Lead author (date)	Outcome measures	Comparison of findings in AAF-Syn vs AAF groups	Statistical comparison	Conclusions
Harvey (2014) [38]	Primary outcome was	All infants had negative responses to both DBPCCFC	95% confidence that at least	The results of this study demonstrate "the
	hypoallergenicity	(detailed data not given).	90% of infants and children	hypoallergenicity of [AAF-Syn] in infants and
			with CMPA would have no	children with documented [CMPA]."
			reaction to AAF-Syn.	
Burks (2015) [39]	Secondary outcomes	SCORAD decreased in both groups. No significant	Symptom outcomes	" SCORAD and allergy symptoms were not
	included SCORAD,	difference between groups.	described as non-	different between study groups, indicating the
	categorical measures of	Allergy severity scores decreased in both groups. No	significant.	synbiotics-supplemented AAF is equally
	allergic symptoms and	difference in flatulence between groups. Detailed data		effective in [CMPA] management as the AAF
	flatulence	not given.		without synbiotics when used for 16 weeks in
				a heterogeneous CMPA infant population"
Candy (2018) [32]	Secondary outcomes	All results AAF-Syn vs AAF, mean scores	No p-value reported for	"Overall, exploratory GI and general
ASSIGN study	included SCORAD, parent	- SCORAD change from week 0 to 8 was 12.83 to	SCORAD. Clinical	symptoms improved over time, but were not
	ordinal rating scales (1-4) for	9.63 vs 14.43 to 7.06 No significant differences in symptom scores reported although detailed data not presented	symptom score changes	statistically significantly different between test
	skin, respiratory, GI and general symptoms		described as non-	and control groups at week 8."
			significant.	Note this trial was not primarily designed to
				look at clinical symptoms and most
				participants were already receiving an eHF or
				AAF at inclusion, which may have offered
				some symptom resolution prior to the study.
Fox (2019) [33]	Secondary outcomes	Results AAF-Syn vs AAF, median decrease in scores	No p-values reported	"Likely due to use of hypoallergenic
ASSIGN study	included SCORAD and	from week 0 to 26:		formula at baseline and associated relatively
	parent ordinal rating scales	- SCORAD: 6.0 vs 7.0		low symptoms at baseline, our analysis did
	(1-4) for skin, respiratory, GI	Symptom scores declined to lowest possible levels by		not show detectable differences in clinician-
	and general symptoms	week 26 – no difference between groups.		assessed or parent-reported clinical symptoms
				between groups"

Supplementary Table S1. Individual publication results of clinical symptoms and allergenicity in infants receiving AAF-Syn vs AAF

CMPA: Cow's milk protein allergy; AAF-Syn: amino acid formula with synbiotics; AAF: amino acid formula; GI: Gastrointestinal; SCORAD: SCORing Atopic Dermatitis; eHF: extensively hydrolysed formula; DBPCCFC: double blind placebo-controlled cross-over food challenge

Lead author (date)	Outcome measures	Comparison of findings in AAF-Syn vs AAF groups	Statistical comparison	Conclusions
Burks (2015) [39]	Secondary outcomes	No difference in stool frequency or consistency between	Significant differences	AAF-Syn was associated with significant
	included stool frequency,	groups. Post hoc analysis showed more preferred stool	between groups in stool	differences in stool colour in infants with
	colour and consistency	colour with AAF-Syn vs AAF:	colour.	CMPA.
		 At week 0-2 (p = 0.014) At week 2-4 (p = 0.010) At week 4-12 (p = 0.008) Detailed data not given. 		
Candy (2018) [32]	Secondary outcomes	Mean stool frequency scores for AAF-Syn vs AAF at week	Trend towards reduced	AAF-Syn was associated with significant
ASSIGN study	included stool characteristics	8: 1.88 ± 0.19 vs 1.98 ± 0.15 , $p = 0.015$	stool frequency.	trend towards improved stool frequency in infants with CMPA.
		No significant differences in other stool characteristics		
		between groups (data not given)		
Fox (2019) [33]	Secondary outcomes	No difference in stool characteristics between groups	No p-values reported	Stool characteristics were not statistically
ASSIGN study	included stool characteristics	(detailed data not given)		significantly different between groups.

Supplementary Table S2. Individual publication results of stool characteristics in infants receiving AAF-Syn vs AAF

CMPA: cow's milk protein allergy; AAF-Syn: amino acid formula with synbiotics; AAF: amino acid formula.

*Stool consistency scale: 1 = watery, 2 = soft pudding-like, 3 = soft formed, 4 = dry formed, 5 = dry hard pellets. **Stool colour scale: 1 = green, 2 = yellow, 3 = yellow/brown, 4 = brown, 5 = black.

Lead author (date)	Outcome measures	Comparison of findings in AAF-Syn vs AAF groups	Statistical comparison	Conclusions
Burks (2015) [39]	Primary outcome was growth	Between-groups difference in Z-scores for growth parameters at 16 weeks, mean (90% CI) for AAF-Syn vs AAF: - Weight: 0.147 (-0.10; 0.39) p = 0.32 NS - Length: -0.299 (-0.69; 0.09) p = 0.21 NS - HC: 0.152 (-0.15; 0.45) p = 0.40 NS No difference in length for age or weight for age Z-scores	No significant difference between groups	"A specific synbiotics-supplemented AAF demonstrated normal growth and growth similar to an AAF without synbiotics when used in [CMPA] infants."
Candy (2018) [32] ASSIGN study	Exploratory outcomes included growth	Growth parameters at 8 weeks were within the expected ranges for age and median Z-scores for both groups were within 1 SD of the mean (data not given)	Not reported (but see Fox below)	The synbiotic-supplemented AAF in this trial was shown to be safe in terms ofachievement of growth targets."
Fox (2019) [33] ASSIGN study	Secondary outcomes included growth	 Measured growth parameters were all in the expected ranges for age Z-scores for growth parameters at 8 weeks, mean ± SD for AAF-Syn vs AAF: Weight for age: 0.104 ± 0.877 vs -0.137 ± 0.871 Length for age: 0.570 ± 1.178 vs 0.322 ± 0.783 HC for age: 0.954 ± 0.948 vs 0.495 ± 1.120, p =0.019 Weight for length: -0.178 ± 0.840 vs -0.356 ± 1.011 	Significant differences at 8 weeks for head circumference No other significant differences in outcomes or at timepoints, p-values not given	"Administration of AAF with synbiotics for at least 8 weeks, and up to 26 weeks, isassociated with growth and development within the normal range."

Supplementary	Table S3. Individual	publication results of growth	parameters in infants receiving	ng AAF-Syn vs AAF Growth

CMPA: cow's milk protein allergy; AAF-Syn: amino acid formula with synbiotics; AAF: amino acid formula; ITT: intention to treat; NS: Not significant; HC: head circumference; SD: standard deviation