
Supplementary information

**Clinical application of intermittent fasting
for weight loss: progress and future
directions**

In the format provided by the
authors and unedited

Supplementary Figure 1. Risk of bias assessment

	Alternate day fasting						5:2 Diet						Time restricted eating									
Risk assessment:	Catenacci 2016	Cho 2019	Paravesh 2019	Bhutani 2013	Varady 2013	Trepanowski 2017	Fitzgerald 2018	Harvie 2013	Harvie 2011	Schubel 2018	Sundfor 2018	Overland 2018	Carter 2018	Carlson 2007	Tinsley 2017	Sutton 2018	Cienfuegos 2020	Moro 2016	Tinsley 2019	Gabel 2018	Chow 2020	Lowe 2020
Random sequence generation	Low risk	Low risk	Low risk	Low risk	Low risk	Low risk	Low risk	Low risk	Low risk	Low risk	Low risk	Low risk	Low risk	Unclear	Unclear	Low risk	Low risk	Unclear	Low risk	High risk	Low risk	Low risk
Allocation concealment	Low risk	Unclear	Unclear	Low risk	Low risk	Low risk	Unclear	Low risk	Low risk	Low risk	Low risk	Low risk	Low risk	Unclear	Unclear	Low risk	Low risk	Unclear	Low risk	High risk	Low risk	Low risk
Blinding - Participants and/or personnel	High risk	High risk	High risk	High risk	High risk	High risk	High risk	High risk	High risk	High risk	High risk	High risk	High risk	High risk	High risk	High risk	High risk	High risk	High risk	High risk	High risk	High risk
Blinding - Outcome assessment	Unclear	Low risk	Unclear	Unclear	Unclear	Low risk	High risk	Low risk	Low risk	Low risk	High risk	Unclear	Low risk	Unclear	Unclear	Unclear	Unclear	Unclear	Low risk	Unclear	Unclear	Unclear
Incomplete outcome data	High risk	High risk	High risk	High risk	High risk	Low risk	High risk	Low risk	Low risk	High risk	High risk	High risk	Low risk	High risk	High risk	Low risk	Low risk	High risk	High risk	High risk	High risk	Low risk

Risk of bias in trials assessing intermittent fasting protocols ¹⁻²² was assessed using the Cochrane Collaboration tool. ²³ Random sequence generation, allocation concealment, blinding and incomplete outcome data were graded for each trial as having a high, low or unclear risk of bias. Fifteen of twenty-two trials were at high risk of bias, mostly as a result of missing participant outcome data.

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