**Supplementary Table 7. Quality of Evidence of Primary Outcomes**

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| --- | --- | --- | --- | --- | --- | --- |
| **FS compared to Non FS for adults over 18 years old without CRC** | | | | | | |
| **Patient or population:** patients with adults over 18 years old without CRC  **Settings:** Randomized trials and observational study  **Intervention:** FS  **Comparison:** Non FS | | | | | | |
| **Outcomes** | **Illustrative comparative risks\* (95% CI)** | | **Relative effect**  **(95% CI)** | **No of Participants**  **(studies)** | **Quality of the evidence**  **(GRADE)** | **Comments** |
| Assumed risk | Corresponding risk |
|  | **Non FS** | **FS** |  |  |  |  |
| **Incidence in RCT study**  Follow-up: median 16.55 years | **Study population** | | **RR 0.74**  (0.66 to 0.84) | 563978  (6 studies) | ⊕⊕⊕⊕  **high** |  |
| **21 per 1,000** | **16 per 1,000**  (14 to 18) |
| **Moderate** | |
| **25 per 1,000** | **19 per 1,000**  (17 to 21) |
| **Incidence in Cohort study**  Follow-up: median 11 years | **Study population** | | **RR 3.57**  (2.39 to 5.32) | 138297  (1 study) | ⊕⊕⊕⊝  **moderate**1 |  |
| **1 per 1,000** | **2 per 1,000**  (2 to 3) |
| **Moderate** | |
| **1 per 1,000** | **4 per 1,000**  (2 to 5) |
| **Mortality in RCT study**  Follow-up: median 18.26 years | **Study population** | | **RR 0.7**  (0.58 to 0.85) | 424687  (5 studies) | ⊕⊕⊕⊕  **high** |  |
| **8 per 1,000** | **5 per 1,000**  (5 to 7) |
| **Moderate** | |
| **9 per 1000** | **6 per 1000**  (5 to 8) |
| \*The basis for the **assumed risk** (e.g. the median control group risk across studies) is provided in footnotes. The **corresponding risk** (and its 95% confidence interval) is based on the assumed risk in the comparison group and the **relative effect** of the intervention (and its 95% CI).  **CI:** Confidence interval; **RR:** Risk 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 Effect size RR > 2 | | | | | | |