Appendix II: List of excluded studies

Excluded articles

Thornalley PJ, Jahan I, Ng R. Suppression of the accumulation of triosephosphates and increased formation of methylglyoxal in human red blood cells during hyperglycaemia by thiamine in vitro. The Journal of Biochemistry. 2001;129(4):543-9.
Reason for exclusion: In vitro study.

Alkhalaf A, Kleefstra N, Groenier KH, Bilo HJ, Gans RO, Heeringa P, et al. Effect of benfotiamine on advanced glycationendproducts and markers of endothelial dysfunction and inflammation in diabetic nephropathy. PLoS One. 2012;7(7).
Reason for exclusion: Outcome of interest not assessed.

Haupt E, Ledermann H, Köpcke W. Benfotiamine in the treatment of diabetic. International journal of clinical pharmacology and therapeutics. 2005;43(2):71-7.
Reason for exclusion: Outcome of interest not assessed.

Babaei-Jadidi R, Karachalias N, Ahmed N, Battah S, Thornalley PJ. Prevention of incipient diabetic nephropathy by high-dose thiamine and benfotiamine. Diabetes. 2003;52(8):2110-20.
Reason for exclusion: Participants rats.

Suzuki M, Itokawa Y. Effects of thiamine supplementation on exercise-induced fatigue. Metabolic brain disease. 1996;11(1):95-106.
Reason for exclusion: Outcome of interest not assessed.

Fraser DA, Diep LM, Hovden IA, Nilsen KB, Sveen KA, Seljeflot I, et al. The effects of long-term oral benfotiamine supplementation on peripheral nerve function and inflammatory markers in patients with type 1 diabetes: a 24-month, double-blind, randomized, placebo-controlled trial. Diabetes Care. 2012;35(5):1095-7.
Reason for exclusion: Included only type 1 diabetics.

Schwab S, Zierer A, Heier M, Fischer B, Huth C, Baumert J, et al. Intake of vitamin and mineral supplements and longitudinal association with HbA1c levels in the general non-diabetic population—results from the MONICA/KORA S3/F3 study. PloS one. 2015;10(10).
Reason for exclusion: Participants nondiabetic.