ESM Table 1 Evidence appraisal: American Diabetes Association grading system reproduced from Table 1 ADA evidence-grading system for "Standards of Care in Diabetes"

Level of Evidence	Description
A	Clear evidence from well-conducted, generalizable randomized controlled trials that are adequately powered, including: ● Evidence from a well-conducted multicenter trial ● Evidence from a meta-analysis that incorporated quality ratings in the analysis Supportive evidence from well-conducted randomized controlled trials that are adequately powered, including: ● Evidence from a well-conducted trial at one or more institutions ● Evidence from meta-analysis incorporated quality ratings in the analysis
B	Supportive evidence from well-conducted cohort studies, including: ● Evidence from a well-conducted prospective study or registry ● Evidence from a well-conducted meta-analysis of cohort studies Supportive evidence from well-conducted case control study
C	Supportive evidence from poorly controlled or uncontrolled studies, including: ● Evidence from randomized clinical trials with one or more major or three or more minor methodological flaws that could invalidate the results ● Evidence from observational studies with high potential for bias (such as case series with comparison with historical controls) ● Evidence from case series or case reports Conflicting evidence with the weight of evidence supporting the recommendation
E	Expert consensus or clinical experience