Web appendix

Sensitivity analysis (studies are weighted by their quality score)

<table>
<thead>
<tr>
<th>Arm characteristics</th>
<th>Coefficient [95% Confidence Interval]</th>
<th>p value</th>
</tr>
</thead>
<tbody>
<tr>
<td>RCT (Ref = observational)</td>
<td>0.51 [0.30 to 0.87]</td>
<td>0.013</td>
</tr>
<tr>
<td>Treatment (Ref= placebo)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SSRI</td>
<td>1.22 [0.83 to 1.79]</td>
<td>0.3</td>
</tr>
<tr>
<td>SNRI</td>
<td>1.95 [1.13 to 3.39]</td>
<td>0.017</td>
</tr>
<tr>
<td>IP</td>
<td>1.84 [1.20 to 2.85]</td>
<td>0.006</td>
</tr>
<tr>
<td>Other classes</td>
<td>1.54 [1.04 to 2.29]</td>
<td>0.032</td>
</tr>
<tr>
<td>All classes</td>
<td>1.18 [0.80 to 1.75]</td>
<td>0.41</td>
</tr>
<tr>
<td>Previous antidepressant resistance (Ref=no)</td>
<td>0.71 [0.20 to 2.60]</td>
<td>0.61</td>
</tr>
<tr>
<td>Patient type (Ref= outpatient)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Out and inpatient</td>
<td>1.23 [0.60 to 2.53]</td>
<td>0.571</td>
</tr>
<tr>
<td>Inpatient</td>
<td>2.17 [0.90 to 5.22]</td>
<td>0.084</td>
</tr>
<tr>
<td>Age classes (Ref= children and adolescent)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adults</td>
<td>0.2 [0.06 to 0.66]</td>
<td>0.008</td>
</tr>
<tr>
<td>Both</td>
<td>3.84 [0.93 to 15.86]</td>
<td>0.063</td>
</tr>
<tr>
<td>Diagnosis (Ref= unipolar)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bipolar disorder</td>
<td>21.54 [7.93 to 58.51]</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Unipolar and bipolar</td>
<td>1.61 [0.46 to 5.62]</td>
<td>0.46</td>
</tr>
<tr>
<td>Year of study</td>
<td>0.98 [0.95 to 1.01]</td>
<td>0.14</td>
</tr>
<tr>
<td>Study duration</td>
<td>1.02 [0.99 to 1.04]</td>
<td>0.26</td>
</tr>
<tr>
<td>Proportion of women</td>
<td>1 [0.98 to 1.02]</td>
<td>0.78</td>
</tr>
</tbody>
</table>

SSRI= Selective Serotonin Reuptake Inhibitor
SNRI=Serotonin-Norepinephrine Reuptake Inhibitors
IP= Imipraminics

References included in quantitative synthesis

3. Amsterdam JD, Shults J, Brunswick DJ, Hundert M: Short-term fluoxetine monotherapy for bipolar type II or bipolar NOS major depression - low manic switch rate. Bipolar Disord 2004; 6:75–81
4. Amsterdam JD, Shults J: Comparison of fluoxetine, olanzapine, and combined fluoxetine plus olanzapine initial therapy of bipolar type I and type II major depression--lack of manic induction. J Affect Disord 2005; 87:121–130


22. Erfurth A, Michael N, Stadtland C, Arolt V: Bupropion as add-on strategy in difficult-to-treat bipolar


