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# **1.1 EXPERIENCE OF CARE**

## 1.1.1 ALLARD2009

Study ID		ALLARD2009		
Bibliographic reference: Allard A. Transition to adulthood: inquiry into transition to adulthood for young people with autism. The All-Party Parliamentary Group on Autism. London: National Autistic Society; 2009.				
Guideline topic: Autism in children & people	Guideline topic: Autism in children & young people Key research question/aim: Inquiry into transition to adulthood for young people with autism			
Checklist completed by: Rachael Lee				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible Comments: Not applicable			
Section 3: data collection				

	1				
3.1 How well was the data collection carried out?	Not sure/inadequately reported	Comments: Not applicable			
Section 4: validity					
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable			
4.2 Is the context clearly described?	Not sure	Comments: Not applicable			
4.3 Were the methods reliable?	Not sure	Comments: Not applicable			
Section 5: analysis					
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported	Comments: Not applicable			
5.2 Are the data 'rich'?	Rich	Comments: Not applicable			
5.3 Is the analysis reliable?	Not sure/not reported	Comments: Not applicable			
5.4 Are the findings convincing?	Convincing	Comments: Not applicable			
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable			
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable			
Section 6: ethics	Section 6: ethics				
6.1 How clear and coherent is the reporting of ethical considerations?	Not sure/not reported	Comments: Not applicable			

### 1.1.2 ALLGOOD2005

Study ID		ALLGOOD2005	
Bibliographic reference:		·	
Allgood N. Parents' perceptions of fam			ldren with autism spectrum
disorders. Music Therapy Perspectives	. 2005;23:92-99	Э.	
Guideline topic: Autism in children & young people		Key research question/aim: Examined parents' perceptions of a 7-week family-based group music therapy intervention	
Checklist completed by: Rachael Lee			
Section 1: theoretical approach			
Is a qualitative approach appropriate? Appropriate Comments: Not applicable			Comments: Not applicable

Is the study clear in what it seeks to do?	Clear	Comments: Not applicable			
Section 2: study design					
2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: Not applicable			
Section 3: data collection					
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable			
Section 4: validity					
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable			
4.2 Is the context clearly described?	Clear	Comments: Not applicable			
4.3 Were the methods reliable?	Reliable	Comments: Not applicable			
Section 5: analysis					
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported	Comments: Not applicable			
5.2 Are the data 'rich'?	Rich	Comments: Not applicable			
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable			
5.4 Are the findings convincing?	Convincing	Comments: Not applicable			
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable			
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable			
Section 6: ethics					
6.1 How clear and coherent is the reporting of ethical considerations?	Not sure/not reported	Comments: Not applicable			

## 1.1.3 ALTIERE2009B

Study ID	ALTIERE2009B		
Bibliographic reference:			
Altiere MJ, von Kluhe S. Searching for acceptance: challenges encountered while raising a child with autism.			
Journal of Intellectual and Developmental Disability. 2009;34:142–152.			

Guideline topic: Autism in children & young people		Key research question/ of raising a child with a	aim: Examined the experience	
Checklist completed by: Rachael Lee				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not describe	ed	Comments: Not applicable	
4.2 Is the context clearly described?	Clear		Comments: Not applicable	
4.3 Were the methods reliable?	Reliable		Comments: Not applicable	
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Not sure/no	t reported	Comments: Not applicable	
5.2 Are the data 'rich'?	Rich		Comments: Not applicable	
5.3 Is the analysis reliable?	Not sure/not reported		Comments: Not applicable	
5.4 Are the findings convincing?	Convincing		Comments: Not applicable	
5.5 Are the findings relevant to the aims of the study?	Relevant		Comments: Not applicable	
5.6 Are the conclusions adequate?	Adequate		Comments: Not applicable	
Section 6: ethics				
6.1 How clear and coherent is the reporting of ethical considerations?	Not sure/no	t reported	Comments: Not applicable	

### 1.1.4 BEATSON2002

Study ID		BEATSON2002		
Bibliographic reference: Beatson JE, Prelock PA. The Vermont rural autism project: sharing experiences, shifting attitudes. Focus on Autism and Other Developmental Disabilities. 2002;17:48-54.				
Guideline topic: Autism in children & people	young	Key research question/a understanding of and ex service	aim: Explored parent's xperience of a specialist autism	
Checklist completed by: Rachael Lee				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	
Section 4: validity	Section 4: validity			
4.1 Is the role of the researcher clearly described?	Clear		Comments: Not applicable	
4.2 Is the context clearly described?	Clear		Comments: Not applicable	
4.3 Were the methods reliable?	Reliable		Comments: Not applicable	
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Rigorous		Comments: Not applicable	
5.2 Are the data 'rich'?	Rich		Comments: Not applicable	
5.3 Is the analysis reliable?	Reliable		Comments: Not applicable	
5.4 Are the findings convincing?	Convincing		Comments: Not applicable	
5.5 Are the findings relevant to the aims of the study?	Relevant		Comments: Not applicable	

5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not sure/not reported	Comments: Not applicable

## 1.1.5 BENDERIX2007A

Study ID		BENDERIX2007A		
Bibliographic reference: Benderix Y, Nordström B, Sivberg B. Parents' experience of having a child with autism and learning disabilities living in a group home: a case study. Autism. 2007;10:629-641.				
	Guideline topic: Autism in children & young		Key research question/aim: Explored parents' experience of having a child with autism living in a group home	
Checklist completed by: Rachael Lee				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design	Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Clear		Comments: Not applicable	
4.2 Is the context clearly described?	Clear		Comments: Not applicable	
4.3 Were the methods reliable?	Reliable C		Comments: Not applicable	
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Rigorous		Comments: Not applicable	

5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

## 1.1.6 BENDERIX2007B

Study ID		BENDERIX2007B		
Bibliographic reference: Benderix Y, Sivberg B. Siblings experiences of having a brother or sister with autism and mental retardation: a case study of 14 siblings from five families. International Pediatric Nursing. 2007;22:410-418.				
Guideline topic: Autism in children & people	Guideline topic: Autism in children & young		Key research question/aim: To describe siblings' experiences of having a brother or sister with autism and mental retardation	
Checklist completed by: Rachael Lee				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate Comments: Not app		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Clear		Comments: Not applicable	

4.2 Is the context clearly described?	Clear	Comments: Not applicable
4.3 Were the methods reliable?	Reliable	Comments: Not applicable
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

#### 1.1.7 BERESFORD2007

Study ID		BERESFORD2007	
Bibliographic reference: Beresford B, Tozer R,Rabiee P, Sloper P. Desired outcomes for children and adolescents with autistic spectrum disorders. Children and Society. 2007;21:89-98.			
Guideline topic: Autism in children & young people		Key research question/aim: To identify barriers to accessing services	
Checklist completed by: Rachael Lee			
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable

Section 3: data collection		
Section 5. data conection		
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Not applicable
4.3 Were the methods reliable?	Reliable	Comments: Not applicable
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Poor	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequat	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

#### 1.1.8 BERESFORD2010

Study ID	BERESFORD2010	
Bibliographic reference: Beresford B, Stuttard L, Clarke S, Maddison J, Beecham J. Managing behaviour and sleep problems in disabled children: an investigation into the effectiveness and costs of parent-training interventions. Research		
Report DFE-RR204. London: Department for Education; 2010. Available at: https://www.education.gov.uk/publications/RSG/AllPublications/Page1/DFE-RR204.		
Guideline topic: Autism in children & young peopleKey research question/aim: : An investigation into the effectiveness and costs of parent-training intervention for sleep problems		
Checklist completed by: Rachael Lee		

Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate	Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear	Comments: Not applicable	
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: Not applicable	
Section 3: data collection			
3.1 How well was the data collection carried out?	Not sure/inadequately reported	Comments: Not applicable	
Section 4: validity			
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable	
4.2 Is the context clearly described?	Clear	Comments: Not applicable	
4.3 Were the methods reliable?	Not sure	Comments: Not applicable	
Section 5: analysis			
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported	Comments: Not applicable	
5.2 Are the data 'rich'?	Rich	Comments: Not applicable	
5.3 Is the analysis reliable?	Not sure/not reported	Comments: Not applicable	
5.4 Are the findings convincing?	Convincing	Comments: Not applicable	
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable	
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable	
Section 6: ethics			
6.1 How clear and coherent is the reporting of ethical considerations?	Not sure/not reported	Comments: Not applicable	

#### 1.1.9 BEVANBROWN2010

Study ID		BEVANBROWN2010		
Bibliographic reference: Bevan-Brown J. Messages from parents of children with autism spectrum disorder (ASD). Kairaranga. 2010;11:16-22.				
Guideline topic: Autism in children & people	young	Key research question/aim: Sought parental opinion about what content and messages should be included in a DVD about ASD		
Checklist completed by: Rachael Lee				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Not sure/inadequately reported C		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not described		Comments: Not applicable	
4.2 Is the context clearly described?	Clear		Comments: Not applicable	
4.3 Were the methods reliable?	Not sure		Comments: Not applicable	
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported		Comments: Not applicable	
5.2 Are the data 'rich'?	Rich		Comments: Not applicable	
5.3 Is the analysis reliable?	Not sure/not reported		Comments: Not applicable	
5.4 Are the findings convincing?	Convincing		Comments: Not applicable	
5.5 Are the findings relevant to the aims of the study?	Relevant		Comments: Not applicable	

5.6 Are the conclusions adequate?	6 Are the conclusions adequate? Adequate	
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not sure/not reported	Comments: Not applicable

#### 1.1.10BIRKIN2008

Study ID		BIRKIN2008			
Bibliographic reference: Birkin C, Anderson A, Seymour F, Moore DW. A parent-focused early intervention program for autism: who gets access? Journal of Intellectual and Developmental Disability. 2008;33:108-116.					
Guideline topic: Autism in children & people	-	Key research question/aim: Examined access to the EarlyBird program and barriers which may affect uptake			
Checklist completed by: Rachael Lee		· •			
Section 1: theoretical approach					
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable		
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable		
Section 2: study design					
2.1 How defensible/rigorous is the research design/methodology?	Defensible Comments:		Comments: Not applicable		
Section 3: data collection					
3.1 How well was the data collection carried out?	Not sure/inadequately reported		Comments: Not applicable		
Section 4: validity					
4.1 Is the role of the researcher clearly described?	Not described Comments: Not applicable		Comments: Not applicable		
4.2 Is the context clearly described?	Clear C		Comments: Not applicable		
4.3 Were the methods reliable?	Not sure		Comments: Not applicable		
Section 5: analysis					
5.1 Is the data analysis sufficiently rigorous?	Not sure/no	t reported	Comments: Not applicable		

5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Not sure/not reported	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

## 1.1.11BRAIDEN2010

Study ID		BRAIDEN2010		
Bibliographic reference: Braiden HJ, Bothwell J, Duffy J. Parents' experience of the diagnostic process for autistic spectrum disorders. Child Care in Practice. 2010;16:377-389.				
Guideline topic: Autism in children & people	young	Key research question/aim: To document parents' experiences of the diagnostic process for ASD		
Checklist completed by: Rachael Lee				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear Comments: Not		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate Comments: Not applicable		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Clear		Comments: Not applicable	

4.2 Is the context clearly described?	Clear	Comments: Not applicable
4.3 Were the methods reliable?	Not sure	Comments: Not applicable
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Not sure/not reported	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

#### 1.1.12BREWIN2008

Study ID		BREWIN2008	
Bibliographic reference:		·	
Brewin BJ, Renwick R, Schormans AF. children with Asperger Syndrome. For			
Guideline topic: Autism in children & young people		Key research question/aim: To examine the perspectives of parents of children with Asperger Syndrome (AS) on quality of life at school	
Checklist completed by: Rachael Lee			
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable

Section 3: data collection			
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable	
Section 4: validity			
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable	
4.2 Is the context clearly described?	Clear	Comments: Not applicable	
4.3 Were the methods reliable?	Reliable	Comments: Not applicable	
Section 5: analysis			
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable	
5.2 Are the data 'rich'?	Rich	Comments: Not applicable	
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable	
5.4 Are the findings convincing?	Convincing	Comments: Not applicable	
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable	
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable	
Section 6: ethics			
6.1 How clear and coherent is the reporting of ethical considerations?	Not sure/not reported	Comments: Not applicable	

#### 1.1.13BREWSTER2010

Study ID	BREWSTER2010		
Bibliographic reference: Brewster S, Coleyshaw L. Participation or exclusion? on their participation in leisure activities. British Jour	perspectives of pupils with autistic spectrum disorders		
Guideline topic: Autism in children & young people	Key research question/aim: Explored the perceptions of children with ASD and/or ADHD of their access to leisure,recreational and short-term break provision		
Checklist completed by: Rachael Lee			
Section 1: theoretical approach			

	1	1
Is a qualitative approach appropriate?	Appropriate	Comments: Not applicable
Is the study clear in what it seeks to do?	Clear	Comments: Not applicable
Section 2: study design		
2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: Not applicable
Section 3: data collection		
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Not applicable
4.3 Were the methods reliable?	Reliable	Comments: Not applicable
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Not sure/not reported	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		·
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

#### 1.1.14BUNDY2009

Study ID	BUNDY2009

Bibliographic reference: Bundy MB, Kunce LJ. Parenting stress and high functioning children with autism. International Journal on Disability and Human Development. 2009;8:401–410.				
Guideline topic: Autism in children & young people		Key research question/aim: Explored the experience of stress in parents of children with high functioning autism		
Checklist completed by: Rachael Lee				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Clear		Comments: Not applicable	
4.2 Is the context clearly described?	Clear		Comments: Not applicable	
4.3 Were the methods reliable?	Not sure		Comments: Not applicable	
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Rigorous		Comments: Not applicable	
5.2 Are the data 'rich'?	Rich		Comments: Not applicable	
5.3 Is the analysis reliable?	Reliable		Comments: Not applicable	
5.4 Are the findings convincing?	Convincing		Comments: Not applicable	
5.5 Are the findings relevant to the aims of the study?	Relevant Comment		Comments: Not applicable	
5.6 Are the conclusions adequate?	Adequate Comments: Not applicable		Comments: Not applicable	
Section 6: ethics				

6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable
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## 1.1.15BURROWS2008

Study ID		BURROWS2008		
Bibliographic reference: Burrows KE, Adams CL. Challenges o veterinary practitioners. Journal of Vet		cal Education. 2008;35:55	9-566.	
Guideline topic: Autism in children & people	young		Key research question/aim: To describe the challenges of service-dog ownership for families with autistic children	
Checklist completed by: Rachael Lee				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible Comments: Not applicable			
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate Comments: Not applicab		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not described		Comments: Not applicable	
4.2 Is the context clearly described?	Clear		Comments: Not applicable	
4.3 Were the methods reliable?	Not sure		Comments: Not applicable	
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Rigorous		Comments: Not applicable	
5.2 Are the data 'rich'?	Rich		Comments: Not applicable	
5.3 Is the analysis reliable?	Reliable		Comments: Not applicable	

5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not sure/not reported	Comments: Not applicable

#### 1.1.16BURROWS2010

Study ID		BURROWS2010		
Bibliographic reference: Burrows R. Is anyone listening? A report on stress, trauma and resilience and the supports needed by parents of children and individuals with ASD and professionals in the fild of autism in Northern Ireland. Belfast: Autism NI; 2010.				
Guideline topic: Autism in children & people	young	Key research question/aim: Document the response of parents to having a child/individual with ASD in Northern Ireland		
Checklist completed by: Rachael Lee				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Not sure/inadequately reported		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not described		Comments: Not applicable	
4.2 Is the context clearly described?	Clear		Comments: Not applicable	
4.3 Were the methods reliable?	Not sure		Comments: Not applicable	

Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Not sure/not reported	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

#### 1.1.17CAMARENA2009

Study ID		CAMARENA2009		
Bibliographic reference: Camarena PM, Sarigiani PA. Postsecondary educational aspirations of high-functioning adolescents with autism spectrum disorders and their parents. Focus on Autism and Other Developmental Disabilities. 2009;24:115-128.				
Guideline topic: Autism in children & young people		Key research question/aim: To assess postsecondary educational aspirations and thoughts concerning obstacles of adolescents with autism and their parents		
Checklist completed by: Rachael Lee				
Section 1: theoretical approach	-			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible Comments: Not applicable		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	

Section 4: validity		
4.1 Is the role of the researcher clearly described?	Clear	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Not applicable
4.3 Were the methods reliable?	Reliable	Comments: Not applicable
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not sure/not reported	Comments: Not applicable

## 1.1.18CARBONE2010

Study ID		CARBONE2010		
Bibliographic reference: Carbone PS, Behl DD, Azor V, Murphy N. The medical home for children with autism spectrum disorders: parent and pediatrician perspectives. Journal of Autism and Developemtal Disorders. 2010;40:317–324.				
Guideline topic: Autism in children & young people		Key research question/aim: Examines differences between perceptions of parents and pediatricians regarding the needs of children with autism spectrum disorders and their families		
Checklist completed by: Rachael Lee	Checklist completed by: Rachael Lee			
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	

Is the study clear in what it seeks to do?	Clear	Comments: Not applicable			
Section 2: study design					
2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: Not applicable			
Section 3: data collection					
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable			
Section 4: validity					
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable			
4.2 Is the context clearly described?	Clear	Comments: Not applicable			
4.3 Were the methods reliable?	Reliable	Comments: Not applicable			
Section 5: analysis	Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported	Comments: Not applicable			
5.2 Are the data 'rich'?	Rich	Comments: Not applicable			
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable			
5.4 Are the findings convincing?	Convincing	Comments: Not applicable			
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable			
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable			
Section 6: ethics					
6.1 How clear and coherent is the					

#### 1.1.19CARRINGTON2003A

Study ID	CARRINGTON2003A			
Bibliographic reference:				
Carrington S, Papinczak T, Templeton E. A phenomenological study: the social world of five adolescents				
who have Asperger's syndrome. Australian Journal of Learning Difficulties. 2003;8:15-20.				

people		Key research question/aim: Investigated the social experiences and perceptions of friendship among teenagers diagnosed with Asperger's syndrome		
Checklist completed by: Rachael Lee				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not described		Comments: Not applicable	
4.2 Is the context clearly described?	Clear		Comments: Not applicable	
4.3 Were the methods reliable?	Not sure		Comments: Not applicable	
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Not sure/no	t reported	Comments: Not applicable	
5.2 Are the data 'rich'?	Rich		Comments: Not applicable	
5.3 Is the analysis reliable?	Not sure/not reported		Comments: Not applicable	
5.4 Are the findings convincing?	Convincing		Comments: Not applicable	
5.5 Are the findings relevant to the aims of the study?	Relevant		Comments: Not applicable	
5.6 Are the conclusions adequate?	Adequate		Comments: Not applicable	
Section 6: ethics				
6.1 How clear and coherent is the reporting of ethical considerations?	Not sure/no	t reported	Comments: Not applicable	

#### 1.1.20CARTER2004

Study ID		CARTER2004		
Bibliographic reference: Carter C, Meckes L, Pritchard L, Swensen S, Wittman PP, Velde B. The friendship club: an after-school program for children With Asperger syndrome. Family and Community Health. 2004;27:143-150.				
Guideline topic: Autism in children & people	young		aim: To review participant	
Checklist completed by: Rachael Lee				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Not sure/inadequately reported		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not describe	d	Comments: Not applicable	
4.2 Is the context clearly described?	Clear		Comments: Not applicable	
4.3 Were the methods reliable?	Not sure		Comments: Not applicable	
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported		Comments: Not applicable	
5.2 Are the data 'rich'?	Poor		Comments: Not applicable	
5.3 Is the analysis reliable?	Not sure/not reported		Comments: Not applicable	
5.4 Are the findings convincing?	Convincing		Comments: Not applicable	
5.5 Are the findings relevant to the aims of the study?	Relevant		Comments: Not applicable	

5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

## 1.1.21CASSIDY2008

Study ID		CASSIDY2008	
Bibliographic reference: Cassidy A, McConkey R, Truesdale-Kennedy M, Slevin E. Preschoolers with autism spectrum disorders: the impact on families and the supports available to them. Early Child Development and Care. 2008;178:115- 128.			
Guideline topic: Autism in children & young people		Key research question/aim: Aimed to outline the impact of ASD on families and the supports available to them	
Checklist completed by: Rachael Lee			
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate Comments: Not applicable		
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Defensible Comments: Not applicable		
Section 3: data collection			
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable
Section 4: validity			
4.1 Is the role of the researcher clearly described?	Clear Comments: Not applicable		Comments: Not applicable
4.2 Is the context clearly described?	Clear Comments: Not applicable		
4.3 Were the methods reliable?	Not sure Comments: Not ap		Comments: Not applicable
Section 5: analysis			
5.1 Is the data analysis sufficiently rigorous?	Not sure/no	t reported	Comments: Not applicable

5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Not sure/not reported	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

### 1.1.22 CHELL2006

Study ID		CHELL2006		
Bibliographic reference: Chell N. Experiences of parenting young people with a diagnosis of Asperger syndrome: a focus group study. International Journal of Psychiatric Nursing Research. 2006;11:1348-58.				
Guideline topic: Autism in children & young people		Key research question/aim: Aimed to identify parents of children with Asperger syndrome's perspectives and insights in order to inform service development		
Checklist completed by: Rachael Lee				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate 0		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Clear		Comments: Not applicable	

	<u>.</u>	
4.2 Is the context clearly described?	Clear	Comments: Not applicable
4.3 Were the methods reliable?	Reliable	Comments: Not applicable
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Not sure/not reported	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics	•	
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

#### 1.1.23CONNOR2000

Study ID		CONNOR2000		
Bibliographic reference:				
Connor M. Asperger syndrome (autistic spectrum disorder) and the self-reports of comprehensive school students. Educational Psychology in Practice. 2000;16:285-296.				
Guideline topic: Autism in children & young people		Key research question/aim: to gain insight into the opinions and experiences of a sample of young people diagnosed with Asperger syndrome attending their local comprehensive schools		
Checklist completed by: Rachael Lee				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	

Section 3: data collection			
3.1 How well was the data collection carried out?	Not sure/inadequately reported	Comments: Not applicable	
Section 4: validity			
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable	
4.2 Is the context clearly described?	Clear	Comments: Not applicable	
4.3 Were the methods reliable?	Not sure	Comments: Not applicable	
Section 5: analysis			
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported	Comments: Not applicable	
5.2 Are the data 'rich'?	Rich	Comments: Not applicable	
5.3 Is the analysis reliable?	Not sure/not reported	Comments: Not applicable	
5.4 Are the findings convincing?	Convincing	Comments: Not applicable	
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable	
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable	
Section 6: ethics			
6.1 How clear and coherent is the reporting of ethical considerations?	Not sure/not reported	Comments: Not applicable	

#### 1.1.24CULLEN2002A

Study ID	CULLEN2002A
Bibliographic reference: Cullen L, Barlow J. 'Kiss, cuddle, squeeze': the experi with autism attending a touch therapy programme. J	ences and meaning of touch among parents of children ournal of Child Health Care. 2002;6:171-181.

Cullen L, Barlow J. Parents' experiences of caring for children with autism and attending a touch therapy programme. Child Care in Practice. 2002;8:35-45.

Cullen LA, Barlow JH, Cushway D. Positive touch, the implications for parents and their children with autism: an exploratory study. Complementary Therapies in Clinical Practice. 2005;11:182-189.

Guideline topic: Autism in children & young people		Key research question/aim: to explore the experiences and meaning of touch between parents and children with autism before and after attending a Touch Therapy Programme		
Checklist completed by: Rachael Lee				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not described		Comments: Not applicable	
4.2 Is the context clearly described?	Clear		Comments: Not applicable	
4.3 Were the methods reliable?	Not sure		Comments: Not applicable	
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Not sure/no	t reported	Comments: Not applicable	
5.2 Are the data 'rich'?	Rich		Comments: Not applicable	
5.3 Is the analysis reliable?	Reliable		Comments: Not applicable	
5.4 Are the findings convincing?	Convincing		Comments: Not applicable	
5.5 Are the findings relevant to the aims of the study?	Relevant		Comments: Not applicable	
5.6 Are the conclusions adequate?	Adequate		Comments: Not applicable	
Section 6: ethics				
6.1 How clear and coherent is the reporting of ethical considerations?	Not sure/not reported		Comments: Not applicable	

#### 1.1.25DANN2011

Study ID		DANN2011			
Bibliographic reference: Dann R. Secondary transition experiences for pupils with autistic spectrum conditions (ASCs). Educational Psychology in Practice. 2011;27:293-312.					
Guideline topic: Autism in children & young people		Key research question/aim: To explore the views and experiences of key stakeholders regarding inclusion into secondary phase schooling for pupils with Autistic Spectrum Conditions			
Checklist completed by: Rachael Lee					
Section 1: theoretical approach					
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable		
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable		
Section 2: study design					
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable		
Section 3: data collection					
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable		
Section 4: validity					
4.1 Is the role of the researcher clearly described?	Not described		Comments: Not applicable		
4.2 Is the context clearly described?	Clear		Comments: Not applicable		
4.3 Were the methods reliable?	Reliable		Comments: Not applicable		
Section 5: analysis	Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Rigorous		Comments: Not applicable		
5.2 Are the data 'rich'?	Rich		Comments: Not applicable		
5.3 Is the analysis reliable?	Reliable		Comments: Not applicable		
5.4 Are the findings convincing?	Convincing		Comments: Not applicable		

5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable	
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable	
Section 6: ethics			
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable	

### 1.1.26 DILLENBURGER2010

Study ID		DILLENBURGER2010		
Bibliographic reference: Dillenburger K, Keenan M, Doherty A, Byrne, Gallagher S. Living with children diagnosed with autistic spectrum disorder: parental and professional views. British Journal of Special Education. 2010;37:13-23.				
Guideline topic: Autism in children & people	young	Key research question/aim: Experience of information and support	f	
Checklist completed by: Christina Lou	icas			
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate	Comments: Not a	applicable	
Is the study clear in what it seeks to do?	Clear	Comments: Not a	applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: Not a	applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate	Comments: Not a	applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not describe	d Comments: Not a	applicable	
4.2 Is the context clearly described?	Clear Comments: Not appl		applicable	
4.3 Were the methods reliable?	Reliable Comme		applicable	
Section 5: analysis				

5.1 Is the data analysis sufficiently rigorous?	Not rigorous	Comments: No clear and consistent method for analysing qualitative responses in the questionnaire described
5.2 Are the data 'rich'?	Not sure/not reported	Comments: Not applicable
5.3 Is the analysis reliable?	Unreliable	Comments: No detail given about how the qualitative data was analysed e.g. no indication of any interater checks
5.4 Are the findings convincing?	Not sure	Comments: Findings appear convincing, however it is difficult to confirm this due to poor methodology
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

#### 1.1.27 DILLENBURGER2004

Study ID		DILLENBURGER2004		
Bibliographic reference: Dillenburger K, Keenan M, Gallagher S, McElhinney M. Parent education and home-based behaviour analytic intervention: an examination of parents' perceptions of outcome. Journal of Intellectual & Developmental Disability. 2004;29:119–130.				
Guideline topic: Autism in children & people	young	Key research question/ intervention (ABA)	Key research question/aim: Experience of specific intervention (ABA)	
Checklist completed by: Christina Lou	cas			
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	

Section 3: data collection		
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Not applicable
4.3 Were the methods reliable?	Not sure	Comments: Only one method used: questionnaires
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not rigorous	Comments: No clear and consistent method for analysing qualitative responses in the questionnaire described
5.2 Are the data 'rich'?	Poor	Comments: Data lacks depth and detail
5.3 Is the analysis reliable?	Unreliable	Comments: No detail given about how the data was analysed e.g. no indication of any interater checks
5.4 Are the findings convincing?	Not sure	Comments: Findings appear convincing, however it is difficult to confirm this due to poor methodology
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics	·	
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

### 1.1.28DITTRICH2011

Study ID	DITTRICH2011
Bibliographic reference: Dittrich R, Burgess L, Bartolomeo K. Autism particip consultation: developing a Hampshire autism strateg Council; 2011. Available from: http://www.hants.go september2011.pdf.	gy to meet local needs. Hampshire: Hampshire County

Guideline topic: Autism in children & young people		Key research question/aim: To identify needs of children with autism and ther families in who live in Hampshire, to develop a dedicated service.	
Checklist completed by: Lucy Burt			
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate	Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear	Comments: Not applicable	
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: Not applicable	
Section 3: data collection			
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable	
Section 4: validity			
4.1 Is the role of the researcher clearly described?	Clear	Comments: Postal/online survey, so no relationship with participants.	
4.2 Is the context clearly described?	Clear	Comments: Study tried to remove any context bias e.g. by ensuring the survey was appropriate for people with different needs/abiltiies.	
4.3 Were the methods reliable?	Reliable	Comments: Data collected through focus-groups and surveys	
Section 5: analysis			
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable	
5.2 Are the data 'rich'?	Rich	Comments: Not applicable	
5.3 Is the analysis reliable?	Not reported	Comments: Information on how many people coded the surveys not reported	
5.4 Are the findings convincing?	Convincing	Comments: Not applicable	
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable	
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable	

Section 6: ethics

6.1 How clear and coherent is the reporting of ethical considerations?

#### 1.1.29DONALDSON2011

Study ID		DONALDSON2011		
Bibliographic reference: Donaldson SO, Elder JH, Self EH, Ch for children with autism. Journal of Cl				
Guideline topic: Autism in children & people	Guideline topic: Autism in children & young Key research question/aim: Experience of specific			
Checklist completed by: Christina Lou	ıcas			
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible Comments: Not applicable		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate Comments: Not applicable		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not describe	d	Comments: Not applicable	
4.2 Is the context clearly described?	Clear		Comments: Not applicable	
4.3 Were the methods reliable?			Comments: Only one method was used: semi-structured interviews	
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Rigorous		Comments: Not applicable	
5.2 Are the data 'rich'?	Rich		Comments: Not applicable	

5.3 Is the analysis reliable?	Reliable	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

### 1.1.30DYMOND2007

Study ID		DYMOND2007			
Bibliographic reference: Dymond SK, Gilson GL, Myran SP. Services for children with autism spectrum disorders. Journal of Disability Policy Studies. 2007;18:133-147.					
Guideline topic: Autism in children & people	young		Key research question/aim: Suggested improvements for education/school and community-based services		
Checklist completed by: Christina Lou	.cas				
Section 1: theoretical approach					
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable		
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable		
Section 2: study design	Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable		
Section 3: data collection					
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable		
Section 4: validity					
4.1 Is the role of the researcher clearly described?	Not describe	d	Comments: Not applicable		
4.2 Is the context clearly described?	Clear		Comments: Not applicable		

4.3 Were the methods reliable?	Not sure	Comments: Only used one method: survey questionnaire
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

## 1.1.31FISH2006

Study ID		FISH2006		
Bibliographic reference: Fish W.W. Perceptions of Parents of Students with Autism towards the IEP Meeting: A Case Study of One Family Support Group Chapter. Education. 2006: 126: 56-68.				
Guideline topic: Autism in children & young people		Key research question/aim: Experience of education/school (IEP)		
Checklist completed by: Christina Lou	cas			
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	

Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Not applicable
4.3 Were the methods reliable?	Not sure	Comments: Only used one method: semi-structured interviews
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not sure/not reported	Comments: Not applicable

## 1.1.32FLYNN2010

Study ID		FLYNN2010	
Bibliographic reference: Flynn K, Tosh J, Hackett L, Todd S, Bond C, Hunter A. Supporting families post-diagnosis: an evaluation of parent workshops. Good Autism Practice. 2010;11:31-35.			
Guideline topic: Autism in children & young people		Key research question/aim: Experience of post- diagnosis information and support (parent workshops)	
Checklist completed by: Christina Loucas			
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable

Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: Not applicable		
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable		
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable		
4.2 Is the context clearly described?	Clear	Comments: Not applicable		
4.3 Were the methods reliable?	Not sure	Comments: Only one method was used: questionnaire.		
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Not rigorous	Comments: No clear and consistent method for analysing qualitative responses in the questionnaire described		
5.2 Are the data 'rich'?	Poor	Comments: Findings are clear, however it is difficult to classify the data as 'rich' due to poor data analysis		
5.3 Is the analysis reliable?	Not sure/not reported	Comments: No detail given regarding reliability checks e.g. no indication of any interater checks		
5.4 Are the findings convincing?	Not sure	Comments: Findings appear convincing, however it is difficult to confirm this due to poor methodology		
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable		
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable		
Section 6: ethics				
6.1 How clear and coherent is the reporting of ethical considerations?	Not sure/not reported	Comments: Not applicable		

#### 1.1.33GREEN2007

Study ID		GREEN2007	
Bibliographic reference: Green VA. Parental experience with tr Disabilities. 2007;19:91-101.	eatments for a	utism. Journal of Develo	opmental and Physical
Guideline topic: Autism in children & people	young	Key research question, intervention (ABA)	aim: Experience of specific
Checklist completed by: Christina Lou	icas		
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable
Section 3: data collection			
3.1 How well was the data collection carried out?	Not sure/inadequately reported		Comments: Not applicable
Section 4: validity			
4.1 Is the role of the researcher clearly described?	Not described		Comments: Not applicable
4.2 Is the context clearly described?	Unclear		Comments: Limited detail provided
4.3 Were the methods reliable?	Unreliable		Comments: Only one method used (interview) and data was not reliably recorded: "responses were typed by the interviewer into Excel spreadsheets during the interview for later coding and analysis"
Section 5: analysis			
5.1 Is the data analysis sufficiently rigorous?	Not rigorous		Comments: Insufficient detail provided for method of analysis
5.2 Are the data 'rich'?	Not sure/not reported		Comments: Findings are clear, however it is difficult to classify the data as 'rich' due to poor methodology

5.3 Is the analysis reliable?	Unreliable	Comments: No detail given regarding reliability checks e.g. no indication of any interater checks
5.4 Are the findings convincing?	Convincing	Comments: Findings appear convincing, however it is difficult to confirm this due to poor methodology
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not sure/not reported	Comments: Not applicable

## 1.1.34GREY2010

Study ID		GREY2010		
Bibliographic reference: Grey IM, Lynn E, McClean B. Parents of children with autism: experiences of education service provision in the Republic of Ireland. Irish Journal of Psychology. 2010; 31:111-124.				
Guideline topic: Autism in children & people	young	<b>J 1</b> ·	Key research question/aim: Experience of education/school (ABA versus non-ABA schools)	
Checklist completed by: Christina Lou	cas			
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Clear		Comments: Not applicable	

4.2 Is the context clearly described?	Clear	Comments: Not applicable
4.3 Were the methods reliable?	Not sure	Comments: Only one method was used: semi-structured interview.
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

### 1.1.35 GRINDLE2009

Study ID		GRINDLE2009	
Bibliographic reference: Grindle CF, Kovshoff H, Hastings RP, Remington B. Parents' experiences of home-based applied behavior analysis programs for young children with autism. Journal of Autism and Developmental Disorders, 2009;39:42-56.			
Guideline topic: Autism in children & young people		Key research question/aim: Experience of specific intervention (EIBI)	
Checklist completed by: Christina Lou	icas		
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable

Section 3: data collection			
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable	
Section 4: validity			
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable	
4.2 Is the context clearly described?	Clear	Comments: Not applicable	
4.3 Were the methods reliable?	Not sure	Comments: Only one method was used: semi-structured interview.	
Section 5: analysis			
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable	
5.2 Are the data 'rich'?	Rich	Comments: Not applicable	
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable	
5.4 Are the findings convincing?	Convincing	Comments: Not applicable	
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable	
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable	
Section 6: ethics			
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable	

#### 1.1.36HACKETT2009

Study ID	HACKETT2009	
Bibliographic reference:		
Hackett L, Shaikh S, Theodosiou L. Parental perceptions of the assessment of autistic spectrum disorders a tier three service. Child and Adolescent Mental Health. 2009;14:127–132.		
Guideline topic: Autism in children & young people	Key research question/aim: Experience of post- diagnosis information and support	
Checklist completed by: Christina Loucas		
Section 1: theoretical approach		

· · · ·		
Is a qualitative approach appropriate?	Appropriate	Comments: Not applicable
Is the study clear in what it seeks to do?	Clear	Comments: Not applicable
Section 2: study design		
2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: Not applicable
Section 3: data collection		
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Not applicable
4.3 Were the methods reliable?	Reliable	Comments: Not applicable
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not rigorous	Comments: No clear method for how the data was coded/analysed was described
5.2 Are the data 'rich'?	Not sure/not reported	Comments: Findings are clear, however it is difficult to classify the data as 'rich' due to poor methodology
5.3 Is the analysis reliable?	Not sure/not reported	Comments: No detail on whether any reliability checks were taken
5.4 Are the findings convincing?	Not sure	Comments: Findings appear convincing, however it is difficult to confirm this due to poor methodology
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics	·	
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

#### 1.1.37HALL2010

Study ID		HALL2010		
Bibliographic reference: Hall HR, Graff JC. Parenting challenge Comprehensive Pediatric Nursing. 201		f children with autism: a	pilot study. Issues in	
Guideline topic: Autism in children & people			Key research question/aim: Experience of information and support	
Checklist completed by: Christina Lou	cas			
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not describe	d	Comments: Not applicable	
4.2 Is the context clearly described?	Clear		Comments: Not applicable	
4.3 Were the methods reliable?	Not sure		Comments: Only used one method: focus groups.	
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Rigorous		Comments: Not applicable	
5.2 Are the data 'rich'?	Rich		Comments: Not applicable	
5.3 Is the analysis reliable?	Reliable		Comments: Not applicable	
5.4 Are the findings convincing?	Convincing		Comments: Not applicable	
5.5 Are the findings relevant to the aims of the study?	Relevant		Comments: Not applicable	

5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

### 1.1.38HARE2004

Study ID		HARE2004		
Bibliographic reference: Hare DJ, Pratt C, Burton M, Bromley J, Emerson E. The health and social care needs of family carers supporting adults with autistic spectrum disorders. Autism. 2004;8:425-444.				
Guideline topic: Autism in children & people	young	Key research question/	aim: Experience of transition	
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not described		Comments: Not applicable	
4.2 Is the context clearly described?	Clear Comments: Not applicable			
4.3 Were the methods reliable?	Not sure		Comments: Only one method of data collection was adopted; structured interview	
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Not sure/no	t reported	Comments: Limited information on data analysis provided. A statitical package	

		was used and this was checked by field supervisor, but no information on methods etc.
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Not sure/not reported	Comments: Information on how discrepencies in analysis were resolved were not reported.
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

## 1.1.39ECOTEC2010

Study ID		ECOTEC2010		
Bibliographic reference: ECOTEC. Research study on age appropriate services for young people with neurodevelopmental disorders: a research study for Big Lottery Fund. Birmingham: ECOTEC Research and Consulting Ltd; 2010.				
Guideline topic: Autism in children & young people		Key research question/aim: Information/support at key transitions		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	

Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Not applicable
4.3 Were the methods reliable?	Reliable	Comments: Data were collected through interview and focus-groups
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported	Comments: Analysis seems rigorous, but coding carried out by one person so no interrater reliability checks
5.2 Are the data 'rich'?	Poor	Comments: A limited amount of data are reported for each cohort of participants and not all topics reported for each cohort.
5.3 Is the analysis reliable?	Not sure/not reported	Comments: Only one person coded data
5.4 Are the findings convincing?	Not sure	Comments: Findings are clearly presented and original extracts are included, but detail very limited.
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

#### 1.1.40HAY2005

Study ID	HAY2005		
Bibliographic reference: Hay I, Winn S. Students with Asperger's syndrome in an inclusive secondary school environment: teachers',			
parents' and students' perspectives. Australasian Journal of Special Education. 2005;29:140-154.			
Guideline topic: Autism in children & young people	Key research question/aim: Experience of education/school		
Checklist completed by: Lucy Burt			
Section 1: theoretical approach			

Te e monthe Conservation			
Is a qualitative approach appropriate?	Appropriate	Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear	Comments: Not applicable	
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: Not applicable	
Section 3: data collection			
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable	
Section 4: validity			
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable	
4.2 Is the context clearly described?	Clear	Comments: Not applicable	
4.3 Were the methods reliable?	Not sure	Comments: Only one method of data collection was adopted; focus groups	
Section 5: analysis			
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported	Comments: Not applicable	
5.2 Are the data 'rich'?	Rich	Comments: Not applicable	
5.3 Is the analysis reliable?	Not sure/not reported	Comments: Only one person coded data	
5.4 Are the findings convincing?	Convincing	Comments: Not applicable	
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable	
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable	
Section 6: ethics			
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable	

## 1.1.41 HUMPHREY2008A

Study ID	HUMPHREY2008A
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Bibliographic reference: Humphrey N, Lewis S. What does 'inc secondary schools? Journal of Researc		1 1	1
Humphrey N, Lewis S. 'Make me normainstream secondary schools. Autist			oupils on the sutistic spectrum in
			on/aim: Experience of
Checklist completed by: Lucy Burt			
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable
Section 3: data collection			
3.1 How well was the data collection carried out?	Appropriate		Comments: Although limited detail on data collection and record keeping reported
Section 4: validity			
4.1 Is the role of the researcher clearly described?	Not describe	ŀd	Comments: Not applicable
4.2 Is the context clearly described?	Clear		Comments: Not applicable
4.3 Were the methods reliable?	Reliable		Comments: Although details on who carried out analysis are lacking
Section 5: analysis			
5.1 Is the data analysis sufficiently rigorous?	Rigorous		Comments: Although details on who carried out analysis are lacking
5.2 Are the data 'rich'?	Rich		Comments: Not applicable
5.3 Is the analysis reliable?	Not reported		Comments: No information on who/how many coded
5.4 Are the findings convincing?	Convincing Comments: Not appl		Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant		Comments: Not applicable

5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

# 1.1.42HURLBUTT2011

Study ID		HURLBUTT2011			
Bibliographic reference: Hurlbutt KS. Experiences of parents who homeschool their children with autism spectrum disorders. Focus on Autism and Other Developmental Disabilities. 2011;26:239-249.					
Guideline topic: Autism in children & young people		Key research question/aim: Barriers to accessing services/unmet needs (reasons for homeschooling)			
Checklist completed by: Lucy Burt					
Section 1: theoretical approach					
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable		
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable		
Section 2: study design					
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable		
Section 3: data collection					
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable		
Section 4: validity					
4.1 Is the role of the researcher clearly described?	Clear		Comments: Not applicable		
4.2 Is the context clearly described?	Clear Comments: Context bias consideration not reported				
4.3 Were the methods reliable?	Not sure		Comments: Data were only collected by one person, but were double coded.		
Section 5: analysis					
5.1 Is the data analysis sufficiently rigorous?	Rigorous		Comments: Not applicable		

5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: 2 coders; no disagreement between them
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

# 1.1.43HUTTON2005

Study ID		HUTTON2005		
Bibliographic reference: Hutton AM, Caron SL. Experiences of families with children with autism in rural New England. Focus on Autism and Other Developmental Disabilities.2005;20:180-189.				
Guideline topic: Autism in children & young people		Key research question/aim: What is the impact on the family of having a child with ASD and what is the nature of intervention services they receive?		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Not sure/ina	adequately reported	Comments: Interviews were not recorded, but notes were taken. Unclear how detailed the notes were or how subjective.	
Section 4: validity				

	1	
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Context bias consideration not reported
4.3 Were the methods reliable?	Not sure	Comments: Data were clollected via interviews only.
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported	Comments: Limited details regarding data analysis are reported and what is reported is ambiguous.
5.2 Are the data 'rich'?	Not sure	Comments: The results section is descriptive rather than analytic, but for most questions the range of responses are (briefly) described.
5.3 Is the analysis reliable?	Not reported	Comments: Interviews were coded by each researcher, but how agreement was reached or how discrepant results were addressed is not reported
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

# 1.1.44 JEGATHEESAN2010

Study ID	JEGATHEESAN2010		
Bibliographic reference: Jegatheesan B, Fowler S, Miller PJ. From symptom re immigrant families navigate autism. Disability and S	ociety. 2010;25:797-811.		
Jegatheesan B. Multilingual development in children with autism:perspectives of south asian muslim immigrant parents on raising a child with a communicative disorder in multilingual contexts. Bilingual Research Journal. 2011;34:185-200.			
Guideline topic: Autism in children & young people	Key research question/aim: What were the experiences of intervention services of muslim		

		immigrant families wit	h children with autism
Checklist completed by: Lucy Burt		I	
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable
Section 3: data collection			
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable
Section 4: validity			
4.1 Is the role of the researcher clearly described?	Clear		Comments: Not applicable
4.2 Is the context clearly described?	Clear		Comments: Context bias consideration not reported
4.3 Were the methods reliable?	Not sure		Comments: Data collected by interview only, otherwise reliable
Section 5: analysis			
5.1 Is the data analysis sufficiently rigorous?	Rigorous		Comments: Not applicable
5.2 Are the data 'rich'?	Rich		Comments: Not applicable
5.3 Is the analysis reliable?	Reliable		Comments: Not applicable
5.4 Are the findings convincing?	Convincing		Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant		Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate		Comments: Not applicable
Section 6: ethics			
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	1	Comments: Not applicable

# 1.1.45 JINDALSNAPE2005

Study ID		JINDALSNAPE2005		
Bibliographic reference: Jindal-Snape D, Douglas W, Topping KJ, Kerr C, Smith EF. Effective education for children with autistic spectrum disorder: perceptions of parents and professionals. International Journal of Special Education. 2005;20:77-87.				
Jindal-Snape D, Douglas W, Topping F secondary transition. International Jou		l Education. 2006;21:18-3	1.	
Guideline topic: Autism in children & young		Key research question/aim: What services/advice is available to support children with auism in the transition from primary to secondary education?		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Inadequately	7 reported	Comments: Limited information regarding how interviews were carried out, other than the instrument that was used.	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not describe	d	Comments: Not applicable	
4.2 Is the context clearly described?	Unclear		Comments: characteristics of the participants/setting were not described. No reference to context bias.	
4.3 Were the methods reliable?	Not sure		Comments: Data collected via interviews only. Information on double coding is limited; unclear whether it was applied to all interviews or just specific questions.	
Section 5: analysis				

5.1 Is the data analysis sufficiently rigorous?	Not sure	Comments: Limited information on analysis reported; it is not clear how themes were identified.
5.2 Are the data 'rich'?	Poor	Comments: Diversity of contexts unclear; the word 'might' is used regularly (e.g. teacher visits might involve talking to staff); lack of detail and depth
5.3 Is the analysis reliable?	Not sure/not reported	Comments: Some double coding was done, but unclear how much and how differences were resolved
5.4 Are the findings convincing?	Not sure	Comments: Generally the responses seem convincing, but some areas lack detail
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

# 1.1.46JOHNSON2002

Study ID		JOHNSON2002	
Bibliographic reference: Johnson E, Hastings RP. Facilitating factors and barriers to the implementation of intensive home-based behavioural intervention for young children with autism. Child: Care, Health & Development. 2002;28:123- 129.			
Guideline topic: Autism in children & young people		Key research question/aim: What are the experiences of families conduting home-based behavioural interventions for children with ASD?	
Checklist completed by: Lucy Burt Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable
Section 2: study design			

2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: Not applicable
Section 3: data collection		
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Clear	Comments: Postal survey, so no relationship between researcher and participants
4.2 Is the context clearly described?	Clear	Comments: Context bias acknowledged
4.3 Were the methods reliable?	Not sure	Comments: Only one method of data collection was used; postal survey
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Not sure	Comments: Only 28 of 141 questionnaires were double coded.
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

# 1.1.47JONES2008A

Study ID	JONES2008A
Bibliographic reference: Jones G, Hack E. Chapter 3. Parent/carer involvement young people with autism spectrum disorder in the Educational Needs. 2008;8:167–182.	0
Guideline topic: Autism in children & young people	Key research question/aim: To ascertain the extent to which parents of children with ASD are involved in

	comminssioning se	rvices
Checklist completed by: Lucy Burt		
Section 1: theoretical approach		
Is a qualitative approach appropriate?	Appropriate	Comments: Not applicable
Is the study clear in what it seeks to do?	Clear	Comments: Not applicable
Section 2: study design		
2.1 How defensible/rigorous is the research design/methodology?	Not sure	Comments: Methodology poorly reported; very limited information
Section 3: data collection		
3.1 How well was the data collection carried out?	Inadequately reported	Comments: Methodology poorly reported; very limited information
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Methodology poorly reported; very limited information
4.2 Is the context clearly described?	Not sure	Comments: Methodology poorly reported; very limited information
4.3 Were the methods reliable?	Not sure	Comments: Methodology poorly reported; very limited information
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not reported	Comments: Methodology poorly reported; very limited information
5.2 Are the data 'rich'?	Poor	Comments: There is a lack of quotes from interviews, so it is unclear whether many of the statements in results are supported by the interviews
5.3 Is the analysis reliable?	Not reported	Comments: Methodology poorly reported; very limited information
5.4 Are the findings convincing?	Not sure	Comments: There is a lack of extracts from orginal data so unclear whether finding are supported
5.5 Are the findings relevant to the aims of the study?	Partially relevant	Comments: What is reported is relevant to research

5.6 Are the conclusions adequate?	Not sure	questions, but not all research questions have been answered Comments: Links between conclusions and data are not clear; limitations not discussed; unclear if alternate explanations have been explored
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

# 1.1.48JONES2008C

Study ID		JONES2008C	
Bibliographic reference: Jones G, English A, Guldberg K, Jordan R, Richardson P, Waltz M. Educational provision for children and young people on the autism spectrum living in England: a review of current practice, issues and challenges. London: Autism Education Trust; 2008. Available from: http://www.autismeducationtrust.org.uk/resources/research.aspx.			
Guideline topic: Autism in children & young people		Key research question/aim: To review the current practice issues and challenges in educational services for children with autism	
Checklist completed by: Lucy Burt			
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable
Section 3: data collection			
3.1 How well was the data collection carried out?	Inadequately reported questionnaires, but are missing in relation to how		reported on the collection of questionnaires, but are missing in relation to how interviews were arranged and
Section 4: validity			

4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Not applicable
4.3 Were the methods reliable?	Reliable	Comments: Data were collected via questionnaires and interviews.
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not reported	Comments: No information on analysis of data reported
5.2 Are the data 'rich'?	Not sure	Comments: Findings are clear and detailed, however it is difficult to classify the data as 'rich' due to lack of information regarding analysis
5.3 Is the analysis reliable?	Not reported	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

### 1.1.49KEENAN2010

Study ID		KEENAN2010	
Bibliographic reference: Keenan M, Dillenburger K, Doherty A, Byrne T, Gallagher S. The experiences of parents during diagnosis and forward planning for children with autism spectrum disorder. Journal of Applied Research in Intellectual Disabilities. 2010;23: 390–397.			
Guideline topic: Autism in children & young people		Key research question/aim: Examining parental experiences of diagnosis of children with ASD	
Checklist completed by: Lucy Burt			
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable

	1	1
Is the study clear in what it seeks to do?	Clear	Comments: Not applicable
Section 2: study design		
2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: Not applicable
Section 3: data collection		
3.1 How well was the data collection carried out?	Not sure/inadequately reported	Comments: Information provided on the questionniares but not on focus groups
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Context bias considerations not reported
4.3 Were the methods reliable?	Not sure	Comments: Data were collected through questionnaires and focus groups, but very little detail reported regarding the method and analysis for focus groups.
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not reported	Comments: Method of analysis for focus groups not reported
5.2 Are the data 'rich'?	Not sure	Comments: Findings are clear, however it is difficult to classify the data as 'rich' due to lack of methodology
5.3 Is the analysis reliable?	Not reported	Comments: No details on methodology reported
5.4 Are the findings convincing?	Not sure	Comments: Limited information reported
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not clear	Comments: Minimal information reported regarding participant information sheets and data

	security.

### 1.1.50KERRELL2001

Study ID		KERRELL2001	
Bibliographic reference: Kerrell H. Service evaluation of an aut	ism diagnostic	e clinic for children. Nurs	sing Standard. 2001;15:33-37.
Guideline topic: Autism in children & people	young		'aim: To examine parents m diagnostic clinic for children
Checklist completed by: Lucy Burt			
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Not sure		Comments: Methods around data collection are reported, but analysis was not described.
Section 3: data collection			
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable
Section 4: validity			
4.1 Is the role of the researcher clearly described?	Not described		Comments: Not applicable
4.2 Is the context clearly described?	Clear		Comments: Context bias not considered
4.3 Were the methods reliable?	Not sure		Comments: Data collected through semi-structured interview only
Section 5: analysis			
5.1 Is the data analysis sufficiently rigorous?	Not reported		Comments: Details of analysis not reported
5.2 Are the data 'rich'?	Not rich		Comments: Limited findings reported. Lack of information on analysis of data analysis also makes it difficult to

		describe as 'rich'.
5.3 Is the analysis reliable?	Not reported	Comments: No details on analysis reported
5.4 Are the findings convincing?	Not sure	Comments: Findings appear convincing, but details is limited and there is also limited information on methods of analysis
5.5 Are the findings relevant to the aims of the study?	Not sure	Comments: Limited findings reported and lack of information on analysis of data analysis makes it difficult to describe as relevent.
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not sure	Comments: Some ethical considerations were made, but details are limited

## 1.1.51KIDD2010

Study ID		KIDD2010	
Bibliographic reference: Kidd T, Kaczmarek E. The experiences of mothers home educating their children with autism spectrum disorder. Issues in Educational Research. 2010;20:257-275.			
Guideline topic: Autism in children & young people		Key research question/aim: To identify 'home- educating' experiences of mothers with a child with ASD	
Checklist completed by: Lucy Burt			
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable
Section 3: data collection			

3.1 How well was the data collection carried out?	Appropriate	Comments: Details on record keeping not reported
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Not applicable
4.3 Were the methods reliable?	Not sure	Comments: Only one method of data collection adopted; semi-structured interviews
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: Both researchers coded all itnerviews
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics	1	
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

## 1.1.52KIMURA2010

Study ID	KIMURA2010
Bibliographic reference: Kimura M, Yamazaki Y, Mochizuki M, Omiya T. Car children with pervasive developmental disorder: a q 2010;10: 69.	
Guideline topic: Autism in children & young people	Key research question/aim: To identify the experiences of mothers of children with PDD in relation to decisions about having a second-child.
Checklist completed by: Lucy Burt	
Section 1: theoretical approach	

Is a qualitative approach	Appropriate	Comments: Not applicable
appropriate?	rippiopilate	
Is the study clear in what it seeks to do?	Clear	Comments: Not applicable
Section 2: study design		
2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: Not applicable
Section 3: data collection		
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Context bias not considered
4.3 Were the methods reliable?	Not sure	Comments: Only one method of data collection used; semi- structured interviews
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics	·	
6.1 How clear and coherent is the reporting of ethical considerations?	Not sure	Comments: Some details on ethical considerations reported, but limited.

## 1.1.53KOYDEMIROZDEN2010

Study ID	KOYDEMIROZDEN2010
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Bibliographic reference: Koydemir-Özden S, Tosun U. A qualit autism: implications for counselling. A				
Guideline topic: Autism in children & young people		Key research question/aim: To gain an understanding of the experiences of Turkish mothers with a child with autism		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not describe	d	Comments: Not applicable	
4.2 Is the context clearly described?	Not sure		Comments: Limited details on participants and settings reported, context bias not considered	
4.3 Were the methods reliable?	Not sure		Comments: Only one method of data collection was used; semi-structured interviews	
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Rigorous		Comments: Not applicable	
5.2 Are the data 'rich'?	Rich		Comments: Not applicable	
5.3 Is the analysis reliable?	Reliable		Comments: Not applicable	
5.4 Are the findings convincing?	Convincing		Comments: Not applicable	
5.5 Are the findings relevant to the aims of the study?	Relevant		Comments: Not applicable	
5.6 Are the conclusions adequate?	Adequate		Comments: Not applicable	

Section 6: ethics

6.1 How clear and coherent is the reporting of ethical considerations?

#### 1.1.54KUHANECK2010

Study ID		KUHANECK2010		
Bibliographic reference: Kuhaneck HM, Burroughs T, Wright J of children with an autism spectrum d 350.				
Guideline topic: Autism in children & people	young		Key research question/aim: To identify the coping strategies of mothers of children with autism	
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not described		Comments: Not applicable	
4.2 Is the context clearly described?	Clear		Comments: Context bias not considered	
4.3 Were the methods reliable?	Not sure		Comments: Data were collected using one method only; semi-structured interview	
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Rigorous		Comments: Not applicable	

5.2 Are the data 'rich'?	Not sure	Comments: Some themes have limited details attached to them
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

# 1.1.55LARSON2010

Study ID		LARSON2010		
Bibliographic reference: Larson E. Ever vigilant: maternal support of participation in daily life for boys with autism. Physical and Occupational Therapy in Pediatrics. 2010;30:16-27.				
Guideline topic: Autism in children & young people		Key research question/aim: Exploring the experiences of care-giving of mothers of children with autism		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Not sure		Comments: Details in methodology are limited; rationale for qualitative approach not given	
Section 3: data collection				
3.1 How well was the data collection carried out?	Inadequately	/ reported	Comments: Details in methodology are limited; information lacking on collection methods and record keeping	

Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Details in methodology are limited
4.2 Is the context clearly described?	Not sure	Comments: Details in methodology are limited
4.3 Were the methods reliable?	Not sure	Comments: Data collection through semi-structured interview ony
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Not sure	Comments: Details in methodology are limited; not clear how many people coded
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Details on ethical considerations not reported

# 1.1.56LILLEY2011

Study ID		LILLEY2011	
Bibliographic reference: Lilley R. Maternal intimacies: talking about autism diagnosis. Australian Feminist Studies. 2011;26:207-224.			
Guideline topic: Autism in children & young people		Key research question/aim: Exploring the experience of mothers when their child is diagnosed with autism	
Checklist completed by: Lucy Burt			
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable

Section 2: study design		
2.1 How defensible/rigorous is the research design/methodology?	Not sure	Comments: Details on methodology are very limited
Section 3: data collection		
3.1 How well was the data collection carried out?	Inadequately reported	Comments: Details on methodology are very limited
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Clear	Comments: The researcher related to the mothers as she too has a child with autism, so was seem as <i>one of them</i> .
4.2 Is the context clearly described?	Unclear	Comments: Details on methodology are very limited
4.3 Were the methods reliable?	Not sure	Comments: Details on methodology are very limited. Data were collected through interviews and focus groups.
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not reported	Comments: No details of data analysis reported
5.2 Are the data 'rich'?	Not sure	Comments: Findings are clear, however it is difficult to classify the data as 'rich' due to poor methodology
5.3 Is the analysis reliable?	Not sure/not reported	Comments: No details of data analysis reported
5.4 Are the findings convincing?	Not sure	Comments: Findings appear convincing, however it is difficult to classify this way due to poor methodology
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics	·	
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

## 1.1.57LILLY2004

Study ID	LILLY2004
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Bibliographic reference: Lilly JD, Reed D, Wheeler KG. Percept children with autism spectrum disord		Applied School Psyc	chology. 2004;20:27-45.
Guideline topic: Autism in children & young people		Key research question/aim: To identify parents satisfaction with schools in relation to a child with autism.	
Checklist completed by: Lucy Burt		•	
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate	2	Comments: Not applicable
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Details of data analysis not reported
Section 3: data collection			
3.1 How well was the data collection carried out?	Inadequately reported		Comments: Some information missing; where interviews conducted, how/if they were recorded etc.
Section 4: validity			
4.1 Is the role of the researcher clearly described?	Not describe	ed	Comments: Not applicable
4.2 Is the context clearly described?	Clear		Comments: Not applicable
4.3 Were the methods reliable?	Not sure		Comments: Data collected via one method; semi-structured interviews
Section 5: analysis			
5.1 Is the data analysis sufficiently rigorous?	Not reported	1	Comments: No information on data analysis reported
5.2 Are the data 'rich'?	Not sure		Comments: Data are detailed in response to some questions but not others. Difficult to classify the data as 'rich' due to lack of information on analysis
5.3 Is the analysis reliable?	Not reported		Comments: No information on data analysis reported
5.4 Are the findings convincing?	Convincing		Comments: Although some questions would benefit from more detail being reported

5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

## 1.1.58LIN2008

Study ID		LIN2008		
Bibliographic reference: Lin C, Tsai Y, Chang H. Coping mechanisms of parents recently diagnosed with autism in Taiwan: a qualitative study. Journal of Clinical Nursing. 2008;17:2733-2740.				
Guideline topic: Autism in children & people	young		Key research question/aim: To identify the coping mechanisms of parents of children with autism	
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible Comments: Not applicable			
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not describe	ŀd	Comments: Not applicable	
4.2 Is the context clearly described?	Clear		Comments: Not applicable	
4.3 Were the methods reliable?	Not sure		Comments: Data collected via semi-structured interview only	
Section 5: analysis				

5.1 Is the data analysis sufficiently rigorous?	Not sure	Comments: Some detail on data analysis reported, but not enough to classify as 'rigorous'
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Not sure	Comments: An expert in qualitative methods double coded interviews, but unclear how differences were resolved and whether participants fed back on transcripts.
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

# 1.1.59LUONG2009

Study ID		LUONG2009		
Bibliographic reference: Luong J, Yoder MK, Canham D. Southeast asian parents raising a child with autism: a qualitative investigation of coping styles. The Journal of School Nursing. 2009;25:222-229.				
Guideline topic: Autism in children & young people		Key research question/aim: To identify the coping mechanisms of parents of children with autism		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				

3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported
4.3 Were the methods reliable?	Not sure	Comments: Data collected through semi-structured interviews only
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not sure	Comments: Some detail on data analysis reported, but not enough to classify as 'rigorous'
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

## 1.1.60MANSELL2004

Study ID	MANSELL2004
Bibliographic reference: Mansell W, Morris K. A survey of parent's reactions local service: access to information and use of service	to the diagnosis of an autistic spectrum disorder by a es. Autism. 2004;8:387-407.
Guideline topic: Autism in children & young people	Key research question/aim: To investiate parents views on the quality of services that are offered to children with autism
Checklist completed by: Lucy Burt	
Section 1: theoretical approach	

Is a qualitative approach appropriate?	Appropriate	Comments: Not applicable
Is the study clear in what it seeks to do?	Clear	Comments: Not applicable
Section 2: study design		
2.1 How defensible/rigorous is the research design/methodology?	Not sure	Comments: Lack of details regarding rationale for data collection and analysis.
Section 3: data collection		
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported
4.3 Were the methods reliable?	Not sure	Comments: Data collected using open-ended questionnaire only
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not sure	Comments: Detail on data analysis not provided
5.2 Are the data 'rich'?	Not sure	Comments: Findings are clear, however it is difficult to classify the data as 'rich' due to lack of detail on analysis
5.3 Is the analysis reliable?	Not reported	Comments: Detail on data analysis not provided
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

## 1.1.61MCCABE2008A

Study ID		MCCABE2008A		
Bibliographic reference: McCabe H. Autism and family in the I Research and Practice for Persons with		lic of China: learning from parents' perspectives. lities. 2008;33: 37-47.		
Guideline topic: Autism in children & people	young	Key research question/aim: To investigate the impact of an autism diagnosis on families of the children diagnosed		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate	Comments: Not applicable		
Is the study clear in what it seeks to do?	Clear	Comments: Not applicable		
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: Not applicable		
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable		
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Clear	Comments: Not applicable		
4.2 Is the context clearly described?	Clear	Comments: Not applicable		
4.3 Were the methods reliable?	Reliable	Comments: Data collected via survey and interviews.		
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable		
5.2 Are the data 'rich'?	Rich	Comments: Not applicable		
5.3 Is the analysis reliable?	Not sure	Comments: Unclear how whether interviews were double coded or whether participants fed-back on transcripts		
5.4 Are the findings convincing?	Convincing	Comments: Not applicable		

5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable	
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable	
Section 6: ethics			
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable	

## 1.1.62MCCABE2008B

Study ID		MCCABE2008B		
Bibliographic reference: McCabe H. The importance of parent-to-parent support among families of children with autism in the People's Republic of China. International Journal of Disability, Development and Education. 2008; 55:303- 314.				
Guideline topic: Autism in children & young people		Key research question/aim: To investigate the experiences of services offered to parents whose children have been diagnosed with autism		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible Comments: Not applicable		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate Comm		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not described Comments: Not applicable		Comments: Not applicable	
4.2 Is the context clearly described?	Clear Comments: Consideratio context bias not reported		Comments: Consideration of context bias not reported	
4.3 Were the methods reliable?	Reliable Comments: Data collected though semi-structured interview and survey		though semi-structured	

Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

# 1.1.63MCCONKEY2011

Study ID		MCCONKEY2011		
Bibliographic reference: McConkey R, MacLeod S, Cassidy A. The Keyhole® Rainbow Resource Kit: meeting the needs of parents of newly diagnosed preschoolers with ASD. Early Child Development and Care. 2011; 181:321-334.				
Guideline topic: Autism in children & young people		Key research question/aim: To ascertain parents views on a resource kit for children with autism.		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	

Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported
4.3 Were the methods reliable?	Reliable	Comments: Data collected via semi-structured interviews and questionnaires
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not reported	Comments: No details on data analysis reported
5.2 Are the data 'rich'?	Not sure	Comments: Findings are clear, however it is difficult to classify the data as 'rich' due to lack of information regarding analysis
5.3 Is the analysis reliable?	Not reported	Comments: No details on data analysis reported
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics	·	
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

# 1.1.64 MEIRSSCHAUT2010

Study ID	MEIRSSCHAUT2010
Bibliographic reference:	
Meirsschaut M, Roeyers H, Warreyn P. Parenting in	families with a child with autism spectrum disorder
and a typically developing child: mother's experience	es and cognitions. Research in Autism Spectrum
Disorders. 2010;4:661-669.	
Guideline topic: Autism in children & young people	Key research question/aim: To examine the experiences and cognitions of mothers with a child with autism and a typically-developing child
Checklist completed by: Lucy Burt	
Section 1: theoretical approach	

	1	1
Is a qualitative approach appropriate?	Appropriate	Comments: Not applicable
Is the study clear in what it seeks to do?	Clear	Comments: Not applicable
Section 2: study design		
2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: Not applicable
Section 3: data collection		
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported
4.3 Were the methods reliable?	Reliable	Comments: Data collected through semi-structured interview and questionnaires
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not sure	Comments: Limitied details on data analysis are reported, making it difficult to classify as 'rigorous'.
5.2 Are the data 'rich'?	Not sure	Comments: Some themes are not have limited depth and detail to describe as 'rich'
5.3 Is the analysis reliable?	Not reported	Comments: Limited details on analysis reported; unknown if interviews were doubled-coded or whether participants fed-back on themes.
5.4 Are the findings convincing?	Not sure	Comments: Findings were convincing for some themes, but not those that had limited information
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

# 1.1.65 MIDENCE 1999

Study ID		MIDENCE1999		
Bibliographic reference: Midence K, O'Neill M. The experience of parents in the diagnosis of autism: a pilot study. Autism. 1999;3:273-285.				
Guideline topic: Autism in children & people	young		Key research question/aim: To explore the experiences of parents whose children are diagnosed with autism	
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not described		Comments: Not applicable	
4.2 Is the context clearly described?	Clear		Comments: Consideration of context bias not reported	
4.3 Were the methods reliable?	Not sure		Comments: Data collected via semi-structured interview only	
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Rigorous		Comments: Not applicable	
5.2 Are the data 'rich'?	Rich		Comments: Not applicable	
5.3 Is the analysis reliable?	Reliable		Comments: Unclear whether transcripts were double coded, but participants did feed back on themes and all	

		were in agreement
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

#### 1.1.66 MINNES 2009

Study ID		MINNES2009			
Bibliographic reference: Minnes P, Steiner K. Parent views on enhancing the quality of health care for their children with fragile X syndrome, autism or down syndrome. Child: Care, Health & Development. 2009;35:250-256.					
Guideline topic: Autism in children & young people		Key research question/aim: To investigate parent views of the quality of heathcare services for children with autism			
Checklist completed by: Lucy Burt					
Section 1: theoretical approach					
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable		
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable		
Section 2: study design					
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable		
Section 3: data collection					
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable		
Section 4: validity					
4.1 Is the role of the researcher clearly described?	Not described Comme		Comments: Not applicable		
4.2 Is the context clearly described?	Clear		Comments: Consideration of context bias not reported		

4.3 Were the methods reliable?	Not sure	Comments: Data collected through focus groups only
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Poor	Comments: Not all themes are discussed; depth and diversity of accounts has not been demonstrated
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable
5.4 Are the findings convincing?	Not sure	Comments: Limited detail on findings makes it difficult to rate them as 'reliable'.
5.5 Are the findings relevant to the aims of the study?	Partially relevant	Comments: Further detail is needed to rate as 'relevant'
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

## 1.1.67MORRISON2009

Study ID		MORRISON2009		
Bibliographic reference: Morrison JQ, Sansosti FJ, Hadley WM. Parent perceptions of the anticipated needs and expectations for support for their college-bound students with Asperger's syndrome. Journal of Post-secondary Education and Disability. 2009;22:78-87.				
Guideline topic: Autism in children & young people		Key research question/aim: Parents perceptions of support needed by young people with Asperger's syndrome who are going to university		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	

Section 3: data collection			
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable	
Section 4: validity			
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable	
4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported	
4.3 Were the methods reliable?	Not sure	Comments: Data collected via focus group only	
Section 5: analysis			
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable	
5.2 Are the data 'rich'?	Rich	Comments: Not applicable	
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable	
5.4 Are the findings convincing?	Convincing	Comments: Not applicable	
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable	
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable	
Section 6: ethics			
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable	

## 1.1.68MOYSON2011

Study ID	MOYSON2011		
Bibliographic reference: Moyson T, Roeyers H. The quality of life of siblings of Children. 2011;78:41-55.	of children with autism spectrum disorder. Exceptional		
Guideline topic: Autism in children & young people	Key research question/aim: To investigate siblings of children with autism's perceptions of their own quality of life		
Checklist completed by: Lucy Burt			
Section 1: theoretical approach			

		T		
Is a qualitative approach appropriate?	Appropriate	Comments: Not applicable		
Is the study clear in what it seeks to do?	Clear	Comments: Not applicable		
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: Not applicable		
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable		
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable		
4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported		
4.3 Were the methods reliable?	Reliable	Comments: Data collected through semi-structured interview and focus groups		
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable		
5.2 Are the data 'rich'?	Rich	Comments: Not applicable		
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable		
5.4 Are the findings convincing?	Convincing	Comments: Not applicable		
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable		
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable		
Section 6: ethics				
6.1 How clear and coherent is the reporting of ethical considerations?	Not sure	Comments: Some ethical considerations are reported		

# 1.1.69MULLIGAN2010

Study ID	MULLIGAN2010
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Bibliographic reference: Mulligan J, Steel L, Macculloch R, Nich with autism spectrum disorder. Autisr			esource for parents of children
Guideline topic: Autism in children & young people		Key research question/aim: To ascertain parents views on an information resource for those who have children with autism.	
Checklist completed by: Lucy Burt			
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable
Section 3: data collection			
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable
Section 4: validity			
4.1 Is the role of the researcher clearly described?	Not described		Comments: Not applicable
4.2 Is the context clearly described?	Clear		Comments: Consideration of context bias not reported
4.3 Were the methods reliable?	Not sure		Comments: Data collected through focus groups only
Section 5: analysis			
5.1 Is the data analysis sufficiently rigorous?	Rigorous		Comments: Not applicable
5.2 Are the data 'rich'?	Rich		Comments: Not applicable
5.3 Is the analysis reliable?	Reliable		Comments: Not applicable
5.4 Are the findings convincing?	Convincing		Comments: Although some themes use a limited number of extracts of original data
5.5 Are the findings relevant to the aims of the study?	Relevant		Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate Comments: Not applicable		Comments: Not applicable
Section 6: ethics			

6.1 How clear and correporting of ethical c	Not reported	Comments: Not applicable

## 1.1.70 MYERS2009

Study ID		MYERS2009		
Bibliographic reference: Myers BJ, Mackintosh VH, Goin-Koch words on how having a child in the au Research in Autism Spectrum Disorde	itism spectrun	n has affected their lives a 684.	and their families' lives.	
Guideline topic: Autism in children & people	key research question/aim: To investigate parents perceptions of the affect of their child's diagnosis of autism on family life			
Checklist completed by: Lucy Burt		· · ·		
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible Comments: Not app		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Clear		Comments: Participants completed an online survey so there was no relationship with the researcher	
4.2 Is the context clearly described?	Clear		Comments: Consideration of context bias not reported	
4.3 Were the methods reliable?	Not sure		Comments: Data collected via online survey only	
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Rigorous		Comments: Not applicable	
5.2 Are the data 'rich'?	Rich Comments: 1		Comments: Not applicable	

5.3 Is the analysis reliable?	Reliable	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

## 1.1.71NASUNO2003

Study ID		NASUNO2003		
Bibliographic reference: Nasuno M, Takeuchi K, Yamamoto J. Feasibility of parents of children with autism using an applied behaviour analytic early treatment program: a preliminary study in Malaysia. Japanese Journal of Special Education. 2003;40:723-732.				
Guideline topic: Autism in children & young people		Key research question/aim: To ascertain parents on formal and informal support resources for children with autism		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Not sure		Comments: Data collection relating to interviews and data analysis has been reported in limited detail and therefore may not be defensible	
Section 3: data collection				
3.1 How well was the data collection carried out?	Inadequately	7 reported	Comments: Limited details reported on how interviews were conducted and data were recorded	

Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported
4.3 Were the methods reliable?	Reliable	Comments: Data collected through survey and semi- structured itnerview
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not reported	Comments: Unclear how analysis was carried out due to lack of detail reported
5.2 Are the data 'rich'?	Poor	Comments: Detail and depth of responses are not reported; lack of quotes from interviews are used; unclear how data were analysed and results obtained
5.3 Is the analysis reliable?	Not reported	Comments: Unclear how analysis was carried out due to lack of detail reported
5.4 Are the findings convincing?	Not sure	Comments: Findings are clear, however it is difficult to classify findings as convincing due to lack of details on analysis
5.5 Are the findings relevant to the aims of the study?	Partially relevant	Comments: Findings seem relevant, however it is difficult to classify the data as 'rich' due to lack of detail on analysis
5.6 Are the conclusions adequate?	Not sure	Comments: Limitation of the study are not discussed
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

## 1.1.72NASUNPUBLISHED

Study ID	NASUNPUBLISHED
Bibliographic reference: National Autistic Society. Child mental health resear	ch report; Unpublished.

		Key research question/	
Guideline topic: Autism in children & young people		perceptions of children with autism and their families with those of mental health staff around CAMHS provision for children and young people with autism	
Checklist completed by: Lucy Burt		provision for children e	and young people with dutishi
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Not sure		Comments: Design is appropriate to research question, but there are no clear accounts of the rationale/justification for the data analysis techniques.
Section 3: data collection			
3.1 How well was the data collection carried out?	Inadequately reported		Comments: Data collection briefly described, but details are limited
Section 4: validity			
4.1 Is the role of the researcher clearly described?	Not describe	ed	Comments: Not applicable
4.2 Is the context clearly described?	Unclear		Comments: Participant characteristics or settings not described
4.3 Were the methods reliable?	Not sure		Comments: Data were collected through interviews and focus groups, which do investigate what they set out to investigate. However, it is difficult to classify as 'reliable' due to the lack of detail in the methods.
Section 5: analysis			
5.1 Is the data analysis sufficiently rigorous?	Not reported	1	Comments: Data were thematically analysed. No further detail reported.
5.2 Are the data 'rich'?	Not sure		Comments: Findings are clear, however it is difficult to classify the data as 'rich' due to lack of detail regarding methodology and analysis

5.3 Is the analysis reliable?	Not reported	Comments: Details of analysis not reported
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

## 1.1.73NICHOLS2010

Study ID		NICHOLS2010		
Bibliographic reference: Nichols S, Blakeley-Smith A. "I'm not sure we're ready for this": working with families toward facilitating healthy sexuality for individuals with autism spectrum disorders. Social Work in Mental Health. 2010;8:72- 91.				
Guideline topic: Autism in children & young people		Key research question/aim: To investigate parent views on service requirements relating to sexulaity in young people with autism		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Clear		Comments: Consideration of context bias not reported	
4.2 Is the context clearly described?	Clear		Comments: Not applicable	

4.3 Were the methods reliable?	Not sure	Comments: Data collected through focus-groups only
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Not reported	Comments: Reliability checks not reported
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

# 1.1.74NISSENBAUM2002

Study ID		NISSENBAUM2002	
Bibliographic reference: Nissenbaum MS, Tollefson N, Reese RM. The interpretative conference: sharing a diagnosis of autism with families. Focus on Autism and Other Developmental Disabilities. 2002;17:30-43.			
Guideline topic: Autism in children & young people		Key research question/aim: To investigate professionals and parents experiences of giving and receiving a child's diagnosis of autism	
Checklist completed by: Lucy Burt			
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable
Section 3: data collection			

3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported
4.3 Were the methods reliable?	Not sure	Comments: Data collected through unstructured interviews only
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: Unclear if the data were double-coded, but member checks were completed
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics	·	
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

### 1.1.75OLIVIER2009

Study ID	OLIVIER2009	
Bibliographic reference: Olivier MA, Hing ADA. Autistic spectrum disorder ( Children and Youth Studies. 2009;4:58-66.	(ASD): parental challenges and strategies. Vulnerable	
Guideline topic: Autism in children & young people	Key research question/aim: To investigate the views of parents of children with autism around how they can be supported more effectively.	
Checklist completed by: Lucy Burt		
Section 1: theoretical approach		

Is a qualitative approach appropriate?	Appropriate	Comments: Not applicable
Is the study clear in what it seeks to do?	Clear	Comments: Not applicable
Section 2: study design		
2.1 How defensible/rigorous is the research design/methodology?	Not sure	Comments: Design is approriate, but no rationale is offered for the methods of data collection or analysis
Section 3: data collection		
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Unclear	Comments: Characteristics of participants not clearly defined; Consideration of context bias not reported
4.3 Were the methods reliable?	Not sure	Comments: Data collected through semi-structured interview only
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not reported	Comments: Details relating to data analysis are limited; unclear how themes/patterns were derived from data
5.2 Are the data 'rich'?	Poor	Comments: Data are descriptive; depths and diversity of perspective have not been reported; responses to not appear to have been compared
5.3 Is the analysis reliable?	Not reported	Comments: Details relating to data analysis are limited
5.4 Are the findings convincing?	Not sure	Comments: The findings are clear, but due to the lack of detail on analysis methods and the poor quality, cannot be rated as 'convincing'.
5.5 Are the findings relevant to the aims of the study?	Partially relevant	Comments: The limited findings appear relevant to the study, but lack of detail means they cannot be rated as 'relevant'.

5.6 Are the conclusions adequate?	Inadequate	Comments: Lack of details means that conclusions cannot be considered as plausible and coherent; implications and limitations of research are not addressed.
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

# 1.1.76OSBORNE2008

Study ID		OSBORNE2008			
Bibliographic reference: Osborne LA, Reed P. Parents' perceptions of communication with professionals during the diagnosis of autism. Autism. 2008;12:309-324.					
Guideline topic: Autism in children & young people		Key research question/aim: To examine parent experiences of receiving their child's diagnosis of autism and how this experience can be improved			
Checklist completed by: Lucy Burt					
Section 1: theoretical approach					
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable		
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable		
Section 2: study design	Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible Comments: Not applicable				
Section 3: data collection					
3.1 How well was the data collection carried out?	Appropriate Comments: Not applicable		Comments: Not applicable		
Section 4: validity					
4.1 Is the role of the researcher clearly described?	Not described Comments: Not applicable				
4.2 Is the context clearly described?	Cloar		Comments: Consideration of context bias not reported		
4.3 Were the methods reliable?	Not sure co		Comments: Data were collected through structured focus groups only		

Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Not sure	Comments: Methods of analysis are not explicitly reported		
5.2 Are the data 'rich'?	Rich	Comments: Not applicable		
5.3 Is the analysis reliable?	Not sure	Comments: Double coding was only carried out on 40% of data		
5.4 Are the findings convincing?	Convincing	Comments: Not applicable		
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable		
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable		
Section 6: ethics				
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable		

## 1.1.77PARSONS2009A

Study ID		PARSONS2009A			
Bibliographic reference: Parsons S. Lewis A. Ellins I. The views	Bibliographic reference: Parsons S, Lewis A, Ellins J. The views and experiences of parents of children with autistic spectrum				
disorder about educational provision: online survey. European Journal of Spe	comparisons v	vith parents of children v			
Guideline topic: Autism in children & people	young	Key research question/aim: To investigate parents views on education services for children with autism			
Checklist completed by: Lucy Burt					
Section 1: theoretical approach					
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable		
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable		
Section 2: study design					
2.1 How defensible/rigorous is the research design/methodology?	Defensible Comments: Not applicable		Comments: Not applicable		
Section 3: data collection					

		I
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Clear	Comments: Online survey, so researcher had no role
4.2 Is the context clearly described?	Clear	Comments: Context bias is considered
4.3 Were the methods reliable?	Not sure	Comments: Data were collected through online survey only
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not reported	Comments: No details on how qualitative data were analysed
5.2 Are the data 'rich'?	Not sure	Comments: Findings are clear, however it is difficult to classify the data as 'rich' due to lack of detail regarding analysis
5.3 Is the analysis reliable?	Not reported	Comments: No details on how qualitative data were analysed
5.4 Are the findings convincing?	Not sure	Comments: Findings are clear, however it is difficult to classify the data as 'convincing' due to lack of detail regarding analysis
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

# 1.1.78PATTERSON2011

Study ID	PATTERSON2011		
Bibliographic reference: Patterson SY, Smith V. The experience of parents of toddlers diagnosed with autism spectrum disorder in the More Than Words parent education program. Infants and Young Children. 2011;24:329-343.			
Guideline topic: Autism in children & young peopleKey research question/aim: Experience of specific intervention (Hanen More than Words)			

Checklist completed by: Lucy Burt		
Section 1: theoretical approach		
Is a qualitative approach appropriate?	Appropriate	Comments: Not applicable
Is the study clear in what it seeks to do?	Clear	Comments: Not applicable
Section 2: study design		
2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: Not applicable
Section 3: data collection		
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported
4.3 Were the methods reliable?	Reliable	Comments: Data collected through indivudal interview and focus groups
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: Unclear if transcripts were double- coded, but all interviews were member checked
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

## 1.1.79PETALAS2009

Study ID		PETALAS2009			
Bibliographic reference: Petalas MA, Hastings RP, Nash S, Dowey A, Reilly D. "I like that he always shows who he is": the perceptions and experiences of siblings with a brother with autism spectrum disorder. International Journal of Disability, Development and Education. 2009;56:381-399.					
Guideline topic: Autism in children & people		Key research question/aim: To investigate the experiences of typically developing children who have a brother with autism			
Checklist completed by: Lucy Burt					
Section 1: theoretical approach					
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable		
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable		
Section 2: study design					
2.1 How defensible/rigorous is the research design/methodology?	Defensible Comments: Not applicable				
Section 3: data collection					
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable		
Section 4: validity					
4.1 Is the role of the researcher clearly described?	Clear		Comments: Not applicable		
4.2 Is the context clearly described?	Clear		Comments: Not applicable		
4.3 Were the methods reliable?	Not sure		Comments: Data collected through semi-structured interview only		
Section 5: analysis					
5.1 Is the data analysis sufficiently rigorous?	Rigorous		Comments: Not applicable		
5.2 Are the data 'rich'?	Rich Cor		Comments: Not applicable		
5.3 Is the analysis reliable?	Reliable		Comments: Not applicable		
5.4 Are the findings convincing?	Convincing Comments: Not applicab		Comments: Not applicable		

5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable		
5.6 Are the conclusions adequate?	Adequate	Comments: Limitations not reported		
Section 6: ethics				
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable		

## 1.1.80PHELPS2009

Study ID		PHELPS2009			
Bibliographic reference: Phelps KW, Hodgson JL, McCammon SL, Lamson AL. Caring for an individual with autism disorder: a qualitative analysis. Journal of Intellectual and Developmental Disability. 2009;34:27-35.					
Guideline topic: Autism in children & people	young	Key research question/aim: To examine the experiences of care-givers with a child with autism			
Checklist completed by: Lucy Burt					
Section 1: theoretical approach					
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable		
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable		
Section 2: study design					
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable		
Section 3: data collection					
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable		
Section 4: validity					
4.1 Is the role of the researcher clearly described?	Clear		Comments: Not applicable		
4.2 Is the context clearly described?	Clear Comments: Consideration of context bias not reported		Comments: Consideration of context bias not reported		
4.3 Were the methods reliable?	Not sure		Comments: Data collected through open-ended survey only		
Section 5: analysis					

5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Limitations not discussed
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

# 1.1.81 PICKERING2005

Study ID		PICKERING2005			
Bibliographic reference: Pickering A, Goode S. Family-centred approach to information provision for families with a child diagnosed with an autistic spectrum disorder. Clinical Psychology Forum. 2005;155:12-15.					
Guideline topic: Autism in children & young people		Key research question/aim: to investigate the views of parents of children with autism regarding the utility of information packs			
Checklist completed by: Lucy Burt					
Section 1: theoretical approach					
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable		
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable		
Section 2: study design					
2.1 How defensible/rigorous is the research design/methodology?	Not sure		Comments: Limited information regarding methodology reported		
Section 3: data collection					
3.1 How well was the data collection carried out?	Inadequately reported		Comments: Method of data collection seems appropriate, but unclear how systematic this and the record keeping was.		

Section 4: validity			
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable	
4.2 Is the context clearly described?	Unclear	Comments: Characteristics of participants and settings not reported; consideration of context bias not reported	
4.3 Were the methods reliable?	Not sure	Comments: Data collected via surveys only	
Section 5: analysis			
5.1 Is the data analysis sufficiently rigorous?	Not sure	Comments: Limited information on data analysis reported	
5.2 Are the data 'rich'?	Poor	Comments: Detail and depth of responses has not been reported; no quotes from raw data included	
5.3 Is the analysis reliable?	Not reported	Comments: Limited information on data analysis reported	
5.4 Are the findings convincing?	Not sure	Comments: No extacts from original data included	
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable	
5.6 Are the conclusions adequate?	Adequate	Comments: Limitations of study are not discussed	
Section 6: ethics			
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable	

# 1.1.82PREECE2009A

Study ID	PREECE2009A		
Bibliographic reference: Preece D, Jordan R. Obtaining the views of children and young people with autism spectrum disorders about their experience of daily life and social care support. British Journal of Learning Disabilities. 2009;38:10-20.			
Guideline topic: Autism in children & young people	Key research question/aim: To explore the experiences of daily life in children and young people with autism		
Checklist completed by: Lucy Burt			
Section 1: theoretical approach			

		1
Is a qualitative approach appropriate?	Appropriate	Comments: Not applicable
Is the study clear in what it seeks to do?	Clear	Comments: Not applicable
Section 2: study design		
2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: Not applicable
Section 3: data collection		
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Clear	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported
4.3 Were the methods reliable?	Reliable	Comments: Data collected via semi-structured interviews and observations
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Not sure	Comments: A sample of transcripts (but not all) were double coded
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: some limitations are discussed throughout the discussion section
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

#### 1.1.83PRUNTY2011

Study ID		PRUNTY2011			
Bibliographic reference: Prunty A. Implementation of children's rights: what is in 'the best interests of the child' in relation to the individual education plan (IEP) process for pupils with autistic spectrum disorders (ASD)? Irish Educational Studies. 2011;30:23-44.					
Guideline topic: Autism in children & young people		Key research question/aim: To ascertain what children with autism, parents and teachers feel about the IEP development process for children with autism			
Checklist completed by: Lucy Burt					
Section 1: theoretical approach	_				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable		
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable		
Section 2: study design					
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable		
Section 3: data collection					
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable		
Section 4: validity					
4.1 Is the role of the researcher clearly described?	Clear		Comments: Not applicable		
4.2 Is the context clearly described?	Clear		Comments: Consideration of context bias not reported		
4.3 Were the methods reliable?	Not sure		Comments: Data collected via focus groups only		
Section 5: analysis					
5.1 Is the data analysis sufficiently rigorous?	Rigorous		Comments: Not applicable		
5.2 Are the data 'rich'?	Rich		Comments: Not applicable		
5.3 Is the analysis reliable?	Not sure		Comments: Double-coding of transcripts not reported		
5.4 Are the findings convincing?	Convincing		Comments: Not applicable		
5.5 Are the findings relevant to the aims of the study?	Relevant		Comments: Although some themes are lacking extracts		

		from the original data		
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable		
Section 6: ethics				
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable		

## 1.1.84REID2011

Study ID		REID2011			
Bibliographic reference: Reid B. Great expectations: the chance of a lifetime for children with autism. London: National Autistic Society; 2011.					
Guideline topic: Autism in children & young people		Key research question/aim: To identify the views of children and young people with autism, their parents and professionals on the special education needs support available			
Checklist completed by:					
Section 1: theoretical approach					
Is a qualitative approach appropriate?	Appropriate Comments: Not application				
Is the study clear in what it seeks to do?	Unclear		Comments: Limited information on aims of the research reported		
Section 2: study design					
2.1 How defensible/rigorous is the research design/methodology?	Not sure		Comments: Very limited information on methodology reported		
Section 3: data collection					
3.1 How well was the data collection carried out?	Inadequately reported		Comments: Very limited information on methodology reported		
Section 4: validity					
4.1 Is the role of the researcher clearly described?	Not described		Comments: Very limited information on methodology reported		
4.2 Is the context clearly described?	Not sure		Comments: Very limited information on methodology reported		

4.3 Were the methods reliable?	Not sure	Comments: Very limited information on methodology reported
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not reported	Comments: Information on data analysis not reported
5.2 Are the data 'rich'?	Not sure	Comments: Findings are clear, however it is difficult to classify the data as 'rich' due to lack of detail around methodology
5.3 Is the analysis reliable?	Not reported	Comments: Information on data analysis not reported
5.4 Are the findings convincing?	Not sure	Comments: Findings are clear, however it is difficult to classify the data as 'convincing' due to lack of detail around methodology
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Not sure	Comments: Conclusions are clear, however it is difficult to classify the data as 'adequate' due to lack of detail around methodology
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

#### 1.1.85RENTY2006A

Study ID		RENTY2006A	
Bibliographic reference:			
Renty J, Roeyers H. Satisfaction with for	ormal support	and education for childr	en with autism spectrum
disorder: the voices of the parents. Chi	ld: Care, Healt	th & Development. 2006;	32:371-385.
Guideline topic: Autism in children & young people		Key research question/aim: To ascertain how satisifed parents of children with autism are with support and education services their child receives	
Checklist completed by: Lucy Burt			
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable

Is the study clear in what it seeks to do?	Clear	Comments: Not applicable			
Section 2: study design	Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: The method of analysis is not detailed in full, however, overall would still classify as 'defensible'.			
Section 3: data collection					
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable			
Section 4: validity					
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable			
4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported			
4.3 Were the methods reliable?	Reliable	Comments: Data were collected through survey and semi-structured interviews			
Section 5: analysis					
5.1 Is the data analysis sufficiently rigorous?	Not sure	Comments: General informtaion on the method of analysis are reported, howver, it is not enough to demostrate how themes/codes are derived from the data			
5.2 Are the data 'rich'?	Rich	Comments: Not applicable			
5.3 Is the analysis reliable?	Not reported	Comments: Double coding and participant feedback on transcripts not reported			
5.4 Are the findings convincing?	Convincing	Comments: Not applicable			
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable			
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable			
Section 6: ethics					
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable			

#### 1.1.86RYAN2009

Study ID		RYAN2009			
Bibliographic reference: Ryan S, Cole SR. From advocate to activist? mapping the experiences of mothers of children on the autism spectrum. Journal of Applied Research in Intellectual Disabilities. 2009;22:43-53.					
Guideline topic: Autism in children & people	young		aim: Exploring the advocacy thers with a child with autism		
Checklist completed by: Lucy Burt					
Section 1: theoretical approach					
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable		
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable		
Section 2: study design					
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable		
Section 3: data collection					
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable		
Section 4: validity					
4.1 Is the role of the researcher clearly described?	Not described		Comments: Not applicable		
4.2 Is the context clearly described?	Not sure		Comments: Characteristics of participants are described; settings not described and consideration of context bias not reported		
4.3 Were the methods reliable?	Not sure		Comments: Data collected through semi-structured interview only		
Section 5: analysis					
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported		Comments: Some details of analysis are reported, but the mothod used is not explicit and it is not clear how themes were derived from the data		
5.2 Are the data 'rich'?	Rich		Comments: Not applicable		
5.3 Is the analysis reliable?	Not sure/not reported		Comments: The number of times data were coded is not reported		

5.4 Are the findings convincing?	Convincing	Comments: Not applicable		
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable		
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable		
Section 6: ethics				
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable		

#### 1.1.87 SELKIRK2009

Study ID		SELKIRK2009			
Bibliographic reference: Selkirk CG, McCarthy Veach P, Lian F, Schimmenti L, LeRoy BS. Parents' perceptions of autism spectrum disorder etiology and recurrence risk and effects of their perceptions on family planning: recommendations for genetic counselors. Journal of Genetic Counselling. 2009;18:507-519.					
Guideline topic: Autism in children & young people		Key research question/aim: Identifying parents' beliefs of the aetiology of their child's ASD			
Checklist completed by: Lucy Burt					
Section 1: theoretical approach					
Is a qualitative approach appropriate?	Appropriate Comments: Not applicabl		Comments: Not applicable		
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable		
Section 2: study design					
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable		
Section 3: data collection					
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable		
Section 4: validity					
4.1 Is the role of the researcher clearly described?	Clear there was no relationship between research and participant; how study was		between research and participant; how study was introduced to participants is		

4.2 Is the context clearly described?	Clear	Comments: Not applicable
4.3 Were the methods reliable?	Not sure	Comments: Data were collected through online survey online
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: Data were double coded
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

## 1.1.88 SERPENTINE2011

Study ID		SERPENTINE2011	
Bibliographic reference: Serpentine EC, Tarnai B, Drager KDR, Finke EH. Decision making of parents of children with autism spectrum disorder concerning augmentative and alternative communication in Hungary. Communication Disorders Quarterly. 2011;32:221-231.			
Guideline topic: Autism in children & young people		Key research question/aim: To explore the decisions of parents of children with autism from Hungary, in relation to to seeking communication interventions for their child	
Checklist completed by: Lucy Burt			
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable
Section 2: study design			

	1	
2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: Not applicable
Section 3: data collection		
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported
4.3 Were the methods reliable?	Not sure	Comments: Data collected through semi-structured interview only
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Not sure	Comments: Double coding was only carried out on 20% of the data
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

## 1.1.89SHYU2010

Study ID	SHYU2010		
Bibliographic reference:			
Shyu YL, Tsai J, Tsai W. Explaining and selecting treatments for autism: parental explanatory models in			
Taiwan. Journal of Autism and Developmental Disorders. 2010;40:1323-1331.			
Guideline topic: Autism in children & young people	Key research question/aim: To explore the beliefs of parents of children with autism in Taiwan, regarding the causes of the disorder and how they make treatment choices for their child		

Checklist completed by: Lucy Burt		
Section 1: theoretical approach		
Is a qualitative approach appropriate?	Appropriate	Comments: Not applicable
Is the study clear in what it seeks to do?	Clear	Comments: Not applicable
Section 2: study design		
2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: Not applicable
Section 3: data collection		
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported
4.3 Were the methods reliable?	Not sure	Comments: Data collected through semi-structured interview only
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: Double coding not reported, but member checks were completed
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Limitations not reported
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

### 1.1.90ROSE2009

Study ID		ROSE2009		
Bibliographic reference: Rose R, Anketell C. The benefits of soc pilot study. Child Care in Practice. 200		ps for young people with	n autism spectrum disorder: a	
Guideline topic: Autism in children & people	young	Key research question/aim: To evaluate the possible benefits of a social skills group for children on the autistic spectrum		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not describe	ŀd	Comments: Not applicable	
4.2 Is the context clearly described?	Clear		Comments: Not applicable	
4.3 Were the methods reliable?	Reliable		Comments: Data collected via focus groups and questionnaires	
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported		Comments: Some details of analysis are reported, but the mothod used is not explicit and it is not clear how themes were derived from the data	
5.2 Are the data 'rich'?	Not sure		Comments: The themes are each discussed to an extent; however, because quantitative data were also collected, there less detail reported from the qualitative data, so depth of responses is	

		not demonstrated.
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Some ethical considerations were made

# 1.1.91SMYTH2010

Study ID		SMYTH2010		
Bibliographic reference: Smyth C, Slevin E. Experiences of fam 2010;13:12-17.	ily life with ar	n autism assistance dog. I	earning Disability Practice.	
Guideline topic: Autism in children & young people		Key research question/aim: To explore the experiences of families of children with autism who live with an assistance dog		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Not sure		Comments: Some detail on data collection and analysis, but not enough to be considered 'definsible'.	
Section 3: data collection				
3.1 How well was the data collection carried out?	Inadequately reported		Comments: Unclear how long inerviews lasted, how they were conducted and how they were recorded (taping or field notes – unclear)	

Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported
4.3 Were the methods reliable?	Not sure	Comments: Data collected through semi-structured interview only
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported	Comments: Data were formulated into themes, but not reported in enough detail to understand <i>how</i> themes were derived from data
5.2 Are the data 'rich'?	Not sure	Comments: Findings are clear, however it is difficult to classify the data as 'rich' due to lack of detail on methodology and analysis
5.3 Is the analysis reliable?	Not sure/not reported	Comments: Reliability checks (e.g. double coding) not reported
5.4 Are the findings convincing?	Not sure	Comments: Findings are clear, however it is difficult to classify the data as 'convincing' due to lack of detail on methodology and analysis
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		1
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

## 1.1.92SPANN2003

Study ID	SPANN2003
Bibliographic reference: Spann SJ, Kohler FW, Soenksen D. Families in a pare and perceptions of special education services : an inte on Autism and Other Developmental Disabilities. 200	erview with families in a parent support group. Focus

Guideline topic: Autism in children & young people		Key research question/aim: To explore the perceptions of parents of children with autism of special education services and their involvement in them	
Checklist completed by: Lucy Burt		·	
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Not sure		Comments: Not enough detail on data analysis reported
Section 3: data collection			
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable
Section 4: validity			
4.1 Is the role of the researcher clearly described?	Not described		Comments: Not applicable
4.2 Is the context clearly described?	Clear		Comments: Consideration of context bias not reported
4.3 Were the methods reliable?	Not sure		Comments: Data collected through telephone interviews only
Section 5: analysis			
5.1 Is the data analysis sufficiently rigorous?	Not reported	1	Comments: Method of data analysis not reported
5.2 Are the data 'rich'?	Rich		Comments: Even though method of analysis not reported, tables are provided to show how often responses were endorsed by parents.
5.3 Is the analysis reliable?	Not sure/not reported		Comments: Double coding carried out on 25% of interview transcripts, but without detail on analytic method, cannot be classified as 'reliable'.
5.4 Are the findings convincing?	Convincing		Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant		Comments: Not applicable

5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

## 1.1.93 SPERRY1999

Study ID		SPERRY1999		
Bibliographic reference: Sperry LA, Whaley KT, Shaw E, Brame K. Services for young children with autism spectrum disorder: voices of parents and providers. Infants and Young Children. 1999;11:17-33.				
Guideline topic: Autism in children & young people		Key research question/aim: To explore the perceptions of parents and service providers around services that are offered to children with autism		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible Comments: No		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not described Comments: Not applicable		Comments: Not applicable	
4.2 Is the context clearly described?	Clear Comments: Consideration context bias not reported		Comments: Consideration of context bias not reported	
4.3 Were the methods reliable?	Not sure		Comments: Data collected via focus groups only	
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Rigorous Comments: Not applicable			

5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

## 1.1.94STARR2001

Study ID		STARR2001		
Bibliographic reference: Starr EM, Foy JB, Cramer KM. Parental perceptions of the education of children with pervasive developmental disorders. Education and Training in Mental Retardation and Developmental Disabilities. 2001;36:55-68.				
Guideline topic: Autism in children & young people		Key research question/aim: To explore the views of parents of children with Pervasive Developmental Disorder in relation to education		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Not sure		Comments: Detail relating to the instrument are reported, but analysis of qualitative data is not described	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	
Section 4: validity				

4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported
4.3 Were the methods reliable?	Not sure	Comments: Data collected via questionnaire only
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not reported	Comments: No details on qualitative data analysis reported
5.2 Are the data 'rich'?	Not sure	Comments: Diversity of perspective and depth of responses is not demonstrated in the report. Findings are clear, however it is difficult to classify the data as 'rich' due to lack of information regarding analysis
5.3 Is the analysis reliable?	Not sure/not reported	Comments: No details on qualitative data analysis reported
5.4 Are the findings convincing?	Convincing	Comments: Findings are clear, however it is difficult to classify the data as 'convincing' due to poor lack of detail regarding analysis
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

# 1.1.95 STIRLING 1999

Study ID	STIRLING1999		
Bibliographic reference:			
Stirling A, Prior A. Opening the door: a report on dia			
syndrome based on personal experiences. London: National Autistic Society; 1999.			
Guideline topic: Autism in children & young people Key research question/aim: To examine parents experiences of obtaining a diagnosis of ASD for their child			
Checklist completed by: Lucy Burt			

Section 1: theoretical approach		
Is a qualitative approach appropriate?	Appropriate	Comments: Not applicable
Is the study clear in what it seeks to do?	Clear	Comments: Not applicable
Section 2: study design		
2.1 How defensible/rigorous is the research design/methodology?	Not sure	Comments: Details of methodology are very limited. Method of analysis not reported at all.
Section 3: data collection		
3.1 How well was the data collection carried out?	Not sure/inadequately reported	Comments: Details of data collection are very limited; unknown if data collection and record keeping were systematic
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported
4.3 Were the methods reliable?	Not sure	Comments: Data collected through questionnaires only, no further information reported
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported	Comments: Detail on data analysis not reported
5.2 Are the data 'rich'?	Not sure	Comments: Findings show depth and perspective have been explored, however it is difficult to classify the data as 'rich' due to lack of detail about methodology
5.3 Is the analysis reliable?	Not sure/not reported	Comments: Detail on data analysis not reported
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Not sure	Comments: Limited conclusions are drawn outside of the findings

Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

#### 1.1.96 STONER2005

Study ID		STONER2005		
Bibliographic reference: Stoner JB, Bock SJ, Thompson JR, Angell ME, Heyl BS, Crowley EP. Welcome to our world: parent perceptions of interactions between parents of young children with ASD and education professionals. Focus on Autism and Other Developmental Disabilities. 2005;20:39-51				
Stoner JB, Angell ME. Parent perspecti ASD and their self-reported roles with Disabilities,2006;20:39-51				
Stoner JB, Angell ME, House JJ, Bock S autism spectrum disorder (ASD). Journ		omental and Physical Dis	abilities. 2007;19:23-39.	
Guideline topic: Autism in children & people	young	Key research question/ perspectives of parents their interactions with e	of children with autism on	
Checklist completed by: Lucy Burt			1	
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate Comments: Not applicable		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Clear		Comments: Not applicable	
4.2 Is the context clearly described?	Clear		Comments: Consideration of context bias not reported	
4.3 Were the methods reliable?	Not sure		Comments: Data collected through interview only	

Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

### 1.1.97 STUART2006

Study ID		STUART2006		
Bibliographic reference: Stuart SK, Flis LD, Rinaldi C. Connecting with familes: parents speak up about preschool services for their children with autism spectrum disorders. Teaching Exceptional Children. 2006;39:46-51.				
Guideline topic: Autism in children & young people		Key research question/aim: To investigate parents perceptions of a preschool programme for children with autism		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach	Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	

Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Unclear	Comments: Participant characteristics/settings not described; consideration of context bias not reported
4.3 Were the methods reliable?	Not sure	Comments: Data were collected through questionnaire only
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Not sure/not reported	Comments: No reliability checks reported
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

### 1.1.98TIPPETT2004

Study ID		TIPPETT2004	
Bibliographic reference: Tippett J. The educational experiences of students with Asperger syndrome. Kairaranga. 2004;5:12-18.			
Guideline topic: Autism in children & young people		Key research question/aim: To explore the issues that students with Asperger's Syndrome experience, from the students', their parents and their teachers perspectives.	
Checklist completed by: Lucy Burt			
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate Comments: Not app		Comments: Not applicable

Is the study clear in what it seeks to			
do?	Clear	Comments: Not applicable	
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Not sure	Comments: Limited detail on methodology reported; no detail on analysis reported	
Section 3: data collection			
3.1 How well was the data collection carried out?	Not sure/inadequately reported	Comments: Limited detail on methodology reported	
Section 4: validity			
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable	
4.2 Is the context clearly described?	Unclear	Comments: Characteristics of participants and setting not described; consideration of context bias not reported	
4.3 Were the methods reliable?	Not sure	Comments: Data collected via interview only	
Section 5: analysis			
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported	Comments: No detail on analysis reported	
5.2 Are the data 'rich'?	Not sure	Comments: Findings are clear, however it is difficult to classify the data as 'rich' due to lack of detail on methodology/analysis	
5.3 Is the analysis reliable?	Not sure/not reported	Comments: No detail on analysis reported	
5.4 Are the findings convincing?	Convincing	Comments: Not applicable	
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable	
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable	
Section 6: ethics			
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable	

#### 1.1.99TISSOT2006

Study ID	ıdy ID		TISSOT2006			
Bibliographic reference: Tissot C, Evans R. Securing provision for children with autistic spectrum disorders: the views of parents. Perspectives in Education. 2006;24:73-86.						
0 0 1	Tissot C. Working together? parent and local authority views on the process of obtaining appropriate educational provision for children with autism spectrum disorders. Educational Research. 2011;53:1–15.					
Guideline topic: Autism in children & young people		Key research question/aim: To explore the views of parents of children with autism and the local authorities on the provision of special education services				
Checklist completed by: Lucy Burt						
Section 1: theoretical approach						
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable			
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable			
Section 2: study design	Section 2: study design					
2.1 How defensible/rigorous is the research design/methodology?	Not sure Comments: Limited details analysis are provided					
Section 3: data collection						
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable			
Section 4: validity						
4.1 Is the role of the researcher clearly described?	Not described		Comments: Not applicable			
4.2 Is the context clearly described?	Unclear		Comments: Characteristics of participants/settings not described; Consideration of context bias not reported			
4.3 Were the methods reliable?	Reliable		Comments: Data collected via interviews and questionnaires			
Section 5: analysis						
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported		Comments: Limited details of analysis are provided			
5.2 Are the data 'rich'?	Not sure Con clea class		Comments: Findings are clear, however it is difficult to classify the data as 'rich' due to limited details of analysis			

5.3 Is the analysis reliable?	Not sure/not reported	Comments: Limited details of analysis are provided		
5.4 Are the findings convincing?	Convincing	Comments: Not applicable		
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable		
5.6 Are the conclusions adequate?	Adequate	Comments: Limitations are not discussed		
Section 6: ethics				
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable		

# 1.1.100 TOBIAS2009

Study ID		TOBIAS2009			
Bibliographic reference: Tobias A. Supporting students with autistic spectrum disorder (ASD) at secondary school: a parent and student perspective. Educational Psychology in Practice. 2009;2:151-165.					
Guideline topic: Autism in children & young people		Key research question/aim: To explore the views of students with autism and their parents on the support they receive while at secondary school			
Checklist completed by: Lucy Burt					
Section 1: theoretical approach					
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable		
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable		
Section 2: study design					
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable		
Section 3: data collection					
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable		
Section 4: validity					
4.1 Is the role of the researcher clearly described?	Not described Comments: Not		Comments: Not applicable		
4.2 Is the context clearly described?	Clear		Comments: Consideration of context bias not reported		

4.3 Were the methods reliable?	Not sure	Comments: Data were collected through focus groups only		
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable		
5.2 Are the data 'rich'?	Rich	Comments: Not applicable		
5.3 Is the analysis reliable?	Not sure/not reported	Comments: Reliability measures not reported		
5.4 Are the findings convincing?	Convincing	Comments: Not applicable		
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable		
5.6 Are the conclusions adequate?	Adequate	Comments: Limitations are not discussed		
Section 6: ethics				
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable		

## 1.1.101 TRUDGEON2007

Study ID		TRUDGEON2007	
Bibliographic reference:			
Trudgeon C, Carr D. The impacts of he			
children with autism. Journal of Appli	ed Research ir		
Guideline topic: Autism in children & young people		Key research question/aim: To explore the experiences of parents of children with autism who are involved in early intensive behaviour interventions	
Checklist completed by: Lucy Burt			
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable

Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable		
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Unclear	Comments: The relationship between researcher and participant not reported, but how the study was introduced to participants was reported		
4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported		
4.3 Were the methods reliable?	Not sure	Comments: Data collected via semi-structured interview only		
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable		
5.2 Are the data 'rich'?	Rich	Comments: Only one theme of 5 discussed		
5.3 Is the analysis reliable?	Reliable	Comments: Some transcripts were double coded and themes were member- checked		
5.4 Are the findings convincing?	Convincing	Comments: Not applicable		
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable		
5.6 Are the conclusions adequate?	Adequate	Comments: Limitations not discussed		
Section 6: ethics				
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable		

## 1.1.102 VALENTINE2010

Study ID	VALENTINE2010			
Bibliographic reference:				
Valentine K. A consideration of medicalisation: choice, engagement and other responsibilities of parents of				
children with autism spectrum disorder. Social Science and Medicine. 2010;71:950-957.				

Guideline topic: Autism in children & young people		Key research question/aim: To explore the experiences of families of children with autism, following diagnosis			
Checklist completed by: Lucy Burt					
Section 1: theoretical approach					
Is a qualitative approach appropriate?	Appropriate	С	omments: Not applicable		
Is the study clear in what it seeks to do?	Clear	С	comments: Not applicable		
Section 2: study design					
2.1 How defensible/rigorous is the research design/methodology?	Defensible	С	omments: Not applicable		
Section 3: data collection					
3.1 How well was the data collection carried out?	Appropriate	С	omments: Not applicable		
Section 4: validity					
4.1 Is the role of the researcher clearly described?	Not describe	d C	omments: Not applicable		
4.2 Is the context clearly described?	Clear		comments: Consideration of ontext bias not reported		
4.3 Were the methods reliable?	Not sure		comments: Data collected prough semi-structured nterview only		
Section 5: analysis					
5.1 Is the data analysis sufficiently rigorous?	Rigorous	С	comments: Not applicable		
5.2 Are the data 'rich'?	Rich	С	comments: Not applicable		
5.3 Is the analysis reliable?	Reliable	С	comments: Not applicable		
5.4 Are the findings convincing?	Convincing	С	comments: Not applicable		
5.5 Are the findings relevant to the aims of the study?	Relevant		comments: Not applicable		
5.6 Are the conclusions adequate?	Adequate		omments: Not applicable		
Section 6: ethics					
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	l C	omments: Not applicable		

### 1.1.103 WADDINGTON2006

Study ID		WADDINGTON2006		
Bibliographic reference: Waddington EM, Reed P. Parents' and the success of inclusion of pupils with Education. 2006;21:151-164.				
Guideline topic: Autism in children & young people		Key research question/aim: To ascertain the views of parents of children with autism and the professional working with them on inclusion of these children into mainstream schools		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Unclear		Comments: Relatiosnhsip between researcher and participants not reported, but how the study was introduced is reported	
4.2 Is the context clearly described?	Clear		Comments: Consideration of context bias not reported	
4.3 Were the methods reliable?	Not sure		Comments: Data collected through focus-groups only	
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Rigorous		Comments: Not applicable	
5.2 Are the data 'rich'?	Rich		Comments: Not applicable	
5.3 Is the analysis reliable?	Reliable		Comments: Not applicable	

5.4 Are the findings convincing?	Convincing	Comments: Not applicable		
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable		
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable		
Section 6: ethics				
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable		

## 1.1.104 WEBSTER2003

Study ID		WEBSTER2003		
Bibliographic reference: Webster A, Feiler A, Webster V. Early intensive family intervention and evidence of effectiveness: lessons from the South West autism programme. Early Child Development and Care. 2003;173:383-398. Webster A, Feiler A, Webster V, Lovell C. Parental perspectives on early intensive intervention for children				
Guideline topic: Autism in children &		f Early Childhood Research. 2004;2:25-49. Key research question/aim: To explore the experiences of parents of children with autism in administering a home-based early intervention programme		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate Comments: Not applicable			
Is the study clear in what it seeks to do?	Clear Comments		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Not sure/inadequately reported         Comments: Limited deta           Not sure/inadequately reported         how interviews were           conducted are reported         conducted are reported			
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not described	đ	Comments: Not applicable	

4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported
4.3 Were the methods reliable?	Not sure	Comments: Data collected through semi-structured interviews only
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: With concerns over lack of reliability measures for analysis
5.3 Is the analysis reliable?	Not sure/not reported	Comments: No reliability checks reported
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

# 1.1.105 WEIDLE2006

Study ID		WEIDLE2006		
Bibliographic reference: Weidle B, Bolme B, Hoeyland AL. Are peer support groups for adolescents with Asperger's syndrome helpful? Clinical Child Psychology and Psychiatry. 2006;11:45-67.				
Guideline topic: Autism in children & young people		Key research question/aim: To explore the views of adolescents with Asperger's Syndrome and their family around a peer support group		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Not sure		Comments: Data collection is clearly detailed, but no details	

		on analysis are provided
Section 3: data collection		
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported
4.3 Were the methods reliable?	Not sure	Comments: Data collected through questionnaires only
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported	Comments: No information on analysis reported
5.2 Are the data 'rich'?	Not sure	Comments: Findings are clear, however it is difficult to classify the data as 'rich' due to lack of information regarding analysis
5.3 Is the analysis reliable?	Not sure/not reported	Comments: No information on analysis reported
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

## 1.1.106 WELSHASSEMBLY2006

Study ID	WELSHASSEMBLY2006	
Bibliographic reference: Welsh Assembly Government New Ideas Research Fund. Identifying and supporting people with autistic		
spectrum disorders within the youth justice system in Wrexham and Flintshire. Wales: Wales' National Charity for Autism; 2006.		

Guideline topic: Autism in children & young people		Key research question/aim: To ascertain the views of young people with autism, their families and their teachers on the value of Attention Cards.	
Checklist completed by: Lucy Burt			
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate	2	Comments: Not applicable
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Not sure		Comments: Limited details of methodology are reported; no details on analysis of data reported.
Section 3: data collection			
3.1 How well was the data collection carried out?	Not sure/inadequately reported		Comments: How interviews were conducted not described; data collection and record keeping processes are not described
Section 4: validity			
4.1 Is the role of the researcher clearly described?	Not described		Comments: Not applicable
4.2 Is the context clearly described?	Not sure		Comments: Lack of detail regarding participants; Consideration of context bias not reported
4.3 Were the methods reliable?	Reliable		Comments: Data collected through questionnaires and interviews
Section 5: analysis			
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported		Comments: No details on analysis reported
5.2 Are the data 'rich'?	Not sure/nc	ot reported	Comments: Details are not provided on how many participants there were in each group e.g. teachers, so not clear what the level of concensus for outcomes was. Findings are clear, however it is difficult to classify the data as 'rich' due to lack of information on analysis

5.3 Is the analysis reliable?	Not sure/not reported	Comments: No details on analysis reported
5.4 Are the findings convincing?	Not sure	Comments: Findings are clear, however it is difficult to classify the data as 'convincing' due to lack of information on analysis
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Not sure	Comments: Few conclusions are drawn; limitations are not discussed
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

## 1.1.107 WHITAKER2002

Study ID		WHITAKER2002		
Bibliographic reference: Whitaker P. Supporting families of preschool children with autism: what parents want and what helps. Autism. 2002;6:411-426.				
Guideline topic: Autism in children & young people		Key research question/aim: To explore the experiences of parents of children with autism who have been part of a local education authority project that aimed to provide support to preschoolers		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Not sure		Comments: Details on methodology (data collection, analysis) are very limited	
Section 3: data collection				
3.1 How well was the data collection carried out?	Not sure/inadequately reported		Comments: Details on data collection are very limited	
Section 4: validity				

4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Not sure	Comments: Participant charateristics not described; consideration of context bias not reported
4.3 Were the methods reliable?	Not sure	Comments: Data collected through interviews only;limited information reported
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported	Comments: No details on data analysis reported
5.2 Are the data 'rich'?	Not sure	Comments: Findings are clear, however it is difficult to classify the data as 'rich' due to lack of information on methodology
5.3 Is the analysis reliable?	Not sure/not reported	Comments: No details on data analysis reported
5.4 Are the findings convincing?	Not sure	Comments: Findings are clear, however it is difficult to classify the data as 'convincing' due to lack of information on methodology; lack of extracts from original data included
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

### 1.1.108 WHITAKER2007

Study ID	WHITAKER2007	
Bibliographic reference: Whitaker P. Provision for youngsters with autistic spectrum disorders in mainstream schools: what parent say - and what parents want. British Journal of Special Education. 2007;34:170-178.		
Guideline topic: Autism in children & young people Key research question/aim: To explore the views of parents with autism on education provisions their child has received		

Checklist completed by: Lucy Burt		
Section 1: theoretical approach		
Is a qualitative approach appropriate?	Appropriate	Comments: Not applicable
Is the study clear in what it seeks to do?	Clear	Comments: Not applicable
Section 2: study design		
2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: Not applicable
Section 3: data collection		
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Not applicable
4.3 Were the methods reliable?	Not sure	Comments: Data collected via questionnaire only
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Not sure/not reported	Comments: Reliability measures not reported
5.4 Are the findings convincing?	Not sure	Comments: Few extractsf rom original data are used to support statements
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

#### 1.1.109 WHITTINGHAM2006

Study ID		WHITTINGHAM2006		
Bibliographic reference: Whittingham K, Sofronoff K, Sheffield the program by parents of a child diag Disabilities. 2006;27:364-380.				
Guideline topic: Autism in children & people	young	parents of children wit	Key research question/aim: To explore the views of parents of children with autism in relation to the Stepping Stones parenting strategies.	
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Not sure		Comments: Information on the process of the focus group not reported, limited detail on analysis were reported so it is not clear how themes were derived from the data.	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	
Section 4: validity				
4.1 Is the role of the researcher clearly described?	Not describe	ed	Comments: Not applicable	
4.2 Is the context clearly described?	Clear		Comments: Consideration of context bias not reported	
4.3 Were the methods reliable?	Reliable		Comments: Data collected trhough questionnaires and focus groups	
Section 5: analysis				
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported		Comments: Not enough detail on how analysis was conducted to rate as 'rigorous'.	
5.2 Are the data 'rich'?	Not sure/not reported		Comments: Findings are clear, however lacking in depth. It is difficult to classify	

5.3 Is the analysis reliable?	Not sure/not reported	the data as 'rich' due to lack of information regarding methodology Comments: All data were double coded, but as the method of analysis is not clearly described, cannot be considered 'reliabile'.
5.4 Are the findings convincing?	Not sure	Comments: : Findings are clear, however it is difficult to classify the data as 'convincing' due to lack of information regarding methodology
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

# 1.1.110 WHITTINGHAM2009

Study ID		WHITTINGHAM2009		
Bibliographic reference: Whittingham K, Sofronoff K, Sheffield J, Sanders MR. Behavioural family intervention with parents of children with ASD: what do they find useful in the parenting programme stepping stones triple p? Research in Autism Spectrum Disorders. 2009;3:702-713.				
Guideline topic: Autism in children & young peopleKey research question/aim: To expla parents of children with autism on w useful strategies in the Stepping Stom Parenting programme		h autism on what are the most		
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Not sure		Comments: No information about data analysis were reported	

Section 3: data collection		
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported
4.3 Were the methods reliable?	Not sure	Comments: Data collected through questionnaires only
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported	Comments: No information on analysis reported
5.2 Are the data 'rich'?	Not sure	Comments: Depth and diversity of responses are not demonstrated. Findings are clear, however it is difficult to classify the data as 'rich' due to lack of information on analytic method
5.3 Is the analysis reliable?	Not sure/not reported	Comments: No information on analysis reported
5.4 Are the findings convincing?	Not sure	Comments: Extracts from original data are not included. Findings are clear, however it is difficult to classify the data as 'convincing' due to lack of information on analytic method
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics	·	
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Some ethical considerations were made

#### 1.1.111 WILLIAMS2003

Study ID	WILLIAMS2003
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Bibliographic reference: Williams KR, Wishart JG. The Son-Ris experiences. Journal of Intellectual Dis			nvestigation into family
Guideline topic: Autism in children & young people		Key research question/aim: To explore the experiences of families of children with autism who have used the Son-Rise Program.	
Checklist completed by: Lucy Burt			<u>v</u>
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable
Section 2: study design			
2.1 How defensible/rigorous is the research design/methodology?	Not sure		Comments: Limited detail on the method of analysis reported, so unclear method used
Section 3: data collection			
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable
Section 4: validity			
4.1 Is the role of the researcher clearly described?	Not described Comments: Not applicable		Comments: Not applicable
4.2 Is the context clearly described?	Unclear		Comments: Few characteristics of participants are reported; consideration of context bias not reported
4.3 Were the methods reliable?	Not sure		Comments: Data collected through questionnaire only
Section 5: analysis			
5.1 Is the data analysis sufficiently rigorous?	Not sure/not reported		Comments: Limited details of data analysis are reported, so unclear how themes were derived from the data
5.2 Are the data 'rich'?	Not sure/not reported		Comments: Findings are clear, however it is difficult to classify the data as 'rich' due to lack of information on method of analysis
5.3 Is the analysis reliable?	Not sure/not reported		Comments: Data were double coded, however limited details reported on method of data analysis make it difficult to rate as 'reliable'.

5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

## 1.1.112 WITTEMEYER2011

Study ID		WITTEMEYER2011			
Bibliographic reference: Wittemeyer K, Charman T, Cusak J, Guldberg K, Hastings R, Howlin P, et al. Educational provision and outcomes for people on the autism spectrum: Full technical report. London: Autism Education Trust; 2011.					
Guideline topic: Autism in children & people	young		Key research question/aim: Experience of unmet needs and education/school		
Checklist completed by: Lucy Burt					
Section 1: theoretical approach					
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable		
Is the study clear in what it seeks to do?	Clear Comments: Not applicable				
Section 2: study design	Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable		
Section 3: data collection					
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable		
Section 4: validity					
4.1 Is the role of the researcher clearly described?	Clear		Comments: Not applicable		
4.2 Is the context clearly described?	Clear Comments: Not applicable				
4.3 Were the methods reliable?	Reliable		Comments: Data collected through online surveys and focus groups		

Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: Transcripts were double-coded
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

### 1.1.113 WOODGATE2008

Study ID		WOODGATE2008		
Bibliographic reference: Woodgate RL, Ateah C, Secco L. Living in a world of our own: the experience of parents who have a child with autism. Qualitative Health Research. 2008;18:1075-1083.				
Guideline topic: Autism in children & young people		Key research question/	Key research question/aim: Experience of support	
Checklist completed by: Lucy Burt				
Section 1: theoretical approach				
Is a qualitative approach appropriate?	Appropriate		Comments: Not applicable	
Is the study clear in what it seeks to do?	Clear		Comments: Not applicable	
Section 2: study design				
2.1 How defensible/rigorous is the research design/methodology?	Defensible		Comments: Not applicable	
Section 3: data collection				
3.1 How well was the data collection carried out?	Appropriate		Comments: Not applicable	

Section 4: validity		
4.1 Is the role of the researcher clearly described?	Clear	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported
4.3 Were the methods reliable?	Not sure	Comments: Data collected through semi-structured interview only
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: Double-coding not reported, but transcripts were member-checked
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Clear	Comments: Not applicable

# 1.1.114 WRIGHT2011

Study ID		WRIGHT2011	
Bibliographic reference: Wright C, Diener ML, Dunn L, Wright SD, Linnell L, Newbold K, et al. SketchUp <sup>™</sup> : A technology tool to facilitate intergenerational family relationships for children with autism spectrum disorders (ASD). Family and Consumer Sciences Research Journal. 2011;40:135-149.			
Guideline topic: Autism in children & young people		Key research question/aim: To examine the effects of an intervention programme on families of children with autism, from parents and grandparents perspectives.	
Checklist completed by:			
Section 1: theoretical approach			
Is a qualitative approach appropriate?	Appropriate Comments		Comments: Not applicable

		T
Is the study clear in what it seeks to do?	Clear	Comments: Not applicable
Section 2: study design		
2.1 How defensible/rigorous is the research design/methodology?	Defensible	Comments: Not applicable
Section 3: data collection		
3.1 How well was the data collection carried out?	Appropriate	Comments: Not applicable
Section 4: validity		
4.1 Is the role of the researcher clearly described?	Not described	Comments: Not applicable
4.2 Is the context clearly described?	Clear	Comments: Consideration of context bias not reported
4.3 Were the methods reliable?	Not sure	Comments: Data collected through focus groups only
Section 5: analysis		
5.1 Is the data analysis sufficiently rigorous?	Rigorous	Comments: Not applicable
5.2 Are the data 'rich'?	Rich	Comments: Not applicable
5.3 Is the analysis reliable?	Reliable	Comments: Not applicable
5.4 Are the findings convincing?	Convincing	Comments: Not applicable
5.5 Are the findings relevant to the aims of the study?	Relevant	Comments: Not applicable
5.6 Are the conclusions adequate?	Adequate	Comments: Not applicable
Section 6: ethics		
6.1 How clear and coherent is the reporting of ethical considerations?	Not reported	Comments: Not applicable

# 1.2 PSYCHOSOCIAL INTERVENTIONS AIMED AT CORE FEATURES OF AUTISM

#### 1.2.1 ALDRED2001

Study	ID	ALDRED2001	
Bibliographic reference: Aldred C, Pollard C, Phillips R, Adams C. Multidisciplinary social communication intervention for children with autism and pervasive developmental disorder: the Child's Talk project. Educational and Child Psychology. 2001;18:76-87. Aldred C, Green J, Adams C. A new social communication intervention for children with autism: pilot			
rando	mised controlled treatment study suggesting effectivene iatry. 2004;45:1420-1430.	-	
	eline topic: Management and support of children and g people on the autism spectrum	Review question number: 4.1	
Check	list completed by: Odette Megnin-Viggars		
A. Sel	ection bias (systematic differences between the comparis	son groups)	
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)	
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Yes	
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes	
Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?			
Unclear/unknown risk of bias			
Likely direction of effect: Unknown direction			
B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)			
B1	The comparison groups received the same care apart from the intervention(s) studied	Yes	

B2	Participants receiving care were kept 'blind' to treatment allocation	No
B3	Individuals administering care were kept 'blind' to	
00	treatment allocation	No
	l on your answers to the above, in your opinion was perf	ormance bias present? If so, what is the likely
direct	ion of its effect?	
	High risk of bias	
Likely	v direction of effect: Effect size bigger	
C. At	trition bias (systematic differences between the comparis	on groups with respect to loss of participants)
C1	All groups were followed up for an equal length of	
	time (or analysis was adjusted to allow for	Yes
	differences in length of follow-up)	
C2	a. How many participants did not complete treatment	in each group?
C2		in each group:
	Experimental group N: 0; Control group N: 0	
	b. The groups were comparable for treatment	
	completion (that is, there were no important or	Yes
	systematic differences between groups in terms of	165
	those who did not complete treatment)	
C3		
	Experimental group N: 0; Control group N: 0	
	b. The groups were comparable with respect to the	
	availability of outcome data (that is, there were no	
	important or systematic differences between groups	Yes
	in terms of those for whom outcome data were not	100
	available).	

Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?

Low risk of bias

Likely direction of effect: Not applicable

D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Different for different outcome measures: Unclear for behavioural observation
		outcome measures as they lacked independent reliability or validity data
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Different for different outcome measures: No for CDI as parent-completed Unclear for VABS as based on interviewwith non-blind parent rather than direct behaviour observation
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Different for different outcome measures: No for CDI as parent-completed Unclear for VABS as based on interviewwith non-blind parent rather than direct behaviour observation
	d on your answers to the above, in your opinion was det	ection bias present? If so, what is the likely
direction of its effect? Different for different outcome measures: Low risk for ADOS and behavioural observations Unclear/unknown risk for VABS High risk for CDI Likely direction of effect: Effect size bigger, where high risk		

#### 1.2.2 BASS2009

Study	TD	BASS2009
2		
Biblio	graphic reference:	
Bass I	MM, Duchowny CA, Llabre MM. The effect of therapeut	ic horseback riding on social functioning in
childr	en with autism. Journal of Autism and Developmental I	Disorders. 2009;39:1261-1267.
Guide	eline topic: Management and support of children and	Review question number: 4.1
young	g people on the autism spectrum	
Check	klist completed by: Odette Megnin-Viggars	
A. Sel	ection bias (systematic differences between the compari	son groups)
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which	Unclear (randomization method is unclear)
	would have balanced any confounding factors	Unclear (randomisation method is unclear)
	equally across groups)	
A2	There was adequate concealment of allocation (such	Lingloon (incufficient detail non-onted with
	that investigators, clinicians and participants cannot	Unclear (insufficient detail reported with
	influence enrolment or treatment allocation)	regards to allocation concealment)
A3	The groups were comparable at baseline, including	
	all major confounding and prognostic factors	Unclear (insufficient detail reported)
Based	on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely
direct	ion of its effect?	
	Unclear/unknown risk of bias	
Likely	y direction of effect: Unknown direction	
5		
	formance bias (systematic differences between groups in	n the care provided, apart
from	the intervention under investigation)	
B1	The comparison groups received the same care apart	
DI	from the intervention(s) studied	
	non the intervention(s) studied	Unclear (insufficient detail reported)
B2	Participants receiving care were kept 'blind' to	
	treatment allocation	No
B3	Individuals administering care were kept 'blind' to	
	treatment allocation	No
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely		
	ion of its effect?	r r

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	a. How many participants did not complete treatment i Experimental group N: 0; Control group N: 0	in each group?	
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes	
C3	For how many participants in each group were no outc Experimental group N: 0; Control group N: 0	come data available?	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes	
Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?			
Low risk of bias			
Likely direction of effect: Not applicable			
D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)			
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	

D3	A valid and reliable method was used to determine	Yes
	the outcome	
D4	Investigators were kept 'blind' to participants'	No (outcome measures parent-rated and
	exposure to the intervention	parents non-blind)
D5	Investigators were kept 'blind' to other important	No (outcome measures parent-rated and
	confounding and prognostic factors	parents non-blind)
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely		
direction of its effect?		
High risk of bias		
Likely direction of effect: Effect size bigger		

# 1.2.3 BEAUMONT2008

Study	r ID	BEAUMONT2008	
Biblic	ographic reference:		
	mont R, Sofronoff K. A multi-component social skills into	ervention for children with Asperger	
	come: the Junior Detective Training Program. Journal of		
753.			
	eline topic: Management and support of children and	Review question number: 4.1	
	g people on the autism spectrum		
	klist completed by: Lucy Burt		
	lection bias (systematic differences between the compari	son groups)	
A1	An appropriate method of randomisation was used		
AI	to allocate participants to treatment groups (which		
	would have balanced any confounding factors	Unclear (randomisation method is unclear)	
	equally across groups)		
A2	There was adequate concealment of allocation (such		
	that investigators, clinicians and participants cannot	Unclear (insufficient detail reported with	
	influence enrolment or treatment allocation)	regards to allocation concealment)	
A3	The groups were comparable at baseline, including		
	all major confounding and prognostic factors	Yes	
Based	l on your answers to the above, in your opinion was sele	ection bias present? If so, what is the likely	
direct	tion of its effect?		
	Unclear/unknown risk of bias		
Likel	y direction of effect: Unknown direction		
B. Per	rformance bias (systematic differences between groups in	n the care provided, apart	
	the intervention under investigation)		
	· · · · · · · · · · · · · · · · · · ·		
		1	
B1	The comparison groups received the same care apart		
	from the intervention(s) studied	Unclear (insufficient detail reported)	
B2	Participants receiving care were kept 'blind' to		
	treatment allocation	No	
B3	Individuals administering care were kept 'blind' to		
-	treatment allocation	No	
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely			
	tion of its effect?	1, , , , , , , , , , , , , , , , , , ,	

5				
C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)				
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes		
C2	a. How many participants did not complete treatment Experimental group N: 0; Control group N: 0	in each group?		
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes		
C3	For how many participants in each group were no outo Experimental group N: 0; Control group N: 0	come data available?		
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes		
Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?				
	Low risk of bias			
Likely	Likely direction of effect: Not applicable			
D. De	D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)			
D1	The study had an appropriate length of follow-up	Yes		
D2	The study used a precise definition of outcome	Yes		
D3	A valid and reliable method was used to determine the outcome	Yes for SSQ; Unclear for Assessment of Perception of Emotion from Facial Expression and Posture Cues; No for James and the Maths Test, Dylan is Being Teased and ERSSQ		

D4	Investigators were kept 'blind' to participants'	Blinding was different for different outcome
	exposure to the intervention	measures:
		SSQ - Parent-rated so outcome assessors
		were not blind to participants exposure to
		intervention or confounding factors.
		ERSSQ - Parent-rated and parents
		participated in the intervention
		Assessment of Perception of Emotion from
		Facial Expression - Rater not reported
		Assessment of Perception of Emotion from
		Posture Cues - Rater not reported
		James and the Maths Test - Blind double-
		coding was only performed for 33% of
		responses and scoring was performed by the
		chief investigator
		Dylan is Being Teased - Blind double-coding
		was only performed for 33% of responses
		and scoring was performed by the chief
		investigator
D5	Investigators were kept 'blind' to other important	Blinding was different for different outcome
	confounding and prognostic factors	measures:
		SSQ - Parent-rated so outcome assessors
		were not blind to participants exposure to
		intervention or confounding factors.
		ERSSQ - Parent-rated and parents
		participated in the intervention
		Assessment of Perception of Emotion from
		Facial Expression - Rater not reported
		Assessment of Perception of Emotion from
		Posture Cues - Rater not reported
		James and the Maths Test - Blind double-
		coding was only performed for 33% of
		responses and scoring was performed by the
		chief investigator
		Dylan is Being Teased - Blind double-coding
		was only performed for 33% of responses
		and scoring was performed by the chief
		investigator

Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely direction of its effect?

The risk of detection bias is different for different outcomes:

SSQ - High risk

ERSSQ - High risk

Assessment of Perception of Emotion from Facial Expression - Unclear risk

Assessment of Perception of Emotion from Posture Cues - Unclear risk

James and the Maths Test - High risk

Dylan is Being Teased - High risk

Likely direction of effect: Effect size bigger, where high risk

### 1.2.4 BEGEER2011

Study	' ID	BEGEER2011
Biblic	graphic reference:	
	er S, Gevers C, Clifford P, Verhoeve M, Kat K, Hoddenba	ch E, et al. Theory of mind training in
0	en with autism: a randomized controlled trial. Journal o	
	11:997-1006.	-
	eline topic: Management and support of children and	Review question number: 4.1
	g people on the autism spectrum	
Checl	klist completed by: Lucy Burt	
A. Sel	ection bias (systematic differences between the comparis	son groups)
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which	Unclear (randomisation method is unclear)
	would have balanced any confounding factors	
A2	equally across groups) There was adequate concealment of allocation (such	Unclear (an independent researcher drew
112	that investigators, clinicians and participants cannot	up the randomisation schedule, but no
	influence enrolment or treatment allocation)	further details of method of concealment of
	······,	allocation are reported)
A3	The groups were comparable at baseline, including	
	all major confounding and prognostic factors	Yes
	l on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely
airect	ion of its effect?	
	Unclear/unknown risk of bias	
	Chercar / unknown risk of blas	
Likely	y direction of effect: Unknown direction	
B Per	formance bias (systematic differences between groups in	a the care provided apart
	the intervention under investigation)	The care provided, apart
B1	The comparison groups received the same care apart	
	from the intervention(s) studied	Unclose (incufficient data: 1
		Unclear (insufficient detail reported)
B2	Participants receiving care were kept 'blind' to	
02	treatment allocation	No
B3	Individuals administering care were kept 'blind' to	
	treatment allocation	No
	•	I

Basod	Passed on your analyzers to the shows in your aninion was not formance his present? If as what is the likely		
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?			
uncer			
	High risk of bias		
	0		
Likely	v direction of effect: Effect size bigger		
C At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)	
0.110	anion bus (systematic anterences between the comparie	on groups whitespeer to toos of participants)	
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)		
C2	a. How many participants did not complete treatment	in each group?	
	Experimental group N: 1; Control group N: 3		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	Yes	
	systematic differences between groups in terms of	105	
	those who did not complete treatment)		
C3			
	Experimental group N: 1; Control group N: 3		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no	N	
	important or systematic differences between groups in terms of those for whom outcome data were not	Yes	
	available).		
Based	on your answers to the above, in your opinion was attri	ition hias present? If so what is the likely	
	ion of its effect?	alon blas present: it so, what is the likely	
	Low risk of bias		
Likely	v direction of effect: Not applicable		
5.5			
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)	
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a presice definition of subserve	Vac	
D2	The study used a precise definition of outcome	Yes	
D3	A valid and reliable method was used to determine	Yes	
	the outcome		

exposure to the interventionmeasures:ToM - Rater not reported outcome assessors report LEAS-C - Rater not report blinding of outcome asses Index of Empathy for Ch Adolescents - Self-rated intervention or confound	rted orted, but no
outcome assessors repor LEAS-C - Rater not repo blinding of outcome asse Index of Empathy for Ch Adolescents - Self-rated intervention or confound	rted orted, but no
LEAS-C - Rater not repo blinding of outcome asse Index of Empathy for Ch Adolescents - Self-rated intervention or confound	orted, but no
blinding of outcome asse Index of Empathy for Ch Adolescents - Self-rated intervention or confound	
Index of Empathy for Ch Adolescents - Self-rated intervention or confound	essors reported
Adolescents - Self-rated intervention or confound	
intervention or confound	hildren and
	so not blind to
	ding factors
CSBQ: Parent rated and	parents were not
blind to intervention or o	confounding factors.
D5 Investigators were kept 'blind' to other important Blinding was different for	or different outcome
confounding and prognostic factors measures:	
ToM - Rater not reported	d, but no blinding of
outcome assessors repor	rted
LEAS-C - Rater not repo	orted, but no
blinding of outcome asse	essors reported
Index of Empathy for Ch	hildren and
Adolescents - Self-rated	so not blind to
intervention or confound	ding factors
CSBQ: Parent rated and	parents were not
blind to intervention or o	
Based on your answers to the above, in your opinion was detection bias present? If so, v	what is the likely
direction of its effect?	
Risk of detection bias different for different measures:	
ToM - Unknown/unclear risk	
LEAS-C - Unknown/unclear risk	
Index of Empathy for Children and Adolescents - High risk	
CSBQ - High risk	
5	
Likely direction of effect: Effect size bigger, where high risk	
Likely direction of effect: Effect size bigger, where high risk	

# 1.2.5 CARTER2011

Study	ID	CARTER2011		
	graphic reference:	(a log D. A. good and a straight a traight of		
	r AS, Messinger DS, Stone WL, Celimli S, Nahmias AS, M			
	n's 'more than words' in toddlers with early autism symp iatry. 2011;52:741-752.	pionis. Journal of Child Esychology and		
	-	Povious question number 4.1		
	Guideline topic: Management and support of children and young people on the autism spectrumReview question number: 4.1			
•	list completed by: Odette Megnin-Viggars			
CILCF	and completed by. Odette Megnine viggars			
A. Sel	ection bias (systematic differences between the comparis	son groups)		
A1	An appropriate method of randomisation was used			
	to allocate participants to treatment groups (which	Yes (computer random number generator)		
	would have balanced any confounding factors	res (computer random number generator)		
	equally across groups)			
A2	There was adequate concealment of allocation (such	Unclear (insufficient detail reported with		
	that investigators, clinicians and participants cannot	regards to allocation concealment)		
	influence enrolment or treatment allocation)			
A3	The groups were comparable at baseline, including			
	all major confounding and prognostic factors	Yes		
Bacod	on your answers to the above, in your opinion was sele	ction bias procent? If so, what is the likely		
		choir blas present? If so, what is the likely		
direction of its effect?				
Unclear/unknown risk of bias				
	Shelear anknown lisk of blas			
Likely	direction of effect: Unknown direction			
J	Likely direction of cheet. Onknown direction			
	formance bias (systematic differences between groups in	h the care provided, apart		
from t	he intervention under investigation)			
B1	The comparison groups received the same care apart			
	from the intervention(s) studied	Unclear (insufficient detail reported)		
B2	Participants receiving care were kept 'blind' to			
D2	treatment allocation	No		
B3	Individuals administering care were kept 'blind' to			
	treatment allocation	No		
Based	on your answers to the above, in your opinion was perf	formance bias present? If so, what is the likely		
	direction of its effect?			

C. At	C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)		
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	C2 a. How many participants did not complete treatment in each group? Experimental group N: 7; Control group N: 5		
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes	
C3	For how many participants in each group were no outo Experimental group N: 3; Control group N: 4	come data available?	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes	
	Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?		
	Low risk of bias		
Likely direction of effect: Not applicable			
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)	
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	
D3	A valid and reliable method was used to determine the outcome	Yes (with the exception of the Parent-Child Free Play Procedure [PCFP] for which reliability and validity was unclear)	

D4	Investigators were kept 'blind' to participants'	Different for different outcome measures:
	exposure to the intervention	Unclear/unknown for PCFP as only a
		subsection (20%) of observations were
		coded blind, for MSEL and ADOS as
		identity and blinding of outcome assessor
		not reported and for VABS as based on
		parental interview rather than direct
		behavioural observation
		No for PIA-CV as parent-completed and
		parents non-blind
D5	Investigators were kept 'blind' to other important	Different for different outcome measures:
	confounding and prognostic factors	Unclear/unknown for PCFP as only a
		subsection (20%) of observations were
		coded blind, for MSEL and ADOS as
		identity and blinding of outcome assessor
		not reported and for VABS as based on
		parental interview rather than direct
		behavioural observation
		No for PIA-CV as parent-completed and
		parents non-blind
Based	on your answers to the above, in your opinion was det	ection bias present? If so, what is the likely
direct	ion of its effect?	
	Different for different outcome measures:	
Low 1	risk for ESCS	
Uncle	ar/unknown risk for PCFP, MSEL, VABS and ADOS	
High	risk for PIA-CV	
	v direction of effect: Effect size bigger, where high risk	

# 1.2.6 DEROSIER2011

Study	·ID	DEROSIER2011
DeRo group	graphic reference: sier ME, Swick DC, Ornstein Davis N, Sturtz McMillen J o intervention for improving social behaviors in children ders. Journal of Autism and Developmental Disorders. 2	with high functioning autism spectrum
	eline topic: Management and support of children and g people on the autism spectrum	Review question number: 4.1
Check	dist completed by: Odette Megnin-Viggars	
A. Sel	ection bias (systematic differences between the compari-	son groups)
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	No (there was a statistically significant group difference at baseline with the experimental group showing higher scores on the Social Responsiveness Scale [SRS]- Social Communication domain relative to the control group [means of 69.6 and 66.0 respectively])
	on your answers to the above, in your opinion was sele ion of its effect?	ction bias present? If so, what is the likely
	High risk of bias	
Likely direction of effect: Effect size bigger		
	formance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)
B2	Participants receiving care were kept 'blind' to treatment allocation	No

r			
B3	Individuals administering care were kept 'blind' to		
	treatment allocation	No	
Based	on your answers to the above, in your opinion was perf	ormance bias present? If so, what is the likely	
	ion of its effect?	······································	
uncer			
	High risk of bias		
Likely	v direction of effect: Effect size bigger		
C. At	trition bias (systematic differences between the comparis	on groups with respect to loss of participants)	
		[	
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)		
C2	a. How many participants did not complete treatment	in each group?	
	Experimental group N: 3; Control group N: 2		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or		
	systematic differences between groups in terms of	Yes	
	those who did not complete treatment)		
C3	For how many participants in each group were no outc	ama data availabla?	
CS			
	Experimental group N: 3; Control group N: 0		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
Based	on your answers to the above, in your opinion was attri	tion bias present? If so, what is the likely	
	ion of its effect?	and the present in so, which is the interfy	
uncer			
	Low risk of bias		
Likely direction of effect: Not applicable			

D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)		
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Yes
D4	Investigators were kept 'blind' to participants' exposure to the intervention	No (outcome measures were non-blind self- or parent-report)
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	No (outcome measures were non-blind self- or parent-report)
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely direction of its effect?		
High risk of bias		
Likely direction of effect: Effect size bigger		

### 1.2.7 DREW2002

Study	TD	DREW2002
Drew	graphic reference: A, Baird G, Baron CS, Cox A, Slonims V, Wheelwright S t training intervention for pre-school children with autis	-
-	nges. European Child and Adolescent Psychiatry. 2002;	
Guide	eline topic: Management and support of children and	Review question number: 4.1
,	g people on the autism spectrum	
Check	klist completed by: Odette Megnin-Viggars	
A. Sel	ection bias (systematic differences between the compari	son groups)
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (random number table)
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	No (the experimental group had a higher NVIQ than the control group, 88.1 compared to 66, p<0.001)
	on your answers to the above, in your opinion was sele ion of its effect?	ection bias present? If so, what is the likely
	High risk of bias	
Likely	v direction of effect: Effect size bigger	
B. Per	formance bias (systematic differences between groups in	n the care provided, apart
	the intervention under investigation)	
B1	The comparison groups received the same care apart from the intervention(s) studied	No (three participants in the control group [25%] commenced an EIBI program during the intervention period and there was a trend for a statistically significant difference in the number of hours of other intervention with the control group receiving 8.4 hours and the experimental group receiving 0.3 hours, p=0.07)
B2	Participants receiving care were kept 'blind' to treatment allocation	No

DO		
B3	Individuals administering care were kept 'blind' to	
	treatment allocation	No
Based	l on your answers to the above, in your opinion was perf	formance bias present? If so, what is the likely
direct	ion of its effect?	
	High risk of bias	
Likob	v direction of effect: Effect size bigger	
LIKely	direction of effect. Effect size bigger	
C At	trition bias (systematic differences between the comparis	on groups with respect to loss of participants)
C. At	intion bias (systematic unterences between the company	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of	
CI	time (or analysis was adjusted to allow for	
		Yes
	differences in length of follow-up)	
C2	a. How many participants did not complete treatment	in each group?
C2	Experimental group N: 0; Control group N: 0	in each group:
	b. The groups were comparable for treatment	
	completion (that is, there were no important or	Yes
	systematic differences between groups in terms of	
	those who did not complete treatment)	
C3	For how many participants in each group were no outo	come data available?
	Experimental group N: 0; Control group N: 0	
	b. The groups were comparable with respect to the	
	availability of outcome data (that is, there were no	
		Ver
	important or systematic differences between groups	Yes
	in terms of those for whom outcome data were not	
	available).	
Based	l on your answers to the above, in your opinion was attri	ition bias present? If so, what is the likely
direct	ion of its effect?	
	Low risk of bias	
Likel	direction of officet. Not applicable	
LIKery	v direction of effect: Not applicable	
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)
D1	The study had an appropriate length of follow-up	Yes
	The study had an appropriate length of follow up	
D2	The study used a precise definition of outcome	Yes
102	The study used a precise definition of outcome	
D3	A valid and reliable method was used to determine	Yes
05		100
	the outcome	

D4	Investigators were kept 'blind' to participants'	No
	exposure to the intervention	
D5	Investigators were kept 'blind' to other important	No
	confounding and prognostic factors	
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely		
direction of its effect?		
High risk of bias		
Likely	y direction of effect: Effect size bigger	

#### 1.2.8 FRANKEL2010

Study	7 ID	FRANKEL2010	
Diblio	amanhia mafaman an		
	ographic reference:	ocon F. A randomized controlled study of	
	Frankel F, Myatt R, Sugar C, Whitham C, Gorospe CM, Laugeson E. A randomized controlled study of parent-assisted children's friendship training with children having autism spectrum disorders. Journal of		
-	m and Developmental Disorders. 2010;40:827-842.	autisht spectrum disorders. Journal of	
	eline topic: Management and support of children and	Review question number: 4.1	
	g people on the autism spectrum	Review question number. 4.1	
,	klist completed by: Odette Megnin-Viggars		
Checi	anst completed by: Odette Megnini-Viggars		
A. Sel	lection bias (systematic differences between the compari-	son groups)	
A1	An appropriate method of randomisation was used		
	to allocate participants to treatment groups (which	Yes (computer random number generator)	
	would have balanced any confounding factors	res (computer random number generator)	
	equally across groups)		
A2	There was adequate concealment of allocation (such	Unclear (insufficient detail reported with	
	that investigators, clinicians and participants cannot	regards to allocation concealment)	
	influence enrolment or treatment allocation)	regards to anocation conceannent)	
A3	The groups were comparable at baseline, including		
	all major confounding and prognostic factors	Yes	
Based	l on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely	
direct	tion of its effect?		
	Unclear/unknown risk of bias		
Likol	y direction of effect: Unknown direction		
Likely	arection of effect: Unknown direction		
B Dot	formance bias (systematic differences between groups in	a the care provided apart	
	· · ·	in the care provided, apart	
mom	the intervention under investigation)		
B1	The comparison groups received the same care apart		
	from the intervention(s) studied	Unclear (insufficient detail reported)	
		encieur (insumerent deum reported)	
DO			
B2	Participants receiving care were kept 'blind' to		
	treatment allocation	No	
<b>B</b> 0	Individuale administering care ware heart (hlip 1/ )		
B3	Individuals administering care were kept 'blind' to	No	
	treatment allocation	No	
Bass	on your analysis to the shows in your printer success	formance hise presents If as what is the liter	
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?			
uirect	ion of its effect?		

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)		
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	a. How many participants did not complete treatment Experimental group N: 14; Control group N: 5	in each group?
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	No
C3	For how many participants in each group were no outo Experimental group N: 5; Control group N: 3	come data available?
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes
	l on your answers to the above, in your opinion was attr ion of its effect?	ition bias present? If so, what is the likely
	High risk of bias	
Likely	y direction of effect: Effect size bigger	
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Different for different outcome measures: Unclear for Loneliness Scale as inconsistent results with this scale in ASD populations No for PHS and PEI as scales not validated in an ASD population

D4	Investigators were kept 'blind' to participants'	No (outcome measures based on non-blind		
	exposure to the intervention	self-, parent- and teacher-report)		
D5	Investigators were kept 'blind' to other important	No (outcome measures based on non-blind		
20	confounding and prognostic factors	self-, parent- and teacher-report)		
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely direction of its effect?				
High risk of bias				
Likely direction of effect: Effect size bigger				

#### 1.2.9 GOLAN2010

Study	TD	GOLAN2010			
	graphic reference:				
Golan O, Ashwin E, Granader Y, McClintock S, Day K, Leggett V, et al. Enhancing emotion recognition in					
children with autism spectrum conditions: an intervention using animated vehicles with real emotional					
faces. Journal of Autism and Developmental Disorders. 2010;40:269-279.					
Guideline topic: Management and support of children and Review question number: 4.1					
young people on the autism spectrum					
Check	klist completed by: Lucy Burt				
A. Sel	ection bias (systematic differences between the compari-	son groups)			
A1	An appropriate method of randomisation was used				
	to allocate participants to treatment groups (which	I lead our (non domination weath od is up aloon)			
	would have balanced any confounding factors	Unclear (randomisation method is unclear)			
	equally across groups)				
A2	There was adequate concealment of allocation (such				
	that investigators, clinicians and participants cannot	Unclear (insufficient detail reported with			
	influence enrolment or treatment allocation)	regards to allocation concealment)			
A3	The groups were comparable at baseline, including				
	all major confounding and prognostic factors	Yes (groups were matched for sex, age and			
	, 010	verbal ability)			
Based	on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely			
direct	ion of its effect?				
	Unclear/unknown risk of bias				
Likely	y direction of effect: Unknown direction				
5					
<b>D D</b>					
	formance bias (systematic differences between groups in	n the care provided, apart			
from	the intervention under investigation)				
B1	The comparison groups received the same care apart				
	from the intervention(s) studied	Lingloon (increfficient datail non-orted)			
		Unclear (insufficient detail reported)			
B2	Participants receiving care were kept 'blind' to				
	treatment allocation	No			
B3	Individuals administering care were kept 'blind' to				
	treatment allocation	No			
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely					
direction of its effect?					

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)				
C1	All groups were followed up for an equal length of			
	time (or analysis was adjusted to allow for	Yes		
	differences in length of follow-up)			
C2	a. How many participants did not complete treatment i	n each group?		
	Experimental group N: 0; Control group N: 1	0 1		
	b. The groups were comparable for treatment			
	completion (that is, there were no important or			
	systematic differences between groups in terms of	Yes		
	those who did not complete treatment)			
C3	For how many participants in each group were no outcome data available?			
	Experimental group N: 0; Control group N: 1			
	b. The groups were comparable with respect to the			
	availability of outcome data (that is, there were no			
	important or systematic differences between groups	Yes		
	in terms of those for whom outcome data were not			
	available).			
Based	on your answers to the above, in your opinion was attri	tion bias present? If so, what is the likely		
direct	ion of its effect?			
	Low risk of bias			
Likely	v direction of effect: Not applicable			
DD	1 . /1 1	1 • * * • 1\		
	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)		
D1	The study had an appropriate length of follow-up	Yes		
D2	The study used a precise definition of outcome	Yes		
D3	A valid and reliable method was used to determine	No		
	the outcome	EmoVoc - No validity or reliability is		
		reported for this measure		
		SEM - The researchers investigated the		
		reliability of this measure, but there have		
		been no external reports of validity or		
		reliability		
		renavility		

# Autism: the management and support of children and young people on the autism spectrum

D4	Investigators were kept 'blind' to participants' exposure to the intervention	No (non-blind investigator-rated)	
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	No (non-blind investigator-rated)	
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely direction of its effect? High risk of bias			
Likel	Likely direction of effect: Effect size bigger		

#### 1.2.10GREEN2010

Study	ID	GREEN2010	
Bibliographic reference: Green J, Charman T, McConachie H, Aldred C, Slonims V, Howlin P, et al. Parent-mediated communication-focused treatment in children with autism (PACT): a randomised controlled trial. Lancet. 2010;375:2152-2160.			
young	eline topic: Management and support of children and g people on the autism spectrum slist completed by: Odette Megnin-Viggars	Review question number: 4.1	
A. Sel	ection bias (systematic differences between the comparis	son groups)	
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (minimisation)	
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Yes	
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	No (socioeconomic status and proportion of parents with qualifications gained after age 16 years were higher in the experimental than in the control group with cohen's d effect sizes of 0.14 and 0.48 respectively)	
	on your answers to the above, in your opinion was sele ion of its effect?		
	Unclear/unknown risk of bias		
Likely	v direction of effect: Unknown direction		
B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)			
B1	The comparison groups received the same care apart from the intervention(s) studied	Yes	
B2	Participants receiving care were kept 'blind' to treatment allocation	No	
B3	Individuals administering care were kept 'blind' to treatment allocation	No	

direction of its effect?         High risk of bias         Likely direction of effect: Effect size bigger         C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)         Yes         a. How many participants did not complete treatment in each group?         Experimental group N: 3; Control group N: 3         b. The groups were comparable for treatment complete treatment in each group?         Experimental group N: 3; Control group N: 3         b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)         C3       For how many participants in each group were no outcome data available?         Experimental group N: 0; Control group N: 0         b. The groups were comparable to the were no important or systematic differences between groups in terms of those who did not complete treatment)         C3       For how many participants in each group were no outcome data available?         Experimental group N: 0; Control group N: 0         b. The groups were comparable to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?         Low risk of bias         Likely direction of ef	Based	Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely		
Likely direction of effect: Effect size bigger         C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)         C1       All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)       Yes         C2       a. How many participants did not complete treatment in each group?         Experimental group N: 3; Control group N: 3       Tesperimental group N: 3; Control group N: 3         b. The groups were comparable for treatment or systematic differences between groups in terms of those who did not complete treatment)       Yes         C3       For how many participants in each group N: 0       Tesperimental group N: 0; Control group N: 0         b. The groups were comparable with respect to the availability of outcome data (that is, there were not important or systematic differences between groups N: 0       Yes         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?       Low risk of bias         Likely direction of effect: Not applicable       Low risk of bias       Tespection bias (bias in how outcomes are ascertained, diagnosed or verified)         D1       The study had an appropriate length of follow-up       Yes				
Likely direction of effect: Effect size bigger         C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)         CI       All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)       Yes         C2       a. How many participants did not complete treatment in each group?       Experimental group N: 3; Control group N: 3         b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)       Yes         C3       For how many participants in each group N: 0       Yes         b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups N: 0       Yes         B. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups N: 0       Yes         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?       Low risk of bias         Likely direction of effect: Not applicable       Else Series				
C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)         C1       All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)       Yes         C2       a. How many participants did not complete treatment in each group?       Experimental group N: 3; Control group N: 3       Yes         C3       b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between group N: 0       Yes         C3       For how many participants in each group N: 0       b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between group N: 0       Yes         C3       For how many participants in each group N: 0       b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not availability.         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?         Low risk of bias         Likely direction of effect: Not applicable         D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)         D1       The study had an appropriate length of follow-up       Yes		High risk of bias		
C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)         C1       All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)       Yes         C2       a. How many participants did not complete treatment in each group?       Experimental group N: 3; Control group N: 3       Yes         C3       b. The groups were comparable for treatment; completion (that is, there were no important or systematic differences between group N: 0       Yes         C3       For how many participants in each group Were no outcome data available?       Experimental group N: 0; Control group N: 0       Yes         C3       For how many participants in each group N: 0       b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between group N: 0       Yes         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?       Low risk of bias         Likely direction of effect: Not applicable       Ves         D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)       Yes		-		
C1       All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)       Yes         C2       a. How many participants did not complete treatment in each group?       Experimental group N: 3; Control group N: 3       Tespretimental group N: 3; Control group N: 3         b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)       Yes         C3       For how many participants in each group were no outcome data available?       Experimental group N: 0; Control group N: 0         b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).       Yes         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?       Low risk of bias         Likely direction of effect: Not applicable       The study had an appropriate length of follow-up       Yes	Likely	v direction of effect: Effect size bigger		
C1       All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)       Yes         C2       a. How many participants did not complete treatment in each group?       Experimental group N: 3; Control group N: 3       Tesperimental group N: 3; Control group N: 3         b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)       Yes         C3       For how many participants in each group were no outcome data available?       Experimental group N: 0; Control group N: 0         b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).       Yes         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?       Low risk of bias         Likely direction of effect: Not applicable       The study had an appropriate length of follow-up       Yes				
C1       All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)       Yes         C2       a. How many participants did not complete treatment in each group?       Experimental group N: 3; Control group N: 3       Tespretimental group N: 3; Control group N: 3         b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)       Yes         C3       For how many participants in each group were no outcome data available?       Experimental group N: 0; Control group N: 0         b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).       Yes         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?       Low risk of bias         Likely direction of effect: Not applicable       The study had an appropriate length of follow-up       Yes	C AH	rition bias (systematic differences between the comparis	congroups with respect to loss of participants)	
time (or analysis was adjusted to allow for differences in length of follow-up)YesC2a. How many participants did not complete treatment in each group? Experimental group N: 3; Control group N: 3	C. Au	fitton blas (systematic unierences between the company	son groups with respect to loss of participants)	
time (or analysis was adjusted to allow for differences in length of follow-up)YesC2a. How many participants did not complete treatment in each group? Experimental group N: 3; Control group N: 3				
differences in length of follow-up)       Its         C2       a. How many participants did not complete treatment in each group?         Experimental group N: 3; Control group N: 3       b. The groups were comparable for treatment or systematic differences between groups in terms of those who did not complete treatment)       Yes         C3       For how many participants in each group N: 0       For how many participants in each group were no outcome data available?         Experimental group N: 0; Control group N: 0       b. The groups were comparable with respect to the availability of outcome data (that is, there were not important or systematic differences between groups in terms of those for whom outcome data were not available).       Yes         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of effect: Not applicable       Low risk of bias         Likely direction of effect: Not applicable       Its in how outcomes are ascertained, diagrosed or verified)         D1       The study had an appropriate length of follow-up       Yes	C1	All groups were followed up for an equal length of		
C2       a. How many participants did not complete treatment in each group?         Experimental group N: 3; Control group N: 3       b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)       Yes         C3       For how many participants in each group were no outcome data available?       Experimental group N: 0; Control group N: 0         b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).       Yes         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?       Low risk of bias         Likely direction of effect: Not applicable       Intersting or verified)         D1       The study had an appropriate length of follow-up       Yes		time (or analysis was adjusted to allow for	Yes	
Experimental group N: 3; Control group N: 3         b. The groups were comparable for treatment         completion (that is, there were no important or         systematic differences between groups in terms of         those who did not complete treatment)         C3         For how many participants in each group were no outcome data available?         Experimental group N: 0; Control group N: 0         b. The groups were comparable with respect to the         availability of outcome data (that is, there were no         important or systematic differences between groups         in terms of those for whom outcome data were not         available).         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely         direction of its effect?         Low risk of bias         Likely direction of effect: Not applicable         D. Detection bias (bias in how outcomes are ascertained, diaguosed or verified)         D1       The study had an appropriate length of follow-up       Yes		differences in length of follow-up)		
Experimental group N: 3; Control group N: 3         b. The groups were comparable for treatment         completion (that is, there were no important or         systematic differences between groups in terms of         those who did not complete treatment)         C3         For how many participants in each group were no outcome data available?         Experimental group N: 0; Control group N: 0         b. The groups were comparable with respect to the         availability of outcome data (that is, there were no         important or systematic differences between groups         in terms of those for whom outcome data were not         available).         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely         direction of its effect?         Low risk of bias         Likely direction of effect: Not applicable         D. Detection bias (bias in how outcomes are ascertained, diaguesed or verified)         D1       The study had an appropriate length of follow-up       Yes	C2	a. How many participants did not complete treatment	in each group?	
b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)       Yes         C3       For how many participants in each group were no outcome data available? Experimental group N: 0; Control group N: 0       Yes         D. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).       Yes         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?       Low risk of bias         Likely direction of effect: Not applicable       D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)         D1       The study had an appropriate length of follow-up       Yes			0 1	
completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)YesC3For how many participants in each group were no outcome data available? Experimental group N: 0; Control group N: 0Experimental group N: 0; Control group N: 0b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).YesBased on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?Low risk of biasLikely direction of effect: Not applicableJule Section bias (bias in how outcomes are ascertained, diagnosed or verified)D1The study had an appropriate length of follow-upYes				
systematic differences between groups in terms of those who did not complete treatment)       Yes         C3       For how many participants in each group were no outcome data available? Experimental group N: 0; Control group N: 0         b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).       Yes         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?       Low risk of bias         Likely direction of effect: Not applicable       Journal of the study had an appropriate length of follow-up       Yes				
those who did not complete treatment)       Image: treatment of the second			Yes	
C3       For how many participants in each group were no outcome data available?         Experimental group N: 0; Control group N: 0         b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).       Yes         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?       Low risk of bias         Likely direction of effect: Not applicable       D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)         D1       The study had an appropriate length of follow-up       Yes				
Experimental group N: 0; Control group N: 0         b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?         Low risk of bias         Likely direction of effect: Not applicable         D. Detection bias (bias in how outcomes are ascertained, diagrosed or verified)         D1       The study had an appropriate length of follow-up       Yes	C3		come data available?	
availability of outcome data (that is, there were no       Yes         important or systematic differences between groups       Yes         in terms of those for whom outcome data were not       available).         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?         Low risk of bias         Likely direction of effect: Not applicable         D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)         D1       The study had an appropriate length of follow-up       Yes		Experimental group N: 0; Control group N: 0		
important or systematic differences between groups in terms of those for whom outcome data were not available).YesBased on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?Iso, what is the likely 		b. The groups were comparable with respect to the		
important or systematic differences between groups in terms of those for whom outcome data were not available).YesBased on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?Iso, what is the likely so, what is the likely so what is the likely time time time time time time time time		availability of outcome data (that is, there were no		
in terms of those for whom outcome data were not available).       in terms of those for whom outcome data were not available).         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?         Low risk of bias         Likely direction of effect: Not applicable         D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)         D1       The study had an appropriate length of follow-up       Yes		•	Yes	
Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?         Low risk of bias         Likely direction of effect: Not applicable         D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)         D1       The study had an appropriate length of follow-up       Yes				
direction of its effect?  Low risk of bias  Likely direction of effect: Not applicable  D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)  D1 The study had an appropriate length of follow-up Yes		available).		
Low risk of bias         Likely direction of effect: Not applicable         D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)         D1       The study had an appropriate length of follow-up       Yes	Based	on your answers to the above, in your opinion was attri	ition bias present? If so, what is the likely	
Likely direction of effect: Not applicable         D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)         D1       The study had an appropriate length of follow-up       Yes	direct	ion of its effect?		
Likely direction of effect: Not applicable         D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)         D1       The study had an appropriate length of follow-up       Yes				
D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)       D1     The study had an appropriate length of follow-up     Yes		Low risk of bias		
D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)       D1     The study had an appropriate length of follow-up     Yes				
D1 The study had an appropriate length of follow-up Yes	Likely	v direction of effect: Not applicable		
D1 The study had an appropriate length of follow-up Yes				
D1 The study had an appropriate length of follow-up Yes				
	D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)			
D2     The study used a precise definition of outcome     Yes	D1	The study had an appropriate length of follow-up	Yes	
D2 The study used a precise definition of outcome Yes	DC			
	02	The study used a precise definition of outcome	ies	

D1		Very it the evention of the helperious 1	
D3	A valid and reliable method was used to determine	Yes with the exception of the behavioural	
	the outcome	observation outcome measures as no	
		independent reliability or validity data for	
		this outcome measure and a standardized	
		coding scheme was not used	
D4	Investigators were kept 'blind' to participants'	Different for different outcome measures:	
	exposure to the intervention	No for CSBS-DP and CDI as parent-reported	
		and parents were non-blind and involved in	
		the intervention	
		Unclear for VABS aas teacher-rated as	
		unclear if teacher blinded	
D5	Investigators were kept 'blind' to other important	Different for different outcome measures:	
	confounding and prognostic factors	No for CSBS-DP and CDI as parent-reported	
		and parents were non-blind and involved in	
		the intervention	
		Unclear for VABS as teacher-rated and	
		unclear if teacher blinded	
Based	l on your answers to the above, in your opinion was det	ection bias present? If so, what is the likely	
direc	tion of its effect?		
	Different for different outcome measures:		
Low	Low risk for ADOS, PLS-3 and behavioural observations		
Uncle	Unclear/unknown risk for VABS		
High	risk for CSBS-DP and CDI		
Likel	y direction of effect: Effect size bigger, where high risk		

# 1.2.11HOPKINS2011

Study	ID	HOPKINS2011		
Riblio	Bibliographic reference:			
	ins IM, Gower MW, Perez TA, Smith DS, Amthor FR, W	imsatt FC et al Avatar assistant: improving		
-	skills in students with an ASD through a computer-base	1 0		
	opmental Disorders. 2011;41:1543-1555.	a mervennon, journar of Matoin and		
	line topic: Management and support of children and	Review question number: 4.1		
	g people on the autism spectrum	neview question number. In		
	dist completed by: Lucy Burt			
Cheer	hist completed by. Eucy built			
A. Sel	ection bias (systematic differences between the comparis	son groups)		
A1	An appropriate method of randomisation was used			
	to allocate participants to treatment groups (which	Unclear (randomisation method is unclear)		
	would have balanced any confounding factors	Checkar (randomisation method is dicied)		
	equally across groups)			
A2	There was adequate concealment of allocation (such	Unclear (insufficient detail reported with		
	that investigators, clinicians and participants cannot	regards to allocation concealment)		
	influence enrolment or treatment allocation)	regards to anocation conceannent)		
A3	The groups were comparable at baseline, including			
	all major confounding and prognostic factors	Yes		
	on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely		
direction of its effect?				
	Unclear/unknown risk of bias			
	Checking anknown lisk of blas			
Likely	direction of effect: Unknown direction			
B Per	formance bias (systematic differences between groups in	the care provided, apart		
	the intervention under investigation)	r die eure provideu, upurt		
B1	The comparison groups received the same care apart			
	from the intervention(s) studied	Unclear (insufficient detail reported)		
B2	Participants receiving care were kept 'blind' to			
02	treatment allocation	Yes (due to inclusion to an attention-placebo		
		condition)		
B3	Individuals administering care were kept 'blind' to			
20	treatment allocation	No		
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely				
direction of its effect?				

Unclear/unknown risk of bias (low risk for response bias and high risk for performance bias)

Likely direction of effect: Effect size bigger for performance bias

C. At	C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of			
	time (or analysis was adjusted to allow for differences in length of follow-up)	Yes		
C2	a. How many participants did not complete treatment	in each group?		
	Experimental group N: Not reported; Control group N	: Not reported		
	b. The groups were comparable for treatment			
	completion (that is, there were no important or	Yes		
	systematic differences between groups in terms of	105		
	those who did not complete treatment)			
C3	For how many participants in each group were no outc	come data available?		
	Experimental group N: 0; Control group N: 0			
	b. The groups were comparable with respect to the			
	availability of outcome data (that is, there were no			
	important or systematic differences between groups	Yes		
	in terms of those for whom outcome data were not			
	available).			
Based	l on your answers to the above, in your opinion was attri	tion bias present? If so, what is the likely		
direct	tion of its effect?			
	Low risk of bias			
Likely	y direction of effect: Not applicable			
-				
D. De	etection bias (bias in how outcomes are ascertained, diag	nosed or verified)		
D1	The study had an appropriate length of follow-up	Yes		
D2	The study used a precise definition of outcome	Yes		

D3	A valid and reliable method was used to determine	Validity and reliability are different for
	the outcome	different measures:
		Ekman emotion recognition photographs: Yes
		Study-specific emotion recognition in
		drawings test: No
		Benton Facial Recognition Test (short form):
		Yes
		Benton Facial Recognition Test (long form):
		Unclear
		SSRS: Yes
		Behavioural observation: Yes
D4	Investigators were kept 'blind' to participants'	Blinding was different for different outcome
	exposure to the intervention	measures:
		Ekman emotion recognition photographs:
		rater not reported so blinding is unclear
		Study-specific emotion recognition in
		drawings test: rater not reported so blinding
		is unclear
		Benton Facial Recognition Test: rater not
		reported so blinding is unclear
		SSRS: Rated by parents who were blind to
		intervention allocation
		Behavioural observation: Rated by research
		assistants who were blind to intervention
		allocation
D5	Investigators were kept 'blind' to other important	Blinding was different for different outcome
	confounding and prognostic factors	measures:
		Ekman emotion recognition photographs:
		rater not reported so blinding is unclear
		Study-specific emotion recognition in
		drawings test: rater not reported so blinding
		is unclear
		Benton Facial Recognition Test: rater not
		reported so blinding is unclear
		SSRS: No, rated by parents who are aware
		of confounding factors
		Behavioural observation: Unclear, rated by
		research assistants who may have been
		aware of other confounding factors
	l on your answers to the above, in your opinion was de	tection bias present? If so, what is the likely
direct	tion of its effect?	

The risk of detection bias is different for different outcomes:

Unmaking the Face: unknown/unclear risk

Study-specific emotion recognition in drawings test: High risk

Benton Facial Recognition Test: unknown/unclear risk

SSRS: unknown/unclear risk Behaviour observation: low risk

Likely direction of effect: Effect size bigger, where high risk

## 1.2.12INGERSOLL2012

Study ID		INGERSOLL2012	
Bibliographic reference: Ingersoll B. Brief report: effect of a focused imitation intervention on social functioning in children with autism. Journal of Autism and Developmental Disorders. 2012;42:1768-1773.			
	line topic: Management and support of children and g people on the autism spectrum	Review question number: 4.1	
Check	list completed by: Odette Megnin-Viggars		
A. Sel	ection bias (systematic differences between the comparis	son groups)	
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (coin tossing)	
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)	
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes	
	on your answers to the above, in your opinion was sele ion of its effect?	ction bias present? If so, what is the likely	
	Unclear/unknown risk of bias		
Likely	v direction of effect: Unknown direction		
B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)			
B1	The comparison groups received the same care apart from the intervention(s) studied	Yes	
B2	Participants receiving care were kept 'blind' to treatment allocation	No	
B3	Individuals administering care were kept 'blind' to treatment allocation	No	
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?			

C. Att	C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)		
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	a. How many participants did not complete treatment Experimental group N: 1; Control group N: 1	in each group?	
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes	
C3	For how many participants in each group were no outo Experimental group N: 1; Control group N: 1	come data available?	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes	
	on your answers to the above, in your opinion was attri- ion of its effect?	ition bias present? If so, what is the likely	
	Low risk of bias		
Likely	v direction of effect: Not applicable		
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)	
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	
D3	A valid and reliable method was used to determine the outcome	Yes	

D4	Investigators were kept 'blind' to participants'	No
	exposure to the intervention	
D5	Investigators were kept 'blind' to other important	Unclear
	confounding and prognostic factors	
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely direction of its effect?		
High risk of bias		
Likely direction of effect: Effect size bigger		

# 1.2.13JOCELYN1998

Study	r ID	JOCELYN1998
	graphic reference:	
	n LJ, Casiro OG, Beattie D, Bow J, Kneisz J. Treatment o	
	olled trial to evaluate a caregiver-based intervention pro	
	velopmental and Behavioral Pediatrics. 1998;19:326-334.	
	eline topic: Management and support of children and	Review question number: 4.1
	g people on the autism spectrum	
Check	klist completed by: Odette Megnin-Viggars	
A. Sel	lection bias (systematic differences between the compari-	son groups)
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which	
	would have balanced any confounding factors	Yes (random number table)
	equally across groups)	
A2	There was adequate concealment of allocation (such	
	that investigators, clinicians and participants cannot	Yes (performed by independent research
	influence enrolment or treatment allocation)	assistant using sealed, opaque envelopes)
A3	The groups were comparable at baseline, including	
	all major confounding and prognostic factors	No (higher percentage of single parents in
	······································	the control group, p=0.047)
Based	l on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely
	tion of its effect?	-
	Unclear/unknown risk of bias	
Likely	y direction of effect: Unknown direction	
Lincij		
B. Per	formance bias (systematic differences between groups in	n the care provided, apart
	the intervention under investigation)	
	[	1
B1	The comparison groups received the same care apart	
	from the intervention(s) studied	Yes
B2	Participants receiving care were kept 'blind' to	
02	treatment allocation	No
		NO
B3	Individuals administering care were kept 'blind' to	
05	treatment allocation	No
		No
Based	l on your answers to the above, in your opinion was perf	formance hise present? If so what is the likely
	tion your answers to the above, in your opinion was per-	iormatice bias present? If so, what is the likely
unect		

C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	a. How many participants did not complete treatment Experimental group N: 1; Control group N: 0	in each group?
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes
C3	C3 For how many participants in each group were no outcome data available? Experimental group N: 1; Control group N: 0	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes
	l on your answers to the above, in your opinion was attr tion of its effect?	ition bias present? If so, what is the likely
	Low risk of bias	
Likely	y direction of effect: Not applicable	

D1	The study had an appropriate length of follow-up	Unclear (unclear if 12 weeks duration
21		sufficient follow-up length to detect
		significant treatment effects but as this is
		likely to result in conservative estimates of
		effect the study was not downgraded on this
		basis)
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine	Yes (with the exception of the Stress-
	the outcome	Arousal Checklist for which reliability and
		validity is unclear)
D4	Investigators were kept 'blind' to participants'	Yes (primary outcome measures assessed by
	exposure to the intervention	blinded psychologist, however, impact on
		family outcome measures are parent-
		completed and non-blind)
D5	Investigators were kept 'blind' to other important	Yes (primary outcome measures assessed by
	confounding and prognostic factors	blinded psychologist, however, impact on
		family outcome measures are parent-
		completed and non-blind)
Base	d on your answers to the above, in your opinion was de	tection bias present? If so, what is the likely
direc	tion of its effect?	
	Low risk of bias	
Likol	y direction of effect: Not applicable	

# 1.2.14KAALE2012

Study	ID	KAALE2012	
Biblio	Bibliographic reference:		
Kaale	A, Smith L, Sponheim E. A randomized controlled trial	of preschool-based joint attention	
interv	rention for children with autism. Journal of Child Psycho	logy and Psychiatry. 2012;53:97-105.	
Guide	eline topic: Management and support of children and	Review question number: 4.1	
young people on the autism spectrum			
Checklist completed by: Odette Megnin-Viggars			
A. Sel	A. Selection bias (systematic differences between the comparison groups)		
A1	An appropriate method of randomisation was used		
	to allocate participants to treatment groups (which	Vac (random number table)	
	would have balanced any confounding factors	Yes (random number table)	
	equally across groups)		

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4.2			
A2	There was adequate concealment of allocation (such		
	that investigators, clinicians and participants cannot	Yes (central allocation)	
	influence enrolment or treatment allocation)		
A3	The groups were comparable at baseline, including	No (statistically significant group difference	
	all major confounding and prognostic factors	at baseline with the experimental group	
	, 010	showing a lower expressive language age	
		than the control group [18.8 relative to 24.9	
		months, $p=0.047$ ])	
	on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely	
direct	ion of its effect?		
	Unclear/unknown risk of bias		
Likely	v direction of effect: Unknown direction		
,			
B. Per	formance bias (systematic differences between groups in	n the care provided, apart	
from	the intervention under investigation)		
B1	The comparison groups received the same care apart		
	from the intervention(s) studied	Yes	
B2	Participants receiving care were kept 'blind' to		
	treatment allocation	No	
B3	Individuals administering care were kept 'blind' to		
20	treatment allocation	No	
	treatment anocation		
Dereil			
	on your answers to the above, in your opinion was perf	formance bias present? If so, what is the likely	
direct	ion of its effect?		
	High risk of bias		
Likely	v direction of effect: Effect size bigger		
5			
C. Att	rition bias (systematic differences between the comparis	son groups with respect to loss of participants)	
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	N	
	differences in length of follow-up)	Yes	
	unterences in tengui or tonow-up)		
C2	C2 a. How many participants did not complete treatment in each group?		
	Experimental group N: 0; Control group N: 0	0	
1	Experimental group N. 0, Control group N: 0		

	b. The groups were comparable for treatment	
	completion (that is, there were no important or	Yes
	systematic differences between groups in terms of	
	those who did not complete treatment)	
C3	For how many participants in each group were no out	come data available?
	Experimental group N: 0; Control group N: 0	
	b. The groups were comparable with respect to the	
	availability of outcome data (that is, there were no	
	important or systematic differences between groups	Yes
	in terms of those for whom outcome data were not	
	available).	
Based	on your answers to the above, in your opinion was attr	ition bias present? If so, what is the likely
	ion of its effect?	nion one present. If so, what is the intery
uncer		
	The state of the s	
	Low risk of bias	
T ·1 1	1: .:	
Likely	v direction of effect: Not applicable	
DD	1	1
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or Verified)
D1	The study had an appropriate length of follow-up	Unclear (unclear if the intervention duration
		of 8 weeks was a sufficient length of time to
		detect significant treatment effects)
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine	Different for different outcomes:
	the outcome	Unclear for behavioural observation and
		preschool teacher-child play as no
		independent reliability or validity data and
		a standardized coding scheme was not used
D4	Investigators were kept 'blind' to participants'	Yes
D4	Investigators were kept 'blind' to participants'	165
	exposure to the intervention	
D5	Investigators were kept 'blind' to other important	Yes
20	confounding and prognostic factors	
	contouriung and progrossic factors	
Based	on your answers to the above, in your opinion was dete	ection bias present? If so, what is the likely
direct	ion of its effect?	-
	Low risk of bias	
Likel	v direction of effect: Not applicable	
	ancedon of check i vot uppleuble	

#### 1.2.15KASARI2006

Study ID	KASARI2006

Bibliographic reference:

Kasari C, Freeman S, Paparella T. Joint attention and symbolic play in young children with autism: a randomized controlled intervention study. Journal of Child Psychology and Psychiatry. 2006;47:611-620.

Kasari C, Paparella T, Freeman, S, Jahromi LB. Language outcome in autism: randomized comparison of joint attention and play interventions. Journal of Consulting and Clinical Psychology. 2008;76:125-137.

Lawton K, Kasari C. Brief report: longitudinal improvements in the quality of joint attention in preschool children with autism. Journal of Autism and Developmental Disorders. 2012;42:307-312.

children with autism. Journal of Autism and Developmental Disorders. 2012;42:307-312.			
	eline topic: Management and support of children and	Review question number: 4.1	
young	g people on the autism spectrum		
Check	klist completed by: Odette Megnin-Viggars		
A. Sel	ection bias (systematic differences between the comparis	son groups)	
A1	An appropriate method of randomisation was used		
	to allocate participants to treatment groups (which	Unclear (randomisation method is unclear)	
	would have balanced any confounding factors		
	equally across groups)		
A2	There was adequate concealment of allocation (such	Unclear (insufficient detail is reported with	
	that investigators, clinicians and participants cannot	regards to allocation concealment)	
	influence enrolment or treatment allocation)		
A3	The groups were comparable at baseline, including		
	all major confounding and prognostic factors	Yes	
Based	l on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely	
direct	ion of its effect?	-	
	Unclear/unknown risk of bias		
Likely	v direction of effect: Unknown direction		
B. Per	formance bias (systematic differences between groups in	n the care provided, apart	
from	the intervention under investigation)		
B1	The comparison groups received the same care apart		
	from the intervention(s) studied	Yes	
B2	Participants receiving care were kept 'blind' to		
	treatment allocation	No	

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B3	Individuals administering care were kept 'blind' to		
	treatment allocation	No	
Based	on your answers to the above, in your opinion was perf	ormance bias present? If so, what is the likely	
	ion of its effect?	1	
	High risk of bias		
Likely	/ direction of effect: Effect size bigger		
C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)	
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)		
C2	a. How many participants did not complete treatment	in each group?	
	Experimental group N: 2; Control group N: 5		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or systematic differences between groups in terms of	Yes	
	those who did not complete treatment)		
C3	For how many participants in each group were no outo	come data available?	
	Experimental group N: 2; Control group N: 4		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not available).		
Based	on your answers to the above, in your opinion was attr	ition bias present? If so, what is the likely	
	ion of its effect?	alon one present. It so, white is the intery	
	Low risk of bias		
Likob	Likely direction of effect: Not applicable		
Likely uncerton of effect. Not applicable			

D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)		
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Yes
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Yes
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Yes
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely direction of its effect?		
Low risk of bias		
Likely direction of effect: Not applicable		

#### 1.2.16KASARI2010

Study	ID	KASARI2010
Biblio	graphic reference:	
	i C, Gulsrud AC, Wong C, Kwon S, Locke J. Randomize	d controlled caregiver mediated joint
	gement intervention for toddlers with autism. Journal of	
	40:1045-1056.	I I I I I I I I I I I I I I I I I I I
	eline topic: Management and support of children and	Review question number: 4.1
	g people on the autism spectrum	1
	klist completed by: Odette Megnin-Viggars	
A. Sel	lection bias (systematic differences between the compari	son groups)
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which	
	would have balanced any confounding factors	Yes (random number table)
	equally across groups)	
A2	There was adequate concealment of allocation (such	
	that investigators, clinicians and participants cannot	Unclear (insufficient detail is reported with
	influence enrolment or treatment allocation)	regards to allocation concealment)
A3	The groups were comparable at baseline, including	
	all major confounding and prognostic factors	Yes
Based	l on your answers to the above, in your opinion was sele	ection bias present? If so, what is the likely
direct	tion of its effect?	
	Unclear/unknown risk of bias	
Likely	y direction of effect: Unknown direction	
B. Per	formance bias (systematic differences between groups in	n the care provided, apart
	the intervention under investigation)	1 / 1
	· · ·	
<b>D</b> 4		
B1	The comparison groups received the same care apart	
	from the intervention(s) studied	Yes
B2	Participants receiving care were kept 'blind' to	
	treatment allocation	No
B3	Individuals administering care were kept 'blind' to	
	treatment allocation	No
Based	l on your answers to the above, in your opinion was per	formance bias present? If so, what is the likely
	tion of its effect?	
	, , , , , ,	formance bias present? If so, what is the likely

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	a. How many participants did not complete treatment Experimental group N: 0; Control group N: 3	in each group?	
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes	
C3	For how many participants in each group were no outc Experimental group N: 0; Control group N: 0	come data available?	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes	
	l on your answers to the above, in your opinion was attri ion of its effect?	ition bias present? If so, what is the likely	
	Low risk of bias		
Likely	v direction of effect: Not applicable		
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)	
D1	The study had an appropriate length of follow-up	Unclear (not clear if 8 weeks sufficient duration to see significant treatment effects but as this would result in conservative effect estimate quality is not downgraded on this basis)	

D2	The study used a precise definition of outcome	Yes	
D3	A valid and reliable method was used to determine	Yes	
	the outcome		
D4	Investigators were kept 'blind' to participants'	Yes	
	exposure to the intervention		
D5	Investigators were kept 'blind' to other important	Yes	
	confounding and prognostic factors		
	0 1 0 1 10		
Based	Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely		
direction of its effect?			
	Low risk of bias		
Likely direction of effect: Not applicable			

#### 1.2.17KASARI2012

Study	ID	KASARI2012		
	Bibliographic reference:			
	Kasari C, Rotherham-Fuller E, Locke J, Gulsrud A. Making the connection: randomized controlled trial of social skills at school for children with autism spectrum disorders. Journal of Child Psychology and			
	iatry. 2012;53:431-439.	ders. Journal of erine i sychology and		
	eline topic: Management and support of children and	Review question number: 4.1		
	g people on the autism spectrum	1		
Check	list completed by: Odette Megnin-Viggars			
A. Sel	ection bias (systematic differences between the comparis	son groups)		
A1	An appropriate method of randomisation was used			
	to allocate participants to treatment groups (which would have balanced any confounding factors	Unclear (randomisation method unclear)		
A2	equally across groups) There was adequate concealment of allocation (such			
112	that investigators, clinicians and participants cannot	Unclear (insufficient detail is reported with		
	influence enrolment or treatment allocation)	regards to allocation concealment)		
A3	The groups were comparable at baseline, including	No (statistically significant baseline		
	all major confounding and prognostic factors	differences with 83% of the female		
		participants randomised to the peer-		
		mediated condition)		
	on your answers to the above, in your opinion was sele ion of its effect?	ction bias present? If so, what is the likely		
	Unclear/unknown risk of bias			
Likely	v direction of effect: Unknown direction			
D D				
	formance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart		
Irom	me intervention under investigation)			
B1	The comparison groups received the same care apart			
	from the intervention(s) studied	Unclear (insufficient detail reported)		
B2	Participants receiving care were kept 'blind' to			
	treatment allocation	No		
B3	Individuals administering care were kept 'blind' to			
	treatment allocation	No		

Based	on your answers to the above, in your opinion was perf	formance bias present? If so, what is the likely	
	Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?		
	High risk of bias		
T :11.	direction of effect. Effect size history		
Likely	v direction of effect: Effect size bigger		
C. At	rition bias (systematic differences between the comparis	son groups with respect to loss of participants)	
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)		
C2	a. How many participants did not complete treatment	in each group?	
C2	Experimental group N: 1; Control group N: 0	in each group:	
	b. The groups were comparable for treatment		
	completion (that is, there were no important or		
	systematic differences between groups in terms of	Yes	
	those who did not complete treatment)		
C3			
	Experimental group N: 0; Control group N: 0		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
	on your answers to the above, in your opinion was attri	ition bias present? If so, what is the likely	
direct	ion of its effect?		
	Low risk of bias		
Likola	v direction of effect: Not applicable		
LIKCI	ancedon of cheet. Not applicable		
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)	
D1	The study had an appropriate length of follow-up	Unclear (not clear if 12 weeks sufficient	
		duration to see significant treatment effects	
		but as this would result in conservative	
		effect estimate quality is not downgraded on	
		this basis)	

D2	The study used a precise definition of outcome	Yes	
D3	A valid and reliable method was used to determine	Lingloog (no independent gelichility og	
D3		Unclear (no independent reliability or	
	the outcome	validity data for most of the outcome	
		measures)	
D4	Investigators were kept 'blind' to participants'	Unclear (with the exception of the	
	exposure to the intervention	behavioural observation outcome measure	
		the blinding of outcome assessors was	
		unclear)	
D5	Investigators were kept 'blind' to other important	Unclear (with the exception of the	
	confounding and prognostic factors	behavioural observation outcome measure	
		the blinding of outcome assessors was	
		unclear)	
Based	l on your answers to the above, in your opinion was det	ection bias present? If so, what is the likely	
direc	tion of its effect?	-	
	Unclear/unknown risk of bias		
Likely direction of effect: Unknown direction			
Liner	Likely uncerton of eneer. Onknown uncerton		

#### 1.2.18KOENIG2010

Koenig in child Develo	graphic reference:			
Koenig in child Develo	graphic reference:			
	dren with pervasive developmental disorders: a feasibil	Bibliographic reference: Koenig K, Williams White S, Pachler M, Lau M, Lewis M, Klin A, et al. Promoting social skill development in children with pervasive developmental disorders: a feasibility and efficacy study. Journal of Autism and		
	Developmental Disorders. 2010;40:1209-1218.Guideline topic: Management and support of children and young people on the autism spectrumReview question number: 4.1			
Checkl	ist completed by: Odette Megnin-Viggars			
A. Sele	ection bias (systematic differences between the comparis	son groups)		
	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (random number table)		
	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Yes (central allocation)		
	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes		
Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?				
	Low risk of bias			
Likely	direction of effect: Not applicable			
	ormance bias (systematic differences between groups in ne intervention under investigation)	n the care provided, apart		
	The comparison groups received the same care apart from the intervention(s) studied	No (statistically significant difference in the number of participants in each group receiving psychotropic medication with N=6 [24%] in the treatment group and N=10 (53%] in the waitlist control group)		
	Participants receiving care were kept 'blind' to treatment allocation	No		
	Individuals administering care were kept 'blind' to treatment allocation	No		

Based	Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely		
	ion of its effect?	r in it, it is it is	
	High risk of bias		
Likola	v direction of effect: Effect size bigger		
LIKEIY	direction of effect. Effect size bigger		
C. Att	rition bias (systematic differences between the comparis	on groups with respect to loss of participants)	
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)		
C2	a. How many participants did not complete treatment	in each group?	
	Experimental group N: 2; Control group N: 1		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	Yes	
	systematic differences between groups in terms of		
<u> </u>	those who did not complete treatment)		
C3	For how many participants in each group were no outo Experimental group N: 2; Control group N: 1	come data available?	
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
	Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely		
direction of its effect?			
Low risk of bias			
Likely direction of effect: Not applicable			
D. De	D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)		
D1	The study had an appropriate length of follow-up	Yes	

D2	The study used a precise definition of outcome	Yes	
D3	A valid and reliable method was used to determine the outcome	Different for different outcome measures: Unclear for SCI as insufficient detail reported about this outcome measure	
D4	Investigators were kept 'blind' to participants' exposure to the intervention	No (although blinded rater for CGI outcome measures relied on non-blind parental report and SCI was parent-completed)	
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	No (although blinded rater for CGI outcome measures relied on non-blind parental report and SCI was parent-completed)	
	d on your answers to the above, in your opinion was det tion of its effect?	ection bias present? If so, what is the likely	
	High risk of bias		
Likely direction of effect: Effect size bigger			

#### 1.2.19LANDA2011

Bibliographic reference:         Landa RJ, Holman KC, O'Neill AH, Stuart EA. Intervention targeting development of socially synchronous engagement in toddlers with autism spectrum disorder: a randomized controlled trial. Journal of Child Psychology and Psychiatry. 2011;52:13-21.         GuideLine topic: Management and support of children and young people on the autism spectrum       Review question number: 4.1         CheckList completed by: Odette Megnin-Viggars       Review question number: 4.1         A. Selection bias (systematic differences between the comparison groups)       Unclear (randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)       Unclear (randomisation method is unclear)         A2       There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)       Unclear (insufficient detail reported with regards to allocation concealment)         A3       The groups were comparable at baseline, including all major confounding and prognostic factors       Yes         Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?       Unclear/unknown risk of bias         Likely direction of effect: Unknown direction       E       Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)         B1       The comparison groups received the same care apart from the intervention(s) studied       Yes <th>Study</th> <th>7 ID</th> <th>LANDA2011</th>	Study	7 ID	LANDA2011
Guideline topic: Management and support of children and young people on the autism spectrum       Review question number: 4.1         Checklist completed by: Odette Megnin-Viggars       Review question number: 4.1         A. Selection bias (systematic differences between the comparison groups)       Image: An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)       Unclear (randomisation method is unclear)         A2       There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)       Unclear (insufficient detail reported with regards to allocation concealment)         A3       The groups were comparable at baseline, including all major confounding and prognostic factors       Yes         Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?       Unclear (unknown risk of bias         Likely direction of effect: Unknown direction       B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)       The comparison groups received the same care apart from the intervention groups received the same care apart from the intervention of the same care apart from the intervention of the same care apart from the intervention for the direct of the direct of the direct of the same care apart from the intervention of the same care apart from the intervention of the same care apart from the intervention of the same care apart for the intervention of the same care apart for the intervention of th	Land engaş	a RJ, Holman KC, O'Neill AH, Stuart EA. Intervention ta gement in toddlers with autism spectrum disorder: a ran	
Checklist completed by: Odette Megnin-Viggars         A. Selection bias (systematic differences between the comparison groups)         A1       An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)       Unclear (randomisation method is unclear)         A2       There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)       Unclear (insufficient detail reported with regards to allocation concealment)         A3       The groups were comparable at baseline, including all major confounding and prognostic factors       Yes         Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?       Unclear/unknown risk of bias         Likely direction of effect: Unknown direction       B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)       The comparison groups received the same care apart from the intervention (so dudied	Guid	eline topic: Management and support of children and	Review question number: 4.1
A1       An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)       Unclear (randomisation method is unclear)         A2       There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)       Unclear (insufficient detail reported with regards to allocation concealment)         A3       The groups were comparable at baseline, including all major confounding and prognostic factors       Yes         Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?       Unclear/unknown risk of bias         Likely direction of effect: Unknown direction       Intervention under investigation)       Intervention under investigation)         B1       The comparison groups received the same care apart from the intervention () tradied       Free apart ()			
to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)Unclear (randomisation method is unclear)A2There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)Unclear (insufficient detail reported with regards to allocation concealment)A3The groups were comparable at baseline, including all major confounding and prognostic factorsYesBased on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?Unclear/unknown risk of biasLikely direction of effect: Unknown directionIndecrements of the intervention under investigation)In the comparison groups received the same care apart from the intervention under investigationB1The comparison groups received the same care apart from the intervention (so the date intervention	A. Se	lection bias (systematic differences between the compari-	son groups)
that investigators, clinicians and participants cannot influence enrolment or treatment allocation)       Unclear (insufficient detail reported with regards to allocation concealment)         A3       The groups were comparable at baseline, including all major confounding and prognostic factors       Yes         Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?       Unclear/unknown risk of bias         Likely direction of effect: Unknown direction       B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)         B1       The comparison groups received the same care apart from the intervention(a) etwicion	A1	to allocate participants to treatment groups (which would have balanced any confounding factors	Unclear (randomisation method is unclear)
all major confounding and prognostic factors       Yes         Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?       Unclear/unknown risk of bias         Unclear/unknown risk of bias       Likely direction of effect: Unknown direction         B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)         B1       The comparison groups received the same care apart from the intervention (a) etudied	A2	that investigators, clinicians and participants cannot	· · ·
direction of its effect?       Unclear/unknown risk of bias         Likely direction of effect: Unknown direction       Image: Comparison of the effect	A3		Yes
<ul> <li>B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)</li> <li>B1 The comparison groups received the same care apart from the intervention (a) studied</li> </ul>		Unclear/unknown risk of bias	
from the intervention under investigation) B1 The comparison groups received the same care apart from the intervention (c) studied	Likely	y direction of effect: Unknown direction	
from the intervention (c) studied			n the care provided, apart
	B1		Yes
B2 Participants receiving care were kept 'blind' to treatment allocation No	B2		No
B3 Individuals administering care were kept 'blind' to treatment allocation No	B3		No
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?			formance bias present? If so, what is the likely

C. Att	C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)		
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	a. How many participants did not complete treatment Experimental group N: 1; Control group N: 1	in each group?	
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes	
C3	For how many participants in each group were no outo Experimental group N: 1; Control group N: 1	come data available?	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes	
	on your answers to the above, in your opinion was attri- ion of its effect?	ition bias present? If so, what is the likely	
	Low risk of bias		
Likely	v direction of effect: Not applicable		
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)	
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	
D3	A valid and reliable method was used to determine the outcome	Yes	

D4	Investigators were kept 'blind' to participants'	Yes
	exposure to the intervention	
D5	Investigators were kent 'blind' to other important	Yes
D5	Investigators were kept 'blind' to other important	ies
	confounding and prognostic factors	
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely direction of its effect?		
Low risk of bias		
Likely	v direction of effect: Not applicable	

#### 1.2.20LAUGESON2009

Study ID	LAUGESON2009		
Bibliographic reference: Laugeson EA, Frankel F, Mogil C, Dillon AR. Parent-assisted	social skills training to improve friendshins in		
teens with autism spectrum disorders. Journal of Autism and	0 1 1		
Guideline topic: Management and support of children and	Review question number: 4.1		
young people on the autism spectrum	neview question number. 4.1		
Checklist completed by: Odette Megnin-Viggars			
A. Selection bias (systematic differences between the compar	ison groups)		
A1 An appropriate method of randomisation was used			
to allocate participants to treatment groups (which			
would have balanced any confounding factors	Unclear (randomisation method is unclear)		
equally across groups)			
A2 There was adequate concealment of allocation (such	Unclear (insufficient detail reported with		
that investigators, clinicians and participants cannot	regards to allocation concealment)		
influence enrolment or treatment allocation)	regards to anocation conceannent)		
A3 The groups were comparable at baseline, including			
all major confounding and prognostic factors	Yes		
Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely			
direction of its effect?			
Inclose (unlengung rich of hiss			
Unclear/unknown risk of bias			
Likely direction of effect: Unknown direction			
B. Performance bias (systematic differences between groups	n the care provided, apart		
from the intervention under investigation)			
B1 The comparison groups received the same care apart			
from the intervention(s) studied	Unclear (insufficient detail reported)		
B2 Participants receiving care were kept 'blind' to			
treatment allocation	No		
B3 Individuals administering care were kept 'blind' to			
treatment allocation	No		
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely			
direction of its effect?			

C. At	C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)		
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	a. How many participants did not complete treatment Experimental group N: Not reported; Control group N N=3 dropped out but group assignment for these parti	: Not reported	
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes	
C3	For how many participants in each group were no out Experimental group N: Not reported; Control group N N=3 dropped out but group assignment for these parti	: Not reported	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes	
	l on your answers to the above, in your opinion was attri ion of its effect?	ition bias present? If so, what is the likely	
	Low risk of bias		
Likely	y direction of effect: Not applicable		
D. De	D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)		
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	
D3	A valid and reliable method was used to determine the outcome	Yes (with the exception of the study-specific questionnaire which lacks external reliability and validity data)	

D4	Investigators were kept 'blind' to participants' exposure to the intervention	No (non-blind self- or parent-rated)
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	No (non-blind self- or parent-rated)
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely direction of its effect? High risk of bias		
Likel	y direction of effect: Effect size bigger	

#### 1.2.21LOPATA2010

Study	7 ID	LOPATA2010
Biblic	graphic reference:	
	ta C, Thomeer ML, Volker MA, Toomey JA, Nida RE, Le	e GK, et al. RCT of a manualized social
-	nent for high-functioning autism spectrum disorders. Jo	
	ders. 2010;40:1297-1310.	
	eline topic: Management and support of children and	Review question number: 4.1
	g people on the autism spectrum	
	klist completed by: Odette Megnin-Viggars	
A. Sel	lection bias (systematic differences between the compari	son groups)
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which would have balanced any confounding factors	Yes (random number table)
	equally across groups)	
A2	There was adequate concealment of allocation (such	
AΔ	that investigators, clinicians and participants cannot	Unclear (insufficient detail reported with
	influence enrolment or treatment allocation)	regards to allocation concealment)
A3	The groups were comparable at baseline, including	
AS	all major confounding and prognostic factors	Yes
	an major comounding and prognostic factors	
Based	l l on your answers to the above, in your opinion was sele	ection bias present? If so, what is the likely
direction of its effect?		
	Unclear/unknown risk of bias	
	,	
Likel	y direction of effect: Unknown direction	
-		
D D		.1 .1 1 .
	formance bias (systematic differences between groups in	n the care provided, apart
from	the intervention under investigation)	
B1	The comparison groups received the same care apart	
	from the intervention(s) studied	Unclear (insufficient detail reported)
		oneicui (insumelent deum reporteu)
DO		
B2	Participants receiving care were kept 'blind' to	
	treatment allocation	No
B3	Individuals administering care were kept 'blind' to	
03	treatment allocation	No
Based	l on your answers to the above, in your opinion was per	formance hias present? If so what is the likely
	tion of its effect?	iornarice ones present: it so, what is the likely
ance		

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	a. How many participants did not complete treatment i Experimental group N: 0; Control group N: 0	in each group?	
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes	
C3	For how many participants in each group were no outc Experimental group N: 0; Control group N: 0	ome data available?	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes	
Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?			
Low risk of bias			
Likely direction of effect: Not applicable			
D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)			
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	

D3	A valid and reliable method was used to determine	Different for different outcome measures:
	the outcome	Yes for: Social Responsiveness Scale (SRS):
		Total; Behavior Assessment System for
		Children, 2nd ed., parent rated (BASC-2-
		PRS): Withdrawal and Social Skills
		subscales
		No for: Study-specific questionnaires - the
		Adapted Skillstreaming Checklist (ASC)
		designed as a direct measure of skills taught
		and Skillstreaming Knowledge Assessment
		(SKA); Diagnostic Analysis of Nonverbal
		Accuracy 2 (DANVA2): Child faces;
		Comprehensive Assessment of Spoken
		Language (CASL): Idiomatic Language
D4	Investigators were kept 'blind' to participants'	No (non-blind parent- and researcher-rated)
	exposure to the intervention	
	-	
D5	Investigators were kept 'blind' to other important	No (non-blind parent- and researcher-rated)
	confounding and prognostic factors	
Page	d on your oncygers to the above in your oninion was do	testion bies present? If as what is the likely
	l on your answers to the above, in your opinion was de tion of its effect?	dection bias present? If so, what is the likely
unec		
	High risk of bias	
T 11. 1	l'antina d'affait Effait d'a blanca	
Likel	y direction of effect: Effect size bigger	

# 1.2.22OWENS2008

Study ID	OWENS2008		
Bibliographic reference:			
Owens G, Granader Y, Humphrey A, Baron-Cohen S. LEGO			
programme: an evaluation of two social skills interventions for	0		
Asperger syndrome. Journal of Autism and Developmental	Disorders. 2008;38:1944-1957.		
Guideline topic: Management and support of children and	Review question number: 4.1		
young people on the autism spectrum			
Checklist completed by: Odette Megnin-Viggars			
A. Selection bias (systematic differences between the compari	son groups)		
A1 An appropriate method of randomisation was used			
to allocate participants to treatment groups (which	Unclear (randomisation method is unclear)		
would have balanced any confounding factors	Chelear (randomisation method is unclear)		
equally across groups)			
A2 There was adequate concealment of allocation (such	Unclear (insufficient detail is reported with		
that investigators, clinicians and participants cannot	· · ·		
influence enrolment or treatment allocation)	regards to allocation concealment)		
A3 The groups were comparable at baseline, including			
all major confounding and prognostic factors	Yes (matched pairs)		
Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely			
direction of its effect?			
Unclear/unknown risk of bias			
,			
Likely direction of effect: Unknown direction			
B. Performance bias (systematic differences between groups i	n the care provided, apart		
from the intervention under investigation)			
B1 The comparison groups received the same care apart			
from the intervention(s) studied	Yes		
	165		
B2 Participants receiving care were kept 'blind' to			
treatment allocation	No		
B3 Individuals administering care were kept 'blind' to			
treatment allocation	No		
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely			
direction of its effect?			

Likely direction of effect. Effect size bigger			
C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	a. How many participants did not complete treatment Experimental group N: 7; Control group N: 7	in each group?	
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes	
C3	For how many participants in each group were no outc Experimental group N: 7; Control group N: 7	come data available?	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes	
	on your answers to the above, in your opinion was attri ion of its effect?	ition bias present? If so, what is the likely	
Low risk of bias			
Likely direction of effect: Not applicable			
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)	
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	
D3	A valid and reliable method was used to determine the outcome	Different for different outcome measures: Unclear/unknown for behavioural observations as no reliability or validity data reported and no standardized coding scheme used	

DI	T (1 1 1/1 1/1 1/1 1/1	D:// / 1:// /
D4	Investigators were kept 'blind' to participants'	Different for different outcome measures:
	exposure to the intervention	Unclear/unnown for GARS as parent-
		completed and unclear if blinded to group
		assignment and for VABS as although the
		interviewer was a blinded research
		assistant, the outcome measure was based
		on non-blind parent report
		No for behavioural observations as outcome
		assessor was non-blind investigator
D5	Investigators were kept 'blind' to other important	Different for different outcome measures:
	confounding and prognostic factors	Unclear/unknown for VABS as although
		the interviewer was a blinded research
		assistant, the outcome measure was based
		on non-blind parent report
		No for GARS and behavioural observations
		as rated by parents or investigator who
		would be non-blind to other potentially
		important confounding factors
Based	l on your answers to the above, in your opinion was det	ection bias present? If so, what is the likely
direc	tion of its effect?	
	Different for different outcome measures:	
Uncle	ear/unknown risk for GARS and VABS	
	risk of bias for behavioural observations	
U	y direction of effect: Effect size bigger, where high risk	

#### 1.2.23ROEYERS1996

Study ID		ROEYERS1996	
Piblic	monhia vafavanca		
	graphic reference: rrs H. The influence of nonhandicapped peers on the soc	ial interactions of children with a pervasive	
-	opment disorder. Journal of Autism and Developmental	-	
	line topic: Management and support of children and	Review question number: 4.1	
	g people on the autism spectrum	neview question number. In	
	list completed by: Odette Megnin-Viggars		
A. Sel	ection bias (systematic differences between the comparis	son groups)	
A1	An appropriate method of randomisation was used		
	to allocate participants to treatment groups (which	Unclose (mendomination mothed is unclose)	
	would have balanced any confounding factors	Unclear (randomisation method is unclear)	
	equally across groups)		
A2	There was adequate concealment of allocation (such	Unclear (insufficient detail is reported with	
	that investigators, clinicians and participants cannot	regards to allocation concealment)	
	influence enrolment or treatment allocation)	regards to anocation conceannent)	
A3	The groups were comparable at baseline, including		
	all major confounding and prognostic factors	Yes	
	on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely	
direction of its effect?			
	Unclear/unknown risk of bias		
Likely	Likely direction of effect: Unknown direction		
B Per	formance bias (systematic differences between groups ir	a the care provided apart	
	the intervention under investigation)	i die cure provideu, upurt	
nom			
B1	The comparison groups received the same care apart		
	from the intervention(s) studied	Unclear (insufficient detail reported)	
B2	Participants receiving care were kept 'blind' to		
	treatment allocation	No	
B3	Individuals administering care were kept 'blind' to		
	treatment allocation	No	
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely			
direction of its effect?			

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of		
CI	time (or analysis was adjusted to allow for	N/	
	differences in length of follow-up)	Yes	
	amerenees in rengar of rone (r up)		
C2	a. How many participants did not complete treatment i	in each group?	
	Experimental group N: 0; Control group N: 0		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	Yes	
	systematic differences between groups in terms of	105	
	those who did not complete treatment)		
C3	For how many participants in each group were no outc	come data available?	
	Experimental group N: 0; Control group N: 0		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
Based	Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely		
direction of its effect?			
	Low risk of bias		
Likely	direction of effect: Not applicable		
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)	
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	
D3	A valid and reliable method was used to determine	Yes	
20	the outcome		

D4	Investigators were kept 'blind' to participants'	Yes (assumption based on the statement
	exposure to the intervention	"observers not familiar with the purposes of
		the project")
D5	Investigators were kept 'blind' to other important	Yes (assumption based on the statement
	confounding and prognostic factors	"observers not familiar with the purposes of
		the project")
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely		
direction of its effect?		
Low risk of bias		
Likel	y direction of effect: Not applicable	
Likel	y direction of effect: Not applicable	

# 1.2.24 RUBLE2010

Study	ID	RUBLE2010
Ruble I outcon	graphic reference: LA, Dalrymple NJ, McGrew JH. The effects of consultat nes for young children with autism: the collaborative m l of Early Intervention. 2010;32:286-301.	1 0
	line topic: Management and support of children and	Review question number: 4.1
• •	people on the autism spectrum	
Checkl	list completed by: Odette Megnin-Viggars	
A. Sele	ection bias (systematic differences between the compari-	son groups)
	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)
	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)
	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes
	on your answers to the above, in your opinion was sele on of its effect? Unclear/unknown risk of bias	
Likely	direction of effect: Unknown direction	
	ormance bias (systematic differences between groups in he intervention under investigation)	n the care provided, apart
	The comparison groups received the same care apart from the intervention(s) studied	Yes (no significant differences between experimental and control group for number or hours of other services received during the intervention period)
	Participants receiving care were kept 'blind' to treatment allocation	Unclear (paper states 'single-blind' but gives no further detail with regards to whether it is the participants who are blinded)
	Individuals administering care were kept 'blind' to treatment allocation	No (investigators were intervention administrators)
Based	on your answers to the above, in your opinion was per	formance bias present? If so, what is the likely
direction	on of its effect?	

Autism: the management and support of children and young people on the autism spectrum

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	a. How many participants did not complete treatment i	in each group?	
	Experimental group N: 1; Control group N: 2		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or systematic differences between groups in terms of	Yes	
	those who did not complete treatment)		
C3	For how many participants in each group were no outc	come data available?	
	Experimental group N: 1; Control group N: 2		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
	on your answers to the above, in your opinion was attri	tion bias present? If so, what is the likely	
direct	ion of its effect?		
	Low risk of bias		
Likely	Likely direction of effect: Not applicable		
D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)			
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	

D3	A valid and reliable method was used to determine	Unclear (only 20% of observations were
	the outcome	double-coded and a standardized
		observation measure was not used the
		reliability and validity of this outcome
		measure is unclear)
D4	Investigators were kept 'blind' to participants'	No (primary outcome assessor was the non-
	exposure to the intervention	blind investigator with a blinded secondary
		outcome assessor only rating 20% of
		behavioural observations)
D5	Investigators were kept 'blind' to other important	No (primary outcome assessor was the non-
	confounding and prognostic factors	blind investigator with a blinded secondary
		outcome assessor only rating 20% of
		behavioural observations)
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely		
direc	tion of its effect?	
	High risk of bias	
	-	
Likel	y direction of effect: Effect size bigger	

# 1.2.25RYAN2010

Study	TD	RYAN2010
Biblic	graphic reference:	
	C, Charragain CN. Teaching emotion recognition skills	to children with autism. Journal of Autism
and E	Developmental Disorders. 2010;40:1505-1511.	
Guide	eline topic: Management and support of children and	Review question number: 4.1
young	g people on the autism spectrum	
Check	klist completed by: Lucy Burt	
A. Selection bias (systematic differences between the comparison groups)		
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which	Unclear (randomisation method is unclear)
	would have balanced any confounding factors	Chicken (rundofinisation method is ancienty)
	equally across groups)	
A2	There was adequate concealment of allocation (such	Unclear (insufficient detail reported with
	that investigators, clinicians and participants cannot	regards to allocation concealment)
	influence enrolment or treatment allocation)	· · · · · · · · · · · · · · · · · · ·
A3	The groups were comparable at baseline, including	
	all major confounding and prognostic factors	Yes
Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely		
direction of its effect?		

	Unclear/unknown risk of bias		
Likely	Likely direction of effect: Unknown direction		
B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)			
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)	
B2	Participants receiving care were kept 'blind' to treatment allocation	No	
B3	Individuals administering care were kept 'blind' to treatment allocation	No	
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?			
	High risk of bias		
Likely	Likely direction of effect: Effect size bigger		
C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	a. How many participants did not complete treatment Experimental group N: Not reported; Control group N N=5 participants were lost at follow-up, but group allo	: Not reported	
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Unclear	

C3	For how many participants in each group were no outc	come data available?	
0	Experimental group N: 0; Control group N: 1		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
		ies	
	in terms of those for whom outcome data were not		
	available).		
	on your answers to the above, in your opinion was attri	ition bias present? If so, what is the likely	
direct	ion of its effect?		
	Unclear/unknown risk of bias		
Likely	v direction of effect: Unknown direction		
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)	
D1	The study had an appropriate length of follow-up	Unclear - Post-group measures were taken	
		one week after the intervention and it is not	
		clear if 5 weeks is long enough to see	
		treatment effects	
D2	The study used a precise definition of outcome	Yes	
	, <u>,</u>		
D3	A valid and reliable method was used to determine	No - Validity and reliability are not reported	
	the outcome	for the only measure used in the study; the	
		Ekman emotion recognition photographs	
D4	Investigators were kept 'blind' to participants'	Unclear - Investigators were kept blind to	
	exposure to the intervention	participants pre-test scores but it is not	
	1	reported if they were blind to treatment	
		allocation	
D5	Investigators were kept 'blind' to other important	Unclear - The investigator was a	
	confounding and prognostic factors	psychologist who was blind to pre-test	
	control and programme actions	scores, but it is unclear how much	
		information they had about confounding	
		and prognostic factors	
Bacad	on your answers to the above, in your opinion was dete	1 0	
	ion of its effect?	ction bias present? If so, what is the likely	
	High risk of bias		
Likely	v direction of effect: Effect size bigger		

## 1.2.26 SCHERTZ2013

Study	y ID	SCHERTZ2013	
Scher with a	Bibliographic reference: Schertz HH, Odom SL, Baggett KM, Sideris JH. Effects of joint attention medication learning for toddlers with autism spectrum disorders: an initial randomised controlled study. Early Childhood Research Quarterly. 2013;28:249-258.		
Guide young	eline topic: Management and support of children and g people on the autism spectrum	Review question number: 4.1	
	klist completed by: Odette Megnin-Viggars lection bias (systematic differences between the compari	son groups)	
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)	
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)	
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes	
	direction of its effect? Unclear/unknown risk of bias		
B. Per	y direction of effect: Unknown direction rformance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart	
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (weekly hours of intervention [combined across sites] were 38 hours for the experimental group and 31 hours for the control group but the paper does not report any statistical testing of the significance of this difference)	
B2	Participants receiving care were kept 'blind' to treatment allocation	No	
B3	Individuals administering care were kept 'blind' to treatment allocation	No	

Basad	on your analyzers to the above in your oninion was not	formance hise present? If so what is the likely	
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?			
uneci	direction of its effect?		
	High risk of bias		
Likely	v direction of effect: Effect size bigger		
Linery	ancedon of effect. Effect size bigger		
C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)	
<u>C1</u>	All second cillered and for an envel level back	No. ( how they of the internet is proved	
C1	All groups were followed up for an equal length of	Yes (duration of the intervention was	
	time (or analysis was adjusted to allow for	variable, but there were no significant	
	differences in length of follow-up)	differences in the pre-post assessment time	
~		difference between the groups)	
C2	a. How many participants did not complete treatment		
	Experimental group N: Not reported; Control group N	: Not reported	
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	Unclear	
	systematic differences between groups in terms of		
	those who did not complete treatment)		
C3	For how many participants in each group were no outc	come data available?	
	Experimental group N: Not reported; Control group N	: Not reported	
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Unclear	
	in terms of those for whom outcome data were not		
	available).		
Based	on your answers to the above, in your opinion was attri	ition bias present? If so, what is the likely	
direct	direction of its effect?		
	Unclear/unknown risk of bias		
Likely	Likely direction of effect: Unknown direction		

D. De	etection bias (bias in how outcomes are ascertained, diag	gnosed or verified)
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Yes
D4	Investigators were kept 'blind' to participants' exposure to the intervention	<ul> <li>Different blinding for different outcomes:</li> <li>Yes - behavioural observations</li> <li>No - MSEL and VABS (MSEL rated by non- blind research assistants and VABS rated by non-blind research assistants and based on interview with parents who were non-blind and involved in the intervention)</li> </ul>
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Unclear
	d on your answers to the above, in your opinion was det tion of its effect?	tection bias present? If so, what is the likely
High	Different bias for different outcomes: risk for MSEL and VABS	
Likel	y direction of effect: Effect size bigger, where high risk	

# 1.2.27 STRAIN2011

Study	<i>i</i> ID	STRAIN2011	
Strain childr Guide	Bibliographic reference:Strain PS, Bovey II EH. Randomized, controlled trial of the LEAP model of early intervention for young children with autism spectrum disorders. Topics in Early Childhood Special Education. 2011;31:133-154.Guideline topic: Management and support of children and young people on the autism spectrumReview question number: 4.1		
Checklist completed by: Odette Megnin-Viggars         A. Selection bias (systematic differences between the comparison groups)		son groups)	
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (random number table)	
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)	

A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes	
	Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?		
	Unclear/unknown risk of bias		
Likely	v direction of effect: Unknown direction		
	formance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart	
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)	
B2	Participants receiving care were kept 'blind' to treatment allocation	No	
B3	Individuals administering care were kept 'blind' to treatment allocation	No	
	on your answers to the above, in your opinion was perfion of its effect?	formance bias present? If so, what is the likely	
	High risk of bias		
Likely	Likely direction of effect: Effect size bigger		
C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	a. How many participants did not complete treatment : Experimental group N: 1 classroom; Control group N:		
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes	

<b></b>			
C3	For how many participants in each group were no outcome data available?		
	Experimental group N: 1 classroom; Control group N: 5 classrooms		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
Based	on your answers to the above, in your opinion was attr	tion bias present? If so, what is the likely	
direct	ion of its effect?		
	Low risk of bias		
Likely	Likely direction of effect: Not applicable		
DD			
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)	
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	
D3	A valid and reliable method was used to determine	Yes	
	the outcome		
D4	Investigators were kept 'blind' to participants'	Unclear (identity and blinding of outcome	
	exposure to the intervention	assessors not reported)	

Investigators were kept 'blind' to other important	Unclear (identity and blinding of outcome	
confounding and prognostic factors	assessors not reported)	
on your answers to the above, in your opinion was dete	ection bias present? If so, what is the likely	
direction of its effect?		
Unclear/unknown risk of bias		
Likely direction of effect: Unknown direction		
	confounding and prognostic factors on your answers to the above, in your opinion was dete ion of its effect? Unclear/unknown risk of bias	

## 1.2.28TANAKA2010

Study	TD	TANAKA2010	
Biblic	Bibliographic reference:		
	Tanaka JW, Wolf JM, Klaiman C, Koenig K, Cockburn J, Herlihy L, et al. Using computerized games to		
	face recognition skills to children with autism spectrum	disorder: the Let's Face It! program. Journal	
of Ch	ild Psychology and Psychiatry. 2010;51:944-952.		
	eline topic: Management and support of children and	Review question number: 4.1	
young	g people on the autism spectrum		
Check	clist completed by: Lucy Burt		
A. Sel	ection bias (systematic differences between the compari	son groups)	
A1	An appropriate method of randomisation was used		
	to allocate participants to treatment groups (which	Unclear (method of randomisation is	
	would have balanced any confounding factors	unclear)	
	equally across groups)		
A2	There was adequate concealment of allocation (such	Unclear (insufficient detail reported with	
	that investigators, clinicians and participants cannot	regards to allocation concealment)	
	influence enrolment or treatment allocation)	regards to anocation conceannent)	
A3	The groups were comparable at baseline, including		
	all major confounding and prognostic factors	Yes	
	on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely	
direct	ion of its effect?		
	Unclear/unknown risk of bias		
Likely	v direction of effect: Unknown direction		
B. Performance bias (systematic differences between groups in the care provided, apart			
from the intervention under investigation)			

-		
B1	The comparison groups received the same care apart	
	from the intervention(s) studied	Unclear (insufficient detail reported)
		······································
De		
B2	Participants receiving care were kept 'blind' to	
	treatment allocation	No
B3	Individuals administering care were kept 'blind' to	
	treatment allocation	No
Based	l on your answers to the above, in your opinion was perl	ormance bias present? If so, what is the likely
direct	tion of its effect?	
	High risk of bias	
	Thigh tisk of blas	
Lilol	direction of offect Effect size history	
LIKely	y direction of effect: Effect size bigger	
C At	trition bias (systematic differences between the comparis	on groups with respect to loss of participants)
C. 110	union bias (systematic unicrences between the company	on groups while respect to loss of participants)
C1	All groups were followed up for an equal length of	
01	time (or analysis was adjusted to allow for	
	differences in length of follow-up)	Yes
	unreferices in length of follow-up)	
C2	a. How many participants did not complete treatment	in each group?
	Experimental group N: 14; Control group N: 7	
	b. The groups were comparable for treatment	
	completion (that is, there were no important or	
	systematic differences between groups in terms of	No
	those who did not complete treatment)	
<u> </u>	- ,	
C3	For how many participants in each group were no outo	come data available?
	Experimental group N: 23; Control group N: 15	
	b. The groups were comparable with respect to the	
	availability of outcome data (that is, there were no	
	important or systematic differences between groups	Yes
	in terms of those for whom outcome data were not	
	available).	
Based	l on your answers to the above, in your opinion was attr	ition bias present? If so, what is the likely
	tion of its effect?	1 , ,
	TT 1 / 1 · 1 / 1·	
	Unclear/unknown risk of bias	
Likely direction of effect: Unknown direction		

D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)		
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Unclear
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Unclear (blinding of outcome assessors not reported)
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Unclear (blinding of outcome assessors not reported)
	l on your answers to the above, in your opinion was det tion of its effect?	ection bias present? If so, what is the likely
High risk of bias		
Likel	y direction of effect: Effect size bigger	

#### 1.2.29YOUNG2012

Stud	y ID	YOUNG2012
Your	ographic reference: ng RL, Posselt M. Using The Transporters DVD as a learn ders (ASD). Journal of Autism and Developmental Disor	о I
	eline topic: Management and support of children and g people on the autism spectrum	Review question number: 4.1
Chec	klist completed by: Lucy Burt	
A. Se	election bias (systematic differences between the compari	son groups)
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (method of randomisation is unclear)
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes
	d on your answers to the above, in your opinion was sele tion of its effect? Unclear/unknown risk of bias	ection bias present? If so, what is the likely
Likel	y direction of effect: Unknown direction	
	rformance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)
B2	Participants receiving care were kept 'blind' to treatment allocation	Yes (due to inclusion of an attention-placebo condition)
B3	Individuals administering care were kept 'blind' to treatment allocation	No (parents were care administrators as this was a home-based intervention and were provided with a user-guide so were presumably non-blind to treatment allocation)

Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?

Unclear/unknown risk of bias (low risk for response bias and high risk for performance bias)

Likely direction of effect: Effect size bigger, where high risk

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)

C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	a. How many participants did not complete treatment	in each group?	
C2	Experimental group N: 0; Control group N: 0	in cuch group.	
	b. The groups were comparable for treatment		
	completion (that is, there were no important or		
	systematic differences between groups in terms of	Yes	
	those who did not complete treatment)		
C3	For how many participants in each group were no outc	nome data available?	
CJ	Experimental group N: 0; Control group N: 0		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not	Tes	
	available).		
Pacad	,	tion him present? If an upbat is the likely	
	on your answers to the above, in your opinion was attri ion of its effect?	tion bias present? If so, what is the likely	
urrect	ion of its effect?		
Low risk of bias			
T ·1 1	1: .:		
Likely	direction of effect: Not applicable		
D Do	tection bias (bias in how outcomes are ascertained, diag	eccod or worified)	
D. De	tection bias (bias in now outcomes are ascertained, diagi	,	
D1	The study had an appropriate length of follow-up	Unclear	
D2	The study used a precise definition of outcome	Yes	
D	A sulid and valiable mathed as a sure data data d	Vac	
D3	A valid and reliable method was used to determine	Yes	
	the outcome		

D4	Investigators were kept 'blind' to participants'	Blinding was different for different outcome	
	exposure to the intervention	assessors:	
		NEPSY-II: Affect Recognition subscale - No.	
		Outcome assessors were researchers. No	
		blinding of researchers reported	
		The Faces Task - No. Outcome assessors	
		were researchers. No blinding of researchers	
		reported	
		SCQ - Yes. Parent rated and parents were	
		blind to treatment allocation	
D5	Investigators were kept 'blind' to other important	No - No blinding of investigators reported	
	confounding and prognostic factors	and parents are not blind to confounding	
		factors	
Based	d on your answers to the above, in your opinion was de	tection bias present? If so, what is the likely	
direc	tion of its effect?		
	High risk of bias		
Likel	Likely direction of effect: Effect size bigger		

# 1.3 PHARMACOLOGICAL INTERVENTIONS AIMED AT CORE AUTISM FEATURES

#### 1.3.1 HOLLANDER2005

Study ID		HOLLANDER2005		
D'1 1'	Piblia sus abia sufaran as			
Bibliographic reference: Hollander E, Phillips A, Chaplin W, Zagursky K, Novotny S, Wasserman S, et al. A placebo controlled				
	over trial of liquid fluoxetine on repetitive behaviors in c	-		
	ppsychopharmacology. 2005;30:582-589.			
	Guideline topic: Management and support of children and Review question number: 4.1			
young	g people on the autism spectrum			
Check	list completed by: Odette Megnin-Viggars			
A. Sel	ection bias (systematic differences between the comparis	son groups)		
A1	An appropriate method of randomisation was used			
	to allocate participants to treatment groups (which	Unclear (randomisation method is unclear)		
	would have balanced any confounding factors	Chelear (randomisation method is unclear)		
	equally across groups)			
A2	There was adequate concealment of allocation (such	Unclear (insufficient detail reported with		
	that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	regards to allocation concealment)		
A3	The groups were comparable at baseline, including			
AJ	all major confounding and prognostic factors	Unclear		
	an major comountaing and progressic factors	- Chelear		
Based	on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely		
direct	ion of its effect?			
	Unclear/unknown risk of bias			
Likely	v direction of effect: Unknown direction			
	formance bias (systematic differences between groups in	n the care provided, apart		
from	the intervention under investigation)			
B1	The comparison groups received the same care apart			
	from the intervention(s) studied	Yes		
B2	Participants receiving care were kept 'blind' to			
	treatment allocation	Yes (matching placebo)		

B3	Individuals administering care were kept 'blind' to treatment allocation	Yes	
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?			
	Low risk of bias		
Likely	v direction of effect: Not applicable		
C. Att	rition bias (systematic differences between the comparis	son groups with respect to loss of participants)	
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	<ul><li>a. How many participants did not complete treatment is</li><li>Experimental group N: 3; Control group N: 2</li><li>b. The groups were comparable for treatment completion (that is, there were no important or</li></ul>	in each group?	
	systematic differences between groups in terms of those who did not complete treatment)	Yes	
C3	For how many participants in each group were no outo Experimental group N: 3; Control group N: 2	come data available?	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes	
	on your answers to the above, in your opinion was attri- ion of its effect?	ition bias present? If so, what is the likely	
	Low risk of bias		
Likely	v direction of effect: Not applicable		
	tection bias (bias in how outcomes are ascertained, diag	,	
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	

D3	A valid and reliable method was used to determine	Yes
05	the outcome	105
D.		
D4	Investigators were kept 'blind' to participants'	Yes
	exposure to the intervention	
D5	Investigators were kept 'blind' to other important	Yes
	confounding and prognostic factors	
	0 1 0	
Based	on your answers to the above, in your opinion was dete	ection bias present? If so, what is the likely
	ion of its effect?	1
	Low risk of bias	
Likely	Likely direction of effect: Not applicable	
5	11	

## 1.3.2 KING2009

	7 ID	KING2009
Biblic	ographic reference:	
	BH, Hollander E, Sikich L, McCracken JT, Scahill L, Breg	rman ID, et al. Lack of efficacy of citalopram
0	ldren with autism spectrum disorders and high levels of	
	ren with autism. Archives of General Psychiatry. 2009;66	
	eline topic: Management and support of children and	Review question number: 4.1
	g people on the autism spectrum	Keview question number. 4.1
Cneci	klist completed by: Odette Megnin-Viggars	
A. Se	lection bias (systematic differences between the compari	son groups)
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which	Unclear (randomisation method was
	would have balanced any confounding factors	unclear)
	equally across groups)	
A2	There was adequate concealment of allocation (such	
	that investigators, clinicians and participants cannot	Unclear (insufficient detail reported with
	influence enrolment or treatment allocation)	regards to allocation concealment)
A3	The groups were comparable at baseline, including	
110	all major confounding and prognostic factors	Yes
	an major comountaing and prognostic factors	
Based	l on your answers to the above, in your opinion was sele	ection bias present? If so, what is the likely
	l on your answers to the above, in your opinion was sele tion of its effect?	ection bias present? If so, what is the likely
		ection bias present? If so, what is the likely
	tion of its effect?	ection bias present? If so, what is the likely
		ection bias present? If so, what is the likely
direct	tion of its effect? Unclear/unknown risk of bias	ection bias present? If so, what is the likely
direct	tion of its effect?	ection bias present? If so, what is the likely
direct Likely	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction	
direct Likely B. Per	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction	
direct Likely B. Per	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction	
direct Likely B. Per	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction	
direct Likely B. Per from	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction formance bias (systematic differences between groups i the intervention under investigation)	
direct Likely B. Per from	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction formance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart	n the care provided, apart
direct Likely B. Per from	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction formance bias (systematic differences between groups i the intervention under investigation)	
direct Likely B. Per from	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction formance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart	n the care provided, apart
Likely B. Per from B1	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction formance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart	n the care provided, apart
Likely B. Per from B1	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction formance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied	n the care provided, apart
Likely B. Per from B1	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction formance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied Participants receiving care were kept 'blind' to	n the care provided, apart Unclear (insufficient detail reported)
direct Likely B. Per	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction formance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied Participants receiving care were kept 'blind' to treatment allocation	n the care provided, apart Unclear (insufficient detail reported)
Likely B. Per from B1 B2	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction formance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied Participants receiving care were kept 'blind' to treatment allocation Individuals administering care were kept 'blind' to	n the care provided, apart Unclear (insufficient detail reported) Yes
Likely B. Per from B1 B2	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction formance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied Participants receiving care were kept 'blind' to treatment allocation	n the care provided, apart Unclear (insufficient detail reported)
Likely B. Per from B1 B2 B3	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction formance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied Participants receiving care were kept 'blind' to treatment allocation Individuals administering care were kept 'blind' to	n the care provided, apart Unclear (insufficient detail reported) Yes Yes

Low risk of bias

Likely direction of effect: Not applicable

5				
C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)				
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes		
C2	a. How many participants did not complete treatment i Experimental group N: 13; Control group N: 13	in each group?		
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes		
C3	For how many participants in each group were no outc Experimental group N: 0; Control group N: 0	ome data available?		
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes (analysed according to intent-to-treat principle)		
	on your answers to the above, in your opinion was attri ion of its effect?	tion bias present? If so, what is the likely		
	Low risk of bias			
Likely	direction of effect: Not applicable			
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)		
	The study had an appropriate length of follow-up	Yes (initially unclear if 12 weeks duration a sufficient follow-up length to detect significant treatment effects, particularly adverse events. However, as this study failed to find significant positive treatment effects and did find evidence for adverse events, this concern was shown to be misplaced)		
D2	The study used a precise definition of outcome	Yes		

D3	A valid and reliable method was used to determine	Yes	
	the outcome		
D4	Investigators were kept 'blind' to participants'	Yes	
	exposure to the intervention		
D5	Investigators were kept 'blind' to other important	Different for different outcomes:	
	confounding and prognostic factors	No for RBS as parent-rated	
		Unclear for ABC as identity of outcome	
		assessor not reported	
Base	d on your answers to the above, in your opinion was de	tection bias present? If so, what is the likely	
direc	tion of its effect?		
	Low risk of bias		
T ·1 1			
Likel	y direction of effect: Not applicable		

# 1.3.3 LUBY2006

Study	7 ID	LUBY2006	
D:1.1			
Luby childr	ographic reference: J, Mrakotsky C, Stalets MM, Belden A, Heffelfinger A, V en with autistic spectrum disorders: an investigation of escent Psychopharmacology. 2006;16:575-587.		
Guide	eline topic: Management and support of children and g people on the autism spectrum	Review question number: 4.1	
Check	klist completed by: Odette Megnin-Viggars		
A. Sel	lection bias (systematic differences between the compari	son groups)	
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (random number table)	
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	No (Open random allocation schedule)	
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	No (the risperidone group showed significantly greater severity of autism symptoms as measured by the CARS and significantly poorer language skills as measured by the PLS-3 and poorer motor skill development as measured by the VABS Motor Skills Scale)	
	l on your answers to the above, in your opinion was sele ion of its effect?	ection bias present? If so, what is the likely	
	High risk of bias		
Likely	y direction of effect: Effect size bigger		
	formance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart	
B1	The comparison groups received the same care apart from the intervention(s) studied	Yes	
B2	Participants receiving care were kept 'blind' to treatment allocation	Yes	

DO		
B3	Individuals administering care were kept 'blind' to	
	treatment allocation	No
	on your answers to the above, in your opinion was perf	formance bias present? If so, what is the likely
direct	ion of its effect?	
	High risk of bias	
Likely	v direction of effect: Effect size bigger	
C. Att	rition bias (systematic differences between the comparis	on groups with respect to loss of participants)
<u>C1</u>		
C1	All groups were followed up for an equal length of	
	time (or analysis was adjusted to allow for	Yes
	differences in length of follow-up)	
C2	a. How many participants did not complete treatment	in each group?
	Experimental group N: 1; Control group N: 0	
	b. The groups were comparable for treatment	
	completion (that is, there were no important or	
	systematic differences between groups in terms of	Yes
	those who did not complete treatment)	
C3	For how many participants in each group were no outc	anno doto avoilablo?
03	Experimental group N: 1; Control group N: 0	come data available:
	b. The groups were comparable with respect to the	
	availability of outcome data (that is, there were no	
	important or systematic differences between groups	Yes
	in terms of those for whom outcome data were not	
	available).	

Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?

Low risk of bias

Likely direction of effect: Not applicable

D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)		
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Yes
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Yes
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Yes
	d on your answers to the above, in your opinion was det tion of its effect?	tection bias present? If so, what is the likely
Low risk of bias		
Likel	y direction of effect: Not applicable	

## 1.3.4 MIRAL2008

•	y ID	MIRAL2008
544		
	ographic reference:	
	l S, Gencer O, Inal-Emiroglu FN, Baykara B, Baykara A, I	1 1
	ren and adolescents with AD. European Child and Adole	
	eline topic: Management and support of children and	Review question number: 4.1
-	g people on the autism spectrum	
Chec	klist completed by: Odette Megnin-Viggars	
A. Se	lection bias (systematic differences between the compari	son groups)
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which	Unclear (randomisation method was
	would have balanced any confounding factors	unclear)
	equally across groups)	,
A2	There was adequate concealment of allocation (such	
	that investigators, clinicians and participants cannot	Unclear (insufficient detail reported with
	influence enrolment or treatment allocation)	regards to allocation concealment)
A3	The groups were comparable at baseline, including	
	all major confounding and prognostic factors	Unclear (no baseline statistical comparisons
		between groups reported)
Based	d on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely
	tion of its effect?	1
	High risk of bias	
T ·1 1		
Likel	y direction of effect: Effect size bigger	
		n the care provided, apart
B. Pe	rformance bias (systematic differences between groups in	n the care provided, apart
B. Pe		n the care provided, apart
B. Pe from	rformance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart
B. Pe	rformance bias (systematic differences between groups in the intervention under investigation) The comparison groups received the same care apart	n the care provided, apart
B. Pe from	rformance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart Unclear (insufficient detail reported)
B. Pe from	rformance bias (systematic differences between groups in the intervention under investigation) The comparison groups received the same care apart	
B. Pe from B1	rformance bias (systematic differences between groups in the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)
B. Pe from	rformance bias (systematic differences between groups in the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied Participants receiving care were kept 'blind' to	Unclear (insufficient detail reported) Unclear (paper states 'Double-blind' but
B. Pe from B1	rformance bias (systematic differences between groups in the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported) Unclear (paper states 'Double-blind' but gives no further detail with regards to who
B. Pe from B1	rformance bias (systematic differences between groups in the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied Participants receiving care were kept 'blind' to	Unclear (insufficient detail reported) Unclear (paper states 'Double-blind' but gives no further detail with regards to who is blinded, i.e. participant, parent,
B. Pe from B1	rformance bias (systematic differences between groups in the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied Participants receiving care were kept 'blind' to	Unclear (insufficient detail reported) Unclear (paper states 'Double-blind' but gives no further detail with regards to who is blinded, i.e. participant, parent, investigator, intervention administrator,
B. Pe from B1 B2	rformance bias (systematic differences between groups in the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied Participants receiving care were kept 'blind' to treatment allocation	Unclear (insufficient detail reported) Unclear (paper states 'Double-blind' but gives no further detail with regards to who is blinded, i.e. participant, parent, investigator, intervention administrator, outcome assessor)
B. Pe from B1	rformance bias (systematic differences between groups in the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied Participants receiving care were kept 'blind' to treatment allocation Individuals administering care were kept 'blind' to	Unclear (insufficient detail reported) Unclear (paper states 'Double-blind' but gives no further detail with regards to who is blinded, i.e. participant, parent, investigator, intervention administrator, outcome assessor) Unclear (paper states 'Double-blind' but
B. Pe from B1 B2	rformance bias (systematic differences between groups in the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied Participants receiving care were kept 'blind' to treatment allocation	Unclear (insufficient detail reported) Unclear (paper states 'Double-blind' but gives no further detail with regards to who is blinded, i.e. participant, parent, investigator, intervention administrator, outcome assessor) Unclear (paper states 'Double-blind' but gives no further detail with regards to who
B. Pe from B1 B2	rformance bias (systematic differences between groups in the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied Participants receiving care were kept 'blind' to treatment allocation Individuals administering care were kept 'blind' to	Unclear (insufficient detail reported) Unclear (paper states 'Double-blind' but gives no further detail with regards to who is blinded, i.e. participant, parent, investigator, intervention administrator, outcome assessor) Unclear (paper states 'Double-blind' but

		outcome assessor)	
Dered			
	l on your answers to the above, in your opinion was per ion of its effect?	formance bias present? If so, what is the likely	
uncer			
	Unclear/unknown risk of bias		
Likely	v direction of effect: Unknown direction		
С Ан	trition bias (systematic differences between the comparis	on groups with respect to loss of participants)	
C. Au	union bias (systematic unterences between the comparis	son groups whit respect to loss of participants)	
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)		
C2	a. How many participants did not complete treatment in each group?		
	Experimental group N: 2; Control group N: 0		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	Yes	
	systematic differences between groups in terms of		
C2	those who did not complete treatment)	nome data available?	
C3	For how many participants in each group were no outcome data available? Experimental group N: 2; Control group N: 0		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
	l on your answers to the above, in your opinion was attr	ition bias present? If so, what is the likely	
direct	ion of its effect?		
	Low risk of bias		
Likely	v direction of effect: Not applicable		
	r r		

D1	The study had an appropriate length of follow-up	Unclear (unclear if follow-up duration of 12
		weeks is sufficient to detect significant
		treatment effects, in particular, adverse
		events)
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine	Yes
	the outcome	
D4	Investigators were kept 'blind' to participants'	Unclear (paper states 'Double-blind' but
	exposure to the intervention	gives no further detail with regards to who
		is blinded, i.e. participant, parent,
		investigator, intervention administrator,
		outcome assessor)
D5	Investigators were kept 'blind' to other important	Unclear (paper states 'Double-blind' but
	confounding and prognostic factors	gives no further detail with regards to who
		is blinded, i.e. participant, parent,
		investigator, intervention administrator,
		outcome assessor)
Base	d on your answers to the above, in your opinion was de	tection bias present? If so, what is the likely
direc	tion of its effect?	
	Unclear/unknown risk of bias	
Likel	y direction of effect: Unknown direction	

# 1.3.5 NAGARAJ2006

Study	ID	NAGARAJ2006	
Naga	Bibliographic reference: Nagaraj R, Singhi P, Malhi P. Risperidone in children with autism: randomized, placebo-controlled, double- blind study. Journal of Child Neurology. 2006;21:450-455.		
	eline topic: Management and support of children and g people on the autism spectrum	Review question number: 4.1	
	list completed by: Odette Megnin-Viggars		
A. Sel	ection bias (systematic differences between the comparis	son groups)	
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (random number table)	
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Yes (sealed envelopes)	
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes	
	Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?		
Low risk of bias			
Likely direction of effect: Not applicable			
B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)			
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)	
B2	Participants receiving care were kept 'blind' to treatment allocation	Yes	
B3	Individuals administering care were kept 'blind' to treatment allocation	Yes	
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?			

C. Att	rition bias (systematic differences between the comparis	on groups with respect to loss of participants)
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	a. How many participants did not complete treatment i Experimental group N: 0; Control group N: 1	in each group?
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes
C3	For how many participants in each group were no outc Experimental group N: 0; Control group N: 1	ome data available?
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes
Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?		
Low risk of bias		
Likely	v direction of effect: Not applicable	
D. De	D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)	
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Yes

D4	Investigators were kept 'blind' to participants' exposure to the intervention	Yes
D5	Investigators were kept 'blind' to other important	Yes
	confounding and prognostic factors	
D		
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely		
direction of its effect?		
	Low risk of bias	
Likel	y direction of effect: Not applicable	
Likel	y direction of effect: Not applicable	

# 1.4 BIOMEDICAL INTERVENTIONS AIMED AT CORE AUTISM FEATURES

#### 1.4.1 ADAMS2009A

Study	ID	ADAMS2009A	
Adam for ch	Bibliographic reference: Adams JB, Baral M, Geis E, Mitchell J, Ingram J, Hensley A, et al. Safety and efficacy of oral DMSA therapy for children with autism spectrum disorders: part A-medical results. BMC Clinical Pharmacology. 2009a;9:16.		
for ch	Adams JB, Baral M, Geis E, Mitchell J, Ingram J, Hensley A, et al. Safety and efficacy of oral DMSA therapy for children with autism spectrum disorders: part B - behavioral results. BMC Clinical Pharmacology. 2009b;9:17.		
	line topic: Management and support of children and	Review question number: 4.1	
•	g people on the autism spectrum list completed by: Odette Megnin-Viggars		
CHECK	dist completed by. Odette Megnin-viggars		
A. Sel	ection bias (systematic differences between the comparis	son groups)	
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)	
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)	
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Unclear (insufficient detail reported)	
Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?			
Unclear/unknown risk of bias			
Likely direction of effect: Unknown direction			
	B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)		
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)	

B2	Participants receiving care were kept 'blind' to treatment allocation	Yes (placebo matched on appearance and smell)	
B3	Individuals administering care were kept 'blind' to treatment allocation	Yes	
	Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?		
	Low risk of bias		
Likely	v direction of effect: Not applicable		
C. At	trition bias (systematic differences between the comparis	on groups with respect to loss of participants)	
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	a. How many participants did not complete treatment Experimental group N: Not reported; Control group N N=8 dropped out of phase 2 but not clear how many of many in control group	: Not reported	
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Unclear	
C3	For how many participants in each group were no outc Experimental group N: Not reported; Control group N N=8 dropped out of phase 2 but not clear how many of many in control group	: Not reported	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Unclear	

Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?

Low risk of bias (dropout due to adverse events is reported and was comparable between groups)

Yes
Yes
Yes (parent-completed and parents were blinded to treatment assignment)
No (parent-completed and parents non- blind to other potentially confounding factors)
ection bias present? If so, what is the likely

# 1.4.2 ADAMS2011

Study	y ID	ADAMS2011
	ographic reference: ns JB, Audhya T, McDonough-Means S, Rubin RA, Quig	D, Geis E, et al. Effect of a vitamin/mineral
	lement on children and adults with autism. BMC Pediati	
Guid	eline topic: Management and support of children and	Review question number: 4.1
youn	g people on the autism spectrum	
Checl	klist completed by: Odette Megnin-Viggars	
A. Se	lection bias (systematic differences between the compari	son groups)
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Yes (randomisation performed by study coordinator and all other study staff were blinded)
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Unclear (insufficient detail reported)
	d on your answers to the above, in your opinion was sele tion of its effect?	ection bias present? If so, what is the likely
Likely	Unclear/unknown risk of bias y direction of effect: Unknown direction	
	rformance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (percentage of participants currently receiving psychosocial interventions in each group not reported)
B2	Participants receiving care were kept 'blind' to treatment allocation	Yes (placebo and supplement matched on taste)
B3	Individuals administering care were kept 'blind' to treatment allocation	Yes (parents were intervention administrators and were blinded)
	l on your answers to the above, in your opinion was per tion of its effect?	formance bias present? If so, what is the likely

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)		
C1	All groups were followed up for an equal length of	
	time (or analysis was adjusted to allow for	Yes
	differences in length of follow-up)	
C2	a. How many participants did not complete treatment i	in each group?
	Experimental group N: 8; Control group N: 11	
	b. The groups were comparable for treatment	
	completion (that is, there were no important or	Yes
	systematic differences between groups in terms of	ies
	those who did not complete treatment)	
C3	For how many participants in each group were no outc	come data available?
	Experimental group N: 19; Control group N: 18	
	b. The groups were comparable with respect to the	
	availability of outcome data (that is, there were no	
	important or systematic differences between groups	Yes
	in terms of those for whom outcome data were not	
	available).	
Based	on your answers to the above, in your opinion was attri	tion bias present? If so, what is the likely
direction of its effect?		
Low risk of bias		
Likely	direction of effect: Not applicable	
DD		1
D. De	tection bias (bias in how outcomes are ascertained, diagr	nosea or verifiea)
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes

D3	A valid and reliable method was used to determine	Different for different outcomes: No for
-	the outcome	Parent Global Impressions-Revised (PGI-R)
		as revised scale and no independent
		reliability and validity ratings;
		Unclear/unknown for Severity of Autism
		Scale (SAS) as reliability and validity of this
		outcome measure is not reported and
		unclear; and unclear/unknown for adverse
		event outcomes as unclear outcome measure
		for recording adverse events
D4	Investigators were kept 'blind' to participants'	Yes
	exposure to the intervention	
D5	Investigators were kept 'blind' to other important	Different for different outcomes: No for
	confounding and prognostic factors	most outcomes (with the exception of
		adverse events) as parent-rated and parents
		non-blind to other potentially confounding
		factors
	d on your answers to the above, in your opinion was de tion of its effect?	tection bias present? If so, what is the likely
	Different for different outcomes: Unclear/unknown	risk for Parent Global Impressions-Revised
(PGI-	R) scale and Severity of Autism Scale (SAS)	nok tor i aren Giobar impressions Revised
Likel	y direction of effect: Where risk unclear/unknown, dire	ection unknown
	, ,	

# 1.4.3 BAHRAMI2012

Study	ID	BAHRAMI2012		
	Bibliographic reference:			
	Bahrami F, Movahedi A, Marandi SM, Abedi A. Kata techniques training consistently decreases stereotypy in children with autism spectrum disorder. Research in Developmental Disabilities. 2012;33:1183-1193.			
	eline topic: Management and support of children and	Review question number: 4.1		
	g people on the autism spectrum	Review question number: 4.1		
,	dist completed by: Odette Megnin-Viggars			
A. Sel	ection bias (systematic differences between the comparis	son groups)		
A1	An appropriate method of randomisation was used			
	to allocate participants to treatment groups (which	Unclear (randomisation method is unclear)		
	would have balanced any confounding factors			
10	equally across groups)			
A2	There was adequate concealment of allocation (such	Unclear (insufficient detail reported with		
	that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	regards to allocation concealment)		
A3	The groups were comparable at baseline, including	Yes (matched on age, gender and autism		
110	all major confounding and prognostic factors	severity and no baseline group difference on		
		the outcome measure)		
Based	on your answers to the above, in your opinion was sele	,		
direction of its effect?				
	Unclear/unknown risk of bias			
Likely	Likely direction of effect: Unknown direction			
B. Per	formance bias (systematic differences between groups ir	n the care provided, apart		
	the intervention under investigation)			
B1	The comparison groups received the same care apart			
DI	from the intervention(s) studied			
	nom the mervennom(b) studied	Unclear (insufficient detail reported)		
B2	Participants receiving care were kept 'blind' to			
	treatment allocation	No		
<b>B</b> 0	Individuale administering care ware least this of the			
B3	Individuals administering care were kept 'blind' to treatment allocation	No		
Based	on your answers to the above, in your opinion was perf	ormance bias present? If so, what is the likely		
	ion of its effect?			

High risk of bias

Likely direction of effect: Effect size bigger

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)		
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	a. How many participants did not complete treatment i Experimental group N: 0; Control group N: 0	in each group?
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes
C3	For how many participants in each group were no outc Experimental group N: 0; Control group N: 0	come data available?
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes
Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?		
	Low risk of bias	
Likely	direction of effect: Not applicable	
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes

D3	A valid and reliable method was used to determine	Yes
	the outcome	
D4	Investigators were kept 'blind' to participants'	Unclear (outcome measure based on
	exposure to the intervention	interview with carers and teachers who
		were non-blind and blinding of examiner
		not reported)
D5	Investigators were kept 'blind' to other important	Unclear (outcome measure based on
	confounding and prognostic factors	interview with carers and teachers who
		were non-blind and blinding of examiner
		not reported)
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely		ection bias present? If so, what is the likely
direction of its effect?		
	High risk of bias	
Likel	y direction of effect: Effect size bigger	

## 1.4.4 CHAN2009

Study	7 ID	CHAN2009	
Chan intera	ographic reference: AS, Cheung M-C, Sze SL, Leung WW. Seven-star needle action of children with autistic spectrum disorders. Ame 37:495-504		
Guide	2009;37:495-504.         Guideline topic: Management and support of children and young people on the autism spectrum    Review question number: 4.1		
	klist completed by: Lucy Burt lection bias (systematic differences between the comparis	son groups)	
A. Sel	ection bias (systematic unterences between the company		
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)	
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)	
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes	
Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?			
Unclear/unknown risk of bias Likely direction of effect: Unknown direction			
	formance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart	
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)	
B2	Participants receiving care were kept 'blind' to treatment allocation	No	
B3	Individuals administering care were kept 'blind' to treatment allocation	No	
	l on your answers to the above, in your opinion was perf ion of its effect?	formance bias present? If so, what is the likely	

High risk of bias

Likely direction of effect: Effect size bigger

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	a. How many participants did not complete treatment i Experimental group N: 0; Control group N: 0	in each group?	
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes	
C3	For how many participants in each group were no outc Experimental group N: 0; Control group N: 0	come data available?	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes	
Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?			
Low risk of bias			
Likely	direction of effect: Not applicable		
D. De	D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)		
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	

Da			
D3	A valid and reliable method was used to determine	No (all outcomes are based on a	
	the outcome	questionnaire designed specifically for this	
		study and no information on reliability or	
		validity was reported)	
D4	Investigators were kept 'blind' to participants'	No (outcome measures completed by	
	exposure to the intervention	parents who were not blind)	
D5	Investigators were kept 'blind' to other important	No (outcome measures completed by	
	confounding and prognostic factors	parents who were not blind)	
Based	l on your answers to the above, in your opinion was dete	ection bias present? If so, what is the likely	
direct	direction of its effect?		
	High risk of bias		
Likely	Likely direction of effect: Effect size bigger		

## 1.4.5 CHEZ2002

Study	ID	CHEZ2002		
Chez contro	Bibliographic reference: Chez MG, Buchanan CP, Aimonovitch MC, Becker M, Schaefer K, Black C, et al. Double-blind, placebo- controlled study of L-carnosine supplementation in children with autistic spectrum disorders. Journal of			
Guide young	Child Neurology. 2002;17:833-837.         Guideline topic: Management and support of children and young people on the autism spectrum    Review question number: 4.1			
	clist completed by: Odette Megnin-Viggars ection bias (systematic differences between the comparis	son groups)		
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)		
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Yes (nurse-controlled randomisation)		
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	No (significant baseline group difference [p=0.02] on the communication subscale of the Gilliam Autism Rating Scale with the experimental group showing greater severity [mean: 21.64] than the control group [mean: 15.23])		
	Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?			
Likely	Likely direction of effect: Unknown direction			
	formance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart		
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (42% of participants currently receiving anticonvulsants [valproic acid] but group assignment for these participants not reported and no detail reported with regards to other current medication or psychosocial interventions)		
B2	Participants receiving care were kept 'blind' to treatment allocation	Yes (placebo matched on appearance, taste and smell)		

B3	Individuals administering care were kept 'blind' to treatment allocation	Yes (parents were intervention administrators and were blinded)		
	Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?			
	Low risk of bias			
Likely	v direction of effect: Not applicable			
C. Att	rition bias (systematic differences between the comparis	son groups with respect to loss of participants)		
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes		
C2	a. How many participants did not complete treatment Experimental group N: 0; Control group N: 0	in each group?		
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes		
C3	For how many participants in each group were no outc Experimental group N: 0; Control group N: 0	come data available?		
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes		
	on your answers to the above, in your opinion was attri	ition bias present? If so, what is the likely		
direction of its effect? Low risk of bias				
Likely direction of effect: Not applicable				
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)		
D1	The study had an appropriate length of follow-up	Yes		
D2	The study used a precise definition of outcome	Yes		

D3	A valid and reliable method was used to determine	Yes	
	the outcome		
D4	Investigators were kept 'blind' to participants'	Yes	
	exposure to the intervention		
D5	Investigators were kept 'blind' to other important	Different for different outcomes: No for	
	confounding and prognostic factors	parent-rated as parents non-blind to other	
		potentially confounding factors;	
		Unclear/unknown for other outcome	
		measures as blinded outcome assessment	
		but identity of outcome assessor (and	
		blinding to other potentially confounding	
		factors) not reported	
Based	d on your answers to the above, in your opinion was det	ection bias present? If so, what is the likely	
direc	tion of its effect?		
	Low risk of bias		
Likel	y direction of effect: Not applicable		

# 1.4.6 CONIGLIO2001

Bibliographic reference:       Coniglio SJ, Lewis JD, Lang C, Burns TG, Subhani-Siddique R, Weintraub A, et al. A randomized, double-blind, placebo-controlled trial of single-dose intravenous secretin as treatment for children with autism. Journal of Pediatrics. 2001;138:649-655.         Guideline topic: Management and support of children and youg people on the autism spectrum       Review question number: 4.1         Checklist completed by: Lucy Burt       A.         A. Selection bias (systematic differences between the comparison groups)       Unclear (randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)       Unclear (randomisation method is unclear)         A2       There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)       Unclear (insufficient detail reported with regards to allocation concealment)         A3       There groups were comparable at baseline, including all major confounding and prognostic factors       No (significant differences were found on measures of: frequency of abnormal development from birth onwards; 3 of 15 [unspecified] characteristics of DSM-IV criteria for autism; PI S language age score)         Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of effect: Unknown direction       Unclear (insufficient detail reported)         B1       The comparison groups received the same care apart from the intervention wide in the vention(s) studied       Unclear (insufficient detail reported)         B	Study ID		CONIGLIO2001	
blind, placebo-controlled trial of single-dose intravenous secretin as treatment for children with autism.       Journal of Pediatrics. 2001;138:649-655.         Guideline topic: Management and support of children and young people on the autism spectrum       Review question number: 4.1         A. Selection bias (systematic differences between the comparison groups)       An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)       Unclear (randomisation method is unclear)         A2       There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)       No (significant differences were found on measures of: frequency of abnormal development from birth onwards; 3 of 15 [unspecified] characteristics of DSM-IV criteria for autism; PLS language age score)         Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of effect: Unknown direction       Inclear (insufficient detail reported)         B1       The comparison groups received the same care apart from the intervention (s) studied       Unclear (insufficient detail reported)         B1       The comparison groups received the same care apart from the intervention(s) studied       Unclear (insufficient detail reported)         B1       The comparison groups received the same care apart from the intervention(s) studied       Yes         B1       The comparison groups received the same care apart from the intervention(s) studied       <	Bibliographic reference:			
Journal of Pediatrics. 2001;138:649-655.         Guideline topic: Management and support of children and young people on the autism spectrum       Review question number: 4.1         Checklist completed by: Lucy Burt       Imagement and support of children and support of children and young heople on the autism spectrum         A. Selection bias (systematic differences between the comparison groups)       Imagement and young heople on the autism spectrum         A1       An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)       Unclear (randomisation method is unclear)         A2       There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)       No (significant differences were found on measures of: frequency of abnormal development from birth onwards; 3 of 15 [unspecified] characteristics of DSM-IV criteria for autism; PLS language age score)         Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of effect: Unknown risk of bias       Unclear (insufficient detail reported)         Likely direction of effect: Unknown direction       Unclear (insufficient detail reported)         B1       The comparison groups received the same care apart from the intervention (s) studied       Unclear (insufficient detail reported)         B1       The comparison groups received the same care apart from the intervention(s) studied       Yes         B2 <td>Conig</td> <td>lio SJ, Lewis JD, Lang C, Burns TG, Subhani-Siddique R</td> <td>, Weintraub A, et al. A randomized, double-</td>	Conig	lio SJ, Lewis JD, Lang C, Burns TG, Subhani-Siddique R	, Weintraub A, et al. A randomized, double-	
Guideline topic: Management and support of children and young people on the autism spectrum       Review question number: 4.1         Checklist completed by: Lucy Burt       A. Sclection bias (systematic differences between the comparison groups)         A1       An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)       Unclear (randomisation method is unclear)         A2       There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)       Unclear (insufficient detail reported with regards to allocation concealment)         A3       The groups were comparable at baseline, including all major confounding and prognostic factors       No (significant differences were found on measures of: frequency of abnormal development from birth onwards; 3 of 15 [unspecified] characteristics of DSM-IV criteria for autism; PLS language age score)         Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of effect?       Unclear/unknown risk of bias         Likely direction of effect: Unknown direction       B. Performance bias (systematic differences between groups in the care provided, apart from the intervention(s) studied         B1       The comparison groups received the same care apart from the intervention(s) studied       Unclear (insufficient detail reported)         B2       Participants receiving care were kept 'blind' to treatment allocation       Yes         B3<	blind,	placebo-controlled trial of single-dose intravenous secre	etin as treatment for children with autism.	
young people on the autism spectrum     Image: Checklist completed by: Lucy Burt       A. Sel=ction bias (systematic differences between the comparison groups)       A1     An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)     Unclear (randomisation method is unclear)       A2     There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)     Unclear (insufficient detail reported with regards to allocation concealment)       A3     The groups were comparable at baseline, including all major confounding and prognostic factors     No (significant differences were found on measures of: frequency of abnormal development from birth onwards; 3 of 15 (unspecified) characteristics of DSM-IV       Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?     Unclear (unknown risk of bias       Likely direction of effect: Unknown direction     B. Performance bias (systematic differences between groups in the care provided, apart from the intervention(s) studied       B1     The comparison groups received the same care apart from the intervention(s) studied     Vunclear (insufficient detail reported)       B2     Participants receiving care were kept 'blind' to treatment allocation     Yes       B3     Individuals administering care were kept 'blind' to treatment allocation     Vunclear (insufficient detail reports that it was 'double-blind' but unclear if intervention	Journa	al of Pediatrics. 2001;138:649-655.		
Checklist completed by: Lucy Burt       A. Selection bias (systematic differences between the comparison groups)         A1       An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)       Unclear (randomisation method is unclear)         A2       There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)       Unclear (insufficient detail reported with regards to allocation concealment)         A3       The groups were comparable at baseline, including all major confounding and prognostic factors       No (significant differences were found on measures of: frequency of abnormal development from birth onwards; 3 of 15 [unspecified] characteristics of DSM-IV criteria for autism; PLS language age score)         Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?       Unclear (insufficient detail reported)         B1       The comparison groups received the same care apart from the intervention under investigation)       Unclear (insufficient detail reported)         B2       Participants receiving care were kept 'blind' to treatment allocation       Yes         B3       Individuals administering care were kept 'blind' to treatment allocation       Unclear (insufficient factor in intervention	Guide	line topic: Management and support of children and	Review question number: 4.1	
A. Selection bias (systematic differences between the comparison groups)         A1       An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)       Unclear (randomisation method is unclear)         A2       There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)       Unclear (insufficient detail reported with regards to allocation concealment)         A3       The groups were comparable at baseline, including all major confounding and prognostic factors       No (significant differences were found on measures of: frequency of abnormal development from birth onwards; 3 of 15 [unspecified] characteristics of DSM-IV criteria for autism; PLS language age score)         Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?         Unclear/unknown risk of bias         Likely direction of effect: Unknown direction         B. Performance bias (systematic differences between groups in the care provided, apart from the intervention (s) studied         B1       The comparison groups received the same care apart from the intervention(s) studied       Unclear (insufficient detail reported)         B2       Participants receiving care were kept 'blind' to treatment allocation       Yes         B3       Individuals administering care were kept 'blind' to treatment allocation       Unclear (paper reports that it was 'double- blind' but unclear if interv	young	g people on the autism spectrum		
A1       An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)       Unclear (randomisation method is unclear)         A2       There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)       Unclear (insufficient detail reported with regards to allocation concealment)         A3       The groups were comparable at baseline, including all major confounding and prognostic factors       No (significant differences were found on measures of: frequency of abnormal development from birth onwards; 3 of 15 [unspecified] characteristics of DSM-IV criteria for autism, PLS language age score)         Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?       Unclear/unknown risk of bias         Likely direction of effect: Unknown direction       B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)         B1       The comparison groups received the same care apart from the intervention(s) studied       Unclear (insufficient detail reported)         B2       Participants receiving care were kept 'blind' to treatment allocation       Yes         B3       Individuals administering care were kept 'blind' to treatment allocation       Unclear (paper reports that it was 'double-blind' but unclear if intervention	Check	list completed by: Lucy Burt		
IndicateIndicateParticipants to treatment groups (which would have balanced any confounding factors equally across groups)Unclear (randomisation method is unclear)A2There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)Unclear (insufficient detail reported with regards to allocation concealment)A3The groups were comparable at baseline, including all major confounding and prognostic factorsNo (significant differences were found on measures of: frequency of abnormal development from birth onwards; 3 of 15 [unspecified] characteristics of DSM-IV criteria for autism; PLS language age score)Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?Unclear (insufficient detail reported)Likely direction of effect: Unknown risk of biasUnclear (unknown risk of biasLikely direction of effect: Unknown directionUnclear (insufficient detail reported)B1The comparison groups received the same care apart from the intervention under investigation)Unclear (insufficient detail reported)B2Participants receiving care were kept 'blind' to treatment allocationYesB3Individuals administering care were kept 'blind' to treatment allocationUnclear (insufficient in thervention	A. Sel	ection bias (systematic differences between the comparis	son groups)	
would have balanced any confounding factors equally across groups)Unclear (randomisation method is unclear)A2There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)Unclear (insufficient detail reported with regards to allocation concealment)A3The groups were comparable at baseline, including all major confounding and prognostic factorsNo (significant differences were found on measures of: frequency of abnormal development from birth onwards; 3 of 15 [unspecified] characteristics of DSM-IV criteria for autism; PLS language age score)Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?Unclear (insufficient detail reported)Likely direction of effect: Unknown directionBBPerformance bias (systematic differences between groups in the care provided, apart from the intervention (s) studiedB1The comparison groups received the same care apart from the intervention(s) studiedUnclear (insufficient detail reported)B2Participants receiving care were kept 'blind' to 	A1	An appropriate method of randomisation was used		
would have balanced any contounding factors equally across groups)Unclear (insufficient detail reported with regards to allocation concealment)A2There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)Unclear (insufficient detail reported with regards to allocation concealment)A3The groups were comparable at baseline, including all major confounding and prognostic factorsNo (significant differences were found on measures of: frequency of abnormal development from birth onwards; 3 of 15 [unspecified] characteristics of DSM-IV criteria for autism; PLS language age score)Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?Unclear (unknown risk of biasLikely direction of effect: Unknown directionEB. Performance bias (systematic differences between groups in the care provided, apart from the intervention (s) studiedUnclear (insufficient detail reported)B1The comparison groups received the same care apart from the intervention(s) studiedUnclear (insufficient detail reported)B2Participants receiving care were kept 'blind' to treatment allocationYesB3Individuals administering care were kept 'blind' to treatment allocationUnclear (paper reports that it was 'double- blind' but unclear if intervention		to allocate participants to treatment groups (which	Unclear (randomisation method is unclear)	
A2       There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)       Unclear (insufficient detail reported with regards to allocation concealment)         A3       The groups were comparable at baseline, including all major confounding and prognostic factors       No (significant differences were found on measures of: frequency of abnormal development from birth onwards; 3 of 15 [unspecified] characteristics of DSM-IV criteria for autism; PLS language age score)         Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?       Unclear/unknown risk of bias         Likely direction of effect: Unknown direction       B       Performance bias (systematic differences between groups in the care provided, apart from the intervention (s) studied         B1       The comparison groups received the same care apart from the intervention(s) studied       Unclear (insufficient detail reported)         B2       Participants receiving care were kept 'blind' to treatment allocation       Yes         B3       Individuals administering care were kept 'blind' to treatment allocation       Yes		would have balanced any confounding factors	Chelear (randomisation method is unclear)	
that investigators, clinicians and participants cannot influence enrolment or treatment allocation)Unclear (insufficient detail reported with regards to allocation concealment)A3The groups were comparable at baseline, including all major confounding and prognostic factorsNo (significant differences were found on measures of: frequency of abnormal development from birth onwards; 3 of 15 [unspecified] characteristics of DSM-IV criteria for autisn; PLS language age score)Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?Vinclear (insufficient detail reported)Likely direction of effect: Unknown directionIndividuels administering care were kept 'blind' to treatment allocationUnclear (insufficient detail reported)B1Individuals administering care were kept 'blind' to treatment allocationVersB3Individuals administering care were kept 'blind' to treatment allocationVers		equally across groups)		
that investigators, clinicians and participants cannot influence enrolment or treatment allocation)regards to allocation concealment)A3The groups were comparable at baseline, including all major confounding and prognostic factorsNo (significant differences were found on measures of: frequency of abnormal development from birth onwards; 3 of 15 [unspecified] characteristics of DSM-IV criteria for autism; PLS language age score)Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?Vocal and the likely criteria for autism; PLS language age score)Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of effect: Unknown directionVocal and the likely direction of effect: Unknown directionB. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)Unclear (insufficient detail reported)B1The comparison groups received the same care apart from the intervention(s) studiedYesB2Participants receiving care were kept 'blind' to treatment allocationYesB3Individuals administering care were kept 'blind' to treatment allocationUnclear (paper reports that it was 'double- blind' but unclear if intervention	A2	There was adequate concealment of allocation (such	Unclear (insufficient detail reported with	
A3       The groups were comparable at baseline, including all major confounding and prognostic factors       No (significant differences were found on measures of: frequency of abnormal development from birth onwards; 3 of 15 [unspecified] characteristics of DSM-IV criteria for autism; PLS language age score)         Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?       Unclear/unknown risk of bias         Likely direction of effect: Unknown direction       B         B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)       Unclear (insufficient detail reported)         B1       The comparison groups received the same care apart from the intervention(s) studied       Unclear (insufficient detail reported)         B2       Participants receiving care were kept 'blind' to treatment allocation       Yes         B3       Individuals administering care were kept 'blind' to treatment allocation       Unclear (paper reports that it was 'double-blind' but unclear if intervention		that investigators, clinicians and participants cannot		
all major confounding and prognostic factorsmeasures of: frequency of abnormal development from birth onwards; 3 of 15 [unspecified] characteristics of DSM-IV criteria for autism; PLS language age score)Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?Unclear/unknown risk of biasLikely direction of effect: Unknown directionB. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)B1The comparison groups received the same care apart from the intervention(s) studiedUnclear (insufficient detail reported)B2Participants receiving care were kept 'blind' to treatment allocationYesB3Individuals administering care were kept 'blind' to treatment allocationUnclear (insufficient differences the time the intervention		influence enrolment or treatment allocation)	regards to anocation conceannent)	
development from birth onwards; 3 of 15 [unspecified] characteristics of DSM-IV criteria for autism; PLS language age score)Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?Unclear/unknown risk of biasLikely direction of effect: Unknown directionB. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)B1The comparison groups received the same care apart from the intervention(s) studiedB2Participants receiving care were kept 'blind' to treatment allocationB3Individuals administering care were kept 'blind' to treatment allocation	A3	The groups were comparable at baseline, including	No (significant differences were found on	
Image: Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?Image: Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?Image: Image: Imag		all major confounding and prognostic factors	measures of: frequency of abnormal	
Image: criteria for autism; PLS language age score)Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?Unclear/unknown risk of biasLikely direction of effect: Unknown directionB. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)B1The comparison groups received the same care apart from the intervention(s) studiedB2Participants receiving care were kept 'blind' to treatment allocationB3Individuals administering care were kept 'blind' to treatment allocationUnclear (paper reports that it was 'double- blind' but unclear if intervention			development from birth onwards; 3 of 15	
Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?         Unclear/unknown risk of bias         Likely direction of effect: Unknown direction         B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)         B1         The comparison groups received the same care apart from the intervention(s) studied         Unclear (insufficient detail reported)         B2         Participants receiving care were kept 'blind' to treatment allocation         Yes         B3         Individuals administering care were kept 'blind' to treatment allocation         Unclear (paper reports that it was 'double-blind' but unclear if intervention			[unspecified] characteristics of DSM-IV	
direction of its effect?Unclear/unknown risk of biasLikely direction of effect: Unknown directionB. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)B1The comparison groups received the same care apart from the intervention(s) studiedB2Participants receiving care were kept 'blind' to treatment allocationYesB3Individuals administering care were kept 'blind' to treatment allocationUnclear (paper reports that it was 'double- blind' but unclear if intervention			criteria for autism; PLS language age score)	
Unclear/unknown risk of biasLikely direction of effect: Unknown directionB. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)B1The comparison groups received the same care apart from the intervention(s) studiedB1Participants receiving care were kept 'blind' to treatment allocationB2Individuals administering care were kept 'blind' to treatment allocationB3Individuals administering care were kept 'blind' to treatment allocation	Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely			
Likely direction of effect: Unknown directionB. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)B1The comparison groups received the same care apart from the intervention(s) studiedUnclear (insufficient detail reported)B2Participants receiving care were kept 'blind' to treatment allocationYesB3Individuals administering care were kept 'blind' to treatment allocationUnclear (paper reports that it was 'double- blind' but unclear if intervention	direct	direction of its effect?		
Likely direction of effect: Unknown directionB. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)B1The comparison groups received the same care apart from the intervention(s) studiedUnclear (insufficient detail reported)B2Participants receiving care were kept 'blind' to treatment allocationYesB3Individuals administering care were kept 'blind' to treatment allocationUnclear (paper reports that it was 'double- blind' but unclear if intervention	Undeer (unknown risk of bigs			
<ul> <li>B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)</li> <li>B1 The comparison groups received the same care apart from the intervention(s) studied Unclear (insufficient detail reported)</li> <li>B2 Participants receiving care were kept 'blind' to treatment allocation Yes</li> <li>B3 Individuals administering care were kept 'blind' to treatment allocation</li> <li>Unclear (paper reports that it was 'double-blind' but unclear if intervention</li> </ul>		Unclear/unknown risk of bias		
from the intervention under investigation)B1The comparison groups received the same care apart from the intervention(s) studiedUnclear (insufficient detail reported)B2Participants receiving care were kept 'blind' to treatment allocationYesB3Individuals administering care were kept 'blind' to treatment allocationUnclear (paper reports that it was 'double- blind' but unclear if intervention	Likely	Likely direction of effect: Unknown direction		
from the intervention under investigation)B1The comparison groups received the same care apart from the intervention(s) studiedUnclear (insufficient detail reported)B2Participants receiving care were kept 'blind' to treatment allocationYesB3Individuals administering care were kept 'blind' to treatment allocationUnclear (paper reports that it was 'double- blind' but unclear if intervention				
B1The comparison groups received the same care apart from the intervention(s) studiedUnclear (insufficient detail reported)B2Participants receiving care were kept 'blind' to treatment allocationYesB3Individuals administering care were kept 'blind' to treatment allocationUnclear (paper reports that it was 'double- blind' but unclear if intervention	B. Per	formance bias (systematic differences between groups in	n the care provided, apart	
Image: Provide and the intervention (s) studiedImage: Unclear (insufficient detail reported)B2Participants receiving care were kept 'blind' to treatment allocationYesB3Individuals administering care were kept 'blind' to treatment allocationUnclear (paper reports that it was 'double- blind' but unclear if intervention	from	the intervention under investigation)		
Image: Provide and the intervention (s) studiedImage: Unclear (insufficient detail reported)B2Participants receiving care were kept 'blind' to treatment allocationYesB3Individuals administering care were kept 'blind' to treatment allocationUnclear (paper reports that it was 'double- blind' but unclear if intervention				
B2       Participants receiving care were kept 'blind' to treatment allocation       Yes         B3       Individuals administering care were kept 'blind' to treatment allocation       Unclear (paper reports that it was 'double-blind' but unclear if intervention	B1	The comparison groups received the same care apart		
B2Participants receiving care were kept 'blind' to treatment allocationYesB3Individuals administering care were kept 'blind' to treatment allocationUnclear (paper reports that it was 'double- blind' but unclear if intervention		from the intervention(s) studied	Unclear (insufficient detail reported)	
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treatment allocationYesB3Individuals administering care were kept 'blind' to treatment allocationUnclear (paper reports that it was 'double- blind' but unclear if intervention	B2	Participants receiving care were kept 'blind' to		
treatment allocation blind' but unclear if intervention		treatment allocation	Yes	
treatment allocation blind' but unclear if intervention				
treatment allocation blind' but unclear if intervention	B3	Individuals administering care were kept 'blind' to	Unclear (paper reports that it was 'double-	
adminsitrator was blinded)		treatment allocation	blind' but unclear if intervention	
			adminsitrator was blinded)	

Bacad	Decod on more provident to the shore in more printing one profession of the provident of the libely		
	Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?		
uneci			
	Leve del allère		
	Low risk of bias		
т :11.	l'action of effect Niet configuration		
Likely	v direction of effect: Not applicable		
C. Att	rition bias (systematic differences between the comparis	on groups with respect to loss of participants)	
	<b>F</b>		
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)	105	
	<b>-</b>		
C2	a. How many participants did not complete treatment	in each group?	
	Experimental group N: 0; Control group N: 0		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	Yes	
	systematic differences between groups in terms of	165	
	those who did not complete treatment)		
C3	For how many participants in each group were no outc	come data available?	
	Experimental group N: 0; Control group N: 0		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
Basod	on your answers to the above, in your opinion was attri	ition bias present? If so, what is the likely	
	ion of its effect?	thon bias present: It so, what is the likely	
unect	ion of its effect:		
	Low risk of bias		
Likely	v direction of effect: Not applicable		
D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)			
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	

D3	A valid and reliable method was used to determine	Yes	
20	the outcome		
D4	Investigators were kept 'blind' to participants'	Unclear (paper reports that it was 'double-	
	exposure to the intervention	blind' but unclear if outcome assessor/s	
		blinded)	
D5	Investigators were kept 'blind' to other important	Unclear (paper reports that it was 'double-	
	confounding and prognostic factors	blind' but unclear if outcome assessor/s	
		blinded)	
Based	Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely		
direction of its effect?			
	Unclear/unknown risk of bias		
Likely	Likely direction of effect: Unknown direction		

# 1.4.7 DUNNGEIER2000

Study ID		DUNNGEIER2000	
Bibliographic reference: Dunn-Geier J, Ho HH, Auersperg E, Doyle D, Eaves L, Matsuba C, et al. Effect of secretin on children with autism: a randomized controlled trial. Developmental Medicine and Child Neurology. 2000;42:796-802.			
Guide	line topic: Management and support of children and	Review question number: 4.1	
•	g people on the autism spectrum		
Check	clist completed by: Lucy Burt		
A. Sel	ection bias (systematic differences between the comparis	son groups)	
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (computer random number generator)	
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Yes (randomisation sequence generated by an independent statistician)	
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	No (placebo group had a higher PLS-3 score)	
Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?			
	Low risk of bias		
Likely direction of effect: Not applicable			
B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)			
B1	The comparison groups received the same care apart from the intervention(s) studied	Yes	
B2	Participants receiving care were kept 'blind' to treatment allocation	Yes	
B3	Individuals administering care were kept 'blind' to treatment allocation	Yes	
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?			

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)	105	
C2	a. How many participants did not complete treatment i	in each group?	
	Experimental group N: 0; Control group N: 0		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	Yes	
	systematic differences between groups in terms of	165	
	those who did not complete treatment)		
C3	For how many participants in each group were no outc	ome data available?	
	Experimental group N: 0; Control group N: 0		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
Based	on your answers to the above, in your opinion was attri	tion bias present? If so, what is the likely	
direction of its effect?			
	Low risk of bias		
Likely	direction of effect: Not applicable		
D. De	tection bias (bias in how outcomes are ascertained, diagr	nosed or verified)	
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	

D3	A valid and reliable method was used to determine	Different validity and reliability for different
	the outcome	outcomes:
		Yes - CARS; PLS-3; ABC
		Unclear - parent-rated number of
		gastrointestinal problems
D4	Investigators were kept 'blind' to participants'	Yes (parents and clinicians were blind to
	exposure to the intervention	treatment allocation)
D5	Investigators were kept 'blind' to other important	Different blinding for different outcomes:
	confounding and prognostic factors	No - ABC; parent-rated number of
		gastrointestinal problems - parent rated and
		parents are not blind to confounding factors
		Unclear - CARS; PLS-3 - clinician rated and
		although clinicians were blind to treatment
		allocation, blinding to confounding
		variables is unclear
Base	d on your answers to the above, in your opinion was det	ection bias present? If so, what is the likely
direc	tion of its effect?	
	Low risk of bias	
Likel	y direction of effect: Not applicable	

#### 1.4.8 FAHMY2013

Study	ID	FAHMY2013
Fahm	graphic reference: y SF, El-hamamsy MH, Zaki OK, Badary OA. L-Carnitin toms in autistic children. Research in Autism Spectrum I	
	line topic: Management and support of children and	Review question number: 4.1
-	g people on the autism spectrum	
Check	list completed by: Odette Megnin-Viggars	
A. Sel	ection bias (systematic differences between the comparis	son groups)
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (coin tossing)
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes
Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?		
	Unclear/unknown risk of bias	
Likely	v direction of effect: Unknown direction	
B. Per	formance bias (systematic differences between groups ir	n the care provided, apart
from the intervention under investigation)		
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)
B2	Participants receiving care were kept 'blind' to treatment allocation	Yes
B3	Individuals administering care were kept 'blind' to treatment allocation	Yes
	on your answers to the above, in your opinion was perf	formance bias present? If so, what is the likely
direction of its effect?		

C. Att	rition bias (systematic differences between the comparis	on groups with respect to loss of participants)
C1	All groups were followed up for an equal length of	
	time (or analysis was adjusted to allow for	Yes
	differences in length of follow-up)	
C2	a. How many participants did not complete treatment i	in each group?
	Experimental group N: 1; Control group N: 4	
	b. The groups were comparable for treatment	
	completion (that is, there were no important or	Yes
	systematic differences between groups in terms of	105
	those who did not complete treatment)	
C3	For how many participants in each group were no outc	come data available?
	Experimental group N: 1; Control group N: 4	
	b. The groups were comparable with respect to the	
	availability of outcome data (that is, there were no	
	important or systematic differences between groups	Yes
	in terms of those for whom outcome data were not	
	available).	
Based	on your answers to the above, in your opinion was attri	tion bias present? If so, what is the likely
direct	ion of its effect?	
	Low risk of bias	
Likely	direction of effect: Not applicable	
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes

D3	A valid and reliable method was used to determine	Yes	
20	the outcome		
D4	Investigators were kept 'blind' to participants'	Yes	
	exposure to the intervention		
D5	Investigators were kept 'blind' to other important	Unclear	
	confounding and prognostic factors		
Based	Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely		
direct	direction of its effect?		
	Low risk of bias		
Likely direction of effect: Not applicable			

# 1.4.9 GRANPEESHEH2010

Study	TD	GRANPEESHEH2010
Study		
Biblio	graphic reference:	
	beesheh D, Tarbox J, Dixon DR, Wilke AE, Allen MS, Bra	adstreet JJ. Randomized trial of hyperbaric
-	en therapy for children with autism. Research in Autism	
	eline topic: Management and support of children and	Review question number: 4.1
	g people on the autism spectrum	-
Check	list completed by: Odette Megnin-Viggars	
A. Sel	ection bias (systematic differences between the compari	son groups)
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which	Voc (coin togging)
	would have balanced any confounding factors	Yes (coin tossing)
	equally across groups)	
A2	There was adequate concealment of allocation (such	Unclear (randomisation was done by an
	that investigators, clinicians and participants cannot	investigator blind to all participant details
	influence enrolment or treatment allocation)	except participant number, age and number
		of ABA treatment hours being received but
		method of allocation concealment not
		specified)
A3	The groups were comparable at baseline, including	No (statistically significant baseline group
	all major confounding and prognostic factors	difference in ABC Irritability and RBS Self-
		injurious behaviour with higher scores in
		the control group)
	on your answers to the above, in your opinion was sele	ection bias present? If so, what is the likely
direct	ion of its effect?	
	Unclear/unknown risk of bias	
T ·1 1		
Likely	v direction of effect: Unknown direction	
B. Per	formance bias (systematic differences between groups in	n the care provided, apart
from	the intervention under investigation)	
D1	The comparison many section 1 the sector of	
B1	The comparison groups received the same care apart from the intervention(a) studied	Unclear (no differences in number of hours
	from the intervention(s) studied	of ABA treatment but no detail reported with regards to any pharmacological
		0 11 0
		interventions participants might have been
BO	Participants receiving care ware least (blind) to	receiving)
B2	Participants receiving care were kept 'blind' to treatment allocation	Yes (attention-placebo condition)
		res (attention-placebo condition)

	Individuals administering care were kept 'blind' to treatment allocation on your answers to the above, in your opinion was perf ion of its effect? Unclear/unknown risk (low risk for response bias and	
Likely	v direction of effect: Effect size bigger, where high risk	
C. Att	trition bias (systematic differences between the comparis	on groups with respect to loss of participants)
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	a. How many participants did not complete treatment = Experimental group N: Not reported; Control group N N=12 dropped out but the paper does not report the gr b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	: Not reported
C3	For how many participants in each group were no outcome data available?         Experimental group N: Not reported; Control group N: Not reported         N=12 dropped out but the paper does not report the groups these participants were assigned to	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Unclear
	on your answers to the above, in your opinion was attri ion of its effect?	tion bias present? If so, what is the likely
	Unclear/unknown risk of bias	
Likely	v direction of effect: Unknown direction	
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)
D1	The study had an appropriate length of follow-up	Yes

D2	The study used a precise definition of outcome	Different for different outcomes: Unclear for
		dichotomous measures of positive treatment
		response based on the ADOS as definition of
		'improvement' on the ADOS is under-
		specified in the paper
D3	A valid and reliable method was used to determine	Different for different outcomes: Unclear for
	the outcome	dichotomous measures of positive treatment
		response based on the ADOS as definition of
		'improvement' on the ADOS is under-
		specified in the paper. Also unclear for
		behavioural observation outcome measures
		as only 30-46% of behavioural observations
		were double-coded and no standardized
		observation schedule used so reliability and
		validity of this outcome measure unclear
D4	Investigators were kept 'blind' to participants'	Yes
	exposure to the intervention	
D5	Investigators were kept 'blind' to other important	Unclear (outcome assessors were trained
	confounding and prognostic factors	assessors blinded to group assignment but
		blinding to other potentially confounding
		factors unclear)
Based	d on your answers to the above, in your opinion was de	tection bias present? If so, what is the likely
direc	tion of its effect?	-
	Low risk of bias	
T :1 1	- Alexandra - Collect Matrice 11 - 11	
Likel	y direction of effect: Not applicable	

## 1.4.10KNIVSBERG2002

Study	TD	KNIVSBERG2002
Knivs	graphic reference: berg AM, Reichelt KL, Høien T, Nødland M. A randomi istic syndromes. Nutritional Neuroscience. 2002;5:251-20	
	berg AM, Reichelt KL, Høien T, Nødland M. Effect of di itism and Other Developmental Disabilities. 2003;18:247	5
	eline topic: Management and support of children and	Review question number: 4.1
young	g people on the autism spectrum	
Check	dist completed by: Odette Megnin-Viggars	
A. Sel	ection bias (systematic differences between the comparis	son groups)
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Yes (random assignment performed by independent professionals)
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes (pairwise matching on severity of autistic symptoms, age and PIQ)
	on your answers to the above, in your opinion was sele ion of its effect?	ction bias present? If so, what is the likely
	Unclear/unknown risk of bias	
Likely	v direction of effect: Unknown direction	
B. Per	formance bias (systematic differences between groups in	n the care provided, apart
from	the intervention under investigation)	
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)
B2	Participants receiving care were kept 'blind' to treatment allocation	No
B3	Individuals administering care were kept 'blind' to treatment allocation	No (intervention administrators were non- blind parents)

Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely			
direction of its effect?			
	High risk of bias		
Likely	v direction of effect: Effect size bigger		
<u> </u>		••• • • • • • • • • • • • • • • • • • •	
C. Att	rition bias (systematic differences between the comparis	son groups with respect to loss of participants)	
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)		
<u> </u>	a. How many participants did not complete treatment	in each group?	
C2		in each group?	
	Experimental group N: 0; Control group N: 0		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	Yes	
	systematic differences between groups in terms of		
	those who did not complete treatment)		
C3	For how many participants in each group were no outo	come data available?	
	Experimental group N: 0; Control group N: 0		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
Based	on your answers to the above, in your opinion was attri	ition bias present? If so, what is the likely	
direct	ion of its effect?		
	Low risk of bias		
Likely	v direction of effect: Not applicable		
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)	
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	

D3	A valid and reliable method was used to determine	Yes
	the outcome	
D4	Investigators were kept 'blind' to participants'	Unclear (for TOMI identity and blinding of
	exposure to the intervention	outcome assessors unclear, and for DIPAB
		although investigator blinded to group
		assignment outcome measure based on
		parental interview)
D5	Investigators were kept 'blind' to other important	Unclear (for TOMI identity and blinding of
	confounding and prognostic factors	outcome assessors unclear, and for DIPAB
		although investigator blinded to group
		assignment outcome measure based on
		parental interview)
Base	d on your answers to the above, in your opinion was det	ection bias present? If so, what is the likely
direc	tion of its effect?	
	Different for different outcomes: Unclear/unknown	for TOMI and high risk for DIPAB
	,,,,,,,,,,	
Likel	y direction of effect: Effect size bigger, where high risk	

# 1.4.11KOUIJZER2010

Study	TD	KOUIJZER2010
Kouij: prelin	graphic reference: zer MEJ, van Schie HT, de Moor JMH, Gerrits BJL, Buite ninary findings in behavioral, cognitive, and neurophysi rum Disorders. 2010;4:386-399.	-
	eline topic: Management and support of children and g people on the autism spectrum	Review question number: 4.1
Check	klist completed by: Odette Megnin-Viggars	
A. Sel	ection bias (systematic differences between the comparis	son groups)
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	No (group difference in diagnoses - in the experimental group 60% had autism and 40% had PDD-NOS and no participants had Asperger's disorder and in the control group 20% had autism, 40% had PSS-NOS and 40% had Asperger's disorder)
	on your answers to the above, in your opinion was sele ion of its effect?	
	Unclear/unknown risk of bias	
Likely	v direction of effect: Unknown direction	
	formance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)
B2	Participants receiving care were kept 'blind' to treatment allocation	No

B3	Individuals administering care were kept 'blind' to treatment allocation	No
	on your answers to the above, in your opinion was perfion of its effect?	ormance bias present? If so, what is the likely
	High risk of bias	
Likely	v direction of effect: Effect size bigger	
C. Att	rition bias (systematic differences between the comparis	on groups with respect to loss of participants)
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	<ul><li>a. How many participants did not complete treatment is</li><li>Experimental group N: 0; Control group N: 0</li><li>b. The groups were comparable for treatment</li></ul>	in each group?
	completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes
C3	For how many participants in each group were no outc Experimental group N: 0; Control group N: 0	come data available?
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes
	on your answers to the above, in your opinion was attri ion of its effect?	ition bias present? If so, what is the likely
	Low risk of bias	
Likely	v direction of effect: Not applicable	
	tection bias (bias in how outcomes are ascertained, diag	,
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes

D3	A valid and reliable method was used to determine	Yes
	the outcome	
D4	Investigators were kept 'blind' to participants'	No (outcomes were either rated by non-
	exposure to the intervention	blind parents or teachers who would not
		have been blinded as intervention took
		place in school or after school)
D5	Investigators were kept 'blind' to other important	No (outcomes were either rated by non-
	confounding and prognostic factors	blind parents or teachers who would not
		have been blinded as intervention took
		place in school or after school)
Basec	d on your answers to the above, in your opinion was de	ection bias present? If so, what is the likely
direct	tion of its effect?	
	High risk of bias	
Likel	y direction of effect: Effect size bigger	
•		

### 1.4.12MOLLOY2002

Study	TD	MOLLOY2002	
Bibliographic reference: Molloy CA, Manning-Courtney P, Swayne S, Bean J, Brown JM, Murray DS, et al. Lack of benefit of intravenous synthetic human secretin in the treatment of autism. Journal of Autism and Developmental Disorders. 2002;32:545-551.			
Guide	eline topic: Management and support of children and	Review question number: 4.1	
	g people on the autism spectrum klist completed by: Lucy Burt		
	ection bias (systematic differences between the compari	son groups)	
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)	
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)	
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes	
Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect? Unclear/unknown risk of bias			
Likely	v direction of effect: Unknown direction		
B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)			
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)	
B2	Participants receiving care were kept 'blind' to treatment allocation	Yes	
B3	Individuals administering care were kept 'blind' to treatment allocation	Yes	
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?			

Low risk of bias

Likely direction of effect: Not applicable

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)	105	
C2	a. How many participants did not complete treatment i	in each group?	
	Experimental group N: 0; Control group N: 0		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	Yes	
	systematic differences between groups in terms of	105	
	those who did not complete treatment)		
C3	For how many participants in each group were no outc	come data available?	
	Experimental group N: 0; Control group N: 0		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
	on your answers to the above, in your opinion was attri	tion bias present? If so, what is the likely	
direct	ion of its effect?		
	Low risk of bias		
Likely direction of effect: Not applicable			
D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)			
		, 	
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	

D3	A valid and reliable method was used to determine	Yes	
	the outcome		
D4	Investigators were kept 'blind' to participants'	Yes	
	exposure to the intervention		
D5	Investigators were kept 'blind' to other important	Unclear (outcome assessments were	
	confounding and prognostic factors	clinician-rated, but unclear if they were	
		blind to confounding factors)	
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely direction of its effect?			
Low risk of bias			
Likely direction of effect: Not applicable			

#### 1.4.13OWLEY1999

1.4.15UWLE11999		
Study	7 ID	OWLEY1999
Bibliographic reference: Owley T, Steele E, Corsello C, Risi S, McKaig K, Lord C, et al. A double-blind, placebo-controlled trial of secretin for the treatment of autistic disorder. Medscape General Medicine. 1999;1(3). Available from: http://www.medscape.com/viewarticle/715516.		
contr	y T, McMahon W, Cook EH, Laulhere T, South M, Mays olled trial of porcine secretin in autism. Journal of the A niatry. 2001;40:1293-1299.	-
Guide youn	eline topic: Management and support of children and g people on the autism spectrum	Review question number: 4.1
Checl	klist completed by: Lucy Burt	
A. Sel	ection bias (systematic differences between the compari-	son groups)
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Yes (allocation was carried out by investigational pharmacy at each site)
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	No (the groups were significantly different on the ADOS: social interaction and the ADOS: stereotypy)
	l on your answers to the above, in your opinion was sele ion of its effect?	
Unclear/unknown risk of bias		
Likely	v direction of effect: Unknown direction	
B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)		
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)
B2	Participants receiving care were kept 'blind' to treatment allocation	Yes

B3	Individuals administering care were kept 'blind' to treatment allocation	Unclear (care administrators were not reported, but care administrators were not involved in outcome measures)	
	on your answers to the above, in your opinion was per ion of its effect?	formance bias present? If so, what is the likely	
	Low risk of bias		
Likely	v direction of effect: Not applicable		
C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)	
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	a. How many participants did not complete treatment Experimental group N: 0; Control group N: 0	in each group?	
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes	
C3	For how many participants in each group were no outo Experimental group N: 0; Control group N: 0	come data available?	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes	
	on your answers to the above, in your opinion was attr ion of its effect?	ition bias present? If so, what is the likely	
	Low risk of bias		
Likely direction of effect: Not applicable			
	tection bias (bias in how outcomes are ascertained, diag	,	
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	

D3	A valid and reliable method was used to determine	Yes
	the outcome	
D4	Investigators were kept 'blind' to participants'	Yes (parents and outcome assessors were
	exposure to the intervention	blind to treatment allocation)
D5	Investigators were kept 'blind' to other important	Different blinding for different outcomes:
	confounding and prognostic factors	No - GARS; VABS - parent rated and
		parents are not blind to confounding factors
		Unclear - ADOS; ABC; CGI-S;
		Mullen/DAS/PPVT/DTVP-2 - outcome
		assessors not reported so unclear whether
		they are blind to treatment allocation
	d on your answers to the above, in your opinion was det tion of its effect?	ection bias present? If so, what is the likely
Low risk of bias		
Likel	y direction of effect: Not applicable	

## 1.4.14SAMPANTHAVIVAT2012

Stud	y ID	SAMPANTHAVIVAT2012
Samp treat	ographic reference: panthavivat M, Singkhwa W, Chaiyakul T, Karoonyawar ment of childhood autism: a randomised controlled trial. :42:128-133.	<u>, , , , , , , , , , , , , , , , , , , </u>
Guid youn	eline topic: Management and support of children and ag people on the autism spectrum klist completed by: Odette Megnin-Viggars	Review question number: 4.1
A. Se	election bias (systematic differences between the compari	son groups)
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (random number table)
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Yes (only the hyperbaric technicians were aware of allocation)
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes
	tion of its effect? Low risk of bias	
B. Pe	y direction of effect: Not applicable rformance bias (systematic differences between groups i the intervention under investigation)	n the care provided, apart
B1	The comparison groups received the same care apart from the intervention(s) studied	Yes (no significant group differences in the number of participants currently receiving risperidone, other medications, nutritional supplements or behavioural therapy)
B2	Participants receiving care were kept 'blind' to treatment allocation	Yes
B3	Individuals administering care were kept 'blind' to treatment allocation	No (intervention administrators were hyperbaric technicians who were not blind to treatment allocation, but were not involved in outcome assessments and did not reveal allocation to parents, participants

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		or researchers)	
Based	l on your answers to the above, in your opinion was per	formance bias present? If so, what is the likely	
	ion of its effect?	-	
	Unclear/unknown risk (High risk for performance bi	as and low risk for response bias)	
		· ,	
Likely	v direction of effect: Effect size bigger, where high risk		
<u> </u>			
C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)	
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)	165	
C2	a. How many participants did not complete treatment	in each group?	
	Experimental group N: 1; Control group N: 1		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	Yes	
	systematic differences between groups in terms of		
	those who did not complete treatment)		
C3	For how many participants in each group were no out	come data available?	
	Experimental group N: 1; Control group N: 1		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
D 1	available).		
	l on your answers to the above, in your opinion was attr	ition bias present? If so, what is the likely	
direction of its effect?			
Low risk of bias			
Likely direction of offset. Not applicable			
Likely direction of effect: Not applicable			
D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)			
D. Detector one (one in now outcomes are ascertance, diagnosed or vernice)			

D1	The study had an appropriate length of follow-up	Different for different outcome measures:
		Yes for positive treatment effect measures
		Unclear for adverse events (unclear if 4
		weeks sufficient follow-up duration to
		detect potential longer-term adverse events
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine	Different for different outcome measures:
	the outcome	Yes for positive treatment effect measures
		Unclear for adverse events as outcome
		measure not reported
D4	Investigators were kept 'blind' to participants'	Different for different outcome measures:
	exposure to the intervention	Yes for positive treatment effect measures
		Unclear for adverse events as identity and
		blinding of outcome assessors not reported
D5	Investigators were kept 'blind' to other important	Different for different outcome assessors:
	confounding and prognostic factors	No for parents and unclear for clinicians for
		positive treatment outcomes
		Unclear for adverse event outcomes as
		identity and blinding of outcome assessors
		not reported
	d on your answers to the above, in your opinion was det	tection bias present? If so, what is the likely
direc	tion of its effect?	
	Different for different outcomes:	
Low	risk for positive treatment effect outcomes	
Uncl	ear/unknown risk for adverse event outcomes	
Likel	y direction of effect: Effect size smaller (for adverse ever	nt outcomes)

## 1.4.15 SANDLER 1999

Study ID	SANDLER1999	
Bibliographic reference:		
Sandler AD, Sutton KA, DeWeese J, Girardi A, Sheppard V, Bodfish JW. Lack of benefit of a single dose of		
synthetic human secretin in the treatment of autism and pervasive developmental disorder. New England		
Journal of Medicine. 1999;341:1801-1806.		
Guideline topic: Management and support of children and	Review question number: 4.1	
young people on the autism spectrum		
Checklist completed by: Lucy Burt		
A. Selection bias (systematic differences between the comparison groups)		

A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)	
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)	
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes	
	on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely	
direct	ion of its effect?		
	Unclear/unknown risk of bias		
Likely	v direction of effect: Unknown direction		
	B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)		
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)	
B2	Participants receiving care were kept 'blind' to treatment allocation	Yes	
B3	Individuals administering care were kept 'blind' to treatment allocation	Yes	
Based	on your answers to the above, in your opinion was perf	formance bias present? If so, what is the likely	
direct	ion of its effect?		
	Low risk of bias		
Likely	Likely direction of effect: Not applicable		
C. Att	C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)		
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	

C2	a. How many participants did not complete treatment in each group?		
C2	Experimental group N: 2; Control group N: 2		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	Yes	
	systematic differences between groups in terms of		
	those who did not complete treatment)		
C3	For how many participants in each group were no outo	come data available?	
	Experimental group N: 2; Control group N: 2		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
Based	Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely		
direction of its effect?			
	Low risk of bias		
	Low risk of blas		
Lilol	direction of offects Net applicable		
Likely	v direction of effect: Not applicable		
DD			
D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)			
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	

D3	A valid and reliable method was used to determine	Yes	
	the outcome		
D4	Investigators were kept 'blind' to participants'	Yes	
	exposure to the intervention		
D5	Investigators were kept 'blind' to other important	No (outcome assessors were parents and	
	confounding and prognostic factors	teachers who were not blind to confounding	
		factors)	
Based	Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely		
direction of its effect?			
	Low risk of bias		
Likel	Likely direction of effect: Not applicable		

## 1.4.16UNIS2002

Study	Y ID	UNIS2002		
Biblic	graphic reference:			
	AS, Munson JA, Rogers SJ, Goldson E, Osterling J, Gabri	els R, et al. A randomized, double-blind,		
	bo-controlled trial of porcine versus synthetic secretin fo			
-	merican Academy of Child and Adolescent Psychiatry. 2			
	eline topic: Management and support of children and	Review question number: 4.1		
	g people on the autism spectrum	-		
	klist completed by: Lucy Burt			
A. Sel	ection bias (systematic differences between the compari-	son groups)		
A1	An appropriate method of randomisation was used			
	to allocate participants to treatment groups (which			
	would have balanced any confounding factors	Unclear (randomisation method is unclear)		
	equally across groups)			
A2	There was adequate concealment of allocation (such			
	that investigators, clinicians and participants cannot	Unclear (insufficient detail reported with		
	influence enrolment or treatment allocation)	regards to allocation concealment)		
A3	The groups were comparable at baseline, including			
	all major confounding and prognostic factors	Yes		
	······································			
Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely				
direct	ion of its effect?			
	Unclear/unknown risk of bias			
T :1. al	divertion of offert II-lunguer divertion			
Likely	v direction of effect: Unknown direction			
B. Pei	formance bias (systematic differences between groups in	n the care provided, apart		
	the intervention under investigation)			
	0 /			
<b>D</b> 4				
B1	The comparison groups received the same care apart			
	from the intervention(s) studied	Unclear (insufficient detail reported)		
B2	Participants receiving care were kept 'blind' to			
	treatment allocation	Yes		
B3	Individuals administering care were kept 'blind' to			
20	treatment allocation	Yes		
Based	l l on your answers to the above, in your opinion was perf	formance bias present? If so, what is the likely		
	ion of its effect?	recent a co, which is the likely		

Low risk of bias

Likely direction of effect: Not applicable

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)		
C2	a. How many participants did not complete treatment i	n each group?	
	Experimental group N: Unclear; Control group N: Uncl	lear	
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	Unclear	
	systematic differences between groups in terms of	Chelean	
	those who did not complete treatment)		
C3	For how many participants in each group were no outcome data available?		
	Experimental group N: Unclear; Control group N: Uncl	lear	
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Unclear	
	in terms of those for whom outcome data were not		
	available).		
	on your answers to the above, in your opinion was attri	tion bias present? If so, what is the likely	
direct	ion of its effect?		
	Unclear/unknown risk of bias		
Likely	direction of effect: Unknown direction		
	testion hiss (hiss in how outcomes are accentained discu	accord on monified)	
D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)			
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	

D3	A valid and reliable method was used to determine	Different validity and reliability for different
	the outcome	measures:
		Yes - ADOS; EOWPVT; CDI; Aberrant
		Behaviour Checklist;
		Unclear - SOS
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Yes
D5	Investigators were kept 'blind' to other important	Different blinding for different measures:
	confounding and prognostic factors	No - CDI; Aberrant Behaviour Checklist;
		SOS: outcome assessors are parents and
		teachers who are not blind to confounding
		factors
		Unclear - ADOS; EOWPVT: outcome
		assessors not reported so unclear if they are
		blind to confounding variables
	l on your answers to the above, in your opinion was det	ection bias present? If so, what is the likely
direct	tion of its effect?	
	Low risk of bias	
Likel	y direction of effect: Not applicable	

## 1.4.17WHITELEY2010

Study ID	WHITELEY2010		
Bibliographic reference: Whiteley P, Haracopos D, Knivsberg A-M, Reichelt KL, Parlar S, Jacobsen J, et al. The ScanBrit randomised, controlled, single-blind study of a gluten- and casein-free dietary intervention for children with autism spectrum disorders. Nutritional Neuroscience. 2010;13:87-100.			
Guideline topic: Management and support of children and young people on the autism spectrum Checklist completed by: Odette Megnin-Viggars	Review question number: 4.1		
A. Selection bias (systematic differences between the compar	ison groups)		
A1 An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)		
A2 There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Yes (allocation performed by independent statistician)		
A3 The groups were comparable at baseline, including all major confounding and prognostic factors	Unclear (insufficient detail reported)		
Based on your answers to the above, in your opinion was sele direction of its effect?	ection bias present? If so, what is the likely		
Unclear/unknown risk of bias			
Likely direction of effect: Unknown direction			
B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)			
B1 The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)		
B2 Participants receiving care were kept 'blind' to treatment allocation	No		
B3 Individuals administering care were kept 'blind' to treatment allocation	No (intervention administrators were non- blind parents)		
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?			

High risk of bias

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)		
C2	a. How many participants did not complete treatment	in each group?	
	Experimental group N: 12; Control group N: 5		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	No	
	systematic differences between groups in terms of		
$\mathcal{C}^{2}$	those who did not complete treatment)		
C3	For how many participants in each group were no outc	come data available?	
	Experimental group N: 12; Control group N: 5 b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	No	
	in terms of those for whom outcome data were not	100	
	available).		
Based	on your answers to the above, in your opinion was attri	tion bias present? If so, what is the likely	
	ion of its effect?		
	High risk of bias		
	0		
Likely	direction of effect: Effect size bigger		
D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)			
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	
177	The study used a precise deminion of outcome	105	

D3	A valid and reliable method was used to determine	Different for different outcomes: Yes for
	the outcome	most outcome measures but unclear for
		adverse events as outcome measure for
		recording adverse events not reported so
		reliability and validity unclear
D4	Investigators were kept 'blind' to participants'	Different for different outcomes: Unclear for
	exposure to the intervention	GARS as identity and blinding of outcome
		assessors not reported; No for VABS and the
		ADHD-IV as parent-reported and non-blind
		to treatment allocation and other potentially
		confounding factors; No for adverse events
		as monitored by study nutritionist who was
		non-blind
D5	Investigators were kept 'blind' to other important	Different for different outcomes: Unclear for
	confounding and prognostic factors	GARS as identity and blinding of outcome
		assessors not reported; No for VABS and the
		ADHD-IV as parent-reported and non-blind
		to treatment allocation and other potentially
		confounding factors; No for adverse events
		as monitored by study nutritionist who was
		non-blind
Base	d on your answers to the above, in your opinion was de	tection bias present? If so, what is the likely
direc	tion of its effect?	
	Different for different outcomes: Unclear/unknown	rick for CAPS and advorce events: High rick
for V	ABS and ADHD-IV	fisk for GARS and adverse events, rightisk
IOF V		
Likel	y direction of effect: Effect size bigger, where high risk	

#### 1.4.18WONG2002

Study	ID	WONG2002		
Bibliographic reference: Wong V, Sun JG. Research on tongue acupuncture in children with autism. The 9th International Child Neurology Congress and the 7th Asian and Oceanian Congress of Child Neurology; 2002.				
Cochr	x DKL, Wong V, Chen WX. Acupuncture for autism spec rane Database of Systematic Reviews. 2011;9:Art. No CD 02/14651858.CD007849.pub2.			
Guide young	line topic: Management and support of children and g people on the autism spectrum	Review question number: 4.1		
	ilist completed by: Lucy Burt ection bias (systematic differences between the comparis			
		son groups)		
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (computer generated randomisation)		
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Yes (random computerised group allocation for each case)		
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Unclear (insufficient detail reported)		
	Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?			
Low risk of bias				
Likely direction of effect: Not applicable				
B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)				
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)		
B2	Participants receiving care were kept 'blind' to treatment allocation	No		
B3	Individuals administering care were kept 'blind' to treatment allocation	No		

Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely			
direction of its effect?			
	High risk of bias		
	0		
Likel	v direction of effect: Effect size bigger		
C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)	
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)		
C2	a. How many participants did not complete treatment	in each group?	
C2	Experimental group N: 0; Control group N: 0	in each group?	
	b. The groups were comparable for treatment		
	completion (that is, there were no important or		
	systematic differences between groups in terms of	Yes	
	those who did not complete treatment)		
C3	For how many participants in each group were no out	come data available?	
0	Experimental group N: 0; Control group N: 0		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
Based	l on your answers to the above, in your opinion was attr	ition bias present? If so, what is the likely	
	ion of its effect?	r i i i i i i i i i i i i i i i i i i i	
	Low risk of bias		
Likel	v direction of effect: Not applicable		
D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)			
D1	The study had an appropriate length of follow-up	Yes	
1			
	The study used a precise definition of outcome	Yes	

D3	A valid and reliable method was used to determine	Different validity and reliability for different	
	the outcome	outcomes:	
		Yes: RLRS; CGI-S	
		Unclear: WeeFIM	
D4	Investigators were kept 'blind' to participants'	Unclear (outcome assessors were blind, but	
	exposure to the intervention	some outcomes [not reported which ones]	
		had involvement from the parents who	
		were not blind)	
D5	Investigators were kept 'blind' to other important	Unclear (outcome assessors were blind, but	
	confounding and prognostic factors	some outcomes [not reported which ones]	
		had involvement from the parents who	
		were not blind)	
Based	Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely		
direct	tion of its effect?		
	Unclear/unknown risk of bias		
Likel	Likely direction of effect: Unknown direction		

#### 1.4.19WONG2008

Study	ID	WONG2008	
Bibliographic reference: Wong CL. Acupuncture and autism spectrum disorders - an assessor-blinded randomised controlled trial (M Phil). Hong Kong: University of Hong Kong; 2008.			
Cochr	c DKL, Wong V, Chen WX. Acupuncture for autism spec ane Database of Systematic Reviews. 2011;9:Art. No CD 12/14651858.CD007849.pub2.		
young	line topic: Management and support of children and geople on the autism spectrum list completed by: Lucy Burt	Review question number: 4.1	
A. Sel	ection bias (systematic differences between the comparis	son groups)	
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (computer generated randomisation)	
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reoprted with regards to allocation concealment)	
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Unclear (insufficient detail reported)	
	Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?		
	Unclear/unknown risk of bias		
Likely direction of effect: Unknown direction			
B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)			
B1	The comparison groups received the same care apart from the intervention(s) studied	No (the conventional education programme differed for each participant which may introduce bias)	
B2	Participants receiving care were kept 'blind' to treatment allocation	No	
B3	Individuals administering care were kept 'blind' to treatment allocation	No	

Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely			
direction of its effect?			
	High risk of bias		
Likely	v direction of effect: Effect size bigger		
C Att	rition bias (systematic differences between the comparis	on groups with respect to loss of participants)	
C. 110	inton blus (systematic unicicices between the comparis	on groups while respect to loss of puricipants)	
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)		
C2	a. How many participants did not complete treatment	in each group?	
	Experimental group N: 4; Control group N: 2	0 1	
	b. The groups were comparable for treatment		
	completion (that is, there were no important or		
	systematic differences between groups in terms of	Yes	
	those who did not complete treatment)		
C3	For how many participants in each group were no outo	come data available?	
	Experimental group N: 4; Control group N: 2		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
Based	on your answers to the above, in your opinion was attr	ition bias present? If so, what is the likely	
direct	ion of its effect?		
	Low risk of bias		
Likely direction of effect: Not applicable			
D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)			
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	

D3	A valid and reliable method was used to determine	Different validity and reliability for different	
	the outcome	measures:	
		Unclear - WeeFIM	
		Yes - all other measures	
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Unclear (outcome assessors were blind, but some outcomes [not reported which ones] had involvement from the parents who were not blind)	
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Unclear (outcome assessors were blind, but some outcomes [not reported which ones] had involvement from the parents who were not blind)	
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely direction of its effect?			
Unclear/unknown risk of bias			
Likel	Likely direction of effect: Unknown direction		

# 1.5 PSYCHOSOCIAL INTERVENTIONS AIMED AT BEHAVIOUR THAT CHALLENGES

#### 1.5.1 AMAN2009

Study	ID	AMAN2009	
J			
Biblio	graphic reference:		
Aman MG, McDougle CJ, Scahill L, Handen B, Arnold LE, Johnson C, et al. Medication and parent training in children with pervasive developmental disorders and serious behavior problems: results from a randomized clinical trial. Journal of the American Academy of Child and Adolescent Psychiatry. 2009;48:1143-1154.			
Arnold LE, Aman MG, Li X, Butter E, Humphries K, Scahill L, et al. Research Units of Pediatric Psychopharmacology (RUPP) autism network randomized clinical trial of parent training and medication: one-year follow-up. Journal of the American Academy of Child and Adolescent Psychiatry. 2012;51:1173- 1184.			
Scahil	l L, McDougle CJ, Aman MG, Johnson C, Handen B, Bea	rss K, et al. Effects of risperidone and parent	
trainir	ng on adaptive functioning in children with pervasive de	evelopmental disorders and serious	
	ioral problems. Journal of American Academy of Child	and Adolescent Psychiatry. 2012;51:136-146.	
	line topic: Management and support of children and	Review question number: 5.1	
	g people on the autism spectrum		
Check	list completed by: Odette Megnin-Viggars		
A. Selection bias (systematic differences between the comparison groups)			
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)	
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)	
A3	The groups were comparable at baseline, including	No (the control group had significantly	
	all major confounding and prognostic factors	higher scores on ABC-Stereotypy and lower scores on Vineland Adaptive Behavior Scale	
		subscales and fewer participants with	
		average IQ than the experimental group at	
D 1	an answer to the charge in a second state of	baseline)	
Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely			

Unclear/unknown risk of bias

direction of its effect?

Likely direction of effect: Unknown direction

B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)			
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)	
B2	Participants receiving care were kept 'blind' to treatment allocation	No	
B3	Individuals administering care were kept 'blind' to treatment allocation	No	
	on your answers to the above, in your opinion was perf ion of its effect?	ormance bias present? If so, what is the likely	
	High risk of bias		
Likely	Likely direction of effect: Effect size bigger		
C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	a. How many participants did not complete treatment i Experimental group N: 20; Control group N: 9	in each group?	
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	No	
C3	For how many participants in each group were no outc Experimental group N: 20; Control group N: 9	come data available?	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	No	

Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?

High risk of bias

D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Unclear (no independent measures of reliability or validity reported for the primary outcome measure of Home Situations Questionnaire [HSQ])
D4	Investigators were kept 'blind' to participants' exposure to the intervention	No (outcome measures relied on non-blind parent-report and parents were involved in the intervention)
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	No (outcome measures relied on non-blind parent-report and parents were involved in the intervention)
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely direction of its effect?		
	High risk of bias	

## 1.5.2 CARR2006

Study	7 ID	CARR2006
	pgraphic reference:	
	EG, Blakeley-Smith A. Classroom intervention for illness	-
	opmental disabilities. Behavior Modification. 2006;30:90	-
	eline topic: Management and support of children and	Review question number: 5.1
5	g people on the autism spectrum	
Chec	klist completed by: Odette Megnin-Viggars	
A. Se	lection bias (systematic differences between the comparis	son groups)
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which	
	would have balanced any confounding factors	Yes (coin tossing)
	equally across groups)	
A2	There was adequate concealment of allocation (such	
	that investigators, clinicians and participants cannot	Unclear (insufficient detail reported with
	influence enrolment or treatment allocation)	regards to allocation concealment)
A3	The groups were comparable at baseline, including	No (the mean severity of illness was greater
	all major confounding and prognostic factors	for the experimental group than the control
	, , , , , , , , , , , , , , , , , , , ,	group. However, reported ANOVAs control
		for symptom severity)
Based	l on your answers to the above, in your opinion was sele	
	tion of its effect?	r i i i i i i i i i i i i i i i i i i i
-		
	Unclear/unknown risk of bias	
Likel	y direction of effect: Unknown direction	
Linter		
	formance bias (systematic differences between groups in	n the care provided, apart
from	the intervention under investigation)	
B1	The comparison groups received the same care apart	
51	from the intervention(s) studied	
	nom die intervention(o) staaled	Yes
B2	Participants receiving care were kept 'blind' to	
	treatment allocation	No
B3	Individuals administering care were kept 'blind' to	
	treatment allocation	No
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely		
direction of its effect?		

High risk of bias

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)		
C2	a. How many participants did not complete treatment i	in each group?	
	Experimental group N: 1; Control group N: 0		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	Yes	
	systematic differences between groups in terms of	105	
	those who did not complete treatment)		
C3	3 For how many participants in each group were no outcome data available?		
	Experimental group N: 1; Control group N: 0		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
	on your answers to the above, in your opinion was attri	tion bias present? If so, what is the likely	
direct	ion of its effect?		
	Low risk of bias		
Likely	direction of effect: Not applicable		
D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)			
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	No	

D3	A valid and reliable method was used to determine the outcome	No (study-specific outcome measure with no independent reliability or validity data)
D4	Investigators were kept 'blind' to participants' exposure to the intervention	No (outcome assessors were intervention administrators)
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	No (outcome assessors were teaching assistants)
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely direction of its effect?		
High risk of bias		
Likely direction of effect: Effect size bigger		

## 1.5.3 SOFRONOFF2004

Study	y ID	SOFRONOFF2004
	ographic reference:	
	noff K, Leslie A, Brown W. Parent management training olled trial to evaluate a parent based intervention. Autist	
Guid	eline topic: Management and support of children and	Review question number: 5.1
youn	g people on the autism spectrum	
Chec	klist completed by: Odette Megnin-Viggars	
A. Se	lection bias (systematic differences between the compari	son groups)
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear, the paper simply states that participants were randomised as questionnaires were returned)
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Unclear (insufficient detail reported)
	tion of its effect? Unclear/unknown risk of bias	
Likel	y direction of effect: Unknown direction	
	rformance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)
B2	Participants receiving care were kept 'blind' to treatment allocation	No
B3	Individuals administering care were kept 'blind' to treatment allocation	No
	d on your answers to the above, in your opinion was per	l formance bias present? If so, what is the likely
1.	tion of its effect?	

High risk of bias		
Likely direction of effect: Effect size bigger		
C. Att	rition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Unclear (the timing of assessments is not entirely clear from the paper but post- intervention assessments are described as occurring at 1-month and 3-months post- intervention, and if this is accurate, namely that the follow-up periods were calculated from the end of intervention, then the follow-up durations are different for the two active interventions, and unclear for the waitlist control group, as the workshop intervention duration is only one day compared to the six week individual sessions intervention)
C2	a. How many participants did not complete treatment i Experimental group N: 0; Control group N: 0	in each group?
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes
C3	For how many participants in each group were no outcome data available? Experimental group N: 0; Control group N: 0	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes
Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?		
Low risk of bias		
Likely direction of effect: Not applicable		

D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)		
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Yes
D4	Investigators were kept 'blind' to participants'	No (outcome measures were parent-
	exposure to the intervention	reported and parents were the participants
		in the intervention and were non-blind)
D5	Investigators were kept 'blind' to other important	No (outcome measures were parent-
	confounding and prognostic factors	reported and parents were the participants
		in the intervention and were non-blind)
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely		
direct	tion of its effect?	
High risk of bias		
Likel	y direction of effect: Effect size bigger	

## 1.5.4 SOFRONOFF2007

Study	ID	SOFRONOFF2007		
Bibliographic reference:				
	noff K, Attwood T, Hinton S, Levin I. A randomized con	trolled trial of a cognitive behavioural		
	ention for anger management in children diagnosed wit	÷		
	opmental Disorders. 2007;37:1203-1214.			
	line topic: Management and support of children and	Review question number: 5.1		
	g people on the autism spectrum	1		
	list completed by: Lucy Burt			
A. Sel	ection bias (systematic differences between the comparis	son groups)		
A1	An appropriate method of randomisation was used			
	to allocate participants to treatment groups (which	Unclear (randomication method is unclear)		
	would have balanced any confounding factors	Unclear (randomisation method is unclear)		
	equally across groups)			
A2	There was adequate concealment of allocation (such	Unclear (insufficient detail reported with		
	that investigators, clinicians and participants cannot	regards to allocation concealment)		
	influence enrolment or treatment allocation)	regardo to unocution concediment)		
A3	The groups were comparable at baseline, including			
	all major confounding and prognostic factors	Unclear (insufficient detail reported)		
Based	Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely			
direct	ion of its effect?			
	Unclear/unknown risk of bias			
Likely	v direction of effect: Unknown direction			
B. Per	formance bias (systematic differences between groups in	n the care provided, apart		
from	he intervention under investigation)			
B1	The comparison groups received the same care apart			
21	from the intervention(s) studied	Unclose (incufficient detail reported)		
		Unclear (insufficient detail reported)		
B2	Participants receiving care were kept 'blind' to			
	treatment allocation	No		
B3	Individuals administering care were kept 'blind' to			
	treatment allocation	No		
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely				
direction of its effect?				

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)		
C2	a. How many participants did not complete treatment in each group?		
	Experimental group N: Not reported; Control group N: Not reported		
	Following randomization, five families left the study, but information on group allocation of these families is not reported		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	Unclear	
	systematic differences between groups in terms of	Chelean	
	those who did not complete treatment)		
C3	For how many participants in each group were no outcome data available?		
	Experimental group N: Not reported; Control group N: Not reported		
	Following randomization, five families left the study, but information on group allocation of these		
	families is not reported		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Unclear	
	in terms of those for whom outcome data were not		
	available).		
Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely			
direction of its effect?			
Unclear/unknown risk of bias			
Likely direction of effect: Unknown direction			
-			
D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)			
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	

D3	A valid and reliable method was used to determine	No (study-specific outcome measure with	
	the outcome	no independent reliability or validity data)	
D4	Investigators were kept 'blind' to participants'	No (parent-rated and parents were non-	
	exposure to the intervention	blind)	
D5	Investigators were kept 'blind' to other important	No (parent-rated and parents were non-	
	confounding and prognostic factors	blind)	
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely direction of its effect?			
High risk of bias			
Likely direction of effect: Effect size bigger			

### 1.6 PHARMACOLOGICAL INTERVENTIONS AIMED AT BEHAVIOUR THAT CHALLENGES

### 1.6.1 AKHONDZADEH2004

Study	ID	AKHONDZADEH2004
	graphic reference:	
	ndzadeh S, Erfani S, Mohammadi MR, Tehrani-Doost M	
	treatment of autistic disorder: a double-blind placebo-co	ontrolled trial. Journal of Clinical Pharmacy
	herapeutics. 2004;29:145-150.	Deriver and the second second second
	line topic: Management and support of children and	Review question number: 5.1
-	g people on the autism spectrum	
Check	list completed by: Odette Megnin-Viggars	
A. Sel	ection bias (systematic differences between the comparis	son groups)
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which	Yes (computer-generated code)
	would have balanced any confounding factors	res (computer-generated code)
	equally across groups)	
A2	There was adequate concealment of allocation (such	
	that investigators, clinicians and participants cannot	Yes (sealed opaque envelopes)
	influence enrolment or treatment allocation)	
A3	The groups were comparable at baseline, including	
	all major confounding and prognostic factors	Yes
Based	on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely
	ion of its effect?	
	Low risk of bias	
Likely	direction of effect: Not applicable	
B. Per	formance bias (systematic differences between groups in	n the care provided, apart
	the intervention under investigation)	1 ' 1
	0 /	
B1	The comparison groups received the same care apart	
	from the intervention(s) studied	Unclear (insufficient detail reported)
B2	Participants receiving care were kept 'blind' to	
	treatment allocation	Yes

DO		
B3	Individuals administering care were kept 'blind' to	
	treatment allocation	Yes
Based	on your answers to the above, in your opinion was perf	formance bias present? If so, what is the likely
direct	ion of its effect?	
	Low risk of bias	
Likely	v direction of effect: Not applicable	
C. Att	rition bias (systematic differences between the comparis	on groups with respect to loss of participants)
C1	All groups were followed up for an equal length of	
	time (or analysis was adjusted to allow for	Yes
	differences in length of follow-up)	
C2	a. How many participants did not complete treatment	in each group?
	Experimental group N: 0; Control group N: 0	
	b. The groups were comparable for treatment	
	completion (that is, there were no important or	N N
	systematic differences between groups in terms of	Yes
	those who did not complete treatment)	
C3 For how many participants in each group were no outcome data available?		come data available?
Experimental group N: 0; Control group N: 0		
	b. The groups were comparable with respect to the	
	availability of outcome data (that is, there were no	
		Ver
	important or systematic differences between groups	Yes
	in terms of those for whom outcome data were not	
	available).	
	on your answers to the above, in your opinion was attri	ition bias present? If so, what is the likely
direct	ion of its effect?	
	Low risk of bias	
Likely	v direction of effect: Not applicable	
	**	

D3A valid and reliable method was used to determine the outcomeYesD4Investigators were kept 'blind' to participants' exposure to the interventionYesD5Investigators were kept 'blind' to other important confounding and prognostic factorsDifferent for different outcomes: No parent-rated ABC and CARS; Unclea clinician-rated adverse events	D1	The study had an appropriate length of follow-up	Unclear (not clear if 8 weeks is sufficient
D3A valid and reliable method was used to determine the outcomeYesD4Investigators were kept 'blind' to participants' exposure to the interventionYesD5Investigators were kept 'blind' to other important confounding and prognostic factorsDifferent for different outcomes: No parent-rated ABC and CARS; Unclea clinician-rated adverse events			duration to detect adverse events)
the outcome       Yes         D4       Investigators were kept 'blind' to participants' exposure to the intervention       Yes         D5       Investigators were kept 'blind' to other important confounding and prognostic factors       Different for different outcomes: No parent-rated ABC and CARS; Unclear clinician-rated adverse events	D2	The study used a precise definition of outcome	Yes
D4       Investigators were kept 'blind' to participants' exposure to the intervention       Yes         D5       Investigators were kept 'blind' to other important confounding and prognostic factors       Different for different outcomes: No parent-rated ABC and CARS; Unclear clinician-rated adverse events	D3	A valid and reliable method was used to determine	Yes
exposure to the intervention       D5         Investigators were kept 'blind' to other important confounding and prognostic factors       Different for different outcomes: No parent-rated ABC and CARS; Unclear		the outcome	
D5       Investigators were kept 'blind' to other important confounding and prognostic factors       Different for different outcomes: No parent-rated ABC and CARS; Unclear clinician-rated adverse events	D4	Investigators were kept 'blind' to participants'	Yes
confounding and prognostic factors parent-rated ABC and CARS; Unclear clinician-rated adverse events		exposure to the intervention	
clinician-rated adverse events	D5	Investigators were kept 'blind' to other important	Different for different outcomes: No for
		confounding and prognostic factors	parent-rated ABC and CARS; Unclear for
Based on your answers to the above, in your opinion was detection bias present? If so, what is the li			clinician-rated adverse events
	Basec	l on your answers to the above, in your opinion was de	tection bias present? If so, what is the likely
direction of its effect?	direct	tion of its effect?	

Likely direction of effect: Unknown direction were risk of bias was unclear

### 1.6.2 AKHONDZADEH2008

Study	ID	AKHONDZADEH2008
Biblio	graphic reference:	
Akho	ndzadeh S, Tajdar H, Mohammadi M-R, Mohammadi M	l, Nouroozinejad G-H, Shabstari OL, et al. A
doubl	e-blind placebo controlled trial of piracetam added to ris	speridone in patients with autistic disorder.
Child	Psychiatry and Human Development. 2008;39:237-245.	
Guide	eline topic: Management and support of children and	Review question number: 5.1
young	g people on the autism spectrum	
Checklist completed by: Odette Megnin-Viggars		
A. Selection bias (systematic differences between the comparison groups)		
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which	Yes (computer-generated code)
	would have balanced any confounding factors	res (computer-generated code)
	equally across groups)	
A2	There was adequate concealment of allocation (such	
	that investigators, clinicians and participants cannot	Yes (sealed opaque envelopes)
	influence enrolment or treatment allocation)	
A3	The groups were comparable at baseline, including	
	all major confounding and prognostic factors	Yes

D 1		
	l on your answers to the above, in your opinion was sele ion of its effect?	ction bias present? If so, what is the likely
airect	ion of its effect?	
	Level of the	
	Low risk of bias	
Likelı	v direction of effect: Not applicable	
LIKCI	ancelion of encer. Not applicable	
	formance bias (systematic differences between groups in	n the care provided, apart
from	the intervention under investigation)	
B1	The comparison groups received the same care apart	
	from the intervention(s) studied	Vec
		Yes
B2	Participants receiving care were kept 'blind' to	Yes (placebo identical in appearance in
	treatment allocation	terms of shape, size, colour, and taste)
B3	Individuals administering care were kept 'blind' to	
	treatment allocation	Yes
D 1		
	on your answers to the above, in your opinion was perf	formance bias present? If so, what is the likely
direct	ion of its effect?	
	Low risk of bias	
T ·1 1	1	
Likely	v direction of effect: Not applicable	
C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of	
	time (or analysis was adjusted to allow for	Yes
	differences in length of follow-up)	
C2	a. How many participants did not complete treatment	in each group?
02	Experimental group N: 0; Control group N: 0	in cuch group.
	b. The groups were comparable for treatment	
	completion (that is, there were no important or	
	systematic differences between groups in terms of	Yes
	those who did not complete treatment)	
	anose mile dia net complete dedinienty	

C3 For how many participants in each group were no outcome data available? Experimental group N: 0; Control group N: 0 b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available). Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect? Low risk of bias Likely direction of effect: Not applicable		
b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available). Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect? Low risk of bias		
availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).       Yes         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?       Low risk of bias		
important or systematic differences between groups in terms of those for whom outcome data were not available).       Yes         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?       Low risk of bias		
in terms of those for whom outcome data were not available). Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect? Low risk of bias		
in terms of those for whom outcome data were not available).         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?         Low risk of bias		
available).         Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?         Low risk of bias		
Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect? Low risk of bias		
direction of its effect? Low risk of bias		
Low risk of bias		
Likely direction of effect: Not applicable		
Likely direction of effect: Not applicable		
D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)		
D1 The study had an appropriate length of follow-up Unclear (unclear if 10 weeks sufficient		
duration to observe significant treatment		
effects, in particular, adverse events)		
D2   The study used a precise definition of outcome   Yes		
D2 The study used a precise deminion of outcome Tes		
D3 A valid and reliable method was used to determine Yes		
the outcome		
D4 Investigators were kept 'blind' to participants' Yes		
exposure to the intervention		
D5 Investigators were kept 'blind' to other important Yes		
confounding and prognostic factors		
comounding and prognostic factors		
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely		
direction of its effect?		
Low risk (low risk for primary outcome of behaviour that challenges but for adverse events		
Low risk (low risk for primary outcome of behaviour that challenges but for adverse events outcome rating unclear/unknown due to concerns with regards to follow-up duration)		

### 1.6.3 AKHONDZADEH2010

	y ID	AKHONDZADEH2010
Bibli	ographic reference:	
	ondzadeh S, Fallah J, Mohammadi M-R, Imani R, Moham	amadi M. Salahi B. at al. Double blind placebo
	colled trial of pentoxifylline added to risperidone: effects	-
	ress in Neuro -Psychopharmacology and Biological Psyc	-
	eline topic: Management and support of children and	Review question number: 5.1
-	ng people on the autism spectrum	
Chec	klist completed by: Odette Megnin-Viggars	
A. Se	election bias (systematic differences between the compari	son groups)
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which	
	would have balanced any confounding factors	Yes (computer-generated code)
	equally across groups)	
A2	There was adequate concealment of allocation (such	
1.12	that investigators, clinicians and participants cannot	Yes (sealed opaque envelopes)
	influence enrolment or treatment allocation)	res (scaled opaque envelopes)
A3	The groups were comparable at baseline, including	
AJ		Yes
	all major confounding and prognostic factors	
Base	d on your answers to the above, in your opinion was sele	ection bias present? If so, what is the likely
	tion of its effect?	······ ···· F-····· ··· ··· ··· ··· ···
	Low risk of bias	
	Low risk of bias	
Likel		
Likel	Low risk of bias y direction of effect: Not applicable	
	y direction of effect: Not applicable	
B. Pe	y direction of effect: Not applicable rformance bias (systematic differences between groups i	n the care provided, apart
B. Pe	y direction of effect: Not applicable	n the care provided, apart
B. Pe	y direction of effect: Not applicable rformance bias (systematic differences between groups i	n the care provided, apart
B. Pe from	y direction of effect: Not applicable rformance bias (systematic differences between groups i the intervention under investigation)	
B. Pe from	y direction of effect: Not applicable rformance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart	Yes (participants did not receive any
B. Pe from	y direction of effect: Not applicable rformance bias (systematic differences between groups i the intervention under investigation)	Yes (participants did not receive any neuroleptic or psychotropic drug treatment
B. Pe from	y direction of effect: Not applicable rformance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart	Yes (participants did not receive any neuroleptic or psychotropic drug treatment within 6 months prior to recruitment and
B. Pe from	y direction of effect: Not applicable rformance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart	Yes (participants did not receive any neuroleptic or psychotropic drug treatment within 6 months prior to recruitment and participants did not receive any
B. Pe from B1	y direction of effect: Not applicable rformance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied	Yes (participants did not receive any neuroleptic or psychotropic drug treatment within 6 months prior to recruitment and
B. Pe from	y direction of effect: Not applicable rformance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied Participants receiving care were kept 'blind' to	Yes (participants did not receive any neuroleptic or psychotropic drug treatment within 6 months prior to recruitment and participants did not receive any psychosocial therapies during the trial)
B. Pe from B1	y direction of effect: Not applicable rformance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied	Yes (participants did not receive any neuroleptic or psychotropic drug treatment within 6 months prior to recruitment and participants did not receive any psychosocial therapies during the trial) Yes (placebo was identical in shape, size,
B. Pe from B1	y direction of effect: Not applicable rformance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied Participants receiving care were kept 'blind' to	Yes (participants did not receive any neuroleptic or psychotropic drug treatment within 6 months prior to recruitment and participants did not receive any psychosocial therapies during the trial)
B. Pe from B1	y direction of effect: Not applicable rformance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied Participants receiving care were kept 'blind' to	Yes (participants did not receive any neuroleptic or psychotropic drug treatment within 6 months prior to recruitment and participants did not receive any psychosocial therapies during the trial) Yes (placebo was identical in shape, size, colour and taste)
B. Pe from B1 B2	y direction of effect: Not applicable rformance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied Participants receiving care were kept 'blind' to treatment allocation	Yes (participants did not receive any neuroleptic or psychotropic drug treatment within 6 months prior to recruitment and participants did not receive any psychosocial therapies during the trial) Yes (placebo was identical in shape, size,

	l on your answers to the above, in your opinion was per tion of its effect?	formance bias present? If so, what is the likely
	Low risk of bias	
Likely	y direction of effect: Not applicable	
C. At	trition bias (systematic differences between the compari	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	a. How many participants did not complete treatment Experimental group N: 0; Control group N: 0	in each group?
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes
C3	For how many participants in each group were no outcome data available? Experimental group N: 0; Control group N: 0	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes
	l on your answers to the above, in your opinion was attr tion of its effect?	ition bias present? If so, what is the likely
	Low risk of bias	
Likely	y direction of effect: Not applicable	

D1	The study had an appropriate length of follow-up	Yes for positive treatment effects as, if
		anything, will result in a conservative
		estimate of effect but for adverse events it is
		unclear if 10 weeks is a sufficient follow-up
		duration to observe potential longer-term
		side effects
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine	Yes
	the outcome	
D4	Investigators were kept 'blind' to participants'	Yes
	exposure to the intervention	
D5	Investigators were kept 'blind' to other important	Unclear for ABC as there was a blind
	confounding and prognostic factors	outcome rater (and independent outcome
		rater for positive treatment outcomes and
		side effects) but the ABC was completed
		based on parental report and parents will be
		non-blind to other potentially confounding
		factors
Based	d on your answers to the above, in your opinion was det	ection bias present? If so, what is the likely
direc	tion of its effect?	
	Unclear/unknown risk	
Likel	y direction of effect: Unknown direction	
	j uncertain of check official with uncertain	

### 1.6.4 CAMPBELL1993

Study	TD	CAMPBELL1993
Camp behav	graphic reference: bell M, Anderson LT, Small AM, Adams P, Gonzalez N vioral symptoms and attentional learning. Journal of the niatry. 1993;32:1283-1291.	
young	eline topic: Management and support of children and g people on the autism spectrum	Review question number: 5.1
Check	klist completed by: Odette Megnin-Viggars	
A. Sel	ection bias (systematic differences between the compari	son groups)
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method was unclear)
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail was reported with regards to allocation concealment)
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	No (there was a significant group difference at baseline [t=2.41, p=0.02] in mean adaptive developmental quotients, as measured by the Gesell Developmental Schedules, with significantly higher mean DQ in the experimental group [mean: 56.8] relative to the control group [mean: 44.9])
	l on your answers to the above, in your opinion was sele ion of its effect?	ection bias present? If so, what is the likely
	Unclear/unknown risk of bias	
Likely	v direction of effect: Unknown direction	
	formance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)
B2	Participants receiving care were kept 'blind' to treatment allocation	Yes (matching placebo and naltrexone tablets)

B3	Individuals administering care were kept 'blind' to treatment allocation	Unclear (identity and blinding of intervention administrators not reported)
Based	l on your answers to the above, in your opinion was per	formance bias present? If so, what is the likely
direct	tion of its effect?	
	Unclear/unknown risk of bias	
Likely	y direction of effect: Unknown direction	
C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	a. How many participants did not complete treatment Experimental group N: Not reported Control group N Number of people assigned and dropout is not reporte	Not reported
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Unclear
C3	For how many participants in each group were no out Experimental group N: Not reported Control group N	
	Number of people assigned and dropout is not reported	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Unclear
	l on your answers to the above, in your opinion was attr ion of its effect?	ition bias present? If so, what is the likely
	Unclear/unknown risk of bias	
Likely	y direction of effect: Unknown direction	

D1	The study had an appropriate length of follow-up	Different for different outcomes: Unclear for
	The study had an appropriate length of tonow up	adverse event outcomes as 6 weeks might
		not be a sufficient follow-up duration to
		observe potential longer-term adverse
		events
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine	Different for different outcomes: No for
	the outcome	adverse event outcomes as the outcome
		measure was designed by an author
		specifically for the study with no
		independent reliability or validity ratings
D4	Investigators were kept 'blind' to participants'	Different for different outcomes: Unclear fo
	exposure to the intervention	adverse event outcomes as the identity and
		blinding of the outcome assessor was not
		reported
D5	Investigators were kept 'blind' to other important	Different for different outcomes: Unclear for
	confounding and prognostic factors	adverse event outcomes as the identity and
		blinding of the outcome assessor was not reported
Base	d on your answers to the above, in your opinion was de	tection bias present? If so, what is the likely
	tion of its effect?	1
	Different for different outcomes: High risk for adver	se event outcomes
	y direction of effect: Effect size smaller (for high risk ad	

### 1.6.5 HARDAN2012

Study	r ID	HARDAN2012
Hard	ographic reference: an AY, Fung LK, Libove RA, Obukhanych TV, Nair S, H trial of oral N-acetylcysteine in children with autism. Bio	0
	eline topic: Management and support of children and g people on the autism spectrum	Review question number: 5.1
Check	klist completed by: Odette Megnin-Viggars	
A. Sel	lection bias (systematic differences between the compari	son groups)
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (computer random number generator)
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Yes (pharmacy-controlled randomization)
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes
direct	tion of its effect? Low risk of bias	
Likely	y direction of effect: Not applicable	
	formance bias (systematic differences between groups is the intervention under investigation)	n the care provided, apart
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)
B2	Participants receiving care were kept 'blind' to treatment allocation	Yes (drug and placebo were matched on appearance, smell and taste)
B3	Individuals administering care were kept 'blind' to treatment allocation	Yes (parents were intervention administrators and were blinded)
	l on your answers to the above, in your opinion was per tion of its effect?	formance bias present? If so, what is the likely

C. At	C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)		
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)		
C2	a. How many participants did not complete treatment :	in each group?	
	Experimental group N: 2; Control group N: 6	-	
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	Yes	
	systematic differences between groups in terms of	ies	
	those who did not complete treatment)		
C3	3 For how many participants in each group were no outcome data available?		
	Experimental group N: 1; Control group N: 3		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes (Last Observation Carried Forward)	
	in terms of those for whom outcome data were not		
	available).		

Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?

Low risk of bias

The study had an appropriate length of follow-up	Yes
The study used a precise definition of outcome	Yes
A valid and reliable method was used to determine the outcome	Yes
Investigators were kept 'blind' to participants' exposure to the intervention	Yes
Investigators were kept 'blind' to other important confounding and prognostic factors	Unclear for investigator-rated outcome measures and no for parent-rated outcome measures
d on your answers to the above, in your opinion was det tion of its effect?	ection bias present? If so, what is the likely
Low risk of bias	
	The study used a precise definition of outcome A valid and reliable method was used to determine the outcome Investigators were kept 'blind' to participants' exposure to the intervention Investigators were kept 'blind' to other important confounding and prognostic factors I on your answers to the above, in your opinion was det ion of its effect?

### 1.6.6 HELLINGS2005

Study ID	)	HELLINGS2005
Bibliographic reference: Hellings JA, Weckbaugh M, Nickel EJ, Cain SE, Zarcone JR, Reese M, et al. A double-blind, placebo- controlled study of valproate for aggression in youth with pervasive developmental disorders. Journal of Child and Adolescent Psychopharmacology. 2005;15:682-692.		
Guidelin young pe	he topic: Management and support of children and eople on the autism spectrum it completed by: Odette Megnin-Viggars	Review question number: 5.1
	ion bias (systematic differences between the comparis	son groups)
A1 A to w	an appropriate method of randomisation was used a allocate participants to treatment groups (which yould have balanced any confounding factors qually across groups)	Unclear (randomisation method is unclear)
th	here was adequate concealment of allocation (such nat investigators, clinicians and participants cannot ofluence enrolment or treatment allocation)	Yes (pharmacy-controlled randomisation)
	he groups were comparable at baseline, including ll major confounding and prognostic factors	Yes
	n your answers to the above, in your opinion was selected of its effect?	ction bias present? If so, what is the likely
Unclear/unknown risk of bias		
Likely direction of effect: Unknown direction		
B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)		
	he comparison groups received the same care apart rom the intervention(s) studied	Unclear (insufficient detail reported)
	articipants receiving care were kept 'blind' to reatment allocation	Yes
	ndividuals administering care were kept 'blind' to reatment allocation	Yes
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?		

C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of	
	time (or analysis was adjusted to allow for	Yes
	differences in length of follow-up)	
C2	a. How many participants did not complete treatment :	in each group?
	Experimental group N: 3; Control group N: 2	-
	b. The groups were comparable for treatment	
	completion (that is, there were no important or	Yes
	systematic differences between groups in terms of	ies
	those who did not complete treatment)	
C3	3 For how many participants in each group were no outcome data available?	
	Experimental group N: 0; Control group N: 0	
	b. The groups were comparable with respect to the	
	availability of outcome data (that is, there were no	
	important or systematic differences between groups	Yes (Last Observation Carried Forward)
	in terms of those for whom outcome data were not	
	available).	

Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?

Low risk of bias

follow-up duration to detect significant treatment effects, particularly for adverse events) Yes
events)
Yes
Yes
Yes
No (some outcome measures parent-rated
and so non-blind to other potentially
confounding factors)
detection bias present? If so, what is the likely

### 1.6.7 HOLLANDER2010

Study	ID	HOLLANDER2010
Holla: for the	graphic reference: nder E, Chaplin W, Soorya L, Wasserman S, Novotny S, e treatment of irritability in children and adolescents wit opsychopharmacology. 2010;35:990-998.	
Guide	Pline topic: Management and support of children and g people on the autism spectrum	Review question number: 5.1
	klist completed by: Odette Megnin-Viggars	
A. Sel	ection bias (systematic differences between the compari-	son groups)
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	No (statistically significant [p=0.017] group difference in baseline IQ with the placebo group having a significantly higher IQ [76.1] than the experimental group [52.9])
	on your answers to the above, in your opinion was sele ion of its effect?	ction bias present? If so, what is the likely
	Unclear/unknown risk of bias	
Likely	v direction of effect: Unknown direction	
	formance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)
B2	Participants receiving care were kept 'blind' to treatment allocation	Yes
B3	Individuals administering care were kept 'blind' to treatment allocation	Yes

	l on your answers to the above, in your opinion was per ion of its effect?	formance bias present? If so, what is the likely
	Low risk of bias	
Likely	v direction of effect: Not applicable	
C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	a. How many participants did not complete treatment Experimental group N: 2; Control group N: 1	in each group?
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes
C3	For how many participants in each group were no out Experimental group N: 0; Control group N: 0	come data available?
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes (mixed regression models based on available values used to impute missing data)
Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?		
	Low risk of bias	
Likely	v direction of effect: Not applicable	

D1	The study had an appropriate length of follow-up	Unclear (unclear if 12 weeks sufficient follow-up duration to detect significant treatment effects, particularly for adverse events)
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Yes
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Yes
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	No (some outcome measures parent-rated and so non-blind to other potentially confounding factors)
	d on your answers to the above, in your opinion was det tion of its effect?	ection bias present? If so, what is the likely
	Low risk of bias	
Likel	y direction of effect: Not applicable	

### 1.6.8 JOHNSON&JOHNSON2011

#### Study ID

#### JOHNSON&JOHNSON2011

Bibliographic reference:

Johnson & Johnson Pharmaceutical Research & Development, L. L. C. Risperidone in the Treatment of Children and Adolescents With Autistic Disorder: A Double-Blind, Placebo-Controlled Study of Efficacy and Safety, Followed by an Open-Label Extension Study of Safety. ClinicalTrials.gov NCT00576732; 2011. Avaialble from: http://clinicaltrials.gov/ct2/show/results/NCT00576732.

Kent JM, Kushner S, Ning X, Karcher K, Ness S, Aman M, et al. Riseridone dosing in children and adolescents with autistic disorder: a double-blind, placebo-controlled study. Journal of Autism and Developmental Disorders. 2012; Epub available ahead of print. Available from: http://link.springer.com/article/10.1007%2Fs10803-012-1723-5.

Cuid		
	eline topic: Management and support of children and	Review question number: 5.1
•	g people on the autism spectrum	
Chec	klist completed by: Odette Megnin-Viggars	
A. Se	lection bias (systematic differences between the compari	ison groups)
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which	Unclear (randomisation method is unclear)
	would have balanced any confounding factors	Chelear (randomisation method is unclear)
	equally across groups)	
A2	There was adequate concealment of allocation (such	Unclear (insufficient detail reported with
	that investigators, clinicians and participants cannot	regards to allocation concealment)
	influence enrolment or treatment allocation)	regards to anocation conceannent)
A3	The groups were comparable at baseline, including	
	all major confounding and prognostic factors	Unclear (insufficient detail reported)
Daset	a on your answers to the above, in your opinion was set	ection bias present? If so, what is the likely
	tion of its effect?	ection bias present? If so, what is the likely
	· · ·	ection bias present? If so, what is the likely
direc	tion of its effect?	ection bias present? If so, what is the likely
direc	tion of its effect? Unclear/unknown risk of bias	ection bias present? If so, what is the likely
direc Likel	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction	
direc Likel B. Pe	tion of its effect? Unclear/unknown risk of bias	
direc Likel B. Pe	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction rformance bias (systematic differences between groups i	
direc Likel B. Pe	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction rformance bias (systematic differences between groups i	
direc Likel B. Pe from	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction rformance bias (systematic differences between groups i the intervention under investigation)	n the care provided, apart
direc Likel B. Pe from	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction rformance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart	n the care provided, apart No (statistically significant group difference
direc Likel B. Pe from	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction rformance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart	n the care provided, apart No (statistically significant group difference in the number of participants receiving
direc Likel B. Pe from	tion of its effect? Unclear/unknown risk of bias y direction of effect: Unknown direction rformance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart	n the care provided, apart No (statistically significant group difference in the number of participants receiving concomitant antihistamines with a higher

## Autism: the management and support of children and young people on the autism spectrum

		dose group: 7%, N=2; high dose group: 3%, N=1])
B2	Participants receiving care were kept 'blind' to treatment allocation	Yes
B3	Individuals administering care were kept 'blind' to treatment allocation	Yes
	on your answers to the above, in your opinion was per ion of its effect?	formance bias present? If so, what is the likely
	Low risk of bias	
Likely	v direction of effect: Not applicable	
C. Att	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	a. How many participants did not complete treatment Experimental group N: 11; Control group N: 8	in each group?
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes
C3	For how many participants in each group were no out Experimental group N: 1; Control group N: 1	come data available?
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes (Last Observation Carried Forward)
	on your answers to the above, in your opinion was attr ion of its effect?	ition bias present? If so, what is the likely
	Low risk of bias	
Likely	v direction of effect: Not applicable	

D. De	etection bias (bias in how outcomes are ascertained, diag	gnosed or verified)
D1	The study had an appropriate length of follow-up	Different for different outcomes: Yes for positive treatment outcomes Unclear for adverse event outcomes (unclear if 6 weeks is sufficient follow-up duration to observe potential longer-term adverse events)
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Yes
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Yes
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Unclear (the rater of the ABC is not reported and if parent-completed it will be non-blind to other important confounding and prognostic factors)
Based	d on your answers to the above, in your opinion was de	
direc	tion of its effect?	
	Different for different outcomes:	
	risk for positive treatment outcomes	
Uncle	ear/unknown risk for adverse event outcomes	
Likel	y direction of effect: Effect size smaller (for adverse even	nt outcomes)

### 1.6.9 KING2001

Study	TD	KING2001	
D:1 1:	1		
	graphic reference:	MaMahan Watal Daubla blind placeba	
King BH, Wright M, Handen BL, Sikich L, Zimmerman AW, McMahon W, et al. Double-blind, placebo- controlled study of amantadine hydrochloride in the treatment of children with autistic disorder. Journal of			
	merican Academy of Child and Adolescent Psychiatry. 2		
	eline topic: Management and support of children and	Review question number: 5.1	
	g people on the autism spectrum	iceview question number. 5.1	
	klist completed by: Odette Megnin-Viggars		
A. Sel	ection bias (systematic differences between the compari	son groups)	
A1	An appropriate method of randomisation was used		
	to allocate participants to treatment groups (which		
	would have balanced any confounding factors	Unclear (randomisation method is unclear)	
	equally across groups)		
A2	There was adequate concealment of allocation (such		
	that investigators, clinicians and participants cannot	Unclear (insufficient detail reported with	
	influence enrolment or treatment allocation)	regards to allocation concealment)	
A3	The groups were comparable at baseline, including		
	all major confounding and prognostic factors	Yes	
	, 010		
Based	Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely		
direct	ion of its effect?		
	Unclear/unknown risk of bias		
Likol	v direction of effect: Unknown direction		
LIKely	direction of effect. Onknown direction		
B. Per	formance bias (systematic differences between groups i	n the care provided, apart	
	the intervention under investigation)	1 / 1	
	0 /		
D4		1	
B1	The comparison groups received the same care apart		
	from the intervention(s) studied	Unclear (insufficient detail reported)	
B2	Participants receiving care were kept 'blind' to		
	treatment allocation	Yes (taste- and colour-matched placebo)	
B3	Individuals administering care were kept 'blind' to		
	treatment allocation	Yes	
Based	on your answers to the above, in your opinion was per	formance bias present? If so, what is the likely	
	ion of its effect?	-	

C. At	C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)		
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)		
C2	a. How many participants did not complete treatment	in each group?	
	Experimental group N: 0; Control group N: 0		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	Yes	
	systematic differences between groups in terms of		
	those who did not complete treatment)		
C3	For how many participants in each group were no outcome data available?		
	Experimental group N: 0; Control group N: 0		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
Based	l on your answers to the above, in your opinion was attr	ition bias present? If so, what is the likely	
direct	ion of its effect?		
	Low risk of bias		
Likely	y direction of effect: Not applicable		

D1	The study had an appropriate length of follow-up	Unclear (5 weeks may not be a sufficient
		duration to observe adverse events)
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Yes
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Different for difference outcome measures: For parent-rated ABC outcome assessors were blind to treatment assignment but not to other potentially confounding factors, for investigator-rated CGI the blinding of the outcome assessor is not reported and for adverse event outcome measures neither the identity nor the blinding of outcome assessors is reported
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Different for difference outcome measures: For parent-rated ABC outcome assessors were blind to treatment assignment but not to other potentially confounding factors, for investigator-rated CGI the blinding of the outcome assessor is not reported and for adverse event outcome measures neither the identity nor the blinding of outcome assessors is reported
	d on your answers to the above, in your opinion was de tion of its effect? Unclear for ABC and CGI outcome measures and hi	- · ·
Likel	y direction of effect: Where high risk, effect size smaller	(adverse events)

### 1.6.10MARCUS2009

Study	v ID	MARCUS2009
orud <sub>.</sub>		
Bibli	ographic reference:	
Marc	us RN, Owen R, Kamen L, Manos G, McQuade RD, Cars	son WH, et al. A placebo-controlled, fixed-
dose	study of aripiprazole in children and adolescents with ir	ritability associated with autistic disorder.
Jourr	nal of the American Academy of Child and Adolescent Pa	sychiatry. 2009;48:1110-1119.
Varn	i JW, Handen BL, Corey-Lisle PK, Guo Z, Manos G, Amr	nerman DK, et al. Effect of aripiprazole 2 to 15
mg/o	d on health-related quality of life in the treatment of irrita	ability associated with autistic disorder in
child	ren: a post-hoc analysis of two controlled trials. Clinical	Therapeutics. 2012;34:980-992.
	eline topic: Management and support of children and	Review question number: 5.1
	g people on the autism spectrum	1
•	klist completed by: Odette Megnin-Viggars	
A. Se	lection bias (systematic differences between the compari	son groups)
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which	
	would have balanced any confounding factors	Unclear (randomisation method is unclear)
	equally across groups)	
A2	There was adequate concealment of allocation (such	
	that investigators, clinicians and participants cannot	Unclear (insufficient detail reported with
	influence enrolment or treatment allocation)	regards to allocation concealment)
A3	The groups were comparable at baseline, including	I la clear (no beceline statistical commerciance
	all major confounding and prognostic factors	Unclear (no baseline statistical comparisons
		between groups reported)
Base	d on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely
direc	tion of its effect?	
	Unclear/unknown risk of bias	
Likel	y direction of effect: Unknown direction	
B. Pe	rformance bias (systematic differences between groups i	n the care provided, apart
from	the intervention under investigation)	
B1	The comparison groups received the same care apart	
	from the intervention(s) studied	Unclear (insufficient detail reported)
		Checkar (Insumercin detail reported)
B2	Participants receiving care were kept 'blind' to	Unclear (paper states 'Double-blind' but
	treatment allocation	gives no further detail with regards to who

is blinded, i.e. participant, parent,

investigator, intervention administrator,

		outcome accessor)
		outcome assessor)
B3	Individuals administering care were kept 'blind' to	Unclear (paper states 'Double-blind' but
20	treatment allocation	gives no further detail with regards to who
		is blinded, i.e. participant, parent,
		investigator, intervention administrator,
		0
Derei		outcome assessor)
	on your answers to the above, in your opinion was per ion of its effect?	formance bias present? If so, what is the likely
airect	ion of its effect?	
	Unclear/unknown risk of bias	
Likob	v direction of effect: Unknown direction	
LIKELY	ancedon of cheet. Onknown difection	
C. At	rition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of	
	time (or analysis was adjusted to allow for	Yes
	differences in length of follow-up)	
C2	. Here many posticinents did not complete treatment	in each success?
02	a. How many participants did not complete treatment	in each group?
	Experimental group N: 9; Control group N: 14	Ι
	b. The groups were comparable for treatment	
	completion (that is, there were no important or	Yes
	systematic differences between groups in terms of	
	those who did not complete treatment)	
C3	For how many participants in each group were no outo	come data available?
	Experimental group N: 1; Control group N: 3	
	b. The groups were comparable with respect to the	
	availability of outcome data (that is, there were no	
	important or systematic differences between groups	Yes (Last Observation Carried Forward)
	in terms of those for whom outcome data were not	
	available).	
Based	on your answers to the above, in your opinion was attr	ition bias present? If so, what is the likely
	ion of its effect?	
	Low risk of bias	
	LOW HISK OF DIAS	
Likel	v direction of effect: Not applicable	
	anceast of enect. Not appleable	

D1	The study had an appropriate length of follow-up	Unclear (unclear if follow-up duration of 8
		weeks is sufficient to detect significant
		treatment effects, in particular, adverse
		events)
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine	Yes
	the outcome	
D4	Investigators were kept 'blind' to participants'	Unclear (paper states 'Double-blind' but
	exposure to the intervention	gives no further detail with regards to who
		is blinded, i.e. participant, parent,
		investigator, intervention administrator,
		outcome assessor)
D5	Investigators were kept 'blind' to other important	Unclear (paper states 'Double-blind' but
	confounding and prognostic factors	gives no further detail with regards to who
		is blinded, i.e. participant, parent,
		investigator, intervention administrator,
		outcome assessor)
Base	d on your answers to the above, in your opinion was de	tection bias present? If so, what is the likely
direc	tion of its effect?	
	Unclear/unknown risk of bias	
Tikol	y direction of effect: Unknown direction	

### 1.6.11OWEN2009

Study	y ID	OWEN2009	
Ower	Bibliographic reference: Owen R, Sikich L, Marcus RN, Corey-Lisle P, Manos G, McQuade RD, et al. Aripiprazole in the treatment of irritability in children and adolescents with autistic disorder. Pediatrics. 2009;124:1533-1540.		
behav	n MG, Kasper W, Manos G, Mathew S, Marcus R, Owen vior checklist: results from two studies of aripiprazole in ic disorder. Journal of Child and Adolescent Psychopha	the treatment of irritability associated with	
mg/d childr	JW, Handen BL, Corey-Lisle PK, Guo Z, Manos G, Amr I on health-related quality of life in the treatment of irrita ren: a post-hoc analysis of two controlled trials. Clinical	ability associated with autistic disorder in Therapeutics. 2012;34:980-992.	
	eline topic: Management and support of children and geople on the autism spectrum	Review question number: 5.1	
	klist completed by: Odette Megnin-Viggars		
A. Sel	lection bias (systematic differences between the compari-	son groups)	
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (computer random number generator)	
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Yes (pharmacy-controlled randomization)	
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes	
	l on your answers to the above, in your opinion was sele ion of its effect?	ction bias present? If so, what is the likely	
	Low risk of bias		
Likely	Likely direction of effect: Not applicable		
B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)			
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)	

B2	Participants receiving care were kept 'blind' to	Unclear (paper states 'Double-blind' but
DZ	treatment allocation	gives no further detail with regards to who
		is blinded, i.e. participant, parent, investigator, intervention administrator,
		0
Da		outcome assessor)
B3	Individuals administering care were kept 'blind' to	Unclear (paper states 'Double-blind' but
	treatment allocation	gives no further detail with regards to who
		is blinded, i.e. participant, parent,
		investigator, intervention administrator,
		outcome assessor)
	l on your answers to the above, in your opinion was perf ion of its effect?	formance bias present? If so, what is the likely
uneci		
	Unclear /unknown rick of hiss	
	Unclear/unknown risk of bias	
Likely	v direction of effect: Unknown direction	
Lincery		
C. Att	trition bias (systematic differences between the comparis	on groups with respect to loss of participants)
C1	All groups were followed up for an equal length of	
	time (or analysis was adjusted to allow for	Yes
	differences in length of follow-up)	
C2	a. How many participants did not complete treatment	in each group?
	Experimental group N: 8; Control group N: 15	0
	b. The groups were comparable for treatment	
	completion (that is, there were no important or	No (but as the greater dropout rate is in the
	systematic differences between groups in terms of	placebo condition there is not the concern
	those who did not complete treatment)	that dropout is due to adverse events)
C3	For how many participants in each group were no outc	come data available?
	Experimental group N: 0; Control group N: 1	
	b. The groups were comparable with respect to the	
	availability of outcome data (that is, there were no	
	important or systematic differences between groups	Yes (Last Observation Carried Forward)
	in terms of those for whom outcome data were not	
	available).	
Based	on your answers to the above, in your opinion was attri	tion bias present? If so, what is the likely
	ion of its effect?	
	Low risk of bias	
Likoli	v direction of effect: Not applicable	
LINCI	ancedon of effect. Not applicable	

# Autism: the management and support of children and young people on the autism spectrum

D1	The study had an appropriate length of follow-up	Unclear (unclear if follow-up duration of 8
		weeks sufficient to detect significant
		treatment effects, in particular, adverse
		events)
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine	Yes
	the outcome	
D4	Investigators were kept 'blind' to participants'	Unclear (paper states 'Double-blind' but
	exposure to the intervention	gives no further detail with regards to who
		is blinded, i.e. participant, parent,
		investigator, intervention administrator,
		outcome assessor)
D5	Investigators were kept 'blind' to other important	Unclear (paper states 'Double-blind' but
	confounding and prognostic factors	gives no further detail with regards to who
		is blinded, i.e. participant, parent,
		investigator, intervention administrator,
		outcome assessor)
Base	d on your answers to the above, in your opinion was de	tection bias present? If so, what is the likely
direc	tion of its effect?	
	Unclear/unknown risk of bias	
Likol	y direction of effect: Unknown direction	

### 1.6.12REZAEI2010

Study ID		REZAEI2010	
Bibliographic reference:			
	i V, Mohammadi M-R, Ghanizadeh A, Sahraian A, Tabr		
-	placebo-controlled trial of risperidone plus topiramate in children with autistic disorder. Progress in		
	p-Psychopharmacology and Biological Psychiatry. 2010;3		
	line topic: Management and support of children and	Review question number: 5.1	
•	g people on the autism spectrum		
Check	list completed by: Odette Megnin-Viggars		
A. Sel	ection bias (systematic differences between the comparis	son groups)	
A1	An appropriate method of randomisation was used		
	to allocate participants to treatment groups (which	Vac (comparison and any grant or comparison)	
	would have balanced any confounding factors	Yes (computer random number generator)	
	equally across groups)		
A2	There was adequate concealment of allocation (such		
	that investigators, clinicians and participants cannot	Yes (sealed, opaque envelopes)	
	influence enrolment or treatment allocation)		
A3	The groups were comparable at baseline, including		
	all major confounding and prognostic factors	Yes	
	on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely	
direction of its effect?			
Low risk of bias			
Likely	direction of effect: Not applicable		
B Por	formance bias (systematic differences between groups ir	the care provided apart	
	the intervention under investigation)	The care provided, apart	
110111	the intervention under investigation		
B1	The comparison groups received the same care apart		
	from the intervention(s) studied	Yes	
BO	Participanto receiving care were least (blind) to		
B2	Participants receiving care were kept 'blind' to treatment allocation	Vac	
		Yes	
R2	Individuals administering care ware kent thind to		
B3	Individuals administering care were kept 'blind' to	Vac	
	treatment allocation	Yes	
Da 1	an answer to the share in a static		
	on your answers to the above, in your opinion was perf	ormance bias present? If so, what is the likely	
direction of its effect?			

C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of	
	time (or analysis was adjusted to allow for	Yes
	differences in length of follow-up)	
C2	a. How many participants did not complete treatment	in each group?
	Experimental group N: 0; Control group N: 0	
	b. The groups were comparable for treatment	
	completion (that is, there were no important or	Yes
	systematic differences between groups in terms of	
	those who did not complete treatment)	
C3	For how many participants in each group were no outcome data available?	
	Experimental group N: 0; Control group N: 0	
	b. The groups were comparable with respect to the	
	availability of outcome data (that is, there were no	
	important or systematic differences between groups	Yes
	in terms of those for whom outcome data were not	
	available).	
Based	l on your answers to the above, in your opinion was attr	ition bias present? If so, what is the likely
direct	tion of its effect?	
	Low risk of bias	
Likely	y direction of effect: Not applicable	
L		

D. De	etection bias (bias in how outcomes are ascertained, diag	nosed or verified)
	```	,
D1	The study had an appropriate length of follow-up	Unclear (unclear if 8 weeks follow-up
		duration a sufficient length of time to detect
		significant treatment effects, however if this
		is true it will lead to a conservative estimate
		of treatment effects, and thus study quality
		was not downgraded on this basis)
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine	Yes
	the outcome	
D4	Investigators were kept 'blind' to participants'	Yes
	exposure to the intervention	
DE		
D5	Investigators were kept 'blind' to other important	Unclear (parents did input into the outcome
	confounding and prognostic factors	assessment. However, completion of the
		scale by a blinded rater was considered
		sufficient to ensure reduction of the risk of
		detection bias)
	l on your answers to the above, in your opinion was det	ection bias present? If so, what is the likely
direct	tion of its effect?	
	Low risk of bias	
Likely	y direction of effect: Not applicable	

## 1.6.13RUPPRISPERIDONE2001

#### Study ID

#### RUPPRISPERIDONE2001

#### Bibliographic reference:

Aman MG, Holloway JA, McDougle CJ, Scahill L, Tierney E, McCracken JT, et al. Cognitive effects of risperidone in children with autism and irritable behavior. Journal of Child and Adolescent Psychopharmacology. 2008;18:227-236.

Anderson GM, Scahill L, McCracken JT, McDougle CJ, Aman MG, Tierney E, et al. Effects of short- and long-term risperidone treatment on prolactin levels in children with autism. Biological Psychiatry. 2007;61:545-550.

Arnold LE, Vitiello B, McDougle C, Scahill L, Shah B, Gonzalez NM, et al. Parent-defined target symptoms respond to risperidone in RUPP autism study: customer approach to clinical trials. Journal of the American Academy of Child and Adolescent Psychiatry. 2003;42:1443-1450.

Arnold LE, Farmer C, Kraemer HC, Davies M, Witwer A, Chuang S, et al. Moderators, mediators, and other predictors of risperidone response in children with autistic disorder and irritability. Journal of Child and Adolescent Psychopharmacology. 2010;20:83-93.

McDougle CJ, Scahill L, Aman MG, McCracken JT, Tierney E, Davies M, et al. Risperidone for the core symptom domains of autism: results from the study by the autism network of the research units on pediatric psychopharmacology. American Journal of Psychiatry. 2005;162:1142-1148.

Research Units on Pediatric Psychopharmacology Autism Network. Risperidone in children with autism and serious behavioral problems. New England Journal of Medicine. 2002;347:314-321.

Research Units on Pediatric Psychopharmacology Autism Network. Risperidone treatment of autistic disorder: longer-term benefit and blinded discontinuation after 6 months. American Journal of Psychiatry. 2005;162:1361-1369.

Scahill L, McCracken J, McDougle CJ, Aman M, Arnold LE, Tierney E, et al. Methodological issues in designing a multisite trial of risperidone in children and adolescents with autism. Journal of Child and Adolescent Psychopharmacology. 2001;11:377-388.

	eline topic: Management and support of children and g people on the autism spectrum	Review question number: 5.1
-	klist completed by: Odette Megnin-Viggars	
A. Sel	ection bias (systematic differences between the comparis	son groups)
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported)
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	No (significantly greater scores on ABC Inappropriate speech subscale [p=0.03] in the control group and a trend for

Autism: the management and support of children and young people on the autism spectrum

		significantly lower scores on VABS Daily
		Living subscale [p=0.07] and ABC
		Stereotypy [p=0.09] in the control group
		[RUPP2002])
Based	l on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely
direct	ion of its effect?	
	Unclear/unknown risk of bias	
Likel	y direction of effect: Unknown direction	
B. Pei	formance bias (systematic differences between groups in	n the care provided, apart
	the intervention under investigation)	1 / 1
	о , ,	
D1		
B1	The comparison groups received the same care apart from the intervention(s) studied	
	from the intervention(s) studied	Yes
B2	Participants receiving care were kept 'blind' to	
	treatment allocation	Yes
B3	Individuals administering care were kept 'blind' to	
	treatment allocation	Yes
Based	l on your answers to the above, in your opinion was perf	formance hias present? If so what is the likely
	ion of its effect?	to marke blas present: If so, what is the likely
unce		
	Low risk of bias	
Likely	v direction of effect: Not applicable	
	11	
C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of	
	time (or analysis was adjusted to allow for	Yes
	differences in length of follow-up)	105
<u> </u>		in an the second 2
C2	a. How many participants did not complete treatment	in each group?
	Experimental group N: 3; Control group N: 18	
	b. The groups were comparable for treatment	
	completion (that is, there were no important or systematic differences between groups in terms of	No (higher dropout in placebo group)
	those who did not complete treatment)	
	mose who are not complete readiliently	

C3		
	Experimental group N: 0; Control group N: 0	
	b. The groups were comparable with respect to the	
	availability of outcome data (that is, there were no	
	important or systematic differences between groups	Yes (Last Observation Carried Forward)
	in terms of those for whom outcome data were not	
	available).	
Based	on your answers to the above, in your opinion was attr	ition bias present? If so, what is the likely
direct	ion of its effect?	
	Low risk of bias	
Likely	v direction of effect: Not applicable	
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)
D1	The study had an appropriate length of follow-up	Unclear (follow-up duration of 8 weeks may
		not be sufficient to detect significant
		treatment effects, in particular, adverse
		events. For instance, 6-month follow-up in
		43 participants followed longitudinally
		[ANDERSON2007] showed weight gain
		increased from 2.7kg at 8 weeks to 5.6kg at 6
		months)
D2	The study used a precise definition of outcome	Yes
	5 1	
D3	A valid and reliable method was used to determine	Yes
	the outcome	
D4	Investigators were kept 'blind' to participants'	Yes
	exposure to the intervention	
	-	
D5	Investigators were kept 'blind' to other important	Unclear (the ABC outcome measure is
	confounding and prognostic factors	parent-completed)
<b>D</b> i		
	l on your answers to the above, in your opinion was det ion of its effect?	ection bias present? If so, what is the likely
airect	ion of its effect?	
	Different for different outcomes: Low risk for positive	e treatment outcomes and unclear/unknown
risk fo	or adverse event outcomes	,
T 11 -		
Likely	v direction of effect: Unknown direction where risk of bi	las 15 unclear
1		

#### 1.6.14SHEA2004

Study	ID	SHEA2004
Biblio	graphic reference:	
Shea S behav	5, Turgay A, Carroll A, Schulz M, Orlik H, Smith I, et al. rioral symptoms in children with autistic and other perv 114:e634-e641.	
childr	na GJ, Bossie CA, Youssef E, Zhu Y, Dunbar F. Risperid en with autism in a randomized, double-blind, placebo- opmental Disorders. 2007;37:367-373.	
	eline topic: Management and support of children and g people on the autism spectrum	Review question number: 5.1
Check	klist completed by: Odette Megnin-Viggars	
A. Sel	ection bias (systematic differences between the compari-	son groups)
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported)
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes
	on your answers to the above, in your opinion was sele ion of its effect?	ction bias present? If so, what is the likely
	Unclear/unknown risk of bias	
Likely	v direction of effect: Unknown direction	
	formance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart
B1	The comparison groups received the same care apart from the intervention(s) studied	No (more participants in the experimental group received concomitant medications for other medical conditions [N=36; 90%] than participants in the placebo group [N=26; 66.7%])
B2	Participants receiving care were kept 'blind' to treatment allocation	Unclear (paper states 'Double-blind' but gives no further detail with regards to who is blinded, i.e. participant, parent,

		investigator, intervention administrator, outcome assessor)
B3	Individuals administering care were kept 'blind' to treatment allocation	Unclear (paper states 'Double-blind' but gives no further detail with regards to who is blinded, i.e. participant, parent, investigator, intervention administrator, outcome assessor)
	l on your answers to the above, in your opinion was per ion of its effect?	formance bias present? If so, what is the likely
	Unclear/unknown risk of bias	
Likely	v direction of effect: Unknown direction	
C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	a. How many participants did not complete treatment Experimental group N: 2 (SHEA2004); 2 (PANDINA20 (PANDINA2007)	0 1
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes
C3	For how many participants in each group were no out Experimental group N: 1 (SHEA2004); 0 (PANDINA20 (PANDINA2007)	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes

Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?

Low risk of bias

Likely direction of effect: Not applicable

D1	The study had an appropriate length of follow-up	Unclear (unclear if follow-up duration of 8 weeks sufficient to detect significant treatment effects, in particular, adverse events)
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Yes
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Unclear (paper states 'Double-blind' but gives no further detail with regards to who is blinded, i.e. participant, parent, investigator, intervention administrator, outcome assessor)
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Unclear (paper states 'Double-blind' but gives no further detail with regards to who is blinded, i.e. participant, parent, investigator, intervention administrator, outcome assessor)
	l on your answers to the above, in your opinion was de tion of its effect?	tection bias present? If so, what is the likely
	Unclear/unknown risk of bias	
Likel	y direction of effect: Unknown direction	

### 1.6.15TROOST2005

Study	r ID	TROOST2005
	ographic reference:	
	st PW, Lahuis BE, Steenhuis M-P, Ketelaars CEJ, Buitelaa	
	peridone in children with autism spectrum disorders: a p	• • •
	cican Academy of Child and Adolescent Psychiatry. 2005 eline topic: Management and support of children and	
	g people on the autism spectrum	Review question number: 5.1
	klist completed by: Odette Megnin-Viggars	
Cneci	klist completed by: Odette Megnin-Viggars	
A. Se	lection bias (systematic differences between the compari-	son groups)
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which	Unclear (randomisation method is unclear)
	would have balanced any confounding factors	Chelear (randomisation method is unclear)
	equally across groups)	
A2	There was adequate concealment of allocation (such	Unclear (although the randomisation
	that investigators, clinicians and participants cannot	sequence was generated externally, it is not
	influence enrolment or treatment allocation)	clear if allocation was concealed from
		investigators)
A3	The groups were comparable at baseline, including	
	all major confounding and prognostic factors	Yes
direct	tion of its effect? Unclear/unknown risk of bias	
Likely	y direction of effect: Unknown direction	
B. Per	rformance bias (systematic differences between groups in	n the care provided, apart
from	the intervention under investigation)	
B1	The comparison groups received the same care apart	
	from the intervention(s) studied	Unclear (insufficient detail reported)
B2	Participants receiving care were kept 'blind' to	
—	treatment allocation	Yes
B3	Individuals administering care were kept 'blind' to	Unclear (although the paper states that
	treatment allocation	drugs were supplied by the pharmacist as
		matching capsules in identical packages it is
		not clear who the pharmacist was supplying
	I	1 170

		to, i.e. investigators, participants, parents,
		and thus it is not clear whether the
		intervention administrator was blinded)
	l on your answers to the above, in your opinion was per ion of its effect?	formance bias present? If so, what is the likely
uncer		
	Unclear/unknown risk of bias	
Likely	y direction of effect: Unknown direction	
C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of	
	time (or analysis was adjusted to allow for	Yes
	differences in length of follow-up)	105
C2	a. How many participants did not complete treatment	in each group?
	Experimental group N: 0 Control group N: 0	
	b. The groups were comparable for treatment	
	completion (that is, there were no important or	
	systematic differences between groups in terms of	Yes
	those who did not complete treatment)	
C3	For how many participants in each group were no out	some data available?
C3		
	Experimental group N: 0; Control group N: 0	1
	b. The groups were comparable with respect to the	
	availability of outcome data (that is, there were no	
	important or systematic differences between groups	Yes
	in terms of those for whom outcome data were not	
	available).	
Based	l on your answers to the above, in your opinion was attr	ition bias present? If so, what is the likely
direct	tion of its effect?	
	Low risk of bias	
Likely	y direction of effect: Not applicable	
1		

The study had an appropriate length of follow-up	Yes
The study used a precise definition of outcome	Yes
A valid and reliable method was used to determine the outcome	Yes
Investigators were kept 'blind' to participants' exposure to the intervention	Yes
Investigators were kept 'blind' to other important confounding and prognostic factors	Unclear (the ABC outcome measures are based on parent-report and thus are non- blind to other potentially confounding factors)
d on your answers to the above, in your opinion was det tion of its effect?	ection bias present? If so, what is the likely
Low risk of bias	
	The study used a precise definition of outcome A valid and reliable method was used to determine the outcome Investigators were kept 'blind' to participants' exposure to the intervention Investigators were kept 'blind' to other important confounding and prognostic factors d on your answers to the above, in your opinion was det tion of its effect?

# 1.7 BIOMEDICAL INTERVENTIONS AIMED AT BEHAVIOUR THAT CHALLENGES

#### 1.7.1 BENT2011

Study ID		BENT2011
Bent S	graphic reference: 6, Bertoglio K, Ashwood P, Bostrom A, Hendren RL. A p acids for autism spectrum disorder. Journal of Autism ar	•
Guide	eline topic: Management and support of children and g people on the autism spectrum	Review question number: 5.1
	dist completed by: Odette Megnin-Viggars	
A. Sel	ection bias (systematic differences between the compari-	son groups)
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (computer-generated randomisation list)
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (study reports that the randomisation list was prepared by persons not involved in the study but gives no further detail)
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	No (significant baseline group difference [p=0.03] for Clinical Global Impression- Severity [CGI-S] scores with greater severity in the experimental group [mean=4.6] than in the control group [mean=4.2])
Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?		
Unclear/unknown risk of bias		
Likely direction of effect: Unknown direction		
	formance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)
B2	Participants receiving care were kept 'blind' to treatment allocation	Yes (placebo had same texture, taste and appearance)

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B3	Individuals administering care were kept 'blind' to	Yes (parents were intervention
	treatment allocation	administrators and paper tested adequacy
		of blinding by asking carers at the end of the
		study: "do you think your child was taking
		omega-3 fatty acids or placebo?" and no
		statistically significant group differences
		were found in the percentage of carers who
		believed their child had been receiving
		omega-3 [40% in the omega-3 group and
		64% in the placebo group, p=0.39])
Based	on your answers to the above, in your opinion was perf	formance bias present? If so, what is the likely
direct	ion of its effect?	
	Low risk of bias	
-		
Likely	v direction of effect: Not applicable	
C. Att	rition bias (systematic differences between the comparis	son groups with respect to loss of participants)
0.110		
C1	All groups were followed up for an equal length of	
	time (or analysis was adjusted to allow for	Yes
	differences in length of follow-up)	
C2	a. How many participants did not complete treatment	in each group?
	Experimental group N: 5; Control group N: 3	ar eneri 8. e up
	b. The groups were comparable for treatment	
	completion (that is, there were no important or	
	systematic differences between groups in terms of	Yes
	those who did not complete treatment)	
C3	For how many participants in each group were no out	come data available?
	Experimental group N: 1; Control group N: 1	
	b. The groups were comparable with respect to the	Yes (participants who discontinued
	availability of outcome data (that is, there were no	medication were asked to return for
	important or systematic differences between groups	outcome assessments and where
	in terms of those for whom outcome data were not	participants did their data was included in
	available).	the analysis)
Based	on your answers to the above, in your opinion was attri	ition bias present? If so, what is the likely
direct	ion of its effect?	
	Low risk of bias	
Likely	v direction of effect: Not applicable	

01	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine	Different for different outcomes:
	the outcome	Unclear/unknown for adverse events as
		unclear outcome measure for recording
		adverse events
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Yes
D5	Investigators were kept 'blind' to other important	Different for different outcomes: No for
	confounding and prognostic factors	Aberrant Behaviour Checklist (ABC) and
		Behavior Assessment System for Children
		(BASC) as parent-rated; and
		Unclear/unknown for Peabody Picture
		Vocabulary Test (PPVT), Expressive
		Vocabulary Test (EVT), and adverse events
		as identity of outcome assessors (and
		blinding to other potentially confounding
		factors) not reported
Based	l on your answers to the above, in your opinion was de	ection bias present? If so, what is the likely
direc	tion of its effect?	-
	Low risk of bias	
	y direction of effect: Not applicable	

## 1.7.2 HASANZADEH2012

Study	ID	HASANZADEH2012	
Bibliographic reference:			
Hasanzadeh E, Mohammadi M-R, Ghanizadeh A, Rezazadeh S-A, Tabrizi M, Rezaei F, et al. A double-blind			
placebo controlled trial of ginkgo biloba added to risperidone in patients with autistic disorders. Child			
-	atry and Human Development. 2012;43:674–682.		
	ine topic: Management and support of children and	Review question number: 5.1	
	people on the autism spectrum		
Checkl	list completed by: Odette Megnin-Viggars		
A. Sele	ection bias (systematic differences between the comparis	son groups)	
A1	An appropriate method of randomisation was used		
	to allocate participants to treatment groups (which	Ver (computer computed and c)	
	would have balanced any confounding factors	Yes (computer-generated code)	
	equally across groups)		
A2	There was adequate concealment of allocation (such		
	that investigators, clinicians and participants cannot	Yes (sealed, opaque envelopes)	
	influence enrolment or treatment allocation)		
	The groups were comparable at baseline, including		
	all major confounding and prognostic factors	Yes	
Based	Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely		
direction of its effect?			
	Low risk of bias		
Tille direction of effect. Not even likely			
ыкегу	direction of effect: Not applicable		
B. Perf	ormance bias (systematic differences between groups ir	n the care provided, apart	
	he intervention under investigation)		
	The comparison groups received the same care apart	Yes (participants did not receive any	
	from the intervention(s) studied	neuroleptic or psychotropic drug treatment	
		within 6 months prior to recruitment and	
		participants did not receive any	
		psychosocial therapies during the trial)	
	Participants receiving care were kept 'blind' to		
	treatment allocation	Yes	
B3	Individuals administering care were kept 'blind' to		
	treatment allocation	Yes	

	l on your answers to the above, in your opinion was per ion of its effect?	formance bias present? If so, what is the likely
	Low risk of bias	
Likely	y direction of effect: Not applicable	
C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	a. How many participants did not complete treatment Experimental group N: 0; Control group N: 0	in each group?
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes
C3	For how many participants in each group were no out Experimental group N: 0; Control group N: 0	come data available?
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes
	l on your answers to the above, in your opinion was attr tion of its effect?	ition bias present? If so, what is the likely
	Low risk of bias	
Likely	y direction of effect: Not applicable	

D1	The study had an appropriate length of follow-up	Unclear for adverse event outcomes as 10 weeks may not be a sufficient follow-up duration to observe potential longer-term adverse events
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Unclear for adverse event outcomes as no reliability or validity data for the checklist used
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Yes
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Unclear as outcome measures included parental report and parents would be non- blind to other potentially confounding factors
	d on your answers to the above, in your opinion was det tion of its effect?	ection bias present? If so, what is the likely
	Different for different outcomes: Unclear/unknown	risk for adverse event outcomes
Likel	y direction of effect: Unknown direction where unclear	risk

# 1.7.3 JOHNSON2010

Study ID	JOHNSON2010	
Bibliographic reference: Johnson CR, Handen BL, Zimmer M, Sacco K. Polyunsaturate children with autism. Journal of Developmental and Physical	, II , U	
Guideline topic: Management and support of children and young people on the autism spectrum	Review question number: 5.1	
Checklist completed by: Odette Megnin-Viggars		
A. Selection bias (systematic differences between the compari	son groups)	
A1 An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)	
A2 There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)	
A3 The groups were comparable at baseline, including all major confounding and prognostic factors	Unclear (insufficient detail reported)	
Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?		
Unclear/unknown risk of bias		
Likely direction of effect: Unknown direction		
B. Performance bias (systematic differences between groups in the care provided, apart		
from the intervention under investigation)		
B1 The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)	
B2 Participants receiving care were kept 'blind' to treatment allocation	No (open label)	
B3 Individuals administering care were kept 'blind' to treatment allocation	No (open label)	
Based on your answers to the above, in your opinion was per- direction of its effect?	formance bias present? If so, what is the likely	

High risk of bias

Likely direction of effect: Effect size bigger

C. Att	rition bias (systematic differences between the comparis	on groups with respect to loss of participants)
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	a. How many participants did not complete treatment i Experimental group N: 0; Control group N: 0	in each group?
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes
C3	For how many participants in each group were no outc Experimental group N: 0; Control group N: 0	ome data available?
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes
	on your answers to the above, in your opinion was attri ion of its effect?	tion bias present? If so, what is the likely
	Low risk of bias	
Likely	direction of effect: Not applicable	
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes

D3	A valid and reliable method was used to determine	Different for different outcomes:
	the outcome	Unclear/unknown for behavioural
		observation outcome measures as only 20%
		of behavioural observations were double-
		coded and no standardized coding schedule
		used so reliability and validity of this
		outcome measure unclear
D4	Investigators were kept 'blind' to participants'	Different for different outcome measures:
	exposure to the intervention	No for CBCL/1.5-5 and MSEL
D5	Investigators were kept 'blind' to other important	Different for different outcome measures:
	confounding and prognostic factors	No for CBCL/1.5-5 and MSEL
Deee	l an annual an annual ta tha altarra in annual air an an dat	ation him managet? If an author is the likely
	d on your answers to the above, in your opinion was determined in the second	ection bias present? If so, what is the likely
airec	tion of its effect?	
		(,
	Different for different outcomes: High risk for CBCL/	1.5-5 and MSEL
Likel	y direction of effect: Effect size bigger, where high risk	

## 1.7.4 KERN2001

Study	y ID	KERN2001
	ographic reference:	
	JK, Miller VS, Cauller L, Kendall R, Mehta J, Dodd M. E	
	pervasive development disorder. Journal of Child Neuro	
	eline topic: Management and support of children and	Review question number: 5.1
youn	g people on the autism spectrum	
Chec	klist completed by: Odette Megnin-Viggars	
A. Se	lection bias (systematic differences between the compari	son groups)
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which	
	would have balanced any confounding factors	Unclear (randomisation method is unclear)
	equally across groups)	
A2	There was adequate concealment of allocation (such	
	that investigators, clinicians and participants cannot	Yes (pharmacy-controlled randomisation)
	influence enrolment or treatment allocation)	res (praimacy controlled fundomisation)
A3	The groups were comparable at baseline, including	No (statistically significant [p=0.0003]
115	all major confounding and prognostic factors	baseline group differences for the Lethargy
	an major comountaing and prognostic factors	subscale of the Aberrant Behavior Checklist
		[ABC] with the experimental group
		showing greater severity than the control
D		group)
	d on your answers to the above, in your opinion was sele tion of its effect?	ection bias present? If so, what is the likely
urrec	tion of its effect?	
	Unclear/unknown risk of bias	
- ·1 1		
Likel		
	y direction of effect: Unknown direction	
	y direction of effect: Unknown direction	
	-	n the care provided, apart
B. Pe	rformance bias (systematic differences between groups i	n the care provided, apart
B. Pe	-	n the care provided, apart
B. Pe	rformance bias (systematic differences between groups i	n the care provided, apart
B. Pe	rformance bias (systematic differences between groups i	n the care provided, apart
B. Pe from	rformance bias (systematic differences between groups i the intervention under investigation)	
B. Pe from	rformance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart	n the care provided, apart Unclear (insufficient detail reported)
B. Pe from B1	rformance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied	
B. Pe from	rformance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied Participants receiving care were kept 'blind' to	Unclear (insufficient detail reported)
B. Pe from B1	rformance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied	
B. Pe from B1 B2	rformance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied Participants receiving care were kept 'blind' to treatment allocation	Unclear (insufficient detail reported)
B. Pe from B1	rformance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied Participants receiving care were kept 'blind' to treatment allocation Individuals administering care were kept 'blind' to	Unclear (insufficient detail reported) Unclear (insufficient detail reported)
B. Pe from B1 B2	rformance bias (systematic differences between groups i the intervention under investigation) The comparison groups received the same care apart from the intervention(s) studied Participants receiving care were kept 'blind' to treatment allocation	Unclear (insufficient detail reported)

Basad	on your answers to the above in your opinion was not	formance bias present? If as what is the likely	
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?			
uneci	direction of its effect?		
	Unclear/unknown risk of bias		
Likely	v direction of effect: Unknown direction		
C. At	rition bias (systematic differences between the comparis	son groups with respect to loss of participants)	
0,110			
C1	All groups were followed up for an equal length of		
CI	time (or analysis was adjusted to allow for		
	differences in length of follow-up)	Yes	
	unreferces in length of follow-up)		
C2	a. How many participants did not complete treatment	in each group?	
	Experimental group N: 2; Control group N: 0		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or		
	systematic differences between groups in terms of	Yes	
	those who did not complete treatment)		
C3	For how many participants in each group were no out	come data available?	
	Experimental group N: 1; Control group N: 0		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
Based	on your answers to the above, in your opinion was attr	ition hiss present? If so, what is the likely	
	ion of its effect?	nion bias present: if so, what is the likely	
uncer			
	Low risk of bias		
	Low risk of blas		
Likola	v direction of effect: Not applicable		
Likely	direction of effect: Not applicable		
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)	
	· · · · · · · · · · · · · · · · · · ·	,	
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	No (outcome and outcome measure under- specified)	

D3	A valid and reliable method was used to determine	No (non-standardized outcome measure	
	the outcome	with no reliability or validity data)	
D4	Investigators were kept 'blind' to participants'	Yes (parents were blinded to treatment	
	exposure to the intervention	assignment)	
D5	Investigators were kept 'blind' to other important	No (parents non-blind to other potentially	
	confounding and prognostic factors	confounding factors)	
Based	l on your answers to the above, in your opinion was dete	ection bias present? If so, what is the likely	
direction of its effect?			
Unclear/unknown risk of bias			
Likely direction of effect: Unknown direction			

## 1.7.5 PIRAVEJ2009

Stud	y ID	PIRAVEJ2009
Pirav	ographic reference: ej K, Tangtrongchitr P, Chandarasiri P, Paothong L, Suk itistic children's behavior. Journal of Alternative and Co	
	eline topic: Management and support of children and	Review question number: 5.1
	g people on the autism spectrum	
Chec	klist completed by: Lucy Burt	
A. Se	election bias (systematic differences between the compari	son groups)
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (unclear method of randomisation)
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	No (the treatment group had lower scores of hyperactivity, hyperactivity index, and sleep-related problems at baseline)
	d on your answers to the above, in your opinion was selection of its effect?	ection bias present? If so, what is the likely
	Unclear/unknown risk of bias	
Likel	y direction of effect: Unknown direction	
	rformance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)
B2	Participants receiving care were kept 'blind' to treatment allocation	No
B3	Individuals administering care were kept 'blind' to treatment allocation	Different blinding for different care administrators. The sensory integration teacher was blind to treatment allocation, the masseuse was not blind to treatment allocation

	l on your answers to the above, in your opinion was per tion of its effect?	formance bias present? If so, what is the likely
	High risk of bias	
Likely	y direction of effect: Effect size bigger	
C. Att	trition bias (systematic differences between the compari	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	a. How many participants did not complete treatment Experimental group N: 0; Control group N: 0	in each group?
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes
C3 For how many participants in each group were no outcome data available? Experimental group N: 0; Control group N: 0		come data available?
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes
	l on your answers to the above, in your opinion was attr tion of its effect?	ition bias present? If so, what is the likely
	Low risk of bias	
Likely	y direction of effect: Not applicable	

D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Different for different outcomes: CPRS and CTRS - Yes Sleep observations - Unclear
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Different blinding for different outcomes: CTRS - teacher rated and the sensory integration teacher was blind to treatment allocation CPRS and sleep observations - parent rated and parents were not blind to treatment allocation
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Different blinding for different outcomes: CTRS - teacher rated and it is unclear whether the sensory integration teacher was blind to confounding factors CPRS and sleep observations - parent rated and parents were not blind to confounding factors
	d on your answers to the above, in your opinion was det tion of its effect?	ection bias present? If so, what is the likely
CPRS	Different for different outcomes: 5 - Low risk 5 and sleep observations - High risk y direction of effect: Effect size bigger, where high risk	

## 1.7.6 ROSSIGNOL2009

Study	TD	ROSSIGNOL2009
	-	
Rossi	graphic reference: gnol DA, Rossignol LW, Smith S, Schneider C, Logerquis en with autism: a multicenter, randomized, double-blin	<i>, , , , , , , , , ,</i>
	eline topic: Management and support of children and g people on the autism spectrum	Review question number: 5.1
Check	dist completed by: Odette Megnin-Viggars	
A. Sel	ection bias (systematic differences between the comparis	son groups)
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (paper states that allocation was concealed [from all investigators, participants, parents, nursing staff, and all other clinical staff] but no details on method of allocation concealment)
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes (no significant baseline group differences in age, gender, number of participants using medications, nutritional supplements or ABA, or on any of the outcome measures)
	on your answers to the above, in your opinion was sele ion of its effect?	ction bias present? If so, what is the likely
	Unclear/unknown risk of bias	
Likely	v direction of effect: Unknown direction	
	formance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart
B1	The comparison groups received the same care apart from the intervention(s) studied	Yes (no significant baseline group differences in number of participants using medications, nutritional supplements or ABA and participants were not allowed to begin any new therapies or stop any current therapies during the trial)
B2	Participants receiving care were kept 'blind' to treatment allocation	Yes (procedures were developed and applied in order to as closely match the two conditions as possible, including using

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B3	Individuals administering care were kept 'blind' to	matching equipment, covering control switches, inflating and deflating the chambers in the control condition to simulate pressure changes, and masking the sounds from the chambers) No (intervention administered by non-blind	
	treatment allocation	hyperbaric technician)	
	on your answers to the above, in your opinion was perfion of its effect?	formance bias present? If so, what is the likely	
	Unclear/unknown risk (low risk for response bias and	d high risk for performance bias)	
Likely	v direction of effect: Effect size bigger, where high risk		
C. Att	rition bias (systematic differences between the comparis	son groups with respect to loss of participants)	
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)		
C2	a. How many participants did not complete treatment	in each group?	
	Experimental group N: 4; Control group N: 3		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	Ver	
	systematic differences between groups in terms of	Yes	
	those who did not complete treatment)		
C3	For how many participants in each group were no outo	come data available?	
	Experimental group N: 3; Control group N: 3		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
Based	on your answers to the above, in your opinion was attr	ition bias present? If so, what is the likely	
direct	direction of its effect?		
	Low risk of bias		
Likely	direction of effect: Not applicable		

D1		
D1	The study had an appropriate length of follow-up	Unclear for adverse event outcome (unclear
		if 4 weeks is a sufficient follow-up duration
		to detect potential longer-term adverse
		events)
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine	Yes for most outcomes, no for adverse event
	the outcome	outcome where a standardized outcome
		measure was not used
D4	Investigators were kept 'blind' to participants'	Yes for most outcomes, no for adverse event
	exposure to the intervention	outcome where the outcome assessor was
		the intervention administrator who was
		non-blind to treatment assignment
D5	Investigators were kept 'blind' to other important	No for most outcomes as parent-rated and
	confounding and prognostic factors	parents would be non-blind to other
		potentially confounding factors; no for the
		adverse event outcome measure as rated by
		the intervention administrator; unclear for
		CGI as unclear if the clinician was blinded
		to other potentially confounding factors
	l on your answers to the above, in your opinion was det ion of its effect?	ection bias present? If so, what is the likely
adver	Different for different outcomes: Low risk for all post rse event outcome	itive treatment effects and high risk for

# 1.8 PSYCHOSOCIAL INTERVENTIONS AIMED AT ADAPTIVE BEHAVIOUR

### 1.8.1 DAWSON2010

Study ID	DAWSON2010	
Bibliographic reference: Dawson G, Rogers S, Munson J, Smith M, Winter J, Greenson J, et al. Randomized, controlled trial of an intervention for toddlers with autism: the early start denver model. Pediatrics. 2010;125:e17-e23.		
Guideline topic: Management and support of children and young people on the autism spectrum	Review question number: 6.1	
Checklist completed by: Odette Megnin-Viggars		
A. Selection bias (systematic differences between the compar	ison groups)	
A1 An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)	
A2 There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)	
A3 The groups were comparable at baseline, including all major confounding and prognostic factors	Yes	
Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?		
Unclear/unknown risk of bias		
Likely direction of effect: Unknown direction		
B. Performance bias (systematic differences between groups i	in the care provided, apart	
from the intervention under investigation)		
B1 The comparison groups received the same care apart from the intervention(s) studied	No (the experimental] group reported an average of 5.2 hours/week in other therapies, whereas the control group reported an average of 9.1 hours/week of individual therapy and an average of 9.3 hours/week of group interventions)	
B2 Participants receiving care were kept 'blind' to treatment allocation	No	

B3	Individuals administering care were kept 'blind' to treatment allocation	No	
	on your answers to the above, in your opinion was per	ormance bias present? If so, what is the likely	
direct	ion of its effect?		
	High risk of bias		
Likely	/ direction of effect: Effect size bigger		
C AH	trition bias (systematic differences between the comparis	congroups with respect to loss of participants)	
C. At	inition bias (systematic uniferences between the comparis	on groups with respect to loss of participants)	
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)		
C2	a. How many participants did not complete treatment	in each group?	
	Experimental group N: 0; Control group N: 3		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	Yes	
	systematic differences between groups in terms of		
<u> </u>	those who did not complete treatment)		
C3	For how many participants in each group were no outo Experimental group N: 0; Control group N: 1	come data available?	
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
	on your answers to the above, in your opinion was attr	tion bias present? If so, what is the likely	
direct	ion of its effect?		
	Low risk of bias		
Likely	Likely direction of effect: Not applicable		

D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)		
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Yes
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Different for different outcomes: No for RBS as parent-completed and unclear/unknown for DSM-IV clinical diagnosis as blinding of outcome assessors not reported
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Unclear for most outcomes, no for RBS as parent-completed
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely direction of its effect?		
Different for different outcomes: Unclear/unknown for the Vineland Adaptive Behaviour Scale (VABS), high risk for Repetitive Behavior Scale (RBS) and high risk for DSM-IV clinical diagnosis		
Likely direction of effect: Effect size bigger, where high risk		

## 1.8.2 PAJAREYA2011

Study	TD	PAJAREYA2011	
5			
Biblic	graphic reference:		
-	Pajareya K, Nopmaneejumruslers K. A pilot randomized controlled trial of DIR/Floortime parent training		
interv	rention for pre-school children with autistic spectrum di	sorders. Autism. 2011;15:563-577.	
Guide	eline topic: Management and support of children and	Review question number: 6.1	
young	g people on the autism spectrum		
Checl	klist completed by: Odette Megnin-Viggars		
A. Sel	ection bias (systematic differences between the compari	son groups)	
A1	An appropriate method of randomisation was used		
	to allocate participants to treatment groups (which	Unclear (randomisation method is unclear)	
	would have balanced any confounding factors	oncical (randomisation incurou is uncical)	
	equally across groups)		
A2	There was adequate concealment of allocation (such	Unclear (insufficient detail reported with	
	that investigators, clinicians and participants cannot	regards to allocation concealment)	
	influence enrolment or treatment allocation)	regulas to unocation conceanient)	
A3	The groups were comparable at baseline, including		
	all major confounding and prognostic factors	Yes	
Pesso		ation biogeneoust? If an autot is the likely	
	l on your answers to the above, in your opinion was sele ion of its effect?	ction bias present? If so, what is the likely	
uireci			
	Under the sum with of hiss		
	Unclear/unknown risk of bias		
Likely	y direction of effect: Unknown direction		
Linter			
	formance bias (systematic differences between groups in	n the care provided, apart	
from	the intervention under investigation)		
B1	The comparison groups received the same care apart	Yes (equivalent number of children in each	
-	from the intervention(s) studied	group were on medication and attended a	
		preschool programme. There were also no	
		significant difference in the number of hours	
		of other psychosocial interventions	
		[including speech therapy, behavioural	
		therapy and occupational therapy] with the	
		control group receiving 3.3 hours and the	
		intervention group receiving 3.1 hours)	
B2	Participants receiving care were kept 'blind' to		
	treatment allocation	No	
L			

B3	Individuals administering care were kept 'blind' to		
	treatment allocation	No	
Based	on your answers to the above, in your opinion was perf	formance bias present? If so, what is the likely	
	ion of its effect?	ormance blas present. It so, what is the likely	
direct	ion of its effect?		
	High risk of bias		
Likely	v direction of effect: Effect size bigger		
	00		
C At	rition bias (systematic differences between the comparis	son groups with respect to loss of participants)	
0.110	anion bus (bystematic anterences between the compare	on groups (marrespect to 1000 of participants)	
C1	All groups were followed up for an equal length of		
CI			
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)		
<u>C</u> 2	a. How many participants did not complete treatment	in each group?	
C2		in each group?	
	Experimental group N: 1; Control group N: 0		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	N	
	systematic differences between groups in terms of	Yes	
	those who did not complete treatment)		
C3	For how many participants in each group were no outc	come data available?	
0			
	Experimental group N: 0; Control group N: 0		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes (Last Observation Carried Forward)	
	in terms of those for whom outcome data were not		
	available).		
Bacod	on your answers to the above, in your opinion was attri	ition bize present? If so, what is the likely	
		thon bias present: It so, what is the likely	
airect	ion of its effect?		
	Low risk of bias		
Likely	v direction of effect: Not applicable		
1			

D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine	Different for different outcome measures:
	the outcome	Unclear for the parent-rated FEDQ as no
		independent reliability and validity data for
		the Thai-version of this outcome measure
D4	Investigators were kept 'blind' to participants'	Different for different outcome measures:
	exposure to the intervention	No for the FEDQ as the questionnaire was
		parent-rated and parents were involved in
		the intervention so the outcome assessment
		was non-blind
D5	Investigators were kept 'blind' to other important	Different for different outcome measures:
	confounding and prognostic factors	No for the FEDQ as the questionnaire was
		parent-rated and parents were involved in
		the intervention so the outcome assessment
		was non-blind
	d on your answers to the above, in your opinion was de tion of its effect?	tection bias present? If so, what is the likely
	Different for different outcomes: High risk for paren	t-rated FEDQ
Likol	y direction of effect: Effect size bigger, where high risk	

### 1.8.3 RICKARDS2007

$C_{1}$	ID	BLCK A BDC2007	
Study	AID.	RICKARDS2007	
Ricka home	Bibliographic reference: Rickards AL, Walstab JE, Wright-Rossi RA, Simpson J, Reddihough DS. A randomized, controlled trial of a home-based intervention program for children with autism and developmental delay. Journal of Developmental and Behavioral Pediatrics. 2007;28:308-316.		
of a ra	rds AL, Walstab JE, Wright-Rossi RA, Simpson J, Reddil andomized controlled trial of a home-based intervention opmental delay and their families. Child: Care, Health a	programme for children with autism and	
Guide young	eline topic: Management and support of children and g people on the autism spectrum	Review question number: 6.1	
Cneck	klist completed by: Odette Megnin-Viggars		
A. Sel	ection bias (systematic differences between the comparis	son groups)	
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (drawing of lots)	
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Yes (blind selection of folded cards from bowl with an independent observer for validation)	
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes	
	on your answers to the above, in your opinion was sele ion of its effect?	ction bias present? If so, what is the likely	
	Low risk of bias		
Likely direction of effect: Not applicable			
B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)			
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)	
B2	Participants receiving care were kept 'blind' to treatment allocation	No	

B3	Individuals administering care were kept 'blind' to		
	treatment allocation	No	
_			
	l on your answers to the above, in your opinion was per ion of its effect?	formance bias present? If so, what is the likely	
direct	ion of its effect?		
	High risk of bias		
Likely	v direction of effect: Effect size bigger		
C Att	trition bias (systematic differences between the comparis	on groups with respect to loss of participants)	
C. 710	inition bias (systematic unreferices between the company	on groups with respect to loss of participants)	
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)		
C2	a. How many participants did not complete treatment	in each group?	
	Experimental group N: 2; Control group N: 4		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or systematic differences between groups in terms of	Yes	
	those who did not complete treatment)		
C3	For how many participants in each group were no out	come data available?	
	Experimental group N: 2; Control group N: 4		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not available).		
Based	on your answers to the above, in your opinion was attr	ition bias present? If so, what is the likely	
	ion of its effect?		
	Low risk of bias		
Likely direction of effect: Not applicable			

D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)		
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Yes
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Unclear (although some outcome measures were assessed by a blinded psychologist, many outcome measures relied on non- blind parent- or teacher- report)
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Unclear (although some outcome measures were assessed by a blinded psychologist, many outcome measures relied on non- blind parent- or teacher- report)
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely direction of its effect?		
Unclear/unknown risk of bias		
Likely direction of effect: Unknown direction		

## 1.8.4 ROBERTS2011

Study	ID	ROBERTS2011
5		
	graphic reference:	
	rts J, Williams K, Carter M, Evans D, Parmenter T, Silove	
	arly intervention programs for young children with auti -based. Research in Autism Spectrum Disorders. 2011;5:	
	eline topic: Management and support of children and	Review question number: 6.1
	g people on the autism spectrum	neview question number. o.i
	slist completed by: Odette Megnin-Viggars	
A. Sel	ection bias (systematic differences between the comparis	son groups)
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which	
	would have balanced any confounding factors	Yes (computer random number generator)
	equally across groups)	
A2	There was adequate concealment of allocation (such	
	that investigators, clinicians and participants cannot	Yes (central allocation)
	influence enrolment or treatment allocation)	
A3	The groups were comparable at baseline, including	No (experimental group had a higher
	all major confounding and prognostic factors	proportion of children with a diagnosis of
		autistic disorder than the control group,
		87.5% relative to 69%, and the control group
		had a higher proportion of non-ASD
		diagnoses, 17.2% relative to 0%. The
		experimental group also had a lower
		Griffiths developmental quotient score than
		the control group, 57 relative to 66.5)
	on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely
direct	ion of its effect?	
	Unclear/unknown risk of bias	
Likely	v direction of effect: Unknown direction	
B.Der	formance hiss (austomatic differences between merry i	n the care provided anort
	formance bias (systematic differences between groups in the intervention under investigation)	in the care provided, apart
1101111	the mervention under myesugation	
B1	The comparison groups received the same care apart	
	from the intervention(s) studied	Yes

B2	Participants receiving care were kept 'blind' to treatment allocation	No
B3	Individuals administering care were kept 'blind' to treatment allocation	No
	on your answers to the above, in your opinion was perfion of its effect?	formance bias present? If so, what is the likely
	High risk of bias	
Likely	v direction of effect: Effect size bigger	
C. Att	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	a. How many participants did not complete treatment Experimental group N: 7; Control group N: 4	in each group?
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes
C3	For how many participants in each group were no outo Experimental group N: 7; Control group N: 4	come data available?
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes
	on your answers to the above, in your opinion was attri ion of its effect?	ition bias present? If so, what is the likely
	Low risk of bias (only one participant dropped out af	ter the start of the intervention)
Likely	v direction of effect: Not applicable	

21		
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Yes (with the exception of the Parent Perception Questionnaire as this was a study-specific, and non-standardized, measure)
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Unclear (despite blinding outcome assessors, all but one of the outcome measures relies on interview with parent and parents were non-blind to group assignment and other potentially confounding factors and were also part of the intervention so problems with self- assessment)
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Unclear (despite blinding outcome assessors, all but one of the outcome measures relies on interview with parent and parents were non-blind to group assignment and other potentially confounding factors and were also part of the intervention so problems with self- assessment)
	d on your answers to the above, in your opinion was de tion of its effect?	tection bias present? If so, what is the likely
	High risk of bias (with the exception of the RDLS)	
Likel	y direction of effect: Effect size bigger	

#### 1.8.5 SMITH2000

Study	ID	SMITH2000		
Smith	graphic reference: n T, Groen AD, Wynn JW. Randomized trial of intensive sive developmental disorder. American Journal on Men	-		
Guide	line topic: Management and support of children and g people on the autism spectrum	Review question number: 6.1		
Check	list completed by: Odette Megnin-Viggars			
A. Sel	A. Selection bias (systematic differences between the comparison groups)			
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (random number table)		
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Yes (group assignment performed by independent statistician)		
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes		
	on your answers to the above, in your opinion was sele ion of its effect?	ction bias present? If so, what is the likely		
	Low risk of bias			
Likely	direction of effect: Not applicable			
B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)				
B1	The comparison groups received the same care apart from the intervention(s) studied	Yes		
B2	Participants receiving care were kept 'blind' to treatment allocation	No		
B3	Individuals administering care were kept 'blind' to treatment allocation	No		
	on your answers to the above, in your opinion was perfion of its effect?	formance bias present? If so, what is the likely		

C. Att	rition bias (systematic differences between the comparis	on groups with respect to loss of participants)
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	a. How many participants did not complete treatment i Experimental group N: 0; Control group N: 0	in each group?
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes
C3	For how many participants in each group were no outc Experimental group N: 0; Control group N: 0	ome data available?
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes
	on your answers to the above, in your opinion was attri ion of its effect?	tion bias present? If so, what is the likely
	Low risk of bias	
Likely	direction of effect: Not applicable	
D. De	tection bias (bias in how outcomes are ascertained, diag	nosed or verified)
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes

the outcomeUnclear/unknown for the Reyn Developmental Language Scale this outcome measure is common administered to children with ar not been validated in an autistic and participants fall outside the for this test at endpoint. Also unclear/unknown for the Acher Behavior Checklist as this outcom not validated in autism populat the Family Satisfaction Question psychometric properties of outcome measure not testedD4Investigators were kept 'blind' to participants' exposure to the interventionDifferent for different outcomes Achenbach Child Behavior Check Family Satisfaction Questionnai	as although only utism it has population age range nbach Child ome measure ion. No for nnaire as the
D4Investigators were kept 'blind' to participants' exposure to the interventionbis outcome measure is common administered to children with an not been validated in an autistic and participants fall outside the for this test at endpoint. Also unclear/unknown for the Acher Behavior Checklist as this outco not validated in autism populat the Family Satisfaction Question psychometric properties of outcome measure not testedD4Investigators were kept 'blind' to participants' exposure to the interventionDifferent for different outcomes Achenbach Child Behavior Checklist as the source of the second common comparison of the second common	only utism it has population age range nbach Child ome measure ion. No for nnaire as the
D4Investigators were kept 'blind' to participants' exposure to the interventionadministered to children with a not been validated in an autistic and participants fall outside the for this test at endpoint. Also unclear/unknown for the Acher Behavior Checklist as this outco not validated in autism populat the Family Satisfaction Question psychometric properties of outcomeasure not testedD4Investigators were kept 'blind' to participants' exposure to the interventionDifferent for different outcomes Achenbach Child Behavior Checklist Behavior Checklist A participants'	utism it has population age range nbach Child ome measure ion. No for nnaire as the
D4Investigators were kept 'blind' to participants' exposure to the interventionnot been validated in an autistic and participants fall outside the for this test at endpoint. Also unclear/unknown for the Acher Behavior Checklist as this outco not validated in autism populat the Family Satisfaction Question psychometric properties of outcomeasure Acherbach Child Behavior Checklist as the set of the intervention	e population e age range nbach Child ome measure ion. No for nnaire as the
And participants fall outside the for this test at endpoint. Also unclear/unknown for the Acher Behavior Checklist as this outco not validated in autism populat the Family Satisfaction Question psychometric properties of outcomeasure not testedD4Investigators were kept 'blind' to participants' exposure to the interventionDifferent for different outcomes Achenbach Child Behavior Checklist as the source of	age range nbach Child ome measure ion. No for nnaire as the
for this test at endpoint. Also unclear/unknown for the Acher Behavior Checklist as this outco not validated in autism populat the Family Satisfaction Question psychometric properties of outcomeasure not testedD4Investigators were kept 'blind' to participants' exposure to the interventionDifferent for different outcomes Achenbach Child Behavior Checklist as the source of the source	nbach Child ome measure ion. No for nnaire as the
Unclear/unknown for the AcherBehavior Checklist as this outconot validated in autism populatthe Family Satisfaction Questionpsychometric properties of outcomeasure not testedD4Investigators were kept 'blind' to participants'exposure to the interventionAchenbach Child Behavior Check	ome measure ion. No for nnaire as the
Behavior Checklist as this outco not validated in autism populat the Family Satisfaction Question psychometric properties of outco measure not testedD4Investigators were kept 'blind' to participants' exposure to the interventionDifferent for different outcomes Achenbach Child Behavior Checklist as this outco not validated in autism populat the Family Satisfaction Question psychometric properties of outcomes Mathematical Achenbach Child Behavior Checklist as this outco not validated in autism populat the Family Satisfaction Question psychometric properties of outcomes Mathematical Achenbach Child Behavior Checklist as this outcomes	ome measure ion. No for nnaire as the
D4Investigators were kept 'blind' to participants' exposure to the interventionDifferent for different outcomes Achenbach Child Behavior Chemic	ion. No for nnaire as the
D4       Investigators were kept 'blind' to participants'       Different for different outcomes         Achenbach Child Behavior Chee	nnaire as the
D4     Investigators were kept 'blind' to participants' exposure to the intervention     Different for different outcomes Achenbach Child Behavior Chee	
D4       Investigators were kept 'blind' to participants'       Different for different outcomes         exposure to the intervention       Achenbach Child Behavior Chee	ome
D4Investigators were kept 'blind' to participants'Different for different outcomesexposure to the interventionAchenbach Child Behavior Cher	
exposure to the intervention Achenbach Child Behavior Chee	
	No for
Family Satisfaction Ouestionnai	cklist and
·	re as parent
or teacher-completed and paren	its and
teachers non-blind	
D5 Investigators were kept 'blind' to other important Different for different outcomes	:
confounding and prognostic factors Unclear/unknown for the Vinel	land
Adaptive Behaviour Scale (VAB	S) as
although administered by blind	ed outcome
assessor based on interview wit	h non-blind
parent rather than direct behavi	oural
observation and no for Achenba	ach Child
Behavior Checklist and Family S	Satisfaction
Questionnaire as parent- or teac	
completed and parents and teac	hers non-
blind	
Based on your answers to the above, in your opinion was detection bias present? If so, what is t	the likely
direction of its effect?	
Different for different outcomes: Unclear/unknown for the Vineland Adaptive Behavio	our Scale
(VABS), high risk for Achenbach Child Behavior Checklist and Family Satisfaction Questionnai	ire and
unclear/unknown for the Reynell Developmental Language Scale	
Likely direction of effect: Effect size bigger, where high risk	

# 1.9 PSYCHOSOCIAL INTERVENTIONS AIMED AT SPEECH AND LANGUAGE

## 1.9.1 GATTINO2011

Study ID		GATTINO2011	
	graphic reference:		
	Gattino GS, Riesgo RDS, Longo D, Leite JCL, Faccini LS. Effects of relational music therapy on		
communication of children with autism: a randomized controlled study. Nordic Journal of Music Therapy. 2011;20:142-154.			
	Guideline topic: Management and support of children and Review question number: 6.1		
	g people on the autism spectrum	Review question number: 6.1	
Checklist completed by: Odette Megnin-Viggars			
A. Sel	ection bias (systematic differences between the comparis	son groups)	
A1	An appropriate method of randomisation was used		
	to allocate participants to treatment groups (which	Yes (computer random number generator)	
	would have balanced any confounding factors equally across groups)		
A2	There was adequate concealment of allocation (such	Yes (central allocation - conducted by	
<i>Π</i> 2	that investigators, clinicians and participants cannot	external investigator, concealed from study	
	influence enrolment or treatment allocation)	investigators and delivered directly to	
		intervention administrators)	
A3	The groups were comparable at baseline, including		
	all major confounding and prognostic factors	Unclear (insufficient detail reported)	
Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?			
direct	ion of its effect?		
	Low risk of bias		
	Low lisk of blas		
Likely	v direction of effect: Not applicable		
5			
B Por	formance bias (systematic differences between groups in	a the care provided apart	
	the intervention under investigation)	i ne care provided, apart	
110111			
B1	The comparison groups received the same care apart		
	from the intervention(s) studied	Unclear (insufficient detail reported)	
B2	Participants receiving care were kept 'blind' to		
	treatment allocation	No	

B3	Individuals administering care were kept 'blind' to	
	treatment allocation	No
Based	on your answers to the above, in your opinion was perf	formance bias present? If so, what is the likely
	ion of its effect?	1
	I lish vish of hiss	
	High risk of bias	
T ·1 1		
Likely	v direction of effect: Effect size bigger	
C AL		······································
C. Att	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of	
	time (or analysis was adjusted to allow for	Yes
	differences in length of follow-up)	
C2	a. How many participants did not complete treatment	in each group?
02	Experimental group N: 0; Control group N: 0	in cuch group.
	b. The groups were comparable for treatment	
	completion (that is, there were no important or	Yes
	systematic differences between groups in terms of	
	those who did not complete treatment)	
C3	For how many participants in each group were no outc	come data available?
	Experimental group N: 0; Control group N: 0	
	b. The groups were comparable with respect to the	
	availability of outcome data (that is, there were no	
	important or systematic differences between groups	Yes
	in terms of those for whom outcome data were not	
	available).	
Desed		tion him many 11 for what is the libely
	l on your answers to the above, in your opinion was attri	thon bias present? If so, what is the likely
direct	ion of its effect?	
	Low risk of bias	
Likely	v direction of effect: Not applicable	

D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Unclear for CARS social communication outcome measure as no independent reliability/validity data for this composite score
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Yes (blinded external outcome assessors)
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Yes (blinded external outcome assessors)
	d on your answers to the above, in your opinion was det tion of its effect?	tection bias present? If so, what is the likely
	Low risk of bias	
Likel	y direction of effect: Not applicable	

## 1.9.2 HOWLIN2007

Study ID HOWLIN2007
Bibliographic reference:
Howlin P, Gordon RK, Pasco G, Wade A, Charman T. The effectiveness of picture exchange communication system (PECS) training for teachers of children with autism: a pragmatic, group randomised controlled trial. Journal of Child Psychology and Psychiatry. 2007;48:473-481.
that fournal of child i sychology and i sychiatry. 2007;10:475-401.
Gordon K, Pasco G, McElduff F, Wade A, Howlin P, Charman T. A communication-based intervention for
nonverbal children with autism: what changes? who benefits? Journal of Consulting and Clinical
Psychology. 2011;79:447-457.
Guideline topic: Management and support of children and Review question number: 6.1
young people on the autism spectrum
Checklist completed by: Odette Megnin-Viggars
A. Selection bias (systematic differences between the comparison groups)
A1 An appropriate method of randomisation was used
to allocate participants to treatment groups (which Yes (randomised using online
would have balanced any confounding factors randomisation programme)
equally across groups)

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A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	No (DTG children had a significantly higher ADOS language impairment score [mean=3.4] than those in the ITG [2.7] and NTG [2.5] and children in the ITG had a significantly higher nonverbal developmental quotient [25.9] than children in the DTG [22.7])
	on your answers to the above, in your opinion was sele ion of its effect?	ction bias present? If so, what is the likely
	Unclear/unknown risk of bias	
Likely	v direction of effect: Unknown direction	
	formance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)
B2	Participants receiving care were kept 'blind' to treatment allocation	No
B3	Individuals administering care were kept 'blind' to treatment allocation	No
	on your answers to the above, in your opinion was perfion of its effect?	formance bias present? If so, what is the likely
	High risk of bias	
Likely	v direction of effect: Effect size bigger	
C. Att	rition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes

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C2	a. How many participants did not complete treatment	0 1
	Experimental group N: 5 (ITG); 7 (DTG); Control grou	p N: 1
	b. The groups were comparable for treatment	
	completion (that is, there were no important or	N
	systematic differences between groups in terms of	No
	those who did not complete treatment)	
C3	For how many participants in each group were no out	come data available?
0	Experimental group N: 4 (ITG); 0 (DTG); Control grou	
	b. The groups were comparable with respect to the	
	availability of outcome data (that is, there were no	
	important or systematic differences between groups	Yes (Last Observation Carried Forward)
	in terms of those for whom outcome data were not	
	available).	
Based	l on your answers to the above, in your opinion was attr	ition bias present? If so, what is the likely
direc	tion of its effect?	
	Low risk of bias	
Likal	y direction of effect: Not applicable	
LIKei	y direction of effect. Not applicable	
D D		1
D. De	etection bias (bias in how outcomes are ascertained, diag	nosed or verified)
D1	The study had an appropriate length of follow-up	Yes
D1	The study had an appropriate length of follow-up	Yes
D1 D2	The study had an appropriate length of follow-up The study used a precise definition of outcome	Yes Yes
D2	The study used a precise definition of outcome	Yes
D2	The study used a precise definition of outcome         A valid and reliable method was used to determine	Yes Unclear for behavioural observations as these outcome measures were assessed
D2	The study used a precise definition of outcome         A valid and reliable method was used to determine	Yes Unclear for behavioural observations as these outcome measures were assessed using an observation schedule designed
D2	The study used a precise definition of outcome         A valid and reliable method was used to determine	Yes Unclear for behavioural observations as these outcome measures were assessed using an observation schedule designed specifically for this study and only 10% of
D2	The study used a precise definition of outcome         A valid and reliable method was used to determine	Yes Unclear for behavioural observations as these outcome measures were assessed using an observation schedule designed specifically for this study and only 10% of observations were double-coded so
D2 D3	The study used a precise definition of outcome A valid and reliable method was used to determine the outcome	Yes Unclear for behavioural observations as these outcome measures were assessed using an observation schedule designed specifically for this study and only 10% of observations were double-coded so reliability and validity is unclear
D2	The study used a precise definition of outcome A valid and reliable method was used to determine the outcome Investigators were kept 'blind' to participants'	Yes Unclear for behavioural observations as these outcome measures were assessed using an observation schedule designed specifically for this study and only 10% of observations were double-coded so
D2 D3	The study used a precise definition of outcome A valid and reliable method was used to determine the outcome	Yes Unclear for behavioural observations as these outcome measures were assessed using an observation schedule designed specifically for this study and only 10% of observations were double-coded so reliability and validity is unclear
D2 D3 D4	The study used a precise definition of outcome A valid and reliable method was used to determine the outcome Investigators were kept 'blind' to participants' exposure to the intervention	Yes Unclear for behavioural observations as these outcome measures were assessed using an observation schedule designed specifically for this study and only 10% of observations were double-coded so reliability and validity is unclear No (rated by non-blind investigators)
D2 D3	The study used a precise definition of outcome A valid and reliable method was used to determine the outcome Investigators were kept 'blind' to participants' exposure to the intervention Investigators were kept 'blind' to other important	Yes Unclear for behavioural observations as these outcome measures were assessed using an observation schedule designed specifically for this study and only 10% of observations were double-coded so reliability and validity is unclear
D2 D3 D4	The study used a precise definition of outcome A valid and reliable method was used to determine the outcome Investigators were kept 'blind' to participants' exposure to the intervention	Yes Unclear for behavioural observations as these outcome measures were assessed using an observation schedule designed specifically for this study and only 10% of observations were double-coded so reliability and validity is unclear No (rated by non-blind investigators)
D2 D3 D4 D5	The study used a precise definition of outcome         A valid and reliable method was used to determine the outcome         Investigators were kept 'blind' to participants' exposure to the intervention         Investigators were kept 'blind' to other important confounding and prognostic factors	Yes Unclear for behavioural observations as these outcome measures were assessed using an observation schedule designed specifically for this study and only 10% of observations were double-coded so reliability and validity is unclear No (rated by non-blind investigators) No (rated by non-blind investigators)
D2 D3 D4 D5 Based	The study used a precise definition of outcome         A valid and reliable method was used to determine         the outcome         Investigators were kept 'blind' to participants'         exposure to the intervention         Investigators were kept 'blind' to other important         confounding and prognostic factors         Involution of the above, in your opinion was determine	Yes Unclear for behavioural observations as these outcome measures were assessed using an observation schedule designed specifically for this study and only 10% of observations were double-coded so reliability and validity is unclear No (rated by non-blind investigators) No (rated by non-blind investigators)
D2 D3 D4 D5 Based	The study used a precise definition of outcome         A valid and reliable method was used to determine the outcome         Investigators were kept 'blind' to participants' exposure to the intervention         Investigators were kept 'blind' to other important confounding and prognostic factors	Yes Unclear for behavioural observations as these outcome measures were assessed using an observation schedule designed specifically for this study and only 10% of observations were double-coded so reliability and validity is unclear No (rated by non-blind investigators) No (rated by non-blind investigators)
D2 D3 D4 D5 Based	The study used a precise definition of outcome A valid and reliable method was used to determine the outcome Investigators were kept 'blind' to participants' exposure to the intervention Investigators were kept 'blind' to other important confounding and prognostic factors I on your answers to the above, in your opinion was det tion of its effect?	Yes Unclear for behavioural observations as these outcome measures were assessed using an observation schedule designed specifically for this study and only 10% of observations were double-coded so reliability and validity is unclear No (rated by non-blind investigators) No (rated by non-blind investigators)
D2 D3 D4 D5 Based	The study used a precise definition of outcome         A valid and reliable method was used to determine         the outcome         Investigators were kept 'blind' to participants'         exposure to the intervention         Investigators were kept 'blind' to other important         confounding and prognostic factors         Involution of the above, in your opinion was determine	Yes Unclear for behavioural observations as these outcome measures were assessed using an observation schedule designed specifically for this study and only 10% of observations were double-coded so reliability and validity is unclear No (rated by non-blind investigators) No (rated by non-blind investigators)
D2 D3 D4 D5 Based	The study used a precise definition of outcome A valid and reliable method was used to determine the outcome Investigators were kept 'blind' to participants' exposure to the intervention Investigators were kept 'blind' to other important confounding and prognostic factors I on your answers to the above, in your opinion was det tion of its effect?	Yes Unclear for behavioural observations as these outcome measures were assessed using an observation schedule designed specifically for this study and only 10% of observations were double-coded so reliability and validity is unclear No (rated by non-blind investigators) No (rated by non-blind investigators)
D2 D3 D4 D5 Based direc	The study used a precise definition of outcome A valid and reliable method was used to determine the outcome Investigators were kept 'blind' to participants' exposure to the intervention Investigators were kept 'blind' to other important confounding and prognostic factors I on your answers to the above, in your opinion was det tion of its effect?	Yes Unclear for behavioural observations as these outcome measures were assessed using an observation schedule designed specifically for this study and only 10% of observations were double-coded so reliability and validity is unclear No (rated by non-blind investigators) No (rated by non-blind investigators)
D2 D3 D4 D5 Based direc	The study used a precise definition of outcome         A valid and reliable method was used to determine the outcome         Investigators were kept 'blind' to participants' exposure to the intervention         Investigators were kept 'blind' to other important confounding and prognostic factors         Investigators to the above, in your opinion was detail of its effect?         High risk of bias	Yes Unclear for behavioural observations as these outcome measures were assessed using an observation schedule designed specifically for this study and only 10% of observations were double-coded so reliability and validity is unclear No (rated by non-blind investigators) No (rated by non-blind investigators)

#### 1.9.3 LIM2010

Study	TD	LIM2010
D:1 1:	1	
	graphic reference:	as the such as so is a such and destion in
	IA. Effect of "developmental speech and language traini	
	ren with autism spectrum disorders. Journal of Music Th	
	eline topic: Management and support of children and	Review question number: 6.1
	g people on the autism spectrum	
Check	klist completed by: Odette Megnin-Viggars	
A. Sel	ection bias (systematic differences between the compari	son groups)
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which	Unclear (randomisation method is unclear)
	would have balanced any confounding factors	Chelear (randomisation method is unclear)
	equally across groups)	
A2	There was adequate concealment of allocation (such	Unclear (insufficient detail reported with
	that investigators, clinicians and participants cannot	regards to allocation concealment)
	influence enrolment or treatment allocation)	regards to anocation conceannent)
A3	The groups were comparable at baseline, including	
	all major confounding and prognostic factors	Unclear (insufficient detail reported)
Based	l on your answers to the above, in your opinion was sele	ection bias present? If so, what is the likely
direct	ion of its effect?	
	Unclear/unknown risk of bias	
Likely	y direction of effect: Unknown direction	
	formance bias (systematic differences between groups in	n the care provided, apart
from	the intervention under investigation)	
B1	The comparison groups received the same care apart	
DI	from the intervention(s) studied	
	non the intervention(s) studied	Unclear (insufficient detail reported)
B2	Participants receiving care were kept 'blind' to	
	treatment allocation	No
B3	Individuals administering care were kept 'blind' to	
	treatment allocation	No
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely		
	ion of its effect?	r

	Likely direction of cheet. Effect size bigger			
C. At	C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes		
C2	a. How many participants did not complete treatment Experimental group N: 0; Control group N: 0	in each group?		
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes		
C3	For how many participants in each group were no out Experimental group N: 0; Control group N: 0	come data available?		
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes		
	l on your answers to the above, in your opinion was attr tion of its effect?	ition bias present? If so, what is the likely		
	Low risk of bias			
Likel	Likely direction of effect: Not applicable			
D. De	etection bias (bias in how outcomes are ascertained, diag	nosed or verified)		
D1	The study had an appropriate length of follow-up	No (unclear if 4 days is a sufficient follow- up duration to observe significant treatment effects)		
D2	The study used a precise definition of outcome	Yes		
D3	A valid and reliable method was used to determine the outcome	Unclear (outcome measure was designed by the investigator for the study with no independent reliability/validity data, however, video recordings of assessment sessions were double-coded with high inter- rater reliability)		

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D4	Investigators were kept 'blind' to participants' exposure to the intervention	Yes (blinded outcome assessors)
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Yes (blinded outcome assessors)
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely direction of its effect?		
Low risk of bias		
Likely direction of effect: Not applicable		

#### 1.9.4 WELTERLIN2012

Study ID	WELTERLIN2012		
Bibliographic reference: Welterlin A, Turner-Brown LM, Harris S, Mesibov G, Delmolino L. The home TEACCHing program for toddlers with autism. Journal of Autism and Developmental Disorders. 2012;42:1827-1835.			
Guideline topic: Management and support of children and young people on the autism spectrum	Review question number: 6.1		
Checklist completed by: Odette Megnin-Viggars			
A. Selection bias (systematic differences between the compari	son groups)		
A1 An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)		
A2 There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)		
A3 The groups were comparable at baseline, including all major confounding and prognostic factors	Unclear (insufficient detail reported)		
Based on your answers to the above, in your opinion was sele direction of its effect?	ection bias present? If so, what is the likely		
Unclear/unknown risk of bias			
Likely direction of effect: Unknown direction			
B. Performance bias (systematic differences between groups i	n the care provided, apart		
from the intervention under investigation)			
B1 The comparison groups received the same care apart from the intervention(s) studied	Yes		
B2 Participants receiving care were kept 'blind' to treatment allocation	No		
B3 Individuals administering care were kept 'blind' to treatment allocation	No		
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?			

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	a. How many participants did not complete treatment Experimental group N: 0; Control group N: 0	in each group?	
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes	
C3	For how many participants in each group were no outo Experimental group N: 0; Control group N: 0	come data available?	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes	
	Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?		
	Low risk of bias		
Likely	Likely direction of effect: Not applicable		
D. De	D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)		
D1	The study had an appropriate length of follow-up	Unclear (unclear if 12 weeks a sufficient follow-up duration to detect significant treatment effects)	
D2	The study used a precise definition of outcome	Yes	
D3	A valid and reliable method was used to determine the outcome	Yes	

D4	Investigators were kept 'blind' to participants'	Unclear (identity and blinding of outcome
	exposure to the intervention	assessor/s are not reported)
D5	Investigators were kept 'blind' to other important	Unclear (identity and blinding of outcome
D5	confounding and prognostic factors	assessor/s are not reported)
	contouring and prognostic factors	assessory's are not reported)
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely		
direction of its effect?		
Unclear/unknown risk of bias		
Likely direction of effect: Unknown direction		

## 1.9.5 WHALEN2010

Study	r ID	WHALEN2010	
Biblic	araphic reference		
	graphic reference: en C, Moss D, Ilan AB, Vaupel M, Fielding P, Macdonal	d K et al. Efficacy of TeachTown: Basics	
	uter-assisted intervention for the Intensive Comprehens		
-	l district. Autism. 2010;14:179-197.	ave radion riogram in 200 ringeles annied	
	eline topic: Management and support of children and	Review question number: 6.1	
	g people on the autism spectrum		
	klist completed by: Odette Megnin-Viggars		
A. Sel	lection bias (systematic differences between the compari	son groups)	
A1	An appropriate method of randomisation was used		
111	to allocate participants to treatment groups (which		
	would have balanced any confounding factors	Unclear (randomisation method is unclear)	
	equally across groups)		
A2	There was adequate concealment of allocation (such		
	that investigators, clinicians and participants cannot	Unclear (insufficient detail reported with	
	influence enrolment or treatment allocation)	regards to allocation concealment)	
A3	The groups were comparable at baseline, including		
110	all major confounding and prognostic factors	Unclear (insufficient detail reported)	
	an major comountaing and prognostic factors		
Based	l on your answers to the above, in your opinion was sele	ection bias present? If so, what is the likely	
	ion of its effect?	1	
	Unclear/unknown risk of bias		
Likely	y direction of effect: Unknown direction		
D D		a that a second data data a second	
	formance bias (systematic differences between groups in the intervention and an investigation)	n the care provided, apart	
from	the intervention under investigation)		
B1	The comparison groups received the same care apart	Yes (all participants receiving Intensive	
	from the intervention(s) studied	Comprehensive Autism Program [ICAP] for	
		27-30 hours a week)	
DC			
B2	Participants receiving care were kept 'blind' to	N	
	treatment allocation	No	
B3	Individuals administering care were kept 'blind' to		
20	treatment allocation	No	
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely			
direction of its effect?			

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	a. How many participants did not complete treatment Experimental group N: Not reported; Control group N	0	
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Unclear	
C3	For how many participants in each group were no outo Experimental group N: 0; Control group N: 1	come data available?	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes	
	l on your answers to the above, in your opinion was attr tion of its effect?	ition bias present? If so, what is the likely	
	Low risk of bias		
Likely direction of effect: Not applicable			
D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)			
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	
D3	A valid and reliable method was used to determine the outcome	Unclear for the Brigance Inventory of Child Development scale as there are no independent reliability and/or validity data reported	

D4	Investigators were kept 'blind' to participants'	Unclear (identity and blinding of outcome
	exposure to the intervention	assessors not reported)
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Unclear (identity and blinding of outcome assessors not reported)
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely direction of its effect?		
Unclear/unknown risk of bias		
Likely direction of effect: Unknown direction		

## 1.9.6 YODER2006B

D.1 11		
Biblio	graphic reference:	
Yoder	P, Stone WL. A randomized comparison of the effect of	two prelinguistic communication
	entions on the acquisition of spoken communication in j	preschoolers with ASD. Journal of Speech,
Langu	age, and Hearing Research. 200b6;49:698-711.	
Yoder	PJ, Lieberman RG. Brief report: randomized test of the	efficacy of picture exchange communication
systen	n on highly generalized picture exchanges in children w	ith ASD. Journal of Autism and
Devel	opmental Disorders. 2010;40:629-632.	
Guide	line topic: Management and support of children and	Review question number: 6.1
young	g people on the autism spectrum	
Check	list completed by: Odette Megnin-Viggars	
A. Sel	ection bias (systematic differences between the comparis	son groups)
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which	Voc (computer rendem number concreter)
	would have balanced any confounding factors	Yes (computer random number generator)
	equally across groups)	
A2	There was adequate concealment of allocation (such	Unclear (authors state that assignment was
	that investigators, clinicians and participants cannot	concealed but provide no detail about the
	influence enrolment or treatment allocation)	method for concealment)
A3	The groups were comparable at baseline, including	No (although some baseline differences
	all major confounding and prognostic factors	were controlled for, such as baseline group
		differences in the Mullen expressive
		language score [higher for RPMT group
		than PECS group] and object-exchange
		turns [higher for PECS group than for
		RPMT group], correction was only
		performed where time 1 variables correlated
		with time 2 and 3 variables. Therefore, no
		covariate was entered to control for group
		differences on the ADOS social algorithm
		[higher in RPMT group] as this variable was
		not significantly correlated with the
		outcome variable in the YODER2010 paper,
		however, authors do not report correlations
		or corrections for this variable for the
	on your answers to the above, in your opinion was sele	outcomes reported in YODER2006B paper)

Unclear/unknown risk of bias

Likely direction of effect: Unknown direction				
	B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)			
B1	The comparison groups received the same care apart from the intervention(s) studied	No (parents in the RPMT group chose to receive more hours of training [mean: 10.6 hours] than parents in the PECS group [mean 7.9 hours]. In addition, the number of hours of 'other intervention' increased between the treatment and follow-up periods, and this increase was greater for the PECS group [4 hours] than for the RPMT group [-0.3 hours])		
B2	Participants receiving care were kept 'blind' to treatment allocation	No		
B3	Individuals administering care were kept 'blind' to treatment allocation	No		
	on your answers to the above, in your opinion was perfion of its effect?	formance bias present? If so, what is the likely		
	High risk of bias			
Likely direction of effect: Effect size bigger				
C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)				
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes		
C2	a. How many participants did not complete treatment in each group? Experimental group N: 0; Control group N: 0			
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes		

<u> </u>		1		
C3	For how many participants in each group were no outcome data available?			
	Experimental group N: 0; Control group N: 0			
	b. The groups were comparable with respect to the			
	availability of outcome data (that is, there were no			
	important or systematic differences between groups	Yes		
	in terms of those for whom outcome data were not			
	available).			
	on your answers to the above, in your opinion was attri	ition bias present? If so, what is the likely		
direct	ion of its effect?			
	Low risk of bias			
T 11 1				
Likely	v direction of effect: Not applicable			
D.D.		1		
D. De	tection bias (bias in how outcomes are ascertained, diag	hosed or verified)		
D1	The study had an appropriate length of follow-up	Yes		
D2	The study used a precise definition of outcome	Yes		
D3	A valid and reliable method was used to determine	Unclear for behavioural observation		
	the outcome	outcome measures (only 20% of behavioural		
		observations were double-coded and no		
		standardized coding instrument was used		
		so reliability and validity of this outcome		
		measure unclear)		
D4	Investigators were kept 'blind' to participants'	Unclear for behavioural observation		
	exposure to the intervention	outcome measures (identity and blinding of		
	I	outcome assessor not reported)		
D5	Investigators were kept 'blind' to other important	Unclear for behavioural observation		
	confounding and prognostic factors	outcome measures (identity and blinding of		
	······································	outcome assessor not reported)		
Based	Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely			
direction of its effect?				
Unclear/unknown risk of bias for behavioural observation measures				
Unclear/ unknown fisk of blas for behavioural observation measures				
Likely direction of effect: Unknown direction				

# 1.10BIOMEDICAL INTERVENTIONS AIMED AT SPEECH AND LANGUAGE

#### 1.10.1ALLAM2008

Study	ID	ALLAM2008
Allan	graphic reference: h H, Eidine NG, Helmy G. Scalp acupuncture effect on la t study. Journal of Alternative and Complementary Med	
	eline topic: Management and support of children and g people on the autism spectrum	Review question number: 6.1
Check	dist completed by: Lucy Burt	
A. Sel	ection bias (systematic differences between the comparis	son groups)
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (random numbers table)
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Yes (results of randomisation were made available to the investigator in sealed envelopes)
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Unclear (insufficient detail reported)
	on your answers to the above, in your opinion was sele ion of its effect?	ction bias present? If so, what is the likely
	Low risk of bias	
Likely	v direction of effect: Not applicable	
	formance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart
B1	The comparison groups received the same care apart from the intervention(s) studied	Yes
B2	Participants receiving care were kept 'blind' to treatment allocation	No
B3	Individuals administering care were kept 'blind' to treatment allocation	No

	l on your answers to the above, in your opinion was per tion of its effect?	formance bias present? If so, what is the likely
	High risk of bias	
Likely	y direction of effect: Effect size bigger	
C. Att	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	a. How many participants did not complete treatment Experimental group N: 0; Control group N: 0	in each group?
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes
C3	For how many participants in each group were no out Experimental group N: 0; Control group N: 0	come data available?
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes
	l on your answers to the above, in your opinion was attr tion of its effect?	ition bias present? If so, what is the likely
	Low risk of bias	
Likely	y direction of effect: Not applicable	

D. De	etection bias (bias in how outcomes are ascertained, diag	gnosed or verified)
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Unclear (no validity or reliability information reported for any outcome measures)
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Unclear (no details of outcome assessors reported)
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Unclear (no details of outcome assessors reported)
	d on your answers to the above, in your opinion was de tion of its effect?	tection bias present? If so, what is the likely
	Unclear/unknown risk of bias	
Likel	y direction of effect: Unknown direction	

#### 1.10.2ZHOU2008

Study	ID	ZHOU2008	
Bibliographic reference: Zhou H, Zhang P. The effect of language therapy combined with point massage on communication disability in autism children. China Pratical Medical. 2008;3:24-26.			
Cochr	k DKL, Wong V, Chen WX. Acupuncture for autism spec- ane Database of Systematic Reviews. 2011;9:Art. No CD 02/14651858.CD007849.pub2.		
young	eline topic: Management and support of children and g people on the autism spectrum	Review question number: 6.1	
Check	list completed by: Lucy Burt		
A. Sel	ection bias (systematic differences between the comparis	son groups)	
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (method of randomisation is unclear)	
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)	
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Unclear (insufficient detail reported)	
	Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?		
	Unclear/unknown risk of bias		
Likely direction of effect: Unknown direction			
	formance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart	
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)	
B2	Participants receiving care were kept 'blind' to treatment allocation	No	
B3	Individuals administering care were kept 'blind' to treatment allocation	No	

	l on your answers to the above, in your opinion was per tion of its effect?	formance bias present? If so, what is the likely
	High risk of bias	
Likely	y direction of effect: Effect size bigger	
C. Att	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	a. How many participants did not complete treatment Experimental group N: 0; Control group N: 0	in each group?
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes
C3	For how many participants in each group were no out Experimental group N: 0; Control group N: 0	come data available?
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes
	d on your answers to the above, in your opinion was attr tion of its effect?	ition bias present? If so, what is the likely
	Low risk of bias	
Likely	y direction of effect: Not applicable	

D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Unclear (no validity or reliability information reported for any outcome measures)
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Unclear (no details of outcome assessors reported)
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Unclear (no details of outcome assessors reported)
	d on your answers to the above, in your opinion was de tion of its effect?	tection bias present? If so, what is the likely
	Unclear/unknown risk of bias	
Likol	y direction of effect: Unknown direction	

# 1.11PSYCHOSOCIAL INTERVENTIONS AIMED AT IQ AND ACADEMIC SKILLS

#### 1.11.1ROGERS2012

Study	ID	ROGERS2012	
D:1 1:	1		
Bibliographic reference:			
Rogers SJ, Estes A, Lord C, Vismara L, Winter J, Fitzpatrick A, et al. Effects of a brief Early Start Denver			
	Model (ESDM)-based parent intervention on toddlers at risk for autism spectrum disorders: a randomized controlled trial. Journal of the American Academy of Child and Adolescent Psychiatry. 2012;51:1052-1065.		
	eline topic: Management and support of children and	Review question number: 6.1	
	g people on the autism spectrum	Review question number. 6.1	
-	dist completed by: Odette Megnin-Viggars		
CHECK	hist completed by. Odette Weghin-Viggars		
A. Sel	ection bias (systematic differences between the comparis	son groups)	
A1	An appropriate method of randomisation was used		
	to allocate participants to treatment groups (which	Yes (computer generated algorithm)	
	would have balanced any confounding factors	res (computer generated algorithm)	
	equally across groups)		
A2	There was adequate concealment of allocation (such		
	that investigators, clinicians and participants cannot	Yes (central allocation)	
	influence enrolment or treatment allocation)		
A3	The groups were comparable at baseline, including	No (children in the experimental group had	
	all major confounding and prognostic factors	a higher mean ADOS Social Affect score	
		[mean 34.14] than children in the control	
		group [mean 29.45] , and children in the	
		control group had higher imitation and	
		nonsocial orient scores [means 3.78 and 8	
		respectively] than children in the	
		experimental group [means 2.53 and 7	
		respectively])	
	on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely	
direct	direction of its effect?		
	Unclear/unknown risk of bias		
Likely	v direction of effect: Unknown direction		
B. Per	formance bias (systematic differences between groups ir	n the care provided, apart	
	the intervention under investigation)		

B1	The comparison groups received the same care apart from the intervention(s) studied	No (significant differences in number of intervention hours received between groups with the control group receiving more weekly hours of intervention [mean=3.68] than the experimental group [mean=1.48])
B2	Participants receiving care were kept 'blind' to treatment allocation	No
B3	Individuals administering care were kept 'blind' to treatment allocation	No
	d on your answers to the above, in your opinion was per tion of its effect?	formance bias present? If so, what is the likely
	High risk of bias	
Likely	y direction of effect: Effect size bigger	
	y direction of effect: Effect size bigger trition bias (systematic differences between the comparis	son groups with respect to loss of participants)
		son groups with respect to loss of participants) Yes
C. At	trition bias (systematic differences between the comparis All groups were followed up for an equal length of time (or analysis was adjusted to allow for	Yes in each group?
C. At	trition bias (systematic differences between the comparis All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up) a. How many participants did not complete treatment Experimental group N: Not reported; Control group N b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of	Yes in each group?
C. At	<ul> <li>trition bias (systematic differences between the comparis</li> <li>All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)</li> <li>a. How many participants did not complete treatment Experimental group N: Not reported; Control group N</li> <li>b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)</li> <li>For how many participants in each group were no out</li> </ul>	Yes in each group? : Not reported Unclear come data available?
C. At C1 C2	trition bias (systematic differences between the comparis All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up) a. How many participants did not complete treatment Experimental group N: Not reported; Control group N b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes in each group? : Not reported Unclear come data available?

Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?

Unclear/unknown risk of bias

Likely direction of effect: Unknown direction

D. De	etection bias (bias in how outcomes are ascertained, diag	gnosed or verified)
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Different validity and reliability for different outcome measures: Unclear/unknown for imitative sequences and orienting to social stimuli and joint attention measures
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Different for different outcome measures: Unclear/unknown for ADOS-T (outcome assessor reported as 'laboratory personnel' and blinding of outcome assessors not reported) and MSEL and imitative sequences, orienting to social stimuli and orienting to joint attention measures (identity and blinding of outcome assessors not reported); No for CDI and VABS (parent-rated or based on parental report and parents were non-blind and involved in the intervention)
D5	Investigators were kept 'blind' to other important confounding and prognostic factors d on your answers to the above, in your opinion was det	Different for different outcome measures: Unclear/unknown for ADOS-T (outcome assessor reported as 'laboratory personnel' and blinding of outcome assessors not reported) and MSEL and imitative sequences, orienting to social stimuli and orienting to joint attention measures (identity and blinding of outcome assessors not reported); No for CDI and VABS (parent-rated or based on parental report and parents were non-blind and involved in the intervention)

direction of its effect?

Different for different outcome measures: Unclear/unknown risk for ADOS-T and MSEL; High risk for CDI, VABS and imitative sequences, orienting to social stimuli and orienting to joint attention measures

# 1.12BIOMEDICAL INTERVENTIONS AIMED AT IQ AND ACADEMIC SKILLS

#### 1.12.1WONG2010A

Study	ID	WONG2010A	
Biblio	graphic reference:		
Wong VC-N, Sun JG. Randomized controlled trial of acupuncture versus sham acupuncture in autism			
spectrum disorder. Journal of Alternative and Complementary Medicine. 2010a;16:545-553.			
	line topic: Management and support of children and	Review question number: 6.1	
	g people on the autism spectrum	1	
,	list completed by: Lucy Burt		
A. Sel	ection bias (systematic differences between the comparis	son groups)	
		0 1 /	
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which		
	would have balanced any confounding factors	Yes (computer generated randomisation)	
	equally across groups)		
A2	There was adequate concealment of allocation (such		
112	that investigators, clinicians and participants cannot	Yes (randomisation carried out by an	
	influence enrolment or treatment allocation)	independent statistician)	
A3	The groups were comparable at baseline, including		
110	all major confounding and prognostic factors	Yes	
	an major comountaing and prognostic factors		
Based	on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely	
	ion of its effect?	1	
	Low risk of bias		
Likely	direction of effect: Not applicable		
B Por	formance bias (systematic differences between groups in	the care provided apart	
	the intervention under investigation)	The care provided, apart	
nom			
B1	The comparison groups received the same care apart		
	from the intervention(s) studied	Unclear (insufficient detail reported)	

B2	Participants receiving care were kept 'blind' to treatment allocation	Yes (control condition was sham acupuncture)	
B3	Individuals administering care were kept 'blind' to treatment allocation	No	
	on your answers to the above, in your opinion was perf ion of its effect?	ormance bias present? If so, what is the likely	
	Unclear/unknown risk of bias (High risk for performa	ance bias and low risk for response bias)	
Likely	v direction of effect: Effect size bigger, where high risk		
C. Att	rition bias (systematic differences between the comparis	on groups with respect to loss of participants)	
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	a. How many participants did not complete treatment i Experimental group N: 0; Control group N: 0	in each group?	
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes	
C3	For how many participants in each group were no outc Experimental group N: 0; Control group N: 0	ome data available?	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes	
	Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?		
	Low risk of bias		
Likely	v direction of effect: Not applicable		

D. De	etection bias (bias in how outcomes are ascertained, diag	gnosed or verified)
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Different validity and reliability for different outcomes: Yes - Griffiths Mental Developmental Scale, Ritvo-Freeman Real Life Scale and Reynell Language Developmental Scale No - WeeFIM
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Yes (outcome measures were taken by independent research assistants who were blind to treatment allocation)
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Yes (outcome measures were taken by independent research assistants who were blind to treatment allocation)
	d on your answers to the above, in your opinion was de tion of its effect?	tection bias present? If so, what is the likely
	Low risk of bias	
Likel	y direction of effect: Not applicable	

## 1.12.2WONG2010B

Study	TD	WONG2010B
Biblic	araphic reference:	
	graphic reference: g VC-N, Chen W-X, Liu W-L. Randomized controlled tri	al of electro-acupuncture for autism spectrum
-	der. Alternative Medicine Review. 2010b;15:136-146.	and creeds acaptaticate for adds in spectrum
	eline topic: Management and support of children and	Review question number: 6.1
	g people on the autism spectrum	1
Check	klist completed by: Lucy Burt	
A. Sel	ection bias (systematic differences between the compari	son groups)
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which	Vec (computer concreted rep domination)
	would have balanced any confounding factors	Yes (computer generated randomisation)
	equally across groups)	
A2	There was adequate concealment of allocation (such	
	that investigators, clinicians and participants cannot	Yes (results were in sealed envelopes)
	influence enrolment or treatment allocation)	
A3	The groups were comparable at baseline, including	
	all major confounding and prognostic factors	Yes
Based	l l on your answers to the above, in your opinion was sele	ection bias present? If so, what is the likely
	ion of its effect?	-
	Low risk of bias	
Likely	v direction of effect: Not applicable	
B. Per	formance bias (systematic differences between groups i	n the care provided, apart
from	the intervention under investigation)	
B1	The comparison groups received the same care apart	Unclear (the study reports that children
21	from the intervention(s) studied	continued with their conventional
		interventions or education programmes for
		ASD, but no further information reported)
B2	Participants receiving care were kept 'blind' to	
	treatment allocation	Yes (control condition was sham
		acupuncture)
B3	Individuals administering care were kept 'blind' to	
	treatment allocation	No
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?		
airect	non of its effect?	

Unclear/unknown risk of bias (High risk for performance bias and low risk for response bias)

Likely direction of effect: Effect size bigger, where high risk

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	a. How many participants did not complete treatment Experimental group N: 1; Control group N: 4	in each group?	
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes	
C3	For how many participants in each group were no out Experimental group N: 1; Control group N: 3	come data available?	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes	
Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?			
Low risk of bias			
Likely direction of effect: Not applicable			

D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)		
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Different validity and reliability for different outcomes Yes - RFRLS; CGI-I; ABC; RDLS; PEDI Unclear - WeeFIM
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Yes (all outcome assessors were blind to treatment allocation)
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	<ul> <li>Different blinding for different outcome measures:</li> <li>No - RFRLS; CGI-I; ABC; PEDI; parent rated and parents are not blind to confounding factors</li> <li>Unclear - RDLS; WeeFIM; outcome assessor not reported so unclear if they are blinded to confounding factors</li> </ul>
	d on your answers to the above, in your opinion was det tion of its effect? Low risk of bias	tection bias present? If so, what is the likely
Likely direction of effect: Not applicable		
Linci		

# 1.13BIOMEDICAL INTERVENTIONS AIMED AT SENSORY SENSITIVITIES

### 1.13.1BETTISON1996

Study ID		BETTISON1996		
D.1.11				
	Bibliographic reference: Bettison S. The long-term effects of auditory training on children with autism. Journal of Autism and			
	opmental Disorders. 1996;26:361-374.	ten with autism. Journal of Autism and		
	eline topic: Management and support of children and	Review question number: 6.1		
	g people on the autism spectrum	1		
Check	list completed by: Odette Megnin-Viggars			
A. Sel	ection bias (systematic differences between the comparis	son groups)		
A1	An appropriate method of randomisation was used			
	to allocate participants to treatment groups (which	Unclear (randomisation method is unclear)		
	would have balanced any confounding factors	Chercui (hundernibulien incluied is unclear)		
	equally across groups)			
A2	There was adequate concealment of allocation (such	Unclear (insufficient detail reported with		
	that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	regards to allocation concealment)		
A3	The groups were comparable at baseline, including			
110	all major confounding and prognostic factors	Yes		
	, , , , , , , , , , , , , , , , , , , ,			
	on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely		
direct	direction of its effect?			
Unclear/unknown risk of bias				
Likola	Likely direction of offects Unknown direction			
LIKEI	Likely direction of effect: Unknown direction			
	formance bias (systematic differences between groups in	h the care provided, apart		
from	the intervention under investigation)			
B1	The comparison groups received the same care apart			
	from the intervention(s) studied	Unclear (nsufficient detail reported)		
B2	Participants receiving care were kept 'blind' to			
	treatment allocation	Yes (attention-placebo condition)		
B3	Individuals administering care were kept 'blind' to	N		
	treatment allocation	No		

Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely	
direction of its effect?	

Unclear/unknown risk of bias (High risk for performance bias and low risk for response bias)

Likely direction of effect: Effect size bigger, where high risk

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)

C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)		
<u> </u>			
C2	a. How many participants did not complete treatment	in each group?	
	Experimental group N: 0; Control group N: 0	r	
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	Yes	
	systematic differences between groups in terms of	165	
	those who did not complete treatment)		
C3	For how many participants in each group were no outc	ome data available?	
	Experimental group N: 0; Control group N: 0		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
Based	on your answers to the above, in your opinion was attri	tion bias present? If so, what is the likely	
direct	ion of its effect?		
	Low risk of bias		
Likeh	Likely direction of effect: Not applicable		
Linciy	ancedon of check. Not applicable		

	etection bias (bias in how outcomes are ascertained, diag	,
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Different for different outcomes: No for SSQ and SP as non-standardized assessment and no validity data available for this outcome measure
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Yes
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Different for different outcome: No for SSQ, SP and DBC as parent-completed (and teacher-completed for DBC) so non-blind to other potentially confounding factors; Unclear for ABC as outcome measure based on interview with parents so unclear if blind to other potentially confounding factors; and unclear for PPVT and LIPS as unclear if outcome assessors were blind to other potentially confounding factors
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely direction of its effect?		
Low risk of bias		
Likely direction of effect: Not applicable		

## 1.13.2FAZLIOGLU2008

Study	ID	FAZLIOGLU2008	
Biblio	graphic reference:		
Fazlio	ğlu Y, Baran G. A sensory integration therapy program	on sensory problems for children with	
autisn	autism. Perceptual and Motor Skills. 2008;106:415-422.		
Guideline topic: Management and support of children and		Review question number: 6.1	
young people on the autism spectrum			
Checklist completed by: Odette Megnin-Viggars			
A. Selection bias (systematic differences between the comparison groups)			
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors	Unclear (randomisation method is unclear)	

Autism: the management and support of children and young people on the autism spectrum

	equally across groups)	
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes (groups matched on age, sex and level of functioning)
	on your answers to the above, in your opinion was sele ion of its effect?	ction bias present? If so, what is the likely
	Unclear/unknown risk of bias	
Likely	direction of effect: Unknown direction	
B. Per	formance bias (systematic differences between groups in	n the care provided, apart
	the intervention under investigation)	
B1	The comparison groups received the same care apart from the intervention(s) studied	Yes (both groups were attending special education classes at the centre)
B2	Participants receiving care were kept 'blind' to treatment allocation	No
B3	Individuals administering care were kept 'blind' to treatment allocation	No
	on your answers to the above, in your opinion was perfion of its effect?	formance bias present? If so, what is the likely
	High risk of bias	
Likely	direction of effect: Effect size bigger	
C. Att	rition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes

C2	C2 a. How many participants did not complete treatment in each group?		
	Experimental group N: 0; Control group N: 0		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or	Yes	
	systematic differences between groups in terms of	ies	
	those who did not complete treatment)		
C3	For how many participants in each group were no out	come data available?	
	Experimental group N: 0; Control group N: 0		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
Based	l on your answers to the above, in your opinion was attr	ition bias present? If so, what is the likely	
direc	tion of its effect?		
	Low risk of bias		
Likel	y direction of effect: Not applicable		
	11		
D. De	etection bias (bias in how outcomes are ascertained, diag	nosed or verified)	
D1	The study had an appropriate length of follow-up	Yes	
D2	The study used a precise definition of outcome	Yes	
D3	A valid and reliable method was used to determine	Yes	
	the outcome		
D4	Investigators were kept 'blind' to participants'	Unclear (identity and blinding of outcome	
	exposure to the intervention	assessors not reported)	
	1		
D5	Investigators were kept 'blind' to other important	Unclear (identity and blinding of outcome	
	confounding and prognostic factors	assessors not reported)	
D			
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely			
direction of its effect?			
Unclear/unknown risk of bias			
Til 1. June diene of offent TI-1 second direction			
Likely direction of effect: Unknown direction			

## 1.13.3SILVA2009

Study ID		SILVA2009		
Bibliographic reference:         Silva LMT, Schalock M, Ayres R, Bunse C, Budden S. Qigong massage treatment for sensory and self-regulation problems in young children with autism: a randomized controlled trial. American Journal of				
	pational Therapy. 2009;63:423-432. Ine topic: Management and support of children and	Review question number: 6.1		
	g people on the autism spectrum			
Check	clist completed by: Lucy Burt			
A. Sel	ection bias (systematic differences between the comparis	son groups)		
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	No (there were caveats to randomisation process)		
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)		
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	No (groups were not comparable on parent- rated measures of social communication and autism composite and teacher-rated measures of sensory problems)		
Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?				
High risk of bias				
Likely direction of effect: Effect size bigger				
B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)				
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (the study reports that parents agreed not to begin any additional interventions once the study had started, but it is not clear what interventions children were already involved in throughout the duration of the study)		
B2	Participants receiving care were kept 'blind' to treatment allocation	No		

r				
B3	Individuals administering care were kept 'blind' to			
	treatment allocation	No		
Based	on your answers to the above, in your opinion was perf	formance bias present? If so, what is the likely		
	ion of its effect?	r i i, i i i,		
uncer				
	High risk of bias			
Likely	v direction of effect: Effect size bigger			
C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)		
		1		
C1	All groups were followed up for an equal length of	No (there was a five-month post-		
	time (or analysis was adjusted to allow for	intervention follow-up for the treatment		
	differences in length of follow-up)	group, but not the control group)		
C2	a. How many participants did not complete treatment	in each group?		
	Experimental group N: 0; Control group N: 0			
	b. The groups were comparable for treatment			
	completion (that is, there were no important or			
	systematic differences between groups in terms of	Yes		
	those who did not complete treatment)			
C3	For how many participants in each group were no outc	ama data available?		
C3				
	Experimental group N: 0; Control group N: 0			
	b. The groups were comparable with respect to the			
	availability of outcome data (that is, there were no			
	important or systematic differences between groups	Yes		
	in terms of those for whom outcome data were not			
	available).			
Based	on your answers to the above, in your opinion was attri	ition bias present? If so, what is the likely		
direction of its effect?				
Low risk of bias				
Likely direction of effect: Not applicable				

D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	<ul> <li>Different validity and reliability for different outcome measures:</li> <li>Yes - ABC and PDDBI</li> <li>Unclear - SSC as this measure was created by the research group and no independent measures of validity or reliability are reported</li> </ul>
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Different blinding for different outcome measures:         No - PDDBI parent measures as parent were involved in delivering the intervention and were not blind to the treatment allocation Unclear - PDDBI teacher measures as no blinding of teachers reported.         Unclear - ABC and SSC as the rated not reported
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Different blinding for different outcome measures:         No - PDDBI parent and teacher measures as parents and teachers are not blind to confounding variables         Unclear - ABC and SSC as the rated not reported
	d on your answers to the above, in your opinion was de	tection bias present? If so, what is the likely
direc	tion of its effect?	
	Different risk for different outcomes: ear/unknown risk: ABC, SSC and PDDBI teacher meas risk: PDDBI parent measures	ires
0	y direction of effect: Effect size bigger, where high risk	

### 1.13.4SILVA2011B

Study	7 ID	SILVA2011B
	pgraphic reference:	ution with a generated alignment Observed
massa	LMT, Schalock M, Gabrielsen K. Early intervention for a age program: a randomized controlled trial. American Jo	
559.		
	eline topic: Management and support of children and	Review question number: 6.1
	g people on the autism spectrum	
Checl	klist completed by: Lucy Burt	
A. Sel	lection bias (systematic differences between the compari	son groups)
A1	An appropriate method of randomisation was used	
	to allocate participants to treatment groups (which	Yes (randomisation was done by a random
	would have balanced any confounding factors	number generator)
	equally across groups)	
A2	There was adequate concealment of allocation (such	Unclear (insufficient detail reported with
	that investigators, clinicians and participants cannot	regards to allocation concealment)
	influence enrolment or treatment allocation)	
A3	The groups were comparable at baseline, including	
	all major confounding and prognostic factors	Yes
	l on your answers to the above, in your opinion was sele ion of its effect?	ction bias present? If so, what is the likely
	Unclear/unknown risk of bias	
Likely	y direction of effect: Unknown direction	
B. Per	formance bias (systematic differences between groups in	n the care provided, apart
	the intervention under investigation)	1 ' 1
B1	The comparison groups received the same care apart	
DI	from the intervention(s) studied	
	from the intervention(s) studied	Unclear (insufficient detail reported)
B2	Participants receiving care were kept 'blind' to	
	treatment allocation	No
B3	Individuals administering care were kept 'blind' to	
	treatment allocation	No
Basec	l on your answers to the above, in your opinion was per	l formance bias present? If so, what is the likely
direct	tion of its effect?	

High risk of bias

Likely direction of effect: Effect size bigger

C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	a. How many participants did not complete treatment Experimental group N: 4; Control group N: 1	in each group?
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes
C3 For how many participants in each group were Experimental group N: 4; Control group N: 1		come data available?
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes
	l on your answers to the above, in your opinion was attr tion of its effect?	ition bias present? If so, what is the likely
	Low risk of bias	
Likely	y direction of effect: Not applicable	

D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Different for different outcomes: Yes - PDDBI Unclear - ASPI, Sense and self-regulation checklist
D4	Investigators were kept 'blind' to participants' exposure to the intervention	No (outcomes were parent-rated and parents were delivering the intervention and were not blind to treatment allocation)
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	No (outcomes were parent-rated and parents were not blind to confounding and prognostic factors)
	d on your answers to the above, in your opinion was det tion of its effect?	ection bias present? If so, what is the likely
	High risk of bias	
Likel	y direction of effect: Effect size bigger	

# 1.14PSYCHOSOCIAL INTERVENTIONS AIMED AT COEXISTING MENTAL HEALTH PROBLEMS

### 1.14.1 CHALFANT2007

Study ID		CHALFANT2007		
Bibliographic reference: Chalfant AM, Rapee R, Carroll L. Treating anxiety disorders in children with high functioning autism spectrum disorders: a controlled trial. Journal of Autism and Developmental Disorders. 2007;37:1842-1857.				
	eline topic: Management and support of children and g people on the autism spectrum	Review question number: 6.1		
Check	dist completed by: Lucy Burt			
A. Sel	ection bias (systematic differences between the comparis	son groups)		
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (randomisation method is unclear)		
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)		
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes		
	on your answers to the above, in your opinion was sele ion of its effect?	ction bias present? If so, what is the likely		
Unclear/unknown risk of bias				
Likely direction of effect: Unknown direction				
B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)				
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)		
B2	Participants receiving care were kept 'blind' to treatment allocation	No		
B3	Individuals administering care were kept 'blind' to treatment allocation	No		

Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely		
direction of its effect?		
	High risk of bias	
Likely	y direction of effect: Effect size bigger	
C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	a. How many participants did not complete treatment Experimental group N: 4; Control group N: 0	in each group?
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Unclear
C3	For how many participants in each group were no out Experimental group N: 4; Control group N: 0	come data available?
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Unclear
	l on your answers to the above, in your opinion was attr tion of its effect?	ition bias present? If so, what is the likely
	Unclear/unknown risk of bias	
Likely	y direction of effect: Unknown direction	

D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)		
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Different validity and reliability for different outcomes: CATS - unclear as no independent validity or reliability is reported All other measures are valid and reliable
D4	Investigators were kept 'blind' to participants' exposure to the intervention	No (parent- and self-reported outcome measures non-blind and blinding of teachers to group assignment not reported)
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	No (all outcome assessors non-blind to other potentially confounding factors)
	d on your answers to the above, in your opinion was det tion of its effect?	ection bias present? If so, what is the likely
	High risk of bias	
Likel	y direction of effect: Effect size bigger	

### 1.14.2DRAHOTA2011

Study	TD	DRAHOTA2011/WOOD2009	
5			
Bibliographic reference: Drahota A, Wood JJ, Sze KM, Van Dyke M. Effects of cognitive behavioral therapy on daily living skills in children with high-functioning autism and concurrent anxiety disorders. Journal of Autism and Developmental Disorders. 2011;41:257-265.			
with a	l JJ, Drahota A, Sze K, Har K, Chiu A, Langer DA. Cogni autism spectrum disorders: a randomized, controlled tria iatry. 2009;50:224–234.		
young	eline topic: Management and support of children and g people on the autism spectrum	Review question number: 6.1	
Check	klist completed by: Lucy Burt		
A. Sel	ection bias (systematic differences between the compari-	son groups)	
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (computer generated sequence)	
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (the study reports that the allocation of participants was concealed from investigators, but method of concealment is not reported)	
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	No (groups were not comparable in relation to coexisting conditions at baseline)	
	on your answers to the above, in your opinion was sele ion of its effect?	ction bias present? If so, what is the likely	
	Unclear/unknown risk of bias		
Likely	v direction of effect: Unknown direction		
B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)			
B1	The comparison groups received the same care apart from the intervention(s) studied	Yes	
B2	Participants receiving care were kept 'blind' to treatment allocation	No	

B3	Individuals administering care were kept 'blind' to		
	treatment allocation	No	
Based	on your answers to the above, in your opinion was perf	formance bias present? If so, what is the likely	
	ion of its effect?	······································	
uncer			
	High risk of bias		
Likely	v direction of effect: Effect size bigger		
C. Att	rition bias (systematic differences between the comparis	son groups with respect to loss of participants)	
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	No (no three-month follow-up data	
	differences in length of follow-up)	available for the waitlist control group)	
C2	a. How many participants did not complete treatment	in each group?	
	Experimental group N: 3; Control group N: 1		
	b. The groups were comparable for treatment		
	completion (that is, there were no important or		
	systematic differences between groups in terms of	Yes	
	those who did not complete treatment)		
<u> </u>		1	
C3	For how many participants in each group were no outo	come data available?	
	Experimental group N: 0; Control group N: 0		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
Pagad		ition hiss present? If so, what is the likely	
	on your answers to the above, in your opinion was attri	ation bias present? If so, what is the likely	
direct	ion of its effect?		
Low risk of bias			
Likely direction of effect: Not applicable			

D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Yes
D4	Investigators were kept 'blind' to participants' exposure to the intervention Investigators were kept 'blind' to other important confounding and prognostic factors	Blinding different for different outcomes:MASC - No blinding; self-report and parentratedPCIQ - No blinding; parent-ratedCGI and ADIS-CSR- Outcome assessorswere independent graduate evaluators whowere blind to treatment allocationVABS - Unclear as based on interview withnon-blind parents rather than directbehavioural observationBlinding different for different outcomes:MASC - No blinding; self-report and parent-ratedPCIQ - No blinding; parent-ratedCGI and ADIS-CSR- Outcome assessors
direct MAS ADIS	d on your answers to the above, in your opinion was de tion of its effect? Detection bias different for different outcomes: C and PCIQ - High risk S-CSR and CGI - Low risk 5 - Unclear/unknown risk	were independent graduate evaluators who were blind to confounding factors VABS - Unclear as based on interview with non-blind parents rather than direct behavioural observation tection bias present? If so, what is the likely

### 1.14.3REAVEN2012

Study	7 ID	REAVEN2012	
D:hl:	and the sector and		
Reave childr	ographic reference: en J, Blakeley-Smith A, Culhane-Shelburne K, Hepburn S ren with high-functioning autism spectrum disorders an palagy and Psychiatry, 2012;52:410,410	1 0 10	
	ology and Psychiatry. 2012;53:410-419. eline topic: Management and support of children and	Review question number: 6.1	
	g people on the autism spectrum	Review question number. 0.1	
· ·	klist completed by: Lucy Burt		
A. Sel	lection bias (systematic differences between the compari	son groups)	
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (computer generated sequence)	
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)	
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes	
	l on your answers to the above, in your opinion was sele ion of its effect?	ction bias present? If so, what is the likely	
Likely	Unclear/unknown risk of bias Likely direction of effect: Unknown direction		
	formance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart	
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)	
B2	Participants receiving care were kept 'blind' to treatment allocation	No	
B3	Individuals administering care were kept 'blind' to treatment allocation	No	
	l on your answers to the above, in your opinion was per tion of its effect?	formance bias present? If so, what is the likely	

High risk of bias

Likely direction of effect: Effect size bigger

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes	
C2	I I I I I I I I I I I I I I I I I I I		
	Experimental group N: 3; Control group N: 0 b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Unclear	
C3 For how many participants in each group were no outcome data available? Experimental group N: 4; Control group N: 3		come data available?	
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes	
	l on your answers to the above, in your opinion was attr tion of its effect?	ition bias present? If so, what is the likely	
Low risk of bias			
Likely	y direction of effect: Not applicable		

D1	The study had an appropriate length of follow-up	Yes
02	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Yes
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Different blinding for different outcomes: ADIS-P: Outcome assessors were independent clinical evaluators, but the ADIS-P is based on a parent interview and parents were not blind to treatment allocation CGIS-I: Outcome assessors were blind to treatment allocation
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Different blinding for different outcomes: ADIS-P: Outcome assessors were independent clinical evaluators, but the ADIS-P is based on a parent interview and parents were not blind to confounding factors CGIS-I: Outcome assessors were blind to treatment allocation
direc	d on your answers to the above, in your opinion was de tion of its effect? Detection bias different for different outcomes: S-P: Unclear/unknown risk of bias	tection bias present? If so, what is the likely
	Low risk y direction of effect: Unknown direction, where unclear	risk

### 1.14.4SOFRONOFF2005

Study ID		SOFRONOFF2005		
Bibliographic reference: Sofronoff K, Attwood T, Hinton S. A randomised controlled trial of a CBT intervention for anxiety in children with Asperger syndrome. Journal of Child Psychology and Psychiatry. 2005;46:1152-1160.				
Guide	line topic: Management and support of children and	Review question number: 6.1		
young	g people on the autism spectrum			
Check	list completed by: Lucy Burt			
A. Sel	ection bias (systematic differences between the comparis	son groups)		
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Unclear (method of randomisation unclear)		
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)		
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Yes		
Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect?				
Unclear/unknown risk of bias				
Likely direction of effect: Unknown direction				
B. Per	formance bias (systematic differences between groups ir	n the care provided, apart		
from the intervention under investigation)				
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)		
B2	Participants receiving care were kept 'blind' to treatment allocation	No		
B3	Individuals administering care were kept 'blind' to treatment allocation	No		
Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?				

High risk of bias			
Likely	v direction of effect: Effect size bigger		
C. Att	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)	
C1	All groups were followed up for an equal length of		
	time (or analysis was adjusted to allow for	Yes	
	differences in length of follow-up)	105	
<u> </u>	TT	in an the second 2	
C2	a. How many participants did not complete treatment	0 1	
	Experimental group N: 7 (N=3 in child-only group; N= 3	-4 in child + parent group); Control group N:	
	b. The groups were comparable for treatment		
	completion (that is, there were no important or		
	systematic differences between groups in terms of	Yes	
	those who did not complete treatment)		
C3	For how many participants in each group were no out	come data available?	
	Experimental group N: 7 (N=3 in child-only group; N=		
	3		
	b. The groups were comparable with respect to the		
	availability of outcome data (that is, there were no		
	important or systematic differences between groups	Yes	
	in terms of those for whom outcome data were not		
	available).		
	on your answers to the above, in your opinion was attr	ition bias present? If so, what is the likely	
direct	direction of its effect?		
	Low risk of bias		
1			
Likely	v direction of effect: Not applicable		

D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)		
D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Yes
D4	Investigators were kept 'blind' to participants' exposure to the intervention	No (outcomes were parent-rated and parents were not blind to allocation of treatment)
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	No (outcomes were parent-rated and parents were not blind to confounding factors)
	l on your answers to the above, in your opinion was det tion of its effect? High risk of bias	ection bias present? If so, what is the likely
Likel	y direction of effect: Effect size bigger	

# 1.15PHARMACOLOGICAL INTERVENTIONS AIMED AT COEXISTING MENTAL HEALTH PROBLEMS

#### 1.15.1 ELILILLY2009

Study	ID	ELILILLY2009		
Bibliographic reference:				
	ly and Company. A Randomized, Double-blind Compar	5		
	oo for Symptoms of Attention-Deficit/Hyperactivity Dis			
	m Spectrum Disorder. ClinicalTrials.gov NCT00380692.	Available from:		
http:/	/clinicaltrials.gov/ct2/show/NCT00380692.			
Harfte	erkamp M, van de Loo-Neus G, Minderaa RB, van der G	aag R-J, Escobar R, Schacht A, et al. A		
rando	mized double-blind study of atomoxetine versus placeb	o for attention-deficit/hyperactivity disorder		
symp	toms in children with autism spectrum disorder. Journal	of the American Academy of Child and		
Adole	scent Psychiatry. 2012;51:733-741.			
Guide	line topic: Management and support of children and	Review question number: 6.1		
young	g people on the autism spectrum			
Check	list completed by: Odette Megnin-Viggars			
A. Sel	ection bias (systematic differences between the comparis	son groups)		
A1	An appropriate method of randomisation was used			
	to allocate participants to treatment groups (which	Ver (comparison and any average of the second of the secon		
	would have balanced any confounding factors	Yes (computer random number generator)		
	equally across groups)			
A2	There was adequate concealment of allocation (such			
	that investigators, clinicians and participants cannot	Yes (pharmacy-controlled randomization)		
	influence enrolment or treatment allocation)			
A3	The groups were comparable at baseline, including			
	all major confounding and prognostic factors	Yes		
	, , , , , , , , , , , , , , , , , , , ,			
Based	on your answers to the above, in your opinion was selected	ction bias present? If so, what is the likely		
direction of its effect?				
	Low risk of bias			
Likely	direction of effect: Not applicable			
B. Performance bias (systematic differences between groups in the care provided, apart				
from the intervention under investigation)				

D4		
B1	The comparison groups received the same care apart	
	from the intervention(s) studied	Unclear (nsufficient detail reported)
De		
B2	Participants receiving care were kept 'blind' to	
	treatment allocation	Yes
B3	Individuals administering care were kept 'blind' to	
	treatment allocation	Yes
Based	l on your answers to the above, in your opinion was perl	formance bias present? If so, what is the likely
	ion of its effect?	officience blue present. If so, which is the interfy
uneci		
	Low risk of bias	
Likely	v direction of effect: Not applicable	
_		
C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of	
	time (or analysis was adjusted to allow for	Yes
	differences in length of follow-up)	res
	unreferces in length of follow-up)	
C2	a. How many participants did not complete treatment	in each group?
	Experimental group N: 5; Control group N: 3	0 1
	b. The groups were comparable for treatment	
	completion (that is, there were no important or	Yes
	systematic differences between groups in terms of	
	those who did not complete treatment)	
C3	For how many participants in each group were no outc	come data available?
	Experimental group N: 0; Control group N: 0	
	b. The groups were comparable with respect to the	
	availability of outcome data (that is, there were no	
	•	Ver (Leet Observation Convict Transmit)
	important or systematic differences between groups	Yes (Last Observation Carried Forward)
	in terms of those for whom outcome data were not	
	available).	
Based	l on your answers to the above, in your opinion was attr	ition bias present? If so, what is the likely
direct	ion of its effect?	
	Low risk of bias	
	LOW TISK OF DIAS	
Likely direction of effect: Not applicable		

D1	The study had an appropriate length of follow-up	Unclear (unclear if 8 weeks is a sufficient duration to detect significant treatment effects, particularly adverse events)
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Yes
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Yes
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Unclear (most outcome measures are parent-reported or teacher-reported and as such are non-blind to other potentially confounding factors)
	l on your answers to the above, in your opinion was de tion of its effect?	tection bias present? If so, what is the likely
	Low risk of bias	
Likel	y direction of effect: Not applicable	

## 1.16PSYCHOSOCIAL AND PHARMACOLOGICAL INTERVENTIONS AIMED AT COEXISTING MEDICAL OR FUNCTIONAL PROBLEMS

### 1.16.1CORTESI2012

Study ID		CORTESI2012		
D:1 1:	1. (			
Bibliographic reference:				
	si F, Giannotti F, Sebastiani S, Panunzi S, Valente D. Con ined with cognitive behavioural therapy, for persistent in			
	lers: a randomised placebo-controlled trial. Journal of Sl	1		
	eline topic: Management and support of children and	Review question number: 6.1		
	g people on the autism spectrum	Review question number. 0.1		
,	list completed by: Lucy Burt			
CIECE	list completed by. Eucy built			
A. Sel	ection bias (systematic differences between the comparis	son groups)		
A1	An appropriate method of randomisation was used			
	to allocate participants to treatment groups (which	Yes (computerised random number		
	would have balanced any confounding factors	generator)		
	equally across groups)			
A2	There was adequate concealment of allocation (such	Unclear (insufficient detail reported with		
	that investigators, clinicians and participants cannot	regards to allocation concealment)		
	influence enrolment or treatment allocation)			
A3	The groups were comparable at baseline, including			
	all major confounding and prognostic factors	Yes		
Basad	on your answers to the above, in your opinion was sele	ction bias prosent? If so, what is the likely		
	ion of its effect?	chon blas present: in so, what is the likely		
	Unlcear/unknown risk of bias			
Likely	v direction of effect: Unknown direction			
B. Per	formance bias (systematic differences between groups ir	n the care provided, apart		
	the intervention under investigation)			
B1	The comparison groups received the same care apart			
	from the intervention(s) studied	Yes		
B2	Participants receiving care were kept 'blind' to			
	treatment allocation	Different blinding for different comparisons:		
		No for all comparisons involving CBT		

B3	Individuals administering care were kept 'blind' to treatment allocation	Different blinding for different comparisons: No for all comparisons involving CBT		
	Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?			
	Different risk for different comparisons: High risk for	all comparisons involving CBT		
Likely	y direction of effect: Effect size bigger, where high risk			
C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)		
C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes		
C2	a. How many participants did not complete treatment Melatonin only: 4 CBT only: 4 CBT and Melatonin: 2 Placebo group: 6	in each group?		
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes		
С3	For how many participants in each group were no out Melatonin only: 6 (2 excluded from analysis due to miss CBT only: 7 (2 excluded from analysis due to missing a CBT and Melatonin: 5 (2 excluded from analysis due to Placebo group: 8 (2 excluded from analysis due to miss b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not	ssing actigraph data) actigraph data) o missing actigraph data)		
	available). I on your answers to the above, in your opinion was attr tion of its effect?	ition bias present? If so, what is the likely		
	Low risk of bias			
Likely	Likely direction of effect: Not applicable			

D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Yes
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Different blinding for different outcomes: Yes for actigraph data (for all comparisons), No for CSHQ for comparisons involving CBT, Yes for CSHQ for melatonin and placebo comparison
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Different blinding for different outcomes: Yes for actigraph data (for all comparisons), No for CSHQ for comparisons involving CBT, unclear/unknown for CSHQ for melatonin and placebo comparison
	d on your answers to the above, in your opinion was de tion of its effect?	tection bias present? If so, what is the likely
Different blinding for different outcomes: Low risk for actigraph data (for all comparisons), high risk for CSHQ for comparisons involving CBT, unclear/unknown risk for CSHQ for melatonin and placebo comparison Likely direction of effect: Effect size bigger, where high risk		

## 1.16.2GRINGRAS2012

Study	ID	GRINGRAS2012		
Gring childr	graphic reference: ras P, Gamble C, Jones AP, Wiggs L, Williamson PR, Su en with neurodevelopmental disorders: randomised do cal Journal 2012:345:e6664			
Guide	Medical Journal. 2012;345:e6664.         Guideline topic: Management and support of children and       Review question number: 6.1			
	g people on the autism spectrum slist completed by: Lucy Burt			
A. Sel	ection bias (systematic differences between the compari	son groups)		
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (computerised random number generator)		
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Yes (treatment packs were dispensed by the pharmacy at each site)		
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Unclear (insufficient detail reported)		
	Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely direction of its effect? Low risk of bias			
Likely	v direction of effect: Not applicable			
	formance bias (systematic differences between groups in the intervention under investigation)	n the care provided, apart		
B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)		
B2	Participants receiving care were kept 'blind' to treatment allocation	Yes (placebo matched on external and internal appearance)		
B3	Individuals administering care were kept 'blind' to treatment allocation	Yes (parents and trial staff were blind to treatment allocation)		
	on your answers to the above, in your opinion was per ion of its effect?	formance bias present? If so, what is the likely		

Low risk of bias

Likely direction of effect: Not applicable

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)		
<u>C1</u>		
C1	All groups were followed up for an equal length of	
	time (or analysis was adjusted to allow for	Yes
	differences in length of follow-up)	
C2	a. How many participants did not complete treatment	in each group?
	Experimental group N: 0; Control group N: 0	
	b. The groups were comparable for treatment	
	completion (that is, there were no important or	Yes
	systematic differences between groups in terms of	165
	those who did not complete treatment)	
C3	For how many participants in each group were no outcome data available?	
	Experimental group N: 5; Control group N: 9	
	b. The groups were comparable with respect to the	
	availability of outcome data (that is, there were no	
	important or systematic differences between groups	Yes
	in terms of those for whom outcome data were not	
	available).	
	l on your answers to the above, in your opinion was attr	ition bias present? If so, what is the likely
direction of its effect?		
	Low risk of bias	
Likely	y direction of effect: Not applicable	

D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Unclear: Sleep diaries: Validity and reliability is unclear TESS: Unclear who recorded information or how
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Yes (parents and trial staff were blind to treatment allocation)
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Different for different outcomes: No: Sleep diaries as parents are not blind to confounding factors Unclear: TESS as outcome assessor not reported
	d on your answers to the above, in your opinion was de tion of its effect?	tection bias present? If so, what is the likely
Low risk of bias		
Likel	y direction of effect: Not applicable	

## 1.17BIOMEDICAL INTERVENTIONS AIMED AT COEXISTING MEDICAL OR FUNCTIONAL PROBLEMS

#### 1.17.1HANDEN2009

Study ID		HANDEN2009		
Biblio	graphic reference:			
Handen BL, Melmed RD, Hansen RL, Aman MG, Burnham DL, Bruss JB, et al. A double-blind, placebo-				
contro	olled trial of oral human immunoglobulin for gastrointes	stinal dysfunction in children with autistic		
	ler. Journal of Autism and Developmental Disorders. 20			
	eline topic: Management and support of children and	Review question number: 6.1		
2	g people on the autism spectrum			
Check	klist completed by: Odette Megnin-Viggars			
A. Sel	ection bias (systematic differences between the comparis	son groups)		
A1	An appropriate method of randomisation was used			
	to allocate participants to treatment groups (which	Yes (computerised system)		
	would have balanced any confounding factors	res (computerised system)		
	equally across groups)			
A2	There was adequate concealment of allocation (such	Unclear (insufficient detail reported with		
	that investigators, clinicians and participants cannot	regards to allocation concealment)		
12	influence enrolment or treatment allocation)	-		
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	Unclear (insufficient detail reported)		
	an major comountaing and prognostic factors	Chelear (insumelent detail reported)		
Based	on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely		
direction of its effect?				
	Unlcear/unknown risk of bias			
Likely	v direction of effect: Unknown direction			
B. Per	formance bias (systematic differences between groups in	n the care provided, apart		
from the intervention under investigation)				
B1	The comparison groups received the same care apart			
	from the intervention(s) studied	Unclear (insufficient detail reported)		
		encieur (insumerent detan reported)		
DO				
B2	Participants receiving care were kept 'blind' to treatment allocation	Yes (placebo matched on appearance, taste		
		and consistency)		

B3	Individuals administering care were kept 'blind' to treatment allocation	Unclear (paper states 'double-blind' but gives no further detail with regards to who is blinded, i.e. parent, investigator, intervention administrator, outcome assessor)
	l on your answers to the above, in your opinion was per ion of its effect?	formance bias present? If so, what is the likely
uncer		
	Unclear/unknown risk of bias	
Likely	v direction of effect: Unknown direction	
C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)
C1	All groups were followed up for an equal length of	
	time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	a. How many participants did not complete treatment Experimental group N: 5 (low dose group); 8 (moderat Control group N: 5	0
	b. The groups were comparable for treatment completion (that is, there were no important or systematic differences between groups in terms of those who did not complete treatment)	Yes
C3	For how many participants in each group were no outo Experimental group N: 0; Control group N: 0	come data available?
	b. The groups were comparable with respect to the availability of outcome data (that is, there were no important or systematic differences between groups in terms of those for whom outcome data were not available).	Yes (Intention To Treat [ITT] analysis used)
Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely direction of its effect?		
	Low risk of bias	
Likely direction of effect: Not applicable		

D1	The study had an appropriate length of follow-up	Yes
D2	The study used a precise definition of outcome	Yes
D3	A valid and reliable method was used to determine the outcome	Different for different outcomes: Unclear/unknown for gastrointestinal symptom outcome and adverse events outcomes as the MGIS has not been validated in an autistic population and the outcome measure used to assess adverse events unclear
D4	Investigators were kept 'blind' to participants' exposure to the intervention	Unclear (paper states 'double-blind' but gives no further detail with regards to who is blinded so unclear if parent-rated and/or clinician-rated outcome assessors were blinded)
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Different for different outcomes: No for parent-rated as even if parents blinded to treatment assignment they will be non-blind to other potentially confounding factors and unclear for all other outcome measures as blinding of outcome assessors is unclear
	d on your answers to the above, in your opinion was de tion of its effect?	tection bias present? If so, what is the likely
	Unclear/unknown risk of bias	
Likel	y direction of effect: Unknown direction	

## 1.18PSYCHOSOCIAL INTERVENTIONS AIMED AT IMPROVING THE IMPACT OF AUTISM ON THE FAMILY

#### 1.18.1TONGE2006

Study		TONGE2006	
Biblic	graphic reference:		
educa	Tonge B, Brereton A, Kiomall M, Mackinnon A, King N, Rinehart N. Effects on parental mental health of an education and skills training program for parents of young children with autism: a randomized controlled trial. Journal of the American Academy of Child and Adolescent Psychiatry. 2006;45:561-569.		
trial of with	Tonge B, Brereton A, Kiomall M, Mackinnon A, Rinehart NJ. A randomised group comparison controlled trial of 'preschoolers with autism': a parent education and skills training intervention for young children with autistic disorder. Autism. In press, 2012. Available from: http://aut.sagepub.com/content/early/2012/09/11/1362361312458186.abstract		
	eline topic: Management and support of children and	Review question number: 7.1	
	g people on the autism spectrum	Review question number. 7.1	
	klist completed by: Odette Megnin-Viggars		
CIICCI	kist completed by: Odette Wieghin-Viggars		
A. Se	lection bias (systematic differences between the comparis	son groups)	
A1	An appropriate method of randomisation was used to allocate participants to treatment groups (which would have balanced any confounding factors equally across groups)	Yes (computer random number generator)	
A2	There was adequate concealment of allocation (such that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	Unclear (insufficient detail reported with regards to allocation concealment)	
A3	The groups were comparable at baseline, including all major confounding and prognostic factors	No (Children in the control group were significantly older than either of the experimental groups [p=0.005], and had a higher PEP-R DQ [p=0.026], and Reynell expressive [p=0.002] and comprehension [p=0.006] language scales. The PEAC group also had significantly more autism symptoms on the CARS [p=0.009] and the DBC-ASA [p=0.039] than the control group. Controls also had significantly lower scores on the VABS daily living [p=0.004] and socialization [p=0.008] domains than the PEBM group. Finally, the PEBM group had significantly higher scores than the PEAC group on the VABS communication [p=0.004], socialization [p=0.007], and motor [p=0.049] domains)	

Based on your answers to the above, in your opinion was selection bias present? If so, what is the likely
direction of its effect?

Unlcear/unknown risk of bias

Likely direction of effect: Unknown direction

B. Performance bias (systematic differences between groups in the care provided, apart from the intervention under investigation)

B1	The comparison groups received the same care apart from the intervention(s) studied	Unclear (insufficient detail reported)
B2	Participants receiving care were kept 'blind' to treatment allocation	No (for the comparison against treatment- as-usual)
B3	Individuals administering care were kept 'blind' to treatment allocation	No

Based on your answers to the above, in your opinion was performance bias present? If so, what is the likely direction of its effect?

High risk of bias

Likely direction of effect: Effect size bigger

C. Attrition bias (systematic differences between the comparison groups with respect to loss of participants)

C1	All groups were followed up for an equal length of time (or analysis was adjusted to allow for differences in length of follow-up)	Yes
C2	a. How many participants did not complete treatment i	in each group?
	Experimental group N: 2; Control group N: 0	
	b. The groups were comparable for treatment	
	completion (that is, there were no important or	Yes
	systematic differences between groups in terms of	les
	those who did not complete treatment)	
C3	For how many participants in each group were no outcome data available?	
	Experimental group N: 2; Control group N: 0	

	b. The groups were comparable with respect to the	
	availability of outcome data (that is, there were no	
	important or systematic differences between groups	Yes
	in terms of those for whom outcome data were not	
	available).	
Based	on your answers to the above, in your opinion was attr	ition bias present? If so, what is the likely
	ion of its effect?	
	Low risk of bias	
Likoly	direction of effect: Not applicable	
LIKely	direction of effect. Not applicable	
D De	tection bias (bias in how outcomes are ascertained, diag	norad or worified)
D. De	, , , , , , , , , , , , , , , , , , ,	,
D1	The study had an appropriate length of follow-up	Yes
-		
D2	The study used a precise definition of outcome	Yes
D1		
D3	A valid and reliable method was used to determine	Yes
	the outcome	
D4	Investigators were kept 'blind' to participants'	Different for different outcome measures
	exposure to the intervention	and different comparisons:
		Experimental versus attention-placebo
		comparison:
		Impact on family outcomes: Parent-rated so
		non-blind to other potentially confounding
		factors but due to attention-placebo
		comparison blind to treatment allocation
		VABS scale: Outcome assessor is a blinded
		clinician but based on parental interview
		and simultaneous child observation. As the
		comparison involves an experimental versus
		attention-placebo condition parents may be
		judged to be blind to treatment allocation
		but would be non-blind to other potentially
		confounding factors
		DBC scale: Comparison involved attention-
		placebo condition so parent-rated outcome
		measures may have been blind to treatment
		condition (with only the active ingredient
		differing between the two experimental
		groups). However, as parent-rated, outcome
		assessors would have been non-blind to
		other potentially important confounding
		factors
		CARS, PEP-R and Reynell Language Scale:

r		
		Blinded outcome assessor
		Combined treatment versus no treatment
		comparison:
		Impact on family outcomes: Non-blind
		parental report
		VABS scale: Outcome assessor is a blinded
		clinician but based on parental interview
		and simultaneous child observation and
		parents non-blind
		DBC scale: For the combined treatment
		versus no treatment comparison the parents
		would have been non-blind to both
		treatment allocation and other potentially
		confounding factors
		CARS, PEP-R and Reynell Language Scale:
		Blinded outcome assessor
D5	Investigators were kept 'blind' to other important	Different for different outcome measures
	confounding and prognostic factors	and different comparisons:
		Experimental versus attention-placebo
		comparison:
		Impact on family outcomes: Parent-rated so
		non-blind to other potentially confounding
		factors but due to attention-placebo
		comparison blind to treatment allocation
		VABS scale: Outcome assessor is a blinded
		clinician but based on parental interview
		and simultaneous child observation. As the
		comparison involves an experimental versus
		attention-placebo condition parents may be
		judged to be blind to treatment allocation
		but would be non-blind to other potentially
		confounding factors
		DBC scale: Comparison involved attention-
		placebo condition so parent-rated outcome
		measures may have been blind to treatment
		condition (with only the active ingredient
		differing between the two experimental
		groups). However, as parent-rated, outcome
		assessors would have been non-blind to
		other potentially important confounding
		factors
		CARS, PEP-R and Reynell Language Scale:
		Blinded outcome assessor
		Combined treatment versus no treatment
		<u>comparison:</u>
		Impact on family outcomes: Non-blind
		impact on failing outcomes. Non-onnu

parental report
VABS scale: Outcome assessor is a blinded
clinician but based on parental interview
and simultaneous child observation and
parents non-blind
DBC scale: For the combined treatment
versus no treatment comparison the parents
would have been non-blind to both
treatment allocation and other potentially
confounding factors
CARS, PEP-R and Reynell Language Scale:
Blinded outcome assessor

Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely direction of its effect?

Different for different outcome measures and different comparisons:

Experimental versus attention-placebo comparison:

Impact on family outcomes: Unclear/unknown risk

VABS scale: Low risk

DBC scale: Unclear/unknown risk

CARS, PEP-R and Reynell Language Scale: Low risk

Combined treatment versus no treatment comparison:

Impact on family outcomes: High risk

VABS scale: Unclear/unknown risk

DBC scale: High risk

CARS, PEP-R and Reynell Language Scale: Low risk

Likely direction of effect: Effect size bigger, where high risk

# 1.19ADVERSE EVENTS ASSOCIATED WITH PHARMACOLOGICAL INTERVENTIONS

## 1.19.1CAMPBELL1978

Study ID		CAMPBELL1978			
D'1 1'	1: 6				
Bibliographic reference: Campbell M, Anderson LT, Meier M, Cohen IL, Small AM, Samit C, et al. A comparison of haloperidol and					
-	ior therapy and their interaction in autistic children. Jou				
	iatry. 1978;17:640-655.	inter of the function frequency of clinic			
•	eline topic: Management and support of children and	Review question number: 7.1			
young	g people on the autism spectrum	-			
Check	list completed by: Odette Megnin-Viggars				
A. Sel	ection bias (systematic differences between the compari-	son groups)			
A1	An appropriate method of randomisation was used				
	to allocate participants to treatment groups (which	Unclear (randomisation method was			
	would have balanced any confounding factors	unclear)			
1.0	equally across groups)				
A2	There was adequate concealment of allocation (such	Unclear (insufficient detail reported with			
	that investigators, clinicians and participants cannot influence enrolment or treatment allocation)	regards to allocation concealment)			
A3	The groups were comparable at baseline, including	Unclear (no examination of potential pre-			
	all major confounding and prognostic factors	intervention group differences and thus			
	, , , , , , , , , , , , , , , , , , , ,	group comparability was unclear)			
	on your answers to the above, in your opinion was sele	ction bias present? If so, what is the likely			
direct	ion of its effect?				
	High risk of bias				
Likelı	v direction of effect: Effect size bigger				
LIKCI	ancenon of cheet. Enect size bigger				
B Por	formance bias (systematic differences between groups in	a the care provided apart			
	the intervention under investigation)	i de care providea, apart			
D1					
B1	The comparison groups received the same care apart from the intervention(s) studied				
	nom me mervennon(s) studied	Unclear (insufficient detail reported)			
B2	Participants receiving care were kept 'blind' to				
	treatment allocation	Yes			

DO	T 1 1 1 1				
B3	Individuals administering care were kept 'blind' to				
	treatment allocation	Yes			
Based	l on your answers to the above, in your opinion was perf	formance bias present? If so, what is the likely			
direction of its effect?					
Low risk of bias					
Likely direction of effect: Not applicable					
C. At	trition bias (systematic differences between the comparis	son groups with respect to loss of participants)			
C1	All groups were followed up for an equal length of				
	time (or analysis was adjusted to allow for	Yes			
	differences in length of follow-up)				
C2	a. How many participants did not complete treatment	in each group?			
	Experimental group N: 1; Control group N: 1				
	b. The groups were comparable for treatment				
	completion (that is, there were no important or				
		Yes			
	systematic differences between groups in terms of				
	those who did not complete treatment)				
C3	For how many participants in each group were no outcome data available?				
	Experimental group N: 1; Control group N: 1				
	b. The groups were comparable with respect to the				
	availability of outcome data (that is, there were no				
	important or systematic differences between groups	Yes			
	in terms of those for whom outcome data were not				
	available).				
Based on your answers to the above, in your opinion was attrition bias present? If so, what is the likely					
direction of its effect?					
Low risk of bias					
Likol	v direction of effect: Not applicable				
LIKCI	direction of circet. Not applicable				
D. Detection bias (bias in how outcomes are ascertained, diagnosed or verified)					
D1	The study had an appropriate length of follow-up	Yes			
D2	The study used a precise definition of outcome	Yes			
	The stary used a precise administration of outcome				
D3	A valid and reliable method was used to determine	Yes			
	the outcome				

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D4	Investigators were kept 'blind' to participants' exposure to the intervention	Yes	
D5	Investigators were kept 'blind' to other important confounding and prognostic factors	Unclear	
Based on your answers to the above, in your opinion was detection bias present? If so, what is the likely direction of its effect?			
Low risk of bias			
Likely direction of effect: Not applicable			