

Table 1: Challenges faces and suggestions of how to address these when doing overviews of systematic reviews of complex interventions.

Challenge	Brief description of implication of the challenge	How to address the challenge
When selecting eligible systematic reviews, does one focus on what was pre-specified in the systematic review protocol and methods section, or should one also look at the results?	If it was not clear which primary studies were eligible (in terms of study designs, participants, interventions, comparators, outcomes, settings), selection and reporting bias could be of concern.	Report on what the review authors set out to include, and contrast this with what the review authors found. A table works well, but it can also be reported in the text.
What if there is a mismatch between the setting of the overview vs. the setting of the included studies within eligible systematic reviews?*	Indirectness of evidence may lead to irrelevant or 'muddled' findings.	Judge whether the intervention would be eligible in the setting, and if so, regardless of the setting in which the included primary studies was conducted, report on the findings of the included systematic reviews.
What to do with outdated systematic reviews?	The value of systematic reviews of which the search is outdated, is questionable.	Take into consideration the date of the last search and the research activity in the field, and include this into the decision about the overall judgement on the usability of the findings of the review.
What is the best way to assess the methodological quality of included systematic reviews?	The AMSTAR tool has been used widely, but is it sufficient on its own?	The ROBIS tool has been suggested to be more comprehensive; however, it is much more difficult to apply than AMSTAR. The SUPPORT summary checklists do not give a total score. As a combined approach, use AMSTAR and present the total score and breakdown of the score for each systematic review; and report extra information relevant to that particular systematic review.
What if eligible systematic reviews have a high risk of bias?	Systematic reviews with a high risk of bias may include high quality primary studies.	We reported on all eligible systematic reviews, regardless of its risk of bias.
What if more than one included systematic review answered a similar question? Should one look at the overlap?	Can results be synthesised if there are overlap across primary studies included in the systematic reviews? As such overlap can lead to over-amplification of the findings.	Always check overlap and prepare a matrix detailing included reviews and its' included studies. Choose the best quality systematic review for the specific question and only report results for that review. However, where review questions do not overlap entirely (e.g. in terms of setting, participants, intervention, etc.), and where included primary studies do not overlap substantially, report findings for these components of other systematic review(s).

		Do not pool results across interventions or outcomes, but rather report results per eligible systematic review.
What to do if a systematic review reported more than one measure for the same outcome?***	How does one decide which measure(s) is (are) most important? Also, if there are more than one measurement scale, or various adjustments to the analyses made, which one(s) to choose?	Among the overview co-authors, select a maximum of two measures to report per outcome, by discussion and reaching consensus. In the case of discrepancies, the team can contact an expert in the specific field to obtain an independent opinion.
How does one meaningfully structure the reporting of results across systematic reviews?	It is important to present findings so that it is easy for stakeholders to navigate their way through the article.	It is best to have a logic model on which to base the presentation of the results. Report the effects of the intervention in terms of what the systematic review authors found, alongside the methodological quality, and the overall judgement in terms of the usability of the findings of the review.

* For example, if your overview is focusing only on low- and middle income countries (LMICs), and systematic reviews include primary studies from both high income countries and LMICs.

** For example, if you prespecified overview outcome was change in breastfeeding practices, and included systematic reviews measured this in different ways such as breastfeeding incidence, feeding of colostrum, early initiation of breastfeeding, exclusive breastfeeding for 6 months, and duration of breastfeeding.