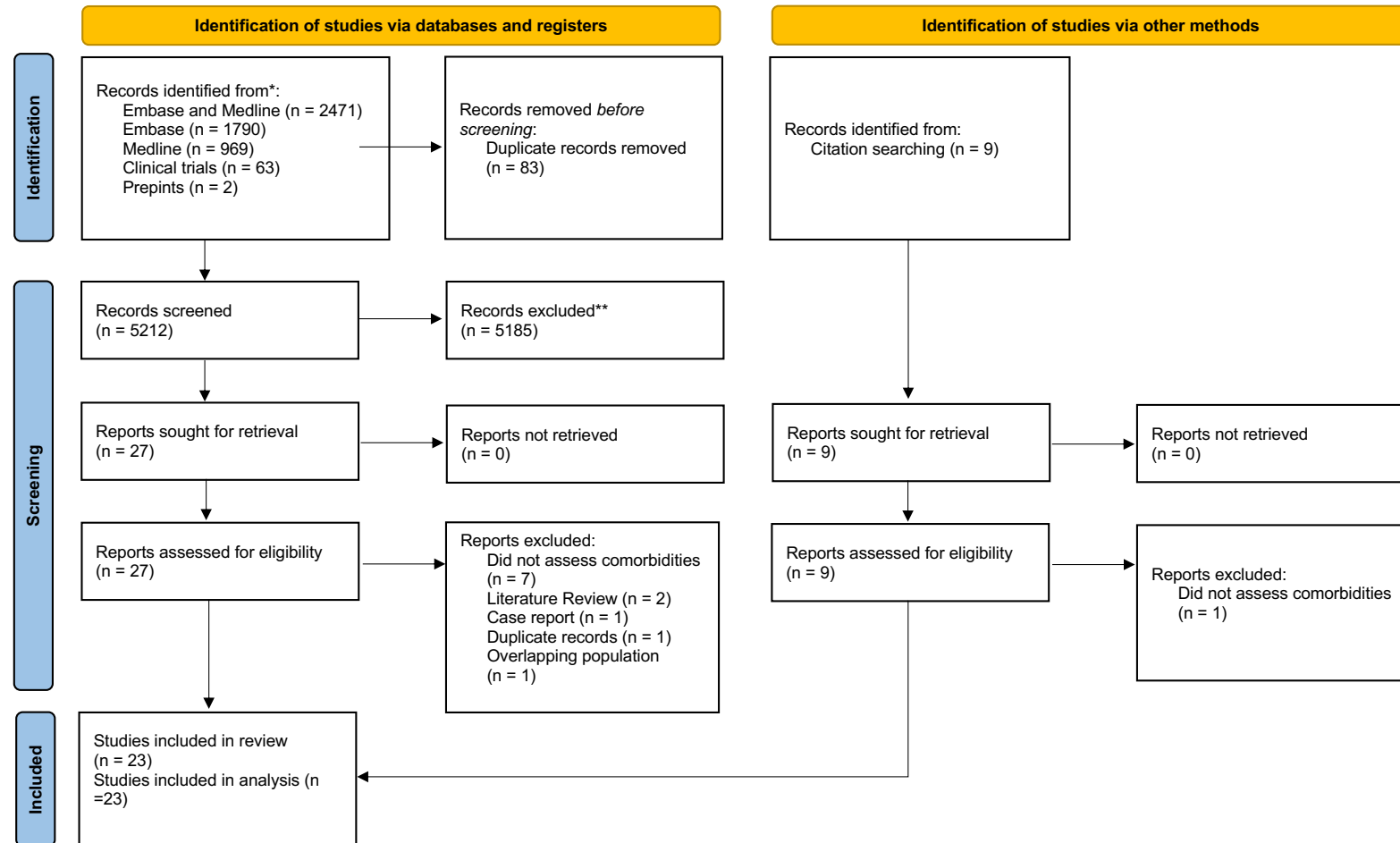


Fig. S1. PRISMA 2020 flow diagram of study selection

PRISMA 2020 flow diagram illustrating the study selection process for the systematic review and meta-analysis of comorbidities in central centrifugal cicatricial alopecia (CCCA). Database searches were conducted in MEDLINE and Embase and supplemented by citation tracking. The diagram details the number of records identified, screened, assessed for eligibility, and excluded, together with reasons for full-text exclusion, resulting in 23 studies included in the qualitative synthesis and quantitative meta-analysis.

Abbreviations: PRISMA, Preferred Reporting Items for Systematic Reviews and Meta-Analyses

PRISMA 2020 flow diagram for new systematic reviews which included searches of databases, registers and other sources



*Consider, if feasible to do so, reporting the number of records identified from each database or register searched (rather than the total number across all databases/registers).

**If automation tools were used, indicate how many records were excluded by a human and how many were excluded by automation tools.

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Fig. S2. Temporal evolution of included studies in CCCA

Bar plot showing the number of included studies by year of publication.

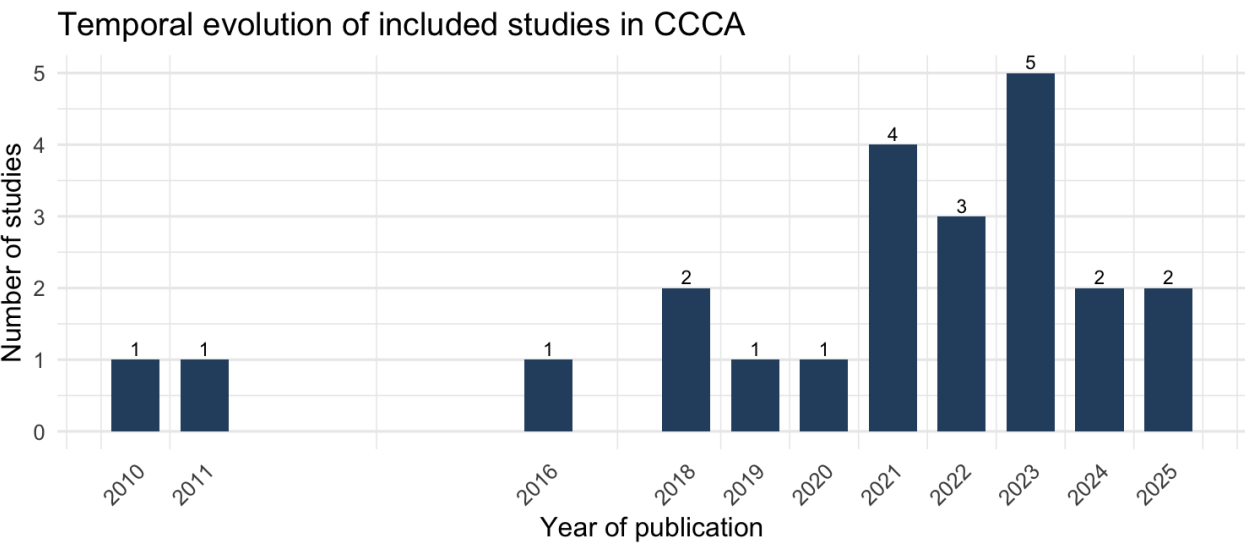


Fig. S3. Geographic distribution of included studies in CCCA

Bar plot showing the number of single-country studies included in the systematic review of CCCA stratified by country of origin. Multinational studies were excluded from this analysis to avoid double counting and to reflect the geographic distribution of country-specific evidence.

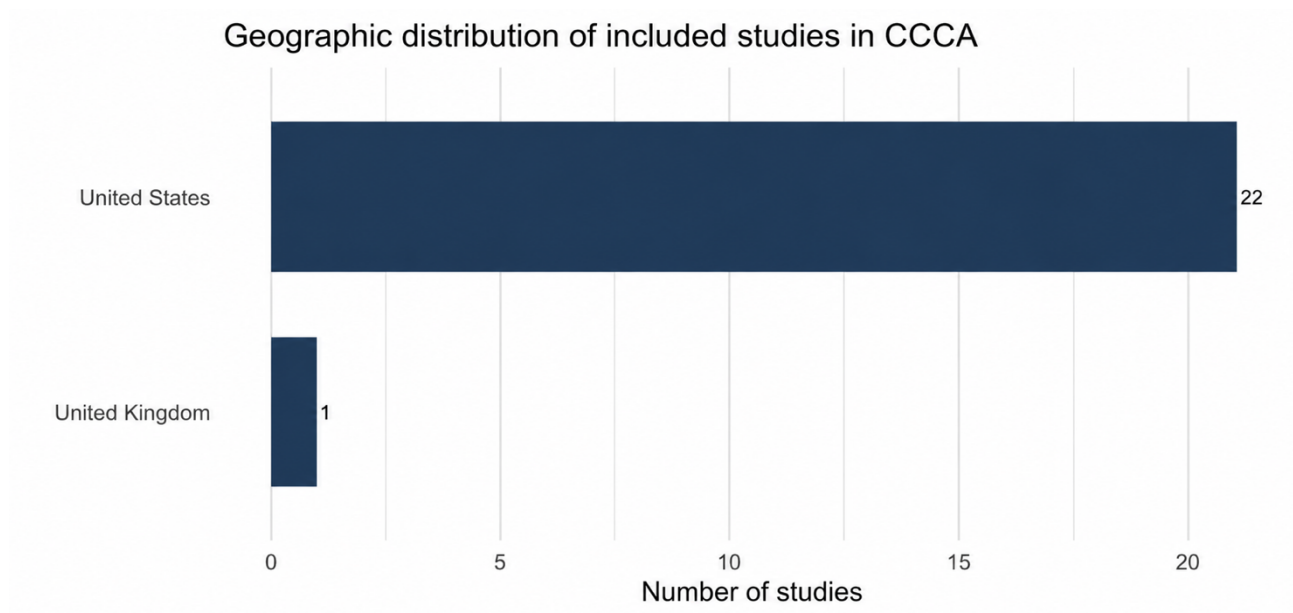


Fig. S4. *Frequency of reported comorbidity domains in central centrifugal cicatricial alopecia (CCCA)*

(A) Distribution of the number of comorbidity domains assessed per study in CCCA.

Most studies evaluated a limited number of domains, typically one to three, highlighting substantial heterogeneity in the scope of comorbidity assessment across the literature. The dashed vertical line indicates the median number of comorbidity domains per study.

(B) Frequency of reported comorbidity domains across included studies, showing the number of studies reporting at least one comorbidity within each predefined domain. Cardiometabolic conditions were the most frequently assessed domain, followed by gynecologic/hormonal, endocrine–thyroid, and inflammatory dermatologic conditions, whereas gastrointestinal/hepatic and atopic disorders were reported less consistently.

