

Study ID	Country	Design	Scale	Assessor	Risk of Bias Domains					Overall
					Randomization	Deviations	Missingness	Measurement	Selection	
Main meta-analysis										
Ross 2016	US	Double-blind placebo-controlled	BDI	Self-report	Low	Low	Low	Some concerns	Some concerns	Some concerns
Griffiths 2016	US	Double-blind placebo-controlled	GRID-HAMD	Non-independent study staff	Low	Low	Low	Some concerns	High	High
Davis 2021	US	Open-label waitlist-controlled	GRID-HAMD	Non-independent study staff	Low	Some concerns	Some concerns	Low	Low	Some concerns
Goodwin 2022	Multi	Double-blind placebo-controlled	MADRS	Third-party	Low	Low	Low	Low	Low	Low
von Rotz 2023	CH	Double-blind placebo-controlled	MADRS	Non-independent study staff	Low	Some concerns	Low	Some concerns	Low	Some concerns
Raison 2023	US	Double-blind placebo-controlled	MADRS	Third-party	Low	Low	Low	Low	Low	Low
Rosenblat 2024	CA	Double-blind placebo-controlled	MADRS	Non-independent study staff	Low	Low	Low	High	Low	High
Back 2024	US	Double-blind placebo-controlled	MADRS	Independent study staff	Low	Low	Low	Low	Low	Low
Rieser 2025	CH	Double-blind placebo-controlled	BDI-II	Self-report	Low	Low	Some concerns	Some concerns	Low	Some concerns
Expanded meta-analysis										
Grob 2011	US	Double-blind placebo-controlled	BDI	Self-report	Low	Some concerns	Low	Some concerns	High	High
Carhart-Harris 2021	UK	Double-blind placebo-controlled	QIDS-SR	Self-report	Low	Low	Low	Some concerns	Low	Some concerns
Krempien 2023	US	Double-blind placebo-controlled	MADRS	Unknown	NA	NA	NA	NA	NA	NA

Table 1: Risk of bias assessment of RCTs on psilocybin for depressive symptoms.