

Patient or population: patients with persons with bulimia nervosa **Settings:**

Intervention: self-help

Comparison: wait-list

Outcome	Illustrative comparative risks* (95% CI)		Relative effect (95% CI)	No of Participants (studies)	Quality of the evidence (GRADE)	Comments
	Assumed risk Wait-list	Corresponding risk Self-help				
Binging (Posttest) Different standardized self-report measures		The mean binging (posttest) in the intervention groups was 0.70 standard deviations higher (0.47 to 0.98 higher)		263 (4 studies)	⊕⊕⊖⊖ low ^{1,2,3}	Det er signifikant bedre å få selvhjelp sammenlignet med venteliste målt med overspising ved endt behandling.
Purging (Posttest) Different standardized self-report measures		The mean purging (posttest) in the intervention groups was 1.37 standard deviations higher (0.36 to 2.37 higher)		151 (3 studies)	⊕⊖⊖⊖ very low ^{1,2,4,5}	Det er signifikant bedre å få selvhjelp sammenlignet med venteliste målt med oppkast ved endt behandling.
Bulimia rating (self-report, posttest) Different standardized self-report measures		The mean bulimia rating (self-report) in the intervention groups was 1.25 standard deviations higher (0.86 to 1.64 higher)		192 (3 studies)	⊕⊖⊖⊖ very low ^{1,2,4,5}	Det er signifikant bedre å få selvhjelp sammenlignet med venteliste målt med bulimiske symptomer ved endt behandling.
Body dissatisfaction (posttest) Different standardized self-report measures		The mean body dissatisfaction in the intervention groups was 0.71 standard deviations higher (0.26 to 1.15 higher)		222 (3 studies)	⊕⊖⊖⊖ very low ^{1,2,4,5}	Det er signifikant bedre å få selvhjelp sammenlignet med venteliste målt med holdning til egen kropp ved endt behandling.

*The basis for the **assumed risk** (e.g. the median control group risk across studies) is provided in footnotes. The **corresponding risk** (and its 95% confidence interval) is based on the assumed risk in the comparison group and the **relative effect** of the intervention (and its 95% CI). **CI:** Confidence interval

GRADE Working Group grades of evidence

High quality: Further research is very unlikely to change our confidence in the estimate of effect.

Moderate quality: Further research is likely to have an important impact on our confidence in the estimate of effect and may change the estimate.

Low quality: Further research is very likely to have an important impact on our confidence in the estimate of effect and is likely to change the estimate.

Very low quality: We are very uncertain about the estimate.

¹ Unclear risk of bias in all of the studies

² Unclear study design (RCT & quasi-experimental design)

³ Total population is less than 400

⁴ Only 3 studies, total population is less than 400

⁵ Wide 95% CI

