

**Supplementary Table 2.** Cochrane Assessment of Bias Risk of Randomized Controlled Trials

Bias domain	Hibi et al. (2017) <sup>1</sup>	Kobayashi et al. (2016) <sup>2</sup>	Suzuki et al. (2014) <sup>3</sup>	Motoya et al. (2019) <sup>4</sup>
Randomization sequence generation	Low	Low	Low	Low
Allocation concealment	Unclear	Unclear	Unclear	Unclear
Blinding of participants and personnel	Low	Low	Low	Low
Blinding of outcome assessment	Low	Low	Low	Low
Incomplete outcome data	Low	Low	Low	Low
Selective outcome reporting	Low	Low	Low	Low
Other sources of bias	Low	Low	Low	Low
Overall bias risk	Low	Low	Low	Low

1. Hibi T, Imai Y, Senoo A, Ohta K, Ukyo Y. Efficacy and safety of golimumab 52-week maintenance therapy in Japanese patients with moderate to severely active ulcerative colitis: a phase 3, double-blind, randomized, placebo- controlled study-(PURSUIT-J study). *J Gastroenterol* 2017;52:1101-1111.
2. Kobayashi T, Suzuki Y, Motoya S, et al. First trough level of infliximab at week 2 predicts future outcomes of induction therapy in ulcerative colitis- results from a multicenter prospective randomized controlled trial and its post hoc analysis. *J Gastroenterol* 2016;51:241-251.
3. Suzuki Y, Motoya S, Hanai H, et al. Efficacy and safety of adalimumab in Japanese patients with moderately to severely active ulcerative colitis. *J Gastroenterol* 2014;49:283-294.
4. Motoya S, Watanabe K, Ogata H, et al. Vedolizumab in Japanese patients with ulcerative colitis: a phase 3, randomized, double-blind, placebo- controlled study. *PLoS One* 2019;14:e0212989.