Table 1: Systematic reviews of tai chi for cancer

Source: Pawel Posadzki, CAM-Cancer Consortium. Tai chi [online document]. https://cam-cancer.org/en/tai-chi, March 2022.

First author year	Methods	Studies Participants	Intervention/control Outcome measures	Results	Comments
Luo 2020	Systematic review MEDLINE, EMBASE, CENTRAL, CNKI, COVIP, Wanfang, Chaoxing, CiNii, J-SSTAGE, DBpia, and Thai JO with no language restrictions. RCTs. From inception to Feb 16, 2020. Cochrane RoB. Meta-analysis	15 RCTs 885 breast cancer patients	Quality of life	Improved quality of life for tai chi post-intervention, and at 12- and 25-week follow-ups but not at 3 or 6 weeks in breast cancer patients. No evidence of heterogeneity.	
Liu 2020	Systematic review MEDLINE, AMED, EMBASE, CINAHL, The Cochrane Central, CNKI, VIP, and Wanfang Data, up to June 2019. Pedro quality assessment. Meta-analysis	16 RCTs 1268 breast cancer patients	Various tai chi interventions Conventional supportive care Fatigue, sleeping quality, depression, body mass index quality of life	No difference between TC and controls in improving fatigue, sleeping quality, depression or body mass index at either 3 months or 6 months. Significant improvements in overall quality of life at 3 months	Significant clinical and methodological heterogeneity
Ni 2019	Systematic review PubMed, Cochrane CENTRAL, CINAHL, ScienceDirect, CNKI, Wangfang Data, and CQVIP until April 25, 2018 Cochrane RoB Meta-analysis	22 RCTs 1410 breast and lung cancer patients	Various tai chi interventions Various controls Quality of life	Tai Chi improved physical and mental health quality of life when compared with various controls	Significant heterogeneity; very high risk of bias in the primary studies

Yang 2021	Systematic review MEDLINE, Embase, SCOPUS, and CINAHL were searched from inception to Sept 18, 2020 Cochrane RoB Narrative synthesis	26 studies (RCTs, non-RCTs, before and after studies) breast, head and neck, prostate and lung cancer patients	Various tai chi interventions Various controls Anxiety, depressive symptoms, fatigue, health related QoL, physical function, bone health, sleep, cognitive function, pain	Tai Chi improved fatigue and sleep quality in cancer survivors and had no effect on the remaining outcomes	Populations, interventions, comparators, outcome measures (and measurement instruments) and study designs were vastly heterogenous.
Song 2018	Systematic review PubMed, Web of Science, Ovid, the Cochrane Library, Embase, and four Chinese databases (SinoMed, VIP, CNKI, and Wanfang databases until 30 April 2017 Cochrane RoB Meta-analysis	6 RCTs involving 373 breast, prostate and lung cancer patients	Tai chi interventions Various controls Fatigue	Tai Chi improved short-term fatigue; effects on long-term fatigue remain unclear	Moderate heterogeneity; high imprecision (small total sample); variable studies' quality
Cai 2022	Systematic review Cochrane Library, PubMed, Web of Science, China National Knowledge Infrastructure, China Science and Technology Journal Database, Wanfang Database, and Sinomed. From inception to October 2020. Cochrane RoB. Meta-analysis.	6 RCTs 654 participants Cancer patients with anxiety and depression	Any form of tai chi control groups: usual care (without exercise) and exercise training Anxiety Depression	No effects on depression Reduced anxiety in tai chi groups (based on pooled results from two low-quality RCTs). All but one studies were at a high risk of bias; certainty of evidence not evaluated.	Other interventions included stroke, heart failure, and chronic obstructive pulmonary disease.