Study	Sequence Generation	Allocation Concealment	Outcome Assessor Blinded	Attrition	Power Calculation	Baseline Comparable
Beaussier 2006	Adequate; computer randomisation with physician in charge of the patients	adequate; An independent physician opened the sealed letter assigning the	Unclear	some (≤ 20% dropouts); seven participants dropped out leaving 26 in each group	yes	yes; Comparable on age, gender, height, weight, pre-operative Digital Symbol Substitution Test and post-operative Mini Mental State exam
Christe 2000	Adequate; Block randomisation using random numbers table. Patients	unclear; Hospital pharacist aided with randomisation, but midolam	Unclear; Endoscopist blind to medication allocated and unable to	unclear; 29 not included, but unclear if this occurred before or after randomisation	yes	yes mainly; Comparable on age, Body Mass Index, Mini Mental State score (mean 25) medical history - heart failure, angina; benzodiazepine usage, smoking.
Herrick 1996	Unclear; randomly allocated	unclear	Unclear; Assessment made by an independent member of the team	yes (>20% dropouts); Originallly 136 randomised but 40 were excluded. Leaving PCA-fentayl, n=47, & PCA- morphine n=49	not stated	yes mainly; Comparable on age, gender, height, weight, type of surgery, type of anaesthesia, duration of surgery,
Kim 1996	Unclear; Randomised	unclear; no details	Yes; evaluators blind to participants drug allocation.	some (≤ 20% dropouts); 16 did not complete the study because of prolonged ICU stay or death	yes	yes, but limited data; Comparable on gender, type of operation, length of hospital stay
Leung 2006	Adequate; Computer generated random numbers list	adequate; used sealed envelopes	Yes; Research assistant blinded to groups performed cliical interviews	unclear; no details	yes	yes; Age, history of stroke, vascular disease, TICS scores, GDSscore, education, alcohol intake, surgery type comorbidity index.
Nitschke 1996	Unclear; randomised	inadequate; Using sealed envelopes	Unclear	some (≤ 20% dropouts); two patients never received their medication and were not included in the analysis	not stated	yes, but limited data; Age, surgery, gender, nasogastic tube

## Appendix E: Methodological Quality: Pharmacological Risk Factors review

Study	Sequence Generation	Allocation Concealment	Outcome Assessor Blinded	Attrition	Power Calculation	Baseline Comparable
Papaioannou 2005	Unclear; Randomised	unclear	Unclear	some (≤ 20% dropouts); 2 left from the reginal group and 1 from the general anaesthesia group	yes	yes, but limited data; Gender, age, alcohol, type of surgery, length of hospital stay
Williams- Russo1992	Unclear	unclear	Unclear	unclear	no	yes; age,gender, comorbidities, early post- operative analgesia