Appendix D – Clinical evidence tables

Full citation	Badger S, Bedenis R, Blair PH et al. (2017) Endovascular treatment for ruptured abdominal aortic aneurysm. Cochrane Database Syst Rev;(5):CD005261. doi: 10.1002/14651858.CD005261.pub4
Study details	Study type: systematic review Location: UK Aim(s): to assess the advantages and disadvantages of emergency endovascular aneurysm repair in comparison with conventional open surgical repair for the treatment of ruptured AAA.
	Study dates: literature searched for publications up to June 2016 Follow-up: 30 days, 6 months and 1 year
	Sources of funding: this study was supported by funding from the UK National Institute of Health Research (NIHR)
Participants	Population: patients with ruptured AAA diagnosed by computed tomography, angiography, magnetic resonance angiography, or objective acute symptoms suggestive of rupture of the aneurysm
	Sample size: 4 RCTs (AJAX, ECAR, IMPROVE, and Hinchliffe 2016 trials) including 868 participants Inclusion criteria: RCTs in which patients with a clinically or radiologically diagnosed ruptured AAA were randomly allocated to emergency EVAR or open surgical repair Exclusion criteria: not reported
Methods	This systematic review is an update of a systematic review published in 2014. Literature searches were performed on the Cochrane Central Register of Controlled trials and the Cochrane Vascular Specialised Register (constructed from weekly electronic searches of MEDLINE, Embase, CINAHL, and AMED databases. Additional searches were also performed on the World Health Organisation International Clinical Trials Registry, ClinicalTrials.gov website and the ISRCTN register. Bibliographies of included studies were reviewed to identify any additional studies that were relevant to the review question. Two independent reviewers were involved in study selection, data extraction, and risk of bias assessments. Any disagreements were resolved through discussion.
Intervention	EVAR using any type of endovascular device
Comparison	Open surgical repair
Outcomes measures	Endoleak; complications and mortality at 30-day, 6-month and 1-year follow-up; quality of life
Study Appraisal	1. Was an 'a priori' design provided? Yes
using AMSTAR	2. Was there duplicate study selection and data extraction? Yes

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(Assessing the Methodological Quality of Systematic Reviews)	3. Was a comprehensive literature search performed? Yes
	4. Was the status of publication (i.e. grey literature) used as an inclusion criterion? Not explicitly stated; however authors state that conference proceedings and other grey literature sources were searched to identify relevant studies.
	5. Was a list of studies (included and excluded) provided? Yes
	6. Were the characteristics of the included studies provided? Yes
	7. Was the scientific quality of the included studies assessed and documented? Yes
	8. Was the scientific quality of the included studies used appropriately in formulating conclusions? Yes
	9. Were the methods used to combine the findings of studies appropriate? Yes
	10. Was the likelihood of publication bias assessed? Yes
	11. Was the conflict of interest included? Yes
	Directness: Directly applicable