Supplementary table 3. Quality Appraisal of the Literature Reported Cases.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Lead author (citation)** | **Title** | **Patient demographics** | **Current health status** | **Medical history** | **Physical exam** | **Patient disposition** | **Drug identification** | **Dosage** | **Drug reaction interface** | **Concomitant therapy** | **Adverse events** | **Discussion** |
| Khokher et al [1] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Alnahhas et al [2] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Partially | Yes | Yes | Yes | Yes |
| Algaeed et al [3] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Derle et al [4] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Partially | Partially | Yes | Yes | Yes |
| Diamanti et al [5] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Fukasawa et al [6] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Partially | Yes | Yes | Yes | Yes |
| Johnson et al [7] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Liu et al [8] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Glio et al [9] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Liao et al [10] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Partially | Yes | Yes | Yes | Yes |
| Matthews et al [11] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Montes et al [12] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Partially |
| Mehta et al [13] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Partially | Yes | Yes | Yes | Yes |
| Pathak et al [14] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Onda et al [15] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Partially | Yes | Yes | Yes | Yes |
| Phadke et al [16] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Salim et al [17] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Shelly et al [18] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Partially | Partially | No | Yes | Yes |
| Takai et al [19] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Takizawa et al [20] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Todo et al [21] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Tozuka et al [22] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Partially |
| Tomisaki et al [23] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Wilson et al [24] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Zhu et al [25] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Partially | Yes | Yes | Yes | Yes |
| Dang et al [26] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Partially | Yes | Yes | Yes | Yes |
| March et al [27] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Partially | Yes | Yes | Yes | Yes |
| Rajendram et al [28] | Yes | Yes | Yes | Yes | No | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Puwanant et al [29] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Shirai et al [30] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Yang et al [31] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Ziobro et al [32] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Partially | Yes | Yes | Yes | Yes |
| Jeyakumar et al [33] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Hayakawa et al [34] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Botta et al [35] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Partially |
| Safa et al [36] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Partially | Yes | Yes | Yes | Yes |
| Hibino et al [37] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Lau et al [38] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Nguyen et al [39] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Partially | Yes | Yes | Yes | Yes |
| Hajihossainlou et al [40] | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |

To evaluate the quality of the case reports retrieved from the literature, we used the guidelines recommended by the International Society for Pharmacoepidemiology and the International Society of Pharmacovigilance for publishing adverse events reports [41]. The assessment was carried out by one investigator and cross-checked by another investigators. We only used the items reported by the guidelines as required information, without regard to the items reported as desirable or relevant. The items appraised included: i) relevance of the title to the reported information, ii) adequate description of the patient (demographics, existing health condition, relevant past medical history, physical and laboratory abnormalities, and significant morbidity or mortality), iii) adequate description of the drug (identification of generic and trade names of the drug and the manufacturer, drug dosage, duration between drug administration and adverse events, and concomitant therapy that could potentially contributes to occurrence of adverse events), iv) adequate description of the adverse events and their outcome, and v) discussion of the evidence supporting the causal association between the drug and the adverse events. Possible item ratings are yes, partially, or no. Disagreement was resolved by discussion until consensus was reached.

[1-40]

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