Table 1 Levels of evidence, grades of recommendations and good practice points (SIGN 50²⁸)

Levels	of Evidence
1++	High quality meta-analyses, systematic reviews of RCTs, or RCTs with a very low risk of bias
1+	Well conducted meta-analyses, systematic reviews, or RCTs with a low risk of bias
1-	Meta-analyses, systematic reviews, or RCTs with a high risk of bias
2++	High quality systematic reviews of case control or cohort studies
	High quality case-control or cohort studies with a very low risk of confounding or bias and a high probability that the relationship is causal
2+	Well conducted case-control or cohort studies with a low risk of confounding or bias and a moderate probability that the relationship is causal
2-	Case-control or cohort studies with a high risk of confounding or bias and a significant risk that the relationship is not causal
3	Non-analytical studies e.g case reports, case series
4	Expert opinion
Grades	of recommendation
The gra	ade of recommendation relates to the strength of supporting evidence and not the clinical importance of the recommendation
Α	At least one meta-analysis, systematic review, or RCT rated as 1++, and directly applicable to the target population; or
	A body of evidence consisting principally of studies rated as 1+, directly applicable to the target population, and demonstrating overall
	consistency of results
В	A body of evidence including studies rated as 2++, directly applicable to the target population, and demonstrating overall consistency of
	results; or
	Extrapolated evidence from studies rated as 1++ or 1+
С	A body of evidence including studies rated as 2+, directly applicable to the target population, and demonstrating overall consistency of results;
	or
D	Extrapolated evidence from studies rated as 2++
	Evidence level 3 or 4; or
	Extrapolated evidence from studies rated as 2+
Good I	Practice Point
GPP	Recommended best practice based on the clinical experience of the guideline development group