

DATA SUPPLEMENT

Review: intravenous metoclopramide is better than placebo for reducing pain in acute migraine in the emergency department

Colman I, Brown MD, Innes GD, *et al.* Parenteral metoclopramide for acute migraine: meta-analysis of randomised controlled trials. *BMJ* 2004;**329**:1369–73.

Metoclopramide v placebo, other antiemetics (chlorpromazine, prochlorperazine) (AE), non AEs, and other antimigraine (AM) regimens for acute migraine*

Outcomes at 1 wEEK	Number of trials (n)	Comparison	Weighted event rates	RBI (95% CI)	NNT (CI)
Reduction in headache pain	3 (185)	Metoclopramide v placebo	56% vs 31%	80% (1 to 221)	4 (3 to 44)
				Odds ratio (CI)	
Complete relief of headache	2 (161)	Metoclopramide v other AEs		0.39 (0.18 to 0.87)	
	1 (40)	Metoclopramide v non AEs		18.38 (0.96 to 352.59)†	
	1 (86)	Metoclopramide v placebo		2.16 (0.36 to 12.84)†	
	2 (177)	Metoclopramide v other AEs		0.64 (0.23 to 1.76)†	
	1 (40)	Metoclopramide v non AEs		2.27 (0.64 to 8.11)†	
	1 (62)	Combination metoclopramide v other AMs		7.79 (1.79 to 33.86)	

*Abbreviations defined in glossary; weighted event rates, RBI, NNT, and CI calculated from data in article using a random effects model.

†Not significant.