

Table 3. Description of the populations included in each study, the variables studied and possible biases.

ARTICLE	REACHES SUFFICIENT SAMPLE SIZE TO MAKE INFERENCE	STUDIED POPULATION	OVERWEIGHT INTERVENTION (%)	CONTROL OVERWEIGHT (%)	MAIN VARIABLE	ADDITIONAL INTERVENTION TO TREATMENT	POTENTIAL CONFLICT OF INTEREST	POSSIBLE LIMITATIONS OF THE STUDY			THEY SUSPEND TREATMENT DURING FOLLOW-UP	POTENTIAL CONFOUNDERS
SCALE, 2015	No	80% White women, middle age: 41 to 48 years, obesity II	2.7	3.5	Surrogate: weight change	Lifestyle intervention: nutritional counseling and physical activity	Sponsored pharmaceutical industry	Missing values were imputed using the last observation carried forward method for measurements taken after baseline.	Results are presented only if an effect was demonstrated.		Intervention 28% and control 35.6%	Includes overweight women without stratifying.
STEP-1, 2021	No	74% Non-Hispanic or Latino white women, average 45 years old, obesity II	6.2	5.5	Surrogate: weight loss of >5%/ % weight change	Lifestyle intervention: nutritional counseling and physical activity	Directed and sponsored pharmaceutical industry	Comparison of groups: lack of hormones, treatments, countries; results: how many patients finish with 1/2 dose.	The sample size has not been calculated for the study of changes in body composition using absorpmetry, it is a secondary variable.		Intervention 18.9% and control 27.2%	Includes overweight women without stratifying.
STEP-3, 2021	No	81% Non-Hispanic or Latino white women, average 45 years old, obesity II	5.7	7.4	Surrogate: weight loss of >5%/ % weight change	Lifestyle intervention: nutritional counseling (intensive diet) and physical activity. In addition to behavioral therapy	Directed and sponsored pharmaceutical industry	Comparison of groups: missing hormones, endocrine pathology, treatments, additional diet and behavioral intervention. “similar to an intention-to-treat analysis”			Intervention 17.9% and control 18.6%	Includes overweight women without stratifying.
STEP-5, 2022	No	78% White women, average 47 years old, obesity II	Does not appear	Does not appear	Surrogate: weight loss of >5%/ % weight change	Lifestyle intervention: nutritional counseling and physical activity	Sponsored pharmaceutical industry	Missing values were imputed using the average treatment effect for the treatment period across all participants.		They change the scales on the adverse effects graphs so that they seem almost imperceptible when they are reaching 82% of people treated with semaglutide.	Intervention 23.68% and control 38.82%	Includes overweight women without stratifying.
SURMOUNT-3, 2023	No, they need 300 in each group for a statistical power of 90%	63% White women, average 46 years old, obesity II*	5.7	7.4	Surrogate: weight loss of >5%/ % weight change	Intensive lifestyle intervention: nutritional counseling and physical activity	The sponsor (Eli Lilly) contributed to the study design, supervised the conduct of the study, and provided medical writing and editorial support for this article.	Randomization is after intensive lifestyle treatment, after which 227 patients who could be the least motivated are lost.	Missing data will be imputed using all non-missing data from the primary outcome measurement from the same treatment arm	The dose achieved may be 10 or 15 mg, but it is not specified or stratified by this variable.	Intervention 21.3% and control 30.5%	Includes overweight women without stratifying.
WEIGHT RECOVERY TRIALS												
STEP-4, 2021	No	79% Mujeres blancas, media 46 años, obesidad II	2.7		Surrogate: weight change	Lifestyle intervention: nutritional counseling and physical activity	Sponsored pharmaceutical industry	Missing values were imputed using the average treatment effect for the treatment period across all participants.			Intervention 7.29% and control 11.94%	Includes overweight women without stratifying.
SURMOUNT-4, 2024	No, they need 300 in each group for a statistical power of 90%	71% White women, average 48 years old, obesity II*	2.7		Surrogate: weight % change	Intensive lifestyle intervention: nutritional counseling and physical activity	The sponsor (Eli Lilly) designed and supervised the conduct of the trial; Trial site investigators were responsible for data collection and the sponsor conducted site monitoring, data collection, and analysis.	Until week 36, everyone received a dose of treatment, so the side effects of the placebo group can be difficult to differentiate if they are not really a side effect of the previous treatment.	The mean treatment effect of tirzepatide relative to placebo is calculated for all participants who had undergone randomization, regardless of treatment adherence.	The dose achieved may be 10 or 15 mg, but it is not specified or stratified by this variable.	Intervention 10.45% and control 17.91%	Includes overweight women without stratifying.
HEAD TO HEAD WEIGHT TRIALS												
STEP-8, 2022	No	79% White women, average 46 years old, obesity II	7.1	8.7 lira; 4.7 placebo	Surrogate: weight % change	Lifestyle intervention: nutritional counseling and physical activity	Directed and sponsored pharmaceutical industry	Sema reduces dose if necessary and with lira withdraws if side effects.	A multiple imputation approach 16 was used in which missing data were imputed by sampling measurements available at week 68 from participants in the same treatment group and with the same treatment completion status.	Percentages not absolute values and the same importance to the main variable as to secondary variables.	Intervention: 13.5% and 27.6% and control: 17.6%	Includes overweight women without stratifying.
CLINICAL OUTCOME TRIALS												
SELECT, 2023	No	72% White men, average 62 years, obesity I AMI	29	28.1	Added: cardiovascular death, heart attack and stroke	Standard care	Directed and sponsored pharmaceutical industry	Ends the study at 34 weeks (overestimates results and minimizes adverse effects).	Permanent termination of the trial early due to adverse events.	Added variable neurological adverse effects: central and peripheral, unspecified.	Intervention 30.8% and control 24.3%	Includes unstratified overweight men.