

**Table 18: Clinical evidence profile: Dose A (20 mg 0800 h, 10 mg 1600 h) vs Dose B (10 mg 0800 h and 1600 h) vs Dose C (10 mg 0800 h and 5 mg 1600 h) for secondary and tertiary adrenal insufficiency [Blood Pressure Outcomes]**

Certainty assessment							Summary of findings				
Participants (studies) Follow-up	Risk of bias	Inconsistency	Indirectness	Imprecision	Publication bias	Overall certainty of evidence	Study event rates (%)		Relative effect (95% CI)	Anticipated absolute effects	
							With comparator	With intervention		Risk with comparator	Risk difference with intervention
24h ambulatory systolic BP - A vs B (follow-up: 6 weeks)											

Certainty assessment							Summary of findings				
10 (1 RCT)	very serious <sup>a</sup>	not serious	serious <sup>b</sup>	very serious <sup>c</sup>	none	⊕○○○ Very low	10	10	-	The mean 24h ambulatory systolic BP - A vs B was <b>117</b> mmHg	MD <b>2 mmHg lower</b> (12.52 lower to 8.52 higher)
<b>24h ambulatory systolic BP - A vs C (follow-up: 6 weeks)</b>											
10 (1 RCT)	very serious <sup>a</sup>	not serious	serious <sup>b</sup>	very serious <sup>d</sup>	none	⊕○○○ Very low	10	10	-	The mean 24h ambulatory systolic BP - A vs C was <b>115</b> mmHg	MD <b>0 mmHg</b> (10.97 lower to 10.97 higher)
<b>24h ambulatory systolic BP - B vs C (follow-up: 6 weeks)</b>											
10 (1 RCT)	very serious <sup>a</sup>	not serious	serious <sup>b</sup>	very serious <sup>d</sup>	none	⊕○○○ Very low	10	10	-	The mean 24h ambulatory systolic BP - B vs C was <b>115</b> mmHg	MD <b>2 mmHg higher</b> (8.97 lower to 12.97 higher)
<b>24h ambulatory diastolic BP - A vs B (follow-up: 6 weeks)</b>											
10 (1 RCT)	very serious <sup>a</sup>	not serious	serious <sup>b</sup>	very serious <sup>e</sup>	none	⊕○○○ Very low	10	10	-	The mean 24h ambulatory diastolic BP - A vs B was <b>68</b> mmHg	MD <b>2 mmHg higher</b> (5.01 lower to 9.01 higher)
<b>24h ambulatory diastolic BP - B vs C (follow-up: 6 weeks)</b>											

Certainty assessment							Summary of findings				
10 (1 RCT)	very serious <sup>a</sup>	not serious	serious <sup>b</sup>	very serious <sup>f</sup>	none	⊕○○○ Very low	10	10	-	The mean 24h ambulatory diastolic BP - B vs C was <b>68</b> mmHg	MD <b>2 mmHg higher</b> (4.59 lower to 8.59 higher)
<b>24h ambulatory diastolic BP - A vs C (follow-up: 6 weeks)</b>											
10 (1 RCT)	very serious <sup>a</sup>	not serious	serious <sup>b</sup>	very serious <sup>f</sup>	none	⊕○○○ Very low	10	10	-	The mean 24h ambulatory diastolic BP - A vs C was <b>68</b> mmHg	MD <b>0 mmHg</b> (6.59 lower to 6.59 higher)

### Explanations

- Downgraded by 2 increments due to very serious risk of bias: Study authors do not provide necessary details around recruitment and randomisation so outcomes are at risk of selection bias.
- Downgraded by 1 increment as population includes males only [Female subjects were excluded because of the potential effect of oestrogen status on corticosteroid-binding globulin (CBG) levels]
- Downgraded by 2 increments as confidence interval crossed both MIDs (+/- 6)
- Downgraded by 2 increments as confidence interval crossed both MIDs (+/- 6.5)
- Downgraded by 2 increments as confidence interval crossed both MIDs (+/- 4)
- Downgraded by 2 increments as confidence interval crossed both MIDs (+/- 3.5)