**Supplementary Table 2:** Quality assessment of evidence for each outcome using GRADE27.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Quality assessment** | | | | | | | **Quality** | **Importance** |
|  |
| **No of studies** | **Design** | **Risk of bias** | **Inconsistency** | **Indirectness** | **Imprecision** | **Other considerations** |
| **Morbidity** | | | | | | | | |
| 18 | randomised trials | no serious risk of bias | no serious inconsistency | no serious indirectness | no serious imprecision | none |  HIGH | CRITICAL |
|  |
| **Mortality** | | | | | | | | |
| 18 | randomised trials | no serious risk of bias | no serious inconsistency | no serious indirectness | no serious imprecision | none |  HIGH | IMPORTANT |
|  |
| **Hospital Length of Stay** | | | | | | | | |
| 23 | randomised trials | no serious risk of bias | serious1 | no serious indirectness | serious2 | reporting bias3 |  VERY LOW | IMPORTANT |
|  |
| **Intensive Care Length of Stay** | | | | | | | | |
| 8 | randomised trials | no serious risk of bias | serious4 | no serious indirectness | serious5 | none |  LOW | IMPORTANT |
|  |
| **Return of Gastrointestinal Function** | | | | | | | | |
| 11 | randomised trials | no serious risk of bias | no serious inconsistency | no serious indirectness | serious2 | none |  MODERATE | IMPORTANT |
|  |
| **Incidence of Postoperative Ileus** | | | | | | | | |
| 7 | randomised trials | no serious risk of bias | no serious inconsistency | no serious indirectness | no serious imprecision | none |  HIGH | IMPORTANT |
|  |

1 Variety of surgical procedures included with greatly differing expected overall hospital length of stay  
2 Two studies included estimated mean+/-standard deviation data as the raw data included only median +/-IQR  
3 Progressive reduction in expected hospital length of stay over the time period of the included studies, with an increase in emphasis in reductions in LOS in more recent studies  
4 Emphasis on routine intensive care admission and length of stay has reduced over the time period the studies have been included over  
5 Three studies included estimated mean+/-standard deviation data s the raw data included only median +/-IQR