

APPENDIX 4

Certainty assessment						
Participant (studies)	Risk of bias	Inconsistency	Indirectness	Imprecision	Publication bias	Overall certainty of evidence
Muscle Thickness						
78 (2 RCTs)	Serious ^a	Not serious ^b	Not serious	Very serious ^c	None	⊕○○○ Very low
Agonist activation during MVIC						
194 (2 RCTs and 2 non-randomized studies)	Serious ^d	Not serious ^b	Not serious	Very serious ^c	None	⊕○○○ Very low
Co-activation during MVIC						
86 (1 RCTs and 1 non-randomized study)	Serious ^e	Not serious ^b	Not serious	Very serious ^c	None	⊕○○○ Very low
Isometric strength						
198 (2 RCTs and 2 non-randomized studies)	Serious ^f	Serious ^g	Not serious	Very serious ^c	None	⊕○○○ Very low

^a The studies were not blinded and can be considered a small sample.

^b The heterogeneity was $I^2=0\%$.

^c Confidence interval is narrow based on a small number of events reducing the level of evidence for magnitude effect.

^d There is men and women in the sample and one study considered the contralateral arm as control.

^e The studies were not blinded and can be considered with a small sample. There is information missing in the studies report.

^f Most of the sample was from non-randomized studies.

^g The heterogeneity was $I^2=17\%$. Heterogeneity came from McKenzie et al. (2010), perhaps due is the only one including women in the sample.

RCT: randomized clinical trial. MVIC: maximal voluntary isometric contraction.