



## PRISMA 2020 Checklist

Section and Topic	Item #	Checklist item	Location where item is reported
<b>TITLE</b>			
Title	1	Identify the report as a systematic review.	1
<b>ABSTRACT</b>			
Abstract	2	See the PRISMA 2020 for Abstracts checklist.	14 and 38
<b>INTRODUCTION</b>			
Rationale	3	Describe the rationale for the review in the context of existing knowledge.	339-348
Objectives	4	Provide an explicit statement of the objective(s) or question(s) the review addresses.	351-352
<b>METHODS</b>			
Eligibility criteria	5	Specify the inclusion and exclusion criteria for the review and how studies were grouped for the syntheses.	361-366
Information sources	6	Specify all databases, registers, websites, organisations, reference lists and other sources searched or consulted to identify studies. Specify the date when each source was last searched or consulted.	369
Search strategy	7	Present the full search strategies for all databases, registers and websites, including any filters and limits used.	368-372
Selection process	8	Specify the methods used to decide whether a study met the inclusion criteria of the review, including how many reviewers screened each record and each report retrieved, whether they worked independently, and if applicable, details of automation tools used in the process.	362-366
Data collection process	9	Specify the methods used to collect data from reports, including how many reviewers collected data from each report, whether they worked independently, any processes for obtaining or confirming data from study investigators, and if applicable, details of automation tools used in the process.	374-380
Data items	10a	List and define all outcomes for which data were sought. Specify whether all results that were compatible with each outcome domain in each study were sought (e.g. for all measures, time points, analyses), and if not, the methods used to decide which results to collect.	375-380
	10b	List and define all other variables for which data were sought (e.g. participant and intervention characteristics, funding sources). Describe any assumptions made about any missing or unclear information.	377-380 and 525
Study risk of bias assessment	11	Specify the methods used to assess risk of bias in the included studies, including details of the tool(s) used, how many reviewers assessed each study and whether they worked independently, and if applicable, details of automation tools used in the process.	-
Effect measures	12	Specify for each outcome the effect measure(s) (e.g. risk ratio, mean difference) used in the synthesis or presentation of results.	-
Synthesis methods	13a	Describe the processes used to decide which studies were eligible for each synthesis (e.g. tabulating the study intervention characteristics and comparing against the planned groups for each synthesis (item #5)).	374-380
	13b	Describe any methods required to prepare the data for presentation or synthesis, such as handling of missing summary statistics, or data conversions.	-
	13c	Describe any methods used to tabulate or visually display results of individual studies and syntheses.	-
	13d	Describe any methods used to synthesize results and provide a rationale for the choice(s). If meta-analysis was performed, describe the model(s), method(s) to identify the presence and extent of statistical heterogeneity, and software package(s) used.	-
	13e	Describe any methods used to explore possible causes of heterogeneity among study results (e.g. subgroup analysis, meta-regression).	382-388
	13f	Describe any sensitivity analyses conducted to assess robustness of the synthesized results.	-



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Reporting bias assessment	14	Describe any methods used to assess risk of bias due to missing results in a synthesis (arising from reporting biases).	.
Certainty assessment	15	Describe any methods used to assess certainty (or confidence) in the body of evidence for an outcome.	-
<b>RESULTS</b>			
Study selection	16a	Describe the results of the search and selection process, from the number of records identified in the search to the number of studies included in the review, ideally using a flow diagram.	391-398
	16b	Cite studies that might appear to meet the inclusion criteria, but which were excluded, and explain why they were excluded.	391-394
Study characteristics	17	Cite each included study and present its characteristics.	406-480
Risk of bias in studies	18	Present assessments of risk of bias for each included study.	399-404
Results of individual studies	19	For all outcomes, present, for each study: (a) summary statistics for each group (where appropriate) and (b) an effect estimate and its precision (e.g. confidence/credible interval), ideally using structured tables or plots.	-
Results of syntheses	20a	For each synthesis, briefly summarise the characteristics and risk of bias among contributing studies.	399-401
	20b	Present results of all statistical syntheses conducted. If meta-analysis was done, present for each the summary estimate and its precision (e.g. confidence/credible interval) and measures of statistical heterogeneity. If comparing groups, describe the direction of the effect.	415-425
	20c	Present results of all investigations of possible causes of heterogeneity among study results.	401-404
	20d	Present results of all sensitivity analyses conducted to assess the robustness of the synthesized results.	-
Reporting biases	21	Present assessments of risk of bias due to missing results (arising from reporting biases) for each synthesis assessed.	-
Certainty of evidence	22	Present assessments of certainty (or confidence) in the body of evidence for each outcome assessed.	416 and 425
<b>DISCUSSION</b>			
Discussion	23a	Provide a general interpretation of the results in the context of other evidence.	484-508
	23b	Discuss any limitations of the evidence included in the review.	484-494
	23c	Discuss any limitations of the review processes used.	496-408
	23d	Discuss implications of the results for practice, policy, and future research.	507-508
<b>OTHER INFORMATION</b>			
Registration and protocol	24a	Provide registration information for the review, including register name and registration number, or state that the review was not registered.	358
	24b	Indicate where the review protocol can be accessed, or state that a protocol was not prepared.	356-359
	24c	Describe and explain any amendments to information provided at registration or in the protocol.	358
Support	25	Describe sources of financial or non-financial support for the review, and the role of the funders or sponsors in the review.	525
Competing	26	Declare any competing interests of review authors.	532-537



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interests			
Availability of data, code and other materials	27	Report which of the following are publicly available and where they can be found: template data collection forms; data extracted from included studies; data used for all analyses; analytic code; any other materials used in the review.	369-372 and 389

From: Page MJ, McKenzie JE, Bossuyt PM, Boutron I, Hoffmann TC, Mulrow CD, et al. The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. *BMJ* 2021;372:n71.doi:10.1136/bmj.n71

For more information, visit: <http://www.prisma-statement.org/>

**Table S2a. Quality assessment of randomised controlled trials selected for inclusion according to the CASP system.**

Study reference	Type of study	Quality level	CASP results		
			Design	Methods	Outcomes
<b>Non-asthmatic chronic cough</b>					
Chaudhuri, R et al. 2004 (76)	RCT	High	+++	++0++	0++
Ribeiro, M et al. 2007 (77)	RCT	High	+++	++0++	0++
Bando T et al. 1997 (82)	RCT	Medium	+0+	+00++	+0+
<b>Eosinophilic bronchitis</b>					
Zhan W, et al. 2019 (10)	Open RCT	Medium	+++	--0++	+++
Cai C et al. 2012 (85)	RCT	Medium-high	+++	+00++	+0+
Bao W, et al. 2015 (86)	Open RCT	Medium-Low	+++	000++	+0+
Duong M et al 2008 (90)	RCT	High	+++	++0++	+0+

Quality assessment was performed using CASP checklists for each type of study (<https://casp-uk.net/casp-tools-checklists/>). Results depicted in the table correspond to questions related to design (questions 1-3), methodology (questions 4-6) outcomes (questions 7-9) and applicability (questions 10-11) in the corresponding checklists. Each positive (yes) response in the questionnaire is depicted as (+), negative it is indicated as (-), and “can’t tell” is depicted as (0). The increasing number of (+) indicates a greater quality assessment score.

RCT: randomized clinical trial.



## PRISMA 2020 Checklist

TABLE S2b. Quality assessment of cohort studies selected for inclusion according to the CASP system.

Study reference	Type of study	Quality level	CASP results	
			Validity	Outcomes
<b>Eosinophilic bronchitis</b>				
Gibson PG et al. 1995 (83)	Prospective observational study	Medium	+++000+0	+++
Brightling CE et al. 2000 (11)	Prospective observational study	Medium-high	+++0+++0	+++
Lai K et al 2015 (52)	Prospective observational study	High	++++++0	+++
Berry MA et al 2005 (14)	Prospective observational study	Medium	+++0+000	+++
Park SW et al. 2004 (51)	Prospective observational study	Medium	+++0+0+0	+0+
Brightling CE et al 1991 (9)	Prospective observational study	Medium	++++00+0	+0+
Yu L, et al. 2010 (87)	Retrospective observational study	High	+++++0++	+++
Shioya T et al. 2004 (88)	Prospective interventional study	High	+++++++0	+++
Ogawa H et al 1994 (89)	Prospective interventional study	Very low	+00000+0	+--

Quality assessment was performed using CASP checklists for each type of study (<https://casp-uk.net/casp-tools-checklists/>). Results depicted in the table correspond to questions related to validity (questions 1-6), and outcomes (questions 7-9) in the corresponding checklists. Each positive (yes) response in the questionnaire is depicted as (+), negative it is indicated as (-), and “can’t tell” is depicted as (0). The increasing number of (+) indicates a greater quality assessment score.



## PRISMA 2020 Checklist

**TABLE S2c. Quality assessment of systematic reviews with meta-analysis selected for inclusion according to the CASP system.**

Study reference	Type of study	Quality level	CASP results			
			Design	Methods	Outcomes	
<b>Non-specific chronic cough</b>						
Lee, SE et al. 2019 (79)	SR and NMA of 8 RCTs	High	++	0++	++	
Johnstone KJ et al. 2013 (78)	SR and NMA of 8 RCTs	Medium-high	++	-++	+0	
Tomerak, A et al. 2005 (80)	SR of 2 RCTs	Medium	++	00+	0+	
Tomerak, A et al. 2005 (81)	SR of 1 RCT	Medium	++	0+0	0+	

Quality assessment was performed using CASP checklists for each type of study (<https://casp-uk.net/casp-tools-checklists/>). Results depicted in the table correspond to questions related to design (questions 1-2), methodology (questions 3-5), outcomes (questions 6-7) and applicability (questions 8-11) in the corresponding checklists. Each positive (yes) response in the questionnaire is depicted as (+), negative it is indicated as (-), and “can’t tell” is depicted as (0). The increasing number of (+) indicates a greater quality assessment score.

SR=systematic review; NMA=Network meta-analysis; RCTs=randomized clinical trials