

Supplementary material

Method

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Data extraction: We extracted the following data from each paper: authors, publication year, study setting and country, study design and population, age (mean \pm standard deviation (SD) or median (interquartile range (IQR))), sex ratio, the type of polymyxins administered (PMB or colistin), daily dosage (mean \pm SD or median (IQR)), information on loading dose, dosing interval, AKI criteria, sample size, number of AKI events, AKI events based on Risk, Injury, Failure, Loss of kidney function, and End-stage kidney disease (RIFLE) classification scheme, Kidney Disease: Improving Global Outcomes (KDIGO) classification scheme or Acute Kidney Injury Network (AKIN) classification scheme, the need for renal replacement therapy (RRT), Acute Physiology and Chronic Health Evaluation (APACHE) II score for disease severity scoring (mean or median), and potential predictors of nephrotoxicity.

Subgroup analysis: We performed several subgroup analyses according to age (< 65 vs. \geq 65 years), sex proportion, geographical location, definition of AKI, study design, the type of polymyxins (PMB or colistin), daily dosage, giving loading dose or not, dosing interval, APACHE II score, sample size, publication year and risk of bias.

Supplementary Table 1 Search strategy for the study

A . Search strategy for PubMed

Search	Query	Number
#1	Search: "critical care" OR critically ill OR critical illness OR "intensive care" OR "intensive care unit" OR "critically ill" OR "critical illness"	523,382
#2	Search: "Colistin"[MeSH] OR colistin[ALL] OR Colisticin[ALL] OR "Polymyxin E"[ALL] OR "Polymyxin-E"[ALL] OR "Polymyxin E"[ALL] OR "Polymyxin-E"[ALL] OR Colimycin[ALL] OR "Coly-Mycin"[ALL] OR Totazina[ALL] OR "Colistin Sulfate"[ALL] OR "Colistin Sulphate"[ALL] OR "sodium colistimethate"[ALL] OR "colistimethate sodium"[ALL] OR "Polymyxin B"[MeSH] OR "polymyxin B"[ALL] OR "polymyxin-B"[ALL] OR "Polymixin B"[ALL] OR "Polymixin-B"[ALL] OR Aerosporin[ALL] OR "Polymyxins"[MeSH] OR polymyxin[ALL] OR polymyxins[ALL] OR polymyxin[ALL] OR polymyxins[ALL] OR "colistinmethanesulfonic acid" [Supplementary Concept] OR colistimethate[ALL]	18,926
#3	Search: ("Kidney/adverse effects"[MeSH] OR "Kidney/drug effects"[MeSH] OR "Kidney/injuries"[MeSH] OR "Kidney/metabolism"[MeSH] OR "Kidney/pathology"[MeSH] OR "Kidney/toxicity"[MeSH]) OR ("Kidney Diseases/chemically induced"[MeSH] OR "Kidney Diseases/diagnosis"[MeSH] OR "Kidney Diseases/drug effects"[MeSH] OR "Kidney Diseases/injuries"[MeSH])	435,268

	OR "Kidney Diseases/metabolism"[MeSH] OR "Kidney Diseases/pathology"[MeSH] OR "Kidney Diseases/pharmacology"[MeSH] OR "Kidney Diseases/prevention and control"[MeSH]) OR ("Acute Kidney Injury/chemically induced"[MeSH] OR "Acute Kidney Injury/drug effects"[MeSH] OR "Acute Kidney Injury/epidemiology"[MeSH] OR "Acute Kidney Injury/metabolism"[MeSH] OR "Acute Kidney Injury/pathology"[MeSH] OR "Acute Kidney Injury/pharmacology"[MeSH] OR "Acute Kidney Injury/prevention and control"[MeSH])	
#4	Search: nephrotoxic*[ALL] OR "Renal toxicity"[ALL] OR "renal toxicities"[ALL] OR "kidney toxicity"[ALL] OR "kidney toxicities"[ALL] OR "renal failure"[ALL] OR "renal failures"[ALL] OR "kidney disease"[ALL] OR "kidney diseases"[ALL] OR "kidney failure"[ALL] OR "kidney failures"[ALL] OR "renal disease"[ALL] OR "renal diseases"[ALL] OR "kidney injury"[ALL] OR "kidney injuries"[ALL] OR "renal injury"[ALL] OR "renal injuries"[ALL] OR "renal function"[ALL] OR "renal dysfunction"[ALL] OR "renal functions"[ALL] OR "renal dysfunctions"[ALL]	495,953
#5	Search: #3 OR #4	741,114
#6	Search: #1 AND #2	1,851
#7	Search: #5 AND #6	317
#8	Search: animals[MeSH] NOT humans[MeSH]	4,955,293
#9	Search: #7 NOT #8	314
#10	Search: #9 AND English[Filter]	301

B. Search strategy for Ovid Embase

Search	Query	Number
#1	'intensive care'/exp OR 'critical care':ab,ti OR 'intensive care':ab,ti OR 'intensive care unit'/exp OR 'critical*ill*:ab,ti OR 'critical illness'/exp OR 'intensive care nursing'/exp	1,086,856
#2	'colistin'/exp OR colistin OR colisticin OR 'polymyxin e' OR 'polymyxin-e' OR 'polymyxin e' OR 'polymyxin-e' OR 'neomycin'/exp OR 'coly-mycin' OR totazina OR 'colistin sulfate' OR 'colistin sulphate' OR 'colistimethate'/exp OR 'sodium colistimethate' OR 'colistimethate sodium' OR colistimethate OR 'polymyxin b'/exp OR 'polymyxin b' OR 'polymyxin-b' OR 'polymyxin b' OR 'polymyxin-b' OR aerosporin OR 'polymyxin'/exp OR polymyxin OR polymyxins OR polymyxin OR polymyxins	64,392
#3	'kidney/adverse effects' OR 'kidney/drug effects' OR 'kidney/injuries' OR 'kidney/metabolism' OR 'kidney/pathology' OR 'kidney/toxicity' OR 'kidney diseases/chemically induced' OR 'kidney diseases/diagnosis' OR 'kidney diseases/drug effects' OR 'kidney diseases/injuries' OR 'kidney diseases/metabolism' OR 'kidney diseases/pathology' OR 'kidney diseases/pharmacology' OR 'kidney diseases/prevention and control' OR 'acute kidney injury/chemically induced' OR 'acute kidney injury/drug effects' OR 'acute kidney injury/epidemiology' OR 'acute kidney injury/metabolism' OR 'acute kidney injury/pathology' OR 'acute kidney injury/pharmacology' OR 'acute kidney	73,720

	injury/prevention and control' OR 'nephrotoxicity'/exp	
#4	nephrotoxic* OR 'renal toxicity' OR 'renal toxicities' OR 'kidney toxicity' OR 'kidney toxicities' OR 'renal failure' OR 'renal failures' OR 'kidney disease' OR 'kidney diseases' OR 'kidney failure' OR 'kidney failures' OR 'renal disease' OR 'renal diseases' OR 'kidney injury' OR 'kidney injuries' OR 'renal injury' OR 'renal injuries' OR 'renal function' OR 'renal functions' OR 'renal dysfunction' OR 'renal dysfunctions'	895,669
#5	#3 OR #4	897,426
#6	#2 AND #5	4,135
#7	#1 AND #6	1,154
#8	('animal'/exp OR [animal cell]/lim OR [animal experiment]/lim OR [animal model]/lim OR [animal tissue]/lim OR [animals]/lim) NOT ('human'/exp OR [humans]/lim)	6,207,929
#9	#7 NOT #8 AND [english]/lim AND [embase]/lim	1,090

C. Search strategy for Cochrane Library

Search	Query	Number
#1	MeSH descriptor: [Critical Care] explode all trees	2,165
#2	MeSH descriptor: [Intensive Care Units] explode all trees	3,952
#3	MeSH descriptor: [Critical Illness] explode all trees	2,531
#4	MeSH descriptor: [Critical Care Nursing] explode all	44

	trees	
#5	(critical care):ti,ab,kw OR (intensive care):ti,ab,kw OR (critical* ill*):ti,ab,kw	44,040
#6	#1 OR #2 OR #3 OR #4 OR #5	44,284
#7	MeSH descriptor: [Colistin] explode all trees	186
#8	(colistin OR colisticin OR 'polymyxin e' OR 'polymyxin-e' OR 'polymixin e' OR 'polymixin-e' OR 'neomycin' OR sodium colistimethate' OR 'colistimethate sodium' OR colistimethate OR 'polymyxin b' OR polymyxin OR polymyxins OR polymyxin OR polymyxins):ti,ab,kw (Word variations have been searched)	1,421
#9	#7 OR #8	1,421
#10	MeSH descriptor: [Kidney Diseases] explode all trees	17,295
#11	("Kidney Diseases" OR "Kidney" OR "acute kidney injury") (Word variations have been searched)	60,753
#12	(nephrotoxic* OR 'renal toxicity' OR 'renal toxicities' OR 'kidney toxicity' OR 'kidney toxicities' OR 'renal failure' OR 'renal failures' OR 'kidney disease' OR 'kidney diseases' OR 'kidney failure' OR 'kidney failures' OR 'renal disease' OR 'renal diseases' OR 'kidney injury' OR 'kidney injuries' OR 'renal injury' OR 'renal injuries' OR 'renal function' OR 'renal functions' OR 'renal dysfunction' OR 'renal dysfunctions') (Word variations have been searched)	72,563
#13	#10 OR #11 OR #12	85,680
#14	#6 AND #9 AND #13	46

Supplementary Table 2 Characteristics of primary studies included

Study	Study design	Location and sites	Study period	Total patients	Age patient (years)	Patient population	Key exclusion criteria	Age [Mean (\pm SD) or Median (IQR)] (years)	APAC HE II score (Mean \pm SD)	Sex (M/F)	Style of Polymyxins	Regimen		Nephrotoxicity criteria
												Dose [Mean (\pm SD) or Median (IQR)]	Duration(days) [Mean (\pm SD) or Median (IQR)]	
Abdellatif, et al., 2016 [1]	RCT	Tunisia (single centre)	Apr 2013 to Apr 2015	76	30	Adults (> 18 y)	Septic shock; pregnancy	53 \pm 17	NR	49/27	CMS	4.5 MIU Q48 - 12H	> 14	1.5-fold increase in baseline SCr

Abdels alam, et al., 2018 [2]	RCT	Egypt (single center)	May 2016 to Oct 2016	60	14	Adu lts (> 18 y)	Colistin <72 h; Glasgow Coma Scale < 9; APACHE II > 34, SOFA > 15; risk of mortality > 80%	56.1 ± 6.8	18.5 ± 6.3	28/ 32	CMS	1.25 - 5 mg/kg/d day	> 15	1.5-fold increase in baseline SCr to > 1.3 mg/dL or RRT
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Aggarwal, et al., 2018 [3]	Prospective cohort study	India (single center)	Jul 2016 to Jun 2017	112	30 (>18 y)	Adu lts	Polymyxin <72 h; CKD patients on haemodialysis or CrCL <10 ml/min; concomitant any other nephrotoxic drug (contrast, aminoglycosides, vancomycin, amphotericin B, NSAIDs, cyclosporine, diuretics, etc.)	63.9 ± 15.2	21.4 ± 4.4	75/37	Colistin, 2.5 mg/kg Q12H; PMB, 1.5 mg/kg Q12H	Colistin, 7 (5 - 7); PMB, 7 (7 - 9) RIFLE*

Aitulli na, et al., 2019 [4]	Retr ospe ctive coh ort	Latvi a (singl e centr e)	2015 to 2017	97 (100 case s)	18	Adu lts (> 18 y)	Colistin < 72 h	63.0 (51.0 - 73.5)	NR	65/ 32	Colisti n	1 - 9 MU/day	Normal renal function, 9 (7 - 17); ARC, 16 (7 - 27); Renal impairme nt, 10 (4 - 15); CRRT, 11.5 (7 - 24)	AKIN
Aitulli na, et al., 2021 [5]	Retr ospe ctive coh ort	Latvi a (singl e centr e)	2015 to 2018	87	24	Adu lts (> 18 y)	RRT baseline; colistin < 72 hours	at 64 (52-75)	NR	58/ 29	Colisti n	NR	11 (7 - 20)	RIFLE

Akajag bor, et al., 2013 [6]	Retr ospe ctive coho rt	USA (singl e)	Jan 2008 to Jun 2010	154	79	Adu lts (> 18 y)	Dialysis baseline at	NR	NR	NR	Colisti n PMB	Colistin, 5 mg/kg/d ay (IBW) PMB, 15 000 - 25 000 units/kg /day	colistin, 11.7 ± 11.4 PMB, 12.5 ± 11.9	RIFLE
Almut airy, et al., 2020 [7]	Retr ospe ctive coho rt	Saudi Arabi (singl e)	Jan 2014 to Dec 2015	131	65	Adu lts (> 18 y)	AKI at the time of initiation of colistin therapy; RRT at baseline	55.7 \pm 19.4	NR	NR	Colisti n	NR	NR	KDIGO

Alp, et al., 2017 [8]	Retrospective cohort	Turkey (single center)	Mar 2014 to May 2015	52	21	Adu lts (> 16 y)	Renal impairment at baseline; concomitant inhaled colistin	61 (16 - 87)	NR	27/25	CMS	150 mg Q12H	NR	RIFLE
Asan, et al., 2020 [9]	Retrospective cohort	Bursa (single center)	NR	85	35	Adu lts (> 18 y)	Acute renal failure; chronic renal failure	67.8 ± 16.6	23.2 ± 5.2	45/40	Colistin	NR	NR	RIFLE
Aydogan, et al., 2018 [10]	Retrospective cohort	Turkey (single center)	Jan 2010 to Jun 2014	76	36	Adu lts (> 18 y)	Colistin < 72 h; dialysis or RRT at baseline	61.8 ± 16.3	21.9 ± 7.2	50/26	Colistin	2.5-5 mg/kg/day	11.8 ± 7.6	RIFLE

Bassett i, et al., 2008 [11]	Prospective cohort	Italy (2 centres)	Jan 2006 to Jul 2007	29	3	Adu lts (> 18 y)	Colistin < 72 h	47 14	\pm	17.0 3.7	NR	Colistin	2 MU Q8H	17.7 ± 10.4	SCr > 2 mg/ml (1.5-fold increase in baseline SCr for patients with pre-existing renal impairment) or CrCL 50% of baseline
Betrosian, et al., 2008 [12]	RCT	Greece (2 centres)	NR	15	5	Adu lts (> 18 y)	Combination therapy	67 ± 9	\pm	14 ± 2	7/8	Colistin	5.83 ± 2.3 MIU/day	9.2 ± 1.5	1.5-fold increase in baseline SCr or need for RRT

Bilgili, et al., 2016 [13]	Retrospective cohort	Turkey (single center)	Jan 2013 to Jan 2015	102	79	Adu lts (> 18 y)	Colistin < 72 h; pre-existing AKI or AKI developed within 2 days of colistin initiation	56.5 (18 - 90)	NR	49/ 53	Colistin	5 mg/kg/day	9 (3-40)	RIFLE
Binh, et al., 2015 [14]	Retrospective cohort	Vietnam (single center)	Aug 15th, 2013 to Jan 15th, 2014	28	6	Adu lts (> 18 y)	Colistin treatment < 5 days; RRT at baseline	60.0 ± 20.4	13.6 ± 5.5	18/ 10	Colistin	4.1 ± 1.6 MIU/Kg /day	12.5 ± 5.2	RIFLE
Choe, et al., 2019 [15]	Retrospective cohort	Korea (single center)	Jan 1st, 2008 to Dec 31th, 2016	138	66	Adu lts (> 18 y)	Colistin < 72 h; patients on RRT at the time of IV colistin initiation	65.8 ± 14.1	NR	NR	Colistin	NR	NR	RIFLE*

Chuang et al., 2014 [16]	Retrospective cohort	Taiwan (single center)	Jan 2009 to Dec 2010	119	12	Adu lts (> 18 y)	Concomitant infection (e.g. methicillin resistant Staphylococcus aureus or Pseudomonas aeruginosa)	63.7 ± 19.5	22.8 ± 9.3	86/33	Colistin	2.5 - 5 mg CBA /kg/day	14.6 ± 13.7	1.5-fold increase in baseline SCr or 20% decrease in baseline CrCL or need for RRT
Çiftçi, et al., 2017 [17]	Retrospective cohort	Turkey (single center)	2010 to 2012	91	64	Adu lts (> 18 y)	Colistin < 48 h; baseline SCr > 2mg/dL or RRT at baseline	66.6 ± 14.3	20.4 ± 4.5	46/45	CMS	75 mg TID or 150 mg BID	NR	KDIGO
Dalfino, et al., 2012 [18]	Prospective cohort	Italy (single center)	Aug 2010 to Jun 2011	25 (28 cases)	5	Adu lts (> 18 y)	Pregnant; Colistin < 72 h	62 ± 18	18 ± 6	19/6	CMS	8.02 ± 1.98 MU/day	12.33 ± 6.84	AKIN

Dalfin o, et al., 2015 [19]	Pros pecti ve coho rt	Italy (singl e) coho centr e)	Nov 2012 to Oct 2014			Adu lts (> 18 y)	Colistin < 72 h; AKI with 48 h; RRT at baseline	64 (48.5-7 5.2)	20.2 ± 8.4	44/ 26	CMS	105919 ± 93369 IU/kg/d ay (IBW)	14.3 ± 6.1	AKIN
De Leon-B orrás, et al., 2019 [20]	Pros pecti ve coho rt	Puert o Rico (singl e) coho centr e)	Jan 1st, 2012 to Jun 30th, 2013			Adu lts (> 18 y)	NR	58.5 (37 - 71.5)	NR	11/ 9	PMB	1076000 Units/da y	NR	2-fold increase in baseline SCr to ≥ 2.0 mg/dL
Demir dal, et al., 2016 [21]	Case cont rol	Turk ey (singl e) centr e)	Jan 2013 to Dec 2014	123	64	Adu lts (> 18 y)	ICU stay < 48 h	64.2 ± 17.8	NR	83/ 40	Colisti n	150 mg CBA Q12H	11.2 ± 6.7	RIFLE

Dewan, et al., 2014 [22]	Prospective cohort	India (single center)	Mar 2013 to sep 2013	31	5	Adults (> 18 y)	Pregnant or breast-feeding patients; hemodialysis therapy at baseline	65 ± 15	20 ± 4	24/7	CMS	4.5 MU Q12H	14 (12 - 16)	RIFLE, other
Doshi, et al., 2011 [23]	Retrospective cohort	USA (single center)	Jul 2007 to Jul 2009	49	15	Adults (> 18 y)	RRT or end-stage renal disease at baseline	55.6 ± 17.4	23.7 ± 6.2	25/24	Colistin	3 - 5 mg/kg/day	9.0 ± 8.1	RIFLE

Durant e-Man goni, et al., 2013 [24]	RCT	Italy (5 centr es)	Nov 7th, 2008 to Jul 29th, 2011	209	53	Adu lts (> 18 y)	Treatment with colistin or rifampicin before microbiologic culture during the index hospitalization; significant liver dysfunction; hypersensitivit y fo either study drug	$63 \pm$ 15.4	NR	137 /72	CMS	2 Q8H	MU NR	RIFLE
Durant e-Man goni, et al., 2016 [25]	RCT	Italy (mult icentr e)	NR	166	84	Adu lts (> 18 y)	End-stage kidney disease on RRT	$61.3 \pm$ 16.0	NR	104 /62	Colisti n	2 Q8H	MU 13	AKIN

Elefrit z, et al., 2017 [26]	Retr ospe ctive coho rt	USA (singl e) cohor e)	Apr 1st, 2009 to Feb 28th, 2014	49	26	Adu lts (> 18 y)	Colistin < 48h; pregnancy; colistin therapy initiated >72h after respiratory culture collection	59.8 ± 13.4	23.8 ± 7.9	NR	Colisti n	5.0 ± 2.9 mg/kg/d	9.2 ± 6.2	RIFLE
Garnac ho-Mo ntero, et al., 2013 [27]	Retr ospe ctive coho rt	Spain (singl e) cohor e)	Jan 2008 to Jul 2011	57	24	Adu lts (> 18 y)	RRT at baseline	58.4 ± 14.1	17.5 ± 6.4	35/ 22	Colisti n	6.75 ± 2.8 MU/day	13.3 ± 7.5	AKIN

Garnacho-Montero, et al., 2003 [28]	Prospective cohort study	Spain (single center)	Jan 1997 to Jun 2001	21	5	Adu lts (> 18 y)	NR	56.9 ± 13.1	19.6 ± 7.2	14/7	Colistin	0.75 - 5.0 mg/kg/day	14.7 ± 4.1	SCr > 2 mg/dL (or 1.5-fold increase in baseline for patients with pre-existing renal impairment), CrCL 50% of baseline, or RRT
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Goud en, et al., 2009 [29]	Retr ospe ctive coho rt	Sout h Afric a (singl e centr e)	Jan 2003 to Dec 2005	21	2	Adu lts (> 18 y)	Combination therapy	43.5 ± 15.6	14.4 ± 5.1	NR	Colisti n	3 Q8H	MU	8 (5 - 13)	SCr > 50% above upper limit of normal
Gregoi re, et al., 2014 [30]	Pros pecti ve (9 coh ort es)	Franc e	May 2009 to Dec 2011	73	5	Adu lts (> 18 y)	RRT at baseline	62 (range 18 - 91)	NR	43/ 30	CMS	6.0 (range 0.9 - 9) MIU/day	NR	RIFLE	
Gunay , et al., 2020 [31]	Retr ospe ctive coho rt	Turk ey (singl e centr e)	Apr 2011 to Dec 2017	149	96	Adu lts (> 18 y)	Colistin < 48 hours e-GFR value < 60 mL/min/1.73 m ²	58.7 ± 20.3	30.4 ± 9.5	91/ 58	Colisti n	300 mg/day	12.5 ± 5.4	KDIGO	

Heybeli, et al., 2020 [32]	Case control	Turkey (single center)	Oct 2012 to Apr 2019	133	92	Adu lts (> 18 y)	RRT at baseline, colistin < 72 hours	71 (60 - 80)	24.4 ± 6.7	74/59	CMS	300 (250 - 325) mg/day	10 (6 - 14)	KDIGO
Holloway, et al., 2006 [33]	Retrospective cohort	USA (single center)	Mar 2002 to May 2005	31	7	Adu lts (> 15 y)	< 2 doses antibiotic	41 (15 - 77)	19.0 ± 6.3	NR	PMB	1300000 IU (range 186000 - 3000000)/day	NR	0.5 mg/dL increase or 1.5-fold increase in baseline SCr or 50% decrease in baseline CrCL

Inci, et al., 2018 [34]	Retrospective cohort	Turkey (single center)	Jan 1st to Dec 31th, 2016	48	26	Adu lts (> 18 y)	Colistin < 72 h	58.9 ± 22.4	NR	24/24	Colistin	NR	14.2 ± 7.2	RIFLE
Jang, et al., 2017 [35]	Retrospective cohort	Korea (single center)	Mar 2013 to Jan 2016	44	26	Adu lts (> 18 y)	Colistin < 5 days; concomitant IV and inhaled colistin	60.0 ± 15.2	16.3 ± 5.2	35/9	Colistin	4.5 MU Q12H	10.9 ± 4.5	RIFLE
John, et al., 2018 [36]	Retrospective cohort (2 centers)	Brazil (2 centers)	Jan 2013 to Dec 2015	54	14	Adu lts (> 18 y)	PMB <48h; hemodialysis at baseline	58 ± 17	NR	NR	PMB	3.41 ± 0.75 mg/kg/day	7 (4 - 12)	RIFLE

Jung, et al., 2019 [37]	Retrospective cohort	Korea (single center)	Jan 2013 to Dec 2014	153	84	Adu lts (> 20 y)	Colistin treatment course was interrupted for more than a week	66 (range 21 - 91)	23.8 ± 7.6	109 /44	Colistin	312 (84 - 1004) mg/day	14 (3 - 156)	increase in SCr by 0.3 mg/dL or 1.5- to 2-fold increase in SCr from baseline
Kalin, et al., 2012 [38]	Retrospective cohort	Turkey (single center)	Jan to Aug 2011	45	15	Adu lts (> 18 y)	NR	50.1 ± 20.7	22 (median)	32/13	CMS	2.5 mg/kg Q12-6H	NR	RIFLE
Kalin, et al., 2014 [39]	Retrospective cohort	Turkey (single center)	Jan to Dec 2011	82	22	Adu lts (> 19 y)	Colistin days <5	56.3 ± 17.2	24.3 ± 5.0	NR	Colistin	2.5 mg/kg Q12-6H	14 (range 2 - 22)	RIFLE

Kallel, et al., 2006 [40]	Prospective cohort	Tunisia (single centre)	Jul 2003 to Oct 2004	52	7	Adu lts (> 18 y)	Renal failure at baseline	48 ± 20	NR	NR	Colistin	5.5 ± 1.1 MU/day	9.3 ± 3.8	SCr > 150 µmol/L or BUN > 10 mmol/L
Kallel, et al., 2007 [41]	Case control	Tunisia (single centre)	Jul 2003 to Jun 2005	60	0	Adu lts (> 18 y)	Renal failure at the onset of colistin therapy	43.4 ± 18.8	NR	52/8	Colistin	6 MU/day	9.5 ± 3.8	SCr > 150 µmol/L or BUN > 10 mmol/L
Kara, et al., 2015 [42]	Retrospective cohort	Greece (single centre)	Jan 2009 to Sep 2014	134	26	Adu lts (> 18 y)	Colistin < 72 h	68 (58.0 - 76.3)	23.0 ± 6.0	72/62	Colistin	150 (150.0-300.0) mg/day	9 (4-17)	RIFLE

Katip, et al., 2020 [43]	Retr ospe ctive coho rt	Thail and (singl e centr e)	Jan 2015 to Aug 2017	248	96	Adu lts (> 18 y)	Patients with CRAB cultures assessed to be colonisers or contaminants or who had incomplete records	65.4 ± 17.5	17.4 ± 4.5	158 /90	Colisti n	150 mg Q12H	NR	RIFLE
Katip, et al., 2021 [44]	Retr ospe ctive coho rt	Thail and (singl e centr e)	Jan 2010 to Aug 2017	365	17 9	Adu lts (> 18 y)	Patients with CRAB cultures assessed to be colonisers or contaminants or who had incomplete records	65.2 ± 17.4	12.0 ± 5.1	141 /12 4	colistin	150 mg Q12H	NR	RIFLE

Khalili , et al., 2018 [45]	RCT	Iran (singl e centr e)	Oct 2015 to Oct 2017	24	3	Adu lts (> 18 y)	NR	$60.6 \pm$ 13.0	NR	16/ 8	Colisti n	4.5 MU Q12H	NR	KDIGO
Kim, et al., 2016 [46]	Retr ospe ctive coho rt	Kore a (singl e centr e)	Jan 2009 to Dec 2010	40	8	Adu lts (> 20 y)	Concomitant use of tigecycline and colistin, inadequate treatment (<3 days), or combined infection without appropriate antibiotic therapy	67(57 - 75)	NR	30/ 10	Colisti n	150 mg Q12H	12 (9 - 19)	SCr > 2.0 mg/dL (1.5-fold increase in patients with pre-existent renal dysfunction), CrCL 50% baseline or need for RRT

Kim, et al., 2017 [47]	Retrospective cohort	Korea (2 centers)	Mar 2010 to Nov 2015	93	35	Adu lts (> 18 y)	Nebulized and intravenous colistin simultaneously	65(52 - 74)	20.6 ± 6.8	63/30	Colistin (CBA)	1 - 15mg/kg/day	10 (7 - 16)	SCr > 2.0 mg/dL (1.5-fold increase in patients with pre-existing renal dysfunction), CrCL 50% baseline need for RRT
Kofteridis, et al., 2010 [48]	Case control	Greece (single center)	Jan 2005 to Dec 2008	86	16	Adu lts (> 18 y)	Colistin < 72 h	62.2 ± 15.0	17.4 ± 7.1	58/28	Colistin	9 MIU/d	10 (range 4 - 36)	Increase of > 50% of the baseline creatinine level

Kwon, et al., 2014 [49]	Retr ospe ctive coho rt	Kore a (singl e centr e)	Feb 2010	39	17	Adu lts (> 18 y)	Treatment < 5 days	59.0 ± 19.2	NR	33/ 22	CMS	75 - 300 mg/day	15.0 (9 - 24)	SCr > 2.0 mg/dL (1.5-fold increase in patients with pre-existent g renal dysfunctio n)
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Lambi ase, et al., 2012 [50]	Pros pecti ve coho rt	Italy (singl e centr e)	Jan 2007 to Oct 2010	46	1	Adu lts (> 18 y)	NR	$55.4 \pm$ 18.0	NR	24/ 22	Colisti n	50000 IU/kg/d ay	10	3.0-fold increase SCr and decreased GFR < 75% in patients with baseline SCr, or SCr > 4.0 mg/dL and urine output < 0.3ml/kg/ h in 24h or anuria for the previous
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Li, et al., 2020 [51]	Retrospective cohort	Philippines (single center)	Jan 2015 to May 2018	123	38	Adults (> 18 y)	RRT at baseline	NR	NR	NR	CMS	NR	NR	KDIGO
Lodise, et al., 2018 [52]	Retrospective cohort	USA (multiple centers)	Jan 1st, 2010 to Dec 31th, 2015	491	11	Adults (> 18 y)	Patients with cystic fibrosis; hemodialysis during prior month	61.36 ± 16.0	NR	2848 /2062	Colistin	NR	10.05 ± 8.35	ICD-9 codes of 584.XX or ICD-10 codes of N17.XX
Makris, et al., 2018 [53]	RCT	Greece (2 centers)	NR	39	8	Adults (> 18 y)	Intubated <48h	56.8 ± 16.7	15.5 ± 4.1	12/27	Colistin	3 MU Q8H	>10	Need for Continuous venovenous haemofiltration

Markou, et al., 2003 [54]	Prospective cohort	Greece (single center)	NR	21	3	Adu lts (> 18 y)	Death within 48 h	44.3 (mean)	20.6 ± 4.6	17/7	Colistin	3 MU Q8H	13.5 (range 4 - 24)	Increase in SCr >1 mg/dL
Michalopoulos, et al., 2005 [55]	Retrospective cohort	Greece (single center)	Jul 1st, 2001 to Dec 1st, 2003	43	8	Adu lts (> 18 y)	NR	56.5 ± 16.2	25.8 ± 3.7	37/6	CMS	3 MU Q36-8H	18.6 ± 5.8	Increase in SCr of 2 mg/dL in patients with previously normal renal function
Moghadam, et al., 2018 [56]	Retrospective cohort	Iran (single center)	2011 to 2016	102	50	Adu lts (> 18 y)	History of renal failure; dialysis at baseline	NR	NR	64/38	Colistin	3 MU Q8H	NR	RIFLE

Mosae d, et al., 2018 [57]	RCT	Iran (singl e centr e)	Sep 2017 to May 2018	11	6	Adu lts (> 18 y)	GFR mL/min at baseline	<60 9.9	66.9 ± 9.9	19.9 ± 3.4	7/4	Colisti n	4.5 MU Q12H	8 (range 7 - 9)	30% increase in SCr
Nandh a, et al., 2013 [58]	Retr ospe ctive coho rt	India (singl e centr e)	Mar 2009 to Oct 2010	32	6	Adu lts (> 18 y)	PMB <3 days; SCr ≥ 4 mg/dL; concomitant nephrotoxins	48.5 ± 13.9	11.8 ± 4.3	17/ 15	PMB	11.09 ± 4.01 lakh units	7.44 ± 4.94	RIFLE	
Nazer, et al., 2015 [59]	Retr ospe ctive coho rt	Jorda n (singl e centr e)	Jan 2010 to Dec 2013	89	35	Adu lts (> 18 y)	Colistin <48 h	57.3 ± 15.4	24.8 ± 8.3	64/ 25	CMS	3 MU Q24-8H	15.8 ± 11	RIFLE	

Ozel, et al., 2019 [60]	Pros- pecti- ve coho- rt	Turk- ey (singl- e centr- e)	Dec- 1st, 2012 to Jan 1st, 2014	59	31	Adu- lts (> 18 y)	RRT at baseline colistin < 48 hours	58.1 ± 19.1	20.4 ± 7.4	35/ 24	CMS	5.49 ± 1.90 mg (CBA)/kg /day	11.41 ± 4.33	RIFLE
Özkar- akaş, et al., 2017 [61]	Retr- ospe- ctive coho- rt	Turk- ey (singl- e centr- e)	Jan- 1st, 2013 to Apr 1st, 2014	56	39	Adu- lts (> 18 y)	Colistin <72 h; CKD at baseline	64.1 ± 20.9	NR	29/ 27	Colisti- n	5 mg/kg/d ay (Maximu m 300mg/d ay)	11.5 ± 5.58	RIFLE

Papadimitriou-Olivier et al., 2019 [62]	Retrospective cohort	Greece (single center)	2012 to 2016	228	64	Adu lts (> 18 y)	RRT at baseline	NR	NR	NR	Colistin	1 - 4.5 MIU Q12H	NR	AKIN
Petrosillo, et al., 2014 [63]	Retrospective cohort	Unclear location (3 centers)	Jan 2010 to Jan 2011	166	21	Adu lts (> 18 y)	Death within 5 days	62 (46 - 73.2)	20.4 ± 5.2	103 /63	Colistin	6 (4 - 8) MU/day	NR	RIFLE
Porwal, et al., 2014 [64]	Retrospective cohort	India (single center)	May 2011 to May 2012	50	6	Adu lts (> 18 y)	NR	52.3 ± 15.4	19.6 ± 3.8	32/18	Colistin	5.18 MU/day	NR	Need for RRT

Pourheida, et al., 2019 [65]	RCT	Iran (single center)	Sep to Jan 2018	16	8	Adu lts (> 18 y)	Pneumonia before intubation, dialysis, history of receiving appropriate antibiotics for this episode of VAP for more than 96 h before recruitment	60 ± 19	15 ± 4	10/6	Colistin	4.5 MU Q12H	8 ± 3 (range 3 - 14)	AKIN
Quintanilha, et al., 2019 [66]	Retrospective cohort	Brazil (single center)	Aug 2010 to Jul 2013	102	50	Adu lts (> 18 y)	No undergo an antimicrobial susceptibility test	51.4 ± 16.8	15.6 ± 5.5	77/25	Colistin PMB	Colistin, 3.3 ± 1.5 MU/day PMB, 1.5 ± 0.4 MU/day	Colistin, 9.9 ± 4.8; PMB, 11.5 ± 4.9	AKIN

Ramasubban, et al., 2008 [67]	Retrospective	India (single cohort)	Mar 2006 to 2007	45	2	Adults (> 18 y)	PMB < 2 doses	53 (range 19 - 82)	NR	25/20	PMB	1.2 (range 1 - 1.5) MU/day	7.6 (range 2 - 32)	Increase in SCr by 0.5 mg/dL over 24 h
Rashiz al, et al., 2017 [68]	Retrospective	Malaysia (2 cohorts)	2010 to 2012	100	23	Adults (> 18 y)	NR	45.5 ± 19.6	NR	71/29	Colistin	3.8 ± 2.1 MIU/day	6 ± 4	RIFLE
Reina, et al., 2005 [69]	Prospective cohort	Argentina (single center)	Jan 2000 to Jan 2004	55	0	Adults (> 18 y)	NR	40 ± 16	21 ± 7	19/36	Colistin	1.5 - 5.0 mg/kg/day (maximum 300mg/day)	13 ± 5	SCr > 2.0 mg/dL, 50% decrease in baseline CrCL or need for RRT

Rigatto, et al., 2015 [70]	Prospective cohort	Brazil (3 centers)	Feb 1st, 2013 to Jan 31th, 2014	222	11	Adu lts (> 18 y)	SCr < 10 mL/min, RRT at baseline; did not have serum creatinine collected after the beginning of polymyxin B therapy	NR	NR	NR	PMB	NR	NR	RIFLE
Rigatto, et et al., 2016 [71]	Prospective cohort	Brazil (6 centers)	Feb 1st, 2013 to Jan 31th, 2014	281	62	Adu lts (> 18 y)	Treatment for < 48 h; SCr <10 mL/min; RRT at baseline	NR	NR	NR	CMS CBA/day PMB, 1.5 - 3 mg/kg/day	CMS, 13 (10 - 15); PMB, 10 (7 - 14)	CMS, 13 (10 - 15); PMB, 10 (7 - 14)	RIFLE

Rocco, et al., 2013 [72]	Retr ospe ctive coho rt	Italy (2 centr es)	Apr 2009 to Jun 2011	147	57	Adu lts (> 18 y)	Abnormal renal function	55.6 ± 6.1	NR	95/ 37	CMS	130,000 IU/Kg/d ay (IBW)	11	RIFLE
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Şahin, et al., 2019 [73]	Retr ospe ctive coho rt	Turk ey (singl e centr e)	Jun 2016 to Sep 2018	37	17	Adu lts (> 18 y)	NR	61.0 ± 19.3	20.7±5 .6	26/ 11	Colisti n	2.5 mg/kg Q12H	NR	Increase in serum creatinine by ≥ 0.3 mg/dL within 48 h, Increase in serum creatinine to ≥ 1.5 times baseline, Urine volume < 0.5 mL/kg/h for 6 h

		Saudi												
Salahu ddin, et al., 2017 [74]	Pros pecti ve cohoh rt	Arabi a (singl e) centr e)	Aug 2013	97	48	Adu lts (> 18 y)	ICU stay < 72 h, patients with AKI at ICU admission and end-stage renal disease patients treated by chronic dialysis	NR	NR	NR	Colisti n	NR	NR	RIFLE
Sekhri, et al., 2013 [75]	Retr ospe ctive cohoh rt	India (singl e) centr e)	Mar 2008- 2010	48	15	Adu lts (> 18 y)	SCr > 4 mg/dL; dialysis; AKI with loss or end-stage kidney disease at baseline; concomitant nephrotoxins	58.4 ± 18.2	11.9 ± 4.9	29/ 19	PMB Colisti n	PMB, 11.46 ± 3.08 lakhs units/day ; polymyxin E, 5.3 ± 5.64 MU/day	8.0 ± 4.1	RIFLE

Soares, et al., 2017 [76]	Retr ospe ctive coho rt	Brazi l (singl e centr e)	Jan 2012 to Dec 2014	115	53	Adu lts (> 18 y)	Treatment < 3 days; AKI or RRT at baseline	$59.2 \pm$ 16.1	14.0 ± 6.6	60/ 55	PMB	2.5 MU/kg/ day	14.5 ± 6.5	RIFLE
Tanita, et al., 2013 [77]	Retr ospe ctive coho rt	Brazi l (singl e centr e)	Jan to Dec 2008	80	21	Adu lts (> 18 y)	Colistin < 48 h; death within 48 h	66 (48-75)	$25.7 \pm$ 9.0	NR	CMS	1 - 5 mg/kg/d ay	10 (5 - 15)	KDIGO

Tigen, et al., 2013 [78]	Retr ospe ctive coho rt	Turk ey (singl e centr e)	Sep 2010 to Mar 2012	46	21	Adu lts (> 18 y)	Patients who had been administered colistin but were not confirmed as having ColsA infections were excluded	52.5 ± 19.5	15.9 ± 12.1	31/ 15	Colisti n	4.5 MIU Q8H	13 ± 5.8	RIFLE
Tigen, et al., 2016 [79]	Pros pecti ve coho rt	Turk ey (singl e centr e)	Sep 2010 to Apr 2012	55	22	Adu lts (> 18 y)	Colistin < 72 h; RRT at baseline	51 (medi an)	19.3 ± 6.8	37/ 18	CMS	2.5 - 5 mg/kg/d ay	11.9 ± 7.0	RIFLE

Tumba rello, et al., 2013 [80]	Retr ospe ctive coho rt	Italy (singl e) e)	Jan 1st, 2005 to Dec 31th, 2012	208	49	Adu lts (> 18 y)	Colistin < 72 h	63.5 ± 21.1	NR	132 /76	CMS	7.2 ± 2.5 MIU/day	9.5 ± 7.0	2-fold increase in SCr, 50% decrease in GFR or urine output < 0.5 mL/kg/h for $\geq 12h$
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Turko glu, et al., 2012 [81]	Case control	Turkey (single center)	Dec 2008 to Jun 2010	55	13	Adu lts (> 18 y)	Colistin < 1 day; CRF at baseline	63.7 ± 17.6	22.9 ± 6.0	23/32	Colistin	2.5 - 7.5 mg/kg/day	NR	SCr \geq 2 mg/dL (1.5-fold increase) SCr in patients with baseline SCr \geq 1.2 mg/dL), 50% decrease in CrCL or RRT
Vazin, et al., 2020 [82]	Prospective cohort	Iran (2 centers)	Nov 2016 to Dec 2017	33	6	Adu lts (> 18 y)	Colistin < one week	51.8 ± 20.9	22.0 ± 5.6	27/6	Colistin	5.69 ± 2.69 MIU/day	7.3 ± 3.68	RIFLE

Zalts, et al., 2016 [83]	Retr ospe ctive coho rt	Israel (singl e centr e)	Jan 1st, 2008 to Dec 31th, 2009	66	1	Adu lts(> 18 y)	Treatment days	<3	56.7 ± 20.4	17.8 ± 7.2	45/ 21	Colisti n	2 MU CBA Q8H	NR	Need for haemodialy sis
Katip, et al., 2021 [84]	Retr ospe ctive coho rt	Thail and (singl e centr e)	Jan 2012 to Aug 2017	383	18 7	Adu lts (> 18 y)	Incomplete records		Non-L D CMS: 66.15 ± 16.08	13.57± 4.03 LD CMS: 12.69 ± 4.22	144 /23 9	CMS	150 mg CBA Q12H	NR	RIFLE

Feng, et al, 2021 [85]	Retr ospe ctive coho rt	Taiw an (singl e centr e)	Jan 2016 to Oct 2018	195	97	Adu lts (> 20 y)	End-stage renal disease; dialysis	$73.8 \pm$ 13.5	24 (19–30)	138 /57	CMS	8 (4–10)/da y	MIU (4–10)/da y	7 (4–12)	KDIGO
Ye, et al, 2022 [86]	Retr ospe ctive coho rt	Chin a (singl e centr e)	May 2019 to Jan 2021	62	28	Adu lts (> 18 y)	Severe renal dysfunction	$65.2 \pm$ 13.8	$24.2 \pm$ 7.1	34/ 28	PMB	NR	11 (6–17.3)	RIFLE	

Gulen, et al, 2022 [87]	Retr ospe ctive coho rt	Turk ey (singl e cohor t)	Jan 1st, 2012 to Dec 31th, 2019	170	10 6	Adu lts 18 y)	Treatment <72 h; Acute and chronic renal failure	73 (range , 18-95)	Nephro toxic ity : 25.17± 6.8 Non-n ephro toxicit y:21.9 4±7.85	CMS	NR	NR	RIFLE
Chang, et al, 2022 [88]	Retr ospe ctive coho rt	Chin a (14 coh ort es)	Jan 2018 to May 2020	220	80	Adu lts 18 y)	Died within 48 h of polymyxin B	NR	NR	NR	PMB	NR	KDIGO

Wang, et al, 2022 [89]	Retrospective cohort study	Taiwan	Jan 2016 to Dec 2016	110	58	Adu lts (> 20 y)	age < 20 years, community-acquired pneumonia or healthcare-associated pneumonia, concomitant lung cancer with obstructive pneumonitis, CRGNB that were resistant to colistin, and no intravenous colistin prescribed within 7 days of the index date for pneumonia	NR	NR	NR	CMS	NR	NR	KDIGO

Note: ABW, actual body weight; AKI, acute kidney injury; AKIN, Acute Kidney Injury Network; APACHE II, Acute Physiology and Chronic Health Evaluation II; BID, twice daily; CBA, Colistin base activity; CKD, Chronic kidney disease; CMS, Colistin methane sulfonate; CrCL, Creatinine clearance; CRF, Chronic renal failure; CRGNB: Carbapenem-resistant gram-negative bacteria; IBW, Ideal body weight; ICU, intensive care unit; KIDGO, Kidney Disease Improving Global Outcomes; LD: Loading dose; MIU, Million international units; NR, Not reported; PMB, Polymyxin B; RIFLE, Risk, Injury, Failure, Loss of kidney function, and End-stage kidney disease; RRT, renal replacement therapy; Scr, Serum creatinine; TID, Three times daily.

Supplementary Table 3 Risk of bias for studies

A. Risk of bias for cohort studies using Newcastle Ottawa Scale assessment for cohort studies

Study	Selection				Comparability	Outcome			Comments (High/ Fair/L ow)	Total score
	1. Representativ e of the exposed cohort:	2. Selection of the non-expose d cohort	3. Ascertain ment of exposure	4. Demonstrati on that outcome of interest was not present at the start of study		1. Comparability of cohorts on the basis of the design or analysis	1. Assessm ent of the outcome:	2. Was follow-u p long enough for outcom es to occur?		
	a) Truly representativ e*	a) Drawn from the same community as the exposed cohort*	a) Secure record*	a) Yes*	a) Study controls for the most important factor*	a) Indepen dent blind assessme nt*	a) Yes*	a) Complete follow up		
	b) Somewhat representativ	b) Drawn from a	b) Structured	b) No	b) Study controls for any	b) Record	b) No	b) Subjects		

	e of the average in the community*	different source	interview*		additional factor*	linkage*		lost to follow up unlikely to introduce bias*		
c) Selected group of users	c) No description of the derivation of the non-exposed cohort	c) Written self-report		c) Cohorts are not comparable on the basis of the design or analysis controlled for confounders	c) Self report		c) Follow up rate < 80% and no description			
d) No description of the derivation of the cohort		d) No description			d) No description		d) No statement			
Aggarwal, et al.,	*	*	*	*	*	*	Unclear	No statement	6	Fair

2018 [3]										
Aitullin a, et al., 2019 [4]	*	*	*	No	No	*	Unclear	No statement	4	Low
Aitullin a, et al., 2021 [5]	*	*	*	*	*	*	*	*	8	High
Akajagb or, et al., 2013 [6]	*	*	*	*	*	*	unclear	No statement	6	Fair
Almutai ry, et al., 2020 [7]	*	*	*	*	*	*	*	*	8	High
Alp, et al., 2017 [8]	*	*	*	*	*	*	*	No statement	7	Fair
Asan, et al., 2020 [9]	*	*	*	*	*	*	Unclear	No statement	6	Fair
Aydoğ'a	*	*	*	No	**	*	Unclear	No	6	Fair

n, et al., 2018 [10]								statement		
Bassetti, et al., 2008 [11]	*	*	*	No	*	*	Unclear	No statement	5	Fair
Bilgili, et al., 2016 [13]	*	*	*	*	**	*	*	No statement	8	High
Binh, et al., 2015 [14]	*	*	*	No	**	*	*	*	8	High
Choe, et al., 2019 [15]	*	*	*	*	*	*	Unclear	No statement	6	Fair
Chuang, et al., 2014	*	*	*	*	**	*	Unclear	No statement	7	Fair

[16]										
Çiftçi, et al., 2017 [17]	*	*	*	*	No	*	Unclear	No statement	5	Fair
Dalfino, et al., 2012 [18]	*	*	*	No	**	*	*	*	8	High
Dalfino, et al., 2015 [19]	*	*	*	*	**	*	*	*	9	High
De Leon-Bo rras, et al., 2019 [20]	*	*	*	No	No	*	Unclear	No statement	4	Low
Dewan, et al., 2014	*	*	*	*	No	*	*	*	7	Fair

[18]										
Doshi, et al., 2011 [19]	*	*	*	*	**	*	*	No statement	8	High
Elefritz, et al., 2017 [26]	*	*	*	*	*	*	*	No statement	7	Fair
Garnacho-Monte ro, et al., 2003 [27]	*	*	*	No	**	*	*	*	8	High
Garnacho-Monte ro, et al., 2013 [28]	*	*	*	*	*	*	*	*	8	High
Gounde	*	*	*	*	No	*	Unclear	No	5	Fair

n, et al., 2009 [29]								statement		
Gregoire, et al., 2014 [30]	*	*	*	*	No	*	*	*	7	Fair
Gunay, et al., 2020 [31]	*	*	*	*	*	*	*	No statement	7	Fair
Holloway, et al., 2006 [33]	*	*	*	No	No	*	unclear	No statement	4	Low
Inci, et al., 2018 [34]	*	*	*	*	*	*	*	No statement	7	Fair
Jang, et al., 2017	*	*	*	No	No	*	*	*	6	Fair

[35]										
John, et al., 2018 [36]	*	*	*	*	*	*	*	*	8	High
Jung, et al., 2019 [37]	*	*	*	*	*	*		Unclear No statement	6	Fair
Kalin, et al., 2012 [38]	*	*	*	No	**	*	*	*	8	High
Kalin, et al., 2014 [39]	*	*	*	No	*	*	*	*	7	Fair
Kallel, et al., 2006 [40]	*	*	*	*	No	*		Unclear No statement	5	Fair
Kara, et al., 2015 [42]	*	*	*	No	*	*	*	*	7	Fair

Katip, et al., 2020 [43]	*	*	*	No	**	*	Unclear	No statement	6	Fair
Katip, et al., 2021 [44]	*	*	*	No	**	*	Unclear	No statement	6	Fair
Kim, et al., 2016 [46]	*	*	*	No	*	*	Unclear	No statement	5	Fair
Kim, et al., 2017 [47]	*	*	*	No	**	*	Unclear	No statement	6	Fair
Kwon, et al., 2014 [49]	*	*	*	No	*	*	*	*	7	Fair
Lambias e, et al., 2012 [50]	*	*	*	No	No	*	Unclear	No statement	4	Low

Li, et al., 2020 [51]	*	*	*	*	**	*	*	*	9	High
Lodise, et al., 2018 [52]	*	*	*	*	No	No descripti on	unclear	No statement	4	Low
Markou, et al., 2003 [54]	*	*	No description	No	No	No descripti on	*	*	4	Low
Michalo poulos, et al., 2005 [55]	*	*	*	No	*	*	Unclear	No statement	5	Fair
Moghad am, et al., 2018 [56]	*	*	*	*	*	*	Unclear	No statement	6	Fair

Nandha, et al., 2013 [58]	*	*	*	*	*	*	Unclear	No statement	6	Fair
Nazer, et al., 2015 [59]	*	*	*	No	*	*	*	*	7	Fair
Ozel, et al., 2019 [60]	*	*	*	*	**	*	*	*	9	High
Özkarak aş, et al., 2017 [61]	*	*	*	*	**	*	*	No statement	8	High
Papadi mitriou- Olivgeri s, et al., 2019	*	*	*	*	**	*	Unclear	No statement	7	Fair

[62]										
Petrosillo, et al., 2014 [63]	*	*	*	No	*	*	unclear	No statement	5	Fair
Porwal, et al., 2014 [64]	*	*	*	No	No	No description	Unclear	No statement	3	Low
Quintanilha, et al., 2019 [66]	*	*	*	No	*	*	*	*	7	Fair
Ramasubbani, et al., 2008 [67]	*	*	*	No	No	*	Unclear	No statement	4	Low
Rashizal, et al., 2017	*	*	*	No	No	*	*	No statement	5	Fair

[68]										
Reina, et al., 2005 [69]	*	*	*	*	*	*	Unclear	No statement	6	Fair
Rigatto, et al., 2015 [70]	*	*	*	*	**	*	*	*	9	High
Rigatto et al., 2016 [71]	*	*	*	*	**	*	*	*	9	High
Rocco, et al., 2013 [72]	*	*	*	*	**	*	Unclear	no statement	7	Fair
Şahin, et al., 2019 [73]	*	*	*	No	*	*	Unclear	No statement	5	Fair
Salahud	*	*	*	*	*	*	*	No	7	Fair

din, et al., 2017 [74]								statement		
Sekhri, et al., 2013 [75]	*	*	*	*	No	*	*	*	7	Fair
Soares, et al., 2017 [76]	*	*	*	*	No	*	Unclear	No statement	5	Fair
Tanita, et al., 2013 [77]	*	*	*	*	**	*	Unclear	No statement	7	Fair
Tigen, et al., 2013 [78]	*	*	*	No	No	*	Unclear	No statement	4	Low
Tigen, et al., 2016	*	*	*	*	*	*	*	No statement	7	Fair

[79]										
Tumbar ello, et al., 2013 [80]	*	*	*	No	*	*	Unclear	No statement	5	Fair
Vazin, et al., 2020 [82]	No	*	*	*	*	*	Unclear	No statement	5	Fair
Zalts, et al., 2016 [83]	*	*	*	No	No	*	Unclear	No statement	4	Low
Katip, et al., 2021 [84]	*	*	*	No	No	*	Unclear	No statement	4	Low
Feng, et al, 2021 [85]	*	*	*	*	**	*	*	No statement	8	High
Ye, et al, 2022	*	*	*	*	*	*	*	No statement	7	Fair

[86]										
Gulen, et al, 2022 [87]	*	*	*	*	*	*	Unclear	No statement	6	Fair
Chang, et al, 2022 [88]	*	*	*	*	*	*	*	No statement	7	Fair
Wang, et al, 2022 [89]	*	*	*	No	*	*	Unclear	No statement	5	Fair

Note: Articles that scored ≤ 4 were classified as low methodological quality, articles with score between 5 and 7 were classified as fair quality, and those with score ≥ 8 were classified as high quality.

B. Risk of bias for case control studies using Newcastle Ottawa Scale assessment

Study	Selection				Comparability	Exposure			Total score	Comments (High/Fair/Low)
	1. Is the case definition adequate?	2. Representativeness of the cases	3. Selection of controls	4. Definition of controls		1. Comparability of cohorts on the basis of the design or analysis	1. Ascertainment of exposure	2. Same method of ascertainment for cases and controls		
	a) yes, with independent validation*	a) consecutive or obviously representative series of cases*	a) community controls*	a) no history of disease (endpoint)*	a) Study controls for the most important factor (select one)*	a) secure record (eg surgical records)*	a) yes*	a) same rate for both groups*		

	b) yes, e.g., record linkage or based on self reports	b) potential for selection biases or not stated	b) hospital controls	b) no descrip tion of source	b) Study controls for any additional factor*	b) structured interview where blind to case/contr ol status*	b) no	b) non responden ts described	
	c) no descripti on			c) no descript ion	c) Cohorts are not comparabl e on the basis of the design or analysis controlled for confounde rs	c) interview not blinded to case/contr ol status		c) rate different and no designatio n	
						d) written self report			

						or medical record only				
						e) no description				
Demirdal, et al., 2016 [21]	*	*	*	No	**	*	*	Unclear	7	Fair
Heybeli, et al., 2020 [32]	*	*	*	*	*	*	*	Unclear	7	Fair
Kallel, et al., 2007 [41]	*	*	*	*	*	*	*	*	8	High
Kofteri	*	*	*	No	*	*	*	*	7	Fair

dis, et al., 2010 [48]										
Turkoglu, et al., 2012 [81]	*	*	*	No	*	*	*	Unclear	6	Fair

Note: Articles that scored ≤ 4 were classified as low methodological quality, articles with score between 5 and 7 were classified as fair quality, and those with score ≥ 8 were classified as high quality.

C. Risk of bias for randomized controlled trials using Cochrane risk of bias tool assessment

Study	Was the allocation sequence adequately generated?	Was the concealment of treatment allocation adequate?	Was knowledge of the allocated intervention adequately prevented from	Was knowledge of the allocated intervention adequately prevented from	Were incomplete outcome data adequately addressed?	Are reports of the study free of suggestion of selective outcome reporting?	Was the study apparently free of other problems that could put it at a high risk of	Comments (High/Fair/Low)

			participants and personnel?	outcome assessors?			bias?	
Abdellatif, et al., 2016 [1]	*	Unclear	Unclear	*	*	*	*	Unclear
Abdelsalam, et al., 2018 [2]	Unclear	Unclear	Unclear	*	*	*	*	Unclear
Betrosian, et al., 2008 [11]	High	Unclear	*	*	*	*	*	High
Durante-Mangoni, et al., 2013 [24]	*	*	*	*	*	*	*	Low
Durante-Mangoni, et al., 2016 [25]	Unclear	Unclear	Unclear	*	*	*	Unclear	Unclear
Khalili, et al., 2018 [45]	*	Unclear	Unclear	*	*	*	*	Unclear
Makris, et al., 2018 [53]	Unclear	Unclear	Unclear	*	*	*	*	Unclear
Mosaed, et al.,	*	Unclear	Unclear	*	*	*	*	Unclear

2018 [57]								
Pourheida, et al., 2019 [65]	*	Unclear	Unclear	*	*	*	*	Unclear

Note: The overall risk of bias for each study was classified as high methodological quality if the risk of bias was low in all domains, unclear if the risk of bias was unclear in one or more domains and with no judgment of high risk of bias, or low quality if the risk of bias was high in one or more domains.

Supplementary Table 4 Details of potential predictors of polymyxin-induced nephrotoxicity

A. Univariate analysis for predictors of acute kidney injury (AKI)

Study	Variables	OR/HR/R R	Effect (95% CI)
Abdellatif, et al., 2016 [1]	Concoamitant nephrotoxic agents (aminoglycosides, glycopeptides and iodinated contrast agents)	OR	2.79 (1.23-6.32)
Aggarwal, et al., 2018 [3]	Age≥65 years	OR	1.64 (0.58-4.65)
	APACHE II ≥ 20	OR	0.39 (0.13-1.11)
	Baseline creatinine clearance < 50 ml/min	OR	0.16 (0.05-0.53)
	BMI≥ 30	OR	0.92 (0.31-2.73)
	Daily dose ≥300 mg/day	OR	6.56 (2.1-20.52)
	Diabetes mellitus (yes)	OR	0.8 (0.29-2.24)
Bilgili, et al., 2016 [13]	Septic shock	OR	8.580 (1.868-39.417)
Choe, et al., 2019 [15]	Aerosolized colistin	OR	1.775 (0.756-4.168)
	Age (year)	OR	1.023 (0.995-1.051)
	Colistin dose (mg/kg/day)	OR	0.996 (0.992-1.001)
	Colistin duration (days)	OR	1.065 (1.004-1.129)
	Concomitant vancomycin	OR	2.631 (1.241-5.576)
	Gender (male)	OR	1.675 (0.76-3.691)
Heybeli, et al., 2020 [32]	Age (per 10 years)	OR	1.41 (1.11-1.79)
	Baseline eGFR (per 10ml/min)	OR	0.89 (0.82-0.97)
	Furosemide treatment	OR	2.29 (1.08-4.84)

	Gender (female)	OR	1.85 (0.86-3.96)
	Glucocorticoid treatment	OR	0.23 (0.1-0.53)
	Proton-pump inhibitor use	OR	3.21 (1.37-7.54)
Ozel, et al., 2019 [60]	30 day mortality	OR	1.598 (0.57-4.474)
	Age (years)	OR	1.036 (1.005-1.067)
	APACHE II score	OR	0.988 (0.921-1.06)
	Baseline creatinine (mg/dL)	OR	0.448 (0.201-0.998)
	Chronic kidney disease	OR	1.375 (0.457-4.137)
	Colistin dose (CBA, mg/kg/day)	OR	0.948 (0.721-1.246)
	Colistin treatment duration (days)	OR	1.001 (0.888-1.129)
	Comorbidities ≥ 2	OR	3.245 (1.115-9.45)
	Concomitant daptomycin	OR	1.393 (0.215-9.011)
	Concomitant diuretic and vasopressor	OR	2.293 (1.006-8.494)
	Concomitant imipenem	OR	1.104 (0.296-4.112)
	Concomitant linezolid	OR	0.893 (0.165-4.833)
	Concomitant meropenem	OR	0.521 (0.183-1.482)
	Concomitant sulbactam	OR	1.882 (0.545-6.501)
	Diabetes	OR	1.603 (0.346-7.423)
	Gender (male)	OR	1.482 (0.52-4.227)
	Hypertension	OR	4.941 (1.383-17.649)
	ICU stay during colistin administration (days)	OR	1.019 (0.96-1.083)
	Receipt of > 2 concomitant nephrotoxins	OR	0.763 (0.409-3.384)
	Sepsis or septic shock	OR	1.176 (0.409-3.384)

	Serum albumin ≤ 2 mg/dL	OR	1.882 (0.545-6.501)
	The number of days that estimated target plasma concentrations of colistin were ≥ 3.5 mg/L during therapy	OR	1.577 (1.138-2.187)
	The number of days that estimated target plasma concentrations of colistin were ≥ 3.5 mg/L in the first week of therapy	OR	1.788 (1.137-2.811)
	Total iv and inhaled colistin dose (CBA, mg/day)	OR	1 (1-1)
	Total iv colistin dose (CBA, mg/day)	OR	1 (1-1)
Özkarakaş, et al., 2017 [61]	Age (old age, 61-78)	OR	7.78 (1.91-31.73)
	Albumin (hypoalbuminemia)	OR	4.76 (1.41-16.13)
	Concomitant vasopressors	OR	6.43 (1.29-2.11)
Papadimitriou-Olivgeris, et al., 2019 [62]	Concomitant voriconazole	OR	6.8 (1-46.1)
	eGFR upon BSI onset < 60 mL/min/1.73 m ²	OR	4.6 (1.9-11.2)
	Maximum noradrenaline dose	OR	1.1 (1-1.1)
	Obesity	OR	3.2 (1.4-7.6)
	Septic shock	OR	3.9 (1.1-14.3)
Rashizal, et al., 2017 [68]	Age (years)	OR	1.01 (0.99-1.03)
	Cumulative dose (MIU)	OR	0.99 (0.98-1.02)

	Daily dose (MIU)	OR	0.87 (0.68-1.11)
	Dosing interval (BD)	OR	0.75 (0.22-2.52)
	Dosing interval (TDS)	OR	0.77 (0.26-2.32)
	Duration (days)	OR	1.03 (0.93-1.15)
	Gender (female)	OR	0.829 (0.29-2.37)
	Race (Chinese)	OR	0.30 (0.04-2.55)
	Race (Indian)	OR	0.64 (0.19-2.16)
Rocco, et al., 2013 [72]	Age (year)	OR	1.02 (1.01-1.04)
	Albumin serum levels < 2g/dL	OR	2.66 (1.32-5.37)
	Cardiovascular disease	OR	1.61 (0.89-2.9)
	Concomitant ACEI	OR	1.83 (0.89-3.78)
	Concomitant iodate contrast	OR	1.27 (0.76-2.1)
	Concomitant NSAIDs	OR	0.62 (0.35-1.1)
	Congestive heart failure	OR	1 (0.35-2.92)
	CVC related-BSI	OR	0.86 (0.48-1.55)
	Diabetes mellitus	OR	1.79 (0.58-5.47)
	Gender (female)	OR	0.63 (0.37-1.06)
	Hypertension	OR	1.68 (0.92-3.05)
	Immunocompromised status	OR	1.14 (0.63-2.05)
	Neurological disease	OR	0.47 (0.18-1.24)
	SAPS II score	OR	1.04 (1.03-1.06)
	Sepsis	OR	1.9 (1.17-3.1)
	Septic shock at infection onset	OR	7.5 (4.36-12.9)
	Total bilirubin serum	OR	2.2 (0.85-5.65)

	levels > 5 mg/dL		
	Trauma	OR	0.4 (0.22-0.7)
	Two or more comorbidities	OR	2.06 (0.9-4.72)
	VAP	OR	1.19 (0.7-2.05)
Tanita, et al., 2013 [77]	Age (years)	OR	1.003 (0.977-1.029)
	APACHE II score	OR	1.017 (0.945-1.094)
	Colistin treatment duration (days)	OR	0.94 (0.867-1.02)
	Concomitant aminoglycoside	OR	1.425 (0.122-16.579)
	Concomitant amphotericin B	OR	0.933 (0.092-9.498)
	Concomitant diuretics	OR	0.425 (0.137-1.315)
	Concomitant vancomycin	OR	1.529 (0.559-4.181)
	Concomitant vasopressors	OR	4.727 (1.255-17.802)
	Creatinine at ICU admission (mg/dl)	OR	1.071 (0.63-1.823)
	Creatinine at the beginning of treatment (mg/dl)	OR	1.949 (1.124-3.38)
	Gender (male)	OR	1.654 (0.578-4.732)
	Length of stay in the hospital (days)	OR	0.975 (0.951-0.999)
	Length of stay in the ICU (days)	OR	0.956 (0.911-1.002)
	Mechanical ventilation	OR	3.486 (0.18-67.546)
	SOFA score at ICU admission	OR	1.082 (0.93-1.258)
	SOFA score at the beginning	OR	1.467 (1.202-1.789)

	of colistin treatment		
Vazin, et al., 2020 [82]	Age (years)	OR	1.057 (0.999-1.119)
	APACHE II score	OR	0.965 (0.729-1.49)
	Baseline GFR (mL/min/1.73 m ²)	OR	0.858 (0.729-1.010)
	Colistin cumulative dose (MIU)	OR	0.985 (0.941-1.032)
	Colistin indication (%)	OR	0.88 (0.083-9.28)
	Colistin treatment duration (day)	OR	1 (0.782-1.279)
	Concomitant loop diuretics (furosemide) (%)	OR	0.07 (0.007-0.707)
	Concomitant vancomycin (%)	OR	1.6 (0.249-10.27)
	Daily dose (MIU)	OR	0.906 (0.637-1.28)
	Gender (%) - Male	OR	0.880 (0.083-9.280)
Gulen, et al., 2022 [87]	Loading dose (%)	OR	4.4 (0.68-28.6)
	Trauma	OR	0.69 (0.12-4.05)
	Age	OR	1.052 (1.030-1.075)
	Sex (female)	OR	0.422 (0.219-0.815)
	APACHE II score	OR	1.064 (1.017-1.112)
	COPD (+)	OR	0.473 (0.251-0.890)
	Initial serum creatinine (mg/dl)	OR	40.320 (6.389-254.465)
	Concomitant nephrotoxic agent use	OR	3.057 (1.598-5.849)

Note: ACEI, angiotensin converting enzyme inhibitors; APACHE II, Acute physiology and chronic health evaluation II; BD, twice daily; BMI, Body mass index; BSI,

Bloodstream infection; CBA, Colistin base activity; CI, Confidence interval; CVC, central venous catheter; GFR, Glomerular filtration rate; HR, hazard ratio; ICU, intensive care unit; MIU, million international units; NSAIDs, Non-steroidal anti-inflammatory drugs; OR, Odds ratio; RR, risk ratio; SAPS II, Simplified acute physiology score II; SOFA, Sequential organ failure assessment; TDS, Three times daily; VAP, Ventilator associated pneumonia.

B. Multivariate analysis for predictors of acute kidney injury (AKI)

Study	Variables	OR/HR/RR	Effect (95% CI)
Aitullina, et al., 2021 [5]	Carbapenem protective role	OR	0.34 (0.1-1.11)
	Colistin loading dose of 9 MIU	OR	9.57 (1.85-49.6)
Aydoğan, et al., 2018 [10]	Colistin (mg/kg/day)	RR	0.41 (0.19-0.89)
	Concomitant vasopressor	RR	13.54 (2.21-83.09)
Choe, et al., 2019 [15]	Age (years)	OR	1.031 (1.001-1.063)
	Concomitant vancomycin	OR	2.623 (1.146-6.004)
Çiftçi, et al., 2017 [17]	APACHE II score at admission	OR	1.179 (1.033-1.346)
	N-acetylcysteine dosage	OR	1.005 (0.999-1.01)
	Need for vasopressors	OR	5.486 (1.522-19.769)
Dalfino, et al., 2015 [19]	Adjuvant ascorbic acid	HR	0.27 (0.13-0.57)
	Age (years)	HR	1.03 (1-1.05)
	Baseline renal impairment	HR	4.15 (1.9-9.2)
	SOFA score	HR	1.09 (0.9-1.3)
Doshi, et al., 2011 [23]	Concomitant nephrotoxins (= 2)	OR	6.5 (1.16-36.6)
	Concomitant nephrotoxins (=1)	OR	1.77 (0.25-12.6)
Heybeli, et al., 2020 [32]	Age (per 10 years)	OR	1.41 (1.05-1.91)
	Baseline eGFR (per 10ml/min)	OR	0.96 (0.87-1.06)
	Concomitant furosemide treatment	OR	2.66 (1.01-6.98)
	Concomitant glucocorticoid	OR	0.17 (0.06-0.49)
	Concomitant proton-pump inhibitor	OR	3.3 (1.18-9.23)
John, et al., 2018 [36]	Baseline creatinine clearance (ml/min)	HR	1.01 (1.00-1.01)
	Concomitant another nephrotoxic drug	HR	2.50 (1.02-6.14)
	Concomitant vasopressor	HR	2.75 (1.17-6.43)

	Daily dose (mg/kg/day)	HR	0.78 (0.49-1.27)
Jung, et al., 2019 [37]	Use of inhaled colistin immediately prior to the initiation or after the end of systemic colistin treatment	OR	0.331 (0.119-0.925)
Ozel, et al., 2019 [60]	Age (years)	OR	1.039 (1.001-1.077)
	Creatinine at start	OR	0.197 (0.065-0.598)
	The number of days that estimated target plasma concentrations of colistin were \geq 3.5 mg/L in the first week of therapy	OR	2.362 (1.249-4.47)
Rocco, et al., 2013 [72]	Gender (female)	OR	0.62 (0.34-1.14)
	SAPS II score	OR	1.03 (1.01-1.05)
	Sepsis	OR	1.74 (0.99-3.05)
	Septic shock at infection onset	OR	5.89 (3.35-10.35)
Soares, et al., 2017 [76]	Polymyxin B dose > 10 MIU	OR	2.72 (1.13-6.51)
Tanita, et al., 2013 [77]	SOFA score at the beginning of colistin treatment	OR	1.467 (1.202-1.789)
Vazin, et al., 2020 [82]	Age (years)	OR	0.97 (0.83-1.14)
	Baseline GFR (mL/min/1.73 m ²)	OR	0.86 (0.74-1.01)
	Co-administration of loop diuretics (furosemide)	OR	0.087 (0-118.47)
Katip, et al., 2022 [84]	Loading dose colistin methanesulfonate	HR	1.70 (1.07-2.70)
	Age > 60 years	HR	2.06 (1.96-2.17)
	Male	HR	1.45 (1.29-1.63)

	Vasopressor	HR	1.22 (1.11-1.34)
	Amphotericin B	HR	1.08 (1.02-1.16)
	APACHE II score	HR	1.03 (1.01-1.04)
	Baseline GFR	HR	1.00 (1.00-1.01)
Ye, et al., 2022 [86]	Charlson comorbidity index score	OR	0.97 (0.71-1.32)
	Loop diuretic	OR	5.93 (1.03-34.07)
	Baseline creatinine clearance	OR	0.96 (0.93-0.99)
	Polymyxin B daily dose (mg/kg/day)	OR	0.99 (0.94-1.04)
Gulen, et al, 2022 [87]	Age	OR	1.043 (1.018-1.068)
	APACHE II score	OR	1.022 (0.967-1.080)
	Initial serum creatinine (mg/dl)	OR	23.122 (3.123-171.217)
	Concomitant nephrotoxic agent use	OR	2.398 (1.147-5.012)

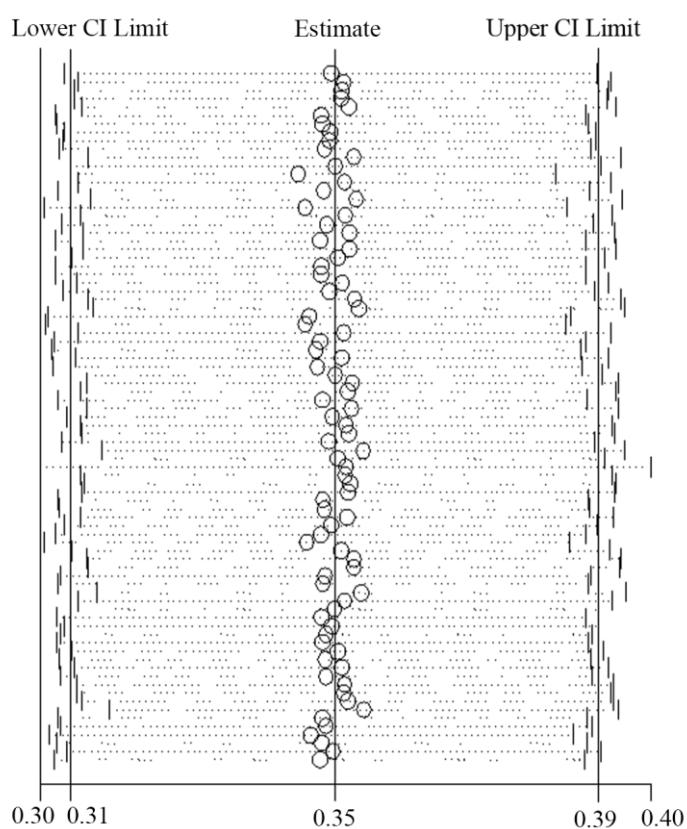
Note: APACHE II, Acute physiology and chronic health evaluation II; CI, Confidence interval; GFR, Glomerular filtration rate; HR, hazard ratio; ICU, intensive care unit; MIU, million international units; OR, Odds ratio; RR, risk ratio; SAPS II, Simplified acute physiology score II; SOFA, Sequential organ failure assessment.

Supplementary Table 5 Stratification of the degree of nephrotoxicity from all patients who developed AKI during therapy

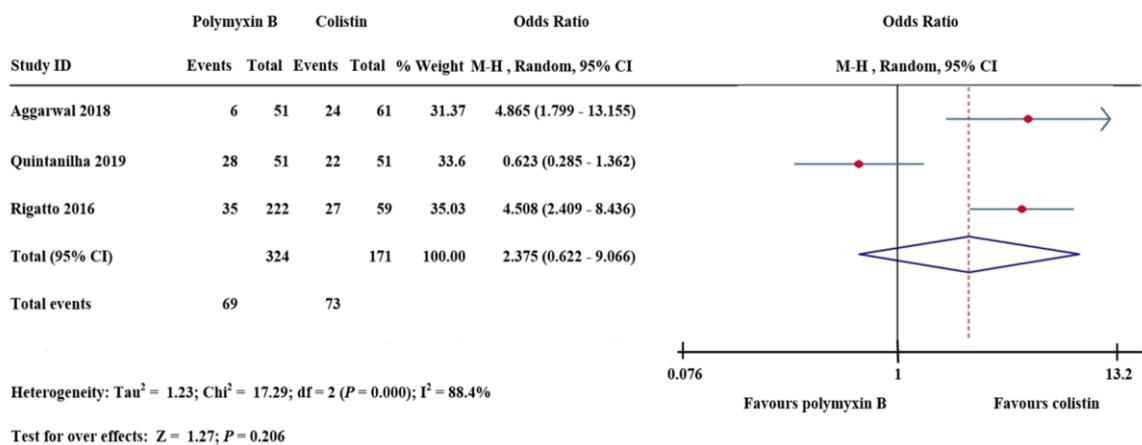
Category	Severity of AKI	No. of studies	No. of patients	Events rate (95% CI)	Model	Heterogeneity (I^2)
	Overall	56	5, 163	0.389 (0.340 - 0.438)	random	97.70%
Degree of nephrotoxicity	Severe nephrotoxicity	47		0.127 (0.103-0.150)	random	89.60%
*	Mild-moderate nephrotoxicity	49		0.258 (0.216-0.299)	random	96.80%
	Overall	25	2, 425	0.409 (0.335 - 0.482)	random	93.60%
Degree of nephrotoxicity based on RIFLE criteria	Risk	25		0.127 (0.096 - 0.158)	random	84.80%
	Injury	24		0.126 (0.100 - 0.152)	random	75.10%
	Failure	22		0.149 (0.111 - 0.186)	random	87.70%
	Loss of function	7		0.008 (0.003-0.013)	fixed	0
	End-stage	4		0.004 (0.000-0.009)	fixed	0

Note: * Severe nephrotoxicity defined as RIFLE grade of ' failure ' or above, AKIN grade of 3 or KDIGO grade of 3 or required renal replacement therapy.

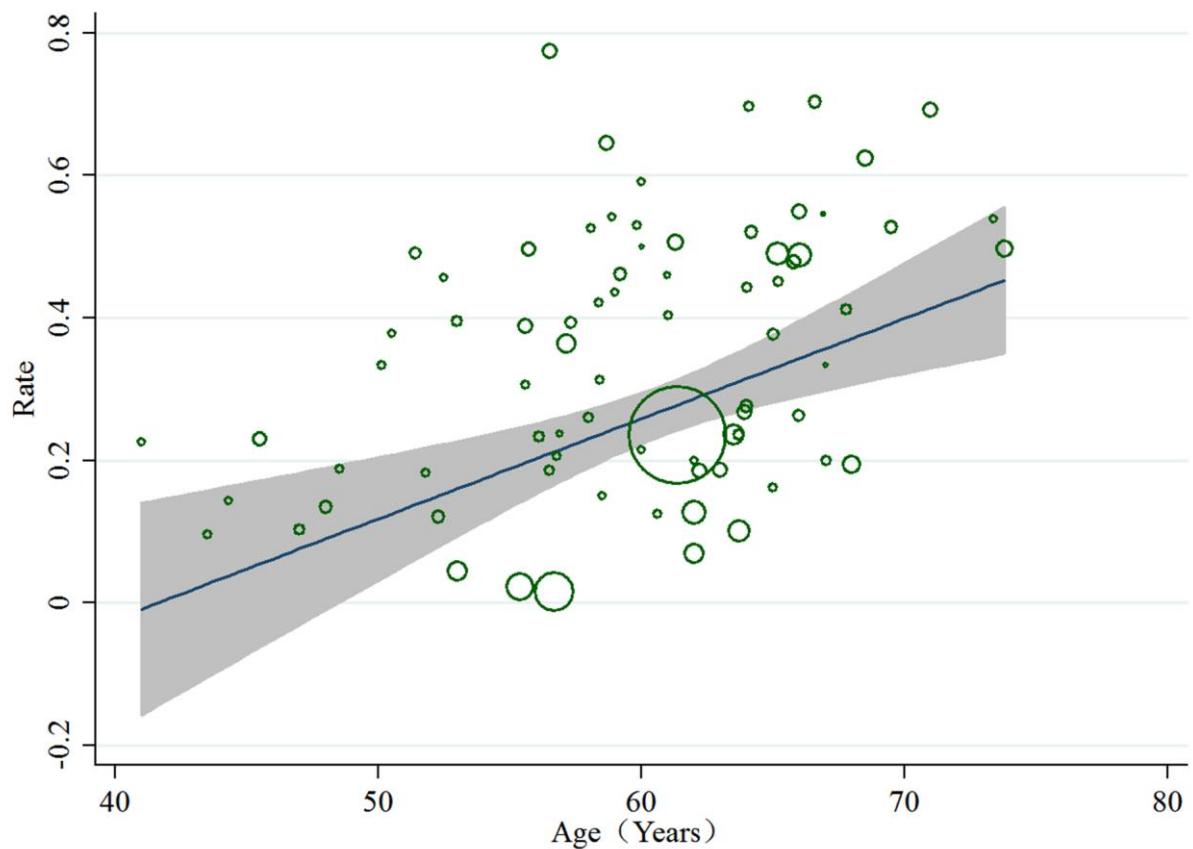
Meta-analysis estimates, given named study is omitted



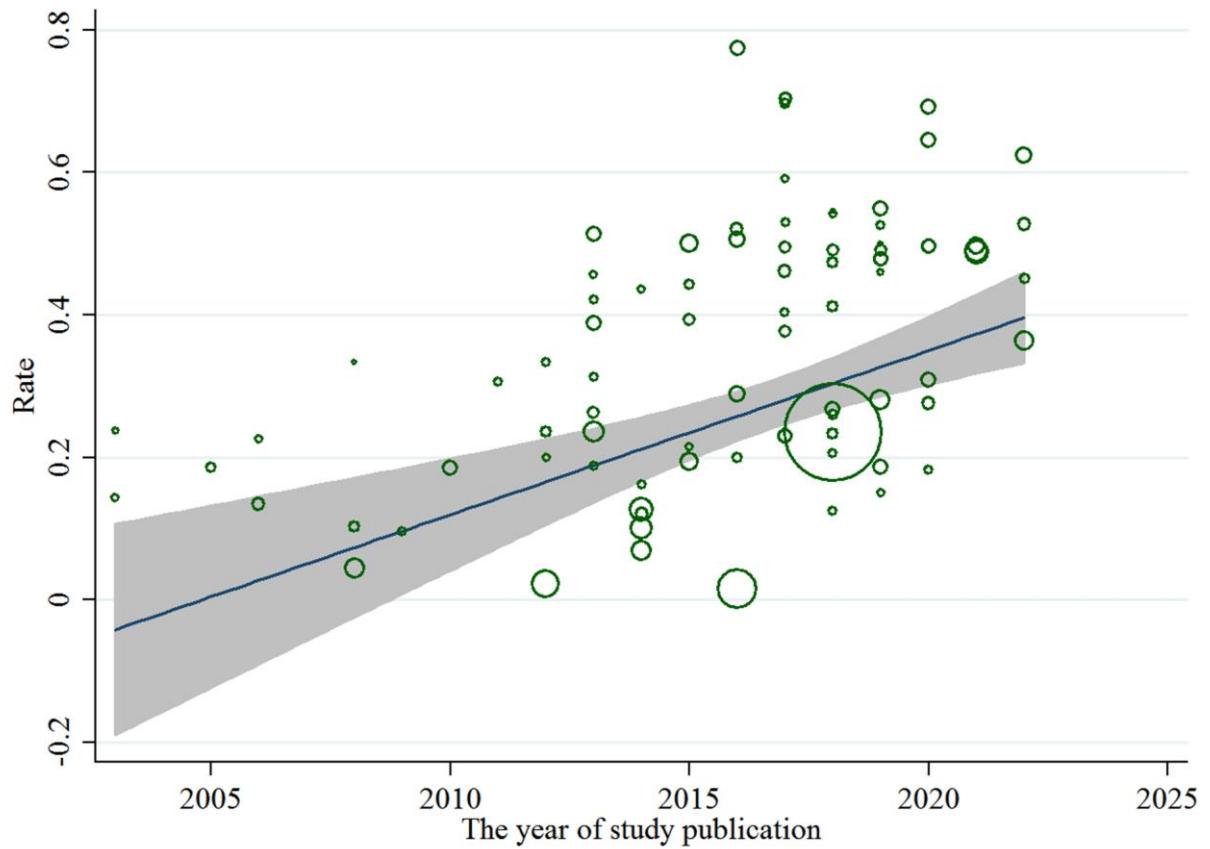
Supplementary Figure 1 Sensitivity analysis for pooled incidence of polymyxin-induced nephrotoxicity using a random-effects model by omitting one study at a time and pooling the rest of the included studies.



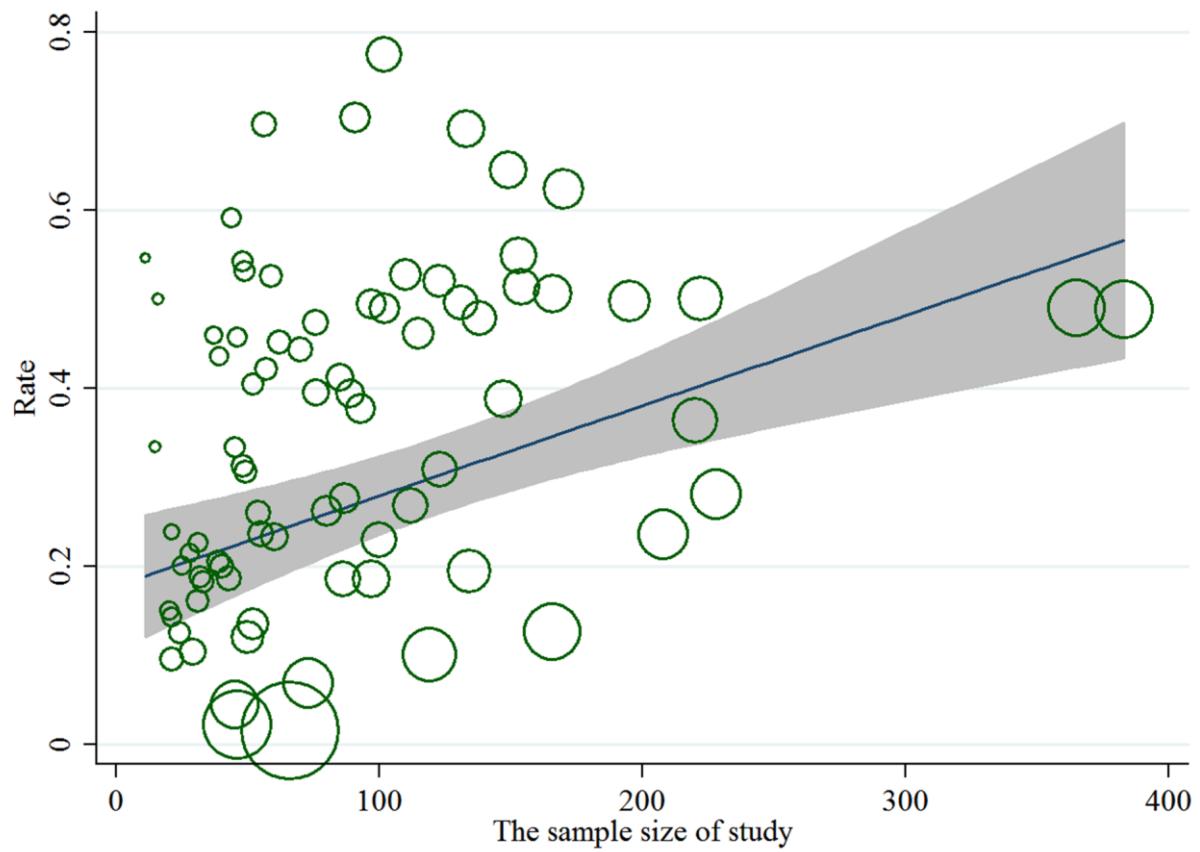
Supplementary Figure 2 Forest plot of nephrotoxicity rates in patients receiving colistin compared to patients receiving polymyxin B



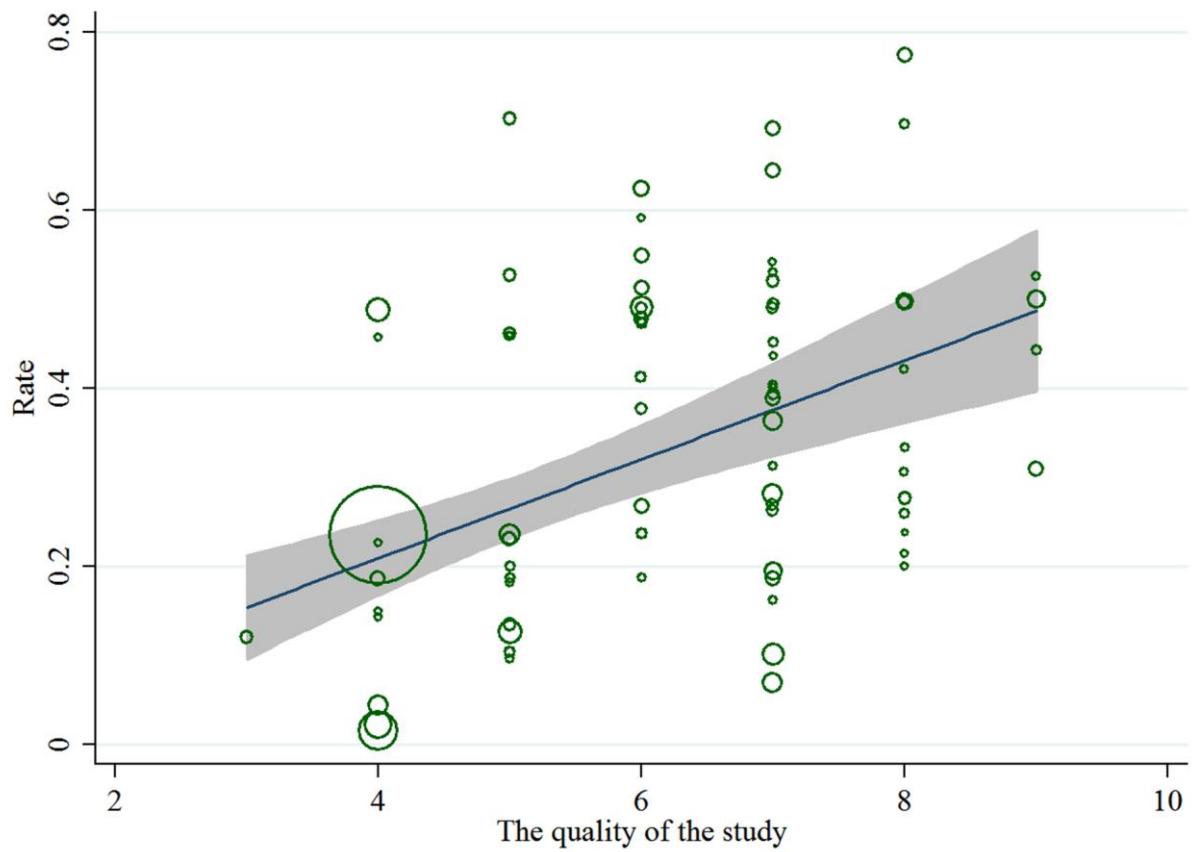
Supplementary Figure 3 Univariate meta-regression analysis for polymyxin-induced nephrotoxicity rate according to mean or medium age



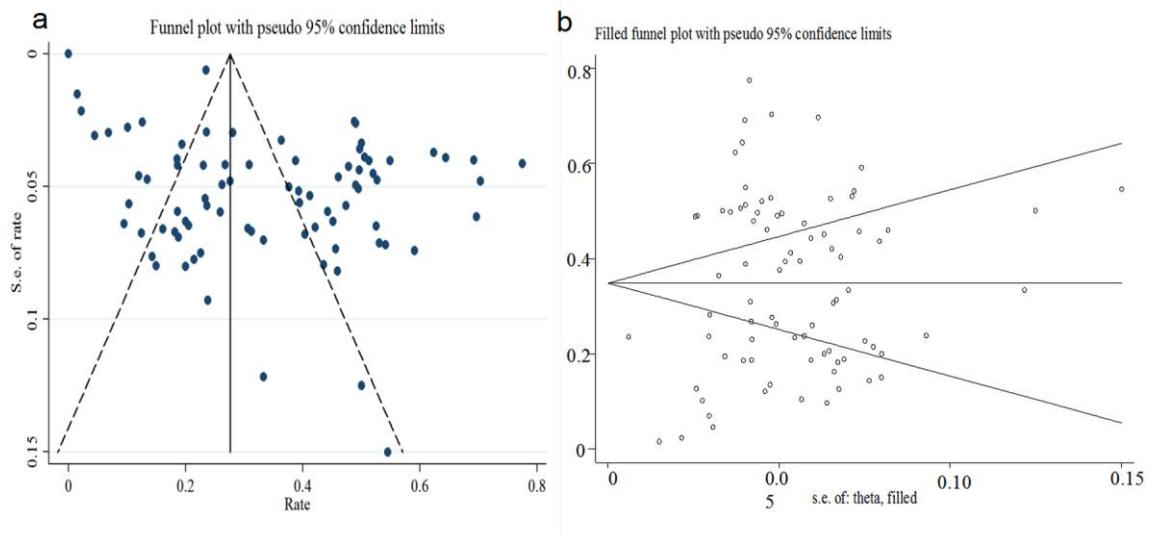
Supplementary Figure 4 Univariate meta-regression analysis for polymyxin-induced nephrotoxicity rate according to the year of study publication



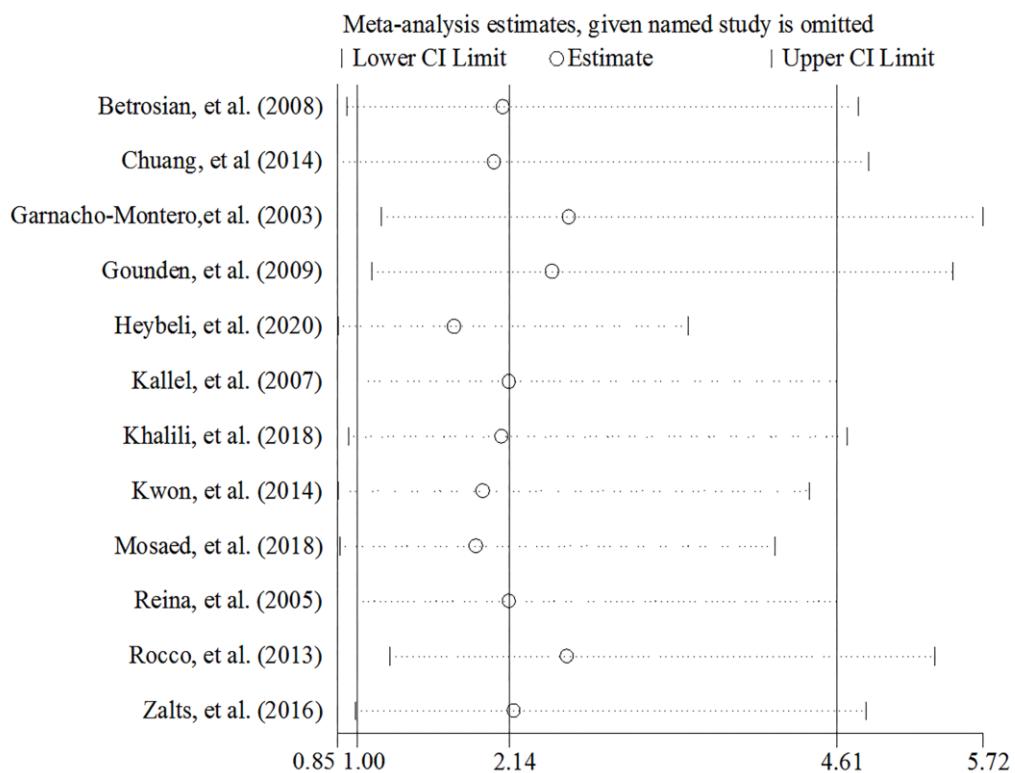
Supplementary Figure 5 Univariate meta-regression analysis for polymyxin-induced nephrotoxicity rate according to the sample size of study



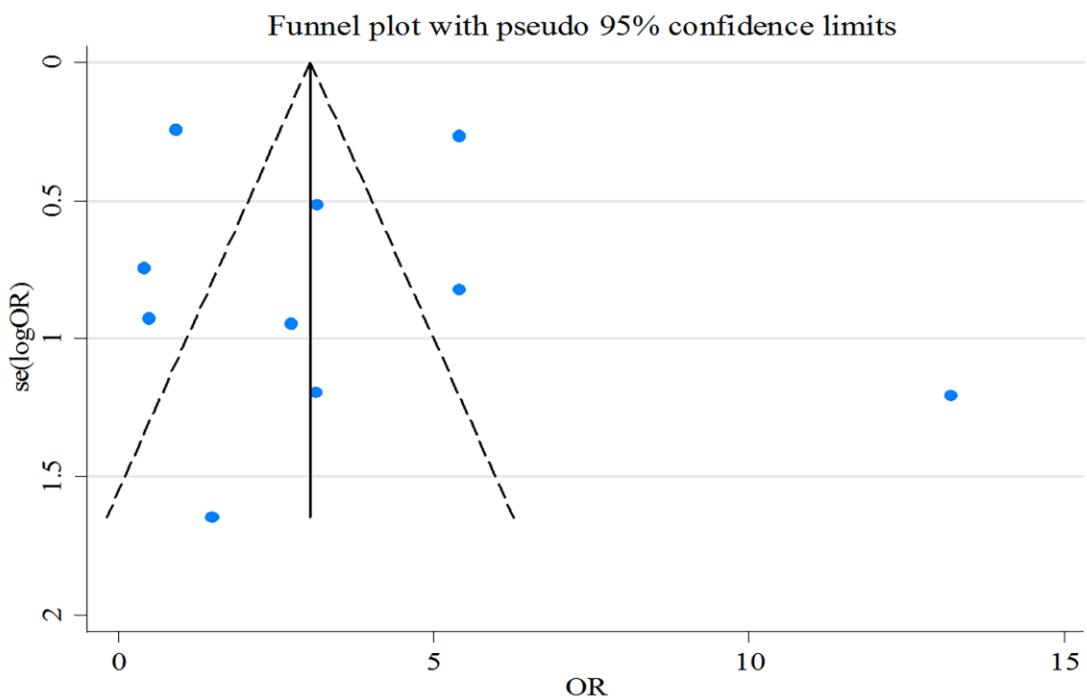
Supplementary Figure 6 Univariate meta-regression analysis for polymyxin-induced nephrotoxicity rate according to the quality of study



Supplementary Figure 7 Publication biases in polymyxin-induced nephrotoxicity incidence



Supplementary Figure 8 Meta-influence analysis of polymyxin-induced nephrotoxicity rates in patients treated with polymyxins compared to patients treated with other regimens



Supplementary Figure 9 Funnel plots depicting publication biases in odd ratio of patients treated with polymyxins versus patients treated with other regimens

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