Title and abstract	POINTS	Knr. B. J., 2018, USA (10)	Legocki, A., 2017, USA (11)	L, S.S., 2018, USA	th.Y. 2017 China	Rankin T. 7115 IISA	Resnick, C., 2016, USA	Scerrati A, 2019, Italy	Witowski, J., 2017, Poland	Yang, M., 2015, China
	Identify the study as an economic evaluation or use more specific		_		0			0		
Title	terms such as "cost-effectiveness analysis", and describe the 1 interventions compared.	0	0	1	0	0	1	0	0.5	0
Abstract	Provide a structured summary of objectives, perspective, setting, methods (including study design and inputs), results (including base case and uncertainty analyses), and conclusions.	0.5	0.5	0.5	0	0	0.5	0	0	0.5
Introduction										
Background and objectives Methods	Provide an explicit statement of the broader context for the study. Present the study question and its relevance for health policy or 3 practice decisions.	0.5	0.5	1	1	0	1	0	0.5	1
Target population and subgroups	Describe characteristics of the base case population and subgroups analysed, including why they were chosen.	1	0	0	0	0	1	0	0	1
Setting and location	State relevant aspects of the system(s) in which the decision(s) 5 need(s) to be made.	0	0	0	0	0	0	0	0	0
Study perspective	Describe the perspective of the study and relate this to the costs being 6 evaluated.	0	0	0	0	0	0	0	0	0
Comparators	Describe the interventions or strategies being compared and state 7 why they were chosen.	1	1	1	0	0	1	0	0	0
Time horizon	State the time horizon(s) over which costs and consequences are being evaluated and say why appropriate.	0	0	0	0	0	0	0	0	0
Discount rate	Report the choice of discount rate(s) used for costs and outcomes and 9 say why appropriate.	0	0	0	0	0	0	0	0	0
Choice of health outcomes	Describe what outcomes were used as the measure(s) of benefit in the evaluation and their relevance for the type of analysis performed.	0	0	0	0	0	0	0	0	0
Measurement of effectiveness	Single study-based estimates: Describe fully the design features of the single effectiveness study and why the single study was a sufficient source of clinical effectiveness data.	0	0	0	0	0	0	0	0	0
	Synthesis-based estimates: Describe fully the methods used for identification of included studies and synthesis of clinical effectiveness 11b data.									
surement and valuation of preference-based outc	If applicable, describe the population and methods used to elicit 12 preferences for outcomes.	NA	NA	Na	NA	NA	NA	NA	Na	NA
Estimating resources and costs	Single study-based economic evaluation: Describe approaches used to estimate resource use associated with the alternative interventions. Describe primary or secondary research methods for valuing each resource item in terms of its unit cost. Describe any adjustments made to approximate to opportunity costs.	0.5	0	0.5	0	o	1	0	0	0
	Model-based economic evaluation: Describe approaches and data sources used to estimate resource use associated with model health states. Describe primary or secondary research methods for valuing each resource item in terms of its unit cost. Describe any adjustments made to approximate to opportunity costs.									
Currency, price date, and conversion	Report the dates of the estimated resource quantities and unit costs. Describe methods for adjusting estimated unit costs to the year of reported costs if necessary. Describe methods for converting costs into a common currency base and the exchange rate.	0	0	0	0	0	0.5	0	0	0
Choice of model	Describe and give reasons for the specific type of decision-analytical model used. Providing a figure to show model structure is strongly recommended.	0	0	0	0	0	0	0	0	0
Assumptions	Describe all structural or other assumptions underpinning the decision- 16 analytical model.	0	0	0	0	0	0	0	0	0
Analytical methods	Describe all analytical methods supporting the evaluation. This could include methods for dealing with skewed, missing, or censored data; extrapolation methods; methods for pooling data; approaches to validate or make adjustments (such as half cycle corrections) to a mode!; and methods for handling population heterogeneity and 17 uncertainty.	0	0	0	0	0	0	0	0	0
Results										

Study parameters	1	Report the values, ranges, references, and, if used, probability distributions for all parameters. Report reasons or sources for distributions used to represent uncertainty where appropriate. Providing a table to show the input values is strongly recommended.	0	0	0	0	0	0	0	0	0	
Incremental costs and outcomes	1	For each intervention, report mean values for the main categories of estimated costs and outcomes of interest, as well as mean differences between the comparator groups. If applicable, report incremental cost-effectiveness ratios.	0.5	0.5	1	0	0	0.5	0	0	0	
Characterizing uncertainty	20	Single study-based economic evaluation: Describe the effects of sampling uncertainty for the estimated incremental cost and incremental effectiveness parameters, together with the impact of methodological assumptions (such as discount rate, study a perspective).	0	0	0	0	0	0	0	0	0	
	20	Model-based economic evaluation: Describe the effects on the results of uncertainty for all input parameters, and uncertainty related to the structure of the model and assumptions.										
Characterizing heterogeneity	2	If applicable, report differences in costs, outcomes, or cost- effectiveness that can be explained by variations between subgroups of patients with different baseline characteristics or other observed variability in effects that are not reducible by more information.	NA	NA NA	NA	Na	NA	0.5	NA	NA	NA NA	
Discussion												
dings, limitations, generalizability, and current kn	c 2	Summarise key study findings and describe how they support the conclusions reached. Discuss limitations and the generalisability of the findings and how the findings fit with current knowledge.	0.5	0	0	0	0.5	1	0.5	0	0	
Other												
Source of funding	2	Describe how the study was funded and the role of the funder in the identification, design, conduct, and reporting of the analysis. Describe other non-monetary sources of support.	1	0	0	1	0	1	1	0	1	
Conflicts of interest	2	Describe any potential for conflict of interest of study contributors in accordance with journal policy. In the absence of a journal policy, we recommend authors comply with international Committee of Medical Journal Editors recommendations.	1	1	1	1	1	0	1	1	1	
Scoring			6.5	3.5	6	3	1.5	9	2.5	2	4.5	
				ı				ı				1
Sackett		Level of evidence	П	IV	IV	IV	IV	Ш	IV	IV	Ш	
		Level of evidence										4

Level I: High quality randomized trial or prospective study; testing of previously developed diagnostic criteria on consecutive patients; sensible costs and laternatives; values obtained from many studies with multiway sensitivity analyses; systematic review of Level I RCTs and Level I studies; Level II: Lesser quality RCT; prospective comparative study; retrospective study; untreated controls from an RCT; lesser quality prospective study; development of diagnostic criteria on consecutive patients; sensible costs and alternatives; values obtained from limited studies, with multiway sensitivity analyses; systematic review of Level II studies or Level I studies with inconsistent result; Level III: Case control study (therapeutic and prognostic studies); ertrospective comparative study; study of nonconsecutive patients without consistently applied reference "gold" standies; analyses based on limited alternatives and costs and poor estimates; systematic review of Level III studies; Level IV: Case entrol study (diagnostic studies); poor reference standard; analyses with no sensitivity analyses; Level V: Exper opinion.