Supplementary Data

The influence of β -alanine supplementation on recovery biomarkers in adults: A systematic review and meta-analysis

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Table S1: Summary of findings and quality of evidence assessment using the GRADE approach

	Summary of findings		Quality of evidence assessment (GRADE)					
Outcome measure	No of patients	Effect size* (95% CI)	Risk of bias a	Inconsistency b	Indirectness c	Imprecision d	Publication	Quality of evidence f
							bias ^e	
Anthropometric measures								
Lactate	365	0.22 (-0.17, 0.61)	Not Serious	Serious	Not Serious	Serious	Not Serious	Low
VO_2	84	-0.12 (-0.52, 0.29)	Not Serious	Not Serious	Not Serious	Serious	Not Serious	Moderate
Carnosine	115	1.53 (1.08, 1.98)	Not Serious	Not Serious	Not Serious	Serious	Serious	Low
PH	67	-0.31 (-0.82, 0.20)	Not Serious	Not Serious	Not Serious	Serious	Serious	Low
fatigue	75	-0.71 (-2.48, 1.05)	Not Serious	Serious	Not Serious	Serious	Not Serious	Low
HCO ₃ -	39	-0.33 (-0.85, 0.19)	Not Serious	Not Serious	Not Serious	Serious	Not Serious	Moderate

BMI= body mass index; WC= waist circumference.

^a Risk of bias based on the AMSTAR results.

^b Downgraded if there was a substantial unexplained heterogeneity ($I^2 > 50\%$, P < 0.10) that was unexplained by meta-regression or subgroup analyses.

^c Downgraded if there were factors present relating to the participants, interventions, or outcomes that limited the generalizability of the results.

^d Downgraded if the 95% confidence interval (95% CI) crossed the minimally important difference (MID) for benefit or harm.

^e Downgraded if there was an evidence of publication bias using funnel plot.

^f Since all included studies were meta-analyses of randomized clinical trials, the certainty of the evidence was graded as high for all outcomes by default and then downgraded based on prespecified criteria. Quality was graded as high, moderate, low, very low.