Table O.35: Topiramate (plus risperidone) versus placebo (plus risperidone) in children and young people

Quality assessment							Summary of findings				
Participants (studies) Follow up	Risk of bias	Inconsistency	Indirectness	Imprecision	Publication bias	Overall quality of evidence	Study event rates (%)		Relative effect (95% CI)	Anticipated absolute effects	
							With placebo plus risperidone	With topiramate plus risperidone		Risk with Placebo plus risperidone	Risk difference with topiramate plus risperidone (95% CI)
Targeted behaviour that challenges (severity) – post-treatment (Better indicated by lower values)											
40 (1 study)	no serious risk of bias	no serious inconsistency	serious[1]	very serious[2]	undetected	⨁⊖⊖⊖ VERY LOW[1,2] due to indirectness, imprecision	20	20	-		The mean targeted behaviour that challenges (severity) – post-treatment in the intervention groups was 1.88 standard deviations lower (2.63 to 1.12 lower)
Adverse events (sedation, non-occurrence) – post-treatment											
40 (1 study)	no serious risk of bias	no serious inconsistency	serious[1]	very serious[2]	undetected	⨁⊖⊖⊖ VERY LOW[1,2] due to indirectness, imprecision	16/20 (80%)	19/20 (95%)	RR 1.19 (0.93 to 1.51)	800 per 1000	152 more per 1000 (from 56 fewer to 408 more)
Adverse events (weight at endpoint; kg) – post-treatment (Better indicated by lower values)											
40 (1 study)	no serious risk of bias	no serious inconsistency	serious[1]	very serious[2]	undetected	⨁⊖⊖⊖ VERY LOW[1,2] due to	20	20	-		The mean adverse events (weight at endpoint; kg) – post-treatment in the

Quality assessment							Summary of findings				
						indirectness, imprecision					intervention groups was 0.24 standard deviations lower (0.87 lower to 0.38 higher)

[1] Applicability – different populations
[2] Optimal information size not met; small, single study