Supplementary Figure 1: Funnel Plots Assessing Publication Bias for Outcomes comparing PUS and FS in obese patients undergoing aortic valve replacement: a) renal failure, b) atrial fibrillation, c) reexploration, d) post-operative bleeding, and e) wound infection

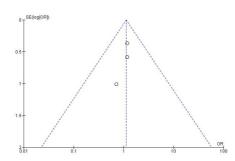
Supplementary Figure 2: Funnel Plots Assessing Publication Bias for Outcomes comparing PUS and FS in obese patients undergoing aortic valve replacement a) Cardiopulmonary bypass time, b) ICU stay, c) hospital stay and d) cross-clamp time

Supplementary Table 1: Quality Assessment of the Included Studies through New Castle Ottawa Scale

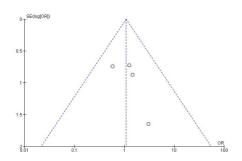
Supplementary Table 2: GRADE Assessment of the Outcomes

Supplementary Figure 1: Funnel Plots Assessing Publication Bias for Outcomes comparing PUS and FS in obese patients undergoing aortic valve replacement: a) renal failure, b) atrial fibrillation, c) reexploration, d) post-operative bleeding, and e) wound infection

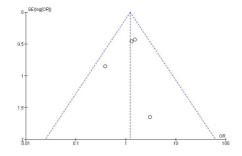
a) Renal Failure



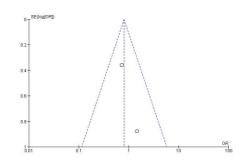
c) Reexploration



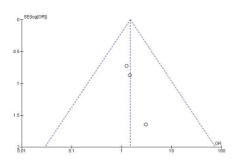
e) Wound Infection



b) Atrial Fibrillation

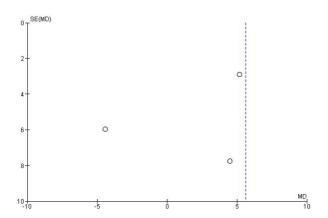


d) Post-operative Bleeding

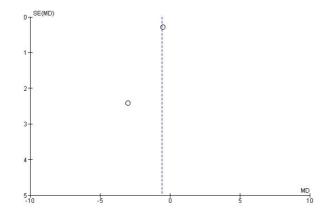


Supplementary Figure 2: Funnel Plots Assessing Publication Bias for Outcomes comparing PUS and FS in obese patients undergoing aortic valve replacement a) Cardiopulmonary bypass time, b) ICU stay, c) hospital stay and d) cross-clamp time

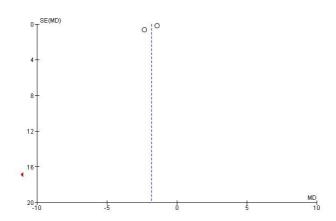
a) Cardiopulmonary bypass time



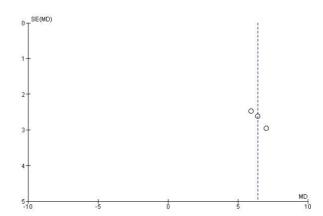
c) Hospital Stay



b) ICU Stay



d) Cross Clamp Time



Supplementary Table 1: Quality Assessment of the Included Studies through New Castle Ottawa Scale

Study	Selection				Comparability	Outcome		Total	
	1	2	3	4	1	1	2	3	
	*	*	*	*	**	*	*		8/9
Cammertoni 2024									
	*	*	*	*	*	*	*	*	8/9
Luo 2022									
	*	*	*	*	**	*	*		8/9
Welp 2018									
	*	*	*	*	**	*	*	*	9/9
Xie 2022									

Supplementary Table 2: GRADE Assessment of the Outcomes

Name of Outcome	No. of Studies	Study Design	Risk of Bias	Inconsistency	Imprecision Indirectness		s Effect Size (OR/MD + CI)	Certainty of Evidence
Renal Failure	4	Observationa	al Low	Not serious (I ² =0%, P=0.69, no heterogeneity)	Serious (wide CI: 0.63–2.94)	Not serious	OR=1.13 (95% CI: 0.63– 2.94)	Low
Atrial Fibrillation	2	Observationa	al Low	Not serious (I ² =0%, P=0.84, no heterogeneity)	Serious (wide CI: 0.43–1.54)	Not serious	OR=0.81 (95% CI: 0.43– 1.54)	Low
Reexploration	4	Observationa	al Low	Not serious (I ² =0%, P=0.84, no heterogeneity)	Serious (wide CI: 0.48–2.47)	Not serious	OR=1.09 (95% CI: 0.48– 2.47)	Low
Postoperative Bleeding	3	Observationa	al Low	Not serious (I ² =0%, P=0.45, no heterogeneity)	Serious (wide CI: 0.53–4.15)	Not serious	OR=1.48 (95% CI: 0.53–4.15)	Low
Wound Infection	4	Observationa	al Low	Not serious (I ² =0%, P=0.47, no heterogeneity)	Serious (wide CI: 0.70–2.14)	Not serious	OR=1.23 (95% CI: 0.70– 2.14)	Low
Cardiopulmonary Bypas Time	^{3S} 4	Observationa	al Low	Serious ($I^2=55\%$, $P=0.07$, moderate heterogeneity, reduced to $I^2=22\%$ without Welp 2018)	Serious (wide CI: -0.36 to 11.59)	Not serious	MD=5.62 minutes (95% CI: 0.36 to 11.59)	Very Low
ICU Stay	4	Observationa	al Low	Serious ($I^2=78\%$, $P=0.003$, considerable heterogeneity, reduced to $I^2=62\%$ without Welp 2018)	d Not serious (narrow CI: - 4.43 to -0.90)	Not serious	MD=-2.67 days (95% CI: -4.43 to -0.90)	Low
Hospital Stay	4	Observationa	al Low	Serious (I 2 =90%, P=0.83, considerable heterogeneity, reduced to I 2 =68% without Welp 2018)	Serious (wide CI: -4.13 to 5.15)	Not serious	MD=0.51 days (95% CI: -4.13 to 5.15)	Very Low
Cross-Clamp Time	4	Observationa	al Low	Serious ($I^2=73\%$, $P=0.10$, considerable heterogeneity, reduced to $I^2=0\%$ without Cammertoni 2024)	Serious (wide CI: -0.75 to 8.80)	Not serious	MD=4.03 minutes (95% CI: 0.75 to 8.80)	Very Low