Table 3. Strength of evidence for corticosteroids (KQ3)

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| --- | --- | --- | --- | --- | --- | --- |
| **Outcome****Drug Comparison****Number of Studies** **# of Subjects** | **Risk of Bias****Design/ Quality** | **Consistency** | **Directness** | **Precision** | **Results** | **Strength of Evidence** |
| **Overall Tolerability :****Corticosteroid vs. Corticosteroid**1 RCT N = 143 | MediumRCT/fair | Unknown, single study | Direct  | Precise  | Similar tolerability with budesonide and prednisolone | Low |
| **Overall Tolerability:****Corticosteroid vs. no corticosteroid** 1cohort studyN = 224  | MediumRetrospective cohort/1 fair | Unknown, single study | Indirect | Imprecise | Dose dependent increased risk of fracture, infection, and GI events | Insufficient |
| **Cardiovascular and Cerebrovascular Events:****Corticosteroid vs. no corticosteroid** 1 RCTN = 467 4 observational N = 122,817 | MediumRCT/fair observational/ 4 fair | Inconsistent | Direct  | Imprecise  | Mixed results; decreased cardiovascular risk in one study, but increased risk of cardiovascular events and stroke in others  | Low |
| **Infection:****Corticosteroid vs. no corticosteroid** 9 observational N = 268,383 | Lowobservational/ 7 fair, 2 good | Consistent | Indirect  | Precise  | Corticosteroids increase risk of serious infection, TB, and herpes zoster | Moderate |
| **Other Adverse Events:****Corticosteroid vs. no corticosteroid** 3 observational N = 161,838 | Mediumobservational/ 3 fair | Unknown, single studies | Indirect  | Imprecise  | Risk of septic (infectious) arthritis and interstitial lung disease increased with corticosteroids  | Low |

RCT, randomized controlled trial; TB, tuberculosis; vs., versus.