

Table 2. Characteristics of included studies in He (2021)

Author	N at baseline, Age, Gender, Country	Diagnostic criteria	Intervention	Control	Outcome	Results	Risk of Bias
He (2021)							
Banerjee, 2011	326 participants (111 placebo, 107 sertraline, 108 mirtazapine). <i>Age in years, Mean (SD)</i> I: 80 (8.4), C: 79 (8.4) <i>No. Male (%)</i> I: 34 (32%), C: 31 (29%) <i>Country:</i> UK	Participants were eligible if they had probable or possible Alzheimer's disease, depression (lasting ≥4 weeks), and a CSDD score of 8 or more.	Sertraline (150 mg)	Mirtazapine (45 mg)	Reduction in depression (CSDD score), 13w	<i>Reduction in depression - CSDD score</i> I: 8.6 (4.9): n=78 C: 7.9 (5.0): n= 85	Reduction in depression: Low
Katona, 1998	198 patients (99 paroxetine, 99 imipramine) <i>Age in years, Mean (range)</i> I: 76 (59-98), C: 76(59-97) <i>No. Male (%)</i> I: 17 (17.2%), C: 27 (27.3%) <i>Country:</i> Australia Germany, Australia, France, Italy, Switzerland	Patients (>60 years) with a clinical diagnosis of dementia according to DSM-III-R criteria and diagnosed with major/minor depression according to Research Diagnostic Criteria and MADRS score of 20 or more, and have mild to moderate cognitive impairment supported by MMSE of 17±23 points.	Paroxetine (20-40mg)	Imipramine (50-100 mg)	<i>Depressive symptoms (MADRS), 8w</i> Adverse events, 8w	<i>Depressive symptoms - MADRS</i> I: -12.6 (10.0), n=96 C: -11.8 (10.0), n=96 p = 0.386 <i>Adverse events (at least one treatment-emergent AE)</i> I: 51 (51.5%) C: 50 (50.5%) p = 0.820	Depressive symptoms: Low Adverse events: Low
Mokhber, 2014	59 patients (Sertraline, Venlafaxine, Desipramine) <i>Age in years, Mean (SD)</i>	Patients diagnosed with mild to moderate Alzheimer dementia (MMSE 20–24 and 10–20) and with major depressive disorder	Sertraline (25 mg) Venlafaxine (37.5 mg)	Desipramine (25 mg)	Reduction in depression (HRSD), 12w Adverse events, 12w	Reduction in depression – HRSD At 12w, only sertraline was shown to have had a significant effect on depression.	Reduction in depression: Low

	S: 67.3 (3.0), V: 67.9 (2.8), D: 67.6 (5.3) No. Male (%) S: 13 (65), V: 10 (50), D: 11 (58) Country: Iran	(diagnosed according to DSM-IV and semi-structured interview by the study psychiatrist).				<p>Adverse events, n (%)</p> <p>Headaches S: 5 (16.6), V: 1 (3.3), D: 0 (0)</p> <p>Restlessness S: 3 (10.0), V: 3 (10.0), D: 0 (0)</p> <p>Nausea S: 2 (6.6), V: 6 (20.0), D: 3 (10.0),</p>	
Taragano, 1997	37 participants (18 Fluoxetine, 19 Amitriptyline). Age in years, Mean (SD) I: 71.7 (5.0); C: 72.4 (4.9) No. Male (%) I: 23%, C: 22% Country: Argentina	Patients with probable AD (based on the National Institute for Neurological and Communicative Diseases and Stroke/ Alzheimer's Disease and Related Disorders Association's criteria) and with major depressive syndrome (according to DSM).	Fluoxetine (10 mg)	Amitriptyline (25 mg)	Reduction in depression (HRSD), 45d	Reduction in depression – HRSD At 0d, Mean (SD) I: 25.3 (3.8) C: 26.3 (4.0) At 45d, Mean (SD) I: 16.7 (2.9) C: 15.6 (3.2)	Reduction in depression: Low

CSDD: Cornell Scale for Depression in Dementia; MADRS: Montgomery Asberg Depression Rating Scale; MMSE: Mini Mental State Examination; HRSD: Hamilton Rating Scale for Depression.

***For further details, see risk of bias table in the appendix.**