

CQ4-4 (UnGRADE)

P: Patients who suspected sepsis/ septic shock/ severe infection
I: Discontinuation of antimicrobial drugs when culture negative is found
C: Continuation of antimicrobial drugs after culture negative is found
O: Mortality, length of hospital stay, infection

	JUDGEMENT						
PROBLEM	No	Probably no	Probably yes	Yes		Varies	Don't know
DESIRABLE EFFECTS	Trivial	Small	Moderate	Large		Varies	Don't know
UNDESIRABLE EFFECTS	Large	Moderate	Small	Trivial		Varies	Don't know
CERTAINTY OF EVIDENCE	Very low	Low	Moderate	High			No included studies
VALUES	Important uncertainty or variability	Possibly important uncertainty or variability	Probably no important uncertainty or variability	No important uncertainty or variability			
BALANCE OF EFFECTS	Favors the comparison	Probably favors the comparison	Does not favor either the intervention or the comparison	Probably favors the intervention	Favors the intervention	Varies	Don't know
ACCEPTABILITY	No	Probably no	Probably yes	Yes		Varies	Don't know
FEASIBILITY	No	Probably no	Probably yes	Yes		Varies	Don't know


CQ4-6 (GRADE)

P: Patients with sepsis/ septic shock

I: Administration of antimicrobial drugs within 1 hour

C: Administration of antimicrobial drugs after 1 hour

O: Mortality

Certainty assessment							No of patients		Effect		Certainty	Importance
No of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Treatment	Placebo	Relative (95% CI)	Absolute (95% CI)		
Mortality												
7	Observational study	very serious	not serious	not serious	not serious	none	1994/6458 (30.9%)	5411/16556 (32.7%)	RR 0.97 (0.93 to 1.02)	10 fewer per 1,000 (from 23 fewer to 7 more)	 Low	CRITICAL

	JUDGEMENT						
PROBLEM	No	Probably no	Probably yes	Yes		Varies	Don't know
DESIRABLE EFFECTS	Trivial	Small	Moderate	Large		Varies	Don't know
UNDESIRABLE EFFECTS	Large	Moderate	Small	Trivial		Varies	Don't know
CERTAINTY OF EVIDENCE	Very low	Low	Moderate	High			No included studies
VALUES	Important uncertainty or variability	Possibly important uncertainty or variability	Probably no important uncertainty or variability	No important uncertainty or variability			
BALANCE OF EFFECTS	Favors the comparison	Probably favors the comparison	Does not favor either the intervention or the comparison	Probably favors the intervention	Favors the intervention	Varies	Don't know
ACCEPTABILITY	No	Probably no	Probably yes	Yes		Varies	Don't know
FEASIBILITY	No	Probably no	Probably yes	Yes		Varies	Don't know

CQ4-7 (GRADE)

P: Patients with sepsis/ septic shock

I: Continuous infusion of beta-lactam antibiotic

C: Intermittent infusion of beta-lactam antibiotic

O: Mortality, clinical cure, side effect, drug-resistant bacterium, achieved target blood concentration

Certainty assessment							№ of patients		Effect		Certainty	Importance
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Treatment	Placebo	Relative (95% CI)	Absolute (95% CI)		
Mortality												
9	randomised trials	serious	not serious	not serious	serious	none	88/420 (21.0%)	112/424 (26.4%)	RR 0.74 (0.49 to 1.12)	69 fewer per 1,000 (from 135 fewer to 32 more)	⊕⊕○○ Low	CRITICAL
Clinical cure												
9	randomised trials	serious	not serious	not serious	not serious	Publication bias was suggested	245/443 (55.3%)	209/443 (47.2%)	RR 1.24 (1.02 to 1.51)	113 more per 1,000 (from 9 more to 241 more)	⊕⊕○○ Low	CRITICAL
Side effect												
3	randomised trials	serious	not serious	not serious	not serious	none	42/342 (12.3%)	43/349 (12.3%)	RR 1.00 (0.67 to 1.48)	0 fewer per 1,000 (from 41 fewer to 59 more)	⊕⊕⊕○ Moderate	CRITICAL
Drug-resistant bacterium												
1	randomised trials	serious	not serious	not serious	serious	none	2/96 (2.1%)	4/102 (3.9%)	RR 0.53 (0.10 to 2.83)	18 fewer per 1,000 (from 35 fewer to 72 more)	⊕⊕○○ Low	CRITICAL
Achieved target blood concentration												
2	randomised trials	serious	not serious	not serious	not serious	none	71/90 (78.9%)	29/87 (33.3%)	RR 2.35 (1.71 to 3.22)	450 more per 1,000 (from 237 more to 740 more)	⊕⊕⊕○ Moderate	IMPORTANT

	JUDGEMENT						
PROBLEM	No	Probably no	Probably yes	Yes		Varies	Don't know
DESIRABLE EFFECTS	Trivial	Small	Moderate	Large		Varies	Don't know
UNDESIRABLE EFFECTS	Large	Moderate	Small	Trivial		Varies	Don't know
CERTAINTY OF EVIDENCE	Very low	Low	Moderate	High			No included studies
VALUES	Important uncertainty or variability	Possibly important uncertainty or variability	Probably no important uncertainty or variability	No important uncertainty or variability			
BALANCE OF EFFECTS	Favors the comparison	Probably favors the comparison	Does not favor either the intervention or the comparison	Probably favors the intervention	Favors the intervention	Varies	Don't know
ACCEPTABILITY	No	Probably no	Probably yes	Yes		Varies	Don't know
FEASIBILITY	No	Probably no	Probably yes	Yes		Varies	Don't know

CQ4-8 (GRADE)

P: Patients with sepsis/ septic shock

I: De-escalation

C: Not de-escalation

O: Mortality (90-day, 28-day, longest observation period), superinfection

Certainty assessment							№ of patients		Effect		Certainty	Importance
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Treatment	Placebo	Relative (95% CI)	Absolute (95% CI)		
Mortality (90-day)												
1	randomised trials	serious	not serious	not serious	very serious	none	18/59 (30.5%)	13/57 (22.8%)	RR 1.34 (0.72 to 2.47)	78 more per 1,000 (from 64 fewer to 335 more)	⊕○○○ Very low	CRITICAL
Superinfection												
1	randomised trials	serious	not serious	not serious	serious	none	6/57 (27.1%)	6/57 (10.5%)	RR 2.58 (1.08 to 6.12)	166 more per 1,000 (from 8 more to 539 more)	⊕⊕○○ Low	CRITICAL
Mortality (longest observation period)												
13	observational study	serious	serious	not serious	not serious	none	229/1337 (17.1%)	544/2298 (23.7%)	RR 0.66 (0.52 to 0.83)	80 fewer per 1,000 (from 114 fewer to 40 fewer)	⊕○○○ Very low	CRITICAL
Mortality (28-day)												
2	observational study	serious	serious	not serious	serious	none	15/244 (6.1%)	45/261 (17.2%)	RR 0.48 (0.12 to 1.84)	90 fewer per 1,000 (from 152 fewer to 145 more)	⊕○○○ Very low	CRITICAL

	JUDGEMENT						
PROBLEM	No	Probably no	Probably yes	Yes		Varies	Don't know
DESIRABLE EFFECTS	Trivial	Small	Moderate	Large		Varies	Don't know
UNDESIRABLE EFFECTS	Large	Moderate	Small	Trivial		Varies	Don't know
CERTAINTY OF EVIDENCE	Very low	Low	Moderate	High			No included studies
VALUES	Important uncertainty or variability	Possibly important uncertainty or variability	Probably no important uncertainty or variability	No important uncertainty or variability			
BALANCE OF EFFECTS	Favors the comparison	Probably favors the comparison	Does not favor either the intervention or the comparison	Probably favors the intervention	Favors the intervention	Varies	Don't know
ACCEPTABILITY	No	Probably no	Probably yes	Yes		Varies	Don't know
FEASIBILITY	No	Probably no	Probably yes	Yes		Varies	Don't know





CQ4-9 (GRADE)

P: Patients with sepsis/ septic shock

I: Procalcitonin guided discontinuation

C: Not use procalcitonin guide

O: Mortality (28-day, hospital), recurrence of sepsis, duration of administration of antibacterial drugs

Certainty assessment							№ of patients		Effect		Certainty	Importance
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Treatment	Placebo	Relative (95% CI)	Absolute (95% CI)		
Mortality (28-day)												
5	randomised trials	serious	not serious	not serious	not serious	none	320/1434 (22.3%)	379/1433 (26.4%)	RR 0.84 (0.74 to 0.96)	42 fewer per 1,000 (from 69 fewer to 11 fewer)	 Moderate	CRITICAL
Mortality (Hospital)												
9	randomised trials	serious	not serious	not serious	not serious	none	256/1197 (21.4%)	321/1225 (26.2%)	RR 0.81 (0.70 to 0.93)	50 fewer per 1,000 (from 79 fewer to 18 fewer)	 Moderate	CRITICAL
Recurrence of sepsis												
4	randomised trials	serious	not serious	not serious	serious	none	7/126 (5.6%)	6/135 (4.4%)	RR 1.19 (0.40 to 3.55)	8 more per 1,000 (from 27 fewer to 113 more)	 Low	CRITICAL
Duration of administration of antibacterial drugs												
3	randomised trials	serious	serious	not serious	serious	none	120	111	-	MD 1.16 day fewer (from 2.33 fewer to 0 fewer)	 Very low	CRITICAL

	JUDGEMENT						
PROBLEM	No	Probably no	Probably yes	Yes		Varies	Don't know
DESIRABLE EFFECTS	Trivial	Small	Moderate	Large		Varies	Don't know
UNDESIRABLE EFFECTS	Large	Moderate	Small	Trivial		Varies	Don't know
CERTAINTY OF EVIDENCE	Very low	Low	Moderate	High			No included studies
VALUES	Important uncertainty or variability	Possibly important uncertainty or variability	Probably no important uncertainty or variability	No important uncertainty or variability			
BALANCE OF EFFECTS	Favors the comparison	Probably favors the comparison	Does not favor either the intervention or the comparison	Probably favors the intervention	Favors the intervention	Varies	Don't know
ACCEPTABILITY	No	Probably no	Probably yes	Yes		Varies	Don't know
FEASIBILITY	No	Probably no	Probably yes	Yes		Varies	Don't know

CQ4-10 (GRADE)

P: Patients with sepsis/ septic shock, Infectious patients who treated in ICU

I: Short-term antibiotic therapy (1 week)

C: Long-term antibiotic therapy (more than 1 week)

O: Mortality (28-day, longest observational period), clinical cure, recurrence of sepsis, drug-resistant bacterium

Certainty assessment							№ of patients		Effect		Certainty	Importance
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Treatment	Placebo	Relative (95% CI)	Absolute (95% CI)		
Mortality (28-day)												
3	randomised trials	not serious	not serious	not serious	serious	none	63/396 (15.9%)	61/408 (15.0%)	RR 1.08 (0.77 to 1.52)	12 more per 1,000 (from 34 fewer to 78 more)	⊕⊕⊕○ Moderate	CRITICAL
Mortality (Longest observational period)												
4	randomised trials	serious	not serious	not serious	serious	none	73/512 (14.3%)	70/517 (13.5%)	RR 1.08 (0.80 to 1.46)	11 more per 1,000 (from 27 fewer to 62 more)	⊕⊕○○ Low	CRITICAL
Clinical cure												
2	randomised trials	serious	not serious	not serious	serious	none	135/195 (69.2%)	142/197 (72.1%)	RR 0.93 (0.72 to 1.20)	50 fewer per 1,000 (from 202 fewer to 144 more)	⊕⊕○○ Low	CRITICAL
Recurrence of sepsis												
3	randomised trials	serious	serious	not serious	serious	none	120/433 (27.7%)	89/429 (20.7%)	RR 1.37 (1.00 to 1.89)	77 more per 1,000 (from 0 fewer to 185 more)	⊕○○○ Very low	CRITICAL
Drug-resistant bacterium												
2	randomised trials	serious	not serious	not serious	serious	none	49/127 (38.6%)	58/119 (48.7%)	RR 0.73 (0.40 to 1.34)	132 fewer per 1,000 (from 292 fewer to 166 more)	⊕⊕○○ Low	CRITICAL

	JUDGEMENT						
PROBLEM	No	Probably no	Probably yes	Yes		Varies	Don't know
DESIRABLE EFFECTS	Trivial	Small	Moderate	Large		Varies	Don't know
UNDESIRABLE EFFECTS	Large	Moderate	Small	Trivial		Varies	Don't know
CERTAINTY OF EVIDENCE	Very low	Low	Moderate	High			No included studies
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BALANCE OF EFFECTS	Favors the comparison	Probably favors the comparison	Does not favor either the intervention or the comparison	Probably favors the intervention	Favors the intervention	Varies	Don't know
ACCEPTABILITY	No	Probably no	Probably yes	Yes		Varies	Don't know
FEASIBILITY	No	Probably no	Probably yes	Yes		Varies	Don't know