Table 51: Clinical evidence profile: Comparison 2. Prednisolone/ Prednisone versus placebo

Quali	ty assessme	nt					No of patients		Effect			
No of stud ies	Design	Risk of bias	Inconsiste ncy	Indirectn ess	Impreci sion	Other considerat ions	Prednisolone Prednisolone	Plac ebo	Relat ive (95% CI)	Absol ute	Quality	Importan ce
Abso	lute change i	n weigh	t (follow-up 12	2 weeks; me	easured wit	th: kg; Better	indicated by higher	values) [2 r	ng pred	nisone]		
1 (Gre ally 199 4)	randomise d trials	seriou s <sup>1</sup>	no serious inconsisten cy	no serious indirectn ess	very serious <sup>2</sup>	none	13	12	-	MD 0.34 higher (2.32 lower to 3 higher )	VERY LOW	CRITICAL
Weigl	ht at 18 Years	of Age	- Boys - (mea	sured with:	Kg; Better	indicated by	higher values) [1 mg	g prednisor	ne]			
1 (Lai 200 0)	observatio nal studies	no seriou s risk of bias	no serious inconsisten cy	no serious indirectn ess	serious <sup>3</sup>	none	34	21	-	MD 4.6 lower (9.69 lower to 0.49 higher )	VERY LOW	CRITICAL
Weigl	ht at 18 Years	of Age	- Boys (meas	ured with: k	Kg; Better i	ndicated by h	igher values) [2 mg	prednisone	•]			
1 (Lai 200 0)	observatio nal studies	no seriou s risk of bias	no serious inconsisten cy	no serious indirectn ess	no serious imprecisi on	dose response gradient <sup>4</sup>	3	21	-	MD 6.7 lower (11.59 lower to 1.81 lower)	MODERA TE	CRITICAL

Quali	ty assessme	nt					No of patients		Effect			
No of stud ies	Design	Risk of bias	Inconsiste ncy	Indirectn ess	Impreci sion	Other considerat ions	Prednisone/ Prednisolone	Plac ebo	Relat ive (95% CI)	Absol ute	Quality	Importan ce
1 (Lai 200 0)	observatio nal studies	no seriou s risk of bias	no serious inconsisten cy	no serious indirectn ess	very serious <sup>2</sup>	none	20	23	-	mean 0 higher (7.62 lower to 3.02 higher )	VERY LOW	CRITICAL
Weigl	ht at 18 Years	s of Age	- Girls (measi	ured with: K	g; Better i	ndicated by h	igher values) [2 mg <sub>l</sub>	orednisone	]			
1 (Lai 200 0)	observatio nal studies	no seriou s risk of bias	no serious inconsisten cy	no serious indirectn ess	very serious <sup>2</sup>	none	23	23	-	MD 1.7 higher (3.37 lower to 6.77 higher )	VERY LOW	CRITICAL
Heigh	nt at 18 Years	of Age	- Boys (measu	ured with: c	m; Better i	ndicated by h	igher values) [1 mg	orednisone	]			
1 (Lai 200 0)	observatio nal studies	no seriou s risk of bias	no serious inconsisten cy	no serious indirectn ess	serious <sup>3</sup>	none	34	21	-	MD 3.9 lower (7.77 to 0.03 lower)	VERY LOW	CRITICAL

Qualit	ty assessme	nt					No of patients		Effect			
No of stud ies	Design	Risk of bias	Inconsiste ncy	Indirectn ess	Impreci sion	Other considerat ions	Prednisone/ Prednisolone	Plac ebo	Relat ive (95% CI)	Absol ute	Quality	Importan ce
1 (Lai 200 0)	observatio nal studies	no seriou s risk of bias	no serious inconsisten cy	no serious indirectn ess	serious <sup>3</sup>	none	31	21	-	MD 4.1 lower (7.82 to 0.38 lower)	VERY LOW	CRITICAL
Heigh		of Age		red with: ci	m; Better ir	ndicated by hi	gher values) [1 mg pre					
1 (Lai 200 0)	observatio nal studies	no seriou s risk of bias	no serious inconsisten cy	no serious indirectn ess	very serious <sup>2</sup>	none	20	23	-	MD 1 lower (4.54 lower to 2.54 higher	VERY LOW	CRITICAL
Heigh	it at 18 Years	of Age	- Girls (measu	red with: cı	m; Better ir	ndicated by hi	gher values) [2 mg pre	dnisone]				
1 (Lai 200 0)	observatio nal studies	no seriou s risk of bias	no serious inconsisten cy	no serious indirectn ess	very serious <sup>2</sup>	none	23	23	-	MD 0.5 lower (4.43 lower to 3.43 higher )	VERY LOW	CRITICAL
Adve	rse effects - (	Cataract	s (follow-up 4	years) [1 m	g prednisc	ne]						
1 (Eig en	randomise d trials	seriou s <sup>1</sup>	no serious inconsisten cy	no serious	very serious <sup>2</sup>	none	3/95 (3.2%)	7/95 (7.4 %)	RR 0.43 (0.11	42 fewer per	VERY LOW	CRITICAL

Quali	ty assessme	nt					No of patients		Effect			
No of stud ies	Design	Risk of bias	Inconsiste ncy	Indirectn ess	Impreci sion	Other considerat ions	Prednisone/ Prednisolone	Plac ebo	Relat ive (95% CI)	Absol ute	Quality	Importan ce
199 5)				indirectn ess					to 1.61)	1000 (from 66 fewer to 45 more)		
Adve	rse effects -	Cataract	s (follow-up 3	years) [2 m	ng predniso	ne]						
1 (Eig en 199 5)	randomise d trials	seriou s <sup>1</sup>	no serious inconsisten cy	no serious indirectn ess	very serious <sup>2</sup>	none	11/95 (11.6%)	7/95 (7.4 %)	RR 1.57 (0.64 to 3.88)	more per 1000 (from 27 fewer to 212 more)	VERY LOW	CRITICAL
Adve	rse effects - I	Diabetes	mellitus (foll	ow-up 4 yea	ars) [1 mg p	orednisone]						
1 (Eig en 199 5)	randomise d trials	seriou s <sup>1</sup>	no serious inconsisten cy	no serious indirectn ess	very serious <sup>2</sup>	none	3/95 (3.2%)	1/95 (1.1 %)	RR 3 (0.32 to 28.33 )	21 more per 1000 (from 7 fewer to 288 more)	VERY LOW	CRITICAL
Adve	rse effects - l	Diabetes	mellitus (foll	ow-up 3 yea	ars) [2 mg p	orednisone]						
1 (Eig en	randomise d trials	seriou s <sup>1</sup>	no serious inconsisten cy	no serious	very serious <sup>2</sup>	none	6/95 (6.3%)	1/95 (1.1 %)	RR 6.00 (0.74 to	53 more per 1000	VERY LOW	CRITICAL

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Quali	ty assessme	nt					No of patients		Effect			
No of stud ies	Design	Risk of bias	Inconsiste ncy	Indirectn ess	Impreci sion	Other considerat ions	Prednisone/ Prednisolone	Plac ebo	Relat ive (95% CI)	Absol ute	Quality	Importan ce
199 5)				indirectn ess					48.89	(from 3 fewer to 504 more)		
Adve	rse effects - (	Glycosu	ria (follow-up	4 years) [1	mg prednis	sone]						
1 (Eig en 199 5)	randomise d trials	seriou s <sup>1</sup>	no serious inconsisten cy	no serious indirectn ess	very serious <sup>2</sup>	none	6/95 (6.3%)	4/95 (4.2 %)	RR 1.5 (0.44 to 5.15)	21 more per 1000 (from 24 fewer to 175 more)	VERY LOW	CRITICAL
Adve	rse events - 0	Glycosu	ria (follow-up	3 years) [2	mg prednis	one]						
1 (Eig en 199 5)	randomise d trials	seriou s <sup>1</sup>	no serious inconsisten cy	no serious indirectn ess	serious <sup>3</sup>	none	10/95 (10.5%)	4/95 (4.2 %)	RR 2.5 (0.81 to 7.69)	63 more per 1000 (from 8 fewer to 282 more)	LOW	CRITICAL
Adve	rse effects - I	Hypergly	/caemia (follo	w-up 4 year	's) [1 mg pr	rednisone]						
1 (Eig en	randomise d trials	seriou s <sup>1</sup>	no serious inconsisten cy	no serious indirectn ess	very serious <sup>2</sup>	none	3/95 (3.2%)	2/95 (2.1 %)	RR 1.5 (0.26	11 more per 1000 (from	VERY LOW	CRITICAL

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Quali	ty assessme	nt					No of patients		Effect			
No of stud ies	Design	Risk of bias	Inconsiste ncy	Indirectn ess	Impreci sion	Other considerat ions	Prednisone/ Prednisolone	Plac ebo	Relat ive (95% CI)	Absol ute	Quality	Importan ce
199 5)									to 8.78)	16 fewer to 164 more)		
Adve	rse effects - l	Hypergly	caemia (follo	w-up 3 year	s) [2 mg pr	ednisone]						
1 (Eig en 199 5)	randomise d trials	seriou s <sup>1</sup>	no serious inconsisten cy	no serious indirectn ess	serious <sup>3</sup>	none	10/95 (10.5%)	2/95 (2.1 %)	RR 5 (1.13 to 22.21	84 more per 1000 (from 3 more to 447 more)	LOW	CRITICAL
Morta	ility (follow-u	p 4 year	rs)									
1 (Aub erch 198 5)	randomise d trials	no seriou s risk of bias <sup>5</sup>	no serious inconsisten cy	no serious indirectn ess	very serious <sup>6</sup>	none	0/21 (0%)	1/24 (4.2 %)	RR 0.38 (0.02 to 8.83)	26 fewer per 1000 (from 41 fewer to 326 more)	LOW	IMPORTA NT

Abbreviations: CI: confidence interval; kg: kilogrammes; MD: mean difference; mg: milligrams; RR: risk ratio

<sup>1</sup> The quality of the evidence was downgraded by 1, as allocation concealment and blinding were unclear.

<sup>2</sup> The quality of the evidence downgraded by 2 as 95% CI crossed 2 default MIDs.

<sup>3</sup> The quality of the evidence downgraded by 1 as 95% CI crossed 1 default MID.
4 The quality of the evidence was upgraded by 1 as there is evidence of dose-response within study

<sup>5</sup> Allocation concealment and blinding were unclear, but the quality of the evidence was not downgraded for this outcome

<sup>6</sup> The quality of the evidence was downgraded by 2 as 95%Cl crossed the null effect line, and it is very wide.