Supplementary Material to Sciascia et al. “Anti-prothrombin (aPT) and anti-phosphatidylserine/prothrombin (aPS/PT) antibodies and the risk of thrombosis in the antiphospholipid syndrome: A systematic review” (Thromb Haemost 2014; 111.2)

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>Relative effect (95% CI)</th>
<th>No of Participants (studies)</th>
<th>Quality of the evidence (GRADE)</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thrombosis laboratory test results</td>
<td>OR ranged from 1.72 to 3.5</td>
<td>7428 (48 studies)</td>
<td>⊕⊕⊕⊕ low(^1)</td>
<td>Importance: critical</td>
</tr>
</tbody>
</table>

CI: Confidence interval; OR: Odds ratio;

GRADE Working Group grades of evidence
High quality: Further research is very unlikely to change our confidence in the estimate of effect.
Moderate quality: Further research is likely to have an important impact on our confidence in the estimate of effect and may change the estimate.
Low quality: Further research is very likely to have an important impact on our confidence in the estimate of effect and is likely to change the estimate.
Very low quality: We are very uncertain about the estimate.

\(^1\) Inconsistency of the results due to high heterogeneity in studies design.

Suppl. Table 1: GRADE Evidence Profile.