Table 5: Clinical evidence profile: Comparison 1. Deep inspiration breath-hold versus free breathing

Quality assessment							No of patients		Effect			
No of studi es	Design	Risk of bias	Inconsisten cy	Indirectne ss	Imprecisi on	Other considerations	Deep Inspirati on Breath- Hold	Free Breathing(Supin e)	Relati ve (95% CI)	Absol ute	Qual ity	Importan ce
Mean	Heart Dose at	RT (mea	asured with: G	y; Better indi	cated by low	ver values)						
<b>4</b> 1,2,3,	Observation al studies	No serio us risk of bias	Very serious <sup>5</sup>	Serious <sup>6</sup>	Serious <sup>7</sup>	None	236	236	-	MD 1.29 lower (1.81 to 0.77 lower)	VER Y LOW	CRITICA L
Target	t Coverage at I	RT (rang	je of scores: 0	-100; Better i	ndicated by	higher values)						
1 <sup>1</sup>	Observation al studies	No serio us risk of bias	No serious inconsistenc y	No serious indirectnes s	Serious <sup>5</sup>	None	81	81	-	MD 0.5 higher (4.6 lower to 5.6 higher)	VER Y LOW	CRITICA L

Cl: Confidence interval; DCIS: Ductal carcinoma in situ; Gy: Gray; MD: Mean difference; RT: Radiotherapy

<sup>&</sup>lt;sup>1</sup> Eldredge-Hindy 2015

<sup>&</sup>lt;sup>2</sup> Chi 2015

<sup>&</sup>lt;sup>3</sup> Czeremszynska 2017

<sup>&</sup>lt;sup>4</sup> Barlett 2017

<sup>&</sup>lt;sup>5</sup> Downgraded by 2 levels for very serious inconsistency as I square=89% <sup>6</sup> Downgraded by 1 level for indirectness due to inclusion of women with only larger breast volumes (estimated volume>750cm³)

<sup>7</sup> Downgraded by 1 level for serious imprecision, as number of events <400