

SIGN50 Checklist

Study ID	Medina,B. C. 2014 - Barbed suture for vaginal cuff closure in laparoscopic hysterectomy.	Bassi,A. 2013 - Evaluation of total laparoscopic hysterectomy with and without the use of barbed suture.	Bogliolo,S. 2013 - Vaginal cuff closure with absorbable bidirectional barbed suture during total laparoscopic hysterectomy.	Morgan-Ortiz,F. 2013 - Comparison between unidirectional barbed and polyglactin 910 suture in vaginal cuff closure in patients undergoing total laparoscopic hysterectomy.
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Section1: Internal validity

Internal validity

The study addresses an appropriate and clearly focused question.

Well covered Well covered Well covered Well covered

Selection of subjects

The two groups being studied are selected from source populations that are comparable in all respects other than the factor under investigation.

Well covered Adequately addressed Adequately addressed Poorly addressed

The study indicates how many of the people asked to take part did so, in each of the groups being studied.

Poorly addressed Not applicable Well covered Poorly addressed

The likelihood that some eligible subjects might have the outcome at the time of enrolment is assessed and taken into account in the analysis.

Adequately addressed Not addressed Adequately addressed Adequately addressed

What percentage of individuals or clusters recruited into each arm of the study dropped out before the study was completed.

Poorly addressed Not applicable Adequately addressed Not addressed

Comparison is made between full participants and those lost to follow up, by exposure status.

Poorly addressed Not applicable Adequately addr Not addressed

Assessment

The outcomes are clearly defined.

Adequately addressed Adequately addressed Adequately addressed Adequately addressed

The assessment of outcome is made blind to exposure status.

Not addressed Not addressed Not addressed Not addressed

Where blinding was not possible, there is some recognition that knowledge of exposure status could have influenced the assessment of outcome.

Not addressed Not addressed Not addressed Not addressed

The measure of assessment of exposure is reliable.

Adequately addressed Adequately addressed Adequately addressed Adequately addressed

Evidence from other sources is used to demonstrate that the method of outcome assessment is valid and reliable.

Adequately addressed Adequately addressed Adequately addressed Adequately addressed

Exposure level or prognostic factor is assessed more than once.

Not applicable Not applicable Not applicable Not applicable

Confounding

The main potential confounders are identified and taken into account in the design and analysis.

Poorly addressed Adequately addressed Not addressed Poorly addressed

Statistical analysis

Have confidence intervals been provided?

Yes No Yes Yes

Section 2. Overall assessment of study

How well was the study done to minimise the risk of bias or confounding, and to establish a causal relationship between exposure and effect?
Code ++, +, or -

+ - - -

Taking into account clinical considerations, your evaluation of the methodology used, and the statistical power of the study, are you certain that the overall effect is due to the study intervention?

Unsure Unsure Unsure Unsure

Are the results of this study directly applicable to the patient group targeted in this guideline?

Yes Yes Yes Yes