**Supplementary material 3**

**Table 1 The quality assessment of included studies by the Cochrane risk of bias tool**

|  |  |
| --- | --- |
| Study | Cochrane risk of bias tool components |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Payen 2023 (OXY-TC trial) | - | - | + | - | - | - | - |
| Okonkwo 2017 (BOOST-II trial) | - | - | + | - | - | - | - |
| Lin 2015 | ? | ? | + | ? | - | - | - |
| Lee 2010 | - | - | - | - | - | - | - |

1: Random sequence generation; 2: Allocation concealment; 3: Blinding of participants and personnel; 4: Blinding of outcome assessment; 5: Incomplete outcome data; 6: Selective reporting; 7: Other bias.

“-” indicates low risk of bias, “+” indicates high risk of bias, “?” indicates unclear risk of bias.

**Table 2 The quality assessment of included studies by the Newcastle-Ottawa Scale for cohort studies**

|  |  |  |
| --- | --- | --- |
| Study | Newcastle-Ottawa Scale components | Quality score |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| Roman 2023 | \* | \* | \* | \* |  | \* | \* | \* | 7 |
| Barrit 2022 | \* | \* | \* | \* | \*\* | \* | \* |  | 8 |
| Hoffman 2021 | \* | \* | \* | \* | \*\* | \* | \* | \* | 9 |
| Sekhon 2017 | \* | \* | \* | \* |  | \* | \* | \* | 7 |
| Green 2013 | \* | \* | \* | \* |  | \* | \* | \* | 7 |
| Spiotta 2010 | \* | \* | \* | \* |  | \* | \* | \* | 7 |
| Mccarthy 2009 | \* | \* | \* | \* |  | \* | \* | \* | 7 |
| Narotam 2009 | \* | \* | \* | \* |  | \* | \* | \* | 7 |
| Martini 2009 | \* | \* | \* | \* |  | \* | \* | \* | 7 |
| Adamides 2009 | \* | \* | \* | \* | \*\* | \* | \* | \* | 9 |
| Stiefel 2005 | \* | \* | \* | \* |  | \* | \* | \* | 7 |
| Meixensberger 2003 | \* | \* | \* | \* |  | \* | \* | \* | 7 |

1: Representativeness of the exposed cohort; 2: Selection of the non-exposed cohort; 3: Ascertainment of exposure; 4: Demonstration that outcome of interest was not present at start of study; 5: Comparability of cohorts on the basis of the design or analysis; 6: Assessment of outcome; 7: Was follow-up long enough for outcomes to occur; 8: Adequacy of follow up of cohorts.