

Supplementary Material

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Figure S1. Forest plot of Empyema outcome

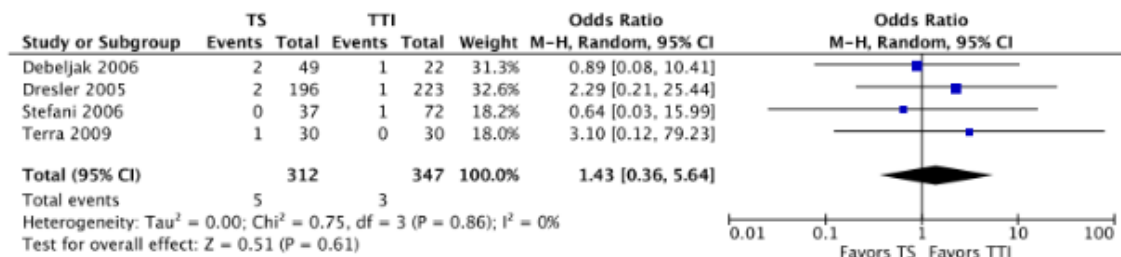


Figure S2. Forest plot of pain outcome

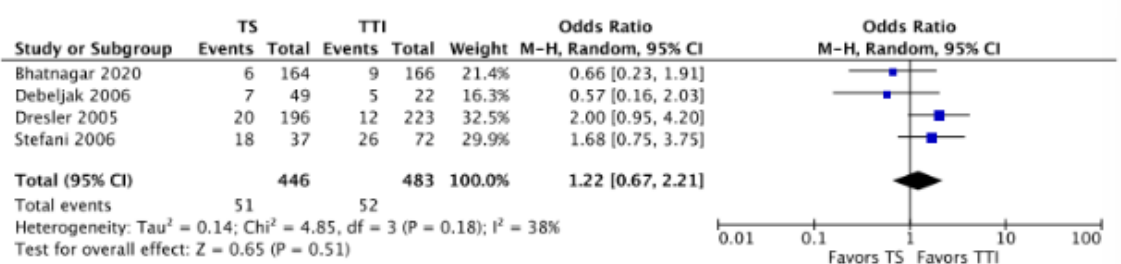


Figure S3. Forest plot of pneumonia outcome

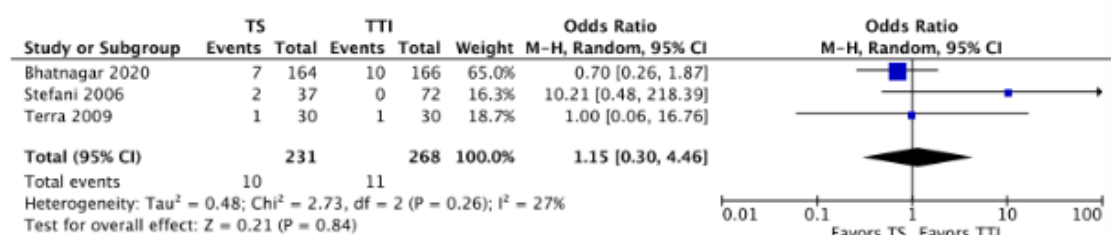


Figure S4. Forest plot of post-op complications outcome

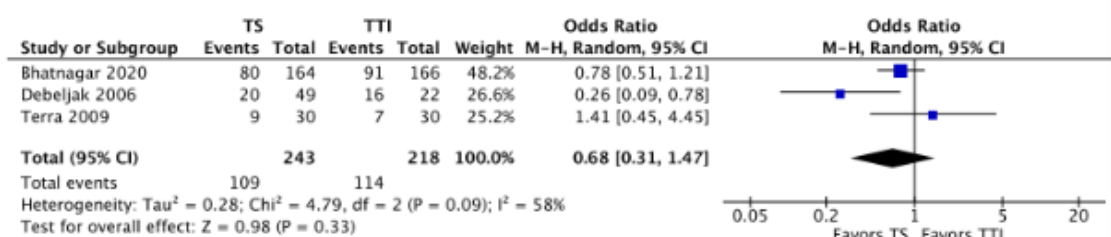


Figure S5. Forest plot of post-op death outcome

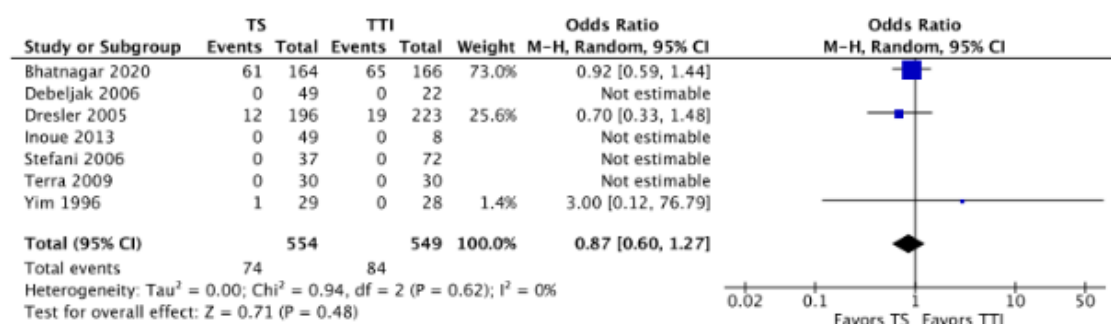


Figure S6. Forest plot of pulmonary edema outcome

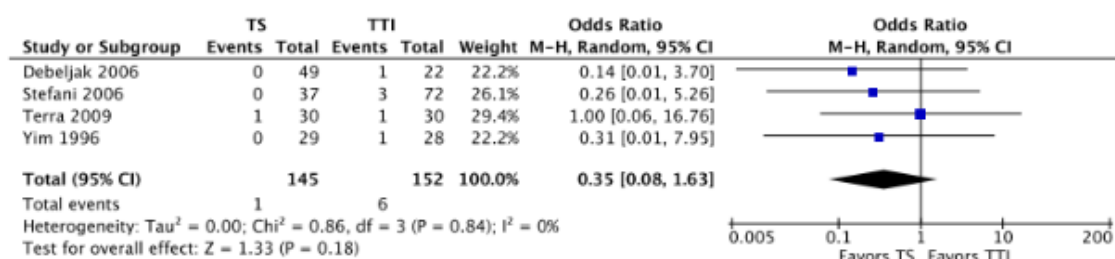


Figure S7. Forest plot of wound infection outcome

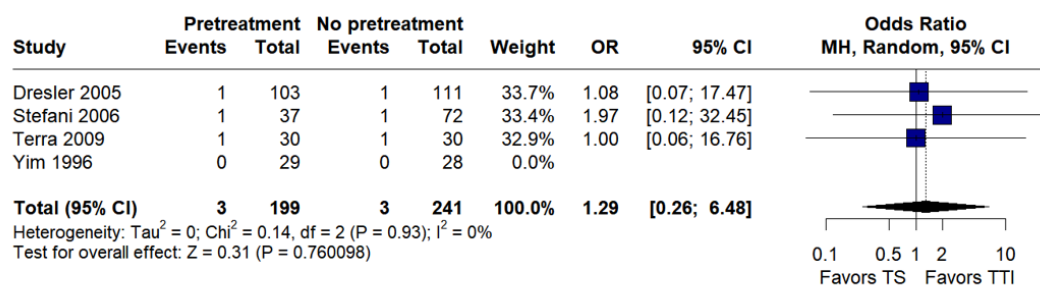


Figure S8. Forest plot of fever outcome

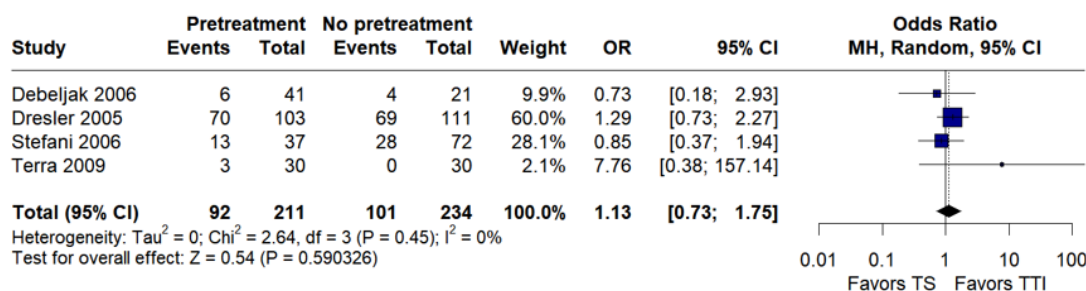


Figure S9. Forest plot of reexpansion edema outcome

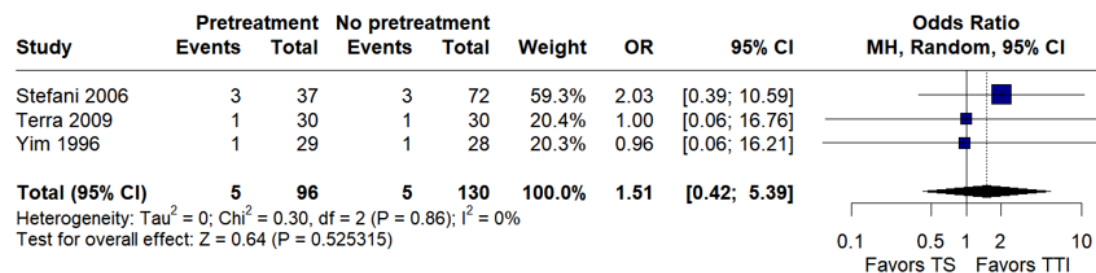
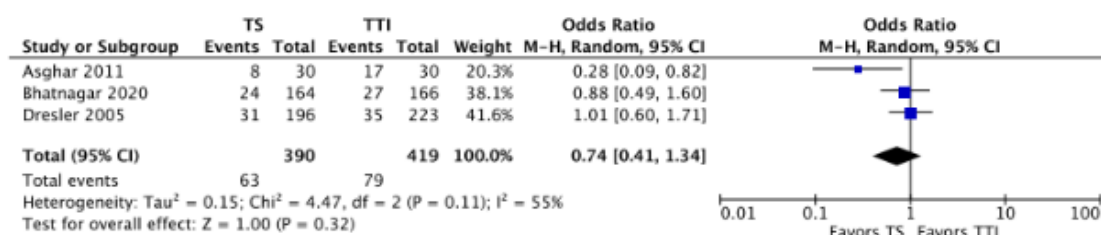


Figure S10. Forest plot of dyspnea outcome



Tabel S1. Definition of treatment success of studies included in this meta-analysis

Study	Definition of Success
Bhatnagar, 2020	Lack of further need for removal of ≥ 100 mL of fluid during thoracentesis; chest tube insertion for fluid management; insertion of an indwelling pleural catheter; or thoracoscopy of any kind on the same side as the trial intervention during the follow-up period
Dresler, 2005	No radiological recurrence
Terra, 2009	Lack of both symptoms and further need for pleural procedures recurrence
Yim, 1996	No radiological recurrence, however symptomatic patients who needed further procedures identified
Asghar, 2011	N/A
Debeljak, 2006	Lack of both symptoms and further need for pleural procedures recurrence and chest X-ray showed total or partial ($\geq 50\%$) resolution of the previous pleural effusion, all within the first month
Inoue, 2013	Chest tube successfully removed when fluid drainage decreased to less than 200 mL per day and radiography with a pleural effusion occupying less than one-third of the pleural space
Stefani, 2006	To evaluate the success of pleurodesis, thoracenteses were performed, through the catheter, 3, 7, 10, and 15 days after discharge, and chest X-rays were obtained at days 7 and 15

Table S2. Definition of treatment failure of studies included in this meta-analysis.

Study	Definition of Failure
Bhatnagar, 2020	Failure was considered when a therapeutic procedure was conducted on the side ipsilateral to their trial intervention, or when the procedure was necessary but not performed
Dresler, 2005	Not defined but recurrence with radiologic evidence of fluid reaccumulation
Terra, 2009	Failure was considered when at any time during the postpleurodesis follow-up a new pleural procedure (eg, thoracentesis, chest tube drainage, or thoracoscopy) was necessary. Patients who had worsening symptoms (dyspnea and cough) associated with radiologic recurrence were considered candidates to undergo new pleural procedures
Yim, 1996	Not defined but recurrence with radiologic evidence of fluid reaccumulation
Asghar, 2011	Not defined but recurrence with radiologic evidence of fluid reaccumulation
Debeljak, 2006	Not defined but worsening of symptoms and when a therapeutic procedure was conducted, or when the procedure was necessary but not performed
Inoue, 2013	Not defined but recurrence with radiologic evidence of fluid reaccumulation of more than one-third of the pleural space
Stefani, 2006	Not defined but recurrence with radiologic evidence of fluid reaccumulation

