SUPPLEMENTAL DIGITAL CONTENT 6

This table also appears in the Supplemental Digital Content 2 in the complete set of evidence tools.

Table 4. Balanced crystalloids compared to Normal saline in patients with sepsis or septic shock

Author(s): Alhazzani W, Perner A
Date: December 2 2015
Question: Balanced crystalloids compared to Normal saline in in patients with sepsis or septic shock
Setting: ICU
Bibliography: Rochwerg B, Alhazzani W, Sindi A, Heels-Ansdell D, Thabane L, Fox-Robichaud A et al. Fluid resuscitation in sepsis: a

Bibliography: Rochwerg B, Alhazzani W, Sindi A, Heels-Ansdell D, Thabane L, Fox-Robichaud A et al. Fluid resuscitation in sepsis: a systematic review and network meta-analysis. Ann Intern Med. 2014;161(5):347-55. doi:10.7326/M14-0178.

Quality assessment								Nº of patients		Effect		Importance
Nº of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Balanced crystalloids	Normal saline	Relative (95% Cl)	Absolute (95% Cl)		
Mortalit	У											
N/A	randomized trials ¹	not serious	not serious	Very serious	serious ³	none	N/A	25.0%	RR 0.78 (0.58 to 1.05)	55 fewer per 1000 (from 13 more to 105 fewer)	⊕ VERY LOW	CRITICAL
Renal Re	placement The	erapy		•	L	•						
N/A	randomized trials ¹	not serious	not serious ⁴	Very serious ²	serious ⁵	none	N/A	23.0% ⁶	RR 0.85 (0.56 to 1.30)	35 fewer per 1000 (from 69 more to 101 fewer)	⊕ VERY LOW	CRITICAL

				51.0% ⁶		' fewer	
					pe	er 1000	
						(from	
						153	
					m	ore to	
						224	
					f	ewer)	

MD – mean difference, RR – relative risk

- 1. There are no head to head RCTs on this question, we used the estimates from network meta-analysis (indirect comparison)
- 2. We downgraded by two levels for indirectness, we used data from indirect comparison only, no direct comparison studies are available
- 3. We downgraded the quality of evidence by one level for imprecision, the CI includes significant benefit and small harm.
- 4. We could not assess inconsistency as all the evidence is derived from indirect comparisons
- 5. We downgraded the quality of evidence by one level for imprecision, the CI contained both significant benefit and harm
- 6. Data from Rangel-Frausto et al.