

Supplementary Material

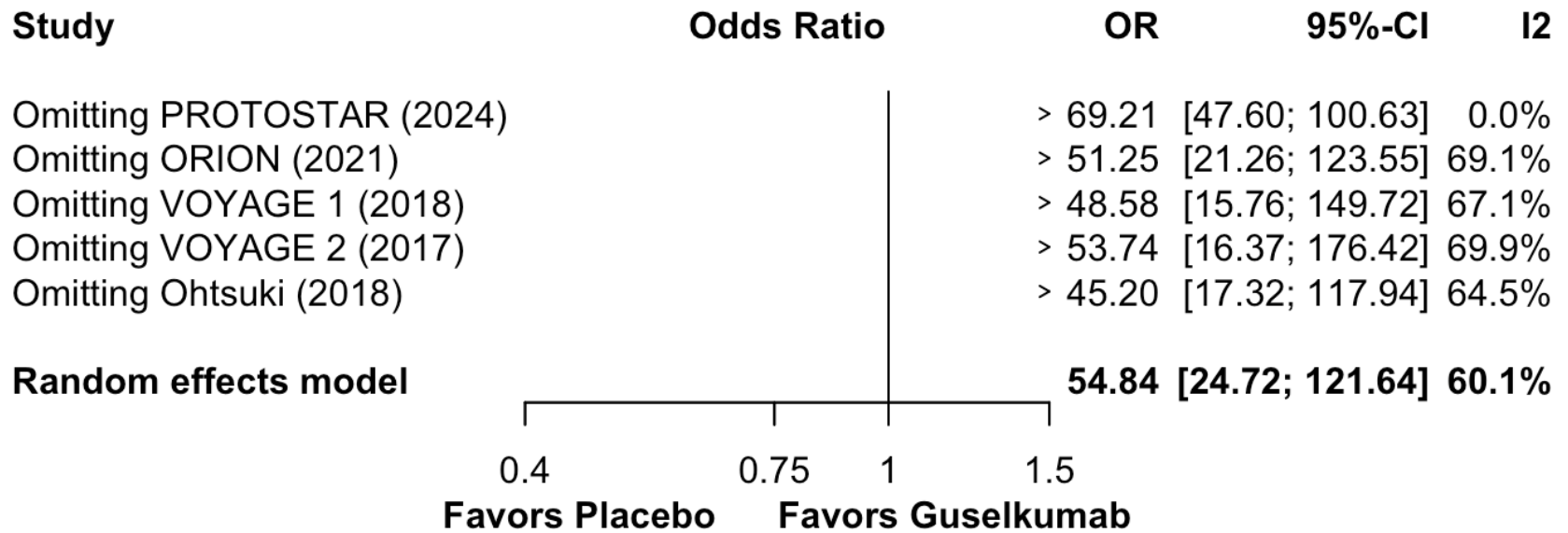


Figure S1. The leave-one-out analysis of PROTOSTAR for IGA 0/1 did show a decrease in heterogeneity among the studies. CI: confidence interval; OR: odds ratio.

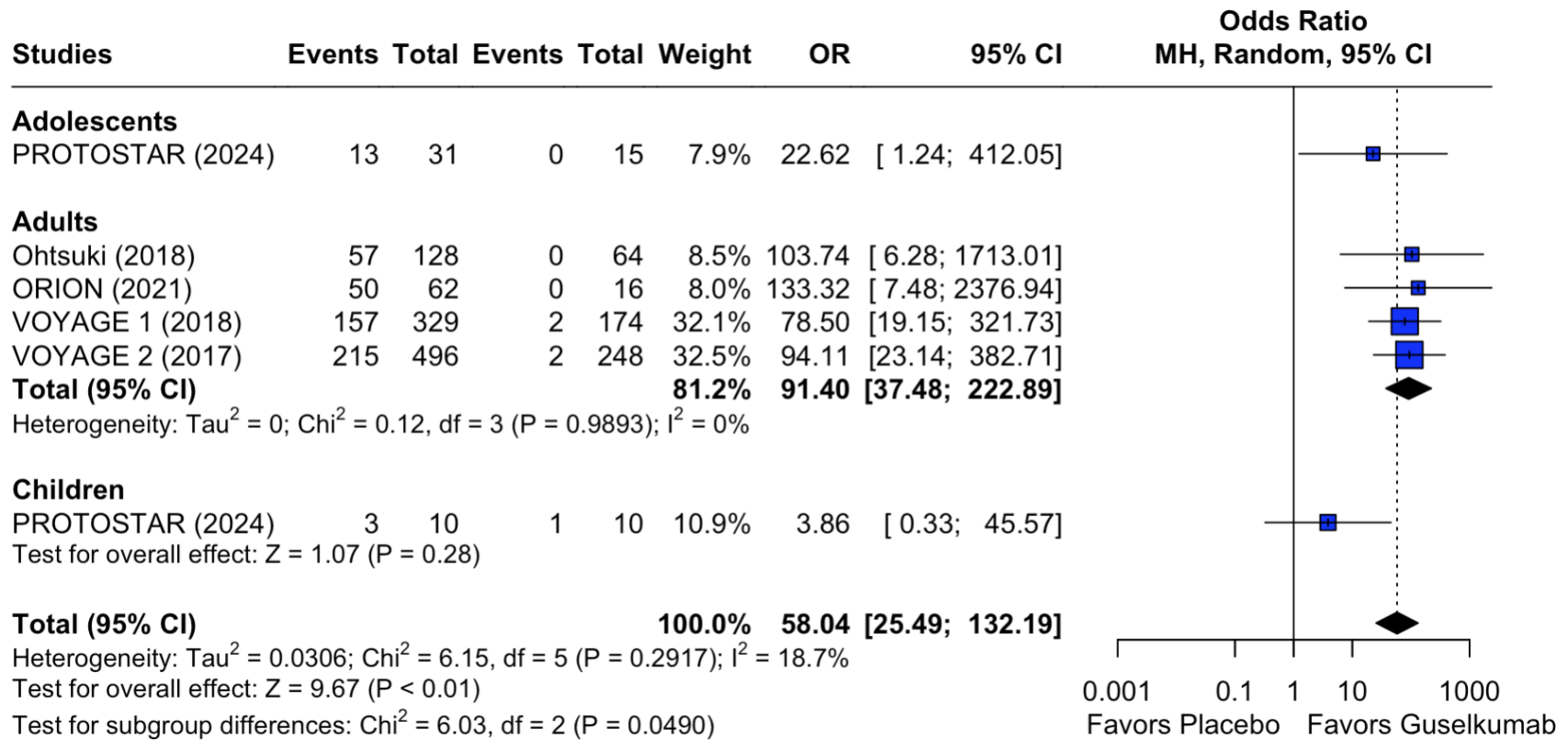


Figure S2. The odds of achieving IGA 0 in adults were higher than in adolescents, and even higher than in children. CI: confidence interval; MH: Mantel-Haenszel; OR: odds ratio.

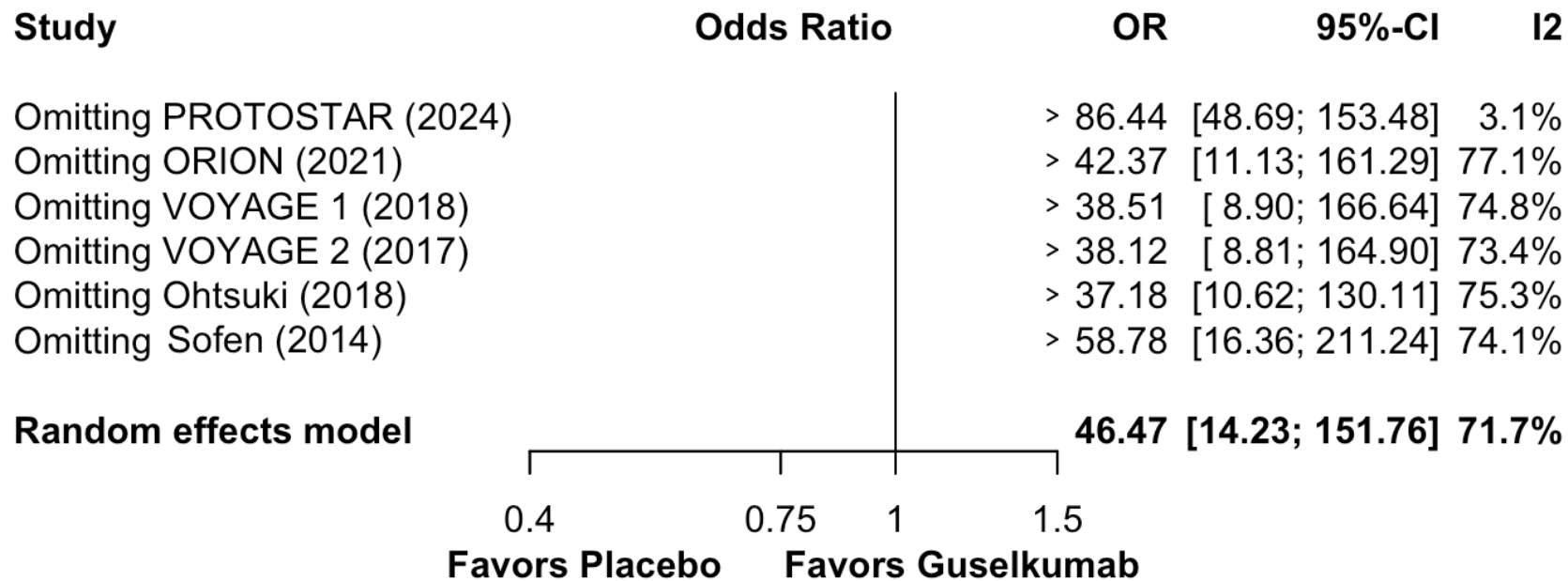


Figure S3. The leave-one-out analysis of PROTOSTAR for PASI90 did show a decrease in heterogeneity among the studies. CI: confidence interval; OR: odd ratio.

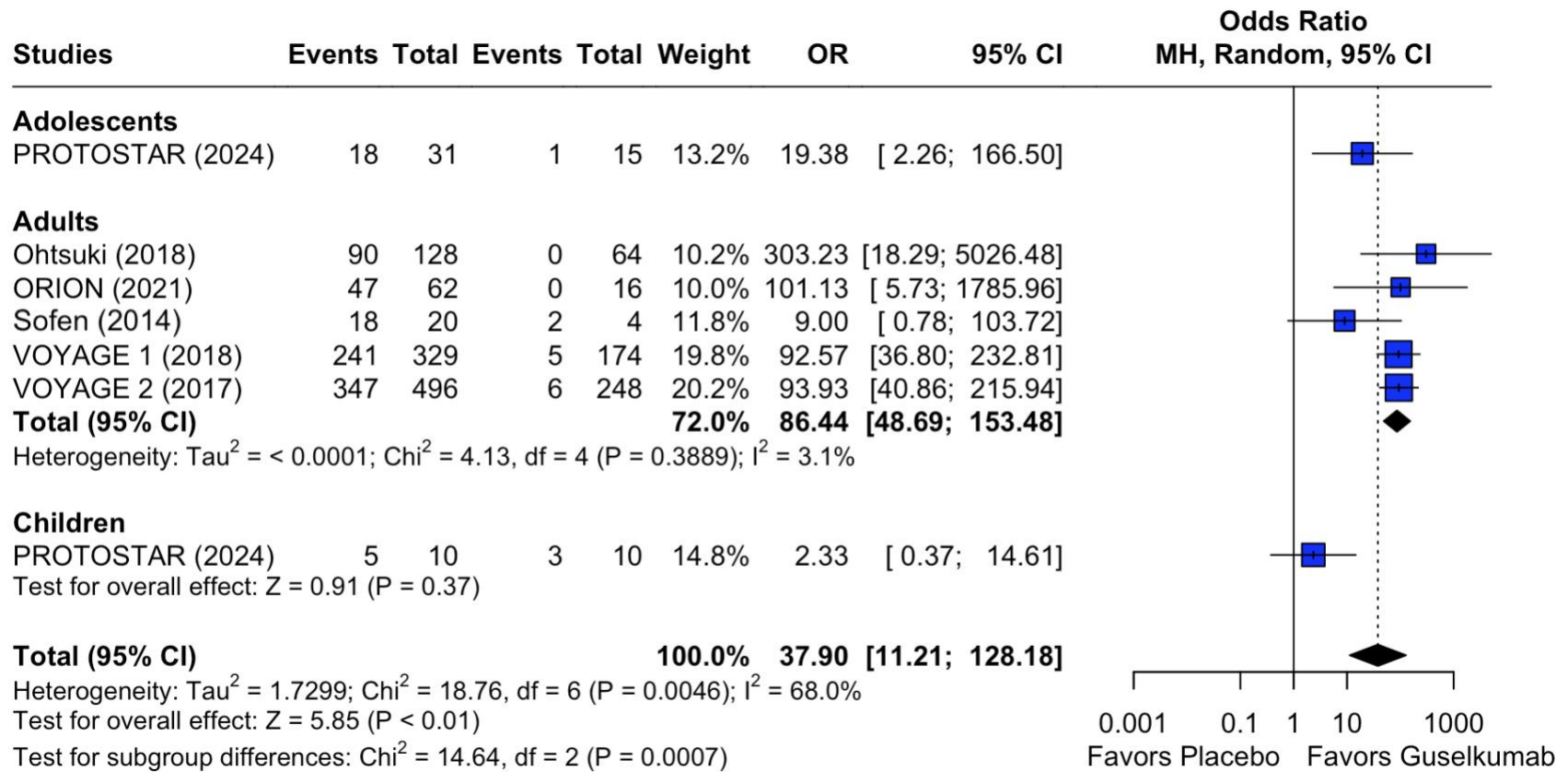


Figure S4. The odds of achieving PASI90 in adults were higher than in adolescents, and even higher than in children. CI: confidence interval; MH: Mantel-Haenszel; OR: odds ratio.

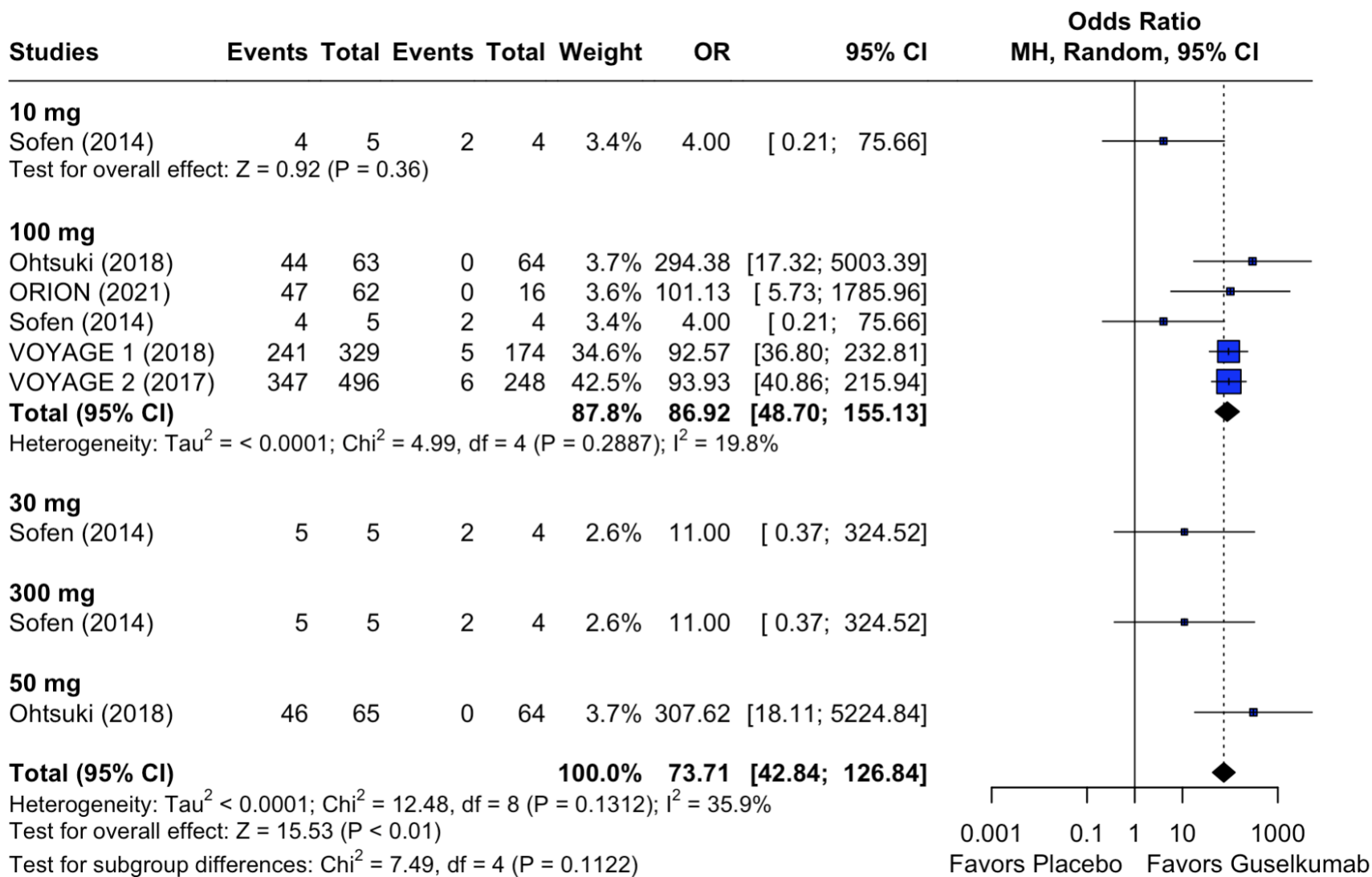


Figure S5. The odds of achieving PASI90 were the highest with the 100 mg dosage. CI: confidence interval; MH: Mantel-Haenszel; OR: odds ratio.

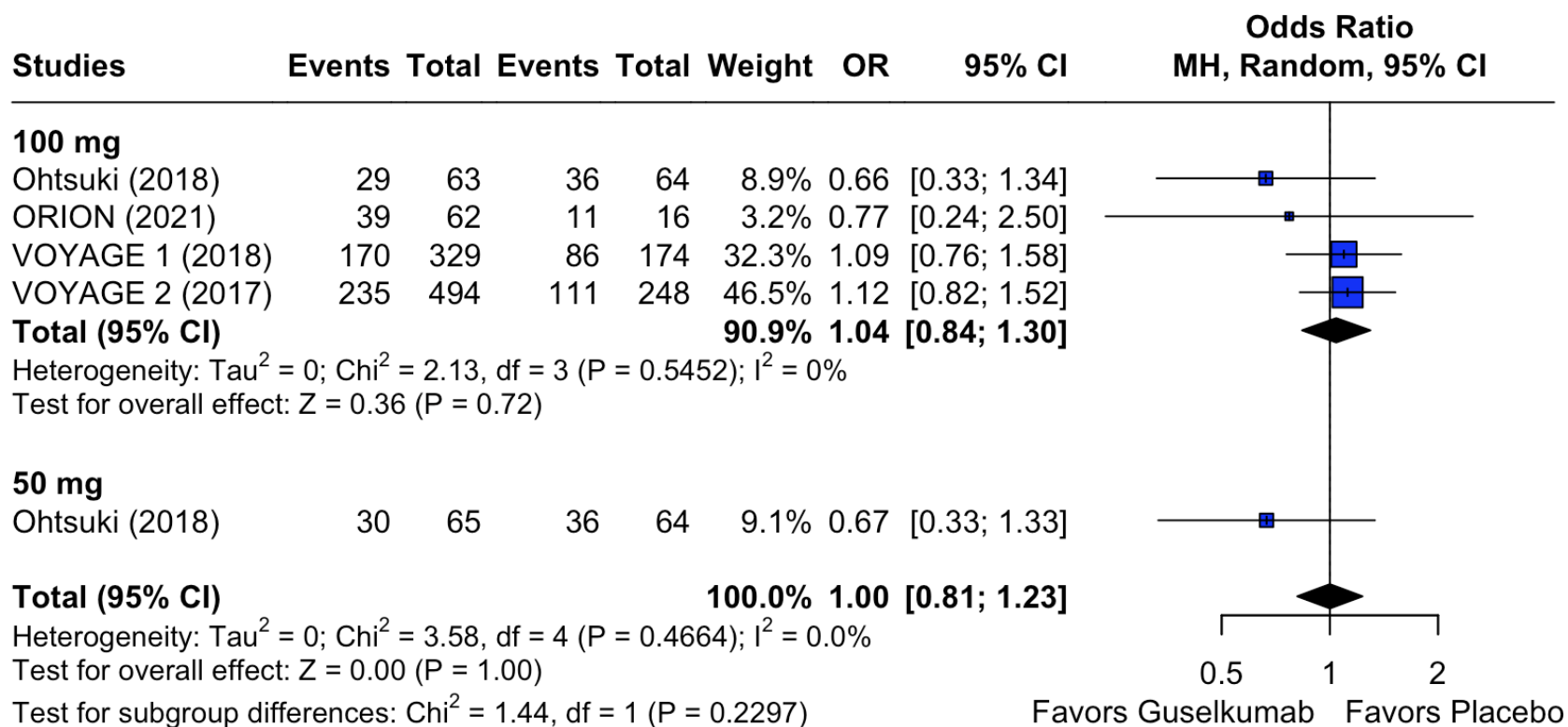


Figure S6. The odds of experiencing at least one AE were the highest with the 100 mg dosage. CI: confidence interval; MH: Mantel-Haenszel; OR: odds ratio.

		Risk of bias domains					
		D1	D2	D3	D4	D5	Overall
Study	PROTOSTAR (2024)						
	ORION (2021)						
	VOYAGE 1 (2018)						
	VOYAGE 2 (2017)						
	Ohtsuki (2018)						
	Sofen (2014)						

Domains:
D1: Bias arising from the randomization process.
D2: Bias due to deviations from intended intervention.
D3: Bias due to missing outcome data.
D4: Bias in measurement of the outcome.
D5: Bias in selection of the reported result.

Judgement
 High
 Some concerns
 Low

Figure S7. Quality assessment of the RCTs per Cochrane RoB 2.