# Normobaric/hyperbaric oxygen

### Supplementary table 1: ROB assesment for studies that assessed the effect of oxygen vs placebo

Manuscript	Randomization process	Deviation from intended intervention	Missing outcome data	Bias in the measurement of the outcome
Cohen et al, 2009	Low	Some concerns	Low	Low
Fogan et al, 1985	Low	Low	low	Low
Remahld et al, 2002	Low	Low	Low	Low
Petersen et al, 2017	Some concerns	Low	Low	Low

### Supplementary table 2: Characteristics of studies that assessed the effect of oxygen vs placebo

	Patients	Comparison	Intervention	Outcome	Results
Manuscript					
	Episodic (75%) or		Oxygen 12 L/min		Oxygen 116/150
Cohen 2009	chronic cluster	Dlacaba (Air)	delivered by firm	Pain free at 15	Placebo 29/148
	patients, aged 18-70	Placebo (Air)	plastic nonbreathing	minutes	
	yo		facial mask		

	19 men with cluster				(substantial or
Fogan 1985	headache not	Placebo (air)	Oxygen 6 L/min, not	Pain relief score	complete relief)
Togaii 1983	otherwise specified,	r lacebo (all)	otherwise specified	ram tener score	oxygen 10/16,
	aged 20-50 yo				placebo 1/16
	Episodic (75%) or	Placebo (10%			Episodic: 4/12 HBO,
Remahld 2002	chronic cluster	oxygen with	Hyperbaric oxygen	Headache index	6/12 placebo
Remaind 2002	patients, aged 20-62			decreased by 50%	Chronic: 1/4 HBO,
	yo	nitrogen)3			0/4 Placebo
	Episodic and cluster	Placebo (21%	Oxygen 15 L/min,	2-point decrease of	Oxygen (DVO):
Petersen 2017	headache, aged 18-	`	via simple mask,	pain in a five-point	13/31 (42%) placebo
	65 yo (27 chronic	oxygen and 79%	O2optimask and	_	(DVO): 3/8 (27%)
	and 30 chronic)	nitrogen)	DVO	rating scale	

Triptans
Supplementary table 3: ROB assesment for studies included in Tables 5-8 (triptans vs placebo)

Manuscript	Randomization process	Deviation from intended intervention	Missing outcome data	Bias in the measurement of the outcome
Ekbom et al, 1993	Low	Low	Low	Low
The Sumatriptan Cluster Headache Study Group (1991)	Low	Low	Low	Low
van Vliet et al, 2003	Some concerns	Some concerns	Low	low
Bahra et al, 2000	Low	Low	Low	Low
Cittadini et al, 2006	Some concerns	Some concerns	Some concerns	Low
Rapoport et al, 2007	Low	Low	Low	Low

### **Supplementary table 4: Characteristics of studies for tables 5-8 (triptans vs placebo)**

	Population		Pts included/pts	
Manuscript		Intervention	analyzed	Outcome
	Chronic and episodic	Sumatriptan	157/134	
	cluster patients	subcutaneous injection 6		Pain relief to no or mild
Ekbom 1993		and 12 mg		pain at 10 min, 15 min

The Sumatriptan Cluster	Chronic and episodic	Sumatriptan	49/39	
Headache Study Group	cluster patients	subcutaneous injection 6		
(1991)		mg		Pain relief at 15 min
	Chronic and episodic	Sumatriptan intranasal	118/85	
van Vliet 2003	cluster patients	20 mg		Pain relief at 30 min
	Chronic and episodic	Zolmitriptan oral 5 and	153/114	Improvement of
Bahra 2000	cluster patients	10 mg		headache at 30 min
	Chronic and episodic	Zolmitriptan intranasal 5	92/69	"headache response" at
Cittadini 2006	cluster patients	mg and 10 mg		30 min
	Chronic and episodic	Zolmitriptan intranasal 5	83/52	"headache response" at
Rapoport 2007	cluster patients	mg and 10 mg		30 min

# Galcanezumab

**Supplementary Table 5:** risk of bias assessment using ROB2 tool (Galcanezumab vs placebo)

Manuscript	1. Randomization process	2. Deviation from intended intervention	3. Missing outcome data	4. Bias in the measurement of the outcome
Goadsby et al, 2019	Low	Some concerns	Some concerns	Low

# Supplementary table 6: Study characteristics for table 10 (galcanezumab)

	Patients	Comparison	Intervention	Outcome
Manuscript				
	Episodic cluster			
	headache patients			
Goadsby et al, 2019	(age: 18-65; assigned	placebo	Galcanezumab 300mg	Frequency of attacks
	49 to galcanezumab, 57			
	to placebo)			

#### Prednisone

### **Supplementary Table 7: risk of bias assessment using ROB2 tool (prednisone)**

Manuscript		2. Deviation from intended	3 Miccing	4. Bias in the measurement of the outcome
Obermann et al, 2021	Low	low	Low	Low

### **Supplementary table 8: Study characteristics for table 9 (prednisone)**

	Patients	Intervention	Comparison	Outcome
Manuscript				
Obermann et al, 2021	Episodic cluster headache patients (age: 18-65; assigned 57 to prednisone, 59 to placebo)	100 mg oral prednisone for 5 days	placebo	Mean number of cluster headache attacks in the first week

### Supplementary Table 9: risk of bias assessment using ROB2 tool (VNS)

Manuscript	Randomization process	deviation from intended intervention	missing outcome data	Bias in the measurement of the outcome
Silberstein 2016	Low	Low	Low	Low
Goadsby 2018a	Low	Low	Low	Low
Gaul 2016	Some concerns	Low	Low	Low

### **Supplementary table 10: Characteristics of studies for tables 11-13 (VNS)**

Manuscript	Population	Intervention	Comparator	Outcome	Rescue treatment
	Episodic and chronic	VNS (5kHz)	placebo	pain relief within 15	Abortive medications
	cluster headache (60			minutes from	as needed
	nVNS-treated (38			treatment for the first	
Silberstein 2016	episodic; 22 chronic)			CH attack (pain relief	
	and 73 placebo (47			defined as no (0) or	
	episodic; 26 chronic)			mild pain (1) over a 0-	
				4 scale)*	
	Episodic and chronic	VNS (5kHz)	placebo		3 additional
	cluster headache age:				stimulation allowed if
	>18yo; (48 VNS-			pain-free status within	no pain-free at 9
Goadsby 2018a	treated (14 episodic,			15 from treatment (no	minutes (refrain for
	34 chronic) and 44			pain (0))*	abortive medications
	sham-treated (13				over the 15 mins
	episodic, 31 chronic)				following stimulation)
Gaul 2016	Chronic cluster	VNS (5kHz)	standard care	mean number of	Abortive medications
	headache; age 18-70			attacks per week	as needed
	(45 VNS 48 controls)			allacks per week	

### Supplementary Table 11: risk of bias assessment using ROB2 tool.

Manuscript	Randomization process	deviation from intended intervention	missing outcome data	Bias in the measurement of the outcome
Goadsby 2019	Low	Low	Low	Low

# Supplementary table 12: Characteristics of studies for tables 14 (SPG)

Manuscript	Population	Intervention	Comparator	Outcome	Rescue treatment
Goadsby 2019	Chronic cluster	SPG stimulation	placebo	Pain relief after 15min of	Abortive medications as
	headache patients; age:			the initiation of attack	needed after 15 min
	18-70 yo; (SPG 45,			(from scores 2-4 to	
	placebo 48 patients)			scores 0-1)	

### Supplementary table 13: ROB assessment for ONS with Newcastle-Ottawa scale for cohort studies

Manuscript	Selection	Comparability	Outcome	Patients randomized/analy zed	Weight in the pooled effect
Miller, 2016	**	*	**	51	29%
Wilbrink, 2021	**	**	**	130	71.00%

### **Supplementary table 14: Characteristics of studies for ONS**

Manuscript	Population	Intervention	Outcome	Mean duration of CH	Follow-up	Rescue treatment	Rating scale	Results, mean daily attacks
Miller, 2016	Patients with intractable CCH, 35 men, 16 women	ONS (t 60 Hz with a pulse width of 240 ls; adjusted during follow- up)	Mean change of attack frequency from baseline	14.63 (+/- 11.0)	39.17 months (+/-19.04)	As needed	1-10	MD from baseline: -1.61 (0.88, 2.34)

Wilbrink, 2021	Patients with intractable CCH, 47 men, 83 women	ONS (t 60 Hz with a pulse width of 450 ls; adjusted during follow-up); divided on 30% or 100% of the intensity	Mean change of attack frequency from baseline	7 (6)	24 weeks	As needed	1-10	MD from baseline - 42.56 (-80.05 to -1.80)
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