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| Table S1. Characterization of included studies | | | | | | | | | |
| Author (year) and country | Design | Study population | | | | Intervention | | Outcomes reported (pain, functional capacity, adverse events & study withdrawal) | Notes |
| N | Setting | Mean age  (years) and sex | Fracture recency | Treatment group | Control group |
| Arinoviche (1986)  Chile | DB, RCT, 14 days | 32 | Community | 70.8 years,  29 females  3 males | <15 days | Synthetic salmon calcitonin (100 IU) SC injection daily | Identical placebo SC injection daily | Assessed at baseline, days 3, 7 and 14:   * Pain with mobility (0 = painless, 5 = pain in bed without movement) * Functional capacity (0 = no problem with daily activities, 3 = maximum) * Global efficacy (0 = no problem with daily activities, 3 = maximum)   Other: paracetamol consumption, adverse events & attrition |  |
| Bordier (1986) | DB, RCT, 28 days | 32 | Community | 71.5 years  All females | <2 weeks | Salmon calcitonin (50 IU) IM or SC injection daily | Identical placebo IM or SC injection daily | Assessed at baseline, days 14 and 28:   * 10cm VAS (0 = painless, 10 = agonizing pain)   Other: biochemical measures of BMD, adverse events and attrition | Excluded data from open-label section of study |
| Endo  (2017)  Japan | OL, RCT,  6 weeks | 228 | Private clinics and hospitals,  Multicentre | 77.3 years,  All females | <2 weeks | Elcatonin (20 units) IM injection weekly | NSAIDs (60mg of up to 3x daily) | Assessed at. Baseline, week 4 and week 6:   * 100cm VAS (0 = painless, 100 = maximum) * Japan Questionnaire for Osteoporotic Pain (JQ22) * Roland Morris Disability Questionnaire   Other: adverse events and attrition | Rebamipide or teprenone were given to the control group to prevent GI damage from NSAID use. |
| Laroche (2006) | DB, RCT, 30 days | 27 | Rheumatology unit, teaching hospital | 71.5 years,  22 females,  5 males | <42 days (mean, SD = 38.4 days) | Synthetic human calcitonin (1.5 mg in 500 mL saline) IV infusion, 4h | Pamidronate (1 mg/kg in 500 mL saline) IV infusion, 4h | Assessed at baseline, days 4 and 30:   * 10cm VAS (0 = painless, 10 = agonizing pain)   Other: EIFEL scores (low back pain disability rating), analgesic use and adverse events |  |
| Lauro (1993) | SB, RCT,  28 days | 40 | Not stated | 60-75,  All females | <7 days | Salmon calcitonin (100 IU) IM injection, daily | Ipriflavone (600 mg) oral daily | Assessed at baseline, days 7, 14, 21 and 28:   * 10cm VAS (0 = painless, 10 = agonizing pain) * Digital pain meter measurements (6-pt scale) while applying pressure on fractured vertebrae * 3-pt pain mobility scale (0 = normal mobility, 3 = highly reduced mobility)   Other: global tolerability and efficacy (3-pt scale) and adverse events |  |
| Lyritis (1991)  Greece | DB, RCT, 14 days | 56 | Hospital | 68 years,  All females | <3 days | Salmon calcitonin (100 IU) IM injection daily | Identical placebo IM injection daily | Assessed at baseline, days 1-7 and 14:   * 10cm VAS (0 = painless, 10 = agonizing pain) during bedrest and while sitting, standing and walking * Paracetamol use   Other: biochemical measures of BMD and 3-pt pain tolerability scale |  |
| Lyritis (1997)  Greece | DB, RCT, 28 days | 100 | Hospital | 71 years (females), 76 years (males),  68 females  32 males | <5 days | Salmon calcitonin (200 IU) nasal spray daily | Identical placebo nasal spray daily | Assessed at baseline, weeks 1-4:   * 10cm VAS (0 = painless, 10 = agonizing pain) during bedrest and while sitting, standing and walking * Number of participants able to walk   Other: adverse events |  |
| Lyritis (1999)  Greece | DB, RCT, 28 days | 40 | Hospital | 71 years,  28 females,  12 males | <5 days | Salmon calcitonin (200 IU) suppository daily | Placebo suppository daily | Assessed at baseline, weeks 1-4:   * 10cm VAS (0 = painless, 10 = agonizing pain) during bedrest and while sitting, standing and walking * Digital pain meter measurements (6-pt scale) while applying pressure on fractured vertebrae * Paracetamol consumption   Other: biochemical measurements of BMD, adverse events & attrition |  |
| Pun (1989) Hong Kong | DB, RCT,  28 days | 18 | Hospital | 67-81 years,  All females | <7 days | Salmon calcitonin (100 IU) nasal spray daily | Identical placebo nasal spray daily | Assessed at baseline, days 7, 14, 21 and 28:   * 10cm VAS (0 = painless, 10 = agonizing pain) * Analgesic consumption   Other: adverse events |  |
| Tanaka (2017a)  Japan | OL, RCT,  6 months | 107 | Private clinics and hospitals (outpatient), Multicentre | 74.7 years,  All females | <2 weeks | Elcatonin (20 units) IM injection weekly | Etodolac (200mg x 2) and alfacalcidol (VitD3 analogue, 0.5 g) daily | Assessed at baseline, weeks 1-4 and months 2-6:   * 100cm VAS while supine, sitting, getting up, rolling over, sitting up in bed and walking * Roland Morris Disability Questionnaire * Euro-QOL 5 Dimension   Other: Biochemical measures of BMD and adverse events |  |
| Tanaka (2017b)  Japan | OL, RCT,  6 months | 51 (33 included in meta-analysis) | Orthopedic clinic | 75.5 years,  All females | <2 weeks | Elcatonin (20 units) IM injection weekly | Minodronic acid hydrate (1 mg) oral daily | Assessed at baseline, weeks 1-4 and months 2-6:   * 100cm VAS * Biochemical measures of BMD   Other: adverse events and DEXA scan measures of BMD | EL+MIN group was not included in meta-analysis (n=18). |