Supplementary Table 1. MOOSE Guidelines for Meta-analyses and Systematic Reviews of Observational Studies[8]

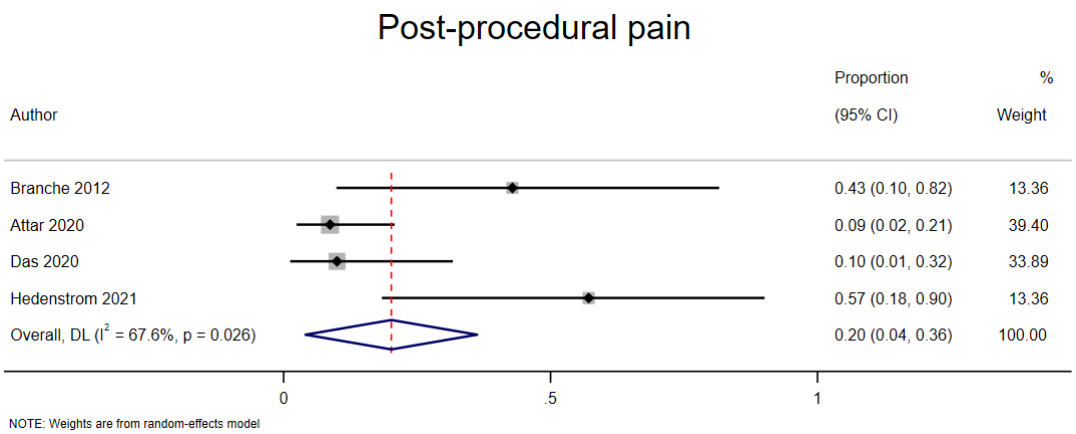
	Topic	Page number
Title	Identify the study as a meta-analysis (or systematic review)	Title page
Abstract	Use the journal's structured format	1
Introduction	Present:	
	The clinical problem	3
	The hypothesis	3
	A statement of objectives that includes the study population, the condition of interest, the exposure or intervention, and the outcome(s) considered	3
Sources	Describe:	
	Qualifications of searchers (eg, librarians and investigators)	4
	Search strategy, including time period included in the synthesis and keywords	4
	Effort to include all available studies, including contact with authors	4
	Databases and registries searched	4
	Search software used, name and version, including special features used (e.g.explosion)	4
	Use of hand searching (e.g, reference lists of obtained articles)	4
	List of citations located and those excluded, including justification	4
	Method of addressing articles published in languages other than English	4
	Method of handling abstracts and unpublished studies	N/A
	Description of any contact with authors	N/A
Study Selection	Describe	
	Types of study designs considered	4
	Relevance or appropriateness of studies gathered for assessing the hypothesis to be tested	4
	Rationale for the selection and coding of data (e.g., sound clinical principles or convenience)	4
	Documentation of how data were classified and coded (e.g., multiple raters, blinding, and inter-rater reliability)	4
	Assessment of confounding (e.g., comparability of cases and controls in studies where appropriate)	4
	Assessment of study quality, including blinding of quality assessors; stratification or regression on possible predictors of study results	4
	Assessment of heterogeneity	5
	Statistical methods (e.g., complete description of fixed or random effects models, justification of whether the chosen models account for predictors of study results, dose-response models, or cumulative meta-analysis) in sufficient detail to be replicated	5
Results	Present	
	A graph summarizing individual study estimates and the overall estimate	Figs. 2-6
	A table giving descriptive information for each included study	Table 1
	Results of sensitivity testing (e.g., subgroup analysis)	6 ,7
	Indication of statistical uncertainty of findings	7
Discussion	Discuss	
	Strengths and weaknesses	10
	Potential biases in the review process (e.g., publication bias)	7
	Assessment of quality of included studies	Supplementary Table 2
	Consideration of alternative explanations for observed results	8, 9
	Generalization of the conclusions (i.e., appropriate for the data presented and within the domain of the literature review)	11
	Guidelines for future research	10
	Disclosure of funding source	Title page

Supplementary Table 2. Assessment of the Study Quality

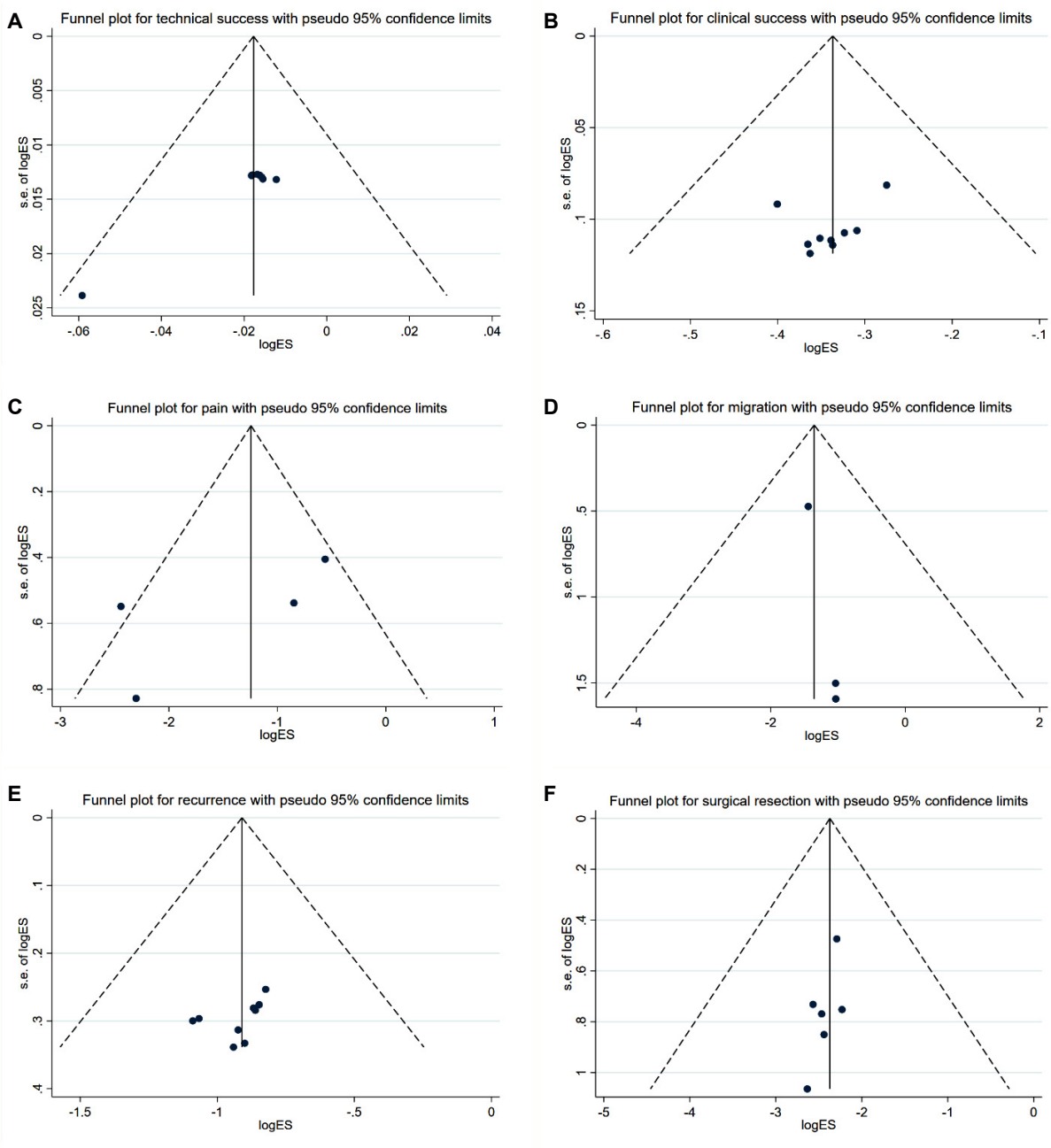
Study	Representative of the average adult in the community	Cohort size	Type of study	Definite information on technical and clinical success	Information reported on adverse events	Length of follow-up	Adequacy of follow-up	Total
	1-point, population-based studies; 0.5-point, multi-center studies; 0-point, single-center hospital-based study	1-point, >30 patients; 0.5-point, 30-15 patients; 0-point, <15 patients	1-point, Prospective; 0.5-point, Ambispective; 0-point, Retrospective	1-point, reported with clarity; 0.5-point if value had to be derived; 0-point, not reported	1-point, adequate information reported; 0-point, not reported	1-point, adequate duration for outcome of interest; 0-point, inadequate or not reported	1-point, all patients accounted for; 0.5-point, <50% not accounted for; 0-point, >50 not accounted for	Maximum, 7; high, >6; medium 4-6; low, <4
Rejchrt et al.[13] (2011)	0	0	1	1	1	1	1	5: Medium
Attar et al.[14] (2012)	0.5	0	1	1	1	1	1	5.5: Medium
Branche et al.[15] (2012)	0	0	1	1	1	1	1	5: Medium
Levine et al.[16] (2012)	0.5	0.5	0	1	1	1	0.5	4.5: Medium
Loras et al.[17] (2012)	0	0	0	1	1	1	0.5	3.5: Low
Karstensen et al.[18] (2016)	0	0	0	1	1	0	1	3: Low
Attar et al.[19] (2021)	0.5	1	0.5	1	1	1	1	6: High
Das et al.[20] (2020)	0	0.5	1	1	1	1	0.5	5: Medium
Hedenström et al.[21] (2021)	0	0	1	1	1	1	1	5: Medium
Loras et al.[22] (2022)	0.5	1	1	0.5	1	1	1	6: High

Supplementary Table 3. Egger's Test for an Assessment of Small-study Effect for Various Outcomes

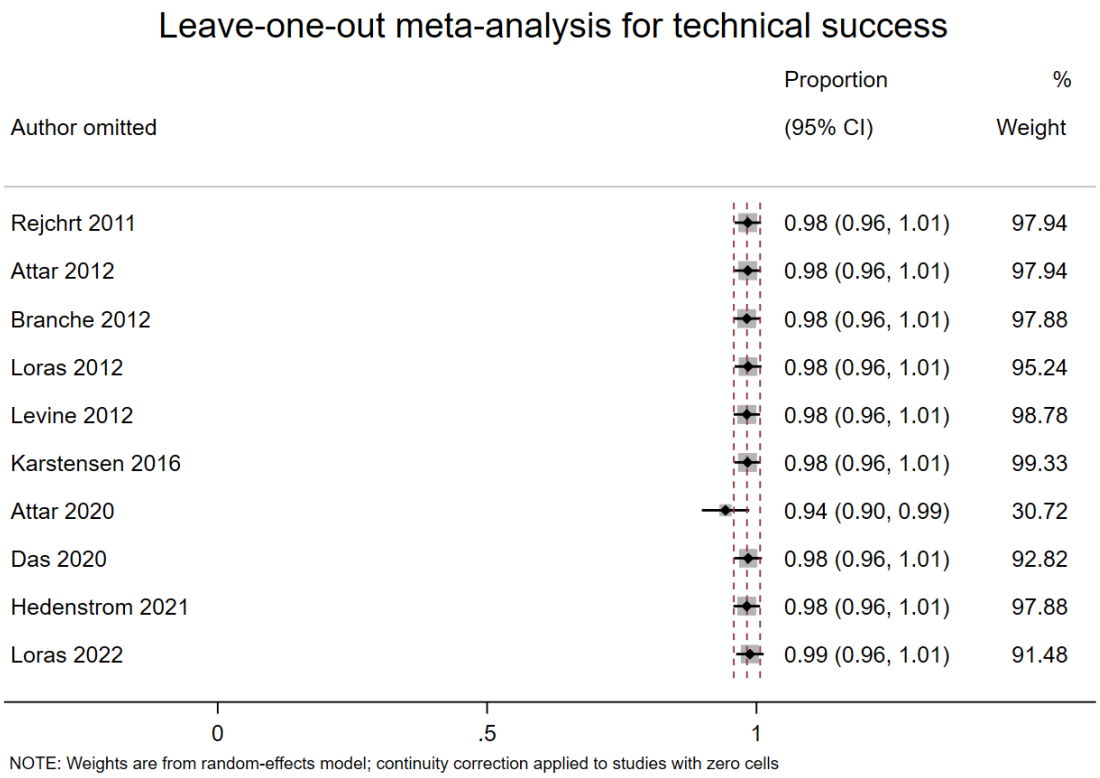
Outcome	Intercept	95% confidence interval		p-value
		Lower limit	Upper limit	
Technical success	-3.817	-4.761	-2.872	0.000
Clinical success	-1.242	-3.756	1.270	0.281
Post-procedural pain	-4.702	-18.994	9.590	0.293
Stent migration	0.375	0.326	0.423	0.001
Recurrence	-1.730	-4.286	0.825	0.157
Surgical resection	-0.447	-1.213	0.318	0.194



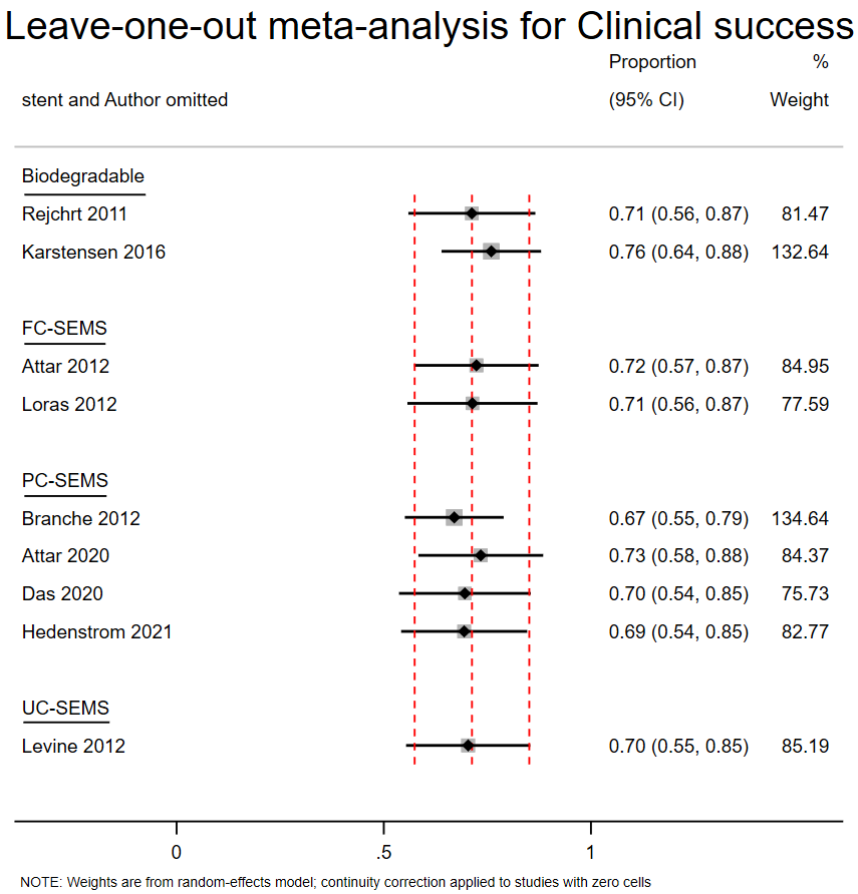
Supplementary Fig. 1. Forest plot for significant post-procedural pain after stent placement.



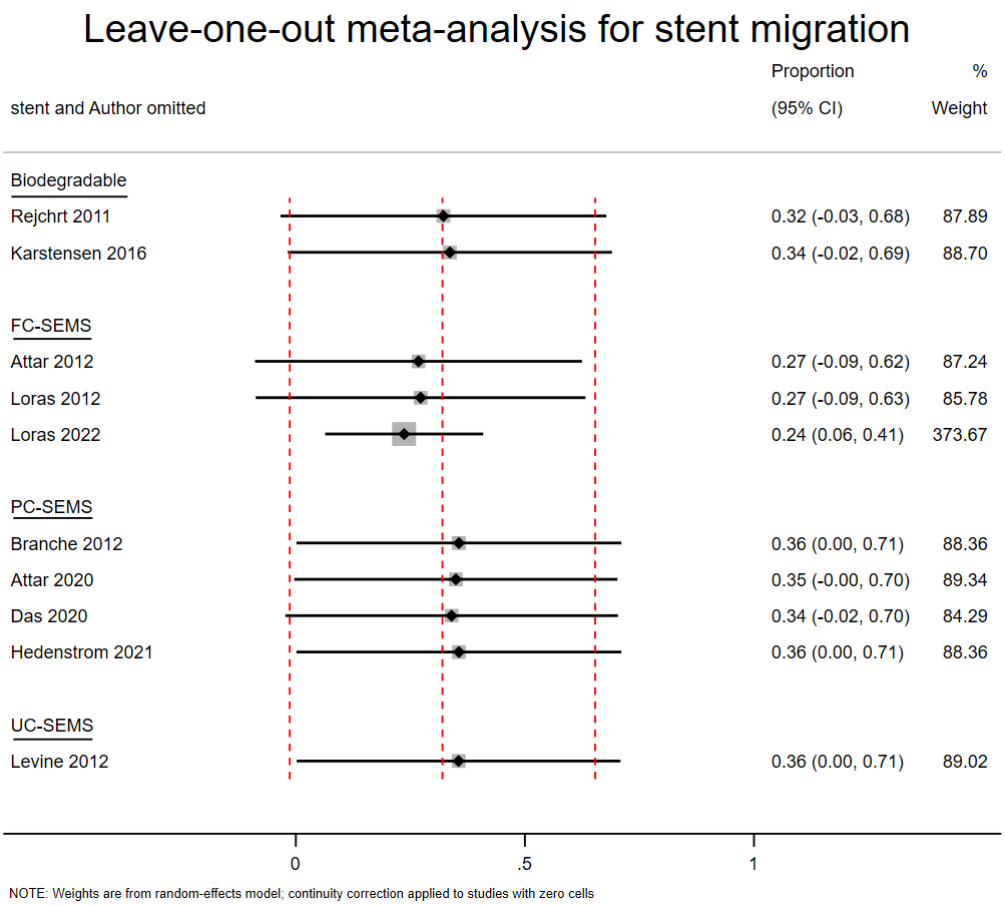
Supplementary Fig. 2. (A-F) Funnel plot for an assessment of publication bias.



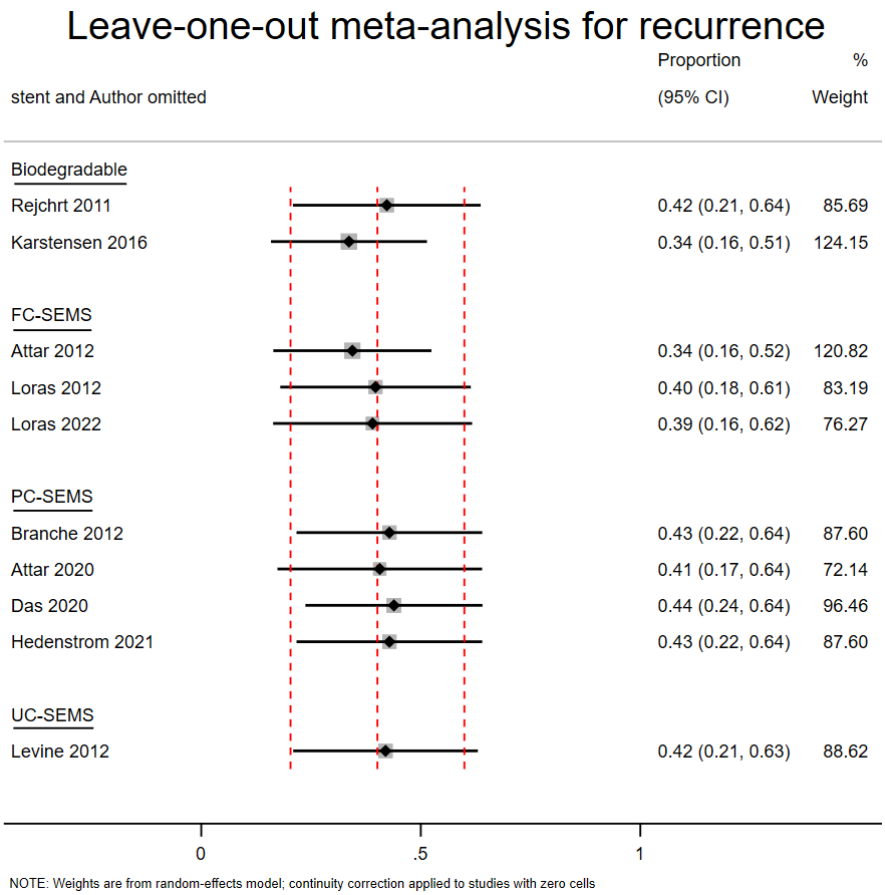
Supplementary Fig. 3. Leave-one-out meta-analysis for the technical success of stenting.



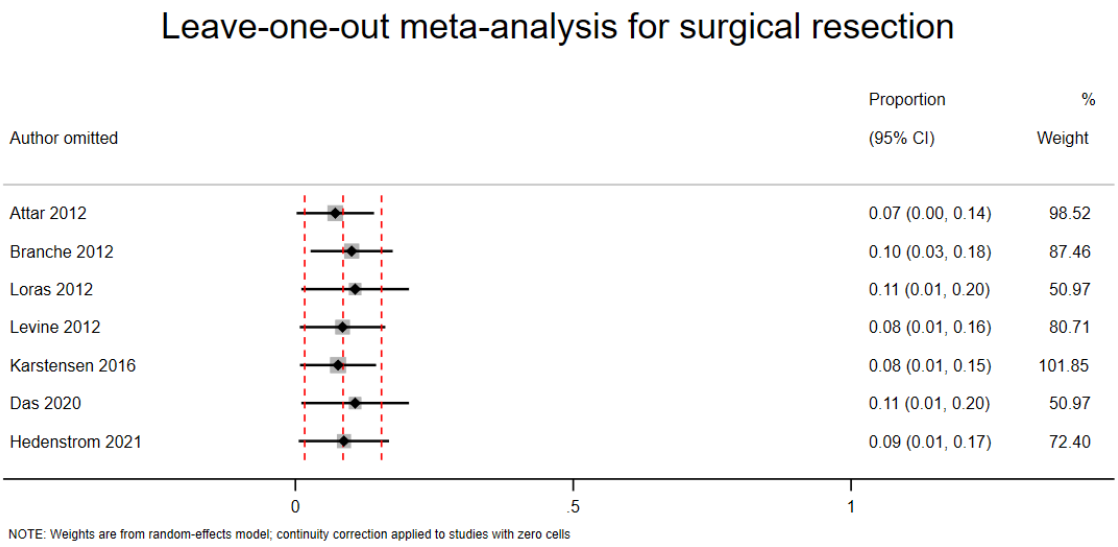
Supplementary Fig. 4. Leave-one-out meta-analysis for the clinical success of stenting.



Supplementary Fig. 5. Leave-one-out meta-analysis for the rate of stent migration.



Supplementary Fig. 6. Leave-one-out meta-analysis for recurrence of stricture symptoms.



Supplementary Fig. 7. Leave-one-out meta-analysis for the rate of surgical resection.