**Supplementary Table 3.** **Reliability assessment of the results of NAFL group vs. controls by the GRADE approach**

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| **NAFL compared to control for resistin level** |
| **Patient or population:** Patients with **Settings of** **Intervention:** NAFL**Comparison:** Control |
| **Outcomes** | **Illustrative comparative risks\* (95% CI)** | **Relative effect(95% CI)** | **No of Participants(studies)** | **Quality of the evidence(GRADE)** | **Comments** |
| **Assumed risk** | **Corresponding risk** |
|  | **Control** | **NAFL** |  |  |  |  |
| **resistin level** |  | The mean resistin level in the intervention groups was**0.03 standard deviations higher**(0.23 lower to 0.29 higher) |  | 261(6) | ⊕⊕⊕⊝**moderate**1 | SMD 0.03 (-0.23 to 0.29) |
| \*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% CI) is based on the assumed risk in the comparison group and the **relative effect** of the intervention (and its 95% CI). |
| 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. |
| 1The level of resistin is closely related to the degree of NAFLD. |