	Table 5: In all patients with vitiligo, what is the efficacy of applying calcipotriol or tacalcitol vs placebo or an active treatment in terms of condition progression, area reduction and QoL score? DJ Gawkrodger									
Author / year	Bias	Study type	Quality rating	Popln- no. in each arm	Outcomes measured	Effect size	CI or p value	Follow up length	Scoring comparison	Adverse effects
Kumaran et al India 2006	Selective recruitment. No comment on interests of authors. .	RCT. Selective recruitment. Little detail on methods	2+	Adults- 15, 16, 18- 4 did not complete	Betamethasone, vs calcipotriol, vs combination. Not placebo controlled. Result favoured combination. Onset 5-10 wk	2, 1, 4 all out of 15, for >50% repig	t test, & chi square test	12 weeks treatment plus further 8 weeks	Only 1 selected lesion scored- photo & trace	Skin atrophy noted in 7/15 subjects treated with betamethasone.
Hartmann et al. Germany. 2005	Recruited patients with >10% vitiligo. Treated right side, so not randomised. Not an RCT but probably conducted satisfactorily.	Left right comparison for calcipotriol once daily excluding face vs placebo, lower upper for NBUVB vs BBUVB x3/week for one month then x2/week	2++	10 adults, 35-51, 9 completed, 3F, 6 M	Repigmentation measured using rule of 9. Repigmentation at 12 months for NBUVB, 2/9 had >75%, 2 had 51-75%, 2 had 26-50%, 3 had 0-25%. In each of the 7 of 9 patients with active vitiligo, the disease activity was arrested. DLQI improved mean 28%	BBUVB had no effect. Topical calcipotriol was no more effective than placebo for NBUVB	Student's t test	12 months treatment	Rule of 9s. no photos. DLQI	Calcipotriol caused slight erythema in 2/9
Kullavanijaya & Lim, USA, 2004	Left side treated not randomised. Not an RCT. Variable treatment period- not protocol. 2- , hence not used for evidence	Left side treated with calcipotriene (calcipotriol) x2/day, no Rx to right side. NBUVB x3/week.	2-	20 adults recruited, 17 analysed age 17-68, 11M, 6F	Repigmentation.	'Calcipotriene did not affect the overall response rate'.	No stats	Treatment period varies 5 weeks to 60 weeks	Eyeballed by one observer Dr Lim who knew patients.	No side effects were found
Baysal et al. Turkey, 2003	Not an RCT. No declaration of interests. Response not defined. 2- , hence not used for evidence	Left vs right, not clearly randomised, for additional effect of calcipotriol.	2-	22 patients, 19 F, 3M, 14-66 years. 19 evaluated.	PUVA x2/week for 36 weeks with topical calcipotriol x2/day to one of two symmetrical lesions that were compared for repigmentation.	Addition of calcipotriol made no difference compared to PUVA alone.	No p values quoted	PUVA x2/week for 36 weeks	Repigmentation was eyeballed. Cannot understand what is meant by 'average response for combination was 53.3%, for only PUVA was 53.11%'	Minor itch, erythema, dry skin
Cherif et al. Tunisia. 2003	Not an RCT. No declaration of interests. 2- , hence not used for evidence	Left vs right study, not randomised. Looks at additional benefit of calcipotriol	3	23 adults, 19-73, 16F 7M.	PUVA x3/week, plus calcipotriol to right side of body. Eyeball assessment of repigmentation.	At 15 weeks, 'marked' repigmentation (>50%) seen in 12/23 with calcipotriol and 7/23 without (p=0.15- this is NS)	Used chi squared..	PUVA x3/week for 15 weeks. Assessed at 5 and 15 weeks.	Eyeball assessment of repigmentation. Not done by impartial observer.	Mild irritation with calcipotriol in 2 patients.
Chiaverini et al. France. 2002.	Not an RCT. No declaration of interests.	Left vs right study. Randomised open study. Used symmetrical target lesions	2++	24 patients, ages 5-59. 15F, 9M.. Localised and generalised vitiligo.	X1/day application of calcipotriol ointment for 3-6 months.	No repigmentation noted in 21 of 23 patients after 3-6 months. 1 patient had 5% repigmentation with calcipotriol, 2 had repigmentation with and without calcipotriol.	Non-parametric pared test, p > 0.5	X1/day application of calcipotriol ointment for 3-6 months.	Clinical estimation by non-impartial observer	None stated
Ameen et al. London. 2001.	Not an RCT. Open study. No declaration of interests. 3, hence not used for evidence	Open study of topical calcipotriol with PUVA in 4 patients	3	26 patients, 16F 10M, age 5-61, 22 Asians. 22 received monotherapy with calcipotriol, 4 also had PUVA.	X2/day topical calcipotriol in 22. Topical or oral PUVA in 4, in addition. Treatments for 3-9 months.	17 of 22 receiving monotherapy with calcipotriol showed 30-100% improvement- >50% in 12/22. 3 of 4 with additional PUVA had a 'good' response.	No stats	3-9 months	Photographs compared	There were no adverse effects
Ermis et al. Turkey. 2001.	RCT. Pharmaceutical company provided cream. No declaration of interests.	Double blind placebo controlled trial of PUVA with topical calcipotriol or placebo using symmetrical randomised targeted lesions for assessment	1+	35 patients > age 16 started study- 27 patients, 9F 18M completed it (mean age 30)	PUVA twice weekly until pigmentation was achieved in 'responsive' cases, which was in some over 30 treatments. Calcipotriol or placebo applied to targeted lesions.	Complete repigmentation of target lesion achieved in 17/27 lesions treated with PUVA and calcipotriol pigmented first compared to PUVA and placebo (4), with 6 pigmenting simultaneously (p<0.001).	Paired t test. Actual degree of repigmentation or real advantage in repigmentation from additional use of calcipotriol is not clear from this study.	30 PUVA treatments or more	Clinical examination	Erythema, xerosis and itching
Parsad et al. India. 1998.	RCT. No declaration of interests.	Double blind randomised left right comparison of PUVAsol with or without topical calcipotriol in patients with symmetrical vitiligo	1-	19 patients, 10F, 7M, aged 14-39. 2 withdrew.	PUVAsol given x3/week 'until no further repigmentation'. Topical calcipotriol applied x2/day to 'one side' of the body, placebo ointment to other.	Onset of repigmentation was faster on calcipotriol treated side. At 6 months, 12/17 patients had 'marked to complete' repigmentation of PUVAsol/calcipotriol treated side compared to 6 with similar repigmentation on PUVAsol/placebo treated side (p<0.05). 6/17 patients had improvement in hands/feet with PUVAsol/calcipotriol compared to only 2 for PUVAsol/placebo side.	Chi squared	6 months	Evaluation by eyeballing photographs. It is not clear how many or how few lesions were evaluated.	3 patients had irritation from calcipotriol