

Table 1: Summary of findings: Traditional Chinese Medicine for sarcopenia

Outcomes	Illustrative comparative risks* (95% CI)	No. of participants (studies)	Quality of the evidence (GRADE)
Effects on muscle mass (SMI/ASMI/RASM)	The improvement in muscle mass in the TCM groups ranged from MD 0.23 to 0.99 kg/m <sup>2</sup> higher than control	1088 (9 RCTs)	⊕ ⊕ ○ LOW <sup>a,b</sup>
Effects on muscle strength (grip strength)	The improvement in muscle strength in the TCM groups ranged from MD 0.51 to 2.63 kg higher than control	1088 (9 RCTs)	⊕ ⊕ ○ LOW <sup>a,b</sup>
Effects on muscle function (gait speed/FTSST)	The improvement in muscle function in the TCM groups ranged from MD 0.01 to 0.15 m/s higher than control	1088 (9 RCTs)	⊕ ⊕ ○ LOW <sup>a,b,c</sup>

**Note:** \*Effect estimates represent the range of mean differences across different TCM formulas (Buzhong Yiqi Decoction, Shenqi Paste, Bazhen Decoction, Shenling Baizhu Powder).

**GRADE Working Group grades of evidence:** High quality (⊕⊕⊕): Further research is very unlikely to change our confidence in the estimate of effect. Moderate quality (⊕⊕⊕○): Further research is likely to have an important impact on our confidence. Low quality (⊕⊕○○): Further research is very likely to have an important impact and likely to change the estimate. Very low quality (⊕○○○): We are very uncertain about the estimate.

**Downgrading reasons:** <sup>a</sup>Risk of bias: Most studies did not report allocation concealment and blinding. <sup>b</sup>Inconsistency: Substantial heterogeneity across studies ( $I^2 > 50\%$ ).

<sup>c</sup>Imprecision: Some results did not reach statistical significance.

**Abbreviations:** SMI, skeletal muscle mass index; ASMI, appendicular skeletal muscle index; RASM, relative appendicular skeletal muscle mass; FTSST, five-times sit-to-stand test; TCM, Traditional Chinese Medicine; MD, mean difference; CI, confidence interval; RCT, randomized controlled trial.