

**Table 2: Clinical evidence profile: Comparison 1.2. Home versus hospital care for the administration of IV AB in people with CF and chronic pulmonary infection with *P aeruginosa***

Quality assessment							No of treatments		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Home care for the administration of IV antibiotics	Hospital care for the administration of IV AB	Relative (95% CI)	Absolute		
<b>Lung function: Change in FEV<sub>1</sub> % predicted (follow-up 14 days; range of scores: 0-100; Better indicated by higher values)</b>												
1 (Rietmuller 2002)	observational studies	serious <sup>1</sup>	no serious inconsistency	no serious indirectness	very serious <sup>2</sup>	none	29 <sup>a</sup>	27 <sup>a</sup>	-	MD 2 higher (9.81 lower to 13.81 higher)	VERY LOW	CRITICAL
<b>Nutritional status: change in weight (kg) (follow-up 14 days; Better indicated by higher values)</b>												

Quality assessment							No of treatments		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Home care for the administration of IV antibiotics	Hospital care for the administration of IV AB	Relative (95% CI)	Absolute		
1 (Rietmuller 2002)	observational studies	serious <sup>1</sup>	no serious inconsistency	no serious indirectness	very serious <sup>3</sup>	none	29 <sup>a</sup>	28 <sup>a</sup>	-	MD 0 higher (4.38 lower to 4.38 higher)	VERY LOW	IMPORTANT
<b>Nutritional status: change in weight for height (%) (follow-up 14 days; Better indicated by higher values)</b>												
1 (Rietmuller 2002)	observational studies	serious <sup>1</sup>	no serious inconsistency	no serious indirectness	serious <sup>4</sup>	none	29 <sup>a</sup>	28 <sup>a</sup>	-	MD 1 lower (4.64 lower to 2.64 higher)	VERY LOW	IMPORTANT

Abbreviations: CI: confidence interval; CF: cystic fibrosis; FEV<sub>1</sub>: forced expiratory volume in 1 second; IV: intravenous; MD: mean difference

1 The quality of the evidence was downgraded by 1 due to high risk of bias in relation to the comparability of the groups

2 The quality of the evidence was downgraded by 2 because the 95% CI crossed 2 clinical MIDs

3 The quality of the evidence was downgraded by 2 because the 95% CI crossed 2 default MIDs

4 The quality of the evidence was downgraded by 1 because the 95% CI crossed 1 default MID

a Number of people included in the analysis in each group unclear