SUPPLEMENT

Search Strategy

MEDLINE, EMBASE and EMBASE Classic, and the Cochrane central register of controlled trials were searched. The search was limited to humans. No restrictions were applied with regard to language of publication. A recursive search of the bibliography of relevant articles was also conducted. Conference proceedings from Digestive Diseases Week, Asia Pacific Digestive Week, and United European Gastroenterology Week were searched. The literature search used is given below.

For randomised controlled trials of soluble or insoluble fibre:

- 1 irritable bowel syndrome.mp. or Colonic Diseases, Functional/ or Irritable Bowel Syndrome/
- 2 irritable colon.mp.
- 3 IBS.mp.
- 4 spastic colon.mp.
- 5 (functional adj5 bowel).mp.
- 6 1 or 2 or 3 or 4 or 5
- 7 Dietary Fiber/ or dietary fibre.mp.
- 8 cereals.mp. or Cereals/
- 9 psyllium.mp. or Psyllium/
- 10 sterculia.mp. or Sterculia/

23 or 24

6 and 25

26

11 karaya gum.mp. or Karaya Gum/ 12 bulking agent.mp. or Cellulose/ 13 psyllium fibre.mp. 14 psyllium fiber.mp. 15 dietary fiber.mp. 16 fiber.mp. 17 fibre.mp. 18 husk.mp. 19 bran.mp. 20 wheat bran.mp. 21 ispaghula.mp. 22 metamucil.mp. 23 fybogel.mp. 24 linseeds.mp.

7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17 or 18 or 19 or 20 or 21 or 22 o

For randomised controlled trials of low FODMAP diet or gluten-free diet:

1	irritable bowel	syndrome.mp.	or Colonic I	Diseases, Fu	nctional/ o	r Irritable B	owel
Syn	drome/						

- 2 irritable colon.mp.
- 3 IBS.mp.
- 4 spastic colon.mp.
- 5 (functional adj5 bowel).mp.
- 6 1 or 2 or 3 or 4 or 5
- 7 diet.mp.
- 8 gluten-free.mp.
- 9 gluten.mp.
- 10 FODMAP\$.mp.
- 11 7 or 8 or 9 or 10
- 12 6 and 11

For randomised controlled trials of probiotics:

1	irritable bowel syndrome.mp. or Colonic Diseases, Functional/ or Irritable Bowel
Syn	drome/

- 2 irritable colon.mp.
- 3 IBS.mp.
- 4 spastic colon.mp.
- 5 (functional adj5 bowel).mp.
- 6 1 or 2 or 3 or 4 or 5
- 7 saccharomyces.mp.
- 8 lactobacillus.mp.
- 9 bifidobacterium.mp.
- 10 escherischia coli.mp.
- 11 escherichia coli.mp.
- 12 probiotics.mp.
- 13 7 or 8 or 9 or 10 or 11 or 12
- 14 6 and 13

For randomised controlled trials of antispasmodic drugs:

1	irritable bowel syndrome.mp. or Colonic Diseases, Functional/ or Irritable Bowel
Syr	ndrome/
2	irritable colon.mp.
3	IBS.mp.
4	spastic colon.mp.
5	(functional adj5 bowel).mp.
6	1 or 2 or 3 or 4 or 5
7	Parasympatholytics.mp. or Parasympatholytics/
8	scopolamine.mp. or Scopolamine Hydrobromide/
9	scopolamine derivatives.mp. or Scopolamine Derivatives/
10	trimebutine.mp. or Trimebutine/
11	spasmolytics.mp.
12	spasmolytic agents.mp.
13	antispasmodics.mp.
14	antispasmodic agents.mp.
15	mebeverine.mp.
16	alverine.mp.
17	pinaverium.mp.
18	otilonium.mp.

- 19 octilonium.mp.
- 20 cimetropium.mp.
- 21 hyoscine.mp. or Scopolamine Hydrobromide/
- 22 muscarinic antagonists.mp. or Muscarinic Antagonists/
- 23 Butylscopolammonium Bromide.mp. or Butylscopolammonium Bromide/
- 24 hyoscine butyl bromide.mp.
- 25 butylscopolamine.mp.
- 26 dicyclomine.mp. or Dicyclomine/
- 27 dicycloverine.mp.
- 28 propinox.mp.
- 29 rociverine.mp.
- 30 pirenzipine.mp. or Pirenzepine/
- 31 prifinium.mp.
- 32 drotaverine.mp.
- 33 7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17 or 18 or 19 or 20 or 21 or 22 or 23 or 24 or 25 or 26 or 27 or 28 or 29 or 30 or 31 or 32
- 34 6 and 33

For randomised controlled trials of peppermint oil:

1	irritable bowel syndrome.mp	. or Colo	nic Diseases	, Functional/	or Irritable	Bowel

Syndrome/

- 2 irritable colon.mp.
- 3 IBS.mp.
- 4 spastic colon.mp.
- 5 (functional adj5 bowel).mp.
- 6 1 or 2 or 3 or 4 or 5
- 7 peppermint oil.mp. or Menthol/
- 8 peppermint.mp. or Mentha piperita/
- 9 colpermin.mp.
- 10 mintec.mp.
- 11 7 or 8 or 9 or 10
- 12 6 and 11

For randomised controlled trials of gut-brain neuromodulators:

1	irritable bowel	syndrome.mp.	or Colonic	Diseases,	Functional/	or Irritable	Bowel
Syr	ndrome/						

- 2 irritable colon.mp.
- 3 IBS.mp.
- 4 spastic colon.mp.
- 5 (functional adj5 bowel).mp.
- 6 1 or 2 or 3 or 4 or 5
- 7 psychotropic drugs.mp. or Psychotropic Drugs/
- 8 antidepressive agents.mp. or Antidepressive Agents/
- 9 Antidepressive Agents, Tricyclic/ or tricyclic.mp. or Amitriptyline/
- 10 antidepressants.mp.
- 11 serotonin uptake inhibitors.mp. or Serotonin Uptake Inhibitors/
- 12 serotonin reuptake inhibitors.mp.
- 13 selective serotonin reuptake inhibitors.mp.
- 14 serotonin re-uptake inhibitors.mp.
- 15 selective serotonin re-uptake inhibitors.mp.
- 16 desimipramine.mp.
- 17 doxepin.mp. or Doxepin/
- 18 dothiepin.mp. or Dothiepin/

- 19 amitriptyline.mp. or Amitriptyline/
- 20 trimipramine.mp. or Trimipramine/
- 21 desipramine.mp. or Desipramine/
- 22 imipramine.mp. or Imipramine/
- 23 nortriptyline.mp. or Nortriptyline/
- 24 paroxetine.mp. or Paroxetine/
- 25 fluoxetine.mp. or Fluoxetine/
- 26 sertraline.mp. or Sertraline/
- 27 citalopram.mp. or Citalopram/
- 28 escitalopram.mp. or Citalopram/
- 29 venlafaxine.mp.
- 30 efexor.mp.
- 31 prozac.mp.
- 32 seroxat.mp.
- 33 duloxetine.mp.
- 34 pregabalin.mp.
- 35. 7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17 or 18 or 19 or 20 or 21 or 22 or
- 23 or 24 or 25 or 26 or 27 or 28 or 29 or 30 or 31 or 32 or 33 or 34
- 35 6 and 35

For randomised controlled trials of laxatives, 5-HT₄ receptor agonists, and secretagogues:

- 1 irritable bowel syndrome.mp. or Colonic Diseases, Functional/ or Irritable Bowel Syndrome/
- 2 irritable colon.mp.
- 3 IBS.mp.
- 4 spastic colon.mp.
- 5 (functional adj5 bowel).mp.
- 6 1 or 2 or 3 or 4 or 5 (55240)
- 7 laxatives.mp. or Cathartics/ or Anthraquinones/ or Laxatives/ or Phenolphthaleins/ or Indoles/ or Phenols/
- 8 polyethylene glycol.mp. or Polyethylene Glycols/
- 9 lactulose.mp. or Lactulose/
- 10 Serotonin Agonists/ or tegaserod.mp. or Receptors, Serotonin, 5-HT4/
- 11 zelnorm.mp.
- 12 Senna Plant/ or Senna Extract/ or senna\$.mp.
- 13 linaclotide.mp.
- 14 prucalopride.mp.
- 15 lubiprostone.mp. or Receptors, Prostaglandin E/
- 16 bisacodyl.mp. or Bisacodyl/

33

34

35

naronapride.mp.

6 and 34

17 sodium picosulphate.mp. or Phosphates/ 18 docusate.mp. or Dioctyl Sulfosuccinic Acid/ 19 Magnesium/ or milk of magnesia.mp. 20 magnesium hydroxide.mp. or Magnesium Hydroxide/ 21 sorbitol.mp. or Sorbitol/ 22 danthron.mp. 23 poloxalkol.mp. or Poloxamer/ 24 A3309.mp. 25 elobixibat.mp. 26 constella.mp. 27 linzess.mp. 28 amitiza.mp. 29 plecanatide.mp. 30 trulance.mp. 31 tenapanor.mp. 32 velusetrag.mp.

7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17 or 18 or 19 or 20 or 21 or 22

or 23 or 24 or 25 or 26 or 27 or 28 or 29 or 30 or 31 or 32 or 33

Vasant DH, et al. Gut 2021; 70:1214–1240. doi: 10.1136/gutjnl-2021-324598

For randomised controlled trials of anti-diarrhoeal drugs and eluxadoline:

1	irritable bow	el syndrome.mp.	or Colonic	Diseases,	Functional/	or Irritabl	e Bowel
Svr	ndrome/						

- 2 irritable colon.mp.
- 3 IBS.mp.
- 4 spastic colon.mp.
- 5 (functional adj5 bowel).mp.
- 6 1 or 2 or 3 or 4 or 5
- 7 loperamide.mp.
- 8 immodium.mp.
- 9 eluxadoline.mp.
- 12 viberzi.mp.
- 13 7 or 8 or 9 or 10 or 11 or 12
- 14 6 and 13

For randomised controlled trials of 5-HT₃ receptors antagonists:

1	irritable bowel syndrome.mp. or Colonic Diseases, Functional/ or Irritable Bowel
Syn	drome/
2	irritable colon.mp.

4 spastic colon.mp.

IBS.mp.

- 5 (functional adj5 bowel).mp.
- 6 1 or 2 or 3 or 4 or 5
- 7 serotonin antagonists.mp. or Serotonin Antagonists/
- 8 Receptors, Serotonin/ or 5HT3.mp.
- 9 5-HT3.mp. or Serotonin 5-HT3 Receptor Antagonists/ or Receptors, Serotonin, 5-HT3/
- 10 alosetron.mp.
- 11 ramosetron.mp.
- 12 ondansetron.mp.
- 13 7 or 8 or 9 or 10 or 11 or 12
- 14 6 and 13

For randomised controlled trials of antibiotics:

1	irritable bowel syndrome.mp. or Colonic Diseases, Functional/ or Irritable Bowel
Syr	ndrome/
2	irritable colon.mp.
3	IBS.mp.
4	spastic colon.mp.
5	(functional adj5 bowel).mp.
6	1 or 2 or 3 or 4 or 5
7	anti-bacterial agents.mp.
8	penicillins.mp.
9	cephalosporins.mp.
10	rifamycins.mp.
11	quinolones.mp.
12	nitroimidazoles.mp.
13	tetracycline.mp.
14	doxycycline.mp.
15	amoxicillin.mp.
16	ciprofloxacin.mp.
17	metronidazole.mp.
18	tinidazole.mp.

- 19 antibiotic.mp.
- 20 rifaximin.mp.
- $21 \quad 7 \text{ or } 8 \text{ or } 9 \text{ or } 10 \text{ or } 11 \text{ or } 12 \text{ or } 13 \text{ or } 14 \text{ or } 15 \text{ or } 16 \text{ or } 17 \text{ or } 18 \text{ or } 19 \text{ or } 20$
- 22 6 or 21

For randomised controlled trials of psychological therapies:

1	irritable bowel syndrome.mp. or Colonic Diseases, Functional/ or Irritable Bowel
Syı	ndrome/

- 2 irritable colon.mp.
- 3 IBS.mp.
- 4 spastic colon.mp.
- 5 (functional adj5 bowel).mp.
- 6 1 or 2 or 3 or 4 or 5
- 7 behavior therapy.mp. or Behavior Therapy/
- 8 behaviour therapy.mp.
- 9 behavioral therapy.mp.
- 10 behavioural therapy.mp.
- 11 cognitive behavior therapy.mp. or Cognitive Therapy/
- 12 cognitive behavioral therapy.mp.
- 13 cognitive behaviour therapy.mp.
- 14 cognitive behavioural therapy.mp.
- 15 psychotherapy.mp. or Psychotherapy/ or Psychotherapy, Multiple/ or Psychotherapy,

Group/ or Psychotherapy, Brief/

- 16 relaxation therapy.mp. or Relaxation Therapy/
- 17 relaxation technique.mp.

- 18 hypnosis.mp. or Hypnosis/
- 19 hypnotherapy.mp.
- 20 stress management.mp.
- 21 Contingency management.mp.
- 22 (Emotional awareness and expression training).mp.
- 23 Mindfulness meditation.mp.
- 24 Dynamic psychotherapy.mp.
- 25 7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17 or 18 or 19 or 20 or 21 or 22
- or 23 or 24
- 26 6 and 25

Supplementary Table 1. Summary of Evidence from Randomised Controlled Trials of Dietary Therapies, Drugs, and Psychological Therapies in Irritable Bowel Syndrome.

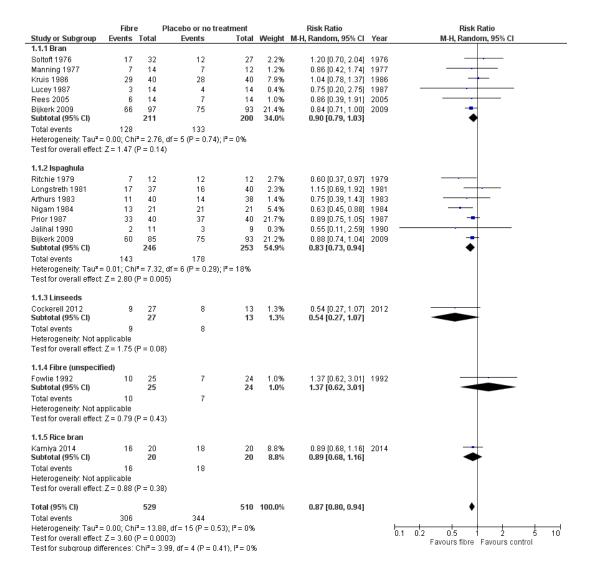
Intervention	Number of	Number of	IBS	Relative Risk of Remaining	Recommendation	Quality of
	RCTs	Patients	Subtype	Symptomatic (95% CI)		Evidence
Ispaghula, but not bran, is effective in IBS	7	499	Not stated	0.83 (0.73 to 0.94)	Strong	Moderate
A low FODMAP diet may be effective in	11	658	Not stated	0.71 (0.61 to 0.83)	Weak	Very low
IBS						
There is insufficient evidence to	2	111	Not stated	0.42 (0.11 to 1.55)	Weak	Very low
recommend a gluten-free diet in IBS						
Certain probiotics may be effective in IBS						
Combinations of probiotics	23	2327	Not stated	0.79 (0.70 to 0.89)	Weak	Very low
Lactobacillus	11	1233	Not stated	0.75 (0.60 to 0.94)	Weak	Very low
Bifidobacterium	5	1194	Not stated	0.80 (0.70 to 0.91)	Weak	Very low
Escherichia	2	418	Not stated	0.86 (0.79 to 0.93)	Weak	Very low
Loperamide may be effective for diarrhoea	2	42	IBS-D or	0.44 (0.14 to 1.42)	Strong	Very low
in IBS			IBS-M			

Certain antispasmodics may be effective in						
IBS						
All antispasmodics	26	2811	Not stated	0.65 (0.56 to 0.76)	Weak	Very low
Otilonium	5	791	Not stated	0.70 (0.54 to 0.90)	Weak	Very low
Pinaverium	4	615	Not stated	0.56 (0.38 to 0.82)	Weak	Very low
Hyoscine	3	426	Not stated	0.63 (0.51 to 0.78)	Weak	Very low
Cimetropium	3	152	Not stated	0.38 (0.20 to 0.71)	Weak	Very low
Drotaverine	2	250	Not stated	0.31 (0.19 to 0.50)	Weak	Very low
Dicycloverine	1	97	Not stated	0.65 (0.45 to 0.95)	Weak	Very low
Peppermint oil may be effective in IBS	8	823	Not stated	0.58 (0.34 to 0.98)	Weak	Very low
Polyethylene glycol may be effective for	2	181	IBS-C	Data not pooled	Weak	Very low
constipation in IBS						
Tricyclic antidepressants are effective in	12	787	Not stated	0.65 (0.55 to 0.77)	Strong	Moderate
IBS						
Selective serotonin reuptake inhibitors may	7	356	Not stated	0.68 (0.51 to 0.91)	Weak	Low
be effective in IBS						
Eluxadoline is effective in IBS-D						
75mg b.i.d.	2	1619	IBS-D	0.89 (0.84 to 0.94)	Weak	Moderate
100mg b.i.d.	4	2312	IBS-D	0.87 (0.83 to 0.91)	Weak	Moderate

5-HT ₃ antagonists are effective in IBS-D						
Alosetron 1mg b.i.d.	3	787	IBS-D	0.69 (0.60 to 0.80)	Weak	High
Ramosetron 2.5mcg o.d.	1	348	IBS-D	0.78 (0.67 to 0.91)	Weak	Moderate
Rifaximin is effective in IBS-D or IBS-M	2	1260	IBS-D or	0.92 (0.86 to 0.98)	Weak	Moderate
			IBS-M			
Linaclotide is effective in IBS-C	5	3193	IBS-C	0.82 (0.78 to 0.87)	Strong	High
Lubiprostone is effective in IBS-C	2	452	IBS-C	0.87 (0.78 to 0.96)	Strong	Moderate
Plecanatide is effective in IBS-C						
3mcg o.d.	3	1632	IBS-C	0.88 (0.82 to 0.94)	Strong	High
6mcg o.d.	2	1461	IBS-C	0.87 (0.81 to 0.93)	Strong	High
Tenapanor is effective in IBS-C	3	1428	IBS-C	0.85 (0.79 to 0.92)	Strong	High
Tegaserod is effective in IBS-C	3	2472	IBS-C	0.85 (0.80 to 0.91)	Strong	Moderate
IBS-specific cognitive behavioural therapy						
may be effective in IBS						
Face-to-face CBT	10	930	Not stated	0.62 (0.48 to 0.80)	Strong	Low
Self-administered/minimal contact CBT	4	434	Not stated	0.61 (0.45 to 0.83)	Strong	Low
Group CBT	2	50	Not stated	0.41 (0.19 to 0.91)	Weak	Low
Telephone-delivered CBT	1	373	Not stated	0.50 (0.29 to 0.84)	Weak	Low

Gut-directed hypnotherapy may be	6	639	Not stated	0.67 (0.49 to 0.91)	Strong	Low
effective in IBS						

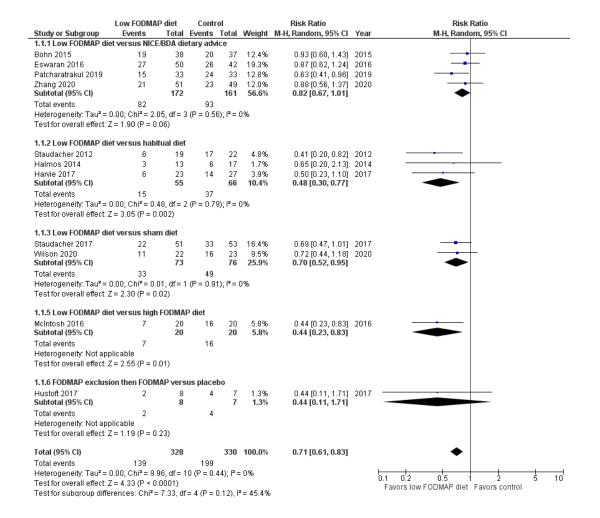
Supplementary Figure 1. Forest Plot of Randomised Controlled Trials of Fibre in IBS in Terms of Effect on Global Symptoms or Abdominal Pain: Trial-based Meta-analysis.



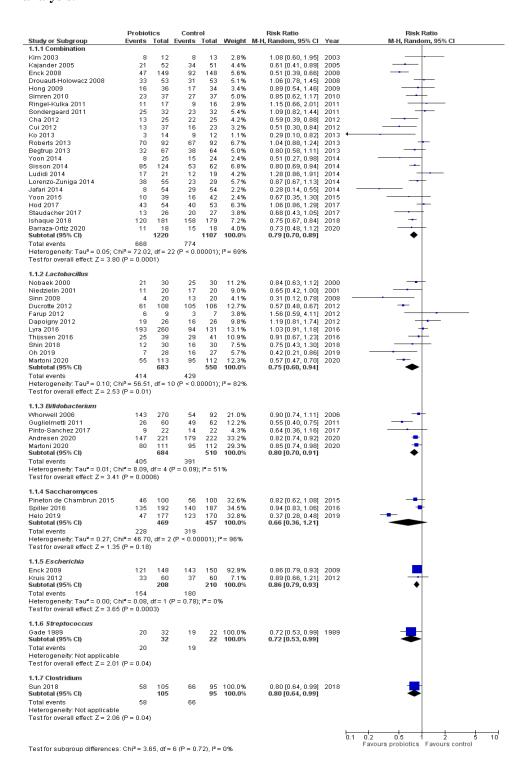
Supplementary Figure 2. Forest Plot of Randomised Controlled Trials of a Low

FODMAP Diet in IBS in Terms of Effect on Global Symptoms or Abdominal Pain:

Trial-based Meta-analysis.



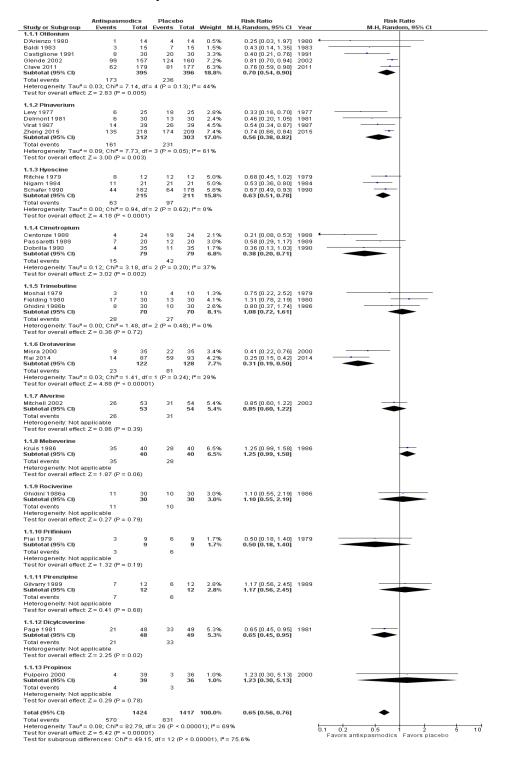
Supplementary Figure 3. Forest Plot of Randomised Controlled Trials of Probiotics in IBS in Terms of Effect on Global Symptoms or Abdominal Pain: Trial-based Meta-analysis.



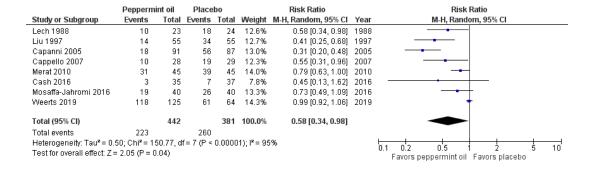
Supplementary Figure 4. Forest Plot of Randomised Controlled Trials of

Antispasmodics in IBS in Terms of Effect on Global Symptoms or Abdominal Pain:

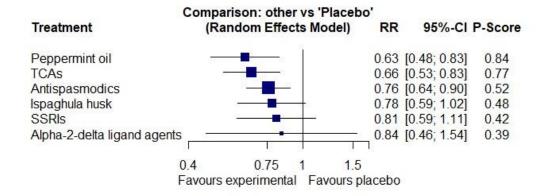
Trial-based Meta-analysis.



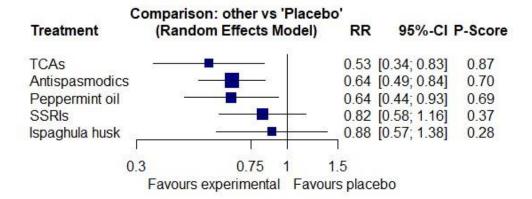
Supplementary Figure 5. Forest Plot of Randomised Controlled Trials of Peppermint Oil in IBS in Terms of Effect on Global Symptoms or Abdominal Pain: Trial-based Meta-analysis.



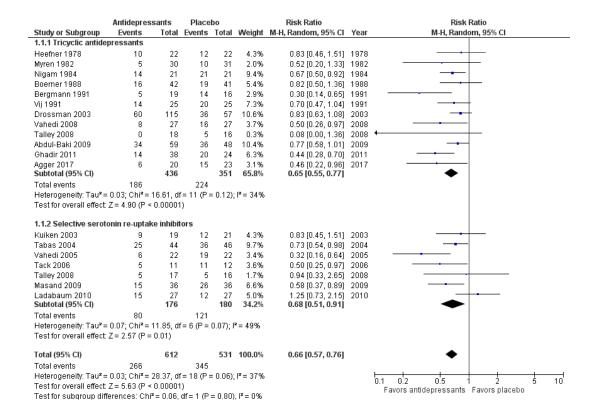
Supplementary Figure 6. Forest Plot of Unlicensed or "Traditional" Treatments in IBS in Terms of Effect on Global Symptoms: Network Meta-analysis.



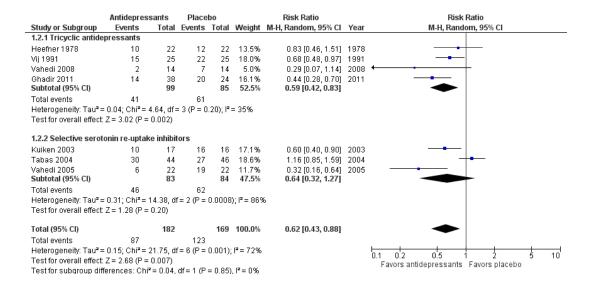
Supplementary Figure 7. Forest Plot of Unlicensed or "Traditional" Treatments in IBS in Terms of Effect on Abdominal Pain: Network Meta-analysis.



Supplementary Figure 8. Forest Plot of Randomised Controlled Trials of Tricyclic Antidepressants and Selective Serotonin Reuptake Inhibitors in IBS in Terms of Effect on Global Symptoms or Abdominal Pain: Trial-based Meta-analysis.



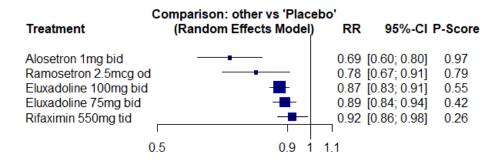
Supplementary Figure 9. Forest Plot of Randomised Controlled Trials of Tricyclic Antidepressants and Selective Serotonin Reuptake Inhibitors in IBS in Terms of Effect on Abdominal Pain: Trial-based Meta-analysis.



Supplementary Figure 10. Forest Plot of Randomised Controlled Trials of 5-HT₃

Antagonists, Eluxadoline, and Rifaximin in IBS in Terms of Effect on a Composite

Endpoint of Improvement in Abdominal Pain and Stool Consistency: Network Metaanalysis.

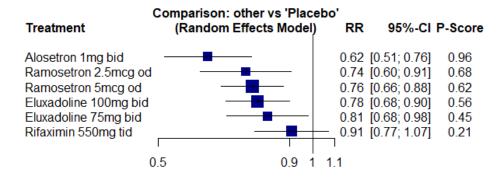


Favours experimental Favours placebo

Supplementary Figure 11. Forest Plot of Randomised Controlled Trials of 5-HT₃

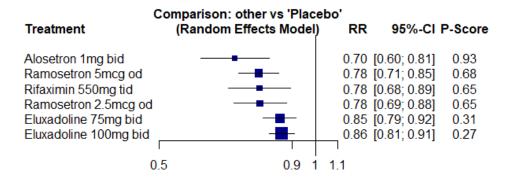
Antagonists, Eluxadoline, and Rifaximin in IBS in Terms of Effect on Global

Symptoms: Network Meta-analysis.



Favours experimental Favours placebo

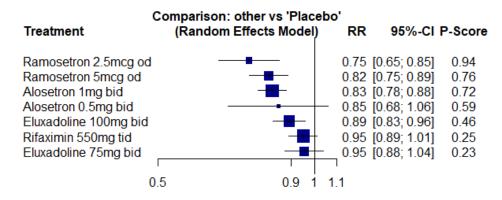
Supplementary Figure 12. Forest Plot of Randomised Controlled Trials of 5-HT₃ Antagonists, Eluxadoline, and Rifaximin in IBS in Terms of Effect on Stool Consistency: Network Meta-analysis.



Favours experimental Favours placebo

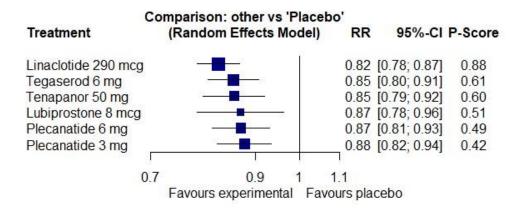
Supplementary Figure 13. Forest Plot of Randomised Controlled Trials of 5-HT₃

Antagonists, Eluxadoline, and Rifaximin in IBS in Terms of Effect on Abdominal Pain:
Network Meta-analysis.

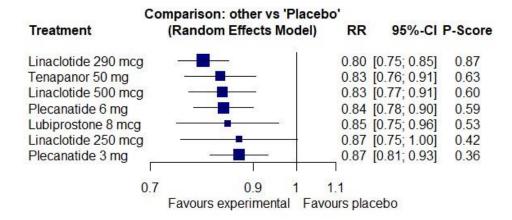


Favours experimental Favours placebo

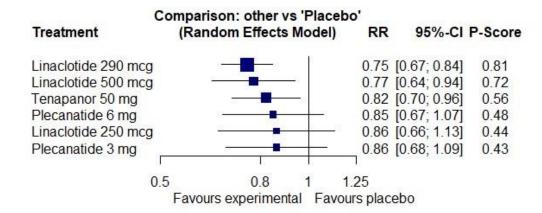
Supplementary Figure 14. Forest Plot of Randomised Controlled Trials of Linaclotide, Lubiprostone, Plecanatide, Tenapanor, and Tegaserod in IBS in Terms of Effect on a Composite Endpoint of Improvement in Abdominal Pain and an Increase of ≥1 Complete Spontaneous Bowel Movements Per Week from Baseline: Network Meta-analysis.



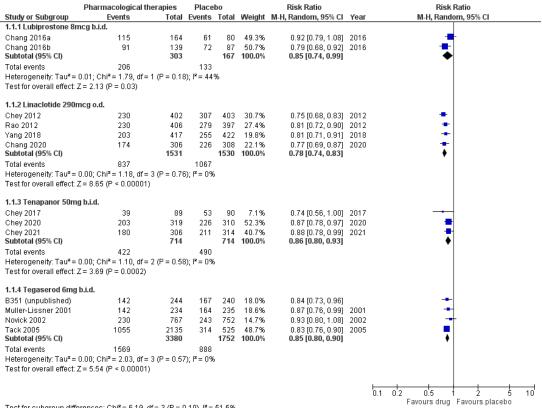
Supplementary Figure 15. Forest Plot of Randomised Controlled Trials of Linaclotide, Lubiprostone, Plecanatide, and Tenapanor in IBS in Terms of Effect on Abdominal Pain: Network Meta-analysis.



Supplementary Figure 16. Forest Plot of Randomised Controlled Trials of Linaclotide, Lubiprostone, Plecanatide, and Tenapanor in IBS in Terms of an Increase of ≥1 Complete Spontaneous Bowel Movements Per Week from Baseline: Network Meta-analysis.



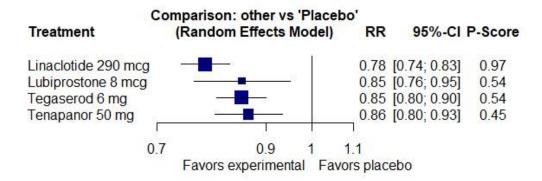
Supplementary Figure 17. Forest Plot of Randomised Controlled Trials of Linaclotide, Lubiprostone, Tegaserod, and Tenapanor in IBS in Terms of an Improvement in Abdominal Bloating: Trial-based Meta-analysis.



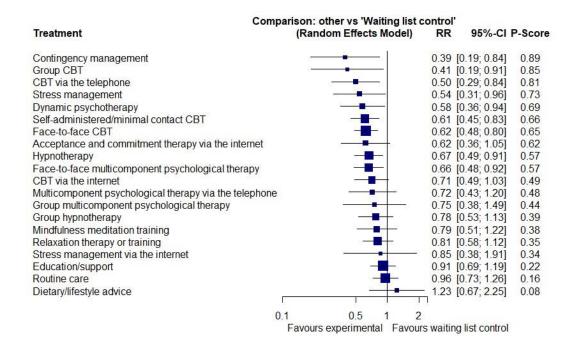
Supplementary Figure 18. Forest Plot of Randomised Controlled Trials of Tegaserod in IBS in Terms of Effect on Global Symptoms or Abdominal Pain: Trial-based Meta-analysis.

	5-HT4 ago	nists	Place	bo		Risk Ratio		Risk Ratio
Study or Subgroup	Events	Total	Events	Total	Weight	M-H, Random, 95% CI	Year	M-H, Random, 95% CI
B307 (unpublished)	336	560	180	285	10.9%	0.95 [0.85, 1.06]		-
B351 (unpublished)	384	532	208	267	13.3%	0.93 [0.85, 1.01]		
Hamling 1998 (B202)	47	85	29	38	3.9%	0.72 [0.56, 0.94]	1998	
Langaker 1998 (B251)	292	434	85	113	9.9%	0.89 [0.79, 1.01]	1998	
Muller-Lissner 2001 (B301)	318	593	189	288	10.8%	0.82 [0.73, 0.91]	2001	-
Novick 2002	433	767	460	752	13.2%	0.92 [0.85, 1.00]	2002	+
Kellow 2003	81	259	121	261	4.9%	0.67 [0.54, 0.84]	2003	
Nyhlin 2004	197	327	230	320	10.9%	0.84 [0.75, 0.94]	2004	
Tack 2005	1057	2135	316	525	13.4%	0.82 [0.76, 0.89]	2005	+
Harish 2006	5	20	10	20	0.4%	0.50 [0.21, 1.20]	2006	
Chey 2008	151	329	204	332	8.5%	0.75 [0.65, 0.86]	2008	-
Total (95% CI)		6041		3201	100.0%	0.85 [0.80, 0.90]		•
Total events	3301		2032					
Heterogeneity: Tau2 = 0.00; C	hi² = 23.09.	df = 10 (P = 0.01)	: I ² = 57	7%		<u> </u>	
Test for overall effect: Z = 5.56		,	,				Ö.	1 0.2 0.5 1 2 5 10 Favours 5-HT4 agonists Favours placebo

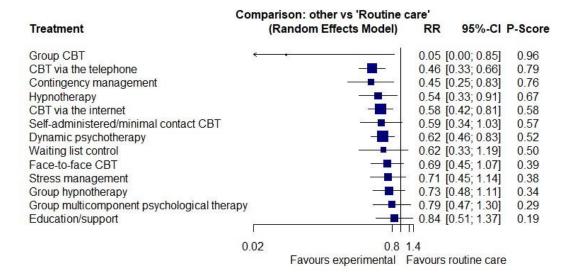
Supplementary Figure 19. Forest Plot of Randomised Controlled Trials of Linaclotide, Lubiprostone, Tegaserod, and Tenapanor in IBS in Terms of an Improvement in Abdominal Bloating: Network Meta-analysis.



Supplementary Figure 20. Forest Plot of Randomised Controlled Trials of Psychological Therapies in IBS in Terms of Effect on Global Symptoms or Abdominal Pain: Network Meta-analysis.



Supplementary Figure 21. Forest Plot of Randomised Controlled Trials of Psychological Therapies in IBS in Terms of Effect on Global Symptoms or Abdominal Pain in Patients with Refractory Symptoms: Network Meta-analysis.



Supplementary Figure 22. Forest Plot of Randomised Controlled Trials of Psychological Therapies in IBS in Terms of Effect on Global Symptoms or Abdominal Pain at 12-month Follow-up: Network Meta-analysis.

