

Reviews in Endocrine and Metabolic Disorders

Circadian alignment of food intake and glycaemic control by time-restricted eating: a systematic review and meta-analysis

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Supplementary Table 2. Characteristics and main findings of the studies excluded from the meta-analysis due to lack of extractable data.

Author (year)	Study design and groups	Population	Duration (weeks)	TRE hours Fast:Fed	Calorie Restriction	Eating window	Control group	n (control/ TRE)	Age group	Sex	Main findings on outcomes of interest
Xie (2022)	Randomized, C/eTRE/mTRE	Healthy non-obese	5	16:8	No (<i>ad libitum</i>)	eTRE: 6am-2pm; mTRE: 11am-8pm	Ad libitum no TRE	28/e28/m26	Young	M/F	Only eTRE and not mTRE decreased significantly fasting glucose levels and HOMA-IR, compared to the control group. No significant change in HbA1c.
Zhang (2022)	Randomized, C/eTRE/ITRE	Overweight/obese (BMI ≥ 24 kg/m ²)	8	18:6	No (habitual diet)	eTRE 7am-1pm; ITRE 12pm-6pm	Habitual diet	19/e21/I 20	Young	M/F	eTRE, and not ITRE, reduced significantly fasting insulin, HOMA-IR and mean glucose assessed by continuous glucose monitoring. No significant change in HbA1c.

BMI: body mass index; eTRE: early time restricted eating; F: female; ITRE: late time restricted eating; mTRE: mid-day time restricted eating; M: male; TRE: time restricted eating