Quality assessment						No of patients		Effect				
No of studies	Design	Risk of bias	Inconsisten cy	Indirectne ss	Imprecisi on	Other considerations	Manual physiothera py	Oscillati ng device	Relati ve (95% CI)	Absol ute	Qual ity	Importance
Lung fun values)	ction - FE	V₁ (follow	v-up mean 8.8	days; measu	red with: %	change from ba	seline; range o	of scores: 0	-100; Be	tter indica	ated by	higher
1 (Homnic k 1998)	random ised trials	very seriou s <sup>1</sup>	no serious inconsistenc y	no serious indirectnes s	serious <sup>2</sup>	none	22	22	-	MD 7.9 lower (31.04 lower to 15.24 higher)	VER YLO W	IMPORTAN T
Lung fun values)	ction - FE	V₁ (follow	v-up mean 1 m	onths; meas	ured with: %	change from b	aseline; range	of scores:	0-100; B	etter indic	cated by	higher
1 (Padma n 1999)	random ised trials	very seriou s <sup>3</sup>	no serious inconsistenc y	no serious indirectnes s	very serious <sup>4</sup>	none	6	6	-	MD 2.59 higher (6.3 lower to 11.48 higher)	VER Y LOW	IMPORTAN T

Quality assessment							No of patients		Effect			
No of studies	Design	Risk of bias	Inconsisten cy	Indirectne ss	Imprecisi on	Other consideratio ns	Manual physiothera py	Oscillati ng device	Relati ve (95% CI)	Absol ute	Qual ity	Importance
1 (Homnic k 1998)	random ised trials	very seriou s <sup>1</sup>	no serious inconsistenc y	no serious indirectnes s	very serious <sup>4</sup>	none	22	22	-	MD 2.9 higher (14.21 lower to 20.01 higher)	VER Y LOW	IMPORTAN T

Abbreviations: CI: confidence interval; FEV<sub>1</sub>: forced expiratory volume in 1 second; FVC: forced vital capacity; MD: mean difference 1 The quality of the evidence was downgraded by 2 due to selection bias and attrition bias.

<sup>2</sup> The quality of the evidence was downgraded by 1 due to serious imprecision as 95% CI crossed 1 default MID

<sup>3</sup> The quality of the evidence was downgraded by 2 due to attrition bias and reporting bias
4 The quality of the evidence was downgraded by 2 due to very serious imprecision as 95% CI crossed 2 default MIDs