosis, Southern medical journal, 102, 154-158, 2009	Study included adults
Weber,A.L., Bird,K.T., Janower,M.L., Primary tuberculosis in childhood with particular emphasis o hanges affecting the tracheobronchial tree, The American journal of roentgenology, radium therapy, and nuclear medicine, 103, 123-132, 1968	Study is not concerned with specimen collection
Wiersma,H.E., Van Aalderen,W.M., Hoekstra,M.O., Sputum induction for the diagnosis of pulmonary tuberculosis, Archives of disease in childhood, 83, 276-, 2000	Correspondence
Zainudin,B.M., Wahab Sufarlan,A., Rassip,C.N., Ruzana,M.A., Tay,A.M., The role of diagnostic fiberoptic bronchoscopy for rapid diagnosis of pulmonary tuberculosis, The Medical journal of Malaysia, 46, 309-313, 1991	Study included adults

**RQB Excluded studies – Update search**

Reference	Reason for Exclusion
Buonsenso,D, Barone,G, Valentini,P, Pierri,F, Riccardi,R, Chiaretti,A, Utility of intranasal Ketamine and Midazolam to perform gastric aspirates in children: a double-blind, placebo controlled, randomized study, BMC paediatrics, 14, 67-, 2014	Study already included

### RQB Excluded studies – Update search

Cakir,E, Kut,A, Ozkaya,E, Gedik,At H, Midyat,L, Nursoy,M, Bronchoscopic evaluation in childhood pulmonary tuberculosis: risk factors of airway involvement and contribution to the bacteriologic diagnosis, The Pediatric infectious disease journal, 32, 921-923, 2013	Reference already included
Goussard,P, Gie,R, The role of bronchoscopy in the diagnosis and management of pediatric pulmonary tuberculosis, Expert review of respiratory medicine, 8, 101-109, 2014	Narrative review
Muruganandan,S., Bartlett,J., Jayaram,L., Rodrigues,M., Hunt,J., Bastiampillai,S., Comparison between bronchial washing (BW) and bronchoalveolar lavage (BAL) in patients who are smear negative or unable to expectorate sputum with suspected pulmonary tuberculosis (TB) [Abstract], Respirology (Carlton, Vic.), 19, 126-, 2014	Abstract
Planting,N.S., Visser,G.L., Nicol,M.P., Workman,L., Isaacs,W., Zar,H.J., Safety and efficacy of induced sputum in young children hospitalised with suspected pulmonary tuberculosis, The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease, 18, 8-12, 2014	Study already included
Ruiz Jimenez,M, Guillen Martin,S, Prieto Tato,L M., Cacho Calvo,J B., Alvarez Garcia,A, Soto Sanchez,B, Ramos Amador,J. T., "Induced sputum versus gastric lavage for the diagnosis of pulmonary tuberculosis in children", BMC infectious diseases, 13, 222-, 2013	Study already included

### RQ CDEGH

#### RQ CDEGH Excluded studies – Original search

References	Reason for exclusion
Clinical presentation of pulmonary tuberculosis in under 10s and differences in AIDS-related cases: a cohort study of 115 patients. Trop.Doct. 1997; 27(3):139-42.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Computed tomography for the diagnosis of infectious diseases of the chest. Expert Opin.Med.Diagn. 2008; 2(11):1247-62.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Diagnosis of pulmonary tuberculosis. [Review]. Curr.Opin.Pulm.Med. 2013; 19(3):280-88.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Diagnostics for tuberculosis: What test developers want to know. Expert Rev.Mol.Diagn. 2013; 13(4):311-14.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Early diagnosis of spinal tuberculosis by MRI. Journal of Bone & Joint Surgery - British Volume 1994; 76(6):863-69.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic

**RQ CDEGH Excluded studies – Original search**

	review of predominantly test-and-treat RCTs and cross-sectional studies
Economic analysis of tuberculosis diagnostic tests in disease control: how can it be modelled and what additional information is needed? International Journal of Tuberculosis & Lung Disease 2001; 5(12):1099-1008.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Interferon-gamma release assays for diagnosis of tuberculosis infection in children. Pediatr.Infect.Dis.J. 2006; 25(10):941-42.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Is randomization really appropriate for progression studies of test-positive contact persons? Am.J.Respir.Crit.Care Med. 2011;183(12):1732-33.	Not full report of study (e.g. conference abstract)
Laboratory methods for diagnosis and detection of drug resistant Mycobacterium tuberculosis complex with reference to developing countries: a review. East African Medical Journal 2002; 79(5):242-48.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Molecular techniques in mycobacterial detection. Archives of Pathology & Laboratory Medicine 2001; 125(1):122-26.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Nucleic acid amplification tests for tuberculous meningitis: a systematic review of diagnostic accuracy. Natl.Med.J.India 2003; 16(5):260-61.	Not full report of study (e.g. conference abstract)
Pediatric tuberculosis: new guidelines and recommendations. [Review]. Curr.Opin.Pediatr. 2012; 24(3):319-28.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
. Point-of-care detection of lipoarabinomannan (LAM) in urine for diagnosis of HIV-associated tuberculosis: a state of the art review. [Review]. BMC Infect.Dis. 2012; 12():103.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Problems in interpreting tuberculin skin tests. When is a converter not a converter?: a review. Mil.Med. 1973; 138(5):276-79.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Rapid diagnosis of Mycobacterium tuberculosis infection and drug susceptibility testing. [Review]. Archives of Pathology & Laboratory Medicine 2013; 137(6):812-19.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic

**RQ CDEGH Excluded studies – Original search**

	review of predominantly test-and-treat RCTs and cross-sectional studies
Restriction fragment length polymorphism typing of Mycobacterium tuberculosis. Thorax 1995; 50(11):1211-18.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
The accuracy and reliability of nucleic acid amplification tests in the diagnosis of tuberculosis. Natl.Med.J.India 2004; 17(5):233-36.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
The intradermal tuberculin test as a research tool. Its planning, execution, analysis and interpretation. S.Afr.Med.J. 1973; Suid-Afrikaanse(4):142-45.	Not relevant - does not compare differing diagnostic methods for active TB against each other
The new-generation tuberculosis test: Should it be used in pregnancy? Obstet.Gynecol. 2012; 119(6):1085-87.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
The use of purified protein derivative mycobacterial skin test antigens in children and adolescents: purified protein derivative skin test results correlated with mycobacterial isolates. Pediatric Infectious Disease 1983; 2(3):225-31.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Tuberculosis - Diagnosis and investigation. Hosp.Pharm. 2006; 13(3):73-78.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Tuberculosis of the pleura. South.Med.J. 1998; 91(7):630-36.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Achkar, J.M., Lawn,S.D., Moosa,M.Y., Wright,C.A.. Adjunctive tests for diagnosis of tuberculosis: serology, ELISPOT for site-specific lymphocytes, urinary lipoarabinomannan, string test, and fine needle aspiration. [Review]. J.Infect.Dis. 2011; 204: Suppl-41.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Afghani,B., Lieberman,J.M., Duke,M.B.. Comparison of quantitative polymerase chain reaction, acid fast bacilli smear, and culture results in patients receiving therapy for pulmonary tuberculosis. Diagnostic Microbiology & Infectious Disease 1997; 29(2):73-79.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Aftab,R. Clinical, laboratory and computed tomographic features of	Information Services unable



RQ CDEGH Excluded studies – Original search	
tuberculous meningitis in children. <i>Med.Forum Monthly</i> 2005; 16(4):7-11.	to obtain full paper
Aggarwal,A., Salunke,P., Shekhar,B.R., Chhabra,R., Singh,P., Bhattacharya,A.. The role of magnetic resonance imaging and positron emission tomography-computed tomography combined in differentiating benign from malignant lesions contributing to vertebral compression fractures. <i>Surg.Neurol.Intl.</i> 2013; 4(Suppl:5):5-6.	Reference standard not appropriate (not culture or other appropriate reference standard)
Agizew,T.B., Arwady,M.A., Yoon,J.C., Nyirenda,S., Mosimaneotsile,B., Tedla,Z., et al. Tuberculosis in asymptomatic HIV-infected adults with abnormal chest radiographs screened for tuberculosis prevention. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2010; 14(1):45-51.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Aguilar,J., Yang,J.J., Brar,I.. Clinical prediction rule for respiratory isolation of patients with suspected pulmonary tuberculosis. <i>Infect.Dis.Clin.Pract.</i> 2009; 17(5):317-22.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Alcantara-Payawal,D.E., Matsumura,M., Shiratori,Y., Okudaira,T., Gonzalez,R., Lopez,R.A., Sollano,J.D.. Direct detection of Mycobacterium tuberculosis using polymerase chain reaction assay among patients with hepatic granuloma. <i>J.Hepatol.</i> 1997; 27(4):620-27.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
al-Hajjaj,M.S., Gad-el-Rab,M.O., al-Orainey,I.O.. Improved sensitivity for detection of tuberculosis cases by a modified Anda-TB ELISA test. <i>Tubercle &amp; Lung Disease</i> 1999; 79(3):181-85.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Alisjahbana,B., van,Crevel R., Danusantoso,H., Gartinah,T., Soemantri,E.S., Nelwan,R.H. Better patient instruction for sputum sampling can improve microscopic tuberculosis diagnosis. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2005; 9(7):814-17.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Al-Marri,M.R. & Aref,E.. Mammographic features of isolated tuberculous mastitis. <i>Saudi Med.J.</i> 2005; 26(4):646-50.	No relevant or usable outcome data
Almeda,J., Garcia,A., Gonzalez,J., Quinto,L., Ventura,P.J., Vidal,R., et al. Clinical evaluation of an in-house IS6110 polymerase chain reaction for diagnosis of tuberculosis. <i>European Journal of Clinical Microbiology &amp; Infectious Diseases</i> 2000; 19(11):859-67.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Alsleben,N., Ruhwald,M., Russmann,H., Marx,F.M., Wahn,U. Interferon-gamma inducible protein 10 as a biomarker for active tuberculosis and latent tuberculosis infection in children: a case-control study. <i>Scand.J.Infect.Dis.</i> 2012; 44(4):256-62.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Amicosante,M., Barnini,S., Corsini,V., Paone,G., Read,C.A., Jr., Tartoni,P.L., et al. Evaluation of a novel tuberculosis complex-specific 34 kDa protein in the serological diagnosis of tuberculosis. <i>Eur.Respir.J.</i> 1995; 8(12):2008-14.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies



**RQ CDEGH Excluded studies – Original search**

Angeby,K., Jureen,P., Kahlmeter,G., Hoffner,S.E. Challenging a dogma: antimicrobial susceptibility testing breakpoints for Mycobacterium tuberculosis. Bull.WHO 2012;90(9):693-98.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Angeby,K.A. & Hoffner,S.E.. Should the 'bleach microscopy method' be recommended for improved case detection of tuberculosis? Literature review and key person analysis. International Journal of Tuberculosis & Lung Disease 2004;8(7):806-15.	Reference standard not appropriate (not culture or other appropriate reference standard)
Ansari,S, Amanullah,M., Ahmad,K.. Pott's spine: Diagnostic imaging modalities and technology advancements. North Am.J.Med.Sci. 2013; 5(7):404-11.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Arend,S.M., Franken,W.P., Aggerbeck,H., Prins,C., van Dissel,J.T., Thierry-Carstensen,B., et al. Double-blind randomized Phase I study comparing rdESAT-6 to tuberculin as skin test reagent in the diagnosis of tuberculosis infection. Tuberculosis 2008; 88(3):249-61.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Asnaashari,A.M.H., Towhidi,M., Farid,R., Abbaszadegan,M.R., Attaran,D., Fatemi,S.S.. Evaluation of polymerase chain reaction for diagnosis of 'tuberculous pleurisy'. Tanaffos 2011; 10(1):12-18.	Insufficient data to construct a 2x2 or reliably report sensitivity and specificity
Baba,K., Hoosen,A.A., Langeland,N.. Adenosine deaminase activity is a sensitive marker for the diagnosis of tuberculous pleuritis in patients with very low CD4 counts. PLoS ONE [Electronic Resource] 2008; 3(7):e2788.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Bahammam,A. & Choudhri,S.. Utility of gastric aspirates in screening for pulmonary tuberculosis in high risk subjects:The Manitoba experience. Can.J.Infect.Dis. 1999; 10(1):69-73.	Wrong population - latent TB or screening
Bahrmand,A.R. & Bakayev,V.V.. Use of polymerase chain reaction for primary diagnosis of pulmonary tuberculosis in the clinical laboratory. Scand.J.Infect.Dis. 1996; 28(5):469-72.	In-house test, rather than commercial test
Balasubramanian,R., Rajeswari,R., Naik,A.C., Duraipandian,M., Karunakaran,K.. A double-blind study of oral salbutamol supplement and repeat sputum smear microscopy in enhancing diagnosis of smear-negative pulmonary tuberculosis in south india. Indian J.Tuberc. 2004; 51(4):191-98.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Ball,P.M., Pernollet,M., Bouillet,L., Maurin,M., Pavese,P., Quesada,J.L., Romanet,J.P.. Usefulness of an in-vitro tuberculosis interferon-γ release assay (T-SPOT.TB) in the first-line check-up of uveitis patients. Annals of Medicine 2010; 42(7):546-54.	Reference standard not appropriate (not culture or other appropriate reference standard)
Banales,J.L., Pineda,P.R., FitzGerald,J.M., Rubio,H., Selman,M.. Adenosine deaminase in the diagnosis of tuberculous pleural effusions. A report of 218 patients and review of the literature. Chest 1991;99(2):355-57.	No relevant or usable outcome data
Banker,D.D., Daftary,V.G., Daftary,G.V., Pal,R.B.. Tuberculosis screening: usefulness of new KREATECH IgA ELISA test. Indian Journal of Medical Sciences 1994; 48(8):181-85.	Reference standard not appropriate (not culture or other appropriate reference

RQ CDEGH Excluded studies – Original search	
	standard)
Banu,S., Hossain,S., Uddin,M.K.M., Rahman,M.T., Khatun,R., Zaman,K., Quaiyum,M.A.. Comparison of macroscopic and microscopic assessment of specimens collected for the diagnosis of tuberculosis. <i>Open Infect.Dis.J.</i> 2012 ;6(1):1-4.	No relevant or usable outcome data
Bark,C.M., Okwera,A., Joloba,M.L., Thiel,B.A., Nakibali,J.G., Debanne,S.M., et al. Time to detection of Mycobacterium tuberculosis as an alternative to quantitative cultures. <i>Tuberculosis</i> 2011; 91(3):257-59.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Baylan,O., Balkan,A., Inal,A., Kisa,O., Albay,A., Doganci,L.. The predictive value of serum procalcitonin levels in adult patients with active pulmonary tuberculosis. <i>Jpn.J.Infect.Dis.</i> 2006; 59(3):164-67.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Benjamin,R.G.. Serodiagnosis of tuberculosis using the enzyme-linked immunoabsorbent assay (ELISA) of antibody to Mycobacterium tuberculosis antigen 5. <i>Am.Rev.Respir.Dis.</i> 1982; 126(6):1013-16.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Bensi,E.P. & Panunto,P.C.. Incidence of tuberculous and non-tuberculous mycobacteria, differentiated by multiplex PCR, in clinical specimens of a large general hospital. <i>Clinics (Sao Paulo, Brazil)</i> 2013; 68(2):179-84.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Bergstedt,W., Tingskov,P.N., Thierry-Carstensen,B., Hoff,S.T., Aggerbeck,H., Thomsen,V.O., Andersen,P.. First-in-man open clinical trial of a combined rdESAT-6 and rCFP-10 tuberculosis specific skin test reagent. <i>PLoS ONE [Electronic Resource]</i> 2010; 5(6):e11277.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Beveridge,N.E., Fletcher,H.A., Hughes,J., Pathan,A.A., Scriba,T.J., Minassian,A., et al. A comparison of IFNgamma detection methods used in tuberculosis vaccine trials. <i>Tuberculosis</i> 2008; 88(6):631-40.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Bhatia,A.S., Gupta,S., Shende,N., Kumar,S.. Serodiagnosis of childhood tuberculosis by ELISA. <i>Indian J.Pediatr.</i> 2005; 72(5):383-87.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Blakemore,R., Nabeta,P., Davidow,A.L., Vadwai,V., Tahirli,R., Munsamy,V., et al. A multisite assessment of the quantitative capabilities of the Xpert MTB/RIF assay. <i>American Journal of Respiratory &amp; Critical Care Medicine</i> 2011; 184(9):1076-84.	Includes some/all of the population from an included study
Boehme, C.C. & Saacks,S.. The changing landscape of diagnostic services for tuberculosis. [Review]. <i>Seminars in Respiratory &amp; Critical Care Medicine</i> 2013; 34(1):17-31.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Boehme,C.C., Nabeta,P., Hillemann,D., Nicol,M.P., Shenai,S., Krapp,F., et al.	Paper synthesized in included

RQ CDEGH Excluded studies – Original search	
Rapid molecular detection of tuberculosis and rifampin resistance. <i>New Engl.J.Med.</i> 2010; 363(11):1005-15.	meta-analysis; no other relevant outcome data
Boehme,C.C., Nicol,M.P., Nabeta,P., Michael,J.S., Gotuzzo,E., Tahirli,R., et al. Feasibility, diagnostic accuracy, and effectiveness of decentralised use of the Xpert MTB/RIF test for diagnosis of tuberculosis and multidrug resistance: a multicentre implementation study. <i>Lancet</i> 2011; 377(9776):1495-5005.	Paper synthesized in included meta-analysis; no other relevant outcome data
Bonnet,M., Ramsay,A., Gagnidze,L., Githui,W., Guerin,P.J.. Reducing the number of sputum samples examined and thresholds for positivity: An opportunity to optimise smear microscopy. <i>Int.J.Tuberc.Lung Dis.</i> 2007; 11(9):953-58.	Reference standard not appropriate (not culture or other appropriate reference standard)
Boondireke,S., Mungthin,M., Tan-ariya,P., Boonyongsunchai,P., Naaglor,T., Wattanathum,A., Treewatchareekorn,S.. Evaluation of sensitivity of multiplex PCR for detection of <i>Mycobacterium tuberculosis</i> and <i>Pneumocystis jirovecii</i> in clinical samples. <i>J.Clin.Microbiol.</i> 2010; 48(9):3165-68.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Borgstrom, E., Andersen,P., Atterfelt,F., Julander,I., Kallenius,G., Maeurer,M., et al. Immune responses to ESAT-6 and CFP-10 by FASCIA and multiplex technology for diagnosis of <i>M. tuberculosis</i> infection; IP-10 is a promising marker. <i>PLoS ONE [Electronic Resource]</i> 2012; 7(11):e43438.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Bosch-Marcet, J., Serres-Creixams,X., Borrás-Perez,V., Coll-Sibina,M.T., Guitet-Julia,M.. Value of sonography for follow-up of mediastinal lymphadenopathy in children with tuberculosis. <i>J.Clin.Ultrasound</i> 2007; 35(3):118-24.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Bramante, C.T., Talbot,E.A., Rathinam,S.R., Stevens,R.. Diagnosis of ocular tuberculosis: A role for new testing modalities? <i>Int.Ophthalmol.Clin.</i> 2007; 47(3):45-62.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Brant, C.Q., Silva,M.R.,Jr., Macedo,E.P., Vasconcelos,C., Tamaki,N.. The value of adenosine deaminase (ADA) determination in the diagnosis of tuberculous ascites. <i>Rev.Inst.Med.Trop.Sao Paulo</i> 1995; 37(5):449-53.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Burgess,L.J., Maritz,F.J., Le,Roux,I. Use of adenosine deaminase as a diagnostic tool for tuberculous pleurisy. <i>Thorax</i> 1995;50(6):672-74.	No relevant or usable outcome data
Burman,W.J.. Review of false-positive cultures for <i>Mycobacterium tuberculosis</i> and recommendations for avoiding unnecessary treatment. <i>Clin.Infect.Dis.</i> 2000; 1(6):1390-95.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Bwanga,F., Hoffner,S., Haile,M.. Direct susceptibility testing for multi drug resistant tuberculosis: a meta-analysis. <i>BMC Infect.Dis.</i> 2009; 9():67.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Caminero,J.A., Rodriguez de,Castro F., Carrillo,T., Lafarga,B., Daiz,F.. Value	Wrong study design - not

RQ CDEGH Excluded studies – Original search	
of ELISA using A60 antigen in the serodiagnosis of tuberculosis. <i>Respiration</i> 1994; 61(5):283-86.	test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Cannas,A., Goletti,D., Girardi,E., Chiacchio,T., Calvo,L., Cuzzi,G., et al. Mycobacterium tuberculosis DNA detection in soluble fraction of urine from pulmonary tuberculosis patients. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2008; 12(2):146-51.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Carroll, N.M., Uys,P., Hesselning,A., Lawrence,K., Pheiffer,C., Salker,F., et al. Prediction of delayed treatment response in pulmonary tuberculosis: use of time to positivity values of Bactec cultures. <i>Tuberculosis</i> 2008; 88(6):624-30.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Carstens, M.E., Burgess,L.J., Maritz,F.J.. Isoenzymes of adenosine deaminase in pleural effusions: a diagnostic tool? <i>International Journal of Tuberculosis &amp; Lung Disease</i> 1998; 2(10):831-35.	No relevant or usable outcome data
Casal, R.F., Staerkel,G.A., Ost,D., Almeida,F.A., Uzbeck,M.H., Eapen,G.A., et al. Randomized clinical trial of endobronchial ultrasound needle biopsy with and without aspiration. <i>Chest</i> 2012; 142(3):568-73.	Wrong population - not TB
Catanzaro,A., Perry,S., Clarridge,J.E., Dunbar,S., Goodnight-White,S., LoBue,P.A., et al. The role of clinical suspicion in evaluating a new diagnostic test for active tuberculosis: results of a multicenter prospective trial. <i>JAMA</i> 2000; 283(5):639-45.	Paper synthesized in included meta-analysis; no other relevant outcome data
Cattamanchi,A., Davis,J.L., Pai,M., Huang,L., Hopewell,P.C.. Does bleach processing increase the accuracy of sputum smear microscopy for diagnosing pulmonary tuberculosis? <i>J.Clin.Microbiol.</i> 2010;48(7):2433-39.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Cattamanchi,A., Davis,J.L., Worodria,W., Yoo,S., Matovu,J., Kiidha,J., et al. Poor performance of universal sample processing method for diagnosis of pulmonary tuberculosis by smear microscopy and culture in Uganda. <i>J.Clin.Microbiol.</i> 2008; 46(10):3325-29.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Chadha,V.K., Jagannatha,P.S., Vaidyanathan,P.S.. PPD RT23 for tuberculin surveys in India. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2003; 7(2):172-79.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Chang, D.B., Yang,P.C., Luh,K.T., Wu,H.D., Lee,L.N., Kuo,S.H.. Ultrasonic evaluation of cervical lymphadenopathy. <i>J.Formos.Med.Assoc.</i> 1990; 89(4):286-92.	Wrong population - not TB
Chang,K., Lu,W., Wang,J., Zhang,K., Jia,S., Li,F., Deng,S.. Rapid and effective diagnosis of tuberculosis and rifampicin resistance with Xpert MTB/RIF assay: a meta-analysis. <i>J.Infect.</i> 2012; 64(6):580-88.	Includes some/all of the population from an included study
Chang,K.C. & Yew,W.W.. Pyrazinamide susceptibility testing in Mycobacterium tuberculosis: a systematic review with meta-analyses. [Review]. <i>Antimicrobial Agents &amp; Chemotherapy</i> 2011; 55(10):4499-5005.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Chang,K.C. & Yew,W.W.. Rapid assays for fluoroquinolone resistance in Mycobacterium tuberculosis: a systematic review and meta-analysis.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic

**RQ CDEGH Excluded studies – Original search**

[Review]. J.Antimicrob.Chemother. 2010; 65(8):1551-61.	review of predominantly test-and-treat RCTs and cross-sectional studies
Chang,K.C.. Systematic review of interferon-gamma release assays in tuberculosis: focus on likelihood ratios. Thorax 2010; 65(3):271-76.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Chauhan,S. & Gahalaut,P.. Tuberculin Skin Test, chest radiography and contact screening in children <=5 y: relevance in Revised National Tuberculosis Control Programme (RNTCP). Indian J.Pediatr. 2013; 80(4):276-80.	Not full report of study (e.g. conference abstract)
Chegou,N.N., Essone,P.N., Loxton,A.G., Stanley,K., Black,G.F., van der Spuy,G.D., et al. Potential of host markers produced by infection phase-dependent antigen-stimulated cells for the diagnosis of tuberculosis in a highly endemic area. PLoS ONE [Electronic Resource] 2012; 7(6):e38501.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Chen,W., Fan,J.H., Luo,W., Peng,P.. Effectiveness of interferon-gamma release assays for differentiating intestinal tuberculosis from Crohn's disease: A meta-analysis. World J.Gastroenterol. 2013; 19(44):8133-40.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Cheng,G., He,Y.S., Zhou,X.Y., Deng,W.G.. Development and clinical trial of fluorescence PCR diagnostic kit to detect Mycobacterium tuberculosis. Di Yi Junyi Daxue Xuebao 2002; 22(6):533-35.	Not in English
Chew,R., Calderon,C., Schumacher,S.G., Sherman,J.M., Caviedes,L., Fuentes,P., et al. Evaluation of bleach-sedimentation for sterilising and concentrating Mycobacterium tuberculosis in sputum specimens. BMC Infect.Dis. 2011; 11():269.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Chiappini,E., Accetta,G., Bonsignori,F., Boddi,V., Galli,L., Biggeri,A.. Interferon- release assays for the diagnosis of Mycobacterium tuberculosis infection in children: a systematic review and meta-analysis. [Review]. International Journal of Immunopathology & Pharmacology 2012; 25(3):557-64.	Wrong population - latent TB or screening
Chiappini,E., Della,Bella C., Bonsignori,F., Sollai,S., Amedei,A., Galli,L., et al. Potential role of M. tuberculosis specific IFN- and IL-2 ELISPOT assays in discriminating children with active or latent tuberculosis. PLoS ONE [Electronic Resource] 2012; 7(9):e46041.	In-house test, rather than commercial test
Cinar,F., Cinar,S., Yilmaz,B.. Purified protein derivative: The vital part of the cervical tuberculous adenitis diagnosis. Otolaryngol.Head Neck Surg. 2003; 129(3):245-47.	No relevant or usable outcome data
Cirak,A.K., Komurcuoglu,B., Tekgul,S., Bilaceroglu,S., Tasdogan,N.. The diagnostic efficiency of QuantiFERONTB-Gold test in the diagnosis of tuberculous pleurisy. Int.J.Mycobacteriology 2012;1(4):180-84.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Coban,A.Y., Birinci,A., Ekinici,B.. Drug susceptibility testing of Mycobacterium tuberculosis by the broth microdilution method with 7H9	Not relevant - does not compare differing diagnostic

**RQ CDEGH Excluded studies – Original search**

broth. Memorias do Instituto Oswaldo Cruz 2004;99(1):111-13.	methods for active TB against each other
Cohen,D.. Evidence supports TB test, so what now? Cochrane Database Syst.Rev. 2013;2():ED000051.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Cohen,R., Muzaffar,S., Capellan,J., Azar,H.. The validity of classic symptoms and chest radiographic configuration in predicting pulmonary tuberculosis. Chest 1996;109(2):420-23.	No relevant or usable outcome data
Conaty,S.J., Claxton,A.P., Enoch,D.A., Hayward,A.C., Lipman,M.C.I.. The interpretation of nucleic acid amplification tests for tuberculosis: Do rapid tests change treatment decisions? J.Infect. 2005;50(3):187-92.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Cordero,M.. Brucellar and tuberculous spondylitis. A comparative study of their clinical features. J.Bone Jt.Surg.Ser.B 1991;73(1):100-03.	No relevant or usable outcome data
Cruciani,M.. An Overview of Meta-analyses of Diagnostic Tests in Infectious Diseases. Infect.Dis.Clin.North Am. 2009;23(2):225-67.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Crump,J.A., Tanner,D.C., Mirrett,S., McKnight,C.M.. Controlled comparison of BACTEC 13A, MYCO/F LYTIC, BacT/ALERT MB, and ISOLATOR 10 systems for detection of mycobacteremia. J.Clin.Microbiol. 2003;41(5):1987-90.	Wrong population - not TB
Cuevas,L.E., Yassin,M.A., Al-Sonboli,N., Lawson,L., Arbide,I., Al-Aghbari,N., et al. A multi-country non-inferiority cluster randomized trial of frontloaded smear microscopy for the diagnosis of pulmonary tuberculosis. PLoS Medicine / Public Library of Science 2011;8(7):e1000443.	Includes some/all of the population from an included study
Dai,Y., Feng,Y., Xu,R., Xu,W., Lu,W.. Erratum: Evaluation of interferon-gamma release assays for the diagnosis of tuberculosis: An updated meta-analysis (European Journal of Clinical Microbiology and Infectious Diseases (2012) 31 (3127-3137)) DOI:10.1007/s10096-012-1674-y). Eur.J.Clin.Microbiol.Infect.Dis. 2013;32(7):967.	Not full report of study (e.g. conference abstract)
Daley,P. & Thomas,S.. Nucleic acid amplification tests for the diagnosis of tuberculous lymphadenitis: a systematic review. International Journal of Tuberculosis & Lung Disease 2007;11(11):1166-76.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
D'Amato,R.F.. Rapid diagnosis of pulmonary tuberculosis using Roche AMPLICOR Mycobacterium tuberculosis PCR test. Methods in Molecular Biology 1998;92:203-14.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Daniel,T.M.. The serodiagnosis of tuberculosis and other mycobacterial diseases by enzyme-linked immunosorbent assay. Am.Rev.Respir.Dis . 1987;135(5):1137-51.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-



**RQ CDEGH Excluded studies – Original search**

	sectional studies
Dasgupta,K.. Cost-effectiveness of tuberculosis control strategies among immigrants and refugees. <i>Eur.Respir.J.</i> 2005;25(6):1107-16.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Davis,J.L., Cattamanchi,A., Cuevas,L.E., Hopewell,P.C.. Diagnostic accuracy of same-day microscopy versus standard microscopy for pulmonary tuberculosis: a systematic review and meta-analysis. [Review]. <i>Lancet Infect.Dis.</i> 2013;13(2):147-54.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Dayal,R., Sirohi,G., Singh,M.K., Mathur,P.P., Agarwal,B.M., Katoch,V.M., et al. Diagnostic value of Elisa serological tests in childhood tuberculosis. <i>J.Trop.Pediatr.</i> 2006;52(6):433-37.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Dayal,R., Verma,V., Sharma,B., Kumar,G., Kumar,N., Gupta,R., et al. Diagnostic value of interferon- gamma release assays (QuantiFERON-TB Gold In Tube) in childhood tuberculosis. <i>Indian J.Pediatr.</i> 2012;79(2):183-87.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Del Beccaro,M.A. & Mendelman,P.M.. Diagnostic usefulness of mycobacterial skin test antigens in childhood lymphadenitis. <i>Pediatr.Infect.Dis.J.</i> 1989;8(4):206-10.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Delacourt,C., Poveda,J.D., Chureau,C., Beydon,N., Mahut,B., de,Blic J., Scheinmann,P.. Use of polymerase chain reaction for improved diagnosis of tuberculosis in children. <i>Journal of Pediatrics</i> 1995;126(5:Pt 1):t-9.	No relevant or usable outcome data
Delgado,J.C., Quinones-Berrocal,J., Thim,S., Miranda,L.F.. Diagnostic and clinical implications of response to tuberculin in two ethnically distinct populations from Peru and Cambodia. <i>Int.J.Tuberc.Lung Dis.</i> 2004;8(8):982-87.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Delogu,G. & Zumbo,A.. Microbiological and immunological diagnosis of tuberculous spondylodiscitis. [Review]. <i>European Review for Medical &amp; Pharmacological Sciences</i> 2012;16():Suppl-8.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Dendukuri,N., Schiller,I., Joseph,L.. Bayesian meta-analysis of the accuracy of a test for tuberculous pleuritis in the absence of a gold standard reference. <i>Biometrics</i> 2012;68(4):1285-93.	In-house test, rather than commercial test
Denkinger,C.M. & Dheda,K.. Guidelines on interferon- release assays for tuberculosis infection: concordance, discordance or confusion?. [Review]. <i>Clinical Microbiology &amp; Infection</i> 2011;17(6):806-14.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Denkinger,C.M. & Kik,S.V.. Robust, reliable and resilient: Designing	Wrong study design - not



**RQ CDEGH Excluded studies – Original search**

molecular tuberculosis tests for microscopy centers in developing countries. <i>Expert Rev.Mol.Diagn.</i> 2013;13(8):763-67.	test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Denkinger,C.M., Grenier,J., Minion,J.. Promise versus reality: Optimism bias in package inserts for tuberculosis diagnostics. <i>J.Clin.Microbiol.</i> 2012;50(7):2455-61.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Devkota,K.C., Shyam,B.K., Sherpa,K., Ghimire,P., Sherpa,M.T., Shrestha,R.. Significance of adenosine deaminase in diagnosing tuberculous pleural effusion. <i>Nepal Medical College Journal:</i> 2012;14(2):149-52.	No relevant or usable outcome data
Dewan,P.K., Grinsdale,J., Liska,S., Wong,E., Fallstad,R.. Feasibility, acceptability, and cost of tuberculosis testing by whole-blood interferon-gamma assay. <i>BMC Infect.Dis.</i> 2006; 6	No relevant or usable outcome data
Diacon,A.H., Maritz,J.S., Venter,A., van Helden,P.D., Andries,K., McNeeley,D.F.. Time to detection of the growth of <i>Mycobacterium tuberculosis</i> in MGIT 960 for determining the early bactericidal activity of antituberculosis agents. <i>European Journal of Clinical Microbiology &amp; Infectious Diseases</i> 2010;29(12):1561-65.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Diel,R. & Loadenkemper,R.. Evidence-Based comparison of commercial Interferon- Release assays for detecting active TB a metaanalysis. <i>Chest</i> 2010;137(4):952-68.	Duplicate
Doucet-Populaire,F., Lalande,V., Carpentier,E., Bourgoin,A., Dailloux,M., Bollet,C., et al. A blind study of the polymerase chain reaction for the detection of <i>Mycobacterium tuberculosis</i> DNA. <i>Azay Mycobacteria Study Group. Tubercle &amp; Lung Disease</i> 1996;77(4):358-62.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Drobniewski,F., Nikolayevskyy,V., Maxeiner,H., Balabanova,Y., Casali,N., Kontsevaya,I.. Rapid diagnostics of tuberculosis and drug resistance in the industrialized world: Clinical and public health benefits and barriers to implementation. <i>BMC Med.</i> 2013;11(1)	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Drobniewski,F.A. & More,P.G.. Differentiation of <i>Mycobacterium tuberculosis</i> complex and nontuberculous mycobacterial liquid cultures by using peptide nucleic acid-fluorescence In situ hybridization probes. <i>J.Clin.Microbiol.</i> 2000;38(1):444-47.	No relevant or usable outcome data
du,Plessis,V, Andronikou,S., Struck,G., McKerrow,N.. Baseline chest radiographic features of HIV-infected children eligible for antiretroviral therapy. <i>S.Afr.Med.J.</i> 2011;101(11):829-34.	No relevant or usable outcome data
El-Hamad,I., Casalini,C., Matteelli,A., Casari,S., Bugiani,M., Caputo,M., et al. Screening for tuberculosis and latent tuberculosis infection among undocumented immigrants at an unspecialised health service unit. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2001;5(8):712-16.	Not relevant - does not compare differing diagnostic methods for active TB against each other
el-Nawawy,A.A., Massoud,M.N., el-Nazzar,S.Y.. Pulmonary tuberculosis as a cause of recurrent wheezy chest: the value of serological diagnosis using IgG antibodies to mycobacterium 38 kDa antigen. <i>J.Trop.Pediatr.</i> 2000;46(1):53-54.	Not full report of study (e.g. conference abstract)

**RQ CDEGH Excluded studies – Original search**

Emad,A.. Diagnostic value of closed percutaneous pleural biopsy vs pleuroscopy in suspected malignant pleural effusion or tuberculous pleurisy in a region with a high incidence of tuberculosis: a comparative, age-dependent study. <i>Respir.Med.</i> 1998;92(3):488-92.	Reference standard not appropriate (not culture or other appropriate reference standard)
Erdtmann,F.J. & Dixon,K.E.. Skin testing for tuberculosis. Antigen and observer variability. <i>JAMA</i> 1974;228(4):479-81.	Wrong population - latent TB or screening
Etokebe,G.E., Bulat-Kardum,L., Johansen,M.S., Knezevic,J., Balen,S., Matakovic-Mileusnic,N., et al. Interferon-gamma gene (T874A and G2109A) polymorphisms are associated with microscopy-positive tuberculosis. <i>Scand.J.Immunol.</i> 2006;63(2):136-41.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Farhat,M., Greenaway,C., Pai,M.. False-positive tuberculin skin tests: what is the absolute effect of BCG and non-tuberculous mycobacteria? <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2006;10(11):1192-2004.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Farivar,T.N., Johari,P., Moien,A.A., Shahri,M.H., Naderi,M.. Assessment of prevalence of non-tuberculous mycobacteria in archival acid-fast bacilli positive smear slides by taqman real-time PCR assay. <i>North Am.J.Med.Sci.</i> 2012;4(5):231-34.	No relevant or usable outcome data
Feng,Y., Liu,S., Wang,Q., Wang,L., Tang,S., Wang,J.. Rapid diagnosis of drug resistance to fluoroquinolones, amikacin, capreomycin, kanamycin and ethambutol using genotype MTBDRsl assay: a meta-analysis. [Review]. <i>PLoS ONE [Electronic Resource]</i> 2013;8(2):e55292.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Field,N., Murray,J., Wong,M.L., Dowdeswell,R., Dudumayo,N., Rametsi,L., et al. Missed opportunities in TB diagnosis: a TB process-based performance review tool to evaluate and improve clinical care. <i>BMC Public Health</i> 2011;11():127.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Fletcher,H.A., Tanner,R., Wallis,R.S., Meyer,J., Manjaly,Z.R., Harris,S., et al. Inhibition of mycobacterial growth in vitro following primary but not secondary vaccination with <i>Mycobacterium bovis</i> BCG. <i>Clinical &amp; Vaccine Immunology: CVI</i> 2013;20(11):1683-89.	Information Services unable to obtain full paper
Fletcher,J. Tuberculin sensitivity in Crohn's disease. A controlled study. <i>Lancet</i> 1967;2(7519):753-54.	Wrong population - latent TB or screening
Flores,L.L., Pai,M., Colford,J.M.,Jr.. In-house nucleic acid amplification tests for the detection of <i>Mycobacterium tuberculosis</i> in sputum specimens: meta-analysis and meta-regression. <i>BMC Microbiol.</i> 2005;5():55.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Flores,L.L., Steingart,K.R., Dendukuri,N., Schiller,I., Minion,J., Pai,M., et al. Systematic review and meta-analysis of antigen detection tests for the diagnosis of tuberculosis. [Review]. <i>Clinical &amp; Vaccine Immunology: CVI</i> 2011;18(10):1616-27.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Fontana,D., Pozzi,E., Porpiglia,F., Galietti,F., Morra,I., Rocca,A.. Rapid identification of <i>Mycobacterium tuberculosis</i> complex on urine samples by Gen-Probe amplification test. <i>Urological Research</i> 1997;25(6):391-94.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies

**RQ CDEGH Excluded studies – Original search**

<p>Friedrich,S.O., Rachow,A., Saathoff,E., Singh,K., Mangu,C.D., Dawson,R., et al. Assessment of the sensitivity and specificity of Xpert MTB/RIF assay as an early sputum biomarker of response to tuberculosis treatment. <i>Lancet Respir.Med.</i> 2013;1(6):462-70.</p>	<p>Not relevant - does not compare differing diagnostic methods for active TB against each other</p>
<p>Friedrich,S.O., Venter,A., Kayigire,X.A., Dawson,R., Donald,P.R.. Suitability of Xpert MTB/RIF and genotype MTBDRplus for patient selection for a tuberculosis clinical trial. <i>J.Clin.Microbiol.</i> 2011; 49(8):2827-31.</p>	<p>Paper synthesized in included meta-analysis; no other relevant outcome data</p>
<p>Fukuda,H., Ibukuro,K., Tsukiyama,T.. CT-guided transthoracic core biopsy for pulmonary tuberculosis: Diagnostic value of the histopathological findings in the specimen. <i>Cardiovasc.Intervent.Radiol.</i> 2004; 27(3):226-30.</p>	<p>Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies</p>
<p>Gambhir,I.S., Mehta,M., Singh,D.S.. Evaluation of CSF-adenosine deaminase activity in tubercular meningitis. <i>Journal of the Association of Physicians of India</i> 1999; 47(2):192-94.</p>	<p>Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies</p>
<p>Geldmacher,H., Taube,C., Kroeger,C., Magnussen,H.. Assessment of lymph node tuberculosis in northern Germany: a clinical review. <i>Chest</i> 2002; 121(4):1177-82.</p>	<p>Tests not conducted concomitantly, or results for both diagnostic AND reference standard not available for every patient</p>
<p>Gie,R.P., Beyers,N., Schaaf,H.S.. The challenge of diagnosing tuberculosis in children: A perspective from a high incidence area. <i>Paediatr.Respir.Rev.</i> 2004; 5(SUPPL. 1):S147-49.</p>	<p>Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies</p>
<p>Glasziou,P. &amp; Irwig,L.. When should a new test become the current reference standard? <i>Ann.Intern.Med.</i> 2008;149(11):816-21.</p>	<p>Not relevant - does not compare differing diagnostic methods for active TB against each other</p>
<p>Gocmen,A., Kiper,N., Ertan,U., Kalayci,O.. Is the BCG test of diagnostic value in tuberculosis? [see comments]. <i>Tuber Lung Dis</i> 1994;75(1):54-57.</p>	<p>Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies</p>
<p>Goel,M.M., Ranjan,V., Dhole,T.N., Srivastava,A.N., Mehrotra,A., Kushwaha,M.R.. Polymerase chain reaction vs. conventional diagnosis in fine needle aspirates of tuberculous lymph nodes. <i>Acta Cytol.</i> 2001;45(3):333-40.</p>	<p>Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies</p>
<p>Goh,K.S.. Rapid preliminary differentiation of species within the <i>Mycobacterium tuberculosis</i> complex: proposition of a radiometric method. <i>Research in Microbiology</i> 1991;142(6):659-65.</p>	<p>Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies</p>

**RQ CDEGH Excluded studies – Original search**

Gomez,D.I., Mullin,C.S., Mora-Guzman,F., Crespo-Solis,J.G., Fisher-Hoch,S.P., McCormick,J.B.. Rapid DNA extraction for specific detection and quantitation of Mycobacterium tuberculosis DNA in sputum specimens using Taqman assays. Tuberculosis 2011;91():Suppl-8.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Gomez-Pastrana,D.. Should pulmonary computed tomography be performed in children with tuberculosis infection without apparent disease? An.Pediatr. 2007;67(6):585-93.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Gonzalez,A.V.. Review: Heterogeneous studies show that nucleic acid amplification tests accurately rule in but do not rule out TB. Evidence Based Medicine 2007;12(4):121.	Not full report of study (e.g. conference abstract)
Gotshall,R.A.. Comparison of time and intradermal PPD tests for tuberculosis in hospital patients. Public Health Rep. 1967;82(4):365-67.	Wrong population - latent TB or screening
Gounder,C., De Queiroz Mello,F.C., Conde,M.B., Bishai,W.R., Kritski,A.L., Chaisson,R.E.. Field evaluation of a rapid immunochromatographic test for tuberculosis. J.Clin.Microbiol. 2002;40(6):1989-93.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Greco,S., Girardi,E., Masciangelo,R., Capocchetta,G.B.. Adenosine deaminase and interferon gamma measurements for the diagnosis of tuberculous pleurisy: a meta-analysis. International Journal of Tuberculosis & Lung Disease 2003;7(8):777-86.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Greco,S., Girardi,E., Navarra,A.. Current evidence on diagnostic accuracy of commercially based nucleic acid amplification tests for the diagnosis of pulmonary tuberculosis. Thorax 2006;61(9):783-90.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Grieco,M.H.. Acute disseminated tuberculosis as a diagnostic problem. A clinical study based on twenty-eight cases. Am.Rev.Respir.Dis. 1974; 109(5):554-60.	No relevant or usable outcome data
Gulati,M., Venkataramu,N.K., Gupta,S., Sood,B.P., Sheena,D.M., Gupta,S.K.. Ultrasound guided fine needle aspiration biopsy in mediastinal tuberculosis. International Journal of Tuberculosis & Lung Disease 2000;4(12):1164-68.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Gupta,R.K., Agarwal,P., Rastogi,H., Kumar,S., Phadke,R.V.. Problems in distinguishing spinal tuberculosis from neoplasia on MRI. Neuroradiology 1996;38():Suppl-104.	Reference standard not appropriate (not culture or other appropriate reference standard)
Gupta,S. & Bhatia,R.. Serodiagnosis of tuberculosis. Journal of Communicable Diseases 1995;27(4):208-14.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies

**RQ CDEGH Excluded studies – Original search**

Hadgu,A., Miller,W., Pepe,M.S.. Using a combination of reference tests to assess the accuracy of a diagnostic test (multiple letters). <i>Stat.Med.</i> 2001;20(4):656-60.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Hadgu,A.. Nucleic acid amplification tests for diagnosis of tuberculous meningitis. <i>Lancet Infect.Dis.</i> 2004;4(1):9-10.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Handojo,I.. The immunoserological diagnosis of tuberculosis: a comparison of two tests. <i>Southeast Asian Journal of Tropical Medicine &amp; Public Health</i> 2005;36(1):141-44.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Hanif,S.N., Eldeen,H.S., Ahmad,S.. GeneXpert MTB/RIF for rapid detection of <i>Mycobacterium tuberculosis</i> in pulmonary and extra-pulmonary samples. <i>Int.J.Tuberc.Lung Dis.</i> 2011;15(9):1274-75.	Not full report of study (e.g. conference abstract)
He,X.Y., Luo,Y.A., Zhang,X.G., Liu,Y.D., Wang,Z.Y., Luo,F.Z., et al. Clinical evaluation of the recombinant 38 kDa protein of <i>Mycobacterium tuberculosis</i> . <i>Scand.J.Infect.Dis.</i> 2008;40(2):121-26.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Hepple,P. & Ford,N.. Microscopy compared to culture for the diagnosis of tuberculosis in induced sputum samples: a systematic review. [Review]. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2012;16(5):579-88.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Ho,J., Marais,B.J., Gilbert,G.L.. Diagnosing tuberculous meningitis - have we made any progress? <i>Trop.Med.Int.Health</i> 2013;18(6):783-93.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Honore,S., Vincensini,J.P., Hocqueloux,L., Noguera,M.E., Farge,D., Lagrange,P.. Diagnostic value of a nested polymerase chain reaction assay on peripheral blood mononuclear cells from patients with pulmonary and extra-pulmonary tuberculosis. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2001;5(8):754-62.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Hooper,C.E. & Lee,Y.C.. Interferon-gamma release assays for the diagnosis of TB pleural effusions: hype or real hope? <i>Curr.Opin.Pulm.Med.</i> 2009;15(4):358-65.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Horne,D.J., Royce,S.E., Gooze,L., Narita,M., Hopewell,P.C., Nahid,P.. Sputum monitoring during tuberculosis treatment for predicting outcome: systematic review and meta-analysis. <i>Lancet Infect.Dis.</i> 2010;10(6):387-94.	Not relevant - does not compare differing diagnostic methods for active TB against

RQ CDEGH Excluded studies – Original search	
	each other
Hotta,K., Ogura,T., Nishii,K., Kodani,T., Onishi,M., Shimizu,Y., et al. Whole blood interferon-gamma assay for baseline tuberculosis screening among Japanese healthcare students. PLoS ONE [Electronic Resource] 2007;2(8):e803.	Wrong population - latent TB or screening
Hsieh,S.M., Hung,C.C., Chen,M.Y., Hsueh,P.R., Chang,S.C.. The role of tissue studies in facilitating early initiation of antimycobacterial treatment in AIDS patients with disseminated mycobacterial disease. International Journal of Tuberculosis & Lung Disease 1999;3(6):521-27.	No relevant or usable outcome data
Huebner,R.E., Schein,M.F., Cauthen,G.M., Geiter,L.J., Selin,M.J., Good,R.C.. Evaluation of the clinical usefulness of mycobacterial skin test antigens in adults with pulmonary mycobacterioses. Am.Rev.Respir.Dis. 1992; 145(5):1160-66.	No relevant or usable outcome data
Hughes,R., Wonderling,D., Li,B.. The cost effectiveness of Nucleic Acid Amplification Techniques for the diagnosis of tuberculosis. [Review]. Respir.Med. 2012; 106(2):300-07.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Inagaki,T., Nishimori,K., Yagi,T., Ichikawa,K., Moriyama,M., Nakagawa,T., et al. Comparison of a variable-number tandem-repeat (VNTR) method for typing Mycobacterium avium with mycobacterial interspersed repetitive-unit-VNTR and IS1245 restriction fragment length polymorphism typing. J.Clin.Microbiol. 2009; 47(7):2156-64.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Islam,M.R., Khatun,R., Uddin,M.K.M., Khan,M.S.R., Rahman,M.T., Ahmed,T.. Yield of Two Consecutive Sputum Specimens for the Effective Diagnosis of Pulmonary Tuberculosis. PLoS ONE 2013; 8(7)	Not relevant - does not compare differing diagnostic methods for active TB against each other
Jain,S. & Kumar,N.. Gastric tuberculosis: Endoscopic cytology as a diagnostic tool. Acta Cytol. 2000; 44(6):987-92.	Sample size
Jain,S., Kumar,N., Das,D.K.. Esophageal tuberculosis. Endoscopic cytology as a diagnostic tool. Acta Cytol. 1999; 43(6):1085-90.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Jang,M.H., Choi,G.E., Shin,B.M., Lee,S.H., Kim,S.R., Chang,C.L.. Comparison of an automated repetitive sequence-based PCR microbial typing system with IS6110-restriction fragment length polymorphism for epidemiologic investigation of clinical Mycobacterium tuberculosis isolates in Korea. Korean Journal Of Laboratory Medicine 2011; 31(4):282-84.	No relevant or usable outcome data
Janossy,G., Barry,S.M., Breen,R.A., Hardy,G.A., Lipman,M.. The role of flow cytometry in the interferon-gamma-based diagnosis of active tuberculosis and its coinfection with HIV-1--A technically oriented review. Cytometry Part B, Clinical Cytometry 2008; 74():Suppl-51.	No relevant or usable outcome data
Jeena,P.M., Coovadia,H.M., Hadley,L.G., Wiersma,R., Grant,H.. Lymph node biopsies in HIV-infected and non-infected children with persistent lung disease. International Journal of Tuberculosis & Lung Disease 2000; 4(2):139-46.	No relevant or usable outcome data
Jentoft,H.F., Omenaas,E., Eide,G.E.. Comparing the adrenaline-Pirquet test with international PPD tuberculin tests. Respir.Med. 2001; 95(3):205-11.	Wrong population - latent TB or screening



RQ CDEGH Excluded studies – Original search	
Jiang,J., Shi,H.Z., Liang,Q.L., Qin,S.M.. Diagnostic value of interferon-gamma in tuberculous pleurisy: a meta-analysis. <i>Chest</i> 2007;131(4):1133-41.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Jordan,T.J., Sunderam,G., Thomas,L.. Tuberculin reaction size measurement by the pen method compared to traditional palpation. <i>Chest</i> 1987; 92(2):234-36.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Kalantri,S., Pai,M., Pascopella,L., Riley,L.. Bacteriophage- based tests for the detection of Mycobacterium tuberculosis in clinical specimens: a systematic review and meta- analysis. <i>BMC Infect.Dis.</i> 2005; 5():59.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Kalema,N., Boon,S.D., Cattamanchi,A., Davis,J.L., Andama,A., Katagira,W., et al. Oral antimicrobial rinse to reduce mycobacterial culture contamination among tuberculosis suspects in Uganda: a prospective study. <i>PLoS ONE [Electronic Resource]</i> 2012; 7(7):e38888.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Kartaloglu,Z., Okutan,O., Bozkanat,E., Ugan,M.H.. The course of serum adenosine deaminase levels in patients with pulmonary tuberculosis. <i>Med.Sci.Monit.</i> 2006; 12(11):CR476-80.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Kashyap,R.S., Kainthla,R.P., Satpute,R.M., Agarwal,N.P., Chandak,N.H., Purohit,H.J., Taori,G.M.. Differential diagnosis of tuberculous meningitis from partially-treated pyogenic meningitis by cell ELISA. <i>BMC Neurology</i> 2004;4(1):16.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Kayacan,O., Karnak,D., Delibalta,M., Beder,S., Karaca,L.. Adenosine deaminase activity in bronchoalveolar lavage in Turkish patients with smear negative pulmonary tuberculosis. <i>Respir.Med.</i> 2002;96(7):536-41.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Kennedy,N., Gillespie,S.H., Saruni,A.O., Kisyombe,G., McNerney,R., Ngowi,F.I.. Polymerase chain reaction for assessing treatment response in patients with pulmonary tuberculosis. <i>J.Infect.Dis.</i> 1994;170(3):713-16.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Khan,N., Mian,I., Zia-Ullah,null. Performance of ICT-TB test in the detection of pulmonary and extra-pulmonary tuberculosis. <i>Journal of Ayub Medical College, Abbottabad:</i> 2004;16(2):55-56.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Kim,S.C., Kang,S.I., Kim,D.W., Kim,S.C., Cho,S.N., Hwang,J.H., et al. Development and evaluation of an automated stainer for acid-fast bacilli. <i>Medical Engineering &amp; Physics</i> 2003;25(4):341-47.	No relevant or usable outcome data
Kirwan,D.E. & Cardenas,M.K.. Rapid implementation of new TB diagnostic	Wrong study design - not



**RQ CDEGH Excluded studies – Original search**

tests: Is it too soon for a global roll-out of Xpert MTB/RIF? Am.J.Trop.Med.Hyg. 2012; 87(2):197-201.	test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Kobashi,Y., Mouri,K., Yagi,S., Obase,Y., Fukuda,M., Miyashita,N.. Usefulness of the QuantiFERON TB-2G test for the differential diagnosis of pulmonary tuberculosis. Intern.Med. 2008; 47(4):237-43.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Kocaman,O., Danalioglu,A., Ince,A.T., Tozlu,M.. Diagnosis of tuberculous peritonitis using endoscopic ultrasound-guided fine-needle aspiration biopsy of the peritoneum. Turk.J.Gastroenterol. 2013; 24(1):65-69.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Koegelenberg,C.F., Bolliger,C.T., Theron,J., Walzl,G., Wright,C.A., Louw,M.. Direct comparison of the diagnostic yield of ultrasound-assisted Abrams and Tru-Cut needle biopsies for pleural tuberculosis. Thorax 2010; 65(10):857-62.	No relevant or usable outcome data
Komiya,K., Ariga,H., Nagai,H., Teramoto,S., Kurashima,A., Shoji,S.. Impact of peripheral lymphocyte count on the sensitivity of 2 IFN-gamma release assays, QFT-G and ELISPOT, in patients with pulmonary tuberculosis. Intern.Med. 2010; 49(17):1849-55.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Krambovitis,E. & Harris,M.. Improved serodiagnosis of tuberculosis using two assay test. J.Clin.Pathol. 1986;39(7):779-85.	Tests not conducted concomitantly, or results for both diagnostic AND reference standard not available for every patient
Krenke,R.. Use of pleural fluid levels of adenosine deaminase and interferon gamma in the diagnosis of tuberculous pleuritis. Curr.Opin.Pulm.Med. 2010;16(4):367-75.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Kruuner,A., Pehme,L., Ghebremichael,S., Koivula,T., Hoffner,S.E.. Use of molecular techniques to distinguish between treatment failure and exogenous reinfection with Mycobacterium tuberculosis. Clin.Infect.Dis. 2002;35(2):146-55.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Kulkarni,S., Singh,P., Memon,A., Nataraj,G., Kanade,S., Kelkar,R.. An in-house multiplex PCR test for the detection of Mycobacterium tuberculosis, its validation & comparison with a single target TB-PCR kit. Indian J.Med.Res. 2012; 135(5):788-94.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Kwiatkowska,S., Marczak,J., Zieba,M.. Clinical utility of a commercial ligase chain reaction kit for the diagnosis of smear-negative pulmonary tuberculosis. International Journal of Tuberculosis & Lung Disease 1999;3(5):421-25.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-

RQ CDEGH Excluded studies – Original search	
	and-treat RCTs and cross-sectional studies
Lachnik,J., Ackermann,B., Bohrssen,A., Maass,S., Diephaus,C., Puncken,A., Stermann,M.. Rapid-cycle PCR and fluorimetry for detection of mycobacteria. <i>J.Clin.Microbiol.</i> 2002;40(9):3364-73.	No relevant or usable outcome data
Lalvani,A., Pathan,A.A., McShane,H., Wilkinson,R.J., Latif,M., Conlon,C.P., Pasvol,G.. Rapid detection of Mycobacterium tuberculosis infection by enumeration of antigen-specific T cells. <i>American Journal of Respiratory &amp; Critical Care Medicine</i> 2001;163(4):824-28.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Lawn,S.D., Mwaba,P., Bates,M., Piatek,A., Alexander,H., Marais,B.J., et al. Advances in tuberculosis diagnostics: the Xpert MTB/RIF assay and future prospects for a point-of-care test. [Review]. <i>Lancet Infect.Dis.</i> 2013;13(4):349-61.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Lawn,S.D.. Diagnosis of extrapulmonary tuberculosis using the Xpert MTB/RIF assay. <i>Expert Rev.Anti-Inf.</i> 2012;10(6):631-35.	Not full report of study (e.g. conference abstract)
Le,Page L., Feydy,A., Rillardon,L., Dufour,V., Le,Henanff A., Tubach,F., et al. Spinal tuberculosis: a longitudinal study with clinical, laboratory, and imaging outcomes. <i>Seminars in Arthritis &amp; Rheumatism</i> 2006;36(2):124-29.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Lee,A.S.G.. Molecular diagnostic methods for the detection of Mycobacterium tuberculosis resistance: The potential of high-resolution melting analysis. <i>Expert Rev.Anti-Inf.</i> 2012;10(10):1075-77.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Lee,E.Y., Restrepo,R., Dillman,J.R., Ridge,C.A., Hammer,M.R.. Imaging Evaluation of Pediatric Trachea and Bronchi: Systematic Review and Updates. <i>Semin.Roentgenol.</i> 2012;47(2):182-96.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Lee,S.W., Jang,Y.S., Park,C.M., Kang,H.Y., Koh,W.J., Yim,J.J.. The role of chest CT scanning in TB outbreak investigation. <i>Chest</i> 2010;137(5):1057-64.	Wrong population - latent TB or screening
Lessells,R.J., Cooke,G.S., McGrath,N., Nicol,M.P., Newell,M.L.. Impact of a novel molecular TB diagnostic system in patients at high risk of TB mortality in rural South Africa (Uchwepheshe): study protocol for a cluster randomised trial. <i>Trials [Electronic Resource]</i> 2013;14():170.	No relevant or usable outcome data
Leung,E., Minion,J., Benedetti,A., Pai,M.. Microcolony culture techniques for tuberculosis diagnosis: a systematic review. [Review]. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2012;16(1):16-23.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Lima,D.M., Bollela,V.R., Jacomo,B.J., Martinez,R.. Identification of mycobacterium species in contaminated cultures by polymerase chain reaction. <i>Chest</i> 2005;127(4):1283-88.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Liu,S., Ren,J., Xia,Q., Wu,X., Han,G., Ren,H., et al. Preliminary Case-control	Wrong study design - not

RQ CDEGH Excluded studies – Original search	
Study to Evaluate Diagnostic Values of C-Reactive Protein and Erythrocyte Sedimentation Rate in Differentiating Active Crohn's Disease From Intestinal Lymphoma, Intestinal Tuberculosis and Behcet's Syndrome. <i>Am.J.Med.Sci.</i> 2013;346(6):467-72.	test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Liu,Y., Guo,Y.L., Jiang,G.L., Zhou,S.J., Sun,Q., Chen,X., et al. Application of hyperbranched rolling circle amplification for direct detection of mycobacterium tuberculosis in clinical sputum specimens. <i>PLoS ONE [Electronic Resource]</i> 2013;8(6):e64583.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Lu,C., Liu,Q., Sarma,A., Fitzpatrick,C., Falzon,D.. A Systematic Review of Reported Cost for Smear and Culture Tests during Multidrug-Resistant Tuberculosis Treatment. <i>PLoS ONE</i> 2013;8(2)	Not relevant - does not compare differing diagnostic methods for active TB against each other
Luh,K.T., Yu,C.J., Yang,P.C.. Tuberculosis antigen A60 serodiagnosis in tuberculous infection: application in extrapulmonary and smear-negative pulmonary tuberculosis. <i>Respirology</i> 1996;1(2):145-51.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Luquin,M., Gamboa,F., Barcelo,M.G., Manterola,J.M., Matas,L., Gimenez,M.. Comparison of a biphasic non-radiometric system with Lowenstein-Jensen and Bactec-460 system for recovery of mycobacteria from clinical specimens. <i>Tubercle &amp; Lung Disease</i> 1996;77(5):449-53.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Ma,B., Qi,G.Q., Li,H.M., Zhu,B.D.. Diagnostic test of rifampicin resistance in Mycobacterium tuberculosis: a meta-analysis. [Review]. <i>J.Evidence-Based Med.</i> 2011;4(1):15-21.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Madariaga,M.G. & Jalali,Z.. Clinical utility of interferon gamma assay in the diagnosis of tuberculosis. <i>J.Am.Board Fam.Med.</i> 2007;20(6):540-47.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Maekura,R., Kohno,H., Hirotani,A., Okuda,Y., Ito,M., Ogura,T.. Prospective clinical evaluation of the serologic tuberculous glycolipid test in combination with the nucleic acid amplification test. <i>J.Clin.Microbiol.</i> 2003;41(3):1322-25.	No relevant or usable outcome data
Maekura,R., Okuda,Y., Nakagawa,M., Hiraga,T., Yokota,S., Ito,M., et al. Clinical evaluation of anti-tuberculous glycolipid immunoglobulin G antibody assay for rapid serodiagnosis of pulmonary tuberculosis. <i>J.Clin.Microbiol.</i> 2001;39(10):3603-08.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Mahmood,A. & Hannan,A.. Serodiagnosis of tuberculosis using lipopolysaccharide and 38kDa protein as antigens: An evaluation study. <i>J.Coll.Phys.Surg.Pak.</i> 2000;10(2):47-49.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Majumdar,A., Wankhade,G., Kamble,P.D., Joshi,D.. A sensitive and specific	No relevant or usable

RQ CDEGH Excluded studies – Original search	
ES-31 antigen detection based fluorometric assay for confirmation of Mycobacterium tuberculosis in cell culture. Indian Journal of Experimental Biology 2011;49(4):304-06.	outcome data
Manfredi,R., Nanetti,A., Dal, Monte P.. Increasing pathomorphism of pulmonary tuberculosis. An observational study of slow clinical, microbiological and imaging response of lung tuberculosis to specific treatment. Which role for linezolid? Braz.J.Infect.Dis. 2009;13(4):297-303.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Manohar,A., Simjee,A.E., Haffejee,A.A.. Symptoms and investigative findings in 145 patients with tuberculous peritonitis diagnosed by peritoneoscopy and biopsy over a five year period. Gut 1990;31(10):1130-32.	No relevant or usable outcome data
Mantegani,P., Piana,F., Codecasa,L., Galli,L., Scarpellini,P., Lazzarin,A., Cirillo,D.. Comparison of an in-house and a commercial RD1-based ELISPOT-IFN-gamma assay for the diagnosis of Mycobacterium tuberculosis infection. Clinical Medicine & Research 2006;4(4):266-72.	Wrong population - latent TB or screening
Marlowe,E.M., Novak-Weekley,S.M., Cumpio,J., Sharp,S.E., Momeny,M.A.. Evaluation of the Cepheid Xpert MTB/RIF assay for direct detection of Mycobacterium tuberculosis complex in respiratory specimens. J.Clin.Microbiol. 2011;49(4):1621-23.	Paper synthesized in included meta-analysis; no other relevant outcome data
Martinez-Romero,M.R., Sardina-Aragon,M., Garcia-Leon,G., Mederos-Cuervo,L., Vega-Riveron,B.. BacT automated assessment ALERT 3D for isolation of mycobacteria in LNRTB-IPK. Rev.Inst.Nac.Enferm.Respir. 2012;71(4):333-38.	In-house test, rather than commercial test
Mase,S.R., Ramsay,A., Ng,V., Henry,M., Hopewell,P.C., Cunningham,J., et al. Yield of serial sputum specimen examinations in the diagnosis of pulmonary tuberculosis: A systematic review. Int.J.Tuberc.Lung Dis. 2007;11(5):485-95.	Reference standard not appropriate (not culture or other appropriate reference standard)
McCallister,J. & Chin,R.. Bronchoscopic myths and legends: Bronchoscopy in the diagnosis of pulmonary tuberculosis. Clin.Pulm.Med. 2006;13(5):271-73.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Mehnaz,A.. Applicability of scoring chart in the early detection of tuberculosis in children. J.Coll.Phys.Surg.Pak. 2005;15(9):543-46.	Information Services unable to obtain full paper
Mehta,P.K., Raj,A., Singh,N.. Diagnosis of extrapulmonary tuberculosis by PCR. [Review]. FEMS Immunology & Medical Microbiology 2012;66(1):20-36.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Merino,J.M., Alvarez,T., Marrero,M., Anso,S., Elvira,A., Iglesias,G.. Microbiology of pediatric primary pulmonary tuberculosis. Chest 2001;119(5):1434-38.	No relevant or usable outcome data
Metcalfe,J.Z., Everett,C.K., Steingart,K.R., Cattamanchi,A., Huang,L., Hopewell,P.C.. Interferon- release assays for active pulmonary tuberculosis diagnosis in adults in low- and middle-income countries: systematic review and meta-analysis. [Review]. J.Infect.Dis. 2011;204():Suppl-9.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Middlebrook,G. & Reggiardo,Z.. Automatable radiometric detection of growth of Mycobacterium tuberculosis in selective media.	No relevant or usable

RQ CDEGH Excluded studies – Original search	
AM.REV.RESPIR.DIS. 1977;115(6):1066-69.	outcome data
Militao de Albuquerque,Mde F., Ximenes,R.A., Campelo,A.R., Sarinho,E., Cruz,M.. Neonatal BCG vaccine and response to the tuberculin test in BCG vaccinated children in contact with tuberculosis patients in Recife, Brazil. J.Trop.Pediatr. 2004;50(1):32-36.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Minion,J., Leung,E., Menzies,D.. Microscopic-observation drug susceptibility and thin layer agar assays for the detection of drug resistant tuberculosis: a systematic review and meta-analysis. [Review]. Lancet Infect.Dis. 2010;10(10):688-98.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Minion,J.. Bacteriophage assays for rifampicin resistance detection in Mycobacterium tuberculosis: updated meta-analysis. [Review]. International Journal of Tuberculosis & Lung Disease 2010;14(8):941-51.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Miotto,P., Mwangoka,G., Valente,I.C., Norbis,L., Sotgiu,G., Bosu,R., et al. miRNA Signatures in Sera of Patients with Active Pulmonary Tuberculosis. PLoS ONE [Electronic Resource] 2013;8(11):e80149.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Mironova,S., Pimkina,E., Kontsevaya,I., Nikolayevskyy,V., Balabanova,Y., Skenders,G., Kummik,T.. Performance of the GenoType MTBDRPlus assay in routine settings: a multicenter study. European Journal of Clinical Microbiology & Infectious Diseases 2012;31(7):1381-87.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Mishra,O.P., Loiwal,V., Ali,Z., Nath,G., Chandra,L.. Cerebrospinal fluid adenosine deaminase activity and C-reactive protein in tuberculous and partially treated bacterial meningitis. Indian Pediatr. 1995;32(8):886-89.	No relevant or usable outcome data
Misra,S.P., Misra,V., Dwivedi,M., Arora,J.S.. Tuberculous colonic strictures: impact of dilation on diagnosis. Endoscopy 2004;36(12):1099-1003.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Miyata,M., Pavan,F.R., Sato,D.N., Marino,L.B., Hirata,M.H., Cardoso,R.F., et al. Drug resistance in Mycobacterium tuberculosis clinical isolates from Brazil: phenotypic and genotypic methods. Biomedicine & Pharmacotherapy 2011;65(6):456-59.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Mohamed,A.A.R., Bhat,N.A., Abukhater,M.. Role of laparoscopy in diagnosis of abdominal tuberculosis. Internet Journal of Infectious Diseases 2010;8(2).	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Mohamed,A.J. & Sathiyaraj,D.. Detection of antibodies against cell wall-associated antigens of Mycobacterium tuberculosis (SIHV) by an enzyme linked immunosorbent assay. Japanese Journal of Medical Science & Biology 1997; 50(1):1-7.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Mohan,A.. Fibreoptic bronchoscopy in the diagnosis of sputum smear-negative pulmonary tuberculosis: current status. Indian Journal of Chest	Wrong study design - not test-and-treat RCT, cross-

**RQ CDEGH Excluded studies – Original search**

Diseases & Allied Sciences 2008; 50(1):67-78.	sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Montoro,E., Diaz,R., Echemendia,M.. Evaluation of enzyme-linked immunosorbent assay for the serodiagnosis of tuberculosis in patients with AIDS in Cuba. Memorias do Instituto Oswaldo Cruz 1996;91(2):191-Apr.	Not full report of study (e.g. conference abstract)
Morcillo,N. & Imperiale,B.. Evaluation of MGIT 960 and the colorimetric-based method for tuberculosis drug susceptibility testing. International Journal of Tuberculosis & Lung Disease 2010;14(9):1169-75.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Morcillo,N. & Imperiale,B.. New simple decontamination method improves microscopic detection and culture of mycobacteria in clinical practice. Infection & Drug Resistance 2008; 1():21-26.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Moreira,Ada S., Huf,G., Vieira,M.A., Fonseca,L., Ricks,M.. Performance comparison between the mycobacteria growth indicator tube system and Lowenstein-Jensen medium in the routine detection of Mycobacterium tuberculosis at public health care facilities in Rio de Janeiro, Brazil: preliminary results of a pragmatic clinical trial. Jornal Brasileiro De Pneumologia: Publicacao Oficial Da Sociedade Brasileira De Pneumologia E Tisiologia 2013; 39(3):365-67.	Not full report of study (e.g. conference abstract)
Mwakyoma,H.A. & Maliva,G.S.. Fine needle aspiration cytology and the choice of fixatives in the diagnosis of tuberculous adenitis at Muhimbili National Hospital, Dar-es-Salaam, Tanzania. Tanzan.J.Health Res. 2010;12(3):183-87.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Nagesh,B.S., Sehgal,S., Jindal,S.K.. Evaluation of polymerase chain reaction for detection of mycobacterium tuberculosis in pleural fluid. Chest 2001;119(6):1737-41.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Nassau,E.. The fluorescent antibody test in human tuberculosis: a pilot study. Tubercle 1970;51(4):430-36.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Nemeth,J., Winkler,H.M., Zwick,R.H., Muller,C., Rumetshofer,R., Boeck,L., Burghuber,O.C.. Peripheral T cell cytokine responses for diagnosis of active tuberculosis. PLoS ONE [Electronic Resource] 2012;7(4):e35290.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Nguyen,M.Q.. What are the differences between the tuberculin skin test and the quantiFERON-TB Gold Test? J.Occup.Environ.Med. 2012; 54(9):1177-78.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Nicolau,I., Ling,D., Tian,L., Lienhardt,C.. Research questions and priorities for tuberculosis: A survey of published systematic reviews and meta-	Wrong study design - not test-and-treat RCT, cross-



**RQ CDEGH Excluded studies – Original search**

analyses. PLoS ONE 2012;7(7).	sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Nolan,C.M. & Teklu,B.. The use of sputum cultures in the evaluation of immigrants classified as tuberculosis suspects. Am.Rev.Respir.Dis. 1989;140(4):996-1000.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Noordhoek,G.T. & van Embden,J.D.. Reliability of nucleic acid amplification for detection of Mycobacterium tuberculosis: an international collaborative quality control study among 30 laboratories. J.Clin.Microbiol. 1996;34(10):2522-25.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Noordhoek,G.T., Mulder,S., Wallace,P.. Multicentre quality control study for detection of Mycobacterium tuberculosis in clinical samples by nucleic amplification methods. Clinical Microbiology & Infection 2004;10(4):295-301.	No relevant or usable outcome data
Oberhelman,R.A., Soto-Castellares,G., Gilman,R.H., Caviedes,L., Castillo,M.E., Kolevic,L., et al. Diagnostic approaches for paediatric tuberculosis by use of different specimen types, culture methods, and PCR: a prospective case-control study. Lancet Infect.Dis. 2010;10(9):612-20.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Obihara,C.C., Bollen,C.W., Beyers,N.. Mycobacterial infection and atopy in childhood: A systematic review. Pediatr.Allergy Immunol. 2007;18(7):551-59.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Ortega-Larrocea,G., Bobadilla-del-Valle,M., Ponce-de-Leon,A.. Nested polymerase chain reaction for Mycobacterium tuberculosis DNA detection in aqueous and vitreous of patients with uveitis. Arch.Med.Res. 2003; 34(2):116-19.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Ota,M.O., Goetghebuer,T., Vekemans,J., Okoko,B.J., Newport,M.J., McAdam,K.P.. Dissociation between tuberculin skin test and in vitro IFN-gamma responses following neonatal BCG vaccination. J.Trop.Pediatr. 2006; 52(2):136-40.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Ozkara,H.A., Kocagoz,T., Ozcelik,U., Akcoren,Z.. Comparison of three different primer pairs for the detection of Mycobacterium tuberculosis by polymerase chain reaction in paraffin-embedded tissues. International Journal of Tuberculosis & Lung Disease 1998; 2(6):451-55.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
P,rez-Rodriguez,E., P,rez Walton,I.J., Sanchez Hernandez,J.J., Pallar,s,E., Rubi,J., Jimenez,Castro D.. ADA1/ADAp ratio in pleural tuberculosis: an excellent diagnostic parameter in pleural fluid. Respir.Med. 1999; 93(11):816-21.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Pai,M. & Riley,L.W.. Interferon- assays in the immunodiagnosis of tuberculosis: A systematic review. Lancet Infectious Diseases 2004;	Wrong study design - not test-and-treat RCT, cross-



**RQ CDEGH Excluded studies – Original search**

4(12):761-66.	sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Pai,M., Flores,L.L., Pai,N., Hubbard,A., Riley,L.W.. Diagnostic accuracy of nucleic acid amplification tests for tuberculous meningitis: a systematic review and meta-analysis. <i>Lancet Infect.Dis.</i> 2003; 3(10):633-43.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Pai,M., Flores,L.L., Pai,N., Hubbard,A., Riley,L.W.. Diagnostic accuracy of nucleic acid amplification tests for tuberculous meningitis: A systematic review and meta-analysis. <i>Lancet Infectious Diseases</i> 2003; 3(10):633-43.	Duplicate
Pai,M., Kalantri,S., Pascopella,L., Riley,L.W.. Bacteriophage-based assays for the rapid detection of rifampicin resistance in <i>Mycobacterium tuberculosis</i> : a meta-analysis. <i>J.Infect.</i> 2005; 51(3):175-87.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Pai,M.. Serial testing for tuberculosis: Can we make sense of T cell assay conversions and reversions? <i>PLoS Med.</i> 2007;4(6):0980-83.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Pal,R.B.. Polymerase chain reaction for the rapid diagnosis of tuberculous meningitis. <i>J.Indian Med.Assoc.</i> 1924; 105(1):21-22.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Pal,R.B.. Polymerase chain reaction for the rapid diagnosis of tuberculous meningitis. <i>J.Indian Med.Assoc.</i> 2007; 105(1):21-24.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Pedrozo,C., Sant'Anna,C.C., March,Mde F. Efficacy of the scoring system, recommended by the Brazilian National Ministry of Health, for the diagnosis of pulmonary tuberculosis in children and adolescents, regardless of their HIV status. <i>Jornal Brasileiro De Pneumologia: Publicacao Oficial Da Sociedade Brasileira De Pneumologia E Tisiologia</i> 2010; 36(1):92-98.	Not in English
Pemde,H.K., Harish,K., Thawrani,Y.P., Shrivastava,S.. C-reactive protein in childhood meningitides. <i>Indian J.Pediatr.</i> 1996; 63(1):73-77.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Peng,S.S., Chan,P.C., Chang,Y.C. Computed tomography of children with pulmonary <i>Mycobacterium tuberculosis</i> infection. [Review]. <i>J.Formos.Med.Assoc.</i> 2011; 110(12):744-49.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies

**RQ CDEGH Excluded studies – Original search**

<p>Peres,R.L., Palaci,M., Loureiro,R.B., Dietze,R., Johnson,J.L., Golub,J.E., Ruffino-Netto,A.. Evaluation of oral antiseptic rinsing before sputum collection to reduce contamination of mycobacterial cultures. <i>J.Clin.Microbiol.</i> 2011; 49(8):3058-60.</p>	<p>Not relevant - does not compare differing diagnostic methods for active TB against each other</p>
<p>Perez-Rodriguez,E., Perez Walton,I.J., Sanchez Hernandez,J.J., Pallares,E., Rubi,J., Jimenez,Castro D.. ADA1/ADAp ratio in pleural tuberculosis: an excellent diagnostic parameter in pleural fluid. <i>Respir.Med.</i> 1999; 93(11):816-21.</p>	<p>Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies</p>
<p>Perez-Rodriquez,E.. The use of adenosine deaminase and adenosine deaminase isoenzymes in the diagnosis of tuberculous pleuritis. <i>Curr.Opin.Pulm.Med.</i> 2000; 6(4):259-66.</p>	<p>Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies</p>
<p>Peter,J.G., Theron,G., Pooran,A., Thomas,J., Pascoe,M.. Comparison of two methods for acquisition of sputum samples for diagnosis of suspected tuberculosis in smear-negative or sputum-scarce people: A randomised controlled trial. <i>Lancet Respir.Med.</i> 2013; 1(6):471-78.</p>	<p>Not relevant - does not compare differing diagnostic methods for active TB against each other</p>
<p>Piersimoni,C., Nista,D., Zallocco,D., Galassi,M., Cimarelli,M.E. Clinical suspicion as a primary guidance to use commercial amplification tests for rapid diagnosis of pulmonary tuberculosis. <i>Diagnostic Microbiology &amp; Infectious Disease</i> 2005; 53(3):195-200.</p>	<p>Examines diagnostic not available in the UK</p>
<p>Pinheiro,M.D.. Comparison of the Bactec 460TB system and the Bactec MGIT 960 system in recovery of mycobacteria from clinical specimens [5]. <i>Clin.Microbiol.Infect.</i> 2000; 6(3):171-73.</p>	<p>Not relevant - does not compare differing diagnostic methods for active TB against each other</p>
<p>Pinto,L.M., Pai,M., Dheda,K., Schwartzman,K., Menzies,D.. Scoring systems using chest radiographic features for the diagnosis of pulmonary tuberculosis in adults: a systematic review. <i>Eur.Respir.J.</i> 2013; 42(2):480-94.</p>	<p>Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies</p>
<p>Poling,A., Weetjens,B.J., Cox,C., Mgone,G., Jubitana,M., Kazwala,R., Mfinanga,G.S.. Short report: Using giant African pouched rats to detect tuberculosis in human sputum samples: 2009 findings. <i>Am.J.Trop.Med.Hyg.</i> 2010; 83(6):1308-10.</p>	<p>Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies</p>
<p>Ponce de Leon D., Acevedo-Vasquez,E., Sanchez-Torres,A., Cucho,M., Alfaro,J., Perich,R., et al. Attenuated response to purified protein derivative in patients with rheumatoid arthritis: study in a population with a high prevalence of tuberculosis. <i>Ann.Rheum.Dis.</i> 2005; 64(9):1360-61.</p>	<p>Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies</p>
<p>POPPIUS,H. &amp; WASZ-HOCKERT,O.. A clinical study of the quantitative tuberculin test and of the serological tests for tuberculosis in adult pulmonary tuberculosis. <i>Acta Tuberculosea Scandinavica</i> 1960; 39():235-42.</p>	<p>Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies</p>

RQ CDEGH Excluded studies – Original search	
Porcel,J.M., Gazquez,I., Vives,M., Perez,B., Rubio,M.. Diagnosis of tuberculous pleuritis by the measurement of soluble interleukin 2 receptor in pleural fluid. International Journal of Tuberculosis & Lung Disease 2000; 4(10):975-79.	No relevant or usable outcome data
Pottumarthy,S. & Wells,V.C.. A comparison of seven tests for serological diagnosis of tuberculosis. J.Clin.Microbiol. 2000; 38(6):2227-31.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Prasad,S., Singhal,M., Negi,S.S., Gupta,S., Singh,S., Rawat,D.S.. Targeted detection of 65 kDa heat shock protein gene in endometrial biopsies for reliable diagnosis of genital tuberculosis. European Journal of Obstetrics, Gynecology, & Reproductive Biology 2012; 160(2):215-18.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Rachow,A., Zumla,A., Heinrich,N., Rojas-Ponce,G., Mtafya,B., Reither,K., et al. Rapid and accurate detection of Mycobacterium tuberculosis in sputum samples by Cepheid Xpert MTB/RIF assay--a clinical validation study. PLoS ONE [Electronic Resource] 2011; 6(6):e20458.	Paper synthesized in included meta-analysis; no other relevant outcome data
Rachow,A, Zumla,A, Heinrich,N, Rojas-Ponce,G, Mtafya,B. Rapid and accurate detection of Mycobacterium tuberculosis in sputum samples by Cepheid Xpert MTB/RIF assay--a clinical validation study. PLoS ONE 2011;6(6):e20458.	Duplicate
Radhakrishnan,V.V. & Mathai,A.. Diagnosis of tuberculous meningitis by enzyme-linked immuno-sorbent assay (ELISA), using an affinity chromatography purified mycobacterial antigen. Journal of the Association of Physicians of India 1994; 42(9):684-87.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Raja,A. & Baughman,R.P.. The detection by immunoassay of antibody to mycobacterial antigens and mycobacterial antigens in bronchoalveolar lavage fluid from patients with tuberculosis and control subjects. Chest 1988 ;94(1):133-37.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Ramsay,A., Squire,S.B., Siddiqi,K., Cunningham,J.. The bleach microscopy method and case detection for tuberculosis control. Int.J.Tuberc.Lung Dis. 2006; 10(3):256-58.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Rasolofo,V., Rasolonavalona,T., Ramarokoto,H.. Predictive values of the ICT Tuberculosis test for the routine diagnosis of tuberculosis in Madagascar. International Journal of Tuberculosis & Lung Disease 2000;4(2):184-85.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Raut,V.S. & Mahashur,A.A.. The Mantoux test in the diagnosis of genital tuberculosis in women. International Journal of Gynaecology & Obstetrics 2001; 72(2):165-69.	Reference standard not appropriate (not culture or other appropriate reference standard)

RQ CDEGH Excluded studies – Original search	
Ravn,P., Munk,M.E., Andersen,A.B., Lundgren,B., Lundgren,J.D., Nielsen,L.N., et al. Prospective evaluation of a whole-blood test using Mycobacterium tuberculosis-specific antigens ESAT-6 and CFP-10 for diagnosis of active tuberculosis. <i>Clinical &amp; Diagnostic Laboratory Immunology</i> 2005; 12(4):491-96.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Rawat,J., Biswas,D., Sindhwani,G.. An alternative 1-day smear microscopy protocol for the diagnosis of pulmonary tuberculosis. <i>Respirology</i> 2010; 15(7):1127-30.	No relevant or usable outcome data
Reddington,K., Zumla,A., Bates,M., van,Soolingen D., Niemann,S., Barry,T.. SeekTB, a two-stage multiplex real-time-PCR-based method for differentiation of the Mycobacterium tuberculosis complex. <i>J.Clin.Microbiol.</i> 2012; 50(7):2203-06.	No relevant or usable outcome data
Rehman,M.U. & Khan,G.S.. Comparison of diagnostic BCG and mantoux tests in the early detection of tuberculosis in children. <i>Pak.J.Med.Health Sci.</i> 2012; 6(1):184-86.	Reference standard not appropriate (not culture or other appropriate reference standard)
Reuter,H. & Burgess,L.J.. Role of chest radiography in diagnosing patients with tuberculous pericarditis. <i>Cardiovascular Journal of Southern Africa</i> 2005; 16(2):108-11.	No relevant or usable outcome data
Reuter,H., Burgess,L., van,Vuuren W.. Diagnosing tuberculous pericarditis. <i>Qjm</i> 2006; 99(12):827-39.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Reza,L.W., Satyanarayna,S., Enarson,D.A., Kumar,A.M., Sagili,K., Kumar,S., et al. LED-fluorescence microscopy for diagnosis of pulmonary tuberculosis under programmatic conditions in India. <i>PLoS ONE [Electronic Resource]</i> 2013; 8(10):e75566.	No relevant or usable outcome data
Ribeiro,S., Dooley,K., Hackman,J., Loreda,C., Efron,A., Chaisson,R.E., et al. T-SPOT.TB responses during treatment of pulmonary tuberculosis. <i>BMC Infect.Dis.</i> 2009;9():23.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Richeldi,L., Ewer,K., Losi,M., Bergamini,B.M., Roversi,P., Deeks,J., Fabbri,L.M.. T cell-based tracking of multidrug resistant tuberculosis infection after brief exposure. <i>American Journal of Respiratory &amp; Critical Care Medicine</i> 2004; 170(3):288-95.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Ridderhof,J.C., Van,Deun A., Kai,M.K., Narayanan,P.R.. Roles of laboratories and laboratory systems in effective tuberculosis programmes. <i>Bull.WHO</i> 2007; 85(5):354-59.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Riquelme,A., Calvo,M., Salech,F., Valderrama,S., Pattillo,A., Arellano,M., et al. Value of adenosine deaminase (ADA) in ascitic fluid for the diagnosis of tuberculous peritonitis: A meta-analysis. <i>J.Clin.Gastroenterol.</i> 2006;40(8):705-10.	Duplicate
Rivas,C., Coitinho,C., Dafond,V., Corbo,M.. Performance of the Ogawa-Kudoh method for isolation of mycobacteria in a laboratory with large-scale workload. <i>Rev.Argent.Microbiol.</i> 2010;42(2):87-90.	No relevant or usable outcome data

RQ CDEGH Excluded studies – Original search	
Robledo,J.A., Mejia,G.I., Morcillo,N., Chacon,L., Camacho,M., Luna,J., et al. Evaluation of a rapid culture method for tuberculosis diagnosis: a Latin American multi-center study. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2006;10(6):613-19.	Reference standard not appropriate (not culture or other appropriate reference standard)
Rodrigues,C. Tuberculosis. <i>Laboratory Diagnosis. Clin.Lab.Med.</i> 2012; 32(2):111-27.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Rodriguez,J.C. & Fuentes,E.. Comparison of two different PCR detection methods. Application to the diagnosis of pulmonary tuberculosis. <i>APMIS</i> 1997; 105(8):612-16.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
SALOMON,H.. Corticotropin-induced changes in the tuberculin skin test. controlled study in advanced tuberculosis. <i>Am.Rev.Respir.Dis.</i> 1961; 83:235-42.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Samra,Z., Kaufman,L., Bechor,J.. Comparative study of three culture systems for optimal recovery of mycobacteria from different clinical specimens. <i>European Journal of Clinical Microbiology &amp; Infectious Diseases</i> 2000; 19(10):750-54.	Sample size
Sandikci,M.U., Colakoglu,S., Ergun,Y., Unal,S., Akkiz,H., Sandikci,S.. Presentation and role of peritoneoscopy in the diagnosis of tuberculous peritonitis. <i>Journal of Gastroenterology &amp; Hepatology</i> 1992;7(3):298-301.	No relevant or usable outcome data
Sankar,S., Ramamurthy,M., Nandagopal,B.. An appraisal of PCR-based technology in the detection of Mycobacterium tuberculosis. [Review]. <i>Molecular Diagnosis &amp; Therapy</i> 2011;15(1):1-11.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Sant'Anna,C.C. & Orfaliais,C.T.. A retrospective evaluation of a score system adopted by the Ministry of Health, Brazil in the diagnosis of pulmonary tuberculosis in childhood: a case control study. <i>Rev.Inst.Med.Trop.Sao Paulo</i> 2003;45(2):103-05.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Sant'Anna,C.C., Orfaliais,C.T., March,Mde F.. Evaluation of a proposed diagnostic scoring system for pulmonary tuberculosis in Brazilian children. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2006;10(4):463-65.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Santin,M. & Munoz,L.. Interferon- release assays for the diagnosis of tuberculosis and tuberculosis infection in HIV-infected adults: a systematic review and meta-analysis. [Review]. <i>PLoS ONE [Electronic Resource]</i> 2012;7(3):e32482.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Sarkar,S., Paul,D.K., Chakrabarti,S., Mandal,N.K.. The Keith Edward scoring	Wrong study design - not

**RQ CDEGH Excluded studies – Original search**

system: A case control study. Lung India 2009;26(2):35-37.	test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Sathekge,M., Maes,A., D'Asseler,Y., Vorster,M.. Nuclear medicine imaging in tuberculosis using commercially available radiopharmaceuticals. [Review]. Nucl.Med.Commun. 2012;33(6):581-90.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Scarpellini,P., Racca,S., Cinque,P., Delfanti,F., Gianotti,N., Terreni,M.R., Vago,L.. Nested polymerase chain reaction for diagnosis and monitoring treatment response in AIDS patients with tuberculous meningitis. AIDS 1995; 9(8):895-900.	Sample size
Scott-Thomas,A., Syhre,M., Epton,M., Murdoch,D.R.. Assessment of potential causes of falsely positive Mycobacterium tuberculosis breath test. Tuberculosis 2013; 93(3):312-17.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Sechi,L.A., Pinna,M.P., Sanna,A., Pirina,P., Ginesu,F., Saba,F., et al. Detection of Mycobacterium tuberculosis by PCR analysis of urine and other clinical samples from AIDS and non-HIV-infected patients. Molecular & Cellular Probes 1997;11(4):281-85.	In-house test, rather than commercial test
Selvakumar,N., Silambuchelvi,K., Gomathi,Sekar M., Syam,Sunder A., Anbarasu,S., Banu,Rekha,V, Ponnuraja,C.. Quality indicators in a mycobacteriology laboratory supporting clinical trials for pulmonary tuberculosis. Int.J.Mycobacteriology 2012;1(4):185-89.	No relevant or usable outcome data
Selvakumar,N., Syam,Sunder A., Gomathi,Sekar M., Ponnuraja,C.. Performance indicators of fluorescence microscopy for sputum samples in pulmonary tuberculosis. Int.J.Mycobacteriology 2012;1(3):143-45.	No relevant or usable outcome data
Senol,G., Erer,O.F., Yalcin,Y.A., Coskun,M., Gunduz,A.T., Bicmen,C., Ertas,M.. Humoral immune response against 38-kDa and 16-kDa mycobacterial antigens in tuberculosis. Eur.Respir.J. 2007;29(1):143-48.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Shamsuzzaman,A.K., Akhter,S., Shamsuzzaman,S.M.. Comparison between ELISA and ICT- MycoDot in adult pulmonary tuberculosis. Mymensingh Medical Journal: MMJ 2006;15(1):33-39.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Shankar,P., Manjunath,N., Mohan,K.K., Prasad,K., Behari,M., Shriniwas. Rapid diagnosis of tuberculous meningitis by polymerase chain reaction. Lancet 1991;337(8732):5-7.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Sharma,K., Gupta,N., Sharma,A., Singh,G., Gupta,P.K., Rajwanshi,A., Varma,S.C.. Multiplex polymerase chain reaction using insertion sequence	Wrong study design - not test-and-treat RCT, cross-



**RQ CDEGH Excluded studies – Original search**

6110 (IS6110) and mycobacterial protein fraction from BCG of Rm 0.64 in electrophoresis target genes for diagnosis of tuberculous lymphadenitis. Indian J.Med.Microbiol. 2013;31(1):24-28.	sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Sharma,U. & Morris,C.. What is the recommended approach to asymptomatic patients who develop a reactive PPD? J.FamPract. 2006; 55(2):163-65.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Shen,Y.-C., Wang,T., Chen,L., Yang,T., Wan,C., Hu,Q.-J.. Diagnostic accuracy of adenosine deaminase for tuberculous peritonitis: A meta-analysis. Arch.Med.Sci. 2013;9(4):601-07.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Shi,H., Shao,M., Weng,X.. Clinical analysis of 65 cases of tuberculosis meningitis with fever as primary symptom. Chin.J.Infect.Chemother. 2013;13(2):106-08.	Not in English
Shitrit,D., Vertenshtein,T., Shitrit,A.B., Shlomi,D.. The role of routine culture for tuberculosis during bronchoscopy in a nonendemic area: analysis of 300 cases and review of the literature. Am.J.Infect.Control 2005;33(10):602-05.	No relevant or usable outcome data
Shu,C.C., Wang,J.T., Lee,C.H., Wang,J.Y., Lee,L.N.. Predicting results of mycobacterial culture on sputum smear reversion after anti-tuberculous treatment: a case control study. BMC Infect.Dis. 2010;10():48.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Sloan,D.J., Corbett,E.L., Butterworth,A.E., Mwandumba,H.C., Khoo,S.H., Mdolo,A., et al. Optimizing outpatient serial sputum colony counting for studies of tuberculosis treatment in resource-poor settings. J.Clin.Microbiol. 2012;50(7):2315-20.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Smith,J.H., Radcliffe,G., Rigby,S., Mahan,D., Lane,D.J.. Performance of an automated Q-beta replicase amplification assay for Mycobacterium tuberculosis in a clinical trial. J.Clin.Microbiol. 1997;35(6):1484-91.	Paper synthesized in included meta-analysis; no other relevant outcome data
Smith,K.C., Starke,J.R., Eisenach,K., Ong,L.T.. Detection of Mycobacterium tuberculosis in clinical specimens from children using a polymerase chain reaction. Pediatrics 1996;97(2):155-60.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Somoskovi,A., Kodmon,C., Lantos,A., Bartfai,Z., Tamasi,L., Fuzy,J.. Comparison of recoveries of mycobacterium tuberculosis using the automated BACTEC MGIT 960 system, the BACTEC 460 TB system, and Lowenstein-Jensen medium. J.Clin.Microbiol. 2000;38(6):2395-97.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Soto,A., Solari,L., Agapito,J., Acuna-Villaorduna,C., Lambert,M.L., Gotuzzo,E.. Development of a clinical scoring system for the diagnosis of smear-negative pulmonary tuberculosis. Braz.J.Infect.Dis. 2008; 12(2):128-32.	Paper synthesized in included meta-analysis; no other relevant outcome data
Srikanth,P. & Kamesh,S.. Bleach optimization of sputum smear microscopy for pulmonary tuberculosis. Indian J.Tuberc. 2009; 56(4):174-84.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic

**RQ CDEGH Excluded studies – Original search**

	review of predominantly test-and-treat RCTs and cross-sectional studies
Srisuwanvilai,L.O., Monkongdee,P., Podewils,L.J., Ngamlert,K., Pobkeeree,V., Puripokai,P., et al. Performance of the BACTEC MGIT 960 compared with solid media for detection of Mycobacterium in Bangkok, Thailand. <i>Diagnostic Microbiology &amp; Infectious Disease</i> 2008 ;61(4):402-07.	No relevant or usable outcome data
Steingart,K.R. & Ramsay,A.. Optimizing sputum smear microscopy for the diagnosis of pulmonary tuberculosis. <i>Expert Review of Antiinfective Therapy</i> 2007; 5(3):327-31.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Steingart,K.R., Dendukuri,N., Henry,M., Schiller,I., Nahid,P., Hopewell,P.C., et al. Performance of purified antigens for serodiagnosis of pulmonary tuberculosis: a meta-analysis. <i>Clinical &amp; Vaccine Immunology: CVI</i> 2009; 16(2):260-76.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Steingart,K.R., Flores,L.L., Dendukuri,N., Schiller,I., Laal,S., Ramsay,A., Hopewell,P.C.. Commercial serological tests for the diagnosis of active pulmonary and extrapulmonary tuberculosis: an updated systematic review and meta-analysis. [Review]. <i>PLoS Medicine / Public Library of Science</i> 2011; 8(8):e1001062.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Steingart,K.R., Henry,M., Laal,S., Hopewell,P.C., Ramsay,A., Menzies,D., et al. A systematic review of commercial serological antibody detection tests for the diagnosis of extrapulmonary tuberculosis. <i>Postgrad.Med.J.</i> 2007; 83(985):705-12.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Steingart,K.R., Henry,M., Laal,S., Hopewell,P.C., Ramsay,A., Menzies,D., et al. A systematic review of commercial serological antibody detection tests for the diagnosis of extrapulmonary tuberculosis. <i>Thorax</i> 2007; 62(10):911-18.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Steingart,K.R., Henry,M., Laal,S., Hopewell,P.C., Ramsay,A., Menzies,D., et al. Commercial serological antibody detection tests for the diagnosis of pulmonary tuberculosis: a systematic review. <i>PLoS Medicine / Public Library of Science</i> 2007; 4(6):e202.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Steingart,K.R., Henry,M., Laal,S., Hopewell,P.C., Ramsay,A., Menzies,D., et al. Erratum: Commercial serological antibody detection tests for the diagnosis of pulmonary tuberculosis: A systematic review ( <i>PLoS Medicine</i> (2007) 4, 6, (e202) DOI:10.1371/journal.pmed.0040202). <i>PLoS Med.</i> 2007; 4(8):1417.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Steingart,K.R., Henry,M., Ng,V., Hopewell,P.C., Ramsay,A., Cunningham,J., et al. Fluorescence versus conventional sputum smear microscopy for tuberculosis: a systematic review. <i>Lancet Infect.Dis.</i> 2006;6(9):570-81.	Reference standard not appropriate (not culture or other appropriate reference

RQ CDEGH Excluded studies – Original search	
	standard)
Steingart,K.R., Ng,V., Henry,M., Hopewell,P.C., Ramsay,A., Cunningham,J., et al. Sputum processing methods to improve the sensitivity of smear microscopy for tuberculosis: a systematic review. <i>Lancet Infect.Dis.</i> 2006;6(10):664-74.	Reference standard not appropriate (not culture or other appropriate reference standard)
Steingart,K.R., Ramsay,A., Dowdy,D.W.. Serological tests for the diagnosis of active tuberculosis: relevance for India. [Review]. <i>Indian J.Med.Res.</i> 2012;135(5):695-702.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Steingart,K R., Sohn,H, Schiller,I, Kloda,L A., Boehme,CC., Pai,M. Xpert© MTB/RIF assay for pulmonary tuberculosis and rifampicin resistance in adults. 2013;(1),	Duplicate
Stockdale,A.J., Duke,T., Graham,S.. Evidence behind the WHO guidelines: Hospital care for children: What is the diagnostic accuracy of gastric aspiration for the diagnosis of tuberculosis in children? <i>J.Trop.Pediatr.</i> 2010;56(5):291-98.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Su,S.-B., Qin,S.-Y., Guo,X.-Y., Luo,W.. Assessment by meta-analysis of interferon-gamma for the diagnosis of tuberculous peritonitis. <i>World J.Gastroenterol.</i> 2013;19(10):1645-51.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Sudarsanam,T.D.. The accuracy of the XpertMTB/RIF assay for detecting pulmonary tuberculosis and rifampicin resistance in adults: Summary of the evidence and implications for public health programmes. <i>Clin.Epidemiol.Global Health</i> 2013;1(2):78-84.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Sudharshan,S., Ganesh,S.K., Balu,G., Mahalakshmi,B., Therese,L.K., Madhavan,H.N.. Utility of QuantiFERON-TB Gold test in diagnosis and management of suspected tubercular uveitis in India. <i>Int.Ophthalmol.</i> 2012;32(3):217-23.	Examines diagnostic not available in the UK
Sutherland,J.S., de Jong,B.C., Jeffries,D.J., Adetifa,I.M.. Production of TNF-alpha, IL-12(p40) and IL-17 can discriminate between active TB disease and latent infection in a West African cohort. <i>PLoS ONE [Electronic Resource]</i> 2010;5(8):e12365.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Swaminathan,S., Umadevi,P., Shantha,S., Radhakrishnan,A.. Sero diagnosis of tuberculosis in children using two ELISA kits. <i>Indian J.Pediatr.</i> 1999;66(6):837-42.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Sztajn bok,F.R., Boechat,N.L., Sztajn bok,D.C., Ribeiro,S.B., Oliveira,S.K.. The challenge of pediatric tuberculosis in face of new diagnostic techniques. <i>J.Pediatr.</i> 2009;85(3):183-93.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies

RQ CDEGH Excluded studies – Original search	
Tan,J., Lee,B.W., Lim,T.K., Chin,N.K., Tan,C.B., Xia,J.R., Yap,H.K.. Detection of Mycobacterium tuberculosis in sputum, pleural and bronchoalveolar lavage fluid using DNA amplification of the MPB 64 protein coding gene and IS6110 insertion element. Southeast Asian Journal of Tropical Medicine & Public Health 1995;26(2):247-52.	Reference standard not appropriate (not culture or other appropriate reference standard)
Tan,S.H., Tan,H.H., Sun,Y.J.. Clinical utility of polymerase chain reaction in the detection of Mycobacterium tuberculosis in different types of cutaneous tuberculosis and tuberculids. Annals of the Academy of Medicine, Singapore 2001;30(1):3-10.	No relevant or usable outcome data
Tanaka,R., Matsuura,H., Kobashi,Y.. Clinical utility of an interferon-gamma-based assay for mycobacterial detection in papulonecrotic tuberculid. Br.J.Dermatol. 2007;156(1):169-71.	Not full report of study (e.g. conference abstract)
Tarhan,G., Gumuslu,F., Yilmaz,N., Saka,D., Ceyhan,I.. Serum adenosine deaminase enzyme and plasma platelet factor 4 activities in active pulmonary tuberculosis, HIV-seropositive subjects and cancer patients. J.Infect. 2006;52(4):264-68.	No relevant or usable outcome data
Theron,G., Peter,J., Zyl-Smit,R., Mishra,H., Streicher,E.. Evaluation of the Xpert MTB/RIF assay for the diagnosis of pulmonary tuberculosis in a high HIV prevalence setting. Am.J.Respir.Crit.Care Med. 2011;184(1):132-40.	Paper synthesized in included meta-analysis; no other relevant outcome data
Thijssen,S.F.T.. Interferon gamma release assays for diagnosing active and latent tuberculosis. Expert Opin.Med.Diagn. 2009;3(3):303-12.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Thomas,M.M., Hinks,T.S.C., Raghuraman,S., Ramalingam,N., Ernst,M., Nau,R., et al. Rapid diagnosis of mycobacterium tuberculosis meningitis by enumeration of cerebrospinal fluid antigen-specific T-cells. Int.J.Tuberc.Lung Dis. 2008;12(6):651-57.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Thornton,C.G., MacLellan,K.M., Brink,T.L.,Jr., Lockwood,D.E., Romagnoli,M., Turner,J., et al. Novel method for processing respiratory specimens for detection of mycobacteria by using C18-carboxypropylbetaine: blinded study. J.Clin.Microbiol. 1998;36(7):1996-2003.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Tiwari,R.P., Garg,S.K., Bharmal,R.N., Kartikeyan,S.. Rapid liposomal agglutination card test for the detection of antigens in patients with active tuberculosis. Int.J.Tuberc.Lung Dis. 2007;11(10):1143-51.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Tueller,C., Chhajed,P.N., Buitrago-Tellez,C., Frei,R., Frey,M.. Value of smear and PCR in bronchoalveolar lavage fluid in culture positive pulmonary tuberculosis. Eur.Respir.J. 2005;26(5):767-72.	No relevant or usable outcome data
Tuncer,I., Koksalan,O.K., Demir,K., Dincer,D., Turkoglu,S., Kaymakoglu,S., et al. Assay of mycobacterium tuberculosis in biopsy specimens taken from hepatic granuloma patients using polymerase chain reaction method. Turk.J.Gastroenterol. 2001;12(3):189-95.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Tuon,F.F., Silva,V.I., Almeida,G.M., Antonangelo,L.. The usefulness of	Wrong study design - not

**RQ CDEGH Excluded studies – Original search**

adenosine deaminase in the diagnosis of tuberculous pericarditis. Rev.Inst.Med.Trop.Sao Paulo 2007;49(3):165-70.	test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Turnbull,E.R., Kancheya,N.G., Harris,J.B., Topp,S.M., Henostroza,G.. A model of tuberculosis screening for pregnant women in resource-limited settings using Xpert MTB/RIF. [Review]. Journal of Pregnancy 2012;:565049.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Valdes,L., Alvarez,D., San,Jose E., Juanatey,J.R., Pose,A., Valle,J.M., Salgueiro,M.. Value of adenosine deaminase in the diagnosis of tuberculous pleural effusions in young patients in a region of high prevalence of tuberculosis. Thorax 1995; 50(6):600-03.	No relevant or usable outcome data
Varma-Basil,M., Kumar,S., Yadav,J., Kumar,N.. A simple method to differentiate between Mycobacterium tuberculosis and non-tuberculous mycobacteria directly on clinical specimens. Southeast Asian Journal of Tropical Medicine & Public Health 2007; 38(1):111-14.	No relevant or usable outcome data
Vesenbeckh,S.M., Schonfeld,N., Mauch,H., Bergmann,T., Wagner,S., Bauer,T.T.. The use of interferon gamma release assays in the diagnosis of active tuberculosis. Tuberculosis Research & Treatment Print 2012;:768723.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Vieira,F.D., Salem,J.I., Ruffino-Netto,A., Camargo,S.A., Silva,R.R., Moura,L.C., Vilaca,M.J.. Methodology for characterizing proficiency in interpreting sputum smear microscopy results in the diagnosis of tuberculosis. Jornal Brasileiro De Pneumologia: Publicacao Oficial Da Sociedade Brasileira De Pneumologia E Tisiologia 2008;34(5):304-11.	Not in English
Vijayasekaran,D., Kumar,R.A., Gowrishankar,N.C., Nedunchelian,K.. Mantoux and contact positivity in tuberculosis. Indian J.Pediatr. 2006;73(11):989-93.	No relevant or usable outcome data
Ville de,Goyet C.. Tuberculin testing by multiple puncture and by intradermal injection. S.Afr.Med.J. 1973;Suid-Afrikaanse(36):1648-52.	Not relevant - does not compare differing diagnostic methods for active TB against each other
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Watkins,R.E. & Brennan,R.. Tuberculin reactivity and the risk of tuberculosis: a review. International Journal of Tuberculosis & Lung Disease 2000;4(10):895-903.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Weyer,K., Mirzayev,F., Migliori,G.B., Van,Gemert W., D'Ambrosio,L., Zignol,M., et al. Rapid molecular TB diagnosis: Evidence, policy making and global implementation of Xpert MTB/RIF. Eur.Respir.J. 2013;42(1):252-71.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Wilkinson,K.A., Simsova,M., Scholvinck,E., Sebo,P., Leclerc,C.,	Wrong study design - not

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Wisnivesky,J.P., Serebrisky,D., Moore,C., Sacks,H.S., Iannuzzi,M.C.. Validity of clinical prediction rules for isolating inpatients with suspected tuberculosis: A systematic review. <i>J.Gen.Intern.Med.</i> 2005; 20(10):947-52.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Wright,C.A. & Pienaar,J.P.. Fine needle aspiration biopsy: Diagnostic utility in resource-limited settings. <i>Ann.Trop.Paediatr.</i> 2008; 28(1):65-70.	No relevant or usable outcome data
Wu,H.-P., Hua,C.-C., Liu,Y.-C.. Comparison of interferon- response between tuberculosis and non-tubercular pneumonia. <i>Inflamm.Res.</i> 2007; 56(1):11-16.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Xu,H.B., Jiang,R.H., Li,L., Sha,W.. Diagnostic value of adenosine deaminase in cerebrospinal fluid for tuberculous meningitis: a meta-analysis. [Review]. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2010; 14(11):1382-87.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Xu,H.B., Jiang,R.H., Sha,W., Li,L.. PCR-single-strand conformational polymorphism method for rapid detection of rifampin-resistant Mycobacterium tuberculosis: systematic review and meta-analysis. [Review]. <i>J.Clin.Microbiol.</i> 2010;48(10):3635-40.	Not relevant - does not compare differing diagnostic methods for active TB against each other
Yanai,M., Uehara,Y., Takeuchi,M., Nagura,Y., Hoshino,T., Hayashi,K.. Evaluation of serological diagnosis tests for tuberculosis in hemodialysis patients. <i>Therapeutic Apheresis &amp; Dialysis: Official Peer-Reviewed Journal of the International Society for Apheresis, the Japanese Society for Apheresis, the Japanese Society for Dialysis Therapy</i> 2006;10(3):278-81.	Wrong population - latent TB or screening
Yassin,M.A., Petrucci,R., Garie,K.T., Harper,G., Arbide,I., Aschalew,M., et al. Can interferon-gamma or interferon-gamma-induced-protein-10 differentiate tuberculosis infection and disease in children of high endemic areas? <i>PLoS ONE [Electronic Resource]</i> 2011;6(9):e23733.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Yonal,O.. What is the most accurate method for the diagnosis of intestinal tuberculosis? <i>Turk.J.Gastroenterol.</i> 2010;21(1):91-96.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies
Yoon,H.J., Song,Y.G., Park,W.I., Choi,J.P., Chang,K.H.. Clinical manifestations and diagnosis of extrapulmonary tuberculosis. <i>Yonsei Med.J.</i> 2004; 45(3):453-61.	No relevant or usable outcome data
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Zykov,M.P., Geser,A., Egsmose,T., Godovannyi,B.A., Donets,I., Ang'awa,J.A., et al. A serological test in tuberculosis. A 'blind' trial of the kaolin-agglutination test (KAT) for detection of tuberculosis antibodies. <i>Bull.Whow</i> 1966; 35(4):581-92.	Wrong study design - not test-and-treat RCT, cross-sectional study or systematic review of predominantly test-and-treat RCTs and cross-sectional studies

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Agha,M.A., El-Helbawy,R.H., El-Helbawy,N.G., El-Sheak,N.M., Utility of quantitative analysis of urine lipoarabinomannan in the diagnosis of tuberculosis, <i>Egyptian Journal of Chest Diseases and Tuberculosis</i> , 62, 401-407, 2013	Design: Case-control
Ahmad,S, Mokaddas,E. Current status and future trends in the diagnosis and treatment of drug-susceptible and multidrug-resistant tuberculosis, <i>Journal of infection and public healthJ Infect Public Health</i> , 7, 75-91, 2014	Narrative Review.
Ajobiewe,J., Tiri,A., Critical appraisal of fluorescent and ordinary light microscopies in mycobacterium tuberculosis diagnosis at the National Hospital Abuja, Nigeria, <i>Internet Journal of Microbiology</i> , 12, -, 2013	Comparator not culture
Ang,Marcus, Wong,Wan Ling, Kiew,Sieh Yean, Li,Xiang, Chee,Soon Phaik, Prospective head-to-head study comparing 2 commercial interferon gamma release assays for the diagnosis of tuberculous uveitis, <i>American journal of ophthalmologyAm J Ophthalmol</i> , 157, 1306-4, 2014	Comparator no culture
Anochie,PI, Onyeneke,EC., Ogu,AC., Onyeozirila,AC., Aluru,S, Onyejepu,N, Zhang,J, Efere,L, Adetunji,MA., Sanchez,JG Bueno, Recent advances in the diagnosis of Mycobacterium tuberculosis, <i>Germes</i> , 2, 110-120, 2012	Narrative Review.
Banjoko,S.O., Sridhar,M.K.C., Clinical evaluation of a rapid immunochromatographic serological method in the diagnosis of mycobacterium tuberculosis, <i>TAF Preventive Medicine Bulletin</i> , 12, 651-656, 2013	Not site specific
Bastos,M.L., Menzies,D., Belo,M.T.C.T., Teixeira,E.G., de Abreu,S.T., Antas,P.R.Z., Trajman,A., Changes in QuantiFERON-TB Gold In-Tube results during treatment for tuberculous infection, <i>The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung DiseaseInt J Tuberc Lung Dis</i> , 17, 909-916, 2013	Latent TB
Bekmurzayeva,A, Syabekova,M, Kanayeva,D. Tuberculosis diagnosis using immunodominant, secreted antigens of Mycobacterium tuberculosis, <i>Tuberculosis (Edinburgh, Scotland)Tuberculosis (Edinb)</i> , 93, 381-388, 2013	Narrative review
Brammacharry,U., Muthuraj,M., Diagnostic value of Polymerase Chain Reaction for the rapid diagnosis of clinically suspected tuberculous meningitis, <i>International Journal of Pharma and Bio SciencesInt.J. Pharma Bio Sci.</i> , 5, B70-B77, 2014	In house NAAT
Chaidir,L., Parwati,I., Annisa,J., Muhsinin,S., Meilana,I., Alisjahbana,B.,	Duplication

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Chen,W., Fan,J.H., Luo,W., Peng,P., Su,S.B., Effectiveness of interferon-gamma release assays for differentiating intestinal tuberculosis from Crohn's disease: a meta-analysis (Provisional abstract), World Journal of GastroenterologyWorld J.Gastroenterol., 19, 8133-8140, 2013	Duplicate reference
Colmenero,Juan D., Ruiz-Mesa,Juan D., Sanjuan-Jimenez,Rocio, Sobrino,Beatriz, Morata,Pilar, Establishing the diagnosis of tuberculous vertebral osteomyelitis, European spine journal : official publication of the European Spine Society, the European Spinal Deformity Society, and the European Section of the Cervical Spine Research SocietyEur Spine J, 22 Suppl 4, 579-586, 2013	Narrative publication
Dang,NA., Janssen,HG, Kolk,Arend H.J., Rapid diagnosis of TB using GC-MS and chemometrics, Bioanalysis, 5, 3079-3097, 2013	Biomarkers
Du,W.X., Chen,B.W., Lu,J.B., Gao,M.Q., Shen,X.B., Yang,L., Su,C., Wang,G.Z., Sun,Q.F., Xu,M., Preclinical study and phase I clinical safety evaluation of recombinant Mycobacterium tuberculosis ESAT6 protein, Medical science monitor basic research, 19, 146-152, 2013	Biomarkers
Eisenhut,M, Fidler,K. Performance of Tuberculin Skin Test Measured against Interferon Gamma Release Assay as Reference Standard in Children, Tuberculosis research and treatmenttuberc.res.treat.(print), 2014, 413459-, 2014	Latent TB
Fei,B.Y., Lv,H.X., Zheng,W.H., Fluorescent quantitative PCR of Mycobacterium tuberculosis for differentiating intestinal tuberculosis from Crohn's disease, Brazilian Journal of Medical and Biological ResearchBraz.J.Med.Biol.Res., 47, 166-170, 2014	Design: Case control
Garcia-Elorriaga,Guadalupe, Martinez-Elizondo,Olga, Del Rey-Pineda,Guillermo, Gonzalez-Bonilla,Cesar, Clinical, radiological and molecular diagnosis correlation in serum samples from patients with osteoarticular tuberculosis, Asian Pacific journal of tropical biomedicineAsian Pac.j.trop.biomed., 4, 581-585, 2014	PCR in house, cannot use data
Guo,Shu Jin, Jia,Liu Qun, Hu,Qian Jing, Long,Hong Yu, Pang,Cai Shuang, Wen,Fu Qiang, Diagnostic accuracy of interferon gamma-induced protein 10 for tuberculosis: a meta-analysis, International journal of clinical and experimental medicineInt J Clin Exp Med, 7, 93-100, 2014	Biomarkers out-of scope
Keng,L.-T., Shu,C.-C., Chen,J.Y.P., Liang,S.-K., Lin,C.-K., Chang,L.-Y., Chang,C.-H., Wang,J.-Y., Yu,C.-J., Lee,L.-N., Evaluating pleural ADA, ADA2, IFN- and IGRA for diagnosing tuberculous pleurisy, Journal of InfectionJ.Infect., 67, 294-302, 2013	wrong design
Kidenya,B.R., Kabangila,R., Peck,R.N., Mshana,S.E., Webster,L.E., Koenig,S.P., Johnson Jr,W.D., Fitzgerald,D.W., Early and Efficient Detection of Mycobacterium tuberculosis in Sputum by Microscopic Observation of Broth Cultures, PloS one, 8, -, 2013	Culture vs culture comparison
Kocaman,O, Danalioglu,A, Ince,AT, Tozlu,M, Senturk,H. Diagnosis of tuberculous peritonitis using endoscopic ultrasound-guided fine-needle aspiration biopsy of the peritoneum, The Turkish journal of gastroenterology : the official journal of Turkish Society of GastroenterologyTurk J Gastroenterol, 24, 65-69, 2013	Design
Kolibab,K., Yang,A., Parra,M., Derrick,S.C., Morris,S.L., Time to detection of Mycobacterium tuberculosis using the MGIT 320 system correlates with colony counting in preclinical testing of new vaccines, Clinical and vaccine	Design

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immunology : CVIClin Vaccine Immunol, 21, 453-455, 2014	
Lagrange,PH., Thangaraj,SK., Dayal,R, Deshpande,A, Ganguly,NK., Girardi,E, Joshi,B, Katoch,K, Katoch,VM., Kumar,M, Lakshmi,V, Leportier,M, Longuet,C, Malladi,SV.S., Mukerjee,D, Nair,Di, Raja,A, Raman,B, Rodrigues,C, Sharma,P, Singh,A, Singh,S, Sodha,A, Kabeer,BS A, Vernet,G, Goletti,D. A toolbox for tuberculosis (TB) diagnosis: an Indian multicentric study (2006-2008). Evaluation of QuantiFERON-TB gold in tube for TB diagnosis, PloS one, 8, e73579-, 2013	Design: Case-control
Liu,Y, Guo,YL, Jiang,G L, Zhou,SJ, Sun,Q, Chen,X, Chang,XJ, Xing,AY, Du,F J, Jia,HY, Zhang,ZD, Application of hyperbranched rolling circle amplification for direct detection of mycobacterium tuberculosis in clinical sputum specimens, PloS one, 8, e64583-, 2013	No active TB cases
Moreira,A da Silva Rezende, Huf,G, Vieira,MA, Fonseca,L, Ricks,M, Kritski,AL, Performance comparison between the mycobacteria growth indicator tube system and Lowenstein-Jensen medium in the routine detection of Mycobacterium tuberculosis at public health care facilities in Rio de Janeiro, Brazil: preliminary results of a pragmatic clinical trial, Jornal brasileiro de pneumologia : publicacao oficial da Sociedade Brasileira de Pneumologia e TisiologiaJ Bras Pneumol, 39, 365-367, 2013	Culture vs culture
Rageade,F., Picot,N., Blanc-Michaud,A., Chatellier,S., Mirande,C., Fortin,E., Van,Belkum A., Performance of solid and liquid culture media for the detection of Mycobacterium tuberculosis in clinical materials: Meta-analysis of recent studies, European Journal of Clinical Microbiology and Infectious DiseasesEur.J.Clin.Microbiol.Infect.Dis., 33, 867-870, 2014	Diagnosis and outcomes
Reza,Lord Wasim, Satyanarayna,Srinath, Enarson,Donald A., Kumar,Ajay M.V., Sagili,Karuna, Kumar,Sujeet, Prabhakar,Levi Anand, Devendrappa,N.M., Pandey,Ashish, Wilson,Nevin, Chadha,Sarabjit, Thapa,Badri, Sachdeva,Kuldeep Singh, Kohli,Mohan P., LED-fluorescence microscopy for diagnosis of pulmonary tuberculosis under programmatic conditions in India, PloS one, 8, e75566-, 2013	No culture as comparator - quasi RCT
Su,SB, Qin,SY, Guo,XY, Luo,W, Jiang,HX. Assessment by meta-analysis of interferon-gamma for the diagnosis of tuberculous peritonitis, World journal of gastroenterology : WJGWorld J Gastroenterol, 19, 1645-1651, 2013	No comercial test, not refernce based, design
Theron,G., Peter,J., Meldau,R., Khalfey,H., Gina,P., Matinyena,B., Lenders,L., Calligaro,G., Allwood,B., Symons,G., Govender,U., Setshedi,M., Dheda,K., Accuracy and impact of Xpert MTB/RIF for the diagnosis of smear-negative or sputum-scarce tuberculosis using bronchoalveolar lavage fluid, Thorax, 68, 1037-1042, 2013	Not culture based reference
Tieu,H.-V., Suntarattiwong,P., Puthanakit,T., Chotpitayasunondh,T., Chokephaibulkit,K., Sirivichayakul,S., Buranapraditkun,S., Rungrojrat,P., Chomchey,N., Tsiouris,S., Hammer,S., Nandi,V., Ananworanich,J., Comparing interferon-gamma release assays to tuberculin skin test in thai children with tuberculosis exposure, PloS one, 9, -, 2014	Design (cohort)
Walusimbi,S., Bwanga,F., Costa,A.D., Haile,M., Hoffner,S., Joloba,M., Evaluation of the Xpert MTB/Rif test, microscopic observation drug susceptibility test and nitrate reductase assay, for rapid and accurate diagnosis of smear-negative tuberculosis in HIV patients, International Journal of MycobacteriologyInt.J.Mycobacteriology, 2, 148-155, 2013	Smear negative culture positive individuals
Wikman-Jorgensen,P., Llenas-Garcia,J., Hobbins,M., Ehmer,J., Abellana,R., Goncalves,A.Q., Perez-Porcuna,T.M., Ascaso,C., Microscopic observation drug susceptibility assay for the diagnosis of TB and MDR-TB in HIV-infected	culture not relevant

**RQ CDEGH Excluded studies - Update**

patients: A systematic review and meta-analysis, European Respiratory Journal Eur.Respir.J., 44, 973-984, 2014	
Yin,X, Zheng,L, Lin,L, Hu,Y, Zheng,F, Hu,Y, Wang,Q. Commercial MPT64-based tests for rapid identification of Mycobacterium tuberculosis complex: a meta-analysis, The Journal of infection J Infect, 67, 369-377, 2013	Index test not relevant
Zinn,C., Vorster,M., Sathekge,M.M., Spinal tuberculosis evaluated by means of 18F-FDG PET/CT: Pilot study, Open Nuclear Medicine Journal.6 (1) (pp 6-11), 2014.Date of Publication: 2014., 6-11, 2014	Not enough participants to conduct meta-analysis

**RQ I****RQ I. Excluded studies – Original and Update**

References	Reason for Exclusion
Controlled clinical trial of four short-course (6-month) regimens of chemotherapy for treatment of pulmonary tuberculosis. Third report. East African-British Medical Research Councils, Lancet, 2, 237-240, 1974	Study included adults
A controlled comparison of a twice-weekly and three once-weekly regimens in the initial treatment of pulmonary tuberculosis, Bulletin of the World Health Organization, 43, 143-206, 1970	Study included adults
Isoniazid with thiacetazone (thioacetazone) in the treatment of pulmonary tuberculosis in East Africa--fifth investigation. A co-operative study in East African hospitals, clinics and laboratories with the collaboration of the East African and British Medical Research Councils, Tubercle, 51, 123-151, 1970	Study does not examine dosing frequency
A comparative study of daily and twice-weekly continuation regimens of tuberculosis chemotherapy, including a comparison of two durations of sanatorium treatment. 1. First report: the results at 12 months, Bulletin of the World Health Organization, 45, 573-593, 1971	Study included adults
Short course treatment in pulmonary tuberculosis, East African Medical Journal, 49, 494-501, 1972	Study included adults
Controlled comparison of oral twice-weekly and oral daily isoniazid plus PAS in newly diagnosed pulmonary tuberculosis, British Medical Journal, 2, 7-11, 1973	Study included adults
A comparative study of daily and twice-weekly continuation regimens of tuberculosis chemotherapy, including a comparison of two durations of sanatorium treatment. 2. Second report: the results from 12 to 24 months, Bulletin of the World Health Organization, 48, 155-165, 1973	Study included adults
Co-operative controlled trial of a standard regimen of streptomycin, PAS and isoniazid and three alternative regimens of chemotherapy in Britain. A report from the British Medical Research Council, Tubercle, 54, 99-129, 1973	Study included adults
Controlled clinical trial of four short-course (6-month) regimens of chemotherapy for treatment of pulmonary tuberculosis, Lancet, 2, 1100-1106, 1974	Study included adults
Controlled trial of 6- and 9-month regimens of daily and intermittent streptomycin plus isoniazid plus pyrazinamide for pulmonary tuberculosis in Hong Kong, Tubercle, 56, 81-96, 1975	Study included adults
Controlled trial of intermittent regimens of rifampicin plus isoniazid for pulmonary tuberculosis in Singapore, Lancet, 2, 1105-1109, 1975	Study included adults
A clinical study on controlled therapy in newly-diagnosed pulmonary tuberculosis using combinations of antituberculosis drugs by the daily continuous and intermittent methods, Archivum Immunologiae et Therapiae Experimentalis, 24, 169-184, 1976	Study included adults

RQ I. Excluded studies – Original and Update	
A controlled clinical trial of small daily doses of rifampicin in the prevention of adverse reactions to the drug in a once-weekly regimen of chemotherapy in Hong Kong: second report:-the results at 12 months, <i>Tubercle</i> , 55, 193-210, 1974	Study included adults
A controlled clinical trial of daily and intermittent regimens of rifampicin plus ethambutol in the retreatment of patients with pulmonary tuberculosis in Hong Kong. A Hong Kong Tuberculosis Treatment Services/Brompton Hospital/British Medical Research Council investigation, <i>Tubercle</i> , 55, 1-27, 1974	Study included adults
A comparative study of daily and twice-weekly continuation regimens of tuberculosis chemotherapy, including a comparison of two durations of sanatorium treatment, <i>Tubercle</i> , 57, 45-48, 1976	Study included adults
A study of two twice-weekly and once-weekly continuation regimen of tuberculosis chemotherapy, including a comparison of two durations of treatment. 1. First report: the results at 18 months, <i>Tubercle</i> , 57, 235-249, 1976	Study included adults
Controlled trial of 6-month and 9-month regimens of daily and intermittent streptomycin plus isoniazid plus pyrazinamide for pulmonary tuberculosis in Hong Kong. The results up to 30 months, <i>American Review of Respiratory Disease</i> , 115, 727-735, 1977	Study included adults
A study of two twice-weekly and a once-weekly continuation regimen of tuberculosis chemotherapy, including a comparison of two durations of treatment. 2. Second report: the results at 36 months, <i>Tubercle</i> , 58, 129-136, 1977	Study included adults
Controlled trial of 4 three-times-weekly regimens and a daily regimen all given for 6 months for pulmonary tuberculosis. Second report: the results up to 24 months. Hong Kong Chest Service/British Medical Research Council, <i>Tubercle</i> , 63, 89-98, 1982	Study included adults
A controlled clinical trial of oral short-course regimens in the treatment of sputum-positive pulmonary tuberculosis. Tuberculosis Research Centre, <i>International Journal of Tuberculosis &amp; Lung Disease</i> , 1, 509-517, 1997	Study includes adults
Acocella,G., The use of fixed-dose combinations in antituberculous chemotherapy. Rationale for their application in daily, intermittent and pediatric regimens. [Review] [7 refs], <i>Bulletin of the International Union Against Tuberculosis &amp; Lung Disease</i> , 65, 77-83, 1990	Narrative review
Adane,A A, Alene,K Addis, Koye,D N, Zeleke,B M, Non-adherence to anti-tuberculosis treatment and determinant factors among patients with tuberculosis in northwest Ethiopia, <i>PloS one</i> , 8, e78791-, 2013	Wrong design
Berti,E, Galli,L, Venturini,E, de Martini,M, Chiappini,E, Tuberculosis in childhood: a systematic review of national and international guidelines, <i>BMC infectious diseases</i> , 14 Suppl 1, S3-, 2014	Narrative review, commentary
Bethlem,N., Gerhardt,FO G., Magarao,S. Comparison of two regimens of simplified two-stage chemotherapy in previously untreated pulmonary tuberculosis, <i>Tubercle</i> , 54, 180-184, 1973	Study included adults
Bose,A, Kalita,S, Rose,W, Tharyan,P, Intermittent versus daily therapy for treating tuberculosis in children, <i>Cochrane Database of Systematic Reviews</i> -, 2009	Protocol for a review
Bose,A, Kalita,S, Rose,W, Tharyan,P, Intermittent versus daily therapy for treating tuberculosis in children, <i>The Cochrane database of systematic reviews</i> , 1, CD007953-, 2014	No new references
Boszormenyi,M., Schweiger,O. A controlled clinical trial of the drug treatment of new cases of pulmonary tuberculosis, <i>Scandinavian Journal of Respiratory Diseases - Supplementum</i> , 65, 189-193, 1968	Study included adults
Chang,K.C., Leung,C.C., Grosset,J., Yew,W.W. Treatment of tuberculosis and optimal dosing schedules. [Review], <i>Thorax</i> , 66, 997-1007, 2011	Study included adults

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Cybulska,E., Rucinski,J. Tuberculous meningitis, British Journal of Hospital Medicine, 39, 63-66, 1988	Narrative review
Doster,B., Murray,F.J., Newman,R., Woolpert,S.F. Ethambutol in the initial treatment of pulmonary tuberculosis. U.S. Public Health Service tuberculosis therapy trials, American Review of Respiratory Disease, 107, 177-190, 1973	Study included adults
Dubra,F. Controlled therapeutic trial with the combination rifampicin-isoniazid given for six months to previously untreated patients with pulmonary tuberculosis, Bulletin of the International Union Against Tuberculosis, 47, 37-40, 1972	Study included adults
Ellard,G.A., Ellard,D.R., Allen,B.W., Girling,D.J., Nunn,A.J., Teo,S.K., Tan,T.H., Ng,H.K., Chan,S.L. The bioavailability of isoniazid, rifampin, and pyrazinamide in two commercially available combined formulations designed for use in the short-course treatment of tuberculosis, American Review of Respiratory Disease, 133, 1076-1080, 1986	Study included adults
Fox,W., Robinson,D.K., Tall,R., Kent,P.W., Macfadyen,D.M. A study of acute intolerance to ethionamide, including a comparison with prothionamide, and of the influence of a vitamin B-complex additive in prophylaxis, Tubercle, 50, 125-143, 1969	Study does not examine dosing frequency
Gie,R.P., Goussard,P., Kling,S., Schaaf,H.S., Beyers,N. Unusual forms of intrathoracic tuberculosis in children and their management, Paediatric respiratory reviews, 5, S139-S141, 2004	Study concerned with unusual presentations and their management
Girling,D.J. A controlled trial of 3-month, 4-month, and 6-month regimens of chemotherapy for sputum-smear-negative pulmonary tuberculosis. Results at 5 years, American Review of Respiratory Disease, 139, 871-876, 1989	Study included adults
Hong,Y.P., Kim,S.C., Chang,S.C., Kim,S.J., Jin,B.W., Park,C.D. Comparison of a daily and three intermittent retreatment regimens for pulmonary tuberculosis administered under programme conditions, Tubercle, 69, 241-253, 1988	Study included adults
Jindal,S.K., Aggarwal,A.N., Gupta,D., Ahmed,Z., Gupta,K.B., Janmeja,A.K., Kashyap,S., Singh,M., Mohan,A., Whig,J. Tuberculous lymphadenopathy: a multicentre operational study of 6-month thrice weekly directly observed treatment, The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease, 17, 234-239, 2013	Wrong population 'adults'
Kent,P.W., Fox,W., Miller,A.B., Nunn,A.J., Tall,R., Mitchison,D.A. The therapy of pulmonary tuberculosis in Kenya: a comparison of the results achieved in controlled clinical trials with those achieved by the routine treatment services, Tubercle, 51, 24-38, 1970	Study included adults
Menon,N.K. Madras study of supervised once-weekly chemotherapy, Bulletin of the International Union Against Tuberculosis, 41, 316-321, 1968	Study does not report on results for children separately
Menon,P.R., Lodha,R., Sivanandan,S., Kabra,S.K. Intermittent or daily short course chemotherapy for tuberculosis in children: meta-analysis of randomized controlled trials, Indian Pediatrics, 47, 67-73, 2010	Age cut-off = 16
Newman,R., Doster,B.E., Murray,F.J., Woolpert,S.F. Rifampin in initial treatment of pulmonary tuberculosis. A.U.S. Public Health Service tuberculosis therapy trial, American Review of Respiratory Disease, 109, 216-232, 1974	Study included adults
Ormerod, L.P. Drug therapy for children with tuberculosis, Archives of disease in childhood, 97, 1097-1101, 2012	Narrative review
Parthasarathy,R., Sarma,G.R., Janardhanam,B., Ramachandran,P., Santha,T., Sivasubramanian,S., Somasundaram,P.R., Tripathy,S.P. Hepatic toxicity in South Indian patients during treatment of tuberculosis with short-course regimens	Study included adults



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Peter,G., Plotkin,S., Easton,J.G., Halsey,N.A., Lepow,M.L., Marcuse,E.K., Marks,M.I., Nankervis,G.A., Phillips,C.F., Pickering,L.K., Scott,G.B., Steele,R.W., Chemotherapy for tuberculosis in infants and children, Pediatrics, 89, 161-165, 1992	Narrative review
Popplewell,A.G., Miller,J.D., Greene,M.E., Landwehr,A. Capreomycin in original treatment cases of pulmonary tuberculosis, Annals of the New York Academy of Sciences, 135, 989-1005, 1966	Study included adults
Rajeswari,R., Sivasubramanian,S., Balambal,R., Parthasarathy,R., Ranjani,R., Santha,T., Somasundaram,P.R., Ganapathy,S., Sudarsana,K., Sayeed,Z.A., 19951201, A controlled clinical trial of short-course chemotherapy for tuberculoma of the brain, Tubercle & Lung Disease, 76, 311-317, 1995	Results for children not reported separately
Schutze,G.E., Jacobs,R.F. Treatment of tuberculous infection and disease. [Review] [23 refs], Pediatric Annals, 22, 631-633, 637	Narrative review
Shingadia,D., Tuberculosis in childhood. [Review], Therapeutic Advances in Respiratory Disease, 6, 161-171, 2012	Narrative review
Snider,D.E., Jr., Zierski,M., Graczyk,J., Bek,E., Farer,L.S. Short-course tuberculosis chemotherapy studies conducted in Poland during the past decade, European Journal of Respiratory Diseases, 68, 12-18, 1986	Study included adults
Stern,C. Intermittent and daily therapy for tuberculosis in children, Nursing times, 110, 19-, 2014	Commentary, not full paper
Swaminathan,S. Treatment of tuberculosis. [Review] [25 refs], Indian Journal of Pediatrics, 67, Suppl-20, 2000	Narrative review
Tam,C.M., Chan,S.L., Lam,C.W., Leung,C.C., Kam,K.M., Morris,J.S., Mitchison,D.A., Rifapentine and isoniazid in the continuation phase of treating pulmonary tuberculosis. Initial report, American journal of respiratory and critical care medicine, 157, 1726-1733, 1998	Study compares different drug regimens
Theodore,A., Wolff,M., 19700302, The effect of isoniazid on performance in school, American Review of Respiratory Disease, 101, 252-257, 1970	Study does not examine dosing frequency
Tousek,J., Zítková,L., Trnka,L., Staflová,S., Papezová,E., Drápela,J., Factors influencing the effects of the initial phase of tuberculosis chemotherapy, Czechoslovak medicine, 3, 114-122, 1980	Study includes adults
Vashishtha,Richa, Mohan,Krishna, Singh,Bhagteshwar, Devarapu,Satish K., Sreenivas,Vishnubhatla, Ranjan,Sanjay, Gupta,Deepak, Sinha,Sanjeev, Sharma,Surendra K., Efficacy and safety of thrice weekly DOTS in tuberculosis patients with and without HIV co-infection: an observational study, BMC infectious diseases, 13, 468-, 2013	Wrong design
Zemanick,E.T., Sagel,S.D., Harris,J.K., The airway microbiome in cystic fibrosis and implications for treatment, Curr Opin Pediatr, 23, 319-324, 2011	Narrative review
Zierski,M., Bek,E., Side-effects of drug regimens used in short-course chemotherapy for pulmonary tuberculosis. A controlled clinical study, Tubercle, 61, 41-49, 1980	Study included adults
Zierski,M., Daily and intermittent short-course regimens in the original treatment of pulmonary tuberculosis. Preliminary results. Cooperative comparative clinical study in Poland, Scandinavian Journal of Respiratory Diseases - Supplementum, 102, 48-52, 1978	Study included adults

## RQK

RQK. Excluded studies - original search	
Reference	Reason for exclusion
A double-blind study to explore the role of levamisole in short-course chemotherapy for pulmonary tuberculosis. Bulletin of the International Union Against Tuberculosis and Lung Disease.62 (3) (pp 24-25), 1987.Date of Publication: 1987. 1987;(3):24-25.	Unable to locate full article
. A review of enzyme changes in serum and urine due to treatment with drugs (tuberculostatics, contraceptive medication, diagnostics and drugs in real diseases). Folia Medica Cracoviensia 1980;22(3-4):279-91.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
A trial involving HIV-tuberculosis in India: the minute particulars. American Journal of Respiratory & Critical Care Medicine 2010;181(7):652-54.	not a fully published report of a trial (i.e. abstract)
AIDS research. Bioethicists assail a celebrated TB/HIV treatment trial. Science 2010;328(5980):799-801.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
BTA short-course chemotherapy studies. Chest 1981;80(6):722-24.	wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest
Cerebrospinal fluid concentrations of antituberculosis agents in adults and children. Tuberculosis.90 (5) (pp 279-292), 2010.Date of Publication: September 2010. 2010;(5):279-92.	no outcomes of interest
Clinical applications of ethambutol. Tubercle 1969;50():Suppl-2.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Comparative efficacy and toxicity in antimicrobial trials. Current Opinion in Infectious Diseases.5 (6) (pp 781-786), 1992.Date of Publication: 1992. 1992;(6):781-86.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Comparison of three 6-month regimens for smear-positive cases of pulmonary tuberculosis: A Singapore Government Tuberculosis Service/British Medical Research Council Investigation. Bulletin of the International Union against Tuberculosis.59 (1-2) (pp 14-15), 1984.Date of Publication: 1984. 1984;(1-2):14-15.	wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest
Cooperative study of short-term antibacillary treatments in 14 French centers. Bull Int Union Tuberc 1974;49(1):398-410.	Unable to locate full article
DOH reviews HIV/TB treatment protocols. South African Medical Journal 840;/Suid-Afrikaanse(11):838.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a

RQK. Excluded studies - original search	
	comorbidity or coexisting condition of interest
Earlier initiation of antiretroviral therapy after start of antituberculosis therapy reduced mortality in HIV. <i>Annals of Internal Medicine</i> .156 (6) (pp JC2-JC3), 2012.Date of Publication: 20 Mar 2012. 2012;(6):JC2-C3.	not a fully published report of a trial (i.e. abstract)
Ethambutol compared to rifampin in original treatment of pulmonary tuberculosis. <i>Lung</i> 1980;157(3):117-25.	wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest
Ethambutol/INH. in the initial treatment of pulmonary tuberculosis. <i>Singapore Medical Journal</i> 1971;12(3):161-65.	wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest
Hepatotoxicity of isoniazid and rifampin: A meta-analysis. <i>Annals of Internal Medicine</i> .114 (SUPPL.3) (pp 75), 1991.Date of Publication: 1991. 1991;(SUPPL. 3):75.	not a fully published report of a trial (i.e. abstract)
How should we treat tuberculosis in adult patients with chronic kidney disease? Key messages from the British Thoracic Society Guidelines. <i>Polskie Archiwum Medycyny Wewnętrznej</i> .120 (10) (pp 417-422), 2010.Date of Publication: 2010. 2010;(10):417-22.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Increased incidence of tuberculosis in patients undergoing hemodialysis. <i>Nephron</i> 1996;73(3):421-24.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Isoniazid-associated hepatitis deaths: a review of available information. <i>American Review of Respiratory Disease</i> 1992;146(6):1643-44.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Peculiarities of tuberculosis in kidney transplant recipients. <i>Annals of African Medicine</i> .12 (3) (pp 143-147), 2013.Date of Publication: July-September 2013. (3):143-47.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Pericardial tuberculosis in patients with AIDS. <i>Infections in Medicine</i> .21 (8) (pp 369-376), 2004.Date of Publication: August 2004. (8):369-76.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Prospective study of hepatitis during antituberculous treatment in Taiwanese patients and a review of the literature. <i>Journal of the Formosan Medical Association</i> 2009;108(11):899.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies,

**RQK. Excluded studies - original search**

	commentaries etc
Results of clinical studies with capreomycin, ethambutol and rifampicin in the Heckeshorn Hospital, Berlin. Scandinavian Journal of Respiratory Diseases - Supplementum 1969;69():43-53.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
The treatment of ocular tuberculosis: a survey of published literature. Indian Journal of Ophthalmology 2006;54(4):278-80.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
The treatment of tuberculous meningitis. Tubercle.70 (2) (pp 79-82), 1989.Date of Publication: 1989. (2):79-82.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Trial tests new combination of drugs to treat tuberculosis. BMJ 2012; 344():e2216.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Tuberculosis and pregnancy. Five- to ten-year review of 215 patients in their fertile age. Chest 1975; 68(6):800-04.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Tuberculosis in pregnancy and the puerperium. Thorax 2001; 56(6):494-99.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Aaron,L., Saadoun,D., Calatroni,I., Launay,O., Memain,N., Vincent,V., et al. Tuberculosis in HIV-infected patients: a comprehensive review. Clinical Microbiology & Infection 2004; 10(5):388-98.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Ahmad,Khan F., Minion,J., Al-Motairi,A., Benedetti,A., Harries,A.D.. An updated systematic review and meta-analysis on the treatment of active tuberculosis in patients with HIV infection. [Review]. Clinical Infectious Diseases 2012;55(8):1154-63.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Aljohaney,A. & Amjadi,K.. A systematic review of the epidemiology, immunopathogenesis, diagnosis, and treatment of pleural TB in HIV-infected patients. [Review]. Clinical & Developmental Immunology	wrong design: retrospective observational study, case series, case study, narrative analysis,

<b>RQK. Excluded studies - original search</b>	
2012;2012():842045.	pharmacokinetic or pharmacodynamic studies, commentaries etc
Altice,F.L., Kamarulzaman,A., Soriano,V.V., Schechter,M.. Treatment of medical, psychiatric, and substance-use comorbidities in people infected with HIV who use drugs. Lancet 2010;376(9738):367-87.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Anon. A controlled clinical trial of daily and intermittent regimens of rifampicin plus ethambutol in the retreatment of patients with pulmonary tuberculosis in Hong Kong. A Hong Kong Tuberculosis Treatment Services/Brompton Hospital/British Medical Research Council investigation. Tubercle 1974;55(1):1-27.	wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest
Anon. Ethambutol plus isoniazid for the treatment of pulmonary tuberculosis: A controlled trial of four regimens. Tubercle.62 (1) (pp 13-29), 1981.Date of Publication: 1981. 1981;(1):13-29.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Anon. New TB therapy works for HIV-positive patients. AIDS Alert 1998;13(5):58-59.	wrong population: latent TB (or prophylaxis)
Anon. Prevention and treatment of tuberculosis among patients infected with human immunodeficiency virus: principles of therapy and revised recommendations. Centers for Disease Control and Prevention. Morbidity & Mortality Weekly Report 1998;Recommendations(RR-20):1-58.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Anon. 'Punctuated' HIV meds planned for TB patients. AIDS Reader 353;/11(7):348.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Anon. Solid organ transplantation in the HIV-infected patient. American Journal of Transplantation.4 (10 SUPPL.) (pp 83-88), 2004.Date of Publication: November 2004. 2004;(10 SUPPL.):83-88.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Anon. TB therapy approach may delay AIDS. AIDS Patient Care & Stds 2001;15(8):445-46.	not a fully published report of a trial (i.e. abstract)
Anon. Treating and preventing tuberculosis among the HIV-infected: CDC guidelines, part 2. Journal of Critical Illness.14 (6) (pp 342-345), 1999.Date of Publication: 1999. 1999;(6):342-45.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Anon. Treating and preventing tuberculosis in HIV-infected patients: Part 1. Journal of Respiratory Diseases.20 (8) (pp 542-544), 1999.Date of Publication: 1999. 1999;(8):542-44.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or

**RQK. Excluded studies - original search**

	pharmacodynamic studies, commentaries etc
Anon. Treating concurrent HIV and TB. Centers for Disease Control and Prevention. <i>AIDS Clinical Care</i> 104/;8(12):97-100.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Anon. Treatment. Individual approach needed for co-infections. <i>AIDS Policy &amp; Law</i> 2011;27(1):1.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Aquinas,M.. Rifampicin, ethambutol and capreomycin in pulmonary tuberculosis, previously treated with both first and second line drugs: the results of 2 years chemotherapy. <i>Tubercle</i> 1972;53(3):153-65.	wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest
Arjanova,O.V., Prihoda,N.D., Yurchenko,L.V., Sokolenko,N.I., Vihrova,L.A., Pylypchuk,V.S., Frolov,V.M.. Enhancement of efficacy of tuberculosis drugs with Immunoxel (Dzherelo) in HIV-infected patients with active pulmonary tuberculosis. <i>Immunotherapy</i> 2009;1(4):549-56.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Baba,H., Shinkai,A., Izuchi,R.. Controlled clinical trial of four 6-month regimens of chemotherapy for pulmonary tuberculosis. <i>Bulletin of the International Union against Tuberculosis</i> .59 (1-2) (pp 26-30), 1984.Date of Publication: 1984. 1984;(1-2):26-30.	wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest
Babalik,A., Arda,H., Bakirci,N., Agca,S., Oruc,K., Kiziltas,S., Cetintas,G.. Management of and risk factors related to hepatotoxicity during tuberculosis treatment OT - Tuberkuloz tedavisinde hepatotoksisite risk faktorleri ve yonetiimi. <i>Tuberkuloz ve Toraks</i> .60 (2) (pp 136-144), 2012.Date of Publication: 2012. 2012;(2):136-44.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Baker,M.A., Harries,A.D., Jeon,C.Y., Hart,J.E., Kapur,A., Lonroth,K., et al. The impact of diabetes on tuberculosis treatment outcomes: a systematic review. <i>BMC Medicine</i> 2011;9():81.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Banerjee,S.. Diabetes and tuberculosis interface. <i>Journal of the Indian Medical Association</i> .103 (6) (pp 318-322+332+335), 2005.Date of Publication: June 2005. 2005;(6):318-22+3332.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Banu Rekha,V.V., Balasubramanian,R., Swaminathan,S., Ramachandran,R., Rahman,F., Sundaram,V., et al. Sputum conversion at the end of intensive phase of Category-1 regimen in the treatment of pulmonary tuberculosis patients with diabetes mellitus or HIV infection: An analysis of risk factors. <i>Indian Journal of Medical Research</i> 2007;126(5):452-58.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest



**RQK. Excluded studies - original search**

<p>Belcon,M.C., Smith,E.K.M., Kahana,L.M.. Tuberculosis in dialysis patients. <i>Clinical Nephrology</i>.17 (1) (pp 14-18), 1982.Date of Publication: 1982. 1982;(1):14-18.</p>	<p>wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc</p>
<p>Benator,D.A., Weiner,M.H., Burman,W.J., Vernon,A.A., Zhao,Z.A., Khan,A.E., et al. Clinical evaluation of the nelfinavir-rifabutin interaction in patients with tuberculosis and human immunodeficiency virus infection. <i>Pharmacotherapy:The Journal of Human Pharmacology &amp; Drug Therapy</i> 2007;27(6):793-800.</p>	<p>not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest</p>
<p>Benson,C.A., Kaplan,J.E., Masur,H., Pau,A.. Treating opportunistic infections among HIV-infected adults and adolescents: Recommendations from CDC, the National Institutes of Health, and the HIV Medicine Association/Infectious Diseases Society of America. <i>Clinical Infectious Diseases</i>.40 (SUPPL.3) (pp S131-S235), 2005.Date of Publication: 15 Mar 2005. 2005;(SUPPL. 3):S131-2335.</p>	<p>wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc</p>
<p>Berkani,M. &amp; Chaulet,P.. Controlled clinical trial comparing a 6-month and a 12-month regimen in the treatment of pulmonary tuberculosis in the Algerian Sahara. <i>American Review of Respiratory Disease</i>.129 (6) (pp 921-928), 1984.Date of Publication: 1984. 1984;(6):921-28.</p>	<p>wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest</p>
<p>Bonora,S.. Interactions between antiretroviral agents and those used to treat tuberculosis. <i>Current Opinion in HIV and AIDS</i>.3 (3) (pp 306-312), 2008.Date of Publication: May 2008. 2008;(3):306-12.</p>	<p>wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc</p>
<p>British Thoracic Society Standards of Care Committee and Joint Tuberculosis Committee, Milburn,H., Ashman,N., Davies,P., Doffman,S., Drobniewski,F., et al. Guidelines for the prevention and management of Mycobacterium tuberculosis infection and disease in adult patients with chronic kidney disease. [Review]. <i>Thorax</i> 2010;65(6):557-70.</p>	<p>wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc</p>
<p>Burman,W.J., Goldberg,S., Johnson,J.L., Muzanye,G., Engle,M., Mosher,A.W., et al. Moxifloxacin versus ethambutol in the first 2 months of treatment for pulmonary tuberculosis. <i>American Journal of Respiratory &amp; Critical Care Medicine</i> 2006;174(3):331-38.</p>	<p>does not report data for patients with comorbidity or coexisting condition of interest separately from those without</p>
<p>Burman,W.J.. Treatment of HIV-related tuberculosis in the era of effective antiretroviral therapy. <i>American Journal of Respiratory &amp; Critical Care Medicine</i> 2001;164(1):7-12.</p>	<p>wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc</p>
<p>Butov,D.A., Efremenko,Y.V., Prihoda,N.D., Yurchenko,L.I., Sokolenko,N.I., Arjanova,O.V., et al. Adjunct immune therapy of first-diagnosed TB, relapsed TB, treatment-failed TB, multidrug-resistant TB and TB/HIV. <i>Immunotherapy</i> 2012;4(7):687-95.</p>	<p>not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest</p>
<p>Casper,G.R.. Management guidelines for M. tuberculosis in</p>	<p>wrong design: retrospective</p>

**RQK. Excluded studies - original search**

pregnancy. Australian & New Zealand Journal of Obstetrics & Gynaecology 1995;35(4):401-05.	observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Chan,R.Y.. Ocular toxicity of ethambutol. Hong Kong Medical Journal 2006;12(1):56-60.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Chang,K.C., Leung,C.C., Grosset,J.. Treatment of tuberculosis and optimal dosing schedules. [Review]. Thorax 2011;66(11):997-1007.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Cho,Y.-J., Lee,S.M., Yoo,C.-G., Kim,Y.W., Han,S.K., Shim,Y.-S.. Clinical characteristics of tuberculosis in patients with liver cirrhosis. Respirology.12 (3) (pp 401-405), 2007.Date of Publication: May 2007. 2007;(3):401-05.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Cohen,K.. Management of individuals requiring antiretroviral therapy and TB treatment. Current Opinion in HIV & AIDS 2010;5(1):61-69.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Combs,D.L. & O'Brien,R.J.. USPHS tuberculosis short-course chemotherapy trial 21: Effectiveness, toxicity, and acceptability. The report of final results. Annals of Internal Medicine.112 (6) (pp 397-406), 1990.Date of Publication: 1990. 1990;(6):397-406.	wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest
Comstock,G.W.. The competing risks of tuberculosis and hepatitis for adult tuberculin reactors. American Review of Respiratory Disease 1975;111(5):573-77.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Connor,E.M., Pizzo,P.A., Balis,F., Hughes,W., Katz,S., McSherry,G., et al. Antiretroviral therapy and medical management of the human immunodeficiency virus-infected child. Pediatric AIDS and HIV Infection.5 (1) (pp 20-32), 1994.Date of Publication: 1994. 1994;(1):20-32.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Connor,E.M., Pizzo,P.A., Balis,F., Hughes,W., Katz,S., McSherry,G., et al. Antiretroviral therapy and medical management of the human immunodeficiency virus-infected child. Pediatric Infectious Disease Journal.12 (6) (pp 513-522), 1993.Date of Publication: 1993. 1993;(6):513-22.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Creswell,J., Raviglione,M., Ottmani,S., Migliori,G.B., Uplekar,M.,	wrong design: retrospective

**RQK. Excluded studies - original search**

Blanc,L., Sotgiu,G.. Series: 'Update on tuberculosis' - Tuberculosis and noncommunicable diseases: Neglected links and missed opportunities. <i>European Respiratory Journal</i> .37 (5) (pp 1269-1282), 2011.Date of Publication: 01 May 2011. 2011;(5):1269-82.	observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Cross,F.S., Long,M.W., Banner,A.S.. Rifampin-isoniazid therapy of alcoholic and nonalcoholic tuberculous patients in a U.S. Public Health Service Cooperative Therapy Trial. <i>American Review of Respiratory Disease</i> 1980;122(2):349-53.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Crowley,S. & Kekitiinwa,A.. Clinical management of HIV infection in children. <i>Current Opinion in HIV and AIDS</i> .2 (5) (pp 410-415), 2007.Date of Publication: September 2007. 2007;(5):410-15.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Curran,A., Falco,V., Pahissa,A.. Management of tuberculosis in HIV-infected patients. [Review]. <i>AIDS Reviews</i> 2012;14(4):231-46.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Czeizel,A.E., Rockenbauer,M., Olsen,J.. A population-based case-control study of the safety of oral anti-tuberculosis drug treatment during pregnancy. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2001;5(6):564-68.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
da Silva,T.P., Giacoia-Gripp,C.B.W., Schmaltz,C.A., Sant' Anna,F.M., Rolla,V.. T Cell Activation and Cytokine Profile of Tuberculosis and HIV-Positive Individuals during Antituberculous Treatment and Efavirenz-Based Regimens. <i>PLoS ONE</i> .8 (6) , 2013.Article Number: e66095.Date of Publication: 19 Jun 2013. 2013;(6):n. pag..	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Davies,G. & Cerri,S.. Rifabutin for treating pulmonary tuberculosis. <i>Cochrane Database of Systematic Reviews</i> 2007;(4):CD005159.	wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest
Davies,Geraint R. & Cerri,Stefania. Rifabutin for treating pulmonary tuberculosis. 2007;(4):n. pag..	duplicate
Deiss,R.G. & Rodwell,T.C.. Tuberculosis and illicit drug use: review and update. <i>Clinical Infectious Diseases</i> 2009;48(1):72-82.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Dhiman,R.K., Saraswat,V.A., Rajekar,H., Reddy,C.. A Guide to the Management of Tuberculosis in Patients with Chronic Liver Disease. <i>Journal of Clinical and Experimental Hepatology</i> .2 (3) (pp 260-270), 2012.Date of Publication: September 2012. 2012;(3):260-70.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies,

RQK. Excluded studies - original search	
	commentaries etc
Dorman,S.E., Johnson,J.L., Goldberg,S., Muzanye,G., Padayatchi,N., Bozeman,L., et al. Substitution of moxifloxacin for isoniazid during intensive phase treatment of pulmonary tuberculosis. American Journal of Respiratory & Critical Care Medicine 2009;180(3):273-80.	wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest
Dupon,M.. Tuberculosis in patients infected with human immunodeficiency virus. 1. A retrospective multicentre study of 123 cases in France. Quarterly Journal of Medicine.84 (306) (pp 719-730), 1992.Date of Publication: 1992. 1992;(306):719-30.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Dutt,A.K.. Short-course chemotherapy. The Arkansas experience. Chest 1981;80(6):724-27.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Egelund,E.F. & Barth,A.B.. Population pharmacokinetics and its role in anti-tuberculosis drug development and optimization of treatment. [Review]. Current Pharmaceutical Design 2011;17(27):2889-99.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
EL-KHOURY,S.A.. Ethionamide and hepatotoxicity: A clinical study. Medical Annals of the District of Columbia 1964;33():15-17.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
El-Sadr,W.M., Perlman,D.C., Matts,J.P., Nelson,E.T., Cohn,D.L., Salomon,N., et al. Evaluation of an intensive intermittent-induction regimen and duration of short-course treatment for human immunodeficiency virus-related pulmonary tuberculosis. Terry Bein Community Programs for Clinical Research on AIDS (CPCRA) and the AIDS Clinical Trials Group (ACTG). Clinical Infectious Diseases 1998;26(5):1148-58.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Erkoc,R., Dogan,E., Sayarlioglu,H., Etlik,O., Topal,C., Calka,F.. Tuberculosis in dialysis patients, single centre experience from an endemic area. International Journal of Clinical Practice.58 (12) (pp 1115-1117), 2004.Date of Publication: December 2004. 2004;(12):1115-17.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Fitzgerald,D.W., Desvarieux,M., Severe,P., Joseph,P., Johnson,W.D.,Jr.. Effect of post-treatment isoniazid on prevention of recurrent tuberculosis in HIV-1-infected individuals: a randomised trial. Lancet 2000;356(9240):1470-74.	wrong population: latent TB (or prophylaxis)
Fox,W.. Clinical trial of three 6-month regimens of chemotherapy given intermittently in the continuation phase in the treatment of pulmonary tuberculosis. American Review of Respiratory Disease.132 (2) (pp 374-378), 1985.Date of Publication: 1985. 1985;(2):374-78.	wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest
Franks,A.L., Binkin,N.J., Snider,D.E.,Jr., Rokaw,W.M.. Isoniazid	wrong population: latent TB (or

RQK. Excluded studies - original search	
hepatitis among pregnant and postpartum Hispanic patients. Public Health Reports 1989;104(2):151-55.	prophylaxis)
Gandhi,N.R., Moll,A.P., Lalloo,U., Pawinski,R., Zeller,K., Moodley,P., et al. Successful integration of tuberculosis and HIV treatment in rural South Africa: the Sizonq'oba study. Journal of Acquired Immune Deficiency Syndromes: JAIDS 2009;50(1):37-43.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Gao,X.F., Li,J., Yang,Z.W.. Rifapentine vs. rifampicin for the treatment of pulmonary tuberculosis: a systematic review. International Journal of Tuberculosis & Lung Disease 2009;13(7):810-19.	duplicate
Gao,X.-F., Li,J., Yang,Z.-W.. Rifapentine vs. rifampicin for the treatment of pulmonary tuberculosis: A systematic review. International Journal of Tuberculosis and Lung Disease.13 (7) (pp 810-819), 2009.Date of Publication: July 2009. 2009;(7):810-19.	wrong intervention: treatment regimen includes drugs not licensed in the UK
Garazzino,S.. Clinical experience with linezolid in infants and children. Journal of Antimicrobial Chemotherapy.66 (SUPPL.4) (pp iv23-iv41), 2011.Article Number: dkr074.Date of Publication: May 2011. 2011;(SUPPL. 4):iv23-41.	wrong population: not TB
Gengiah,T.N., Gray,A.L., Naidoo,K.. Initiating antiretrovirals during tuberculosis treatment: a drug safety review. [Review]. Expert Opinion on Drug Safety 2011;10(4):559-74.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Getahun,H., Gunneberg,C., Sculier,D., Verster,A.. Tuberculosis and HIV in people who inject drugs: evidence for action for tuberculosis, HIV, prison and harm reduction services. [Review]. Current Opinion in HIV & AIDS 2012;7(4):345-53.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Getahun,H., Sculier,D., Sismanidis,C., Grzemska,M.. Prevention, diagnosis, and treatment of tuberculosis in children and mothers: evidence for action for maternal, neonatal, and child health services. [Review]. Journal of Infectious Diseases 2012;205():Suppl-27.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Gomi,J. & Aoyagi,T.. The short course therapies by Ryoken's method. KEKKAKU (TUBERCULOSIS) 1985;60(8):435-45.	not in English
Grassi,C.. Use of rifabutin in the treatment of pulmonary tuberculosis. Clinical Infectious Diseases 1996;22():Suppl-4.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Gray,J.M.. Tuberculosis and HIV coinfection. [Review]. Seminars in Respiratory & Critical Care Medicine 2013;34(1):32-43.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc

**RQK. Excluded studies - original search**

<p>Grenfell,P., Baptista,Leite R., Garfein,R., de,Lussigny S., Platt,L. Tuberculosis, injecting drug use and integrated HIV-TB care: A review of the literature. <i>Drug and Alcohol Dependence</i>.129 (3) (pp 180-209), 2013.Date of Publication: 01 May 2013. 2013;(3):180-209.</p>	<p>not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest</p>
<p>Gupta,A., Nayak,U., Ram,M., Bhosale,R., Patil,S., Basavraj,A., et al. Postpartum tuberculosis incidence and mortality among HIV-infected women and their infants in Pune, India, 2002-2005. <i>Clinical Infectious Diseases</i> 2007;45(2):241-49.</p>	<p>not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest</p>
<p>Gupta,N., Sharma,J.B., Mittal,S., Singh,N., Misra,R.. Genital tuberculosis in Indian infertility patients. <i>International Journal of Gynecology and Obstetrics</i>.97 (2) (pp 135-138), 2007.Date of Publication: May 2007. 2007;(2):135-38.</p>	<p>not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest</p>
<p>Hakim,J.G., Ternouth,I., Mushangi,E., Siziya,S., Robertson,V.. Double blind randomised placebo controlled trial of adjunctive prednisolone in the treatment of effusive tuberculous pericarditis in HIV seropositive patients. <i>Heart</i> 2000;84(2):183-88.</p>	<p>not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest</p>
<p>Hamade,I.H.. Complications of presumed ocular tuberculosis. <i>Acta Ophthalmologica</i>.88 (8) (pp 905-909), 2010.Date of Publication: December 2010. 2010;(8):905-09.</p>	<p>wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc</p>
<p>Harries,A.D., Lin,Y., Satyanarayana,S., Lonroth,K., Li,L., Wilson,N., et al. The looming epidemic of diabetes-associated tuberculosis: Learning lessons from HIV-associated tuberculosis. <i>International Journal of Tuberculosis and Lung Disease</i>.15 (11) (pp 1436-1444), 2011.Date of Publication: November 2011. 2011;(11):1436-44.</p>	<p>wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc</p>
<p>Harries,A.D., Murray,M.B., Jeon,C.Y., Ottmani,S.-E., Lonroth,K., Barreto,M.L., et al. Defining the research agenda to reduce the joint burden of disease from diabetes mellitus and tuberculosis: Viewpoint. <i>Tropical Medicine and International Health</i>.15 (6) (pp 659-663), 2010.Date of Publication: June 2010. 2010;(6):659-63.</p>	<p>not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest</p>
<p>Heemskerk,D., Day,J., Chau,T.T., Dung,N.H., Yen,N.T., Bang,N.D., et al. Intensified treatment with high dose rifampicin and levofloxacin compared to standard treatment for adult patients with tuberculous meningitis (TBM-IT): protocol for a randomized controlled trial. <i>Trials</i> [Electronic Resource] 2011;12():25.</p>	<p>wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest</p>
<p>Hellstrom,P.E.. Capreomycin, ethambutol and rifampicin in apparently incurable pulmonary tuberculosis. <i>Scandinavian Journal of Respiratory Diseases - Supplementum</i> 1969;69():69-74.</p>	<p>not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest</p>



**RQK. Excluded studies - original search**

<p>Hoffmann,C.J., Charalambous,S., Thio,C.L., Martin,D.J., Pemba,L., Fielding,K.L., et al. Hepatotoxicity in an African antiretroviral therapy cohort: The effect of tuberculosis and hepatitis B. <i>AIDS</i>.21 (10) (pp 1301-1308), 2007.Date of Publication: June 2007. 2007;(10):1301-08.</p>	<p>wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc</p>
<p>Hong,Y.P., Kim,S.C., Chang,S.C., Kim,S.J., Jin,B.W.. Comparison of a daily and three intermittent retreatment regimens for pulmonary tuberculosis administered under programme conditions. <i>Tubercle</i>.69 (4) (pp 241-253), 1988.Date of Publication: 1988. 1988;(4):241-53.</p>	<p>wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest</p>
<p>Howell,F., O'Laoide,R., Kelly,P., Power,J.. Short course chemotherapy for pulmonary tuberculosis. A randomised controlled trial of a six month versus a nine month oral regimen. <i>Irish Medical Journal</i>.82 (1) (pp 11-13), 1989.Date of Publication: 1989. 1989;(1):11-13.</p>	<p>wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest</p>
<p>Humber,D.P., Nsanzumuhire,H., Aluoch,J.A., Webster,A.D., Aber,V.R., Mitchison,D.A., Girling,D.J.. Controlled double-blind study of the effect of rifampin on humoral and cellular immune responses in patients with pulmonary tuberculosis and in tuberculosis contacts. <i>American Review of Respiratory Disease</i> 1980;122(3):425-36.</p>	<p>not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest</p>
<p>Hussein,M.M. &amp; Mooij,J.M.. Tuberculosis and chronic renal disease. <i>Seminars in Dialysis</i> 2003;16(1):38-44.</p>	<p>wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc</p>
<p>Hwang,S.J., Wu,J.C., Lee,C.N., Yen,F.S., Lu,C.L., Lin,T.P.. A prospective clinical study of isoniazid-rifampicin-pyrazinamide-induced liver injury in an area endemic for hepatitis B. <i>Journal of Gastroenterology &amp; Hepatology</i> 1997;12(1):87-91.</p>	<p>not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest</p>
<p>Hyung,Kon Lee &amp; Bluestone,H.. Screening and treatment of tuberculosis in a methadone maintenance treatment program. <i>Hospital and Community Psychiatry</i>.45 (8) (pp 759-760+764), 1994.Date of Publication: 1994. 1994;(8):759-60+7664.</p>	<p>wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc</p>
<p>Ige,O.M., Sogaolu,O.M., Odaibo,G.N.. Evaluation of modified short course chemotherapy in active pulmonary tuberculosis patients with human immunodeficiency virus infection in University College Hospital, Ibadan, Nigeria--a preliminary report. <i>African Journal of Medicine &amp; Medical Sciences</i> 2004;33(3):259-62.</p>	<p>not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest</p>
<p>Jabbar,A. &amp; Hussain,S.F.. Clinical characteristics of pulmonary tuberculosis in adult Pakistani patients with co-existing diabetes mellitus. <i>Eastern Mediterranean Health Journal</i>.12 (5) (pp 522-527), 2006.Date of Publication: September 2006. 2006;(5):522-27.</p>	<p>wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc</p>
<p>Jammula,S., Kota,S.K., Tripathy,P.R., Panda,S.. Effect of vitamin D supplementation in type 2 diabetes patients with pulmonary</p>	<p>not relevant - does not compare different combinations of</p>

**RQK. Excluded studies - original search**

tuberculosis. Diabetes and Metabolic Syndrome: Clinical Research and Reviews.5 (2) (pp 85-89), 2011.Date of Publication: April-June 2011. 2011;(2):85-89.	antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Jana,N., Barik,S., Arora,N.. Tuberculosis in pregnancy: the challenges for South Asian countries. [Review]. Journal of Obstetrics & Gynaecology Research 2012;38(9):1125-36.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Jana,N., Ghosh,K., Sinha,S., Gopalan,S.. The perinatal aspects of pulmonary tuberculosis. Fetal and Maternal Medicine Review.8 (4) (pp 229-238), 1996.Date of Publication: November 1996. 1996;(4):229-38.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Jeon,C.Y. & Murray,M.B.. Managing tuberculosis in patients with diabetes mellitus: Why we care and what we know. Expert Review of Anti-Infective Therapy.10 (8) (pp 863-868), 2012.Date of Publication: August 2012. 2012;(8):863-68.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Jindani,A. & Nunn,A.J.. Two 8-month regimens of chemotherapy for treatment of newly diagnosed pulmonary tuberculosis: international multicentre randomised trial. Lancet 2004;364(9441):1244-51.	does not report data for patients with comorbidity or coexisting condition of interest separately from those without
John,G.T.. Mycobacterial infections in organ transplant recipients. Seminars in Respiratory Infections 2002;17(4):274-83.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Jou,J.-R., Woung,L.-C., Shih,Y.-F.. Clinical study on ethambutol-induced optic nerve toxicity. Tzu Chi Medical Journal.9 (2) (pp 107-113), 1997.Date of Publication: 1997. 1997;(2):107-13.	not in English
Kapadia,J.D., Desai,C.K., Solanki,M.N., Shah,A.N.. Efficacy and safety of anti-tuberculosis drugs in HIV-positive patients: A prospective study. Indian Journal of Pharmacology.45 (5) (pp 447-452), 2013.Date of Publication: September-October 2013. 2013;(5):447-52.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Kapur,A.. The double burden of diabetes and tuberculosis - Public health implications. Diabetes Research and Clinical Practice.101 (1) (pp 10-19), 2013.Date of Publication: July 2013. 2013;(1):10-19.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Karrer,W. & Rothlisberger,K.. Short-term therapy of tuberculosis: What is the best drug combination? SCHWEIZ-MED-WOCHENSCHR 1985;115(39):1353-59.	not in English
Khan,F.A., Minion,J., Pai,M., Royce,S., Burman,W., Harries,A.D.. Treatment of active tuberculosis in HIV-coinfected patients: a	wrong design: retrospective observational study, case series,

**RQK. Excluded studies - original search**

systematic review and meta-analysis. <i>Clinical Infectious Diseases</i> 2010;50(9):1288-99.	case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Kimmoun,E.. Antituberculous drugs in patients with chronic liver disease. <i>Journal of Gastroenterology &amp; Hepatology</i> 2002;17():Suppl-12.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Kumar,A., Kumar,A.M., Gupta,D., Kanchar,A., Mohammed,S., Srinath,S., et al. Global guidelines for treatment of tuberculosis among persons living with HIV: unresolved issues. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2012;16(5):573-78.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Kwara,A. & Ramachandran,G.. Dose adjustment of the non-nucleoside reverse transcriptase inhibitors during concurrent rifampicin-containing tuberculosis therapy: one size does not fit all. <i>Expert Opinion On Drug Metabolism &amp; Toxicology</i> 2010;6(1):55-68.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Kwara,A., Tashima,K.T., Dumond,J.B., Poethke,P., Kurpewski,J., Kashuba,A.D., Court MH. Modest but variable effect of rifampin on steady-state plasma pharmacokinetics of efavirenz in healthy African-American and Caucasian volunteers. <i>Antimicrobial agents and chemotherapy</i> 2011;55(7):3527-33.	wrong population: not TB
Laibl,V.R.. Tuberculosis in pregnancy. <i>Clinics in Perinatology</i> 2005;32(3):739-47.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Lam,M.F. & Tang,S.C.. Tuberculous peritonitis in patients on continuous ambulatory peritoneal dialysis. <i>International Journal of Artificial Organs</i> 2000;23(3):154-56.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Landers,D.V. & Green,J.R.. Antibiotic use during pregnancy and the postpartum period. <i>Clinical Obstetrics and Gynecology</i> .26 (2) (pp 391-406), 1983.Date of Publication: 1983. 1983;(2):391-406.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Launay-Vacher,V. & Izzedine,H.. Pharmacokinetic considerations in the treatment of tuberculosis in patients with renal failure. <i>Clinical Pharmacokinetics</i> 2005;44(3):221-35.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Lawn,S.D., Ayles,H., Egwaga,S., Williams,B., Mukadi,Y.D., Santos	wrong design: retrospective

<b>RQK. Excluded studies - original search</b>	
Filho,E.D., et al. Potential utility of empirical tuberculosis treatment for HIV-infected patients with advanced immunodeficiency in high TB-HIV burden settings. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2011;15(3):287-95.	observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Lawn,S.D.. Poor prognosis of HIV-associated tuberculous meningitis regardless of the timing of antiretroviral therapy. <i>Clinical Infectious Diseases</i> .52 (11) (pp 1384-1387), 2011.Date of Publication: 01 Jun 2011. 2011;(11):1384-87.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Lawson,L., Thacher,T.D., Yassin,M.A., Onuoha,N.A., Usman,A., Emenyonu,N.E., et al. Randomized controlled trial of zinc and vitamin A as co-adjuvants for the treatment of pulmonary tuberculosis. <i>Tropical Medicine &amp; International Health</i> 2010;15(12):1481-90.	wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest
Lee,B.H., Koh,W.J., Choi,M.S., Suh,G.Y., Chung,M.P., Kim,H.. Inactive hepatitis B surface antigen carrier state and hepatotoxicity during antituberculosis chemotherapy. <i>Chest</i> 2005;127(4):1304-11.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Lima,Mde F.. Hepatotoxicity induced by antituberculosis drugs among patients coinfectd with HIV and tuberculosis. <i>Cadernos de Saude Publica</i> 2012;28(4):698-708.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Loeliger,A., Suthar,A.B., Ripin,D., Glaziou,P., O'Brien,M., Renaud-Thery,F., et al. Protease inhibitor-containing antiretroviral treatment and tuberculosis: can rifabutin fill the breach?. [Review]. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2012;16(1):6-15.	wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest
Lopez-Cortes,L.F., Marin-Niebla,A., Lopez-Cortes,L.E., Villanego,I., Rodriguez-Diez,M.. Influence of treatment and immunological recovery on tuberculosis relapses in HIV-infected patients. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2005;9(12):1385-90.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Lopez-Cortes,L.F., Ruiz-Valderas,R., Viciano,P., Alarcon-Gonzalez,A., Gomez-Mateos,J., Leon-Jimenez,E., et al. Pharmacokinetic interactions between efavirenz and rifampicin in HIV-infected patients with tuberculosis. <i>Clinical Pharmacokinetics</i> 2002;41(9):681-90.	no outcomes of interest
Loto,O.M.. Tuberculosis in pregnancy: a review. [Review]. <i>Journal of Pregnancy</i> 2012;2012():379271.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
lu,K., Atağ,G., Sevim,T., Tırn, T., lu,O., Horzum,G., et al. The management of anti-tuberculosis drug-induced hepatotoxicity. The	not relevant - does not compare different combinations of

**RQK. Excluded studies - original search**

international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease 2001;5(1):65-69.	antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Maartens,G. & Decloedt,E.. Effectiveness and safety of antiretrovirals with rifampicin: crucial issues for high-burden countries. Antiviral Therapy 2009;14(8):1039-43.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Mahan,C.S., Walusimbi,M., Johnson,D.F., Lancioni,C., Charlebois,E., Baseke,J., et al. Tuberculosis treatment in HIV infected Ugandans with CD4 counts>350 cells/mm reduces immune activation with no effect on HIV load or CD4 count. PLoS ONE [Electronic Resource] 2010;5(2):e9138.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Maher,D.. Tuberculous pericardial effusion: a prospective clinical study in a low-resource setting--Blantyre, Malawi. International Journal of Tuberculosis & Lung Disease 1997;1(4):358-64.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Mankhatitham,W. & Lueangniyomkul,A.. Hepatotoxicity in patients co-infected with tuberculosis and HIV-1 while receiving non-nucleoside reverse transcriptase inhibitor-based antiretroviral therapy and rifampicin-containing anti-tuberculosis regimen. Southeast Asian Journal of Tropical Medicine & Public Health 2011;42(3):651-58.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Manosuthi,W., Tantanathip,P., Prasithisirikul,W., Likanonsakul,S.. Durability of stavudine, lamivudine and nevirapine among advanced HIV-1 infected patients with/without prior co-administration of rifampicin: a 144-week prospective study. BMC Infectious Diseases 2008;8():136.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Manousaridis,K., Ong,E., Stenton,C., Gupta,R., Browning,A.C.. Clinical presentation, treatment, and outcomes in presumed intraocular tuberculosis: Experience from Newcastle upon Tyne, UK. Eye (Basingstoke).27 (4) (pp 480-486), 2013.Date of Publication: April 2013. 2013;(Basingstoke):480-86.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Marais,B.J., Gupta,A., Starke,J.R.. Tuberculosis in women and children. Lancet 2010;375(9731):2057-59.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Martin,D.E.. Rifabutin: A new rifamycin for the prevention of atypical mycobacterial infection. Journal of Pharmacy Technology.10 (5) (pp 197-203), 1994.Date of Publication: 1994. 1994;(5):197-203.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc

RQK. Excluded studies - original search	
Martinson,N.A., Barnes,G.L., Moulton,L.H., Msandiwa,R., Hausler,H., Ram,M., et al. New regimens to prevent tuberculosis in adults with HIV infection. <i>New England Journal of Medicine</i> 2011;365(1):11-20.	wrong population: latent TB (or prophylaxis)
Matteelli,A., Regazzi,M., Villani,P., De,Iaco G., Cusato,M., Carvalho,A.C.C., et al. Multiple-dose pharmacokinetics of Efavirenz with and without the use of Rifampicin in HIV-positive patients. <i>Current HIV Research</i> .5 (3) (pp 349-353), 2007.Date of Publication: May 2007. 2007;(3):349-53.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Milburn,H., Ashman,N., Davies,P., Doffman,S., Drobniewski,F., Khoo,S., et al. Guidelines for the prevention and management of Mycobacterium tuberculosis infection and disease in adult patients with chronic kidney disease. <i>Thorax</i> .65 (6) (pp 559-570), 2010.Date of Publication: June 2010. 2010;(6):559-70.	duplicate
Moadebi,S., Harder,C.K., Fitzgerald,M.J., Elwood,K.R.. Fluoroquinolones for the treatment of pulmonary tuberculosis. <i>Drugs</i> .67 (14) (pp 2077-2099), 2007.Date of Publication: 2007. 2007;(14):2077-99.	wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest
Murphy,R.A., Marconi,V.C., Gandhi,R.T., Kuritzkes,D.R.. Coadministration of Lopinavir/Ritonavir and Rifampicin in HIV and Tuberculosis Co-Infected Adults in South Africa. <i>PLoS ONE</i> .7 (9) , 2012.Article Number: e44793.Date of Publication: 28 Sep 2012. 2012;(9):n. pag..	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Nakiyingi,L., Bwanika,J.M., Kirenga,B., Nakanjako,D., Katabira,C., Lubega,G., et al. Clinical Predictors and Accuracy of Empiric Tuberculosis Treatment among Sputum Smear-Negative HIV-Infected Adult TB Suspects in Uganda. <i>PLoS ONE</i> .8 (9) , 2013.Article Number: e74023.Date of Publication: 06 Sep 2013. 2013;(9):n. pag..	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Nhan-Chang,C.L.. Tuberculosis in pregnancy. <i>Clinical Obstetrics &amp; Gynecology</i> 2010;53(2):311-21.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Nikolaeva,L.G., Maystat,T.V., Masyuk,L.A., Pylypchuk,V.S., Volyanskii,Y.L.. Changes in CD4+ T-cells and HIV RNA resulting from combination of anti-TB therapy with Dzhherelo in TB/HIV dually infected patients. <i>Drug Design, Development and Therapy</i> 2008;(2):87-93.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Nikolaeva,L.G., Maystat,T.V., Pylypchuk,V.S., Volyanskii,Y.L., Frolov,V.M.. Cytokine profiles of HIV patients with pulmonary tuberculosis resulting from adjunct immunotherapy with herbal phytoconcentrates Dzhherelo and Anemin. <i>Cytokine</i> 2008;44(3):392-96.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Nikolaeva,L.G., Maystat,T.V., Pylypchuk,V.S., Volyanskii,Y.L., Masyuk,L.A.. Effect of oral immunomodulator Dzhherelo in TB/HIV co-infected patients receiving anti-tuberculosis therapy under DOTS. <i>International Immunopharmacology</i> 2008;8(6):845-51.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a



**RQK. Excluded studies - original search**

	comorbidity or coexisting condition of interest
Ntziora,F.. Linezolid for the treatment of patients with [corrected] mycobacterial infections [corrected] a systematic review. International Journal of Tuberculosis & Lung Disease 2007;11(6):606-11.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Palme,I.B., Gudetta,B., Bruchfeld,J., Muhe,L.. Impact of human immunodeficiency virus 1 infection on clinical presentation, treatment outcome and survival in a cohort of Ethiopian children with tuberculosis. Pediatric Infectious Disease Journal 2002;21(11):1053-61.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Payne,B.. HIV: treating tuberculosis. Clinical Evidence 2009;2009,( ):2009.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Payne,B.. Tuberculosis in people with HIV. Clinical Evidence 2007;2007,( ):2007.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Peck,R.N., Luhanga,A., Kalluvya,S., Todd,J., Lugoba,S., Fitzgerald,D.W.. Predictors of tuberculosis in first 6 months after initiation of antiretroviral therapy: a case-control study. International Journal of Tuberculosis & Lung Disease 2012;16(8):1047-51.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Peloquin,C.A., Nitta,A.T., Burman,W.J., Brudney,K.F., Miranda-Massari,J.R., McGuinness,M.E., Berning,S.E.. Low antituberculosis drug concentrations in patients with AIDS. Annals of Pharmacotherapy 1996;30(9):919-25.	no outcomes of interest
Perlman,D.C., Segal,Y., Rosenkranz,S., Rainey,P.M., Rimmel,R.P., Salomon,N., et al. The clinical pharmacokinetics of rifampin and ethambutol in HIV-infected persons with tuberculosis. Clinical Infectious Diseases 2005;41(11):1638-47.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Perret,G., Valeyre,D., Bladier,D.. Changes in serum gamma-glutamyl transpeptidase activity induced by rifampicin during treatment of human tuberculosis. IRCS Medical Science.11 (6) (pp 548-549), 1983.Date of Publication: 1983. 1983;(6):548-49.	Unable to locate full article
Perriens,J.H., St Louis,M.E., Mukadi,Y.B., Brown,C., Prignot,J., Pouthier,F., et al. Pulmonary tuberculosis in HIV-infected patients in Zaire. A controlled trial of treatment for either 6 or 12 months. New England Journal of Medicine 1995;332(12):779-84.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest

**RQK. Excluded studies - original search**

<p>Phair,J.P., Gross,P.A., Kaplan,J.E., Masur,H., Holmes,K.K., Wilfert,C.M., Martone,W.J.. Quality standard for the identification and treatment of persons coinfectd with human immunodeficiency virus and Mycobacterium tuberculosis. <i>Clinical Infectious Diseases</i> 1995;21():Suppl-1.</p>	<p>wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc</p>
<p>Pozniak,A.L., Miller,R.F., Lipman,M.C.I., Freedman,A.R., Ormerod,L.P., Johnson,M.A., Collins,S. BHIVA treatment guidelines for tuberculosis (TB)/HIV infection 2005. <i>HIV Medicine</i>.6 (SUPPL.2) (pp 62-83), 2005.Date of Publication: July 2005. 2005;(SUPPL. 2):62-83.</p>	<p>wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc</p>
<p>Rolla,V.C., da Silva Vieira,M.A., Pereira,Pinto D., Lourenco,M.C., de Jesus,Cda S., Goncalves,Morgado M., Ferreira,Filho M.. Safety, efficacy and pharmacokinetics of ritonavir 400mg/saquinavir 400mg twice daily plus rifampicin combined therapy in HIV patients with tuberculosis. <i>Clinical Drug Investigation</i> 2006;26(8):469-79.</p>	<p>not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest</p>
<p>Ruslami,R., Aarnoutse,R.E., Alisjahbana,B., van der Ven,A.J.. Implications of the global increase of diabetes for tuberculosis control and patient care. [Review]. <i>Tropical Medicine &amp; International Health</i> 2010;15(11):1289-99.</p>	<p>wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc</p>
<p>Ruslami,R., Ganiem,A.R., Dian,S., Apriani,L., Achmad,T.H., van der Ven,A.J., et al. Intensified regimen containing rifampicin and moxifloxacin for tuberculous meningitis: an open-label, randomised controlled phase 2 trial. <i>The Lancet Infectious Diseases</i> 2013;13(1):27-35.</p>	<p>wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest</p>
<p>Ruslami,R., Nijland,H.M., Alisjahbana,B., Parwati,I., van,Crevel R.. Pharmacokinetics and tolerability of a higher rifampin dose versus the standard dose in pulmonary tuberculosis patients. <i>Antimicrobial Agents &amp; Chemotherapy</i> 2007;51(7):2546-51.</p>	<p>not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest</p>
<p>Schlaegel,T.F.,Jr.. Double-blind therapeutic trial of isoniazid in 344 patients with uveitis. <i>British Journal of Ophthalmology</i> 1969;53(6):425-27.</p>	<p>not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest</p>
<p>Schoenbaum,E.E. &amp; Davenny,K.. The management of HIV disease in pregnancy. <i>Bailliere's Clinical Obstetrics and Gynaecology</i>.6 (1) (pp 101-124), 1992.Date of Publication: 1992. 1992;(1):101-24.</p>	<p>wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc</p>
<p>Schon,T., Elias,D., Moges,F., Melese,E., Tessema,T., Stendahl,O., Britton,S.. Arginine as an adjuvant to chemotherapy improves clinical outcome in active tuberculosis. <i>European Respiratory Journal</i> 2003;21(3):483-88.</p>	<p>not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest</p>

**RQK. Excluded studies - original search**

<p>Schutz,C., Meintjes,G., Almajid,F., Wilkinson,R.J.. Clinical management of tuberculosis and HIV-1 co-infection. <i>European Respiratory Journal</i>.36 (6) (pp 1460-1481), 2010.Date of Publication: 01 Dec 2010. 2010;(6):1460-81.</p>	<p>wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc</p>
<p>Sen,T. &amp; Joshi,S.R.. Tuberculosis and diabetes mellitus: merging epidemics. <i>Journal of the Association of Physicians of India</i> 2009;57():399-404.</p>	<p>wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc</p>
<p>Sharma,S.K., Balamurugan,A., Saha,P.K., Pandey,R.M.. Evaluation of clinical and immunogenetic risk factors for the development of hepatotoxicity during antituberculosis treatment. <i>American Journal of Respiratory &amp; Critical Care Medicine</i> 2002;166(7):916-19.</p>	<p>not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest</p>
<p>Singh,V.. Childhood tuberculosis: Update of guidelines. <i>Clinical Pulmonary Medicine</i>.20 (1) (pp 11-20), 2013.Date of Publication: January 2013. 2013;(1):11-20.</p>	<p>wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc</p>
<p>Snider,Jr. Isoniazid-associated hepatitis deaths: A review of available information. <i>American Review of Respiratory Disease</i>.145 (2 II SUPPL.) (pp 494-497), 1992.Date of Publication: 1992. 1992;(2 II SUPPL.):494-97.</p>	<p>not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest</p>
<p>Sonika,U.. Tuberculosis and liver disease: management issues. [Review]. <i>Tropical Gastroenterology</i> 2012;33(2):102-06.</p>	<p>wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc</p>
<p>Steele,M.A. &amp; Burk,R.F.. Toxic hepatitis with isoniazid and rifampin. A meta-analysis. <i>Chest</i> 1991;99(2):465-71.</p>	<p>wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest</p>
<p>Sungkanuparph,S., Manosuthi,W., Kiertiburanakul,S.. Initiation of antiretroviral therapy in advanced AIDS with active tuberculosis: clinical experiences from Thailand. <i>Journal of Infection</i> 2006;52(3):188-94.</p>	<p>wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc</p>
<p>Swaminathan,S., Narendran,G., Venkatesan,P., Iliayas,S., Santhanakrishnan,R., Menon,P.A., et al. Efficacy of a 6-month versus 9-month intermittent treatment regimen in HIV-infected patients with tuberculosis: a randomized clinical trial. <i>American Journal of Respiratory &amp; Critical Care Medicine</i> 2010;181(7):743-51.</p>	<p>not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest</p>

RQK. Excluded studies - original search	
Tahaoglu,K., Atac,G., Sevim,T., Tarun,T., Yazicioglu,O., Horzum,G., et al. The management of anti-tuberculosis drug-induced hepatotoxicity. International Journal of Tuberculosis & Lung Disease 2001;5(1):65-69.	duplicate
Tala,E., Heinivaara,O., Kokkola,K.. Nine months' chemotherapy of isoniazid plus rifampicin in pulmonary tuberculosis compared with initial triple regimens. A controlled cooperative trial in Finland. Bulletin of the International Union against Tuberculosis.60 (3-4) (pp 113-114), 1985.Date of Publication: 1985. 1985;(3-4):113-14.	wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest
Tala,E.. Side effects and toxicity of ethionamide and prothionamide. Annals of Clinical Research 1969;1(1):32-35.	wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest
Temple,M.E.. Rifapentine: its role in the treatment of tuberculosis. Annals of Pharmacotherapy 1999;33(11):1203-10.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Terranova,M., Padovese,V., Fornari,U.. Clinical and epidemiological study of cutaneous tuberculosis in northern Ethiopia. Dermatology.217 (1) (pp 89-93), 2008.Date of Publication: June 2008. 2008;(1):89-93.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Tran,J.H.. The safety of antituberculosis medications during breastfeeding. Journal of Human Lactation 1998;14(4):337-40.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Tuon,F.F. & Tonacio,A.C.. Concomitant pleural and disseminated tuberculosis in Aids: Immune response or HIV infection compartmentalization? Acta Tropica.104 (2-3) (pp 79-83), 2007.Date of Publication: November/December 2007. 2007;(2-3):79-83.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Turkova,A. & Webb,R.H.. When to start, what to start and other treatment controversies in pediatric HIV infection. Paediatric Drugs 2012;14(6):361-76.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Varma,J.K., Nateniyom,S., Akksilp,S., Mankatittham,W., Sirinak,C., Sattayawuthipong,W., et al. HIV care and treatment factors associated with improved survival during TB treatment in Thailand: an observational study. BMC Infectious Diseases 2009;9():42.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Venkatesh,K.K., Swaminathan,S., Andrews,J.R.. Tuberculosis and HIV co-infection: screening and treatment strategies. [Review]. Drugs 2011;71(9):1133-52.	wrong design: retrospective observational study, case series, case study, narrative analysis,

**RQK. Excluded studies - original search**

	pharmacokinetic or pharmacodynamic studies, commentaries etc
Venkateswara,Babu R., Manju,R., Vinod,Kumar S.. Occurrence of Diabetes mellitus in pulmonary tuberculosis patients. World Journal of Medical Sciences.8 (4) (pp 345-348), 2013.Date of Publication: 2013. 2013;(4):345-48.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Vernon,A., Burman,W., Benator,D., Khan,A.. Acquired rifamycin monoresistance in patients with HIV-related tuberculosis treated with once-weekly rifapentine and isoniazid. Tuberculosis Trials Consortium. Lancet 1999;353(9167):1843-47.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Viswanathan,R., Rao,P.U., Singh,M.M., Dusaj,M., Sarkar,D.K.. Double blind clinical trial with rimactane in salvage cases of pulmonary tuberculosis. Indian Journal of Medical Research 1972;60(2):312-16.	wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest
Wagner,K.R.. Issues in the treatment of Mycobacterium tuberculosis in patients with human immunodeficiency virus infection. AIDS 2001;15():Suppl-12.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Ya,Diul Mukadi & Maher,D.. Tuberculosis case fatality rates in high HIV prevalence populations in sub-Saharan Africa. AIDS.15 (2) (pp 143-152), 2001.Date of Publication: 26 Jan 2001. 2001;(2):143-52.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Yang,X.Y., Chen,Q.F., Cui,X.H., Yu,Y.. Mycobacterium vaccae vaccine to prevent tuberculosis in high risk people: a meta-analysis. Journal of Infection 2010;60(5):320-30.	not relevant - does not compare different combinations of antituberculosis chemotherapy in patients with active TB and a comorbidity or coexisting condition of interest
Yew,W.W., Chau,C.H., Wong,P.C., Lee,J., Wong,C.F., Cheung,S.W., Chan,C.Y.. Ciprofloxacin in the management of pulmonary tuberculosis in the face of hepatic dysfunction. Drugs Under Experimental & Clinical Research 1995;21(2):79-83.	wrong population: some or all of the population does not have a comorbidity or coexisting condition of interest
Yoon,H.E., Jeon,Y.J., Chung,H.W., Shin,S.J., Hwang,H.S., Lee,S.J., et al. Safety and efficacy of a quinolone-based regimen for treatment of tuberculosis in renal transplant recipients. Transplantation Proceedings 2012;44(3):730-33.	wrong design: retrospective observational study, case series, case study, narrative analysis, pharmacokinetic or pharmacodynamic studies, commentaries etc
Ziganshina,L.E.. Fluoroquinolones for treating tuberculosis. Cochrane Database of Systematic Reviews 2008;(1):CD004795.	duplicate
Ziganshina,L.E.. Fluoroquinolones for treating tuberculosis. Cochrane Database of Systematic Reviews 2008;(1):n. pag..	duplicate
Ziganshina,Lilia E. & Titarenko,Albina F.. Fluoroquinolones for	wrong population: some or all of the

**RQK. Excluded studies - original search**

treating tuberculosis (presumed drug-sensitive). 2013;(6):n. pag..	population does not have a comorbidity or coexisting condition of interest
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**Excluded studies - Update**

Study	Reason for Exclusion
Azuma,Junichi, Ohno,Masako, Kubota,Ryuji, Yokota,Soichiro, Nagai,Takayuki, Tsuyuguchi,Kazunari, Okuda,Yasuhisa, Takashima,Tetsuya, Kamimura,Sayaka, Fujio,Yasushi, Kawase,Ichiro, Pharmacogenetics-based tuberculosis therapy research group, NAT2 genotype guided regimen reduces isoniazid-induced liver injury and early treatment failure in the 6-month four-drug standard treatment of tuberculosis: a randomized controlled trial for pharmacogenetics-based therapy, European journal of clinical pharmacologyEur J Clin Pharmacol, 69, 1091-1101, 2013	Not a proposed / relevant intervention
Gengiah,T.N., Botha,J.H., Soowamber,D., Naidoo,K., Abdool Karim,S.S., Low rifampicin concentrations in tuberculosis patients with HIV infection, Journal of Infection in Developing CountriesJ.Infect.Dev.Ctres., 8, 987-993, 2014	Not relevant information.
Gillespie,Stephen H., Crook,Angela M., McHugh,Timothy D., Mendel,Carl M., Meredith,Sarah K., Murray,Stephen R., Pappas,Frances, Phillips,Patrick P.J., Nunn,Andrew J., REMoxTB Consortium, Four-month moxifloxacin-based regimens for drug-sensitive tuberculosis, The New England journal of medicineN Engl J Med, 371, 1577-1587, 2014	No comorbidity subgroup
Ginawi,I.A., Ahmed,M.Q., Ahmad,I., Al-Hazimi,A.M., Effect of zinc and vitamin a supplementation along with inter-tubercular treatment in pulmonary tuberculosis in north indian patients, International Journal of Pharmaceutical Sciences and ResearchInt.J.Pharm.Sci.Res., 4, 3426-3431, 2013	No comorbidity - subgroup of comorbidity
Harries,A.D., Satyanarayana,S., Kumar,A.M.V., Nagaraja,S.B., Isaakidis,P., Malhotra,S., Achanta,S., Naik,B., Wilson,N., Zachariah,R., Lonnroth,K., Kapur,A., Epidemiology and interaction of diabetes mellitus and tuberculosis and challenges for care: A review, Public Health Action, 3, S3-S9, 2013	Narrative publication
Hassen Ali,Alima, Belachew,Tefera, Yami,Alemeshet, Ayen,Wubeante Yenet, Anti-tuberculosis drug induced hepatotoxicity among TB/HIV co-infected patients at Jimma University Hospital, Ethiopia: nested case-control study, PloS one, 8, e64622-, 2013	Design (nested case-control study)
Jawahar,Mohideen S., Banurekha,Vaithilingam V., Paramasivan,Chinnampedu N., Rahman,Fathima, Ramachandran,Rajeswari, Venkatesan,Perumal, Balasubramanian,Rani, Selvakumar,Nagamiah, Ponnuraja,Chinnaiyan, Iliayas,Allaudeen S., Gangadevi,Navaneethapandian P., Raman,Balambal, Baskaran,Dhanaraj, Kumar,Santhanakrishnan R., Kumar,Marimuthu M., Mohan,Victor, Ganapathy,Sudha, Kumar,Vanaja, Shanmugam,Geetha, Charles,Niruparani, Sakthivel,Murugesan R., Jagannath,Kannivelu, Chandrasekar,Chockalingam, Parthasarathy,Ramavaram T., Narayanan,Paranji R., Randomized	No information in comorbidities



Excluded studies - Update	
clinical trial of thrice-weekly 4-month moxifloxacin or gatifloxacin containing regimens in the treatment of new sputum positive pulmonary tuberculosis patients, PloS one, 8, e67030-, 2013	
Kang,Y.A., Tuberculosis treatment in patients with comorbidities, Tuberculosis and respiratory diseasesTuberc Respir Dis (Seoul), 76, 257-260, 2014	Design, not study or systematic review
Kapadia,J.D., Desai,C.K., Solanki,M.N., Shah,A.N., Dikshit,R.K., Efficacy and safety of anti-tuberculosis drugs in HIV-positive patients: A prospective study, Indian Journal of PharmacologyIndian J.Pharmacol., 45, 447-452, 2013	Design (observational)
Kumar,N., Kedarishetty,C.K., Kumar,S., Khillan,V., Sarin,S.K., Antitubercular therapy in patients with cirrhosis: Challenges and options, World Journal of GastroenterologyWorld J.Gastroenterol., 20, 5760-5772, 2014	Narrative publication
Mi,Fengling, Tan,Shouyong, Liang,Li, Harries,Anthony D., Hinderaker,Sven G., Lin,Yan, Yue,Wentao, Chen,Xi, Liang,Bing, Gong,Fang, Du,Jian, Diabetes mellitus and tuberculosis: pattern of tuberculosis, two-month smear conversion and treatment outcomes in Guangzhou, China, Tropical medicine & international health : TM & IHTrop Med Int Health, 18, 1379-1385, 2013	Design (Observational)
Pang,Y., Ruan,Y.-Z., Zhao,J., Chen,C., Xu,C.-H., Su,W., Huan,S.-T., Li,R.-Z., Zhao,Y.-L., Chin,D.P., Wang,L.-X., Diagnostic dilemma: Treatment outcomes of tuberculosis patients with inconsistent rifampicin susceptibility, International Journal of Tuberculosis and Lung DiseaseInt.J.Tuberc.Lung Dis., 18, 357-362, 2014	No relevant to the question
Ralph,A.P., Waramori,G., Pontororing,G.J., Kenangalem,E., Wiguna,A., Tjitra,E., Sandjaja, Lolong,D.B., Yeo,T.W., Chatfield,M.D., Soemanto,R.K., Bastian,I., Lumb,R., Maguire,G.P., Eisman,J., Price,R.N., Morris,P.S., Kelly,P.M., Anstey,N.M., L-arginine and Vitamin D Adjunctive Therapies in Pulmonary Tuberculosis: A Randomised, Double-Blind, Placebo-Controlled Trial, PloS one, 8, -, 2013	No comorbidities of interest
Regazzi,M., Carvalho,A.C., Villani,P., Matteelli,A., Treatment optimization in patients co-infected with HIV and Mycobacterium tuberculosis infections: Focus on drug-drug interactions with rifamycins, Clinical PharmacokineticsClin.Pharmacokinet., 53, 489-507, 2014	Narrative Review
Soeters,H.M., Poole,C., Patel,M.R., Van,Rie A., The Effect of Tuberculosis Treatment at Combination Antiretroviral Therapy Initiation on Subsequent Mortality: A Systematic Review and Meta-Analysis, PloS one, 8, -, 2013	No relevant. Cohort studies included

## RQ L,M,P

Excluded Studies – Original Search	
Reference	Reason for exclusion
A controlled clinical comparison of 6 and 8 months of antituberculosis chemotherapy in the treatment of patients with silicotuberculosis in Hong Kong. American Review of Respiratory Disease.143 (2) (pp 262-267), 1991.	Presence of comorbidities that will affect the choice and management of

Excluded Studies – Original Search	
(2): 262-7.	treatment
A controlled trial of six months chemotherapy in pulmonary tuberculosis. American Review of Respiratory Disease 1983; 127 (2):254-5.	not full report or document without sufficient detail of methodology or data
ATS, CDC, and IDSA Update Recommendations on the Treatment of Tuberculosis. American Family Physician.68 (9) (pp 1854-1862), 2003-62.	guideline without sufficient detail of methodology or data, or which does not perform quantitative analysis
BTA short-course chemotherapy studies. Chest. 1981; 80 (6):722-4.	Same population as included study; overlapping outcomes of shorter duration of follow-up
Chemotherapy and management of tuberculosis in the United Kingdom: Recommendations of the Joint Tuberculosis Committee of the British Thoracic Society. Thorax.45 (5) (pp 403-408), 1990.	guideline without sufficient detail of methodology or data, or which does not perform quantitative analysis
Controlled clinical trial of 4 short-course regimens of chemotherapy for two durations in the treatment of pulmonary tuberculosis. East African Medical Journal.56 (3) (pp 143), 1979.	not full report or document without sufficient detail of methodology or data
Controlled clinical trial of a 3-month and two 5-month regimens in pulmonary tuberculosis. Second Madras short-course study. Bulletin of the International Union against Tuberculosis.57 (1) (pp 21), 1982.	not full report or document without sufficient detail of methodology or data
Controlled trial of 6-month and 8-month regimens of chemotherapy in the treatment of pulmonary tuberculosis. A Hong Kong Chest Service/British Medical Research Council study. Bulletin of the International Union against Tuberculosis.53 (4) (pp 237), 1978.	not full report or document without sufficient detail of methodology or data
Current chemotherapy for tuberculosis in children. Infectious Disease Clinics of North America 1992; 6 (1):215-388.	wrong study design - narrative review or commentary with no quantitative analysis
Five-year assessment of controlled trials of short-course chemotherapy regimens of 6, 9 or 18 months' duration for spinal tuberculosis in patients ambulatory from the start or undergoing radical surgery. Fourteenth report of the Medical Research Council Working Party on Tuberculosis of the Spine . International Orthopaedics.23 (2) (pp 73-81), 1999.	wrong population - non-respiratory TB
Genitourinary tuberculosis: a 7-year review. British Journal of Urology 1979;51(4):239-444.	wrong population - non-respiratory TB
Medical therapy of bone and joint tuberculosis in 1998. Revue du Rhumatisme (English Edition) 1999; 66(3):152-7.	wrong population - non-respiratory TB
New recommendations for the treatment of tuberculosis. Current Opinion in Infectious Diseases.18 (2) (pp 133-140), 2005.-400.	wrong study design - narrative review or commentary with no quantitative analysis
Ocular tuberculosis: Anterior segment. International Ophthalmology Clinics.45 (2) (pp 57-69), 2005.	wrong population - non-respiratory TB
Pediatric tuberculosis: New guidelines and recommendations . Current Opinion in Pediatrics.24 (3) (pp 319-328), 2012.	guideline without sufficient detail of methodology or data, or which does not perform quantitative analysis
Pleural tuberculosis. European Respiratory Journal 1997; 10(4):942-7.	wrong study design - narrative review or

Excluded Studies – Original Search	
	commentary with no quantitative analysis
Preliminary results of a short-course antituberculosis regimen including Sinerdol-EH and applied under operational conditions. Revista de Igiene Bacteriologie Virusologie Parazitologie Epidemiologie Pneumoftiziologie Seria Pneumoftiziologia 1985;34 (2):149-555.	not relevant - focus is not on comparison of regimens of different duration
Preliminary results of the East African/British Medical Research Councils' third controlled trial of short-course antituberculosis regimens [proceedings]. Tubercle 1978; 59 (1):65.	not full report or document without sufficient detail of methodology or data
Preliminary results of the Hong Kong/British Medical Research Council second controlled trial of short-course antituberculosis regimens [proceedings]. Tubercle 1978; 59(1):64.	not full report or document without sufficient detail of methodology or data
Proceedings: Short course chemotherapy in pulmonary tuberculosis: a controlled trial by the British Thoracic and Tuberculosis Association. (A report from one of the three clinical co-ordinators). Tubercle 1975; 56 (2):165.	not full report or document without sufficient detail of methodology or data
Recommendations for the prevention and management of tuberculosis in patients taking infliximab. Annales de Medecine Interne.153 (7) (pp 429-431), 2002.	guideline without sufficient detail of methodology or data, or which does not perform quantitative analysis
Regimens of less than six months for treating tuberculosis. Cochrane Database of Systematic Reviews 2000; (2):CD001362.	regimen includes drug(s) not licensed in the UK
Revised guidelines for the diagnosis and control of tuberculosis: Impact on management in the elderly. Drugs and Aging.22 (8) (pp 663-686), 2005.	wrong study design - narrative review or commentary with no quantitative analysis
Revised national tuberculosis control programme. Journal of Internal Medicine.8 (2) (pp 92-94), 1997.	Information Services unable to locate article
Short course chemotherapy for tuberculosis of lymph nodes: A controlled trial. British Medical Journal.290 (6475) (pp 1106-1108), 1985.	wrong population - non-respiratory TB
Short course chemotherapy in childhood tuberculosis. Indian Pediatrics 1995; 32(6):625-8.	wrong study design - narrative review or commentary with no quantitative analysis
Short course chemotherapy of pulmonary tuberculosis. Indian Journal of Tuberculosis.29 (1) (pp 3-13), 1982.Date of Publication: 1982.	wrong study design - narrative review or commentary with no quantitative analysis
Short course chemotherapy of tuberculosis. Indian Pediatrics 1989;26 (5): 477-9.	wrong study design - narrative review or commentary with no quantitative analysis
Short course treatment with two drugs, isoniazid plus rifampicin for six months: a controlled clinical trial with two treatment regimens. Bulletin of the International Union Against Tuberculosis 1976; 51(1):61-4.	not relevant - focus is not on comparison of regimens of different duration
Short term chemotherapy in children: Three years follow up. Indian Journal of Tuberculosis.29 (1) (pp 48-54), 1982.	not relevant - focus is not on comparison of regimens of different duration
Short-course chemotherapy in clinical practice. Scandinavian Journal of Respiratory Diseases – Supplementum 1978; 102: 43-7.	wrong study design - narrative review or commentary with no

Excluded Studies – Original Search	
	quantitative analysis
Short-course chemotherapy in pulmonary tuberculosis. <i>Journal of Antimicrobial Chemotherapy</i> 1977; 3(4):290-4.	wrong study design - narrative review or commentary with no quantitative analysis
Short-course treatment in pulmonary tuberculosis. <i>East African Medical Journal</i> 1975; 52 (9):472-800.	regimen includes drug(s) not licensed in the UK
Short-duration treatment of pulmonary tuberculosis. <i>Chest</i> 1977; 71 (5):583-6.	Supplementary evidence
Side-effects of drugs used in directly observed treatment short-course in newly diagnosed pulmonary tuberculosis subjects in Nigerians: a controlled clinical study. <i>Nigerian Postgraduate Medical Journal</i> . 2002; 9 (1):34-7.	Information Services unable to locate article
Smear-negative pulmonary tuberculosis: Controlled trial of 3-month and 2-month regimens. <i>Bull Int Union Tuberc</i> 1979; 54 (1):25.	not full report or document without sufficient detail of methodology or data
The 22nd international tuberculosis conference. <i>Indian Journal of Tuberculosis</i> .21 (1) (pp 39-45), 1974.	conference abstract
The chemotherapy of osteo-articular tuberculosis with recommendations for treatment of children. [Review]. <i>Journal of Infection</i> 2011; 62 (6): 411-399.	wrong population - non-respiratory TB
The chemotherapy of tuberculous lymphadenopathy in children. [Review]. <i>Tuberculosis</i> 2010; 90 (4):213-244.	wrong population - non-respiratory TB
The chemotherapy of tuberculous meningitis in children and adults. [Review]. <i>Tuberculosis</i> 2010; 90 (6):375-922.	wrong population - non-respiratory TB
The management of patients suffering from genito-urinary tuberculosis by short-course chemotherapy and early surgery. A several year review. <i>Bulletin of the International Union against Tuberculosis</i> .54 (3-4) (pp 298-299), 1979.	wrong population - non-respiratory TB
The third Asia pacific congress on diseases of the chest. <i>Indian Journal of Tuberculosis</i> .21 (1) (pp 46-50), 1974.	not full report or document without sufficient detail of methodology or data
Third report on short-term chemotherapy of tuberculosis. <i>Bulletin of the International Union against Tuberculosis</i> .54 (1) (pp 15-16), 1979.	not full report or document without sufficient detail of methodology or data
Treatment of paediatric TB: revised WHO guidelines. [Review]. <i>Paediatric Respiratory Reviews</i> 2011; 12(1):22-6.	not relevant - focus is not on comparison of regimens of different duration
Tuberculosis in children and its management. <i>Seminars in Respiratory Infections</i> 1989; 4 (3):232-422.	wrong study design - narrative review or commentary with no quantitative analysis
Tuberculosis in HIV infected persons - Recommendations of Polish scientific society of AIDS. <i>HIV and AIDS Review</i> .5 (4) (pp 34-36), 2006.	guideline without sufficient detail of methodology or data, or which does not perform quantitative analysis
Tuberculosis of the gastrointestinal tract and peritoneum. <i>American Journal of Gastroenterology</i> 1993; 88 (7):989-999.	wrong population - non-respiratory TB
Tuberculosis: The present Swedish therapeutic programme. <i>Selected Papers of the Royal Netherlands Tuberculosis Association</i> . 18 (pp 57-74), 1978.	wrong study design - narrative review or commentary with no

Excluded Studies – Original Search	
	quantitative analysis
Acharya,V.N., Kudva,B.T., Retnam,V.J. Adult tuberculous meningitis: comparative study of different chemotherapeutic regimens. Journal of the Association of Physicians of India 1985; 33 (9):583-5.	wrong population - non-respiratory TB
Agarwal,S.K.& Roy,D.C. Once a week short-term tuberculosis therapy. Asian Med J 1983; 26(6):390-7.	not in English
Aguado,J., Torre-Cisneros,J., Fortun,J., Benito,N., Meije,Y., Doblas,A. Tuberculosis in solid-organ transplant recipients: Consensus statement of the Group for the Study of Infection in transplant recipients (GESITRA) of the Spanish society of infectious diseases and clinical microbiology. Clinical Infectious Diseases.48 (9) (pp 1276-1284), 2009.	guideline without sufficient detail of methodology or data, or which does not perform quantitative analysis
Ahmad,Khan F., Minion,J., Al-Motairi,A., Benedetti,A., Harries,A.D.. An updated systematic review and meta-analysis on the treatment of active tuberculosis in patients with HIV infection. Clinical Infectious Diseases 2012; 55 (8):1154-633.	wrong study design - observational
Akbri,M.Z., Fatima,N., ul,Haque E., Shiekh,A.S. Liver function tests in patients of pulmonary tuberculosis using four different drug regimens. Journal of Ayub Medical College, Abbottabad: JAMC 2001;13 (2):5-10.	not relevant - focus is not on comparison of regimens of different duration
Al-Aska, A. Short-course chemotherapy for cervical lymph node tuberculosis . Saudi-Med-J 1992; 13(2):129-311.	wrong population - non-respiratory TB
Al-Hajjaj,M.S., Al-Jiffri,M., Al-Dhawie,O., Al-Skareef,N. Treatment of tuberculosis as adopted by the Saudi National Tuberculosis Control Program Committee. Saudi Medical Journal.17 (5) (pp 552-558), 1996.	guideline without sufficient detail of methodology or data, or which does not perform quantitative analysis
Aljohaney,A.& Amjadi,K. A systematic review of the epidemiology, immunopathogenesis, diagnosis, and treatment of pleural TB in HIV-infected patients. Clinical and Developmental Immunology. 2012. Article Number: 842045.	systematic review found no relevant data on treatment duration in relevant population
Allan,W.G.L.& Chan,Y.L.. Controlled trial of 6- and 9-month regimens of daily and intermittent streptomycin plus isoniazid plus pyrazinamide for pulmonary tuberculosis in Hong Kong. Tubercle.56 (2) (pp 81-96), 1975.	Supplementary evidence
Anastasatu,C. Efficiency of short-course tuberculosis chemotherapy in controlled clinical trials and in programme conditions in Romania. Revista de Igiena Bacteriologie Virusologie Parazitologie Epidemiologie Pneumoftiziologie Seria Pneumoftiziologia 1985; 34(2):133-9.	not relevant - focus is not on comparison of regimens of different duration
Anastasatu,C. Late results of short course (6 months) Ab initio intermittent (2/7) TB chemotherapy in programme conditions. Prax.Klin.Pneumonol. 1985;39 (Suppl. 1 ):768-9.	not full report or document without sufficient detail of methodology or data
Aneja,K.S. Organizational effort in a clinical trial and its relevance to applicability of short course chemotherapy in national tuberculosis programme. Indian Journal of Tuberculosis 1982; 29 (1):19-28.	not relevant - focus is not on comparison of regimens of different duration
Anon. A comparative study of daily and twice-weekly continuation regimens of tuberculosis chemotherapy, including a comparison of two durations of sanatorium treatment. 2. Second report: the results from 12 to 24 months. Bulletin of the World Health Organization 1973; 48(2):155-655.	regimen includes drug(s) not licensed in the UK
Anon. A controlled clinical trial of oral short-course regimens in the treatment of sputum-positive pulmonary tuberculosis. Tuberculosis Research Centre. International Journal of Tuberculosis & Lung Disease 1997; 1(6): 509-177.	Supplementary evidence
Anon. A controlled clinical trial of semi-supervised short course chemotherapy in pulmonary tuberculosis: two years follow up. Indian	Information Services unable to locate article

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Journal of Tuberculosis.24 (2) (pp 92-93), 1977.	
Anon. A controlled trial of a 2-month, 3-month, and 12-month regimens of chemotherapy for sputum smear-negative pulmonary tuberculosis: the results at 30 months. Hong Kong Chest Service/Tuberculosis Research Centre, Madras/British Medical Research Council. American Review of Respiratory Disease 1981; 124 (2):138-422.	Same population as included study; overlapping outcomes of shorter duration of follow-up
Anon. A controlled trial of daily and intermittent rifampicin plus ethambutol in the retreatment of patients with pulmonary tuberculosis: results up to 30 months. Tubercle 1975; 56(3):179-899.	wrong population - drug resistant TB
Anon. A controlled trial of six-month and nine-month regimens of chemotherapy in patients undergoing radical surgery for tuberculosis of the spine in Hong Kong. Tenth report of the Medical Research Council Working Party on Tuberculosis of the Spine. Tubercle 1986; 67 (4):243-599.	wrong population - non-respiratory TB
Anon. A five-year assessment of controlled trials of in-patient and out-patient treatment and of plaster-of-Paris jackets for tuberculosis of the spine in children on standard chemotherapy. Studies in Masan and Pusan, Korea. Fifth report of the Medical Research Council Working Party on tuberculosis of the spine. The Journal of bone and joint surgery. British volume 1976; 58-B (4):399-411.	wrong population - non-respiratory TB
Anon. A study of two twice-weekly and a once-weekly continuation regimen of tuberculosis chemotherapy, including a comparison of two durations of treatment. 2. Second report: the results at 36 months. Tubercle 1977; 58 (3): 129-366.	regimen includes drug(s) not licensed in the UK
Anon. A study of two twice-weekly and once-weekly continuation regimen of tuberculosis chemotherapy, including a comparison of two durations of treatment. 1. First report: the results at 18 months. Tubercle 1976; 57 (4 ): 235-499.	regimen includes drug(s) not licensed in the UK
Anon. Antituberculosis regimens of chemotherapy. Recommendations from the committee on treatment of the International Union Against Tuberculosis and Lung Disease. Bulletin of the International Union Against Tuberculosis and Lung Disease.63 (2) (pp 60-64), 1988.	guideline without sufficient detail of methodology or data, or which does not perform quantitative analysis
Anon. Assessment of a daily combined preparation of isoniazid, rifampin, and pyrazinamide in a controlled trial of three 6-month regimens for smear-positive pulmonary tuberculosis. Singapore Tuberculosis Service/British Medical Research Council. American Review of Respiratory Disease 1991; 143 (4: Pt 1):t-12.	not relevant - focus is not on comparison of regimens of different duration
Anon. Controlled clinical trial of 4 short-course regimens of chemotherapy (three 6-month and one 8-month) for pulmonary tuberculosis. Tubercle 1983; 64 (3):153-666.	Supplementary evidence
Anon. Controlled clinical trial of 4 short-course regimens of chemotherapy (three 6-month and one 8-month) for pulmonary tuberculosis: final report. East and Central African/British Medical Research Council Fifth Collaborative Study. Tubercle 1986; 67 (1): 5-15.	Supplementary evidence
Anon. Controlled clinical trial of four short-course regimens of chemotherapy for two durations in the treatment of pulmonary tuberculosis. Second report. Third East African/British Medical Research Council Study. Tubercle 1980; 61 (2):59 -69.	Supplementary evidence
Anon. Controlled clinical trial of four short-course regimens of chemotherapy for two durations in the treatment of pulmonary tuberculosis: first report: Third East African/British Medical Research Councils study. American Review of Respiratory Disease 1978; 118 (1):39-	regimen includes drug(s) not licensed in the UK



**Excluded Studies – Original Search**

48.	
Anon. Controlled trial of 6-month and 8-month regimens in the treatment of pulmonary tuberculosis. First report. American Review of Respiratory Disease 1978; 118(2):219-288.	Supplementary evidence
Anon. Controlled trial of 6-month and 8-month regimens in the treatment of pulmonary tuberculosis: the results up to 24 months. Tubercle 1979; 60 (4):201-100.	Supplementary evidence
Anon. Controlled trial of 6-month and 9-month regimens of daily and intermittent streptomycin plus isoniazid plus pyrazinamide for pulmonary tuberculosis in Hong Kong. The results up to 30 months. American Review of Respiratory Disease 1977; 115 (5):727-355.	Supplementary evidence
Anon. International standards for tuberculosis care: Diagnosis, treatment and public health. Giornale Italiano di Medicina Tropicale.11 (3-4) (pp 3-28), 2006.	guideline without sufficient detail of methodology or data, or which does not perform quantitative analysis
Anon. Prevention and treatment of tuberculosis among patients infected with human immunodeficiency virus: principles of therapy and revised recommendations. Centers for Disease Control and Prevention. Morbidity & Mortality Weekly Report 1998; Recommendations (RR-20): 1-58.	wrong study design - narrative review or commentary with no quantitative analysis
Anon. Short course chemotherapy for lymph node tuberculosis: final report at 5 years. British Thoracic Society Research Committee. British Journal of Diseases of the Chest 1988; 82 (3): 282 -4.	wrong population - non-respiratory TB
Anon. Shortening short course chemotherapy: a randomised clinical trial for treatment of smear positive pulmonary tuberculosis with regimens using ofloxacin in the intensive phase. Indian Journal of Tuberculosis 2002; 49: 27 -38.	Supplementary evidence
Anon. Six-month chemotherapy regimen is more effective than 8-month regimens for treating newly diagnosed pulmonary tuberculosis. Evidence-based Healthcare & Public Health 2005; 9 (2):157-8.	not full report or document without sufficient detail of methodology or data
Anon. Six-months versus nine-months chemotherapy for tuberculosis of lymph nodes: preliminary results. British Thoracic Society Research Committee. Respiratory Medicine 1992; 86 (1): 15-9.	wrong population - non-respiratory TB
Anon. Study of chemotherapy regimens of 5 and 7 months' duration and the role of corticosteroids in the treatment of sputum-positive patients with pulmonary tuberculosis in South India. Tubercle.64 (2) (pp 73-91), 1983.	Supplementary evidence
Anon. Treating and preventing tuberculosis among the HIV-infected: CDC guidelines, part 2. Journal of Critical Illness.14 (6) (pp 342-345), 1999.	guideline without sufficient detail of methodology or data, or which does not perform quantitative analysis
Anon. Treating and preventing tuberculosis in HIV-infected patients: Part 1. Journal of Respiratory Diseases.20 (8) (pp 542-544), 1999.	guideline without sufficient detail of methodology or data, or which does not perform quantitative analysis
Balasubramanian,R., Nagarajan,M., Balambal,R., Tripathy,S.P., Sundararaman,R., Venkatesan,P., et al. Randomised controlled clinical trial of short course chemotherapy in abdominal tuberculosis: a five-year report. International Journal of Tuberculosis & Lung Disease 1997; 1 (1): 44-51.	wrong population - non-respiratory TB
Balasubramanian,R., Ramachandran,R., Joseph,P., Nagarajan,M., Thiruvengadam,K.V., Tripathy,S.P. Interim results of a controlled clinical study of abdominal tuberculosis. Indian J Tuberc 1989; 36 (2): 117-211.	wrong population - non-respiratory TB
Balasubramanian,R., Sivasubramanian,S., Parthasarathy,R., Santha,T.,	wrong population - non-

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Somasundaram,P.R. Prevalence, incidence and resolution of abscesses and sinuses in patients with tuberculosis of the spine: 5-year results of patients treated with short-course chemotherapy with or without surgery in Madras. Indian Journal of Tuberculosis 1994; 41(3): 151-600.	respiratory TB
Balasubramanian,R., Sivasubramanian,S., Vijayan,V.K., Ramachandran,R., Jawahar,M.S., Paramasivan,C.N., Selvakumar,N. Five year results of a 3-month and two 5-month regimens for the treatment of sputum-positive pulmonary tuberculosis in south India. Tubercle 1990; 71(4): 253-8.	Supplementary evidence
Balasubramanian,R. Management of non-pulmonary forms of tuberculosis: review of TRC studies over two decades. Indian Journal of Pediatrics 2000; 67(2: Suppl): Suppl-40.	wrong population - non-respiratory TB
Bass Jr,J.B., Farer,L.S., Hopewell,P.C., O'Brien,R., Jacobs,R.F., Ruben,F., Snider,Jr. Treatment of tuberculosis and tuberculosis infection in adults and children. Monaldi Archives for Chest Disease.49 (4) (pp 327-345), 1994.	guideline without sufficient detail of methodology or data, or which does not perform quantitative analysis
Bass,Jr, Farer,L.S., Hopewell,P.C., O'Brien,R., Jacobs,R.F., Ruben,F., Snider,Jr. Treatment of tuberculosis and tuberculosis infection in adults and children. Clinical Infectious Diseases.21 (1) (pp 9-27), 1995.	guideline without sufficient detail of methodology or data, or which does not perform quantitative analysis
Berkani,M.& Chaulet,P.. Controlled clinical trial comparing a 6-month and a 12-month regimen in the treatment of pulmonary tuberculosis in the Algerian Sahara. American Review of Respiratory Disease.129 (6) (pp 921-928), 1984.	Supplementary evidence
Brandli,O.& Dreher,D. Treatment of tuberculosis with isoniazid, rifampin and pyrazinamide. Ergebnisse der Tuberkulose-Kurzzeittherapie Mit Isoniazid, Rifampicin and pyrazinamide. Schweiz Med Wochenschr. 1993; 123 (25): 1300-6.	not in English
Campbell,I.A., Ormerod,L.P., Friend,J.A., Jenkins,P.A. Six months versus nine months chemotherapy for tuberculosis of lymph nodes: final results. Respiratory Medicine 1993; 87 (8): 621-3.	wrong population - non-respiratory TB
Chauhan,L.S. Management of pediatric tuberculosis under the revised national tuberculosis control program (RNTCP). Indian Pediatrics.41 (9) (pp 901-905), 2004.	guideline without sufficient detail of methodology or data, or which does not perform quantitative analysis
Chaulet,P., Zidouni,N., Fox,W., Darbyshire,J., Nunn,A.J. Short-course chemotherapy for pulmonary tuberculosis under routine programme conditions: A comparison of regimens of 28 and 36 weeks duration in Algeria. Tubercle 1991; 72 (2): 88-100.	Supplementary evidence
Cherian,A. Central nervous system tuberculosis. [Review]. African Health Sciences 2011; 11 (1): 116-277.	wrong population - non-respiratory TB
Combs,D.L.& O'Brien,R.J. USPHS Tuberculosis Short-Course Chemotherapy Trial 21: effectiveness, toxicity, and acceptability. The report of final results. Annals of Internal Medicine 1990; 112 (6): 397-406.	Supplementary evidence
Conde,M.B., Efron,A., Loredo,C., De Souza,G.R., Graca,N.P., Cezar,M.C., et al. Moxifloxacin versus ethambutol in the initial treatment of tuberculosis: a double-blind, randomised, controlled phase II trial. Lancet 2009; 373 (9670): 1183-9.	not relevant - focus is not on comparison of regimens of different duration
Conde,M.B. New regimens for reducing the duration of treatment of drug-susceptible pulmonary tuberculosis. Drug Development Research.72 (6) (pp 501-508), 2011.	not relevant - focus is not on comparison of regimens of different duration
Cuello-Garcia,Carlos A.& Perez,Gaxiola Giordano. Treating BCG-induced	not relevant - focus is not on

Excluded Studies – Original Search	
disease in children. Cochrane Database of Systematic Reviews 2013; (1):n. pag.	comparison of regimens of different duration
de,Jonghe E., Murray,C.J., Chum,H.J., Nyangulu,D.S., Salomao,A. Cost-effectiveness of chemotherapy for sputum smear-positive pulmonary tuberculosis in Malawi, Mozambique and Tanzania. International Journal of Health Planning & Management 1994; 9 (2): 151-811.	wrong study design - modelling study without primary data
Dorman,S.E., Johnson,J.L., Goldberg,S., Muzanye,G., Padayatchi,N., Bozeman,L., et al. Substitution of moxifloxacin for isoniazid during intensive phase treatment of pulmonary tuberculosis. American Journal of Respiratory & Critical Care Medicine 2009; 180 (3): 273-800.	not relevant - focus is not on comparison of regimens of different duration
Dutt,A.K. Treatment of extrapulmonary tuberculosis. Seminars in Respiratory Infections 1989; 4 (3): 225-311.	wrong population - non-respiratory TB
El-Sadr,W.M., Perlman,D.C., Denning,E., Matts,J.P. A review of efficacy studies of 6-month short-course therapy for tuberculosis among patients infected with human immunodeficiency virus: differences in study outcomes. Clinical Infectious Diseases 2001; 32 (4): 623-322.	wrong study design - observational
El-Sadr,W.M., Perlman,D.C., Matts,J.P., Nelson,E.T., Cohn,D.L., Salomon,N., et al. Evaluation of an intensive intermittent-induction regimen and duration of short-course treatment for human immunodeficiency virus-related pulmonary tuberculosis. Terry Bein Community Programs for Clinical Research on AIDS (CPCRA) and the AIDS Clinical Trials Group (ACTG). Clinical Infectious Diseases 1998; 26 (5): 1148-588.	Supplementary evidence
Escreet,B.C. Short-course chemotherapy for pulmonary tuberculosis. A 100-day interrupted regimen. South African Medical Journal 1981; Suid-frikaanse (25): 951-5.	wrong study design - observational
Eule,H.& Beck,H. Daily ultrashort-course and intermittent short-course chemotherapy using four drugs for untreated bacillary pulmonary tuberculosis. Z-Erkr-Atmungsorgane 1986; 167 (1-2): 29-41.	not in English
Farga,V.& Valenzuela,P.. Short-course chemotherapy. Controlled operational trials in Chile. Bulletin of the International Union against Tuberculosis.58 (2) (pp 102-107), 1983.	not relevant - focus is not on comparison of regimens of different duration
Favez,G. A controlled trial of individually-adapted short-course chemotherapy versus two-year scheme in original treatment of pulmonary tuberculosis. Report after a five-year follow-up. Chest 1982; 82 (4): 426-9.	durations in each group unclear
Fox,W.& Ellard,G.A. Studies on the treatment of tuberculosis undertaken by the British Medical Research Council Tuberculosis Units, 1946-1986, with relevant subsequent publications. International Journal of Tuberculosis and Lung Disease.3 (10 SUPPL.2) (pp S231-S279), 1999. .	wrong study design - narrative review or commentary with no quantitative analysis
Gao,X.-F., Li,J., Yang,Z.-W.. Rifapentine vs. rifampicin for the treatment of pulmonary tuberculosis: A systematic review. International Journal of Tuberculosis and Lung Disease.13 (7) (pp 810-819), 2009.	not relevant - focus is not on comparison of regimens of different duration
Geiter,L.J. Short-course chemotherapy of pulmonary tuberculosis. American Review of Respiratory Disease 1987; 135 (5): 1215.	not full report or document without sufficient detail of methodology or data
Golden,M.P. Extrapulmonary tuberculosis: an overview. American Family Physician 2005; 72 (9): 1761-8.	wrong population - non-respiratory TB
Gomi,J.& Aoyagi,T. The short course therapies by Ryoken's method. Kekkau (Tuberculosis) 1985; 60 (8): 435-455.	not in English
Gravendeel, J.M., Asapa,A.S., Becx-Bleumink,M. Preliminary results of an operational field study to compare side-effects, complaints and treatment results of a single-drug short-course regimen with a four-drug fixed-dose	not relevant - focus is not on comparison of regimens of different duration

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combination (4FDC) regimen in South Sulawesi, Republic of Indonesia. Tuberculosis 2003; 83 (1-3): 183-6.	
Griffiths,D.L., Seddon,H., Ball,J., Darbyshire,J., Fox,W., Kemp,H.B.S., et al. A 10-year assessment of controlled trials of inpatient and outpatient treatment and of plaster-of-Paris jackets for tuberculosis of the spine in children on standard chemotherapy. Studies in Masan and Pusan, Korea. Ninth Report of the Medical Research Council Working Group on Tuberculosis of the Spine. Journal of Bone and Joint Surgery - Series B 1985; 67(1): 103-100.	wrong population - non-respiratory TB
Griffiths,D.L., Seddon,H., Ball,J., Darbyshire,J., Fox,W., Kemp,H.B.S., et al. A controlled trial of short-course regimens of chemotherapy in patients receiving ambulatory treatment or undergoing radical surgery for tuberculosis of the spine. 11th report of the Medical Research Council Working Party on Tuberculosis of the Spine. Indian Journal of Tuberculosis 1989; 36 (2 Suppl.):1.	wrong population - non-respiratory TB
Griffiths,D.L., Seddon,H., Ball,J., Darbyshire,J., Fox,W., Kemp,H.B.S., et al. Controlled trial of short-course regimens of chemotherapy in the ambulatory treatment of spinal tuberculosis. Results at three years of a study in Korea. Journal of Bone and Joint Surgery - Series B.75 (2) (pp 240-248), 1993.	wrong population - non-respiratory TB
Handog,E.B.& Gabriel,T.G. Management of cutaneous tuberculosis. Dermatologic Therapy 2008; 21(3): 154-611.	wrong population - non-respiratory TB
Hazra,A. Chemotherapy of osteoarticular tuberculosis. Indian Journal of Pharmacology.37 (1) (pp 5-12), 2005.	wrong population - non-respiratory TB
Heemskerk,D., Day,J., Chau,T.T.H., Dung,N.H., Yen,N.T.B., Bang,N.D., et al. Intensified treatment with high dose Rifampicin and Levofloxacin compared to standard treatment for adult patients with Tuberculous Meningitis (TBM-IT): Protocol for a randomized controlled trial. Trials 12, 2011. Article Number: 25.	wrong population - non-respiratory TB
Hopewell,P.C., Ganter,B., Baron,R.B. Operational evaluation of treatment for tuberculosis. Results of 8- and 12-month regimens in Peru. American Review of Respiratory Disease 1985; 132 (4): 737-411.	regimen includes drug(s) not licensed in the UK
Hopewell,P.C., Pai,M., Maher,D., Uplekar,M. International Standards for Tuberculosis Care. Lancet Infectious Diseases.6 (11) (pp 710-725), 2006.	guideline without sufficient detail of methodology or data, or which does not perform quantitative analysis
Horsburgh,C.R.,Jr.& Feldman,S. Practice guidelines for the treatment of tuberculosis. Clinical Infectious Diseases.31 (3) (pp 633-639), 2000.	guideline without sufficient detail of methodology or data, or which does not perform quantitative analysis
Jacobs,R.F., Sunakorn,P., Chotpitayasunonah,T., Pope,S. Intensive short course chemotherapy for tuberculous meningitis. Pediatr Infect Dis J1992; 11(3): 194-8.	wrong population - non-respiratory TB
Je,B.K., Kim,M.J., Kim,S.B., Park,D.W., Kim,T.K. Detailed nodal features of cervical tuberculous lymphadenitis on serial neck computed tomography before and after chemotherapy: focus on the relation between clinical outcomes and computed tomography features. Journal of Computer Assisted Tomography 2005; 29(6): 889-944.	wrong population - non-respiratory TB
Jindani,A.& Nunn,A.J. Two 8-month regimens of chemotherapy for treatment of newly diagnosed pulmonary tuberculosis: international multicentre randomised trial. Lancet 2004; 364(9441): 1244-511.	Supplementary evidence

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Kansoy,S., Kurtas,N., Aksit,S., Aksoylar,S., Yaprak,I. Superiority of intermittent-short course chemotherapy in childhood pulmonary tuberculosis. Turkish Journal of Medical Sciences. 1996; 26 (1): 41-3.	wrong population - children
Khan,F.A., Minion,J., Pai,M., Royce,S., Burman,W., Harries,A.D. Treatment of active tuberculosis in HIV-coinfected patients: a systematic review and meta-analysis. Clinical Infectious Diseases 2010; 50(9): 1288-999.	wrong study design - observational
Khan,M.I.& Gulzar,F. A preliminary report on six months antituberculous therapy - Clinical study in Gulab Devi Chest hospital, Lahore. Journal of the Pakistan Medical Association.33 (10) (pp 243-247), 1983.	not relevant - focus is not on comparison of regimens of different duration
Kim,S.G., Kim,J.S., Jung,H.C. Is a 9-month treatment sufficient in tuberculous enterocolitis? A prospective, randomized, single-centre study. Alimentary Pharmacology & Therapeutics 2003; 18 (1): 85-91.	wrong population - non-respiratory TB
Kitai,I. A clinical approach to paediatric tuberculosis in Canada. Paediatrics and Child Health.8 (3) (pp 162-170), 2003.	wrong study design - narrative review or commentary with no quantitative analysis
Korenromp,E.L., Scano,F., Williams,B.G., Dye,C. Effects of human immunodeficiency virus infection on recurrence of tuberculosis after rifampin-based treatment: an analytical review. Clinical Infectious Diseases 2003; 37 (1): 101-122.	wrong study design - observational
Kumar,A., Kumar,A.M.V., Gupta,D., Kanchar,A., Mohammed,S., Srinath,S., et al. Global guidelines for treatment of tuberculosis among persons living with HIV: Unresolved issues. International Journal of Tuberculosis and Lung Disease.16 (5) (pp 573-578), 2012.	wrong study design - narrative review or commentary with no quantitative analysis
Larbaoui,D.& Lamrani,Z. Final results of a controlled chemotherapy trial comparing four 'heavy' regimens of short-course chemotherapy in pulmonary tuberculosis. Bulletin of the International Union against Tuberculosis.57 (1) (pp 20), 1982.	not full report or document without sufficient detail of methodology or data
Lee,J.H., Cha,S.I., Jang,S.S., Jung,C.Y., Park,J.Y., Park,J.S., Jung,T.H.. Prospective randomized study of six months' chemotherapy and nine months' chemotherapy for cervical lymph node tuberculosis. Tuberculosis & Respiratory Diseases 2003; 54 (3): 274-822.	wrong population - non-respiratory TB
Lenk,S. Genitourinary tuberculosis. Current Opinion in Urology 2001; 11 (1): 93-8.	wrong population - non-respiratory TB
Long,M.W.& Snider,D.E.,Jr. U.S. Public Health Service Cooperative trial of three rifampin-isoniazid regimens in treatment of pulmonary tuberculosis. American Review of Respiratory Disease 1979; 119(6):879-944.	not relevant - focus is not on comparison of regimens of different duration
Malaviya,A.N. Arthritis associated with tuberculosis. Best Practice and Research: Clinical Rheumatology.17 (2) (pp 319-343), 2003.	wrong population - non-respiratory TB
Malaviya,A.N. Arthritis associated with tuberculosis. Best Practice & Research in Clinical Rheumatology 2003; 17(2): 319-433.	wrong population - non-respiratory TB
Manabe,Y.C., Hermans,S.M., Lamorde,M., Castelnuovo,B., Mullins,C.D.. Rifampicin for continuation phase tuberculosis treatment in Uganda: a cost-effectiveness analysis. PLoS ONE [Electronic Resource] 2012; 7(6):e39187.	wrong study design - modelling study without primary data
Matsumiya,T.& Yoshida,F. A five years follow-up study of antituberculosis chemotherapy with and without rifampicin. Kekkaku 1980; 55(2): 43-51.	not in English
Mayosi,B.M., Ntsekhe,M., Volmink,J.A. Interventions for treating tuberculous pericarditis. Cochrane Database of Systematic Reviews 2002; (4): CD000526.	wrong population - non-respiratory TB
McMaster,P. Critical review of evidence for short course therapy for	wrong population - non-

Excluded Studies – Original Search	
tuberculous adenitis in children. <i>Pediatric Infectious Disease Journal</i> .19 (5) (pp 401-404), 2000.	respiratory TB
Mehrotra,M.L.& Gautam,K.D. Shortest possible acceptable effective chemotherapy in ambulatory patients with pulmonary tuberculosis. Part II. Results during the 24 months after the end of chemotherapy. <i>American Review of Respiratory Disease</i> 1984; 129 (6): 1016-7.	not relevant - focus is not on comparison of regimens of different duration
Mehrotra,M.L., Gautam,K.D., Chaube,C.K. Results of short course chemotherapy in pulmonary tuberculosis patients excluded from the main analysis of a controlled clinical trial. <i>Indian Journal of Tuberculosis</i> 1985; 32 (4): 176-8.	regimen includes drug(s) not licensed in the UK
Mehrotra,M.L., Gautam,K.D., Chaube,C.K. Semi-supervised clinical trial of nine months' chemotherapy without rifampicin in pulmonary tuberculosis. <i>Bull Int Union Tuberc</i> 1979; 54 (1):9.	not full report or document without sufficient detail of methodology or data
Menzies,D., Benedetti,A., Paydar,A., Martin,I., Royce,S., Pai,M., et al. Effect of duration and intermittency of rifampin on tuberculosis treatment outcomes: A systematic review and meta-analysis. <i>PLoS Medicine</i> .6 (9), 2009.Article Number: e1000146.	not relevant - focus is not on comparison of regimens of different duration
Nahar,B.L., Hossain,A.K.M.M., Islam,M.M. A comparative study on the adverse effects of two anti-tuberculosis drugs regimen in initial two-month treatment period. <i>Bangladesh Journal of Pharmacology</i> 2006; 1(2): 51-7.	not relevant - focus is not on comparison of regimens of different duration
Nayar,S., Narang,P., Tyagi,N.K., Jajco,U., Dhage,V.R. Field trial of short term intermittent chemotherapy of patients with pulmonary tuberculosis in Wardha district. <i>Indian J.Tuberc.</i> 1988; 35 (4): 176-822.	Supplementary evidence
Nazareth,O.& Parthasarathy,R. Efficacy of once weekly isoniazid streptomycin in preventing relapse of pulmonary tuberculosis. <i>Indian Journal of Medical Research</i> .65 (1) (pp 35-42), 1977.	regimen includes drug(s) not licensed in the UK
Ormerod,P., Campbell,I., Novelli,V., Pozniak,A., Davies,P., Skinner,C., et al. Chemotherapy and management of tuberculosis in the United Kingdom: Recommendations 1998. <i>Thorax</i> .53 (7) (pp 536-548), 1998.	guideline without sufficient detail of methodology or data, or which does not perform quantitative analysis
Pai,Madhukar, Reingold,Arthur L., Riley, Lee W., Colford,John M., Ojubolamo,Oлакунле. Duration of therapy for tuberculosis in patients infected with Human Immunodeficiency Virus. <i>Cochrane Database of Systematic Reviews</i> 2002; (3):n. pag.	not full report or document without sufficient detail of methodology or data
Park,S.H., Yang,S.K., Yang,D.H., Kim,K.J., Yoon,S.M., Choe,J.W., et al. Prospective randomized trial of six-month versus nine-month therapy for intestinal tuberculosis. <i>Antimicrobial Agents &amp; Chemotherapy</i> 2009; 53(10): 4167-711.	wrong population - non-respiratory TB
Parthasarathy,R.& Prabhakar,R. A controlled clinical trial of 3- and 5-month regimens in the treatment of sputum-positive pulmonary tuberculosis in South India. <i>American Review of Respiratory Disease</i> 1986; 134 (1): 27-33.	Supplementary evidence
Parthasarathy,R., Sriram,K., Santha,T., Prabhakar,R., Somasundaram,P.R.. Short-course chemotherapy for tuberculosis of the spine. A comparison between ambulant treatment and radical surgery--ten-year report. <i>Journal of Bone &amp; Joint Surgery - British Volume</i> 1999; 81(3): 464-711.	wrong population - non-respiratory TB
Pauranik,A.& Behari,M. Appearance of tuberculoma during treatment of tuberculous meningitis. <i>Japanese Journal of Medicine</i> .26 (3) (pp 332-334), 1987.	wrong population - non-respiratory TB
Payne,B. HIV: treating tuberculosis. <i>Clinical Evidence</i> 2009.	systematic review found no relevant data on treatment duration in relevant



Excluded Studies – Original Search	
	population
Payne,B. Tuberculosis in people with HIV. Clinical Evidence 2007.	wrong study design - narrative review or commentary with no quantitative analysis
Peloquin,C.A. Infection caused by Mycobacterium tuberculosis. Annals of Pharmacotherapy.28 (1) (pp 72-84), 1994.	wrong study design - narrative review or commentary with no quantitative analysis
Perez-Stable,E.J. Current tuberculosis treatment regimens. Choosing the right one for your patient. Clinics in Chest Medicine 1989; 10(3): 323-399.	wrong study design - narrative review or commentary with no quantitative analysis
Perrin,F. A new world approach to an old infection. Good Clinical Practice Journal.13 (8) (pp 18-21), 2006.	wrong study design - narrative review or commentary with no quantitative analysis
Pozniak,A.L., Miller,R.F., Lipman,M.C.I., Freedman,A.R., Ormerod,L.P., Johnson,M.A., Collins,S. BHIVA treatment guidelines for tuberculosis (TB)/HIV infection 2005. HIV Medicine.6 (Supl.2) (pp 62-83), 2005.	guideline without sufficient detail of methodology or data, or which does not perform quantitative analysis
Punnotok,J.& Pumprueg,U. A comparison of two short course tuberculosis chemotherapy regimens, both using Rifater during an intensive phase, with a 3 year follow-up. Journal of the Medical Association of Thailand 1995; 78(6): 298-304.	regimen includes drug(s) not licensed in the UK
Reetha,A.M., Sivasubramanian,S., Parthasarathy,R., Somasundaram,P.R.. Five-year findings of a comparison of ambulatory short-course chemotherapy with radical surgery plus chemotherapy for tuberculosis of the spine in Madras. Indian Journal of Orthopaedics 1994; 28(1): 7-13.	wrong population - non-respiratory TB
Rey,Duran R. Clinical trial of short-course chemotherapy regimens (6 months) in patients with newly detected pulmonary tuberculosis. Bulletin of the International Union against Tuberculosis.54 (1) (pp 30-31), 1979.	not full report or document without sufficient detail of methodology or data
Rodríguez-Froja n,G., Sauret,J., Hernández-Flix,S., Jolis,R. Results of a 6 months treatment protocol for pulmonary tuberculosis after 18 months of follow-up. Archivos de Bronconeumología 1991; 27(8):349-522.	not in English
Sanai,F.M. Systematic review: tuberculous peritonitis--presenting features, diagnostic strategies and treatment. Alimentary Pharmacology & Therapeutics 2005; 22(8): 685-700.	wrong population - non-respiratory TB
Santha,T., Nazareth,O., Krishnamurthy,M.S., Balasubramanian,R., Vijayan,V.K., Janardhanam,B., et al. Treatment of pulmonary tuberculosis with short course chemotherapy in south India--5-year follow up. Tubercle 1989; 70(4): 229-344.	Supplementary evidence
Schwander,S.K., Dietrich,M., Mugenyi,P., Kityo,C., Okwera,A., Johnson,J., et al. Clinical course of human immunodeficiency virus type 1 associated pulmonary tuberculosis during short-course antituberculosis therapy. East African Medical Journal 1997; 74 (9): 543-8.	not relevant - focus is not on comparison of regimens of different duration
Sharma,S.K.& Mohan,A.. Challenges in the diagnosis & treatment of miliary tuberculosis. [Review]. Indian Journal of Medical Research 2012; 135(5): 703-300.	wrong population - non-respiratory TB
Singh,V. Childhood tuberculosis: Update of guidelines. Clinical Pulmonary Medicine.20 (1) (pp 11-20), 2013.	wrong study design - narrative review or

Excluded Studies – Original Search	
	commentary with no quantitative analysis
Sittinandana,A. A comparative study on short course chemotherapy in sputum negative pulmonary tuberculosis. <i>Journal of the Medical Association of Thailand</i> 1984; 67(8): 429-311.	not relevant - focus is not on comparison of regimens of different duration
Somner,A.R.& Angel,J.H. A controlled trial of six months' chemotherapy in pulmonary tuberculosis - second report: Results up to 24 months following the end of chemotherapy. <i>Thorax</i> .37 (10) (pp 791-792), 1982.	not full report or document without sufficient detail of methodology or data
Steingart,K.R., Jotblad,S., Robsky,K., Deck,D., Hopewell,P.C., Huang,D. Higher-dose rifampin for the treatment of pulmonary tuberculosis: a systematic review. [Review]. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2011; 15 (3): 305-166.	wrong population - drug resistant TB
Stowe,C.D. Treatment of tuberculous infection and disease in children: the North American perspective. <i>Paediatric Drugs</i> 1999; 1(4): 299-312.	wrong study design - narrative review or commentary with no quantitative analysis
Stratton,M.A. Short-course drug therapy for tuberculosis. <i>Clinical Pharmacy</i> 1986; 5 (12): 977-877.	wrong study design - narrative review or commentary with no quantitative analysis
Sung,C.C.& Chi,H.S. Comparison of 9-month and 6-month short course regimens for sputum microscopy positive pulmonary tuberculosis patients under programme conditions. <i>Tuberc.Resepir.Dis.</i> 1986; 33(1): 9-18.	not in English
Swaminathan,S., Raghavan,A., Duraipandian,M., Kripasankar,A.S.. Short-course chemotherapy for paediatric respiratory tuberculosis: 5-year report. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2005; 9(6): 693-6.	wrong population - children
Swamy,R., Acharyulu,G.S., Duraipandian,M., Jawahar,M.S., Ramachandran,R.. Liver function tests during treatment of tuberculosis with short-course regimens containing isoniazid, rifampicin & pyrazinamide. <i>Indian Journal of Medical Research</i> 1987; 86, 549-577.	wrong study design - narrative review or commentary with no quantitative analysis
Syed,F.F. A modern approach to tuberculous pericarditis. <i>Progress in Cardiovascular Diseases</i> 2007; 50 (3): 218-366.	wrong population - non-respiratory TB
Tala,E., Heinivaara,O., Kokkola,K. Nine months' chemotherapy of isoniazid plus rifampicin in pulmonary tuberculosis compared with initial triple regimens. A controlled cooperative trial in Finland. <i>Bulletin of the International Union against Tuberculosis</i> .60 (3-4) (pp 113-114), 1985.	not relevant - focus is not on comparison of regimens of different duration
Tala,E., Heinivaara,O., Kokkola,K. Nine-month chemotherapy of isoniazid plus rifampicin in pulmonary tuberculosis compared with initial triple regimens. A controlled cooperative trial in Finland. <i>Bulletin of the International Union against Tuberculosis</i> .57 (1) (pp 64), 1982.	not full report or document without sufficient detail of methodology or data
Tam,C.M., Leung,C.C., Chan,C.K., Chang,K.C., Chen,N.K., Yew,W.W., et al. Chemotherapy of tuberculosis in Hong Kong: A consensus statement. <i>Hong Kong Medical Journal</i> .4 (3) (pp 315-320), 1998.	wrong study design - narrative review or commentary with no quantitative analysis
Teo,S.K.& Tan,K.K. Four-month chemotherapy in the treatment of smear-negative pulmonary tuberculosis: results at 30 to 60 months. <i>Annals of the Academy of Medicine, Singapore</i> 2002; 31(2): 175-811.	not relevant - focus is not on comparison of regimens of different duration
Tony,J.& Sunilkumar,K. Randomized controlled trial of DOTS versus conventional regime for treatment of ileocecal and colonic tuberculosis . <i>Indian Journal of Gastroenterology</i> 2008; 27 (1): 19-21.	wrong population - non-respiratory TB
Upadhyay,S.S.& Saji,M.J. Duration of antituberculosis chemotherapy in	wrong population - non-

Excluded Studies – Original Search	
conjunction with radical surgery in the management of spinal tuberculosis. Spine 1996; 21(16): 1898-9033.	respiratory TB
Valsalan,R., Purushothaman,R., Raveendran,M., Zacharia,B.. Efficacy of directly observed treatment short-course intermittent regimen in spinal tuberculosis. Indian Journal of Orthopaedics 2012; 46 (2): 138-444.	wrong population - non-respiratory TB
van Loenhout-Rooyackers,J.H.& Verbeek,A.L. Chemotherapeutic treatment for spinal tuberculosis. International Journal of Tuberculosis & Lung Disease 2002;6 (3): 259-655.	wrong population - non-respiratory TB
van Loenhout-Rooyackers,J.H., Keyser,A., Laheij,R.J., Verbeek,A.L.. Tuberculous meningitis: is a 6-month treatment regimen sufficient? International Journal of Tuberculosis & Lung Disease 2001; 5 (11): 1028-355.	wrong population - non-respiratory TB
van Loenhout-Rooyackers,J.H., Laheij,R.J., Richter,C. Shortening the duration of treatment for cervical tuberculous lymphadenitis. European Respiratory Journal 2000; 15(1): 192-5.	wrong population - non-respiratory TB
Viswanathan,R., Pamra,S.P., Dingley,H.B. Short course chemotherapy of pulmonary tuberculosis- interim report on second tuberculosis association of india trial. Indian Journal of Tuberculosis 1983; 30(2): 57-62.	not relevant - focus is not on comparison of regimens of different duration
Viswanathan,R., Pamra,S.P., Dingley,H.B. Short-term chemotherapy of pulmonary tuberculosis: A controlled trial. Indian Journal of Tuberculosis.24 (2) (pp 56-57), 1977.	not relevant - focus is not on comparison of regimens of different duration
Weinberg,A.C. Short-course chemotherapy and role of surgery in adult and pediatric genitourinary tuberculosis. Urology 1988; 31 (2): 95-102.	wrong population - non-respiratory TB
Woodfield,J. Evidence behind the WHO guidelines: Hospital care for children: What is the most appropriate anti-microbial treatment for tuberculous meningitis? Journal of Tropical Pediatrics.54 (4) (pp 220-224), 2008.	wrong population - non-respiratory TB
Young,P.H.& Sung,C.C. Comparison of initial treatment regimen including short course chemotherapy for pulmonary tuberculosis under programme conditions. Tuberc Respir Dis.1982; 29(3): 117-388.	not in English
Yuen,A.P., Wong,S.H., Tam,C.M., Chan,S.L., Wei,W.I. Prospective randomized study of thrice weekly six-month and nine-month chemotherapy for cervical tuberculous lymphadenopathy. Otolaryngology - Head & Neck Surgery 1997; 116(2): 189-922.	wrong population - non-respiratory TB
Zhang,Y.H.& Lai,G.F. Observation of Xiao Chai Hu Tang for pulmonary tuberculosis short-course chemotherapy leading to dysfunction of liver. Zhejiang Journal of Traditional Chinese Medicine [Zhe Jiang Zhong Yi Za Zhi] 1992; 27(7): 319-200.	Information Services unable to locate article
Ziganshina,L.E. Tuberculosis (HIV-negative people). Clinical Evidence 2009.	systematic review found no relevant data on treatment duration in relevant population
Ziganshina,L.E. Tuberculosis (HIV-negative people). Clinical Evidence 2011.	systematic review found no relevant data on treatment duration in relevant population

Excluded studies – update search	
Reference	Reason for Exclusion
Ahmad Khan,F, Minion,J, Al-Motairi,A, Benedetti,A, Harries,A D.,	Includes observational

**Excluded studies – update search**

Menzies,D. An updated systematic review and meta-analysis on the treatment of active tuberculosis in patients with HIV infection, Clinical infectious diseases : an official publication of the Infectious Diseases Society of America, 55, 1154-1163, 2012	studies
Azuma,J., Ohno,M., Kubota,R., Yokota,S., Nagai,T., Tsuyuguchi,K., Okuda,Y., Takashima,T., Kamimura,S., Fujio,Y., Kawase,I., NAT2 genotype guided regimen reduces isoniazid-induced liver injury and early treatment failure in the 6-month four-drug standard treatment of tuberculosis: A randomized controlled trial for pharmacogenetics-based therapy, European Journal of Clinical Pharmacology, 69, 1091-1101, 2013	Does not compare regimens of different durations
Banu Rekha,V.V., Rajaram,K., Kripasankar,A.S., Parthasarathy,R., Umamathy,K.C., Sheikh,I., Selvakumar,N., Victor,M., Niruparani,C., Sridhar,R., Jawahar,M.S., Efficacy of the 6-month thrice-weekly regimen in the treatment of new sputum smear-positive pulmonary tuberculosis under clinical trial conditions, The National medical journal of India, 25, 196-200, 2012	Wrong design
Hatleberg,C.I., PrahJ,B., Rasmussen,J.N., Andersen,P.H., Bjerrum,S., Thomsen,V.O., Johansen,I.S., A review of paediatric tuberculosis in Denmark: 10-year trend, 2000-2009, European Respiratory Journal, 43, 863-871, 2014	Observational Design
Horsburgh,C.R., Shea,K M., Phillips,P, Lavalley,M, Randomized clinical trials to identify optimal antibiotic treatment duration, Trials, 14, 88-, 2013	Not relevant
Jindal,S.K., Aggarwal,A.N., Gupta,D., Ahmed,Z., Gupta,K.B., Janmeja,A.K., Kashyap,S., Singh,M., Mohan,A., Whig,J., Tuberculous lymphadenopathy: a multicentre operational study of 6-month thrice weekly directly observed treatment, The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease, 17, 234-239, 2013	Design, not RCT
Phillips,P. P.J., Fielding,K, Nunn,A J., An evaluation of culture results during treatment for tuberculosis as surrogate endpoints for treatment failure and relapse, PloS one, 8, e63840-, 2013	Not relevant. Some regimens did not include R throughout
Schon,T., Lerm,M., Stendahl,O., Shortening the 'short-course' therapy- insights into host immunity may contribute to new treatment strategies for tuberculosis, Journal of internal medicine, 273, 368-382, 2013	Narrative review
Yadav,A., Sethi,G.R., Mantan,M., Dhingra,D., Non-response to the intensive phase of anti-tuberculosis treatment in children: Evaluation and outcome, International Journal of Tuberculosis and Lung Disease, 18, 394-396, 2014	Wrong design

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**Excluded Studies – Original search**

Reference	Reason for exclusion
Lardizabal,D.V.. Dexamethasone as adjunctive therapy in adult patients with probable tuberculosis meningitis stage II and III: an open randomized controlled trial. The Philippine Journal of Neurology 1998;4():3-10.	Information Services unable to locate article
Vatsal,D.K., Thaman,D., Jha,D., Husain,M., Suryakant. An Overview of Complications of Tuberculous Meningitis and Their Management. J.Intern.Med.India 2003;6(2):66-69.	Information Services unable to locate article

### Excluded studies – Update search

Reference	Reason for Exclusion
Critchley,J.A., Young,F., Orton,L., Garner,P., Corticosteroids for prevention of mortality in people with tuberculosis: a systematic review and meta-analysis (Provisional abstract), Lancet Infectious Diseases, 13, 223-237, 2013	Regimens include drugs not licensed in the UK. Drugs other than HRZE
Critchley,J.A., Orton,L.C., Pearson,F. Adjunctive steroid therapy for managing pulmonary tuberculosis, Cochrane Database of Systematic Reviews, -, 2014	Anti-TB drugs used are other than HRZE
Mayosi,B.M., Ntsekhe,M., Bosch,J., Pogue,J., Gumedze,F., Badri,M., Jung,H., Pandie,S., Smieja,M., Thabane,L., Francis,V., Thomas,K.M., Thomas,B., Awotedu,A.A., Magula,N.P., Naidoo,D.P., Damasceno,A., Banda,A.C., Mutyaba,A., Brown,B., Ntuli,P., Mntla,P., Ntyintyane,L., Ramjee,R., Manga,P., Kirenga,B., Mondo,C., Russell,J.B., Tsitsi,J.M., Peters,F., Essop,M.R., Barasa,A.F., Mijinyawa,M.S., Sani,M.U., Olunuga,T., Ogah,O., Adebisi,A., Aje,A., Ansa,V., Ojji,D., Danbauchi,S., Hakim,J., Matenga,J., Yusuf,S., Rationale and design of the Investigation of the Management of Pericarditis (IMPI) trial: a 2 × 2 factorial randomized double-blind multicenter trial of adjunctive prednisolone and Mycobacterium w immunotherapy in tuberculous pericarditis, American heart journal, 165, 109-115, 2013	No outcome data

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### Excluded studies -

Reference	Reason for Exclusion
Bagheri,Reza, Haghi,Seyed Ziaollah, Rajabi,Mohammad Taghi Mashhadi, Motamedshariati,Mohammad, Sheibani,Shima, Outcomes following surgery for complicated tuberculosis: analysis of 108 patients, The Thoracic and cardiovascular surgeon 61, 154-158, 2013	No comparison of interest
Chen,Shih Hao, Lee,Chen Hsiang, Wong,To, Feng,Huei Shian, Long-term retrospective analysis of surgical treatment for irretrievable tuberculosis of the ankle, Foot & ankle international./ American Orthopaedic Foot and Ankle Society [and] Swiss Foot and Ankle Society, 34, 372-379, 2013	No comparison of interest
Dong,J., Zhang,S., Liu,H., Li,X., Liu,Y., Du,Y., Novel alternative therapy for spinal tuberculosis during surgery: Reconstructing with anti-tuberculosis bioactivity implants, Expert Opinion on Drug Delivery, 11, 299-305, 2014	Narrative/Commentary
Garg,Nitin, Vohra,Renuka, Minimally invasive surgical approaches in the management of tuberculosis of the thoracic and lumbar spine, Clinical orthopaedics and related research, 472, 1855-1867, 2014	Does not include comparison of interest
Halezeroglu,Semih, Okur,Erdal, Thoracic surgery for haemoptysis in the context of tuberculosis: what is the best management approach?, Journal of thoracic disease, 6, 182-185, 2014	Design: narrative
He,M., Xu,H., Zhao,J., Wang,Z., Anterior debridement, decompression, bone grafting, and instrumentation for lower cervical spine tuberculosis, Spine Journal, 14, 619-627, 2014	Does not include comparison of interest
Jin,W., Wang,Q., Wang,Z., Geng,G., Complete debridement for treatment of thoracolumbar spinal tuberculosis: A clinical curative effect observation, Spine Journal, 14, 964-970, 2014	No comparison of interest
Kim,S.J., Postigo,R., Koo,S., Kim,J.H., Total hip replacement for patients with active tuberculosis of the hip: a systematic review and pooled analysis, The	No meta-analysis

Excluded studies -	
bone & joint journal , 95-B, 578-582, 2013	
Kumar,Apoorva, Singh,Kulwant, Sharma,Vivek, Surgery in hydrocephalus of tubercular origin: challenges and management, Acta neurochirurgica (Wien), 155, 869-873, 2013	Does not include comparison of interest
Kumar,Malhar N., Joseph,Bushan, Manur,Ravikiran, Isolated posterior instrumentation for selected cases of thoraco-lumbar spinal tuberculosis without anterior instrumentation and without anterior or posterior bone grafting, European spine journal : official publication of the European Spine Society, the European Spinal Deformity Society, and the European Section of the Cervical Spine Research Society, 22, 624-632, 2013	No comparison of interest
Li,Litao, Xu,Jianzhong, Ma,Yuanzheng, Tang,Daidi, Chen,Yonglin, Luo,Fei, Li,Dawei, Hou,Tianyong, Zhou,Qiang, Dai,Fei, He,Qingyi, Zhang,Zehua, Surgical strategy and management outcomes for adjacent multisegmental spinal tuberculosis: a retrospective study of forty-eight patients, Spine, 39, E40-E48, 2014	Does not include comparison of interest
Liu,Z., Liu,J., Peng,A., Long,X., Yang,D., Huang,S., One-stage posterior debridement and transpedicular screw fixation for treating monosegmental thoracic and lumbar spinal tuberculosis in adults, The Scientific World Journal., 2014, -, 2014	No comparison of interest
Mak,Kin Cheung, Cheung,Kenneth M.C., Surgical treatment of acute TB spondylitis: indications and outcomes, European spine journal : official publication of the European Spine Society, the European Spinal Deformity Society, and the European Section of the Cervical Spine Research, 22 Suppl 4, 603-611, 2013	Narrative review
Mao,Ningfang, Shi,Zhikai, Ni,Haijian, Zhao,Yingchuan, Tang,Hao, Liu,Deding, Zhu,Xiaodong, Bai,Yushu, Li,Ming, Long-term outcomes of one-stage anterior debridement, bone grafting, and internal fixation for the treatment of lower cervical tuberculosis with kyphosis, British journal of neurosurgery, 27, 160-166, 2013	Does not include comparison of interest
Memon,A.R., Ahmed,G.S., Zardari,A.K., Clinical presentation and different indications of surgery for spinal tuberculosis, Medical Channel, 19, 59-62, 2013	Does not include comparison of interest
Pang,Xiaoyang, Shen,Xiongjie, Wu,Ping, Luo,Chenke, Xu,Zhengquan, Wang,Xiyang, Thoracolumbar spinal tuberculosis with psoas abscesses treated by one-stage posterior transforaminal lumbar debridement, interbody fusion, posterior instrumentation, and postural drainage, Archives of orthopaedic and trauma surgery, 133, 765-772, 2013	No comparison of interest
Pang,Xiaoyang, Wu,Ping, Shen,Xiongjie, Li,Dongzhe, Luo,Chenke, Wang,Xiyang, One-stage posterior transforaminal lumbar debridement, 360degree interbody fusion, and posterior instrumentation in treating lumbosacral spinal tuberculosis, Archives of orthopaedic and trauma surgery, 133, 1033-1039, 2013	Does not include comparison of interest
Qureshi,M.A., Khaliq,A.B., Afzal,W., Pasha,I.F., Aebi,M., Surgical management of contiguous multilevel thoracolumbar tuberculous spondylitis, European Spine Journal, 22, S618-S623, 2013	Does not include comparison of interest
Rawall,Saurabh, Mohan,Kapil, Nene,Abhay, Posterior approach in thoracolumbar tuberculosis: a clinical and radiological review of 67 operated cases, Musculoskeletal surgery, 97, 67-75, 2013	Does not include comparison of interest
Rifaat,A., Ghaly,M.A., Sobhy,E., Badr,A., Metwally,A., Pulmonary resection can improve treatment outcome in re-treatment pulmonary tuberculosis and its complications, Egyptian Journal of Chest Diseases and Tuberculosis,	Does not include comparison of interest



Excluded studies -	
63, 385-388, 2014	
Savardekar,Amey, Chatterji,Debarshi, Singhi,Sunit, Mohindra,Sandeep, Gupta,Sunil, Chhabra,Rajesh, The role of ventriculoperitoneal shunt placement in patients of tubercular meningitis with hydrocephalus in poor neurological grade: a prospective study in the pediatric population and review of literature, Child's nervous system : ChNS : official journal of the International Society for Pediatric NeurosurgeryChilds, 29, 719-725, 2013	No comparison of interest
Vashakidze,Sergo, Gogishvili,Shota, Nikolaishvili,Ketino, Dzidzikashvili,Nino, Tukvadze,Nestani, Blumberg,Henry M., Kempker,Russell R., Favorable outcomes for multidrug and extensively drug resistant tuberculosis patients undergoing surgery, The Annals of thoracic surgery, 95, 1892-1898, 2013	Does not include comparison of interest
Xie,Boxiong, Yang,Yang, He,Wenxin, Xie,Dong, Jiang,Gening, Pulmonary resection in the treatment of 43 patients with well-localized, cavitary pulmonary multidrug-resistant tuberculosis in Shanghai, Interactive cardiovascular and thoracic surgery, 17, 455-459, 2013	Does not include comparison of interest
Zhang,H.Q., Li,J.S., Liu,S.H., Guo,C.F., Tang,M.X., Gao,Q.L., Lin,M.Z., Yin,X.H., Wang,Y.X., Deng,A., The use of posterior vertebral column resection in the management of severe posttuberculous kyphosis: A retrospective study and literature review, Archives of orthopaedic and trauma surgery, 133, 1211-1218, 2013	No comparison of interest
Zhang,H.-Q., Lin,M.-Z., Li,J.-S., Tang,M.-X., Guo,C.-F., Wu,J.-H., Liu,J.-Y., One-stage posterior debridement, transforaminal lumbar interbody fusion and instrumentation in treatment of lumbar spinal tuberculosis: A retrospective case series, Archives of Orthopaedic and Trauma Surgery.133 (3) (pp 333-341), 2013	No comparison of interest
Zhang,H Qi, Lin,M Zg, Guo,H B, Ge,L, Wu,J Huang, L,Jin Yang, One-stage surgical management for tuberculosis of the upper cervical spine by posterior debridement, short-segment fusion, and posterior instrumentation in children, European spine journal : official publication of the European Spine Society, the European Spinal Deformity Society, and the European Section of the Cervical Spine Research, 22, 72-78, 2013	No comparison of interest
Zhang,P, Shen,Y, Ding,W Y, Zhang,W, Shang,Z, The role of surgical timing in the treatment of thoracic and lumbar spinal tuberculosis, Archives of orthopaedic and trauma surgery, 134, 167-172, 2014	No comparison of interest
Zhang,Y, Chen,C, Jiang,G ning, Surgery of massive hemoptysis in pulmonary tuberculosis: immediate and long-term outcomes, The Journal of thoracic and cardiovascular surgery, 148, 651-656, 2014	Does not include a comparison of interest
Zheng,C, Li,P, Kan,W, Video-assisted thoracoscopic anterior surgery combined posterior instrumentation for children with spinal tuberculosis, European journal of pediatric surgery : official journal of Austrian Association of Pediatric Surgery ...[et al] = Zeitschrift fur KinderchirurgieEur, 24, 83-87, 2014	Does not compare surgery with non surgery

Excluded studies - Update	
Reference	Reason for Exclusion
Bagheri,Reza, Haghi,Seyed Ziaollah, Rajabi,Mohammad Taghi Mashhadi, Motamedshariati,Mohammad, Sheibani,Shima, Outcomes following surgery for complicated tuberculosis: analysis of 108 patients, The Thoracic and cardiovascular surgeonThorac Cardiovasc Surg, 61, 154-158, 2013	No comparison of interest
Dong,J., Zhang,S., Liu,H., Li,X., Liu,Y., Du,Y., Novel alternative therapy for	Narrative/Commentary

### Excluded studies - Update

spinal tuberculosis during surgery: Reconstructing with anti-tuberculosis bioactivity implants, Expert Opinion on Drug Delivery Expert Opin. Drug Deliv., 11, 299-305, 2014	
Garg, Nitin, Vohra, Renuka, Minimally invasive surgical approaches in the management of tuberculosis of the thoracic and lumbar spine, Clinical orthopaedics and related research Clin Orthop, 472, 1855-1867, 2014	Does not include comparison of interest
Halezeroglu, Semih, Okur, Erdal, Thoracic surgery for haemoptysis in the context of tuberculosis: what is the best management approach?, Journal of thoracic disease J. thorac. dis., 6, 182-185, 2014	Design: narrative
He, M., Xu, H., Zhao, J., Wang, Z., Anterior debridement, decompression, bone grafting, and instrumentation for lower cervical spine tuberculosis, Spine Journal Spine J., 14, 619-627, 2014	Does not include comparison of interest
Kim, S.J., Postigo, R., Koo, S., Kim, J.H., Total hip replacement for patients with active tuberculosis of the hip: a systematic review and pooled analysis, The bone & joint journal Bone Joint J, 95-B, 578-582, 2013	No meta-analysis
Kumar, Apoorva, Singh, Kulwant, Sharma, Vivek, Surgery in hydrocephalus of tubercular origin: challenges and management, Acta neurochirurgica Acta Neurochir (Wien), 155, 869-873, 2013	Does not include comparison of interest
Li, Litao, Xu, Jianzhong, Ma, Yuanzheng, Tang, Daidi, Chen, Yonglin, Luo, Fei, Li, Dawei, Hou, Tianyong, Zhou, Qiang, Dai, Fei, He, Qingyi, Zhang, Zehua, Surgical strategy and management outcomes for adjacent multisegmental spinal tuberculosis: a retrospective study of forty-eight patients, Spine, 39, E40-E48, 2014	Does not include comparison of interest
Mao, Ningfang, Shi, Zhicai, Ni, Haijian, Zhao, Yingchuan, Tang, Hao, Liu, Deding, Zhu, Xiaodong, Bai, Yushu, Li, Ming, Long-term outcomes of one-stage anterior debridement, bone grafting, and internal fixation for the treatment of lower cervical tuberculosis with kyphosis, British journal of neurosurgery Br J Neurosurg, 27, 160-166, 2013	Does not include comparison of interest
Memon, A.R., Ahmed, G.S., Zardari, A.K., Clinical presentation and different indications of surgery for spinal tuberculosis, Medical Channel Med. Channel, 19, 59-62, 2013	Does not include comparison of interest
Pang, Xiaoyang, Wu, Ping, Shen, Xiongjie, Li, Dongzhe, Luo, Chenke, Wang, Xiyang, One-stage posterior transforaminal lumbar debridement, 360-degree interbody fusion, and posterior instrumentation in treating lumbosacral spinal tuberculosis, Archives of orthopaedic and trauma surgery Arch Orthop Trauma Surg, 133, 1033-1039, 2013	Does not include comparison of interest
Qureshi, M.A., Khaliq, A.B., Afzal, W., Pasha, I.F., Aebi, M., Surgical management of contiguous multilevel thoracolumbar tuberculous spondylitis, European Spine Journal Eur. Spine J., 22, S618-S623, 2013	Does not include comparison of interest
Rawal, Saurabh, Mohan, Kapil, Nene, Abhay, Posterior approach in thoracolumbar tuberculosis: a clinical and radiological review of 67 operated cases, Musculoskeletal surgery Musculoskelet Surg, 97, 67-75, 2013	Does not include comparison of interest
Rifaat, A., Ghaly, M.A., Sobhy, E., Badr, A., Metwally, A., Pulmonary resection can improve treatment outcome in re-treatment pulmonary tuberculosis and its complications, Egyptian Journal of Chest Diseases and Tuberculosis Egypt. J. Chest Dis. Tuberc., 63, 385-388, 2014	Does not include comparison of interest
Vashakidze, Sergo, Gogishvili, Shota, Nikolaishvili, Ketino, Dzidzikashvili, Nino, Tukvadze, Nestani, Blumberg, Henry M., Kempker, Russell R., Favorable outcomes for multidrug and extensively drug resistant tuberculosis patients undergoing surgery, The Annals of thoracic surgery Ann Thorac Surg, 95,	Does not include comparison of interest

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1892-1898, 2013	
Xie,Boxiong, Yang,Yang, He,Wenxin, Xie,Dong, Jiang,Gening, Pulmonary resection in the treatment of 43 patients with well-localized, cavitary pulmonary multidrug-resistant tuberculosis in Shanghai, Interactive cardiovascular and thoracic surgeryInteract Cardiovasc Thorac Surg, 17, 455-459, 2013	Does not include comparison of interest
Zhang,H.-Q., Lin,M.-Z., Li,J.-S., Tang,M.-X., Guo,C.-F., Wu,J.-H., Liu,J.-Y., One-stage posterior debridement, transforaminal lumbar interbody fusion and instrumentation in treatment of lumbar spinal tuberculosis: A retrospective case series, Archives of Orthopaedic and Trauma Surgery.133 (3) (pp 333-341), 2013.Date of Publication: March 2013., 333-341, 2013	No comparison of interest
Zhang,Hong Qi, Lin,Min Zhong, Guo,Hu Bing, Ge,Lei, Wu,Jian Huang, Liu,Jin Yang, One-stage surgical management for tuberculosis of the upper cervical spine by posterior debridement, short-segment fusion, and posterior instrumentation in children, European spine journal : official publication of the European Spine Society, the European Spinal Deformity Society, and the European Section of the Cervical Spine Research SocietyEur Spine J, 22, 72-78, 2013	No comparison of interest
Zhang,Peng, Shen,Yong, Ding,Wen Yuan, Zhang,Wei, Shang,Zikun, The role of surgical timing in the treatment of thoracic and lumbar spinal tuberculosis, Archives of orthopaedic and trauma surgeryArch Orthop Trauma Surg, 134, 167-172, 2014	No comparison of interest
Zhang,Yi, Chen,Chang, Jiang,Ge ning, Surgery of massive hemoptysis in pulmonary tuberculosis: immediate and long-term outcomes, The Journal of thoracic and cardiovascular surgeryJ Thorac Cardiovasc Surg, 148, 651-656, 2014	Does not include a comparison of interest
Zheng,Changkun, Li,Peng, Kan,Wusheng, Video-assisted thoracoscopic anterior surgery combined posterior instrumentation for children with spinal tuberculosis, European journal of pediatric surgery : official journal of Austrian Association of Pediatric Surgery ...[et al] = Zeitschrift fur KinderchirurgieEur J Pediatr Surg, 24, 83-87, 2014	Does not compare surgery with non surgery

## RQ S

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Anon Tuberculosis in Kenya: a follow-up of a national sampling survey of drug resistance and other factors. An East African and British Medical Research Council co-operative investigation, Tubercle, 1970 51 (1) 1-23.	Not UK
Anon. Symposium on drug resistant tuberculosis. Tuberculosis undefeated. Journal of the Irish Medical Association. 1970 63 (393) 112.	Wrong design
Anon. Tuberculosis in Tanzania: a national sampling survey of drug resistance and other factors. Tubercle, 1975 56 (4) 269-94.	Not UK
Anon. Tuberculosis in Kenya: a second national sampling survey of drug resistance and other factors, and a comparison with the prevalence data from the first national sampling survey. An East African and British Medical Research Council Co-operative Investigation, Tubercle, 1978 59 (3) 155-77.	Not UK
Anon. Tuberculosis in Tanzania--a national survey of newly notified cases. Tanzanian/British Medical Research Council Collaborative Study. Tubercle, 1985 66 (3) 161-78.	Not UK
Anon. National survey of tuberculosis notifications in England and Wales in 1983:	No multivariate

Excluded Studies – Original search	Reasons for exclusion
characteristics of disease. Report from the Medical Research Council Tuberculosis and Chest Diseases Unit. <i>Tubercle</i> . 1987 68 (1) 19-32.	analysis
Anon. Management and outcome of pulmonary tuberculosis in adults notified in England and Wales in 1983. Medical Research Council Tuberculosis and Chest Diseases Unit. <i>Thorax</i> , 1988 43 (8) 591-98.	Not Relevant
Anon. Erratum: The emergence of drug-resistant tuberculosis in New York City (New England Journal of Medicine (February 25, 1993) 328 (521-526)). <i>New England Journal of Medicine</i> , 1993 329 (2) 148.	Not UK
Anon. Quarterly communicable disease review January to March 1994. PHLS Communicable Disease Surveillance Centre. <i>Journal of Public Health Medicine</i> . 1994 16 (3) 357-64.	Not full report
Anon. Outbreak of hospital acquired multidrug resistant tuberculosis. <i>Communicable disease report. CDR weekly</i> . 1995 5 (34) 161.	Not relevant
Anon. Tuberculosis: incidence rising, resistance stable, surveillance enhanced, and communication improving. <i>Communicable disease report. CDR weekly</i> . 1999 9 (51) 453-56.	Not relevant
Anon. Drug resistant tuberculosis in north London. <i>Communicable disease report: CDR weekly</i> . 2000 10 (32) 285-88.	Analysis not multivariate
Anon. Emergence of extensive drug resistance during treatment for multidrug-resistant tuberculosis (The New England Journal of Medicine (2008) 359, (2398-400)). <i>New England Journal of Medicine</i> . 2010 363 (17) 1682.	Not relevant
Abid, M, McCarthy, N, et al. Extensively drug-resistant tuberculosis case in the Thames Valley, UK and public health interventions. <i>Journal of Infection and Public Health</i> . 2011 4 (4) 207-10.	Wrong study design
Abubakar,I., Laundy,M.T., French,C.E. Epidemiology and treatment outcome of childhood tuberculosis in England and Wales: 1999-2006. <i>Archives of Disease in Childhood</i> . 2008 93 (12) 1017-21.	Not relevant (does not analyses risk factors, just reports incidence)
Abubakar,I., Crofts,J.P., et al. Investigating urban-rural disparities in tuberculosis treatment outcome in England and Wales. <i>Epidemiology and Infection</i> . 2008 136 (1) 122-27.	Not relevant
Abubakar,I., Moore,J., et al. Extensively drug-resistant tuberculosis in the UK: 1995 to 2007. <i>Thorax</i> . 2009 64 (6) 512-15.	Not relevant, does not asses risk factors
Abubakar, I, Dara, M, Manissero, D. Tackling the spread of drug-resistant tuberculosis in Europe. <i>Lancet</i> . 2012 379 (9813) e21-23.	Wrong design (commentary)
Acocella,G. & Hamilton-Miller,J.M. Can rifampicin use be safely extended? Evidence for non-emergence of resistant strains of <i>Mycobacterium tuberculosis</i> . <i>Lancet</i> . 1977 1 (8014) 740-42.	Not UK
Adegbola,R.A., Hill,P., et al. Surveillance of drug-resistant <i>Mycobacterium tuberculosis</i> in The Gambia. <i>International Journal of Tuberculosis and Lung Disease</i> . 2003 7 (4) 390-93.	Not UK, not relevant
Al-Hajoj,S., Varghese,B., et al. Epidemiology of antituberculosis drug resistance in Saudi Arabia: Findings of the first national survey. <i>Antimicrobial Agents and Chemotherapy</i> . 2013 57 (5) 2161-66.	Not UK
Al Jarad, N., Parastatides, S., et al. Characteristics of patients with drug resistant and drug sensitive tuberculosis in East London between 1984 and 1992. <i>Thorax</i> . 1994 49 (8) 808-10.	Not multivariate analysis
Anderson, C, Story, A, et al. Tuberculosis in UK prisoners: a challenge for control.	No relevant (no

Excluded Studies – Original search	Reasons for exclusion
Journal of Epidemiology and Community Health. 2010 64 (4) 373-76.	analysis of risk factors for DR-TB)
Anderson,L.F., Laurenson,I.F., et al. Trends in multidrug-resistant tuberculosis in Scotland, 2000-7. Euro surveillance: bulletin Europeen sur les maladies transmissibles = European communicable disease bulletin. 2009 14 (11)	Not multivariate analysis
Anderson,S.R. & Maguire,H. Tuberculosis in London: A decade and a half of no decline in tuberculosis epidemiology and control. Thorax. 2007 62 (2) 162-67.	Not relevant
Andrews,J.R., Shah,N.S., et al. Predictors of multidrug-and extensively drug-resistant tuberculosis in a high HIV prevalence community. PLoS ONE. 2010 5 (12)	Not UK
Balabanova,Y., Radiulyte,B., et al. Risk factors for drug-resistant tuberculosis patients in Lithuania, 2002-2008. European Respiratory Journal. 2012 39 (5) 1266-69.	Not UK
Baliza, M., Bach, A.H., et al. High frequency of resistance to the drugs isoniazid and rifampicin among tuberculosis cases in the City of Cabo de Santo Agostinho, an urban area in Northeastern Brazil. Revista da Sociedade Brasileira de Medicina Tropical. 2008 41 (1) 11-16.	Not UK
Bang, D, Andersen, P Henrik, Andersen, A B. Isoniazid-resistant tuberculosis in Denmark: mutations, transmission and treatment outcome. The Journal of infection. 2010 60 (6) 452-57.	Not UK
Barrie, J.D. Non-pulmonary tuberculosis in the west of Scotland, 1963-65. Scottish Medical Journal. 1967 12 (5) 178-82.	Not relevant
Bazira, J, Asiimwe, B B., et al. Mycobacterium tuberculosis spoligotypes and drug susceptibility pattern of isolates from tuberculosis patients in South-Western Uganda. BMC Infectious Diseases. 2011 11 81.	Not relevant (molecular epidemiology)
Blenkush, M.F., Korzeniewska-Kozela, M., et al. HIV-related tuberculosis in British Columbia: indications of a rise in prevalence and a change in risk groups. Clinical and investigative medicine.Medecine clinique et experimentale. 1996 19 (4) 271-78.	Not UK
Breathnach, A.S., de Ruitter, A., et al. An outbreak of multi-drug-resistant tuberculosis in a London teaching hospital. The Journal of hospital infection. 1998 39 (2) 111-17.	Not relevant
Brown, T, Nikolayevskyy, V, Velji, P Associations between Mycobacterium tuberculosis strains and phenotypes. Emerging Infectious Diseases. 2010 16 (2) 272-80.	Not relevant
Bruce, L.G. Drug-resistant Tubercle Bacilli in the Western Region of Scotland 1963. Scottish Medical Journal. 1965 10 281-87.	Not multivariate analysis
Resistant tubercle bacilli Lancet. 1972 2 (7777) 603.	Wrong design
Brust, J.C.M., Berman, A.R., et al. Chest Radiograph Findings and Time to Culture Conversion in Patients with Multidrug-Resistant Tuberculosis and HIV in Tugela Ferry, South Africa. PLoS ONE. 2013 8 (9).	Not UK
Callister, M.E.J., Barringer,J., et al. Pulmonary tuberculosis among political asylum seekers screened at Heathrow Airport, London, 1995-9. Thorax. 2002 57 (2) 152-56.	Not relevant (no analysis of risk factors)
Campbell, R., Sneller, V.-P., et al. Probable transmission of multidrug-resistant tuberculosis in correctional facility – California Journal of the American Medical Association. 1993 269 (8) 978-79.	Not UK

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Carroll, P, Waddell,S J., Butcher,P D. Methionine sulfoximine resistance in Mycobacterium tuberculosis is due to a single nucleotide deletion resulting in increased expression of the major glutamine synthetase, GlnA1. Microbial drug resistance (Larchmont, N.Y.). 2011 17 (3) 351-55.	Not relevant
Casali,N, Nikolayevskyy,V, et al. Evolution and transmission of drug-resistant tuberculosis in a Russian population. Nature Genetics. 2014 46 (3) 279-86.	Not UK
Castro, A.Z., Diaz-Bardalez, B.M., et al. Abnormal production of transforming growth factor beta and interferon by peripheral blood cells of patients with multidrug-resistant pulmonary tuberculosis in Brazil. Journal of Infection 2005 51 (4) 318-24.	Not UK
Churchill, D., Hannan, M., et al. HIV associated culture proved tuberculosis has increased in north central London from 1990 to 1996. Sexually Transmitted Infections. 2000 76 (1) 43-45.	Not multivariate analysis
Churchyard,G.J., Corbett,E.L., et al. Drug-resistant tuberculosis in South African gold miners: Incidence and associated factors. International Journal of Tuberculosis and Lung Disease. 2000 4 (5) 433-40.	Not UK
Review: multidrug-resistant tuberculosis: public health challenges. Tropical medicine & international health: TM & IH. 2004 9 (1) 25-40.	Wrong design (narrative review)
Colijn,C, Cohen,T, Ganesh,A Spontaneous emergence of multiple drug resistance in tuberculosis before and during therapy. PLoS ONE. 2011 6 (3) e18327..	Not relevant
Collier,D., Ochang,E., Bode-Sojobi,I.. Translation from research to clinical practice: Fostering improved patient care through microscopicobservation drug susceptibility for tuberculosis diagnosis in Nigeria. Annals of African Medicine. 2014 13 (3) 142-44.	Not UK.
Collins,C.H. Low incidence of rifampicin-resistant tubercle bacilli Thorax. 1982 37 (7) 526-27.	Not multivariate analysis
Cook,S.A. & Blair,I. Outbreak of tuberculosis associated with a church. Communicable disease and public health / PHLs. 2000 3 (3) 181-83.	Not relevant
Craig,G.M., Booth,H., et al. The impact of social factors on tuberculosis management. Journal of advanced nursing. 2007 58 (5) 418-24.	Not multivariate analysis
Problems of drug resistance in tuberculosis--the newer anti-tuberculosis drugs Postgraduate Medical Journal. 1971 47 (553) 748-52.	Wrong design
Crofts,J.P., Gelb,D., et al. Investigating tuberculosis trends in England. Public Health. 2008 122 (12) 1302-10.	Not Relevant
Crofts,J.P., Andrews,N.J., et al. Risk factors for recurrent tuberculosis in England and Wales, 1998-2005. Thorax. 2010 65 (4) 310-14.	Not relevant (recurrent not DR TB)
D'Souza, D.T.B., Mistry, N.F., et al. High levels of multidrug resistant tuberculosis in new and treatment-failure patients from the revised national tuberculosis control programme in an urban metropolis (Mumbai) in Western India. BMC Public Health. 2009	Not UK
Darbyshire,J.H.. Tuberculosis in Kenya 1984: A third national survey and a comparison with earlier surveys in 1964 and 1974 Tubercle. 1989 70 (1) 5-20.	Not UK
Davies,P.D., Humphries,M.J., et al. Bone and joint tuberculosis. A survey of notifications in England and Wales. The Journal of bone and joint surgery. British volume. 1984 66 (3) 326-30.	Not relevant (no analysis of risk factors just statement of



Excluded Studies – Original search	Reasons for exclusion
	incidence)
Multiple drug resistant tuberculosis: centralized mycobacterial reference using molecular techniques can help The Journal of antimicrobial chemotherapy. 1996 37 (1) 5-6.	Wrong study design (Narrative review)
Drug resistant tuberculosis British Medical Journal. 1995 310 (6976) 400-01.	Wrong design (commentary)
Drug-resistant tuberculosis Journal of the Royal Society of Medicine. 2001 94 (6) 261-63.	Wrong design (narrative review)
Davies, P D.O. Drug resistant tuberculosis: Service for drug resistant tuberculosis exists in the UK. BMJ (Clinical research ed.) 2008 336 (7657) 1324.	Wrong Design (commentary)
Djuretic,T., Herbert,J., et al. Antibiotic resistant tuberculosis in the United Kingdom: 1993-1999. Thorax. 2002 57 (6) 477-82.	Not multivariate analysis
Drug resistant tuberculosis in adults and its treatment Journal of the Royal College of Physicians of London. 1998 32 (4) 314-18.	Wrong design (narrative review)
Drobniewski,F., Eltringham,I., et al. A national study of clinical and laboratory factors affecting the survival of patients with multiple drug resistant tuberculosis in the UK. Thorax. 2002 57 (9) 810-16.	Not multivariate analysis of risk factors
Diagnosing multidrug resistant tuberculosis in Britain. British Medical Journal. 1998 317 (7168) 1263-64.	Wrong design (narrative review/commentary)
Diagnosing multidrug resistant tuberculosis in Britain. Clinical suspicion should drive rapid diagnosis. BMJ (Clinical research ed.). 1998 317 (7168) 1263-64.	Wrong design (narrative/review)
Drobniewski, F.A., Watt, B., et al. A national audit of the laboratory diagnosis of tuberculosis and other mycobacterial diseases within the United Kingdom. Journal of Clinical Pathology. 1999 52 (5) 334-37.	Not relevant
Multiple-drug-resistant tuberculosis. Lancet. 2000 356 Suppl s62.	Wrong design
Drobniewski, F.A., Balabanova, Y.M., et al. Tuberculosis, HIV seroprevalence and intravenous drug abuse in prisoners. The European respiratory journal. 2005 26 (2) 298-304.	Not UK
Drobniewski, F & Balabanova, Y. Clinical features, diagnosis, and management of multiple drug-resistant tuberculosis since 2002. Current Opinion in Pulmonary Medicine. 2004 10 (3) 211-17.	Wrong Design (narrative review)
Drobniewski,F, Balabanova,Y, et al. Drug-resistant tuberculosis, clinical virulence, and the dominance of the Beijing strain family in Russia. JAMA : the journal of the American Medical Association. 2005 293 (22) 2726-31.	Not UK
El Sahly, H.M., Teeter, L.D., et al. Drug-resistant tuberculosis: A disease of target populations in Houston, Texas. Journal of Infection. 2006 53 (1) 5-11.	Not relevant (molecular epidemiology), not UK
Falzon,D. & Infuso,A.. In the European Union, TB patients from former Soviet countries have a high risk of multidrug resistance The international journal of tuberculosis and lung disease: the official journal of the International Union against Tuberculosis and Lung Disease. 2006 10 (9) 954-58.	Not UK
Falzon, D. What is tuberculosis surveillance in the European Union telling us? Clinical infectious diseases: an official publication of the Infectious Diseases Society of America. 2007 44 (10) 1261-67.	Not UK only, not multivariate analysis
Faustini, A. & Hall, A.J. Risk factors for multidrug resistant tuberculosis in Europe:	Not UK

Excluded Studies – Original search	Reasons for exclusion
A systematic review. <i>Thorax</i> . 2006 61 (2) 158-63.	
Flor de Lima, B. Risk factors for extensively drug-resistant tuberculosis: a review. <i>The clinical respiratory journal</i> . 2014 8 (1) 11-23.	Not UK only
Fortes, A., Pereira, K., et al. Detection of in vitro interferon- and serum tumour necrosis factor-alpha in multidrug-resistant tuberculosis patients. <i>Clinical and Experimental Immunology</i> 2005 141 (3) 541-48.	Not multivariate analysis
Drug-resistant tuberculosis in Waltham forest, 1953-68. A clinical and epidemiological study. <i>Thorax</i> . 1971 26 (4) 376-83.	Not multivariate analysis
Gallego,B, Sintchenko,V, et al. Three-year longitudinal study of genotypes of <i>Mycobacterium tuberculosis</i> in a low prevalence population. <i>Pathology</i> . 2010 42 (3) 267-72.	Not UK
Gandhi,N.R., Moll,A., et al. Extensively drug-resistant tuberculosis as a cause of death in patients co-infected with tuberculosis and HIV in a rural area of South Africa. <i>Lancet</i> . 2006 368 (9547) 1575-80.	Not UK
Garin,B., Costanzo,B., et al. Drug-resistant <i>Mycobacterium tuberculosis</i> strains in tuberculosis inpatients in Bangui, Central African Republic. <i>AIDS (London, England)</i> . 1995 9 (2) 213-14.	Not UK
Phytochemicals for bacterial resistance--strengths, weaknesses and opportunities. <i>Planta Medica</i> . 2008 74 (6) 594-602.	Not Relevant
Multidrug-resistant tuberculosis. <i>British journal of hospital medicine</i> . 1995 53 (7) 305-07.	Not relevant
Evolution of drug resistance in <i>Mycobacterium tuberculosis</i> : clinical and molecular perspective. <i>Antimicrobial Agents and Chemotherapy</i> . 2002 46 (2) 267-74.	Wrong design (narrative review)
Githui,W.A., Juma,E.S., et al. Antituberculosis drug resistance surveillance in Kenya, 1995. <i>The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease</i> 1998 2 (6) 499-505.	Not UK
Glynn,J.R., Jenkins,P.A., et al. Patterns of initial and acquired antituberculosis drug resistance in Karonga District, Malawi. <i>Lancet</i> . 1995 345 (8954) 907-10.	Not UK
Gonzalo,X., Hutchison,D.C.S., et al. Multidrug-resistant tuberculosis in the United Kingdom and Lithuania. <i>The international journal of tuberculosis and lung disease: the official journal of the International Union against Tuberculosis and Lung Disease</i> . 2014 18 (6) 663-65.	Not multivariate analysis
Goyal,M. & Ormerod,L.P. Epidemiology of an outbreak of drug-resistant tuberculosis in the U.K. using restriction fragment length polymorphism. <i>Clinical science (London, England : 1979)</i> . 1994 86 (6) 749-51.	Not relevant
Grandjean,L., Crossa,A., et al. Tuberculosis in household contacts of multidrug-resistant tuberculosis patients. <i>The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease</i> . 2011 15 (9) 1164-6i.	Not UK
Hannan,M.M., Peres,H., et al. Investigation and control of a large outbreak of multi-drug resistant tuberculosis at a central Lisbon hospital. <i>The Journal of hospital infection</i> . 2001 47 (2) 91-97.	Not UK
Hawken,M., Nunn,P., et al. Increased recurrence of tuberculosis in HIV-1-infected patients in Kenya. <i>Lancet</i> . 1993 342 (8867) 332-37.	Not UK
Heath,T.C., Roberts,C., Winks,M.. The epidemiology of tuberculosis in New South	Not UK

Excluded Studies – Original search	Reasons for exclusion
Wales 1975-1995: the effects of immigration in a low prevalence population. The international journal of tuberculosis and lung disease: the official journal of the International Union against Tuberculosis and Lung Disease. 1998 2 (8) 647-54.	
Hayward,A.C. & Herbert,J. Tuberculosis drug resistance in England and Wales. How much is 'home-grown'? Epidemiology and Infection. 2000 125 (2) 463-64.	Not relevant
Heffernan,J.F., Nunn,A.J., Peto,J Tuberculosis in Scotland: a national sample survey (1968-70). 2. A two-year follow-up of newly-diagnosed respiratory tuberculosis notified in 1968. Tubercle. 1976 57 (3) 161-75. .	Not relevant
Hesseling, A.C., Kim,S., et al. High prevalence of drug resistance amongst HIV-exposed and -infected children in a tuberculosis prevention trial. International Journal of Tuberculosis and Lung Disease. 2012 16 (2) 192-95.	Not UK
Hersi,A., Elwood,K., et al. Multidrug-resistant tuberculosis in Alberta and British Columbia, 1989 to 1998. Canadian respiratory journal : journal of the Canadian Thoracic Society. 1999 6 (2) 155-60.	Not UK
Howell,F. & Kelly,P. Pulmonary tuberculosis in the Republic of Ireland: an epidemiological profile from a single unit. Respiratory Medicine. 1990 84 (2) 111-17.	Not UK
Hutchison,D.C.S. & Drobniowski,F.A. Management of multiple drug-resistant tuberculosis. Respiratory Medicine. 2003 97 (1) 65-70.	Not relevant
Irish,C., Herbert,J., et al. Database study of antibiotic resistant tuberculosis in the United Kingdom, 1994-6. BMJ (Clinical research ed.). 1999 318 (7182) 497-98.	Not multivariate analysis
Irving,H.C. Tuberculous mediastinal lymphadenopathy in Bradford. Clinical Radiology. 1980 31 (6) 685-90.	Not relevant
Jacob,B J., Krapp,F, et al. Accounting for autocorrelation in multi-drug resistant tuberculosis predictors using a set of parsimonious orthogonal eigenvectors aggregated in geographic space. Geospatial health. 2010 4 (2) 201-17.	Not UK
Jain,S K., Ordonez,A, et al. BioMed Pediatric tuberculosis in young children in India: a prospective study. Research International. 2013 2013 783698.	Not UK
Rifampicin resistance in tuberculosis outbreak, London, England. Emerging Infectious Diseases. 2005 11 (6) 931-34.	Not relevant (molecular epidemiology)
Increasing numbers of isoniazid-mono-resistant TB in the WSA. Thorax. 2009 64 (4) 338	Not UK, not full report
Jones,C. Children and multidrug-resistant tuberculosis. The Lancet. 2011 377 (9775) 1404-05.	Wrong design (commentary)
Jordan,T.S. & Cullen,D. A centralised electronic Multidrug-Resistant Tuberculosis Advisory Service: the first 2 years. The international journal of tuberculosis and lung disease: the official journal of the International Union against Tuberculosis and Lung Disease. 2012 16 (7) 950-54.	Not relevant
Kapata,N, Chanda-Kapata,P, et al. Multidrug-resistant TB in Zambia: review of national data from 2000 to 2011. Tropical medicine & international health: TM & IH. 2013 18 (11) 1386-91.	Not UK
Kenyon,T.A., Driver,C., et al. Immigration and tuberculosis among children on the United States-Mexico border, County of San Diego, California. Pediatrics. 1999 104 (1) e8.	Not UK
Kimerling,M.E., Slavuckij,A., et al. The risk of MDR-TB and polyresistant tuberculosis among the civilian population of Tomsk city, Siberia, 1999. The	Not UK

Excluded Studies – Original search	Reasons for exclusion
international journal of tuberculosis and lung disease: the official journal of the International Union against Tuberculosis and Lung Disease. 2003 7 (9) 866-72.	
Kritski,A.L., Rodrigues de Jesus,L.S., et al. Retreatment tuberculosis cases. Factors associated with drug resistance and adverse outcomes. Chest. 1997 111 (5) 1162-67.	Not UK, not multivariate analysis
Kumar,D., Watson,J.M., et al. Tuberculosis in England and Wales in 1993: Results of a national survey. Thorax. 1997 52 (12) 1060-67.	Not multivariate analysis
Kumar,D., Watson,J.M., et al. Tuberculosis in England and Wales in 1993: results of a national survey. Public Health Laboratory Service/British Thoracic Society/Department of Health Collaborative Group. Thorax. 1997 52 (12) 1060-67.	Not relevant
Lawson,L., Yassin,M.A., et al. Resistance to first-line tuberculosis drugs in three cities of Nigeria. Tropical Medicine and International Health. 2011 16 (8) 974-80.	Not UK
The ethionamide sensitivity of British pre-treatment strains of Mycobacterium tuberculosis. Tubercle. 1966 47 (2) 198-206.	Not relevant
Multidrug-resistant tuberculosis. Trusts fail to combat TB risk. Nursing times 2000 96 (47) 6.	Wrong design
Leitch,A.G., Rubilar,M., et al. Why disease due to Mycobacterium tuberculosis is less common than expected in HIV-positive patients in Edinburgh. Respiratory Medicine. 1995 89 (7) 495-97.	Analysis not multivariate
Lewis,J J.C. Increasing drug resistant tuberculosis in the UK. BMJ (Clinical research ed.) 2008 336 (7655) 1201-02.	Wrong design (commentary)
Symposium on drug resistant tuberculosis. Clinical drug resistance in Ireland 1964-68. Journal of the Irish Medical Association. 1970 63 (393) 79-82.	Not relevant
Antituberculous drug resistance in western Canada (1993 to 1994) Canadian Respiratory Journal. 1997 4 (2) 71-75.	Not UK
Lowbridge,C & Christensen,A. EpiReview: tuberculosis in NSW, 2009-2011. New South Wales public health bulletin. 2013 24 (1) 3-9	Not UK
Mycobacterium tuberculosis resistance to rifampicin and ethambutol: a clinical survey. Thorax. 1977 32 (1) 1-4.	Not relevant (does not analysis risk factors using multivariate analysis)
Maddison,P. & Howse,M.L.P.. Tuberculous meningitis in the north-east of England 1985-1995. Neurological Infections and Epidemiology. 1997 2 (3) 167-72.	Not relevant
Maguire,H., Ruddy,M., et al. Multidrug resistance emerging in North London outbreak. Thorax. 2006 61 (6) 547-48.	Not full report, no analysis of risk factors
Majumdar,S., O'Brien,D., et al. The 'frozen state' of drug-resistant tuberculosis: Notes from the field in Abkhazia. Internal Medicine Journal. 2011 41 (12) 805-08.	Not UK, wrong design
Mamo,J.P. & Brij,S.O. Abdominal tuberculosis: a retrospective review of cases presenting to a UK district hospital. QJM : monthly journal of the Association of Physicians. 2013 106 (4) 347-54.	Not relevant
Drug resistance in untreated pulmonary tuberculosis in England and Wales during 1960. A survey by the Public Health Laboratory Service. Tubercle. 1961 42 308-13.	Not multivariate analysis
Bacteriological aspects of the national register of drug-resistant tuberculosis in its first two years. Monthly bulletin of the Ministry of Health and the Public Health Laboratory Service. 1965 24 2-6.	Not multivariate analysis
Martinez,D., Heudebert,G., et al. Clinical prediction rule for stratifying risk of pulmonary multidrug-resistant tuberculosis. PLoS ONE. 2010 5 (8)	Not UK

Excluded Studies – Original search	Reasons for exclusion
McEvoy,M. Tuberculosis in London: a review, and an account of the work of the London Consultants in Communicable Disease Control Group Working Party. The Journal of hospital infection. 1995 30 Suppl 296-305.	Not relevant (no analysis of risk factors, just description of incidence)
Meintjes,G., Rangaka,M.X., et al. Novel relationship between tuberculosis immune reconstitution inflammatory syndrome and antitubercular drug resistance. Clinical Infectious Diseases. 2009 48 (5) 667-76.	Not multivariate analysis
Melzer,M. & Storrington,R.A. Tuberculosis in an area bordering east London: significant local variations when compared to national data. Infection 2000 28 (2) 103-05.	Not multivariate analysis
Merker,M., Kohl,T.A., et al. Whole genome sequencing reveals complex evolution patterns of multidrug-resistant Mycobacterium tuberculosis Beijing strains in patients. PLoS ONE. 2013 8 (12)	Not UK, not relevant (molecular epidemiology)
Meyssonier,V, Veziris,N, et al. Increase in primary drug resistance of Mycobacterium tuberculosis in younger birth cohorts in France. The Journal of infection.2012 64 (6) 589-95.	Not UK
Mi,F, Jiang,G, et al. Is resistance to anti-tuberculosis drugs associated with type 2 diabetes mellitus? A register review in Beijing, China. Global health action. 2014 7 24022.	Not UK
Miller,A.B., Tall,R., et al. Primary drug resistance in pulmonary tuberculosis in Great Britain: second national survey, 1963. Tubercle. 1966 47 (1) 92-108.	Not multivariable analysis
Problems of tuberculosis control in the United Kingdom. Public Health. 1970 84 (5) 210-18.	Wrong design
Mills,H L. & Cohen,T. Community-wide isoniazid preventive therapy drives drug-resistant tuberculosis: a model-based analysis. Science Translational Medicine 2013 5 (180) 180ra49.	Wrong study design (mathematical modelling)
Min, S M, Kelly, P., Byrne, C.I Antibiotic resistant tuberculosis and bovine tuberculosis in an Irish hospital population (1991 to 2001). Medical Journal. 2005 98 (2) 38-40.	Not relevant
Mitchell,S.L., Seoudi,N., Hutchison,D.C.S. Multidrug-resistant tuberculosis: resistance rates to first and reserve antituberculosis drugs in the UK in 2008/9 and the role of rapid molecular tests for drug resistance. Thorax. 2011 66 (7) 630-31.	Not relevant
Mitchison,D.A. Comparison of the sensitivity to thiacetazone of tubercle bacilli from patients in Britain, East Africa, South India and Hong Kong. Tubercle. 1964 45 360-69.	Not relevant
Monie,R.D., Hunter,A.M., et al. Management of extra-pulmonary tuberculosis (excluding miliary and meningeal) in south and west Wales (1976-8).British medical journal (Clinical research ed.).1982 285 (6339) 415-18.	Not relevant
Moniruzzaman,A., Elwood,R.K., Schulzer,M. Impact of country of origin on drug-resistant tuberculosis among foreign-born persons in British Columbia. The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease 2006 10 (8) 844-50.	Not UK
Moniruzzaman,A., Elwood,R.K., Schulzer,M. A population-based study of risk factors for drug-resistant TB in British Columbia. The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease, 2006 10 (6) 631-38.	Not UK

Excluded Studies – Original search	Reasons for exclusion
Mukinda,F.K., Theron,D., et al. Rise in rifampicin-mono-resistant tuberculosis in Western Cape, South Africa International Journal of Tuberculosis and Lung Disease. 2012 16 (2) 196-202.	Not UK
Murray,J., Sonnenberg,P., Shearer,S.. Drug-resistant pulmonary tuberculosis in a cohort of Southern African goldminers with a high prevalence of HIV infection. South African Medical Journal. 2000 90 (4 I) 381-86.	Not UK
Muwonge,A, Malama,S, et al. Molecular epidemiology, drug susceptibility and economic aspects of tuberculosis in Mubende district, Uganda. PLoS ONE, 2013 8 (5) e64745.	Not UK
Twenty years of bone and joint tuberculosis in Bradford. A comparison of the disease in the indigenous and Asian populations. The Journal of bone and joint surgery. 1974 56-B (4) 760-65.	Not relevant
Nkinda,S.J. & Darbyshire,J.H.. Tuberculosis in Tanzania. A national survey of newly notified cases. Tubercle. 1985 66 (3) 161-78.	Not UK
Nutini,S. & Tortoli,E.. Multidrug-resistant tuberculosis in the Florence province from 1992 to 1995. The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease, 1998 2 (6) 484-89.	Not UK
Oladimeji,O, Isaakidis,P, et al. Intensive-phase treatment outcomes among hospitalized multidrug-resistant tuberculosis patients: results from a nationwide cohort in Nigeria. PLoS ONE 2014 9 (4) e94393.	Not UK
Ormerod,L.P. & Harrison,J.M. Drug resistance in Mycobacterium tuberculosis: a survey over 25 years in Blackburn. Thorax. 1986 41 (12) 946-50.	Not multivariate analysis
Ormerod,L.P. & Harrison,J.M. Drug resistance trends in Mycobacterium tuberculosis: Blackburn 1985-89. Tubercle, 1990 71 (4) 283-85.	Not relevant
Ormerod,L.P. The management of pulmonary tuberculosis notified in England and Wales in 1993. TX PHOTO. Journal of the Royal College of Physicians of London. 1997 31 (6) 662-65.	Not relevant
Ormerod,L.P., Green,R.M., Horsfield,N. Drug resistance trends in M. tuberculosis: Blackburn 1990-1999. The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease. 2001 5 (10) 903-05.	Not multivariate analysis
Ormerod LP The management of pulmonary and lymph node tuberculosis notified in England and Wales in 1998. Clinical medicine (London, England) 2003 3 (1) 57-61.	Not relevant (no analysis of risk factors)
Pande,B.R. & Martischnig,K.M. A two-year follow-up of 181 sputum-positive tuberculosis patients treated in Gateshead between 1961 and 1966 Tubercle. 1970 51 (1) 39-43.	Not relevant
Pardini,M., Hewison,C., et al. Pyrazinamide resistance in multidrug-resistant strains of Mycobacterium tuberculosis isolated in Abkhazia. Journal of Chemotherapy. 2007 19 (1) 106-07.	Not UK
Pardini,M., Niemann,S., et al. Characteristics of drug-resistant tuberculosis in Abkhazia (Georgia), a high-prevalence area in Eastern Europe. Tuberculosis. 2009 89 (4) 317-24.	Not UK
Quy,H.T., Buu,T.N., et al. Drug resistance among smear-positive tuberculosis patients in Ho Chi Minh City, Vietnam. International Journal of Tuberculosis and Lung Disease. 2006 10 (2) 160-66.	Not UK



Excluded Studies – Original search	Reasons for exclusion
Radhakrishnan,S. Risk of tuberculosis among contacts of isoniazid-resistant and isoniazid-susceptible cases. International Journal of Tuberculosis and Lung Disease. 2011 15 (6) 782-8+i+i.	Not relevant
Risk factors for the spread of antibiotic-resistant bacteria. Drugs. 1998 55 (3) 323-30.	Wrong design
Roberts-Witteveen,A R. & Christensen,A. EpiReview: tuberculosis in NSW, 2008 New South Wales public health bulletin. 2010 21 (7-8) 174-82.	Not UK
The incidence of genito-urinary tuberculosis in the Western Region of Scotland. British journal of urology. 1970 42 (6) 637-41.	Not relevant
Ruddy,M., Balabanova,Y., et al. Rates of drug resistance and risk factor analysis in civilian and prison patients with tuberculosis in Samara Region, Russia. Thorax. 2005 60 (2) 130-35.	Not UK
Ruddy,M.C., Davies,A.P., et al. Outbreak of isoniazid resistant tuberculosis in north London. Thorax. 2004 59 (4) 279-85.	Not multivariate analysis
Sails,A.D., Barrett,A., et al. Molecular epidemiology of Mycobacterium tuberculosis in East Lancashire 2001-2009. Thorax. 2011 66 (8) 709-13.	Not relevant (molecular epidemiology)
Sam,I.C, Drobniewski,F, et al. Mycobacterium tuberculosis and rifampin resistance, United Kingdom. Emerging Infectious Diseases, 2006 12 (5) 752-59.	Not relevant
Sandman,L., Schluger,N.W., Davidow,A.L. Risk factors for rifampin-mono-resistant tuberculosis: A case-control study. American Journal of Respiratory and Critical Care Medicine. 1999 159 (2) 468-72.	Not UK
Schaaf,H.S., Marais,B.J., et al. Surveillance of antituberculosis drug resistance among children from the Western Cape Province of South Africa - An upward trend. American Journal of Public Health. 2009 99 (8) 1486-90.	Not UK
Seddon,J.A., Hesseling,A.C., et al. Culture-confirmed multidrug-resistant tuberculosis in children: Clinical features, treatment, and outcome. Clinical Infectious Diseases. 2012 54 (2) 157-66.	Not UK, not relevant (assessed influence of factors on treatment outcome in MDR patients, not on incidence of MDR)
Seddon,JA., Hesseling,AC., et al. Risk factors for infection and disease in child contacts of multidrug-resistant tuberculosis: a cross-sectional study. BMC Infectious Diseases. 2013 13 392.	Not UK
Senol,G. & Komurcuoglu,B.. Drug resistance of Mycobacterium tuberculosis in Western Turkey: A retrospective study from 1100-bed teaching hospital. Journal of Infection. 2005 50 (4) 306-11.	Not UK
Sergeev,R., Colijn,C., Murray,M. Modeling the dynamic relationship between HIV and the risk of drug-resistant tuberculosis. Science Translational Medicine. 2012 4 (135)	Wrong study design (mathematical modelling)
Shah,N.S., Wright,A., et al. Worldwide emergence of extensively drug-resistant tuberculosis. Emerging Infectious Diseases. 2007 13 (3) 380-87.	Not UK, not relevant
Shahemabadi,A.S., Hosseini,A.Z., et al. Evaluation of T cell immune responses in multi-drug-resistant tuberculosis (MDR-TB) patients to Mycobacterium tuberculosis total lipid antigens. Clinical and Experimental Immunology. 2007 149 (2) 285-94.	Not multivariate analysis
Sharaf Eldin,G.S., Fadl-Elmula,I., et al. Tuberculosis in Sudan: A study of Mycobacterium tuberculosis strain genotype and susceptibility to anti-tuberculosis	Not UK

Excluded Studies – Original search	Reasons for exclusion
drugs. BMC Infectious Diseases. 2011 11	
Sharp,J.F. Abdominal tuberculosis in East Birmingham--a 16 year study. Postgraduate Medical Journal. 1987 63 (741) 539-42.	Not relevant
Sheldon,C.D., Probert,C.S., et al. Incidence of abdominal tuberculosis in Bangladeshi migrants in east London. Tubercle and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease. 1993 74 (1) 12-15.	Not relevant
Shin,S.S., Keshavjee,S., et al. Development of extensively drug-resistant tuberculosis during multidrug-resistant tuberculosis treatment. American Journal of Respiratory and Critical Care Medicine. 2010 182 (3) 426-32.	Not UK
Shorten,R.J., Mcgregor,A.C., et al. When is an outbreak not an outbreak? Fit, divergent strains of Mycobacterium tuberculosis display independent evolution of drug resistance in a large London outbreak. The Journal of antimicrobial chemotherapy. 2013 68 (3) 543-49.	Not relevant (molecular epidemiology)
Singhal,A, Gulati,A, Frizell,R. Abdominal tuberculosis in Bradford, UK: 1992-2002. European journal of gastroenterology & hepatology. 2005 17 (9) 967-71.	Not relevant
Skolimowska,K.H., Rangaka,M.X., et al. Altered Ratio of IFN- $\gamma$ /IL-10 in Patients with Drug Resistant Mycobacterium tuberculosis and HIV- Tuberculosis Immune Reconstitution Inflammatory Syndrome. PLoS ONE 2012 7 (10)	Not relevant
Slama,K., Chiang,C.Y., et al. Tobacco and tuberculosis: a qualitative systematic review and meta-analysis. The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease. 2007 11 (10) 1049-61.	Not UK only
Sonnenberg,P., Godfrey-Faussett,P., et al. Classification of drug-resistant tuberculosis. Lancet.2000 356 (9245) 1930-32.	Not relevant
Sotgiu,G., Ferrara,G., et al. Epidemiology and clinical management of XDR-TB: a systematic review by TBNET (Structured abstract). European Respiratory Journal. 2009 33 (4) 871-81.	Not UK, not relevant
Sotgiu,G.The Good news about a bad subject: scientific evidence to help defeat multidrug/extensively drug-resistant tuberculosis. European respiratory journal. 2014 44 (1) 5-7.	Wrong study design (commentary)
Tuberculosis--epidemiology in England and Wales British Medical Journal. 1972 1 (5797) 422-23.	Not relevant
Stuckler,D, Basu,S, McKee,M. Mass incarceration can explain population increases in TB and multidrug-resistant TB in European and central Asian countries. Proceedings of the National Academy of Sciences of the United States of America. 2008 105 (36) 13280-85.	Not UK only
Taylor,I.K., Evans,D.J., et al. Mycobacterial infection in HIV seropositive and seronegative populations, 1987-93. Thorax. 1995 50 (11) 1147-50.	Not multivariate analysis
Taype,C.A., Agapito,J.C., et al. Genetic diversity, population structure and drug resistance of Mycobacterium tuberculosis in Peru. Infection, genetics and evolution : journal of molecular epidemiology and evolutionary genetics in infectious diseases. 2012 12 (3) 577-85.	Not UK
Temple,B., Ayakaka,I., et al. Rate and amplification of drug resistance among previously-treated patients with tuberculosis in Kampala, Uganda. Clinical Infectious Diseases. 2008 47 (9) 1126-34.	Not UK

Excluded Studies – Original search	Reasons for exclusion
Teo,S.S.S., Riordan,A., et al. Tuberculosis in the United Kingdom and Republic of Ireland. Archives of Disease in Childhood. 2009 94 (4) 263-67.	Not relevant
Pulmonary Tuberculosis in retrospect and prospect. Annals of the Royal College of Surgeons of England. 1964 35 67-83.	Wrong design (lecture/commentary)
The Birmingham tuberculosis drug resistance register 1956-1970. Tubercle. 1972 53 (1) 1-8.	Not multivariate analysis
Thomas,H.E. The Birmingham Tuberculosis Drug Resistance Register, 1956-1983. Tubercle. 1986 67 (3) 179-88.	Not multivariate analysis
The ecology of drug-resistant tubercle bacilli in Eastern Glasgow. Scottish Medical Journal. 1969 14 (7) 228-33.	Not relevant
Studies of the geographical spread of drug-resistant tubercle bacilli in a city Journal of Medical Microbiology. 1971 4 (2) 3.	Not relevant
Traub,M., Colchester,A.C., Kingsley,D.P. Tuberculosis of the central nervous system. The Quarterly journal of medicine. 1984 53 (209) 81-100.	Not relevant
Ulmasova,D.J., Uzakova,G., et al. Multidrug-resistant tuberculosis in Uzbekistan: Results of a nationwide survey, 2010 to 2011. Eurosurveillance 2013 18 (42) n. pag..	Not UK
van den Boogaard,J., Semvua,H.H., et al. Low rate of fluoroquinolone resistance in Mycobacterium tuberculosis isolates from northern Tanzania. Journal of Antimicrobial Chemotherapy. 2011 66 (8) 1810-14.	Not UK
Van Halsema,C.L., Fielding,K.L., et al. Trends in drug-resistant tuberculosis in a gold-mining workforce in South Africa, 2002-2008. The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease. 2012 16 (7) 967-73.	Not UK, not multivariate analysis
van Halsema,Clare L., Fielding,Katherine L., et al. Tuberculosis outcomes and drug susceptibility in individuals exposed to isoniazid preventive therapy in a high HIV prevalence setting. AIDS (London, England) 2010 24 (7) 1051-55.	Not a multivariate analysis
Wang,J.S., Allen,E.A., et al. Tuberculosis in British Columbia among immigrants from five Asian countries, 1982-85. Tubercle. 1989 70 (3) 179-86.	Not UK
Warburton,A.R., Jenkins,P.A., Waight,P.A. Drug resistance in initial isolates of Mycobacterium tuberculosis in England and Wales, 1982-1991. Communicable disease report. CDR review 1993 3 (13) R175-79.	Not relevant (no multivariate analysis of risk factors)
Warndorff,D.K., Yates,M., et al. Trends in antituberculosis drug resistance in Karonga District, Malawi, 1986-1998. The international journal of tuberculosis and lung disease: the official journal of the International Union against Tuberculosis and Lung Disease.2000 4 (8) 752-57.	Not UK
The impact of worldwide drug resistance on the United Kingdom. Annals of the New York Academy of Sciences. 2001 953 120-23.	Wrong design
Tuberculosis in Britain today. BMJ (Clinical research ed.). 1993 306 (6872) 221-22.	Wrong design (commentary)
Drug resistant tuberculosis. British Medical Journal. 1992 305 (6857) 831-32.	Not relevant
Williams,B, Ramroop,S, et al. Management of pediatric contacts of multidrug resistant tuberculosis in the United Kingdom. The Pediatric infectious disease journal. 2013 32 (8) 926-27.	Not full report, not relevant
Williams,B, Ramroop,S, et al. Multidrug-resistant tuberculosis in UK children: presentation, management and outcome. The European respiratory journal. 2013	Not multivariate analysis

Excluded Studies – Original search	Reasons for exclusion
41 (6) 1456-58.	
Wosornu, D. & MacIntyre, D. An outbreak of isoniazid resistant tuberculosis in Glasgow 1981-1988. <i>Respiratory Medicine</i> . 1990 84 (5) 361-64.	Not multivariate analysis
Wright, A., Zignol, M., et al. Epidemiology of antituberculosis drug resistance 2002-07: an updated analysis of the Global Project on Anti-Tuberculosis Drug Resistance Surveillance. <i>The Lancet</i> . 2009 373 (9678) 1861-73.	Not UK
Yang, XY, Li, Y P, et al. Time and spatial distribution of multidrug-resistant tuberculosis among Chinese people, 1981-2006: a systematic review. <i>International journal of infectious diseases: IJID: official publication of the International Society for Infectious Diseases</i> . 2010 14 (10) e828-37.	Not UK
Yates, M.D. & Collins, C.H.. 'Classical' and 'Asian' variants of <i>Mycobacterium tuberculosis</i> isolated in South East England 1977-1980. <i>Tubercle</i> . 1982 63 (1) 55-61.	Not multivariate analysis
Yates, M.D. & Grange, J.M. The nature of mycobacterial disease in south east England, 1977-84. <i>Journal of Epidemiology and Community Health</i> . 1986 40 (4) 295-300.	Not multivariate analysis
Yates, M.D. A bacteriological survey of tuberculosis due to the human tubercle bacillus ( <i>Mycobacterium tuberculosis</i> ) in south-east England: 1984-91. <i>Epidemiology and Infection</i> . 1993 110 (3) 609-19.	Not multivariate analysis
Yezli, S. Tuberculosis in Saudi Arabia: prevalence and antimicrobial resistance. <i>Journal of chemotherapy (Florence, Italy)</i> . 2012 24 (1) 1-5.	Not UK
Yuen, C.M., Tolman, A.W., et al. Isoniazid-resistant tuberculosis in children: a systematic review (Provisional abstract). <i>Database of Abstracts of Reviews of Effects</i> . 2013 (4) e217-26.	Not UK only
Zhao, Y., Xu, S., et al. National survey of drug-resistant tuberculosis in China. <i>New England Journal of Medicine</i> . 2012 366 (23) 2161-70.	Not UK only
Zignol, M, Sismanidis, C, et al. Multidrug-resistant tuberculosis in children: evidence from global surveillance. <i>The European respiratory journal</i> . 2013 42 (3) 701-07.	Not UK only
Zignol, M, Dara, M, et al. Drug-resistant tuberculosis in the WHO European Region: an analysis of surveillance data. <i>Drug resistance updates : reviews and commentaries in antimicrobial and anticancer chemotherapy</i> . 2013 16 (6) 108-15.	Not UK

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RQ UVW.Excluded Studies – Original Search	
Reference	Reason for exclusion
Chemotherapy for tuberculosis. <i>Bulletin of the Hong Kong Medical Association</i> . Vol.31 (pp 65-75), 1979.	review, not SR
. Comparison of three 6-month regimens for smear-positive cases of pulmonary tuberculosis: A Singapore Government Tuberculosis Service/British Medical Research Council Investigation. <i>Bull Int Union Tuberc</i> 1984; 59(1-2):14-15.	short research report
. Controlled clinical evaluation of three intermittent regimens employing low-dosage schedules of rifampicin in original treatment of pulmonary tuberculosis. Preliminary	excluded DR participants

RQ UVW.Excluded Studies – Original Search	
data on effectiveness and side effects. Scandinavian journal of respiratory diseases. Supplementum 1973; 84:180-85.	
Controlled clinical trial of a 3-month and two 5-month regimens in pulmonary tuberculosis. Second Madras short-course study. Bulletin of the International Union against Tuberculosis.58 (2) (pp 97-100), 1983.	short research report
Effect of initial isoniazid resistance on response to chemotherapy of tuberculosis: A review of clinical trials. Annals of Saudi Medicine.11 (1) (pp 3-8), 1991.	review, not SR
Effectiveness of standard short-course chemotherapy for treating tuberculosis and the impact of drug resistance on its outcome (Structured abstract). International Journal of Evidence-Based Healthcare 2006; 4(2): 101-17.	SR of cohort studies
Efficacy of thiacetazone plus isoniazid in Hong Kong: a Hong Kong tuberculosis treatment service-British Medical Research Council investigation. Tubercle 1968; 49: Suppl-2.	not DR
Mass ambulatory chemotherapy in the treatment of tuberculosis in a predominantly urban community. The American review of respiratory disease 1967; 95(3):384-97.	review, not SR
Newer and second-line drugs in the treatment of drug-resistant tuberculosis in children. Medical Clinics of North America 1967; 51(5):1153-67.	review, not SR
Response of patients with initial drug resistance to short-course chemotherapy. Bulletin of the International Union against Tuberculosis.60 (1-2) (pp 38-39), 1985.	IS unable to obtain
Results of clinical studies with capreomycin, ethambutol and rifampicin in the Heckeshorn Hospital, Berlin. Scandinavian journal of respiratory diseases. Supplementum 1969; 69: 43-53.	not RCT
Rifampicin in newly detected, untreated cases of pulmonary tuberculosis. Acta tuberculosea et pneumologica Belgica 1969; 60(3):554-56.	short research report
Short-course chemotherapy of pulmonary tuberculosis - second tuberculosis association of India trial. Indian J Tuberc 1984; 31(2):81-88.	excluded DR participants
Should isoniazid be used in retreatment of tuberculosis despite acquired isoniazid resistance? American Review of Respiratory Disease 1981; 123(3):262-64.	review, not SR
The requirement of capreomycin, ethambutol and rifampicin in chronic pulmonary tuberculosis in Helsinki on the basis of resistance indications. Scandinavian journal of respiratory diseases. Supplementum 1969; 69:15-16.	short research report
Anon. A controlled clinical trial of the role of thiacetazone-containing regimens in the treatment of pulmonary tuberculosis in Singapore. Singapore Tuberculosis Services-Brompton Hospital-British Medical Research Council Investigation. Tubercle 1971;52 (2):88-116.	excluded DR participants
Anon. A controlled clinical trial of the role of thiacetazone-containing regimens in the treatment of pulmonary tuberculosis in Singapore: second report. Tubercle 1974; 55(4):251-60.	very small number of DR participants
Anon. Controlled trial of intermittent regimens of rifampin plus isoniazid for pulmonary tuberculosis in Singapore. The results up to 30 months. Am Rev Respir Dis 1977; 116(5):807-20.	very small number of DR participants
Anon. Co-operative controlled trial of a standard regimen of streptomycin, PAS and isoniazid and three alternative regimens of chemotherapy in Britain. A report from the British Medical Research Council. Tubercle 1973; 54(2):99-129.	excluded DR participants
Anon. Ethambutol in re-treatment of pulmonary tuberculosis. The American review of respiratory disease 1968; 98(5):825-36.	re-treatment, unclear if DR
Anon. Evaluation of a non-rifampicin continuation phase (6HE) following thrice-weekly intensive phase for the treatment of new sputum positive pulmonary tuberculosis. The Indian journal of tuberculosis 2007; 54(2):84-90.	not DR

RQ UVW.Excluded Studies – Original Search	
Anon. Low rate of emergence of drug resistance in sputum positive patients treated with short course chemotherapy. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2001; 5(1):40-45.	retrospective analysis, original trials unreferenced
Banu Rekha,V.V., Rajaram,K., Kripasankar,A.S., Parthasarathy,R., Umopathy,K.C., Sheikh,I., et al. Efficacy of the 6-month thrice-weekly regimen in the treatment of new sputum smear-positive pulmonary tuberculosis under clinical trial conditions. <i>National Medical Journal of India</i> 2012; 25(4):196-200.	retrospective analysis, original trials unreferenced
Bilaceroglu,S., Perim,K., Buyuksirin,M.. Prednisolone: A beneficial and safe adjunct to antituberculosis treatment? A randomized controlled trial. <i>International Journal of Tuberculosis and Lung Disease</i> .3 (1) (pp 47-54), 1999.	DR results not given
Chang,K.C., Leung,C.C., Grosset,J.. Treatment of tuberculosis and optimal dosing schedules. <i>Thorax</i> .66 (11) (pp 997-1007), 2011.	SR of cohort studies
Chaube,C.K., Tiwari,V.K., Gautam,K.D.. Short term intermittent chemotherapy in the management of pulmonary tuberculosis. <i>Indian Journal of Tuberculosis</i> 1990; 37(2):89-96.	excluded DR participants
Cohn,D.L.. Treatment and prevention of tuberculosis in HIV infection. <i>AIDS</i> .7 (Suppl.1) (pp S195-S202), 1993.	review, not SR
Corlan,E., Marica,C., Macavei,C., Stanford,J.L.. Immunotherapy with mycobacterium vaccae in the treatment of tuberculosis in Romania. 1. Newly-diagnosed pulmonary disease. <i>Respiratory Medicine</i> .91 (1) (pp 13-19), 1997.	immuno-therapy
Cox,H. Linezolid for the treatment of complicated drug-resistant tuberculosis: A systematic review and meta-analysis. <i>International Journal of Tuberculosis and Lung Disease</i> .16 (4) (pp 447-454), 2012.	SR of case series
Dey,T., Brigden,G., Cox,H., Shubber,Z., Cooke,G.. Outcomes of clofazimine for the treatment of drug-resistant tuberculosis: A systematic review and meta-analysis. <i>Journal of Antimicrobial Chemotherapy</i> .68 (2) (pp 284-293), 2013.Article Number: dks389.	SR of cohort studies
Dooley,K.E., Mitnick,C.D., Ann,DeGroote M., Obuku,E., Belitsky,V., Hamilton,C.D., et al. Old drugs, new purpose: retooling existing drugs for optimized treatment of resistant tuberculosis. [Review]. <i>Clinical Infectious Diseases</i> 2012; 55(4):572-81.	review, not SR
Efremenko,Y.V., Arjanova,O.V., Prihoda,N.D., Yurchenko,L.V., Sokolenko,N.I., Mospan,I.V., et al. Clinical validation of sublingual formulations of Immunoxel (Dzherelo) as an adjuvant immunotherapy in treatment of TB patients. <i>Immunotherapy</i> .4 (3) (pp 273-282), 2012.	immuno-therapy
Gupta,M.L.. Rifabutin for the treatment of newly diagnosed pulmonary tuberculosis: a multinational randomized comparative study versus rifampicin. <i>Tubercle and lung disease: the official journal of the International Union against Tuberculosis and Lung Disease</i> 1995; 76(6): 582-83.	letter
Gyselen,A., Verbist,L., Cosemans,J., Lacquet,L.M.. Rifampin and ethambutol in the retreatment of advanced pulmonary tuberculosis. <i>The American review of respiratory disease</i> 1968 98(6):933-41.	not RCT
Manalo,F., Tan,F., Sbarbaro,J.A.. Community-based short-course treatment of pulmonary tuberculosis in a developing nation. Initial report of an eight-month, largely intermittent regimen in a population with a high prevalence of drug resistance. <i>American Review of Respiratory Disease</i> 1990; 142(6:Pt 1): t-5.	not RCT
M–elenaere,M.G., Kleeberg,H.H., MacKintosh,J., Behyna,E.. Ethambutol in the treatment of patients with chronic pulmonary tuberculosis. <i>South African medical journal = Suid-Afrikaanse tydskrif vir geneeskunde</i> 1971; 45(7):171-74.	not RCT
Menzies,D., Benedetti,A., Paydar,A., Martin,I., Royce,S., Pai,M., et al. Effect of duration and intermittency of rifampin on tuberculosis treatment outcomes: a	SR, insufficient data on included studies



**RQ UVW.Excluded Studies – Original Search**

systematic review and meta-analysis. PLoS Medicine / Public Library of Science 2009; 6(9):e1000146.	
Menzies,D., Benedetti,A., Paydar,A., Royce,S., Pai,M., Burman,W., Vernon,A.. Standardized treatment of active tuberculosis in patients with previous treatment and/or with mono-resistance to isoniazid: A systematic review and meta-analysis. PLoS Medicine.6 (9), 2009.Article Number: e1000150.	SR, insufficient data on included studies
Mitchison,D.A.. Influence of initial drug resistance on the response to short-course chemotherapy of pulmonary tuberculosis. American Review of Respiratory Disease 1986; 133(3):423-30.	review, not SR
Moadebi,S., Harder,C.K., Fitzgerald,M.J., Elwood,K.R.. Fluoroquinolones for the treatment of pulmonary tuberculosis. Drugs 2007; 67(14):2077-99.	SR of case series
Perez-Guzman,C., Vargas,M.H., Martinez-Rossier,L.A., Torres-Cruz,A.. Results of a 12-month regimen for drug-resistant pulmonary tuberculosis. International Journal of Tuberculosis & Lung Disease 2002; 6(12):1102-09.	not RCT
Seddon,J.A., Furin,J.J., Gale,M., Del Castillo,Barrientos H., Hurtado,R.M., Amanullah,F., et al. Caring for children with drug-resistant tuberculosis: Practice-based recommendations. American Journal of Respiratory and Critical Care Medicine. 186 (10) (pp 953-964), 2012.	review, not SR
Shennan,D.H.. Factors affecting the outcome of treatment of pulmonary tuberculosis in sub-optimal conditions: an 18-month follow-up of 224 patients. Cent Afr J Med 1971; Suppl-10.	not RCT
Viswanathan,R., Pamra,S.P., Dingley,H.B.. Short term chemotherapy of pulmonary tuberculosis- a controlled trial. Indian Journal of Tuberculosis 1980; 27(2):48-53.	unclear, possible poor translation
Zielinski,C.C., Savoini,E., Ciotti,M., Orani,R., Konigswieser,H.. Dialyzable leukocyte extract (transfer factor) in the treatment of superinfected fistulating tuberculosis of the bone. Cellular Immunology 1984; 84(1):200-05.	not RCT
Zierski,M. & Bek,Z.. A comparative study of daily followed by twice or once weekly regimens of ethambutol and rifampicin in retreatment of patients with pulmonary tuberculosis. The results at 1 year. Tubercle (Edinb) 1975; 56(1):1-26.	not analysed for DR subgroup
Ziganshina,L.E.. Fluoroquinolones for treating tuberculosis. Cochrane Database of Systematic Reviews 2008; (1):CD004795.	not analysed for DR subgroup

**Excluded studies – Update Search**

Reference	Reason for Exclusion
Deepa,Dorai, Achanta,Shanta, Jaju,Jyoti, Rao,Koteswara, Samyukta,Rani, Claassens,Mareli, Kumar,Ajay M.V., Ph,Vishnu, The impact of isoniazid resistance on the treatment outcomes of smear positive re-treatment tuberculosis patients in the state of Andhra Pradesh, India, PloS one, 8, e76189-, 2013	Retrospective design
Dey,Teesta, Brigden,Grania, Cox,Helen, Shubber,Zara, Cooke,Graham, Ford,Nathan, Outcomes of clofazimine for the treatment of drug-resistant tuberculosis: a systematic review and meta-analysis, The Journal of antimicrobial chemotherapy, 68, 284-293, 2013	Not licensed in the UK
Dharmadhikari,Ashwin S., Kabadi,Mohan, Gerety,Bob, Hickey,Anthony J., Fourie,P.Bernard, Nardell,Edward, Phase I, single-dose, dose-escalating study of inhaled dry powder capreomycin: a new approach to therapy of drug-resistant tuberculosis, Antimicrobial agents and chemotherapy, 57, 2613-2619, 2013	MDR
Garcia-Prats,A.J., Rose,P.C., Hesselning,A.C., Schaaf,H.S., Linezolid for the treatment of drug-resistant tuberculosis in children: A review and recommendations, Tuberculosis,	Design

Excluded studies – Update Search	
94, 93-104, 2014	
Gopal,M., Padayatchi,N., Metcalfe,J.Z., O'Donnell,M.R., Systematic review of clofazimine for the treatment of drug-resistant tuberculosis, The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease, 17, 1001-1007, 2013	MDR/XDR
Hwang,T.J., Wares,D.F., Jafarov,A., Jakubowiak,W., Nunn,P., Keshavjee,S., Safety of cycloserine and terizidone for the treatment of drug-resistant tuberculosis: A meta-analysis, International Journal of Tuberculosis and Lung Disease, 17, 1257-1266, 2013	Includes drug susceptible - drug not licensed in the UK
Reves,R., Heilig,C.M., Tapy,J.M., Bozeman,L., Kyle,R.P., Hamilton,C.D., Bock,N., Narita,M., Wing,D., Hershfield,E., Goldberg,S.V., Intermittent tuberculosis treatment for patients with isoniazid intolerance or drug resistance, International Journal of Tuberculosis and Lung Disease, 18, 571-, 2014	No comparative (single arm)

## RQ Z

RQ Z. Excluded studies – Original Search	
Reference	Reasons for Exclusion
A controlled trial of daily and intermittent rifampicin plus ethambutol in the retreatment of patients with pulmonary tuberculosis: results up to 30 months. Tubercle 1975; 200290:179-189	Not relevant
A comparative study of daily followed by twice or once weekly regimens of ethambutol and rifampicin in retreatment of patients with pulmonary tuberculosis. The results at 1 year. A cooperative tuberculosis chemotherapy study in Poland. Tubercle 1975; 200293:1-26.	Not relevant, original regimen not standard
Investigations of allergic status and blood counts in Chinese patients receiving daily or intermittent rifampicin in Hong Kong. Clinical allergyClin Allergy 1975; 200294:189-199	Not relevant
First-line chemotherapy in the retreatment of bacteriological relapses of pulmonary tuberculosis following a shortcourse regimen. Lancet 1976; 200300:162-163	Not relevant
A controlled study of rifabutin and an uncontrolled study of ofloxacin in the retreatment of patients with pulmonary tuberculosis resistant to isoniazid, streptomycin and rifampicin. Hong Kong Chest Service/British Medical Research Council. Tubercle and lung disease : the official journal of the International Union against Tuberculosis and Lung DiseaseTuber Lung Dis 1992; 200349:59-67	Not relevant
Monitoring and management of antituberculosis drug induced hepatotoxicity. Journal of gastroenterology and hepatologyJ Gastroenterol Hepatol 2005; 200498:1745-1752	Does not compare approaches
How do patients who fail first-line TB treatment but who are not placed on an MDR-TB regimen fare in South India?. PloS one 2011; 201355:e25698	Not relevant
Randomized, placebo-controlled Phase II trial of heat-killed Mycobacterium vaccae (Immodulon batch) formulated as an oral pill (V7). Immunotherapy. 2013; 201363:1047-1054	Not relevant
Phase IIb randomized trial of adjunct immunotherapy in patients with first-diagnosed tuberculosis, relapsed and multi-drug-resistant (MDR) TB. Journal of immune based therapies and vaccinesJ.immune based	Not relevant

RQ Z. Excluded studies – Original Search	
therap.vaccines 2011; 201364:3	
Retrospective descriptive study of adult tuberculosis in Wuhan, China. International Journal of Tuberculosis and Lung Disease Int.J.Tuberc.Lung Dis. 2004; 201510:730-736	Not relevant
Antituberculosis drug resistance among retreatment tuberculosis patients in a referral center in Taipei. Journal of the Formosan Medical Association J.Formos.Med.Assoc. 2004; 201622:411-415	Not relevant
Risk factors for tuberculosis treatment failure, default, or relapse and outcomes of retreatment in Morocco. BMC public health 2011; 202187:140	Not relevant
Short-course chemotherapy for pulmonary tuberculosis. A 100-day interrupted regimen. South African medical journal = Suid-Afrikaanse tydskrif vir geneeskunde SAMJ, S.Afr.med.j. 1981; 202366:951-955	Not relevant
Re-treatment of patients with isoniazid-resistant tuberculosis. Analysis and follow-up of 146 cases. The American review of respiratory disease Am Rev Respir Dis 1968; 202496:392-398	Not relevant
Outcome of tuberculosis retreatment in routine conditions in Cotonou, Benin. International Journal of Tuberculosis and Lung Disease Int.J.Tuberc.Lung Dis. 2004; 202799:1242-1247	Not comparative
Effectiveness of standard short-course chemotherapy for treating tuberculosis and the impact of drug resistance on its outcome. International journal of evidence-based healthcare Int.j.evid.-based healthc. 2006; 203041:101-117	Not relevant
Management and outcome of tuberculosis patients who fail treatment under routine programme conditions in Malawi. The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease Int J Tuberc Lung Dis 2003; 203080:1040-1044	Wrong population
Low failure rate in standardised retreatment of tuberculosis in Nicaragua: patient category, drug resistance and survival of 'chronic' patients. The international journal of tuberculosis and lung disease: the official journal of the International Union against Tuberculosis and Lung Disease Int J Tuberc Lung Dis 2001; 203159:129-136	Wrong population (default was not from the standard regimen, regimens used were 2SHRZ/6 <sup>TH</sup> or 2EHRZ/6 <sup>th</sup> – thioacetazone not available in the UK), not comparative
Successful management of a national tuberculosis programme under conditions of war. The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease Int J Tuberc Lung Dis 1997; 203158:16-24	Not relevant
Comparison of the combination therapy of capreomycin. Ethionamide. Cycloserine with that of kanamycin. Ethionamide. Cycloserin in the retreatment of pulmonary tuberculosis. The Japanese journal of tuberculosis and chest diseases Jpn J Tuberc Chest Dis 1970; 203886:1-13	Not relevant
Retreatment tuberculosis cases. Factors associated with drug resistance and adverse outcomes. Chest 1997; 204019:1162-1167	Wrong population (default mixed with relapse)
A case series: initial outcome of persons with multidrug-resistant tuberculosis after treatment with the WHO standard retreatment regimen in Ho Chi Minh City, Vietnam. The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease Int J Tuberc Lung Dis	Not relevant

RQ Z. Excluded studies – Original Search	
2001; 204108:575-578	
Outcomes of reintroducing anti-tuberculosis drugs following cutaneous adverse drug reactions. The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung DiseaseInt J Tuberc Lung Dis 2011; 204209:1649-1657	Does not compare approaches
Evaluation of capreomycin and ethambutol in retreatment of pulmonary tuberculosis. Annals of the New York Academy of SciencesAnn N Y Acad Sci 1966; 204245:890-903	Not relevant
Management of drug-resistant spinal tuberculosis with a combination of surgery and individualised chemotherapy: A retrospective analysis of thirty-five patients. International orthopaedicsInt Orthop 2012; 204284: 277-283	Not relevant
The Rate of Sputum Smear-Positive Tuberculosis after Treatment Default in a High-Burden Setting: A Retrospective Cohort Study. PloS one 2012; 204627	Not relevant
Outcomes of HIV-infected patients treated for recurrent tuberculosis with the standard retreatment regimen. International Journal of Tuberculosis and Lung DiseaseInt.J.Tuberc.Lung Dis. 2012; 204711:841-845	Not relevant
Characteristics and treatment outcomes of tuberculosis retreatment cases in three regional hospitals, Uganda. Public Health Action 2013; 205103:149-155	Does not compare approaches
Multiple drugs in retreatment of chronic pulmonary tuberculosis. Results with capreomycin and ethambutol. Diseases of the chestDis Chest 1968; 205342:560-570	Not relevant
Results of cohort analysis by category of tuberculosis retreatment cases in Morocco from 1996 to 2003. The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung DiseaseInt J Tuberc Lung Dis 2006; 205375:1367-1372	Does not compare approaches
A comparison of treatment outcome in re-treatment versus new smear positive cases of tuberculosis under RNTCP. Indian journal of public healthIndian J Public Health 2007; 205478:237-239	Does not compare approaches
Results after retreatment of advanced pulmonary tuberculosis with rifampin and other drugs. The American review of respiratory diseaseAm Rev Respir Dis 1971; 205671:126-127	Not relevant
An uncontrolled trial of ethambutolpefloxacin in the retreatment of patients with pulmonary tuberculosis. Tubercle and lung disease : the official journal of the International Union against Tuberculosis and Lung DiseaseTuber Lung Dis 1995; 205861:219-222	Does not compare approaches
The treatment results of retreatment pulmonary tuberculosis patients in our clinic. Tuberkuloz ve toraksTuberk.Toraks 2011; 206126:111-119	Not English
Retreatment management strategies when first-line tuberculosis therapy fails. The international journal of tuberculosis and lung disease: the official journal of the International Union against Tuberculosis and Lung DiseaseInt J Tuberc Lung Dis 2005; 206200:421-429	Not relevant (focus on retreatment after treatment failure not treatment interruptions)
Capreomycin-ethionamide as a retreatment regimen for pulmonary tuberculosis. Annals of the New York Academy of SciencesAnn N Y	Not relevant

RQ Z. Excluded studies – Original Search	
Acad Sci 1966; 206279:1085-1097	
Tuberculosis 'retreatment others': profile and treatment outcomes in the state of Andhra Pradesh, India. The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung DiseaseInt J Tuberc Lung Dis 2011; 206751:105-109	Not relevant
Comparison of retreatment regimens for pulmonary tuberculosis under programme condition. Tuberc.Respir.Dis. 1981; 207796:95-109	Not in English
A comparative study of daily followed by twice or once weekly regimens of ethambutol and rifampicin in retreatment of patients with pulmonary tuberculosis. The results at 1 year. TUBERCLE (EDINB) 1975; 207877:1-26	Not relevant, original regimen not standard

RQ Z.Excluded studies – Update Search	
Reference	Reason for Exclusion
Liu,Y M, Cheng,Y J, Li,Yu L, Liu,C E, Hsu,W H, Antituberculosis treatment and hepatotoxicity in patients with chronic viral hepatitis, Lung, 192, 205-210, 2014	Not relevant
Smith,C., Abubakar,I., Thomas,H.L., Anderson,L., Lipman,M., Reacher,M., Incidence and risk factors for drug intolerance and association with incomplete treatment for tuberculosis: Analysis of national case registers for England, Wales and Northern Ireland, 2001-2010, Thorax, 69, 956-958, 2014	Not relevant

## RQ AABB

Excluded Studies – Original and Update	
Aerts, A., Hauer, B.et al. Tuberculosis and tuberculosis control in European prisons. The international journal of tuberculosis and lung disease: the official journal of the International Union against Tuberculosis and Lung Disease. 2006 10 (11) 1215-1223	Questionnaire / narrative publication
Atun, R. A., Samyshkin, Y.et al. Costs and outcomes of tuberculosis control in the Russian Federation: Retrospective cohort analysis. Health policy and planning 2006 21 (5) 353-364	Retrospective design
Beggs, E.B., Donnelly J.K., The use of engineering controls to disinfect Mycobacterium tuberculosis and airborne pathogens in hospital buildings. Indoor Built Environ. 2000 9 17-27	Narrative publications
Bergman-Evans, B. Tuberculosis in long-term care settings. Are you prepared? Advance for nurse practitioners 1998 6 (12) 67-69	Narrative publication.
Bergmire-Sweat, D., Barnett, B. J.et al. Tuberculosis outbreak in a Texas prison, 1994. Epidemiology and infection 1996 117 (3) 485-492	Retrospective design; outbreak
Bick, Joseph A. Infection control in jails and prisons. Clinical infectious diseases: an official publication of the Infectious Diseases Society of America. 2007 45 (8) 1047-1055	Narrative Review
Buregyeya, Esther, Nuwaha, Fredet al. Implementation of tuberculosis infection control in health facilities in Mukono and Wakiso districts, Uganda. BMC infectious diseases 2013 13 360-	Cross sectional design. Does not address

Excluded Studies – Original and Update	
	effectiveness of intervention
Burke, R. M., Schwartz, L. P. et al. The Ottawa County project: a report of a tuberculosis screening project in a small mining community. American journal of public health 1979 69 (4) 340-347	Case finding. Aim to reduce morbidity in miners
Burman, W. J., Cohn, D. L. et al. Short-term incarceration for the management of noncompliance with tuberculosis treatment. Chest 1997 112 (1) 57-62	Retrospective review design
Calder, R. A., Duclos, P. et al. Mycobacterium tuberculosis transmission in a health clinic. Bulletin of the International Union against Tuberculosis and Lung Disease. 1991 66 (2-3) 103-106	Retrospective data used
Chaulk, C. P. and Grady, M. Evaluating tuberculosis control programs: strategies, tools and models. The international journal of tuberculosis and lung disease: the official journal of the International Union against Tuberculosis and Lung Disease 2000 4 (2 Suppl 1) S55-S60	Narrative / discussion paper
Claassens, Mareli M., van Schalkwyk, Cariet al. Tuberculosis in healthcare workers and infection control measures at primary healthcare facilities in South Africa. PloS one 2013 8 (10) e76272	Cross-sectional ecological study
Cox, H., Escombe, R. Wind-driven roof turbines: a novel way to improve ventilation for TB infection control in health facilities. PlosOne. 2012 7 (1) e29589	Efficacy of wind turbines to achieve recommended ventilation rates - no link to human data
Cruz, A., Starke, J.R. A current review of infection control for childhood tuberculosis. Tuberculosis. 2011 91(1) S11-S15	narrative review
Decker, Catherine F. Tuberculosis and infection control measures. Disease-a-month: DM 2007 53 (1) 55-58	Article, not research study
DeLago, C.W., Spector, N.D. Collaboration with school nurses: improving the effectiveness of tuberculosis screening. Archives of pediatric and adolescent medicine. 2001 155(12) 1369-1373	Screening in the community; out of scope
Dewan, P. K., Banouong, H. et al. A tuberculosis outbreak in a private-home family child care center in San Francisco, 2002 to 2004. Pediatrics 2006 117 (3) 863-869	Retrospective medical records revision. Outbreak.
Dharmadhikari, A.S., Mphahlele, M. Surgical face masks worn by patients with multidrug resistant s. Impact on infectivity of air on a hospital ward. American Journal of Respiratory and Critical Care Medicine 2012, 185, 1104-1109	Use of animals (guinea pig) used to estimate infection tuberculosis
Escombe, A. R., Huaroto, L. et al. Tuberculosis transmission risk and infection control in a hospital emergency department in Lima, Peru. The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease 2010 14 (9), 1120-1126.	Infection control information is narrative (collected through interviews)
Forman, Paul D. and Kinney, Christina. Evaluation of a tuberculosis screening questionnaire for use in an Alaskan homeless population. Alaska medicine. 2003 45 (4) 94-101	Questionnaire used to ascertain prevalence of TB
Furuya, H. Estimation of environmental control measures for tuberculosis transmission in care facilities for the elderly. Journal Exp Clin Med, 2013 38(4) 135-141	Modelling
Gao, X., Li, Y. Ventilation control of indoor transmission of airborne disease in a urban community. Indoor+Build environment, 2009 18(3) 205-218	Modelling study
Harries, A.D., Hargreaves, N.J. Preventing tuberculosis among health workers in	Assessment of



Excluded Studies – Original and Update	
Malawi. Bulletin of the World Health Organization. 2002, 80(7) 523-531.	guideline implementation
Jiamjarasrangi, W., Bualert, S. Inadequate ventilation for nosocomial tuberculosis prevention in public hospitals in central Thailand. International Journal Tuberculosis Lung Disease 2009 (4) 454-459	Design 'cross-sectional'
Jonsson, J. Kan, B. Extensive nosocomial transmission of tuberculosis in a low incidence country. The Journal of Hospital Infection.2013 83 (4) 321-326.	Outbreak
Karim, K. Tuberculosis and infection control. British journal of nursing, 2011 20(17): 1128	Narrative publication`
Knibbs, L.D., Morawska L. Room ventilation and the risk of airborne infection transmission in 3 health care settings within a large teaching hospital. American Journal of infection control.2011 39(10) 866-872.	ventilation modelling
Malaithao, K., Kalambaheti, T. Evaluation of an electronic air filter for filtrating bacteria and viruses from indoor air. Southeast Asian journal of tropical medicine and public health. 2009 40(5) 1113-1120	Does not address outcome of interest
Memarzadeh, F., Russell, N. Applications of ultraviolet germicidal irradiation disinfection in health care facilities: Effective adjunct, but not stand-alone technology. Association for professionals in infection control and epidemiology,2010 38 S13-24	Narrative publication - not TB specific data
Moro, M. L., Errante, I.et al. Effectiveness of infection control measures in controlling a nosocomial outbreak of multidrug-resistant tuberculosis among HIV patients in Italy. The international journal of tuberculosis and lung disease : the official journal of the International Union against Tuberculosis and Lung Disease. 2000 4 (1) 61-68	Nosocomial outbreak
Naidoo, S., Taylor, M. Association between South African high-school learners' knowledge about tuberculosis and their intention to seek healthcare. Glob Health Action. 2013 6: 21699	Design (cross sectional), education as strategy to indirect
Olmsted, R.N. Pilot study of directional airflow and containment of airborne particles in the size of Mycobacterium tuberculosis in an operating room. American Journal of Infection Control. 2008 36 (4) 260-267	No outcome of interest
Robert, J., Affolabi, D. Assessment of organizational measures to prevent nosocomial tuberculosis in health facilities of 4 sub-Saharan countries in 2010. Infection control and hospital epidemiology.2013 34(2) 190-194	Narrative publication, use of survey
Roberts, J.R., Mason B.W. The transmission of Tuberculosis in schools involving children 2 to 11 years of age. The pediatric infectious disease journal. 2012 31(1) 82-84	Systematic review of outbreaks
Pantelic, J. Sze-To G.N. Personalized ventilation as a control measure for airborne transmissible disease spread. Journal of the Royal Society Interface. 2009 6 S715 – S726	Modelling
Stroud, L. A., Tokars, J. I.et al. Evaluation of infection control measures in preventing the nosocomial transmission of multidrug-resistant Mycobacterium tuberculosis in a New York City hospital. Infection control and hospital epidemiology: the official journal of the Society of Hospital Epidemiologists of America. 1995 16 (3) 141-147	Nosocomial outbreak
Unahalekhaka, A., Lueang-a-papong, S Status of nosocomial tuberculosis transmission prevention in hospitals in Thailand. American journal of infection control. 2014 42(3) 340-343	Survey
Weiler-Ravell, D., Leventhal, A.et al. Compulsory detention of recalcitrant tuberculosis patients in the context of a new tuberculosis control programme in Israel. Public health, 2004 118 (5) 323-328	Retrospective Review
Zayas, G., Chiang M.C. Effectiveness of cough etiquette maneuvers in disrupting the chain of transmission of infectious respiratory disease. SBMC Public Health 2013 13: 811-822	Infectious control in general (not TB specific outcomes)

## RQCCDD

References – Original and Update	Reasons for Exclusion
Alousi FS, Kattab MA et al Value of examining 3 sputum samples in the diagnosis of active pulmonary tuberculosis in Qatar. Infectious Disease in Clinical Practice. 2012, 188-191.	No outcome of interest
Bhattacharya S, Das D, et. Al. Patient isolation in the high prevalence setting: challenges with regard to multidrug-resistant gram negative bacilli. Infect Control Hosp Epidemiolo 2013 34(6) 650-1.	Letter to the editor
Campos M, Quartin A et al. Feasibility of shortening respiratory isolation with a single sputum nucleic acid amplification test. American Journal of Respiratory and Critical care Medicine. 2008 178, 300-305.	Specificity and sensitivity of test for determining the need for respiratory isolation, no data on isolation
Gaeta, T. J., Webheh, W. et al. Respiratory isolation of patients with suspected pulmonary tuberculosis in an inner-city hospital. Academic emergency medicine: official journal of the Society for Academic Emergency Medicine. 1997 4 (2), 138-141.	Protocol to identify clinical factors that predict the need for isolation on patients that present to ED with pneumonia; presents specificity and sensitivity data
Iwata, Kentaro, Smith, Barbara A. et al. Failure to implement respiratory isolation: why does it happen? Infection control and hospital epidemiology : the official journal of the Society of Hospital Epidemiologists of America. 2002 23 (10): 595-599.	Isolation failure (defined as isolation not instituted) at ED department or admissions.
Lagrange-Xelot, M., Porcher, R. et al. Prevalence and clinical predictors of pulmonary tuberculosis among isolated inpatients: a prospective study. Clinical microbiology and infection : the official publication of the European Society of Clinical Microbiology and Infectious Diseases. 2011 17 (4): 610-614.	Prevalence and validation of a predictive score for isolation (sensitivity and specificity)
Leonard, Michael K., Egan, Kathleen B. et al. Increased efficiency in evaluating patients with suspected tuberculosis by use of a dedicated airborne infection isolation unit. American journal of infection control. 2006 34 (2): 69-72.	Assessed the impact of the isolation unit, does not measure outcome of interest
Mintz, L. Isolation rooms for TB control. Infection control and hospital epidemiology: the official journal of the Society of Hospital Epidemiologists of America. 1994 15 (9): 570-571.	Letter to the Editor
Millman AJ, Dowdy DW, et al. Rapid molecular testing for TB to guide respiratory isolation in the US: A cost benefit analysis. PLoS One 2013, 8(1) e79669.	Cost-benefit
Mixides, George, Shende, Vasantiet al. Number of negative acid-fast smears needed to adequately assess infectivity of patients with pulmonary tuberculosis Chest. 2005 128 (1) 108-115.	Outside of hospital setting, population is 'contacts'
Rakoczy, Kara S., Cohen, Stuart H. et al. Derivation and validation of a clinical prediction score for isolation of inpatients with suspected pulmonary tuberculosis. Infection control and hospital epidemiology: the official journal of the Society of Hospital Epidemiologists of America. 2008 29 (10): 927-932.	Prediction score, specificity and sensitivity data
Redd, J. T. and Susser, E. Controlling tuberculosis in an urban emergency department: a rapid decision instrument for patient isolation. American journal of public health. 1997 87 (9): 1543-1547.	Instrument validation, specificity and sensitivity data
Siddiqui, Anwer H., Perl, Trish M. et al. Preventing nosocomial transmission of pulmonary tuberculosis: when may isolation be discontinued for patients with	predictive value and sensitivity of smears

References – Original and Update	Reasons for Exclusion
suspected tuberculosis? Infection control and hospital epidemiology: the official journal of the Society of Hospital Epidemiologists of America. 2002 23 (3): 141-144.	
Sutton PM, Nicas M, et al. Tuberculosis isolation: comparison of written procedures and actual practices in three California hospitals. Infection Control and Hospital Epidemiology 2000, 21(1): 28-32.	Does not answer the question/not include outcome of interest
Thomas BS, Bello EF, et al. Prevalence and predictors of compliance with discontinuation of airborne isolation in patients with suspected pulmonary tuberculosis. Infect Control Hops Epidemiol 2013 34(9).	Does not address outcome of interest
White AH, Khatib R, et al. Respiratory isolation in a teaching hospital with a low to moderate rate of tuberculosis: compliance with centers for disease control and prevention guidelines for identifying patients who may have active tuberculosis. American Journal of infection control 1997, 25(6): 467-470.	Compliance with guidelines

## RQHH

Excluded – Original search	
Reference	Reason for exclusion
Antituberculosis drug-induced hepatotoxicity in children. Pediatr.Rep. 2011;3(2).	No outcome of interest (risk of greater potential harm/benefit from tx)
Epidemiology of tuberculosis. Am.Rev.Respir.Dis. 1982; 125(3 II):8-15.	Review
Fatal isoniazid-induced hepatitis. Its risk during chemoprophylaxis. West.J.Med. 1993; 159(5):560-64.	Study design (not cohort, cross sectional, case-control)
Priorities for the Treatment of Latent Tuberculosis Infection in the United States. New Engl.J.Med. 2004; 350(20):2060.	Study design (not cohort, cross sectional, case-control)
Risk of tuberculosis among contacts of isoniazid-resistant and isoniazid-susceptible cases. International Journal of Tuberculosis & Lung Disease 2011; 15(6):782-88.	Data not seperable for latent tuberculosis
Risk of tuberculosis to healthcare workers. Med.J.Malays. 2001; 56(1):107-12.	Study design (not cohort, cross sectional, case-control)
Tuberculosis among aboriginal and nonaboriginal persons in British Columbia. Can.Respir.J. 2000; 7(2):151-57.	Duplicate
Acevedo-Vasquez,E. & Ponce de,Leon D.. Latent infection and tuberculosis disease in rheumatoid arthritis patients. Rheumatic Diseases Clinics of North America 2009; 35(1):163-81.	Study design (not cohort, cross sectional, case-control)
Ailinger,R.L., Moore,J.B., Nguyen,N.. Adherence to latent tuberculosis infection therapy among latino immigrants. Public Health Nursing 2006; 23(4):307-13.	No multivariate analysis
Akolo,C., Adetifa,I., Shepperd,S.. Treatment of latent tuberculosis infection in HIV infected persons. Cochrane Database Syst.Rev. 2010; (1):CD000171.	No outcome of interest (risk of greater potential harm/benefit from tx)
Al,K W. & Al,D A.. Active tuberculosis among Iraqi schoolchildren with positive skin	No multivariate

Excluded – Original search	
tests and their household contacts. <i>East.Mediterr.Health J.</i> 2003; 9(4):675-88.	analysis
Al,Zi K. & Al, Ji H.. Does size matter? Utility of size of tuberculin reactions for the diagnosis of mycobacterial disease. <i>American Journal of Respiratory &amp; Critical Care Medicine</i> 2000; 162(4:Pt 1):t-22.	No multivariate analysis
Anand,A.C., Seth,A.K., Paul,M.. Risk factors of hepatotoxicity during anti-tuberculosis treatment. <i>Med.J.Armed Forces India</i> 2006; 62(1):45-49.	Not treatment of latent TB
Anon. Targeted tuberculin testing and treatment of latent tuberculosis infection. This official statement of the American Thoracic Society was adopted by the ATS Board of Directors, July 1999. This is a Joint Statement of the American Thoracic Society (ATS) and the Centers for Disease Control and Prevention (CDC). This statement was endorsed by the Council of the Infectious Diseases Society of America. (IDSA), September 1999, and the sections of this statement. <i>American Journal of Respiratory &amp; Critical Care Medicine</i> 2000; 161(4:Pt 2):t-47.	No outcome of interest (risk of greater potential harm/benefit from tx)
Antony,S.J. & Ynares,C.. Isoniazid hepatotoxicity in renal transplant recipients. <i>Clin.Transplant</i> 1997; 11(1):34-37.	No multivariate analysis
Atuk,N.O. & Hart,A.D.. Close monitoring is essential during isoniazid prophylaxis. <i>South.Med.J.</i> 1977; 70(2):156-59.	No multivariate analysis
Aziz,H., Shubair,M., Debari,V.A., Ismail,M.. Assessment of age-related isoniazid hepatotoxicity during treatment of latent tuberculosis infection. <i>Current Medical Research &amp; Opinion</i> 2006; 22(1):217-21.	No multivariate analysis
Bliven,E.E.. The role of chronic hepatitis in isoniazid hepatotoxicity during treatment for latent tuberculosis infection. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2009; 13(9):1054-60.	Review
Chan-Yeung,M., Dai,D.L., Cheung,A.H., Chan,F.H., Kam,K.M., Tam,C.M.. Tuberculin skin test reaction and body mass index in old age home residents in Hong Kong. <i>J.Am.Geriatr.Soc.</i> 2007; 55(10):1592-97.	No outcome of interest (risk of greater potential harm/benefit from tx)
Chaparro,S.V., Montoya,J.G., Keeffe,E.B., Rhee,J.T.. Risk of tuberculosis in tuberculin skin test-positive liver transplant patients. <i>Clin.Infect.Dis.</i> 1999; 29(1):207-08.	Study design (not cohort, cross sectional, case-control)
Chi,C.L., Wing,W.Y., Kwok,C.C., Cheuk,M.T., Chi,K.C., Wing,S.L., et al. Risk of active tuberculosis among schoolchildren in Hong Kong. <i>Arch.Pediatr.Adolesc.Med.</i> 2006; 160(3):247-51.	Duplicate
Cook,V.J. & Hernandez-Garduno,E.. Risk of tuberculosis in screened subjects without known risk factors for active disease. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2008; 12(8):903-08.	No multivariate analysis
Devoto,F.M., Gonzalez,C., Iannantuono,R., Serra,H.A., Gonzalez,C.D.. Risk factors for hepatotoxicity induced by antituberculosis drugs. <i>Acta Physiologica, Pharmacologica et Therapeutica Latinoamericana</i> 1997;47(4):197-202.	Not latent TB
Dickinson,D.S., Bailey,W.C., Hirschowitz,B.I., Soong,S.J., Eidus,L.. Risk factors for isoniazid (INH)-induced liver dysfunction. <i>J.Clin.Gastroenterol.</i> 1981; 3(3):271-79.	Not enough data provided, (e.g. incidence of active tuberculosis)
Fernandez-Villar,A., Sopena,B., Garcia,J., Gimena,B., Ulloa,F., Botana,M.. Hepatitis C virus RNA in serum as a risk factor for isoniazid hepatotoxicity. <i>Infection</i> 2007; 35(4):295-97.	No outcome of interest (risk of greater potential harm/benefit from tx)
Franks,A.L., Binkin,N.J., Snider,D.E., Jr., Rokaw,W.M.. Isoniazid hepatitis among pregnant and postpartum Hispanic patients. <i>Public Health Rep.</i> 1989; 104(2):151-55.	Study design (not cohort, cross sectional, case-

Excluded – Original search	
	control)
Gessner,B.D. & Weiss,N.S.. Risk factors for pediatric tuberculosis infection and disease after household exposure to adult index cases in Alaska. <i>J.PEDIATR.</i> 1998; 132(3:Pt 1):t-13.	Not enough data provided, (e.g. incidence of active tuberculosis)
Gilroy,S.A. & Rogers,M.A.. Treatment of latent tuberculosis infection in patients aged > or =35 years. <i>Clin.Infect.Dis.</i> 2000; 31(3):826-29.	Not enough data provided, (e.g. incidence of active tuberculosis)
Gourevitch,M.N., Hartel,D., Selwyn,P.A., Schoenbaum,E.E.. Effectiveness of isoniazid chemoprophylaxis for HIV-infected drug users at high risk for active tuberculosis. <i>AIDS</i> 1999; 13(15):2069-74.	No multivariate analysis
Graham,N.M., Galai,N., Nelson,K.E., Astemborski,J., Bonds,M., Rizzo,R.T., Sheeley,L.. Effect of isoniazid chemoprophylaxis on HIV-related mycobacterial disease. <i>Arch.Intern.Med.</i> 1996; 156(8):889-94.	No TST/IGRA positive subgrouping AND question addressing benefit
Gray,D., Nuttall,J., Lombard,C., Davies,M.A., Workman,L., Apolles,P., et al. Low rates of hepatotoxicity in HIV-infected children on anti-retroviral therapy with and without isoniazid prophylaxis. <i>J.Trop.Pediatr.</i> 2010; 56(3):159-65.	No outcome of interest (risk of greater potential harm/benefit from tx)
Gust,D.A., Mosimaneotsile,B., Mathebula,U., Chingapane,B., Gaul,Z., Pals,S.L.. Risk factors for non-adherence and loss to follow-up in a three-year clinical trial in Botswana. <i>PLoS ONE [Electronic Resource]</i> 2011; 6(4):e18435.	No outcome of interest (risk of greater potential harm/benefit from tx)
Halsey,N.A., Coberly,J.S., Desormeaux,J., Losikoff,P., Atkinson,J., Moulton,L.H., et al. Randomised trial of isoniazid versus rifampicin and pyrazinamide for prevention of tuberculosis in HIV-1 infection. <i>Lancet</i> 1998; 351(9105):786-92.	No outcome of interest (risk of greater potential harm/benefit from tx)
Hanta,I., Ozbek,S., Kuleci,S., Sert,M.. Isoniazid intervention for latent tuberculosis among 86 patients with rheumatologic disease administered with anti-TNFalpha. <i>Clin.Rheumatol.</i> 2007; 26(11):1867-70.	No multivariate analysis
Horwitz,O. & Payne,P.G.. Epidemiological basis of tuberculosis eradication. 4. The isoniazid trial in Greenland. <i>Bull.WHO</i> 1966; 35(4):509-26.	No outcome of interest (risk of greater potential harm/benefit from tx)
Kunst,H.. Age-related risk of hepatotoxicity in the treatment of latent tuberculosis infection: a systematic review. [Review]. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2010; 14(11):1374-81.	Review
Leung,C.C., Yew,W.W., Chang,K.C., Tam,C.M., Chan,C.K., Law,W.S., et al. Risk of active tuberculosis among schoolchildren in Hong Kong. <i>Archives of Pediatrics &amp; Adolescent Medicine</i> 2006; 160(3):247-51.	No outcome of interest (risk of greater potential harm/benefit from tx)
Leung,C.C., Yew,W.W., Law,W.S., Tam,C.M., Leung,M., Chung,Y.W., et al. Smoking and tuberculosis among silicotic patients. <i>Eur.Respir.J.</i> 2007; 29(4):745-50.	Not enough data provided, (e.g. incidence of active tuberculosis)
MacIntyre,C.R., Ansari,M.Z., Carnie,J.. No evidence for multiple-drug prophylaxis for tuberculosis compared with isoniazid alone in Southeast Asian refugees and migrants: completion and compliance are major determinants of effectiveness. <i>Prev.Med.</i> 2000; 30(5):425-32.	No outcome of interest (risk of greater potential harm/benefit from tx)
Marais,B.J., van,Zyl S., Schaaf,H.S., van,Aardt M., Gie,R.P.. Adherence to isoniazid	No multivariate

Excluded – Original search	
preventive chemotherapy: a prospective community based study. Arch.Dis.Child. 2006; 91(9):762-65.	analysis
Marks,G.B., Bai,J., Simpson,S.E., Sullivan,E.A.. Incidence of tuberculosis among a cohort of tuberculin-positive refugees in Australia: reappraising the estimates of risk. American Journal of Respiratory & Critical Care Medicine 2000; 162(5):1851-54.	No outcome of interest (risk of greater potential harm/benefit from tx)
Menzies,R. & Rocher,I.. Factors associated with compliance in treatment of tuberculosis. Tubercle & Lung Disease 1993; 74(1):32-37.	No outcome of interest (risk of greater potential harm/benefit from tx)
Moran-Mendoza,O., Marion,S.A., Elwood,K., Patrick,D.. Risk factors for developing tuberculosis: a 12-year follow-up of contacts of tuberculosis cases. International Journal of Tuberculosis & Lung Disease 2010; 14(9):1112-19.	Not latent TB
Moran-Mendoza,O., Marion,S.A., Elwood,K., Patrick,D.M.. Tuberculin skin test size and risk of tuberculosis development: a large population-based study in contacts. International Journal of Tuberculosis & Lung Disease 2007; 11(9):1014-20.	No outcome of interest (risk of greater potential harm/benefit from tx)
Moreno,S., Baraia-Etxaburu,J., Bouza,E., Parras,F., Perez-Tascon,M., Miralles,P., et al. Risk for developing tuberculosis among anergic patients infected with HIV. Ann.Intern.Med. 1993; 119(3):194-98.	No multivariate analysis
Moreno,S., Miralles,P., Diaz,M.D., Baraia,J., Padilla,B., Berenguer,J.. Isoniazid preventive therapy in human immunodeficiency virus-infected persons. Long-term effect on development of tuberculosis and survival. Arch.Intern.Med 1997; 157(15):1729-34.	No outcome of interest (risk of greater potential harm/benefit from tx)
Moss,A.R., Hahn,J.A., Tulskey,J.P., Daley,C.L., Small,P.M.. Tuberculosis in the homeless. A prospective study. American Journal of Respiratory & Critical Care Medicine 2000; 162(2:Pt 1):t-4.	Not latent TB
Ngamvithayapong,J., Uthavivoravit,W., Yanai,H., Akarasewi,P.. Adherence to tuberculosis preventive therapy among HIV-infected persons in Chiang Rai, Thailand. AIDS 1997; 11(1):107-12.	No multivariate analysis
Nolan,C.M. & Goldberg,S.V.. Hepatotoxicity associated with isoniazid preventive therapy: a 7-year survey from a public health tuberculosis clinic. JAMA 1999; 281(11):1014-18.	Not enough data provided, (e.g. incidence of active tuberculosis)
O'Donnell,M.R., Chamblee,S., von Reyn,C.F., Ellerbrock,T.V., Johnson,J., Marsh,B.J., et al. Racial disparities in primary and reactivation tuberculosis in a rural community in the southeastern United States. International Journal of Tuberculosis & Lung Disease 2010; 14(6):733-40.	No outcome of interest (risk of greater potential harm/benefit from tx)
Pande,J.N., Singh,S.P., Khilnani,G.C., Khilnani,S.. Risk factors for hepatotoxicity from antituberculosis drugs: a case-control study. Thorax 1996;51(2):132-36.	Not latent TB
Patel,S., Parsyan,A.E., Gunn,J., Barry,M.A., Reed,C., Sharnprapai,S.. Risk of progression to active tuberculosis among foreign-born persons with latent tuberculosis. Chest 2007; 131(6):1811-16.	Not latent TB
Perry,S., de Jong,B.C., Solnick,J.V., de la Luz,Sanchez M., Yang,S., Lin,P.L., et al. Infection with Helicobacter pylori is associated with protection against tuberculosis. PLoS ONE [Electronic Resource] 2010; 5(1):e8804.	No outcome of interest (risk of greater potential harm/benefit from tx)
Prasad,R., Verma,S.K., Chowdhry,S.R.. Predisposing factors in hepatitis induced by anti-tuberculosis regimens containing isoniazid, rifampicin and pyrazinamide: A case control study. J.Intern.Med.India 2006; 9(3):73-78.	Not treatment of latent TB
Quigley,M.A., Mwinga,A., Hosp,M., Lisse,I., Fuchs,D., Porter,J.D.H.. Long-term	No outcome of



Excluded – Original search	
effect of preventive therapy for tuberculosis in a cohort of HIV-infected Zambian adults. <i>AIDS</i> 2001; 15(2):215-22.	interest (risk of greater potential harm/benefit from tx)
Radhakrishna,S., Frieden,T.R., Subramani,R.. Association of initial tuberculin sensitivity, age and sex with the incidence of tuberculosis in south India: a 15-year follow-up. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2003; 7(11):1083-91.	Not latent TB
Sadaphal,P., Astemborski,J., Graham,N.M., Sheely,L., Bonds,M., Madison,A., et al. Isoniazid preventive therapy, hepatitis C virus infection, and hepatotoxicity among injection drug users infected with <i>Mycobacterium tuberculosis</i> . <i>Clin.Infect.Dis.</i> 2001; 33(10):1687-91.	No multivariate analysis
Selwyn,P.A., Hartel,D., Lewis,V.A., Schoenbaum,E.E., Vermund,S.H., Klein,R.S., Walker,A.T.. A prospective study of the risk of tuberculosis among intravenous drug users with human immunodeficiency virus infection. <i>New Engl.J.Med.</i> 1989; 320(9):545-50.	No multivariate analysis
Selwyn,P.A., Sckell,B.M., Alcabes,P., Friedland,G.H., Klein,R.S.. High risk of active tuberculosis in HIV-infected drug users with cutaneous anergy. <i>JAMA</i> 1992; 268(4):504-09.	No multivariate analysis
Shieh,F.K., Snyder,G., Horsburgh,C.R., Bernardo,J., Murphy,C.. Predicting non-completion of treatment for latent tuberculous infection: a prospective survey. <i>American Journal of Respiratory &amp; Critical Care Medicine</i> 2006; 174(6):717-21.	No outcome of interest (risk of greater potential harm/benefit from tx)
Sichletidis,L., Settas,L., Spyratos,D., Chloros,D.. Tuberculosis in patients receiving anti-TNF agents despite chemoprophylaxis. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2006; 10(10):1127-32.	No multivariate analysis
Singla,R., Sharma,S.K., Mohan,A., Makharia,G., Sreenivas,V., Jha,B., et al. Evaluation of risk factors for antituberculosis treatment induced hepatotoxicity. <i>Indian J.Med.Res.</i> 2010; 132():81-86.	Not latent TB
Vega,R.A. & Conde,J.G.. Prevalence of tuberculin reactivity and prevalence of risk factors for the development of active tuberculosis in a nursing home in Puerto Rico. <i>Puerto Rico Health Sciences Journal</i> 1996; 15(1):27-31.	No multivariate analysis
Wiker,H.G., Mustafa,T., Bjune,G.A.. Evidence for waning of latency in a cohort study of tuberculosis. <i>BMC Infect.Dis.</i> 2010; 10():37.	No multivariate analysis
Woldehanna,S.. Treatment of latent tuberculosis infection in HIV infected persons. <i>Cochrane Database Syst.Rev.</i> 2004; (1):CD000171.	Duplicate

## RQII

RQII Excluded – Original Search	
Reference	Reason for exclusion
Akolo A, Shepperd & Volmink. Treatment of latent tuberculosis infection in HIV infected persons. <i>bbb</i> 2010;(1).	Duplicate
Akolo, A, Shepperd & Volmink. Treatment of latent tuberculosis infection in HIV infected persons. <i>Cochrane Database Syst.Rev.</i> 2010; (1):CD000171.	Review
Al-Darraj, Kamarulzaman & Altice. Isoniazid preventive therapy in correctional facilities: a systematic review. [Review]. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2012; 16(7):871-79.	Review
Anon. Isoniazid prevention of tuberculosis. <i>Lancet</i> 1983; 1(8321):395-96.	Excludable Study Design
Anon. Preventive therapy against tuberculosis in people living with HIV. <i>Weekly</i>	Excludable Study Design

RQII Excluded – Original Search	
Epidemiological Record 1999; 74(46):385-98.	
Aspler, D, Long, T, Jang & Al. Costs and cost-effectiveness of a randomized trial of 4 months rifampin versus 9 months of isoniazid for treatment of latent tuberculosis infection [Abstract]. American Thoracic Society International Conference, May 16-21, 2008, Toronto 2008;oster.	No full paper available
Aspler, Long, Trajman, Dion, Khan, Schwartzman & Menzies. Impact of treatment completion, intolerance and adverse events on health system costs in a randomised trial of 4 months rifampin or 9 months isoniazid for latent TB. Thorax 2010; 65 (7):582-87.	Excludable Study Design
Barnwell, Chitkara & Lamberta. Tuberculosis prevention project. J.Natl.Med.Assoc. 1992; 84(12):1014-18.	Adherence study
Bastos, Menzies, Belo, Teixeira, De Abreu, Antas & Trajman. Changes in QuantiFERON -TB Gold in-Tube results during treatment for tuberculous infection. Int.J.Tuberc.Lung Dis. 2013; 17(7):909-16.	No measurement of critical/important outcomes
Batki, Gruber, Bradley, Bradley & Delucchi. A controlled trial of methadone treatment combined with directly observed isoniazid for tuberculosis prevention in injection drug users. Drug & Alcohol Dependence 2002; 66(3):283-93.	Adherence study
Bell, Rose & Sacks. Tuberculosis preventive therapy for HIV-infected people in sub-Saharan Africa is cost-effective. AIDS 1999; 13(12):1549-56.	Excludable Study Design
Belzer. Studies demonstrating the effectiveness of isoniazid in preventing tuberculosis. South Dakota Journal of Medicine 1969; 22(6):15-22.	Excludable Study Design
Bowersox. Short-course TB prophylaxis effective in HIV-infected individuals. NIAID AIDS Agenda 1998; 4-5.	Excludable Study Design
Bridge. Chemoprophylaxis: a major adjunct in the prevention of tuberculosis. Michigan Medicine 1967; 66 (24):1553-55.	Excludable Study Design
Brown & Howard. Are liver function tests required for patients taking isoniazid for latent TB? J.Fam.Pract. 2004; 53(1):63.	Excludable Study Design
Bucher, Griffith, Guyatt, Sudre, Naef, Sendi & Battegay. Isoniazid prophylaxis for tuberculosis in HIV infection: a meta-analysis of randomized controlled trials. AIDS 1999; 13(4):501-07.	Review
Byers. Twelve doses for tuberculosis prevention--review of a new evidenced based regimen. Journal of the Mississippi State Medical Association 2012; 53(8):266.	Excludable Study Design
Cavalcante, Durovni, Barnes, Souza, Silva, Barroso, et al. Community-randomized trial of enhanced DOTS for tuberculosis control in Rio de Janeiro, Brazil. Int.J.Tuberc.Lung Dis. 2010; 14(2):203-09.	No measurement of critical/important outcomes
Chaisson, Barnes, Hackman, Watkinson, Kimbrough, Metha, et al. A randomized, controlled trial of interventions to improve adherence to isoniazid therapy to prevent tuberculosis in injection drug users. Am.J.Med. 2001; 110(8):610-15.	Adherence study
Chaisson, Zajdenverg, FalcoG, Barnes, Moore, Coberly, et al. Controlled trial of weekly rifapentine/isoniazid for 12 weeks vs rifampin/PZA for latent TB [Abstract]. American Thoracic Society 2005 International Conference; May 20-25; San Diego, California 2005; A15.	No full paper available
Chaisson. Short course preventive therapy for tuberculosis is successful in HIV-infected patients. The Hopkins HIV Report: a Bimonthly Newsletter for Healthcare Providers 1998; 10(3):2-3.	No full paper available
Comstock & Ferebee. How much isoniazid is needed for prophylaxis? Am.Rev.Respir.Dis. 1970; 101(5):780-82.	Excludable Study Design
Comstock & Woolpert. Preventive treatment of untreated, nonactive tuberculosis in an Eskimo population. Archives of Environmental Health 1972;	Excludable Study Design

RQII Excluded – Original Search	
25(5):333-37.	
Comstock, Ferebee & Hammes. A controlled trial of community-wide isoniazid prophylaxis in Alaska. <i>Am.Rev.Respir.Dis.</i> 1967; 95(6):935-43.	Exclude on poor methodology
Comstock. New data on preventive treatment with isoniazid. <i>Ann.Intern.Med.</i> 1983; 98(5:Pt 1):t-5.	Excludable Study Design
Costello & Snider. The incidence of cancer among participants in controlled, randomized isoniazid preventive therapy trial. <i>Am.J.Epidemiol.</i> 1980; 111(1):67-74.	Excludable Study Design
Dion, Behr, Bourbeau, Collet, Brassard, Schwartzman, et al. Randomised clinical trial comparing 9 months isoniazid to 4 months rifampin for the treatment of latent TB infection: preliminary report [abstract]. American Thoracic Society 99th International Conference 2003:B083.	Excludable Study Design
Dorken, Grzybowski & Enarson. Ten year evaluation of a trial of chemoprophylaxis against tuberculosis in Frobisher Bay, Canada. <i>Tubercle</i> 1984; 65(2):93-99.	Excludable Study Design
Durovni, Cavalcante, Saraceni, Vellozo, Israel, King, et al. The implementation of isoniazid preventive therapy in HIV clinics: the experience from the TB/HIV in Rio (THRio) study. <i>AIDS</i> 2010; 24: Suppl-56.	No comparison of varying regimens of anti TB drugs/placebo
Durovni, Saraceni, Moulton, Pacheco, Cavalcante, King, et al. Effect of improved tuberculosis screening and isoniazid preventive therapy on incidence of tuberculosis and death in patients with HIV in clinics in Rio de Janeiro, Brazil: a stepped wedge, cluster-randomised trial. <i>Lancet Infect.Dis.</i> 2013; 13(10):852-58.	No measurement of critical/important outcomes
Dutt. Duration of isoniazid preventive therapy in HIV-infected patients. <i>The Lancet</i> 2011; 378(9798):1216.	Duplicate
Ena & Valls. Short-course therapy with rifampin plus isoniazid, compared with standard therapy with isoniazid, for latent tuberculosis infection: a meta-analysis. <i>Clin.Infect.Dis.</i> 2005;40(5):670-76.	Review
Esfahani, Aspler, Menzies & Schwartzman. Potential cost-effectiveness of rifampin vs. isoniazid for latent tuberculosis: implications for future clinical trials. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2011; 15(10):1340-46.	Excludable Study Design
Falk & Fuchs. Prophylaxis with isoniazid in inactive tuberculosis. A Veterans Administration Cooperative Study XII. <i>Chest</i> 1978; 73(1):44-48.	Population not latent TB, or no subgroup analysis possible
Farer. Chemoprophylaxis against tuberculosis. <i>Clin.Chest Med.</i> 1980; 1(2):203-08.	Excludable Study Design
Farer. Chemoprophylaxis. <i>AM.REV.RESPIR.DIS.</i> 1982; 125(3:Pt 2):t-7.	Excludable Study Design
Feder. Chemoprophylaxis in ambulatory pediatrics. <i>Pediatr.Infect.Dis.</i> 1983; 2(3):251-57.	Excludable Study Design
Ferebee & Mount. Tuberculosis morbidity in a controlled trial of the prophylactic use of isoniazid among household contacts. <i>Am.Rer.Respir.Dis.</i> 1962; 85: 490-510.	Population not latent TB, or no subgroup analysis possible
Ferebee. Controlled chemoprophylaxis trials in tuberculosis. A general review. <i>Bibliotheca Tuberculosea</i> 1970; 26:28-106.	Excludable Study Design
Ferebee. Long-term effects of isoniazid prophylaxis. <i>Bull.Int.Union Tuberc.</i> 1968; 41:161-66.	Excludable Study Design
Gao, Wang, Liu, Wen, Sun, Xie & Li. Rifampicin plus pyrazinamide versus isoniazid for treating latent tuberculosis infection: a meta-analysis. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2006; 10(10):1080-90.	Review

RQII Excluded – Original Search	
Girling & Chan. A double-blind placebo-controlled clinical trial of three antituberculosis chemoprophylaxis regimens in patients with silicosis in Hong Kong. <i>Am.Rev.Respir.Dis.</i> 1992; 145(1):36-41.	Population not latent TB, or no subgroup analysis possible
Glassroth, White & Snider. An assessment of the possible association of isoniazid with human cancer deaths. <i>Am.Rev.Respir.Dis.</i> 1977; 116(6):1065-74.	Excludable Study Design
Gordin, Matts, Miller, Brown, Hafner, John, et al. A controlled trial of isoniazid in persons with anergy and human immunodeficiency virus infection who are at high risk for tuberculosis. Terry Beinr Community Programs for Clinical Research on AIDS. <i>New Engl.J.Med.</i> 1997; 337(5):315-20.	Population not latent TB, or no subgroup analysis possible
Gordin, Matts, O'Brien, Chaisson & Cohn. Rifampin and Pyrazinamide (RZ) is not hepatotoxic in the treatment of latent tuberculosis infection (LTBI) in HIV+ persons [abstract]. American Thoracic Society 99th International Conference 2003; B083.	Excludable Study Design
Gordin. Short-term tuberculosis prophylaxis is effective in persons with HIV. <i>Am.Fam.Phys.</i> 1998; 58(4):948.	Excludable Study Design
Grant, Charalambous, Fielding, Day, Corbett, Chaisson, et al. Effect of routine isoniazid preventive therapy on tuberculosis incidence among HIV-infected men in South Africa: a novel randomized incremental recruitment study. <i>JAMA</i> 2005; 293(22):2719-25.	Population not latent TB, or no subgroup analysis possible
Grant, Mngadi, van Halsema, Luttig, Fielding & Churchyard. Adverse events with isoniazid preventive therapy: experience from a large trial. <i>AIDS</i> 2010; 24:Suppl-36.	Excludable Study Design
Gray, Zar & Cotton. Impact of tuberculosis preventive therapy on tuberculosis and mortality in HIV-infected children. <i>Cochrane Database Syst.Rev.</i> 2009; (1):CD006418.	Population not latent TB, or no subgroup analysis possible
Gray, Zar & Cotton. The impact of tuberculosis preventive therapy on tuberculosis and mortality in HIV-infected children. <i>Cochrane Database Syst.Rev.</i> 2007; (1).	Population not latent TB, or no subgroup analysis possible
Groth-Petersen, Gad & Ostergaard. Mass chemoprophylaxis of tuberculosis. The acceptability and untoward side effects of isoniazid in a control study in Greenland. <i>Am.Rev.Respir.Dis.</i> 1960; 81: 643-52.	Population not latent TB, or no subgroup analysis possible
Hiransuthikul, Nelson, Hiransuthikul, Vorayingyong & Paewplot. INH preventive therapy among adult HIV-infected patients in Thailand. <i>International Journal of Tuberculosis &amp; Lung Disease</i> 2005; 9(3):270-75.	Adherence study
Hirsch-Moverman, Daftary, Franks & Colson. Adherence to treatment for latent tuberculosis infection: Systematic review of studies in the US and Canada. <i>Int.J.Tuberc.Lung Dis.</i> 2008; 12(11):1235-54.	Adherence study
Horn, Hewlett, Alfalla, Peterson & Opal. Limited tolerance of ofloxacin and pyrazinamide prophylaxis against tuberculosis. <i>New Eng.J.Med.</i> 1994; 330(17):1241.	Excludable Study Design
Horwitz. Long-term results of the chemoprophylactic trial in Greenland. <i>Bull.Int.Union Tuberc.</i> 1968; 41:167-68.	Excludable Study Design
Hovell, Sipan, Blumberg, Hofstetter, Slymen, Friedman, et al. Increasing Latino adolescents' adherence to treatment for latent tuberculosis infection: a controlled trial. <i>Am.J.Public Health</i> 2003;93(11):1871-77.	Adherence study
Hubaytar. Modern trends in chemoprophylaxis in tuberculosis. <i>Journal Medical Libanais - Lebanese Medical Journal</i> 1973; 26(2):89-93.	Excludable Study Design
Ijaz, McElroy & Navin. Short-course rifampin and pyrazinamide compared with isoniazid for latent tuberculosis infection: a cost-effectiveness analysis based on a multicenter clinical trial. <i>Clin.Infect.Dis.</i> 2004; 39(2):289.	Excludable Study Design

RQII Excluded – Original Search	
Iro & Brown. Isoniazid prophylaxis started at 3-4 months of life does not prevent tuberculosis disease or infection in both HIV-infected and uninfected children. Arch.Dis.Child.Educ.Pract.Ed. 2013; 98(1):40.	Excludable Study Design
Iseman. Containment of tuberculosis. Preventive therapy with isoniazid, and contact investigation. Chest 1979; 76(6:Suppl):Suppl-4.	Excludable Study Design
Jahng, Tran, Bui & Joyner. Safety of treatment of latent tuberculosis infection in compensated cirrhotic patients during transplant candidacy period. Transplantation 2007;83(12):1557-62.	Excludable Study Design
Jasmer, Bernardo, Daley, Merrifield, Blumberg & Saukkonen. Short course rifampin and pyrazinamide versus isoniazid for latent tuberculosis infection: a multicentre prospective, randomized controlled trial [abstract]. Am.J.Respir.Crit.Care Med. 2000; 161():A524.	Duplicate
Jasmer, Saukkonen, Blumberg, Daley, Bernardo, Vittinghoff, et al. Short-course rifampin and pyrazinamide compared with isoniazid for latent tuberculosis infection: a multicenter clinical trial.[Summary for patients in Ann Intern Med. 2002 Oct 15;137(8):l32; PMID: 12379094]. Ann.Intern.Med. 2002; 137(8):640-47.	Excludable Study Design
Jasmer, Snyder, Saukkonen, Blumberg, Bernardo, King, et al. Short Course Rifampin and Pyrazinamide Versus Isoniazid for Latent Tuberculosis Infection: A cost-effectiveness analysis based on a multicenter, randomized trial. Am.J.Respir.Crit.Care Med. 2002; 165(Suppl 8):A17.	No measurement of critical/important outcomes
Jasmer, Snyder, Saukkonen, Hopewell, Bernardo, King, et al. Short-course rifampin and pyrazinamide compared with isoniazid for latent tuberculosis infection: a cost-effectiveness analysis based on a multicenter clinical trial. Clin.Infect.Dis. 2004; 38(3):363-69.	No measurement of critical/important outcomes
Johnson, Okwera, Horter, Whalen & Mugerwa. Rifampicin-containing regimens for the treatment of latent tuberculosis infection also prevented diarrheal illnesses in HIV-infected Ugandan adults [5]. AIDS 2004; 18(4):706-08.	Excludable Study Design
Johnston & Conly. Re-examining treatment of latent tuberculosis infection. Can.J.Infect.Dis. 2001; 12(4):211-14.	Excludable Study Design
Kominski, Varon, Morisky, Malotte, Ebin, Coly & Chiao. Costs and cost-effectiveness of adolescent compliance with treatment for latent tuberculosis infection: results from a randomized trial. J.Adolesc.Health 2007; 40(1):61-68.	Cost effectiveness study
Krebs. The efficacy of preventive treatment with isoniazid in a high risk group. Results form an international Trial under the auspices of IUAT. Scandinavian Journal of Respiratory Diseases - Supplementum 1978; 102:62-64.	Excludable Study Design
Krebs. The IUAT trial on isoniazid preventive treatment in persons with fibrotic lung lesions. Bull.Int.Union Tuberc. 1976; 51(1):193-201.	Excludable Study Design
Kritski. Tuberculosis preventive therapy for HIV-infected persons in less developed countries. International Journal of Tuberculosis & Lung Disease 2000; 4(2:Suppl 1):Suppl-81.	Excludable Study Design
Kunst & Khan. Age-related risk of hepatotoxicity in the treatment of latent tuberculosis infection: a systematic review. [Review]. International Journal of Tuberculosis & Lung Disease 2010; 14(11):1374-81.	Excludable Study Design
Lawn, Wood, De Cock, Kranzer, Lewis & Churchyard. Antiretrovirals and isoniazid preventive therapy in the prevention of HIV-associated tuberculosis in settings with limited health-care resources. Lancet Infect.Dis. 2010; 10(7):489-98.	Excludable Study Design
Le Roux, Cotton, Golub, le Roux, Workman & Zar. Adherence to isoniazid prophylaxis among HIV-infected children: a randomized controlled trial	Adherence study

**RQII Excluded – Original Search**

comparing two dosing schedules. BMC Med. 2009; 7():67.	
Le Roux, Cotton, Myer, le Roux, Schaaf, Lombard & Zar. Safety of long-term isoniazid preventive therapy in children with HIV: a comparison of two dosing schedules. International Journal of Tuberculosis & Lung Disease 2013; 17(1):26-31.	Population not latent TB, or no subgroup analysis possible
Lim, Okwera, Mayanja-Kizza, Ellner, Mugerwa & Whalen. Effect of tuberculosis preventive therapy on HIV disease progression and survival in HIV-infected adults. HIV Clin.Trials 2006; 7(4):172-83.	No measurement of critical/important outcomes
Lutge, Knight & Volmink. Incentives for improving patient adherence to antituberculosis treatment. Cochrane Database Syst.Rev. 2009; (3).	Excludable Study Design
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Taylor, Mosimaneotsile, Mathebula, Mathoma, Moathlodi, Theebetsile & Samandari. Pregnancy outcomes in HIV-infected women receiving long-term isoniazid prophylaxis for tuberculosis and antiretroviral therapy. <i>Infectious Diseases in Obstetrics &amp; Gynecology</i> 2013; 195637.	Population not latent TB, or no subgroup analysis possible
Tedla, Nyirenda, Peeler, Agizew, Sibanda, Motsamai, et al. Isoniazid-associated hepatitis and antiretroviral drugs during tuberculosis prophylaxis in hiv-infected adults in Botswana. <i>American Journal of Respiratory &amp; Critical Care Medicine</i> 2010; 182(2): 278-85.	Excludable Study Design
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tuberculosis infection in persons not infected by the human immunodeficiency virus? International Journal of Tuberculosis & Lung Disease 2005; 9(3):276-81.	possible
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Reference	Reason for Exclusion
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analysis, BMC infectious diseases 14, -, 2014	
Bagcchi S. Novel drug combination for tuberculosis to be tested across 50 sites, BMJ (Clinical research ed.)BMJ, 348, g3535-, 2014	Wrong design
Bose A, Kalita,Soumik, Rose,Winsley, Tharyan,Prathap, Intermittent versus daily therapy for treating tuberculosis in children, The Cochrane database of systematic reviewsCochrane Database Syst Rev, 1, CD007953-, 2014	Not relevant
Chang, Kwok Chiu, Yew,Wing Wai, Tam,Cheuk Ming, Leung,Chi Chiu, WHO group 5 drugs and difficult multidrug-resistant tuberculosis: a systematic review with cohort analysis and meta-analysis, Antimicrobial agents and chemotherapyAntimicrob, 57, 4097-4104, 2013	Systematic Review
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Cruz,A.T., Ahmed,A., Mandalakas,A.M., Starke,J.R., Treatment of latent tuberculosis infection in children, Journal of the Pediatric Infectious Diseases Society, 2, 248-258, 2013	Narrative publication
Sharma,S.K., Kadiravan,T., Tharyan,P., Cochrane in context: Rifamycins compared to isoniazid for preventing tuberculosis in HIV-negative people at risk of active TB, Evidence-Based Child Health, 9, 295-297, 2014	Commentary
Stagg,Helen R., Zenner,Dominik, Harris,Ross J., Munoz,Laura, Lipman,Marc C., Abubakar,Ibrahim, Treatment of latent tuberculosis infection: a network meta-analysis, Annals of internal medicine, 161, 419-428, 2014	Wrong design
Sudarsanam,T.D., Tharyan,P., Intermittent versus daily therapy for treating tuberculosis in children: Summary of the evidence and implications for public health programmes, Clinical Epidemiology and Global Health, 2, 87-94, 2014	Commentary/narrative
Yuen,Court, Tolman,Arielle W., Cohen,Ted, Parr,Jonathan B., Keshavjee,Salmaan, Becerra,Mercedes C., Isoniazid-resistant tuberculosis in children: a systematic review, The Pediatric infectious disease journal, 32, e217-e226, 2013	Narrative publication