Supplement Table 31. Summary of studies comparing fiber-containing versus fiber-free enteral formulas in critically ill adult patients (KQ12)

Study	Design	Participants	Comparison	Summary
Cara et al. 2021 [155]	Systematic review and meta-analysis	19 studies of hospitalized critically ill adults	Fiber-containing EN vs. fiber-free / standard EN	- Fiber containing EN: associated with reduced diarrhea and GI complications - No significant effects on mortality or ICU/hospital LOS - Heterogeneity and measurement variability
Koch et al. 2024 [156]	Systematic review and meta-analysis	20 RCTs, N=1,405 (critically ill adult ICU patients)	Fiber-supplemented EN vs. Fiber-free/standard EN	- Fiber containing EN: associated with lower mortality and reduced diarrhea - High risk of bias
Liu et al. 2023 [157]	Systematic review and meta-analysis	13 studies, N=709 (critically ill patients on EN)	Fiber-supplemented EN vs. Fiber-free/standard EN	- Fiber containing EN: associated with reduced diarrhea and feeding intolerance (vomiting, regurgitation, constipation) and reductions in mortality and LOS, faster time to full EN
Reis et al. 2018 [159]	Systematic review	8 studies in hemodynamically stable ICU patients	Soluble fiber-containing EN vs. fiber-free or standard EN	- Soluble fiber appears safe in stable patients and is associated with reduced diarrhea; no consistent benefit on mortality or ICU length of stay.

EN, enteral nutrition; GI, gastrointestinal; ICU, intensive care unit; LOS; length of stay; RCTs, randomized controlled trial.