

Table. Reconciliation of results of current and prior meta-analyses.

	Current	Huang 2019 PMID: <a href="#">31296196</a>	Rota 2019 PMID: <a href="#">31046087</a>	Wang 2018 PMID: <a href="#">2997938</a>	Snowsill (NHS)*, 2018 PMID: <a href="#">26013989</a>	Coureau 2016 PMID: <a href="#">27211572</a>	Usman Ali 2016 PMID: <a href="#">2713053</a>	Fu 2014 PMID <a href="#">25307063</a>	Manser (Cochrane), 2013 PMID <a href="#">23794187</a>	Humphrey (USPSTF) 2013 PMID: <a href="#">23897166</a>
Number of studies	9	9	7	4	4	5	4	4	1	4
Efficacy for lung cancer mortality reduction	0.84 (0.75, 0.93)	0.83 (0.76, 0.90)	0.80 (0.71, 0.90)	1.13 (0.78, 1.64) Exclude MILD 1.02 (0.66, 1.58)	0.94 (0.74, 1.19) Exclude MILD 0.85 (0.74, 0.98)	NA	Annual vs. usual 1.30 (0.81, 2.11) CXR Biennial vs. usual 1.45 (0.79, 2.69) LDCT vs. CXR (n = 1) 0.80 (0.70, 0.92)	0.84 (0.74, 0.96) Studies mislabeled	0.80 (0.70, 0.92)	Meta-analysis not performed due to heterogeneity
Heterogeneity	0%	1%	19%	87% Exclude MILD 85%	43% 6.9%	NA	40% NA NA	48%	NA (1 study)	High
Efficacy for overall mortality reduction	0.96 (0.91, 1.01)	0.95 (0.90, 1.00)		NA	1.00 (0.87, 1.16) Exclude MILD	NA	Annual LDCT vs. usual	1.04 (0.72, 1.51) Studies mislabeled	0.94 (0.88, 1.00)	Meta-analysis not performed

					0.95 (0.89, 1.00)		1.38 (0.86, 2.22) Biennial vs. usual 1.45 (0.79, 2.69) LDCT vs. CXR 0.94 (0.88, 0.998)			due to heterogeneity
Heterogeneity	0%	0%		NA	57% 0%	NA	80% NA NA	48%	NA (1 study)	High