Risk of bias assessment

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Supplementary Table 13. Risk of bias assessment

Study ID	Study design ¹	Random sequence generation (selection bias)	Allocation concealment (selection bias)	Blinding of participants, personnel (performance bias) Hb Day 7, AEs	Blinding of outcomes assessment (detection bias) Hb Day 7, AEs	d (attriti	te outcome ata on bias) Day 7	Other bias AE elicitation method		
				Primary outcome Hb D7	Primary outcome Hb D7	n	%			
1	MDA	Not applicable	Not applicable	Open label	Open label	Open label 295 78%				
2	RCT	Computer generated	Sealed, opaque envelopes	Open label	Open label, not clear if Hb staff blinded	692	89%	Open questions, direct for dark/'coke' urine		
3	RCT	Computer generated	Sealed, opaque envelopes	Staff unblinded, participants blinded	Open label	220	97%	Checklist questions, incl. for dark urine		
4	RCT	Envelope draw	Sealed, opaque envelopes	Open label	Not reported	231	71%	Checklist		
5	RCT	Envelope draw	Sealed, opaque envelopes	Only pharmacist, unblinded	Blinded	357	97%	Open, some checklist items, incl. dark urine		
6	RCT	Computer generated	Sealed, opaque envelopes	Open label	Open label	86	92%	Not reported		
7	RCT	Computer generated	Sealed, opaque envelopes	Open label	Open label	50	92%	Checklist questions, Hillman for dark urine		
8	RCT	Computer generated	Sealed, opaque envelopes	Only pharmacist, unblinded	Blinded	461	100%	Checklist questions, incl. dark urine		
9	RCT	Envelope draw	Sealed, opaque envelopes	Open label	Open label	78	88%	Question dark urine		
10	RCT	Computer generated	Sealed, opaque envelopes	Open label	Open label	61	69%	Not reported		
11	RCT	Computer generated	Sealed, opaque envelopes	Open label	Hb lab staff blinded, clinical staff unblinded	267	89%	Not reported except Hillman for dark urine		
12	Cohort	Not applicable	Not applicable	Open label	Open label	94	66%	Open questions, Hillmen for dark urine		
13	RCT	Computer generated	Sealed, opaque envelopes	Open label	Hb lab staff blinded, clinical staff unblinded	103	98%	Checklist questions, incl. for dark urine		
14	MDA	Not applicable	Not applicable	Open label	Open label	843	70%	Not reported		
15	RCT	Computer generated	Sealed, opaque envelopes	Open label	Open label	373	98%	Checklist		
16	RCT	Computer generated	Sealed, opaque envelopes	Open label	Open label	139	60%	Open and some checklist items		
17	RCT	Computer generated	Sealed, opaque envelopes	Only pharmacist, unblinded	Blinded	114	100%	Not reported		

18	Cohort	Not applicable	Not applicable	Open label	Open label			Checklist questions, incl. for dark urine
19	RCT	Computer generated	Sealed, opaque	Staff blinded, participants	Blinded	Q1	95%	Open and some
13	ICI	Computer generated	envelopes	unblinded on request by	billided	81	9370	checklist questions
			envelopes	non-investigator				checklist questions
20	MDA	Not applicable	Not applicable	Open label	Open label			Not reported

¹MDA = mass drug administration, RCT = randomised controlled trial; D7 = Day 7

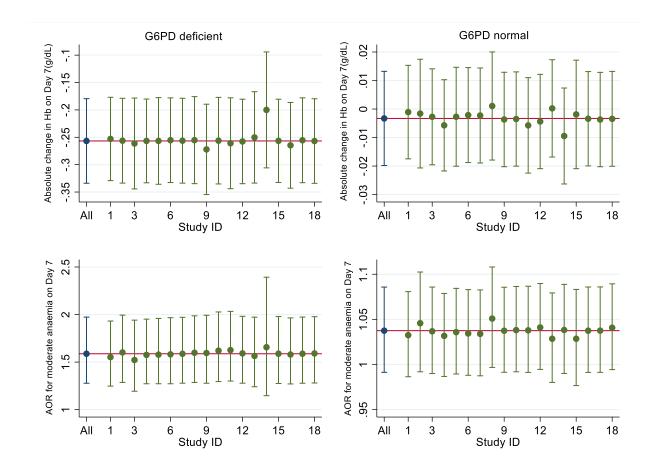
Supplementary Table 14. Individual participant data not available

Author, date	PubMed ID	Study Design	Location	Year	ACT	Follow up	Age	G6PD	Target	N	Summary of haemoglobin outcome	Summary of adverse events
						(days)		exclusion	primaquine dose			
									(mg/kg)			
Arroyo-Arroyo, 2	28749756	3 sequential dose	Colombia		AL	7	All	Not tested	1) 0.75 day 3, 2)	60	Not applicable	No volunteers had adverse events possibly associated with the
		groups ACT plus		2014					0.50 day 1 and			antimalarial treatment. The signs and symptoms observed in all patients
		primaquine							0.25 day 3, 3) 0.25			were indistinguishable from the common malaria symptoms
									days 1, 2 and 3			
Lin,2017*	28591198	Randomised	Cambodia	2012-	DP	42	18-65	Severe	0.75 day 3	101	Among 8/101 with mild or moderate G6PD deficiency, a greater	
		controlled trial, ACT		2014							drop in haemoglobin at day 7 was seen with primaquine but not	
		with/without									statistically significant: median fractional reduction in haemoglobin	
		primaquine									24.8% (range 0.9% to 29.8%) in 6 given primaquine versus 7.1% (-	
											4.4% and 18.7%) in 2 not given primaquine (p = 0.14). The largest	
											drop was 9.9 g/dL from a baseline of 14.1; all Hgb values were	
											>11.0 g/dL by day 14. In G6PD normal subjects, haemoglobin was	
											only measured to day 3, at which time there was no change in the	
											fractional drop between arms (9.8% versus 9.3% in the primaquine	
											and non-primaquine groups, respectively, p = 0.79).	
Shah, 2013*	23587943	Meta-analysis of	India	2009-	ASSP	28	> 1 year	Not tested	0.75 day 2	1372	Not applicable	Adverse events reported included vomiting (8) and fever (2) in the AS+SP-
		sites with / without		2010								alone arm and vomiting (14) and jaundice (1) in the primaquine arm. Only
		primaquine										5/14 patients who experienced vomiting did so on the day of primaquine
												administration. The jaundice occurred in a 5-year-old on day 14 and self-
												resolved
Smithius 1010	20832366	Randomised	Myanmar	2008-	AM,	63	> 1 year	Not tested	0.75 day	808**	No day 7 data	599 (74%) reported adverse events. 13 (1.6%) vomited within the first
		controlled trial, ACT		2009	ASAQ,							hour, none after treatment. The ony side-effect attributed to primaquine
		with/without			DP, AL							was abdominal pain.
		primaquine										
Tun, 2016	27036739	Single arm	Myanmar	2013-	DP	42	6 months	Not tested	0.25mg/kg day 0	116	There were no clinically significant falls in haemoglobin, or	Study medications generally well tolerated although 6 vomited day 0
				2014			to 65 years				haemoglobinuria	medication, and 1 vomited on day 2. One serious adverse event, a death
												through road traffic accident 2 weeks after the last visit
AL: artemether-li	AL: artemether-lumefantrine, ASAQ:artesunate amodiaquine, AM:artesuate-mefloquine, ASSP:artesunate sulphadoxine-pyrimthamine, DP:dihydroartemisinin piperaquine,											
*Unclear if reque	sted											
**Included mixed	infections											

¹

Supplementary Figure 12. Sensitivity analysis for the main haematological results

Figures show estimates and their 95% CI for the effect of primaquine dose (in G6PD deficient subjects in the left-hand-side panels and in G6PD normal subjects in the right-hand panels) from the final multivariable model (in blue) and in the same model re- fitted after exclusion of each study in turn (in green). Two endpoints are presented: absolute change in haemoglobin on Day 7 (upper panels) and risk of moderate anaemia on Day 7 (lower panels). Red line show the effect estimated in the final model.



Coefficient of variation for the estimates was (from top left, clockwise) 5.7%, 75.8%, 3.9% and 14.5%.

Large variability for the second model was due to the estimates being very close to 0, nonetheless the results were very consistent throughout.