

## Bilaga 2: Studier med låg kvalitet/ Studies of low quality

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### Original studier/Original studies

Referens/ Reference	Orsak(er) för låg kvalitet/ Reason(s) for low quality
Aarup M, Bryndum J, Dieperink H, Joffe P. Clinical implications of converting stable haemodialysis patients from subcutaneous to intravenous administration of darbepoetin alfa. <i>Nephrol Dial Transplant</i> 2006;21:1312-6.	High risk for evaluation bias. High risk for selection bias. High risk for bias due high loss of evaluated patients. Bias due to conflict of interest
Carrera F, Lok CE, De Francisco A, Locatelli F, Mann JFE, Canaud B, et al. Maintenance treatment of renal anaemia in haemodialysis patients with methoxy polyethylene glycol-epoetin beta versus darbepoetin alfa administered monthly: A randomized comparative trial. <i>Nephrology Dialysis Transplantation</i> 2010;25:4009-17.	Darbepoetin not given according to label. High risk for evaluation bias due to financial interests
Geary DF, Keating LE, Vigneux A, Stephens D, Hebert D, Harvey EA. Darbepoetin alfa (Aranesp(trademark)) in children with chronic renal failure. <i>Kidney Int</i> 2005;68:1759-65.	High risk of bias due high loss of evaluated patients. High risk for bias due to conflict of interest
Heidenreich S, Leistikow F, Zinn S, Baumann J, Atzeni A, Bajeski V, et al. Monthly administration of a continuous erythropoietin receptor activator provides efficient haemoglobin control in non-dialysis patients during routine clinical practice: results from the non-interventional, single-cohort, multicentre, SUPRA study. <i>Clin Drug Investig</i> 2012;32:99-110.	High risk for evaluation bias. High risk for selection bias. High risk of bias due high loss of evaluated patients. Bias due to conflict of interest
Horl WH, Locatelli F, Haag-Weber M, Ode M, Roth K, Epo Psg. Prospective multicenter study of HX575 (biosimilar epoetin-alpha) in patients with chronic kidney disease applying a target hemoglobin of 10–12 g/dl. <i>Clin Nephrol</i> 2012;78:24-32.	High risk of bias due high loss of evaluated patients. High risk of bias due to conflict of interest
Krivoshiev S, Wizemann V, Czekalski S, Schiller A, Pljesa S, Wolf-Pflugmann M, et al. Therapeutic equivalence of epoetin zeta and alfa, administered subcutaneously, for maintenance treatment of renal anemia. <i>Adv Ther</i> 2010;27:105-17.	High risk of bias due to conflict of interest. Dose adjustments before randomisation

<p>Rath T, Mactier RA, Weinreich T, Scherhag AW, Investigators G. Effectiveness and safety of recombinant human erythropoietin beta in maintaining common haemoglobin targets in routine clinical practice in Europe: the GAIN study. <i>Curr Med Res Opin</i> 2009;25:961-70.</p>	<p>High risk for bias (over all)</p>
<p>Spinowitz BS, Pratt RD, Epoetin Delta Study G. Epoetin delta is effective for the management of anaemia associated with chronic kidney disease. <i>Curr Med Res Opin</i> 2006;22:2507-13.</p>	<p>High risk for selection bias. High risk for bias due high loss of evaluated patients. High risk of bias due to conflict of interest. Method description not adequate</p>
<p>Wiecek A, Ahmed I, Scigalla P, Koytchev R. Switching epoetin alfa and epoetin zeta in patients with renal anemia on dialysis: Posthoc analysis. <i>Adv Ther</i> 2010;27:941-52.</p>	<p>High risk for evaluation bias. High risk for selection bias. High risk of bias due high loss of evaluated patients. High risk of bias due to conflict of interest</p>