Additional file 8. Certainty of the evidence and directions of the effects for comparisons

Compared to control groups at short term follow-up (u	p to	16 weeks	s)		
Any Aerobic training	0 ↑		0 =	○ ↑	-
Aerobic training (versus yoga)	<u> </u>		0 =	-	-
Aerobic training (versus Salt restriction)	<u>0</u> =		<u> </u>	-	-
Aerobic training (versus Tai Chi)	<u>0</u> =		<u> </u>	-	-
Aerobic training (aerobic training plus DASH)	0 =		0 =	-	-
Combined training	<u></u>		0 =	-	-
Exercise training	0 =	:	0 =	<u></u> ○ ↑	-
Exercise training: high intensity ($\geq 60\%$)	<u></u>		<u> </u>	-	-
Exercise training: low intensity (< 60%)	0=		<u>\\</u> =	-	-
Exercise training: 24h ambulatory BP	<u>0</u> =		0=	0=	-
Exercise training: Day ambulatory BP	0=		0_	0=	-
Exercise training: Night ambulatory BP	0=		0_	0_	-
Isometric resistance training	<u>0</u> ↑		0 ↑	0 ↑	-
HIIT (versus MICT)	0=		0=	-	-
Dynamic resistance training	0=		0 ↑	-	-
Dynamic resistance training (versus yoga)	0 =		<u>0</u> =	-	- A 1
Commoned to control anoma about to long town follow up		SBP	DBP	MBP	Adverse events
Compared to control groups short to long term follow-up	(4 (<u>0 04 wee</u>	KS) ↑	1 _	
Any aerobic training	0	<u> </u>	0 =	-	<u> </u>
Walking aerobic training	0	<u> </u>	<u> </u>	-	-
Walking aerobic training: ≤ 40 years	0	<u> </u>	0 ↑	-	-
Walking aerobic training: 41-60 years	0	<u> </u>	<u>\</u>	_	-
Walking aerobic training: >60 years	0	<u></u>	<u> </u>	_	-
Walking aerobic training: Female	0	<u></u>	<u>\</u>	_	-
Walking aerobic training: Male	0	<u></u>	<u> </u>	-	-
Walking aerobic training: Normotensive SBP <130 mm Hg – DBP <85 mm Hg	0	†	<u> </u>	-	-
Walking aerobic training: High normal and high blood pressure SBP≥130 mm Hg −≥85 mm Hg	0	<u> </u>	<u> </u>	-	-
Walking aerobic training: High blood pressure ≥140 mm Hg – DBP ≥90 mm Hg	0	<u> </u>	○ ↑	-	-
Combined training	0	<u> </u>	◎ ↑	-	-
Exercise training	0	↑	○ ↑	-	-
Exercise training: 24h ambulatory BP	0	=	<u> </u>	-	-
Exercise training (versus diet)	0	=	<u> </u>	-	-
Exercise training (versus diet plus exercise training)	0	=	0 =	-	-
Dynamic resistance training	0	<u> </u>	<u>○</u> ↑	-	-
Home-based cardiac rehabilitation (versus supervised centre-based cardiac rehabilitation)	0	=	<u> </u>	-	-
		SBP	DBP	MBP	Adverse events
Compared to control groups at short to middle term follow-up (12 to 28 weeks)					
Any Aerobic training	0 ↑		0 ↑ 0 =	-	-
Combined training	0 =		0 =	-	-
Exercise training	0=		0 =	-	-
Exercise training: high intensity ($\geq 60\%$) Exercise training: low intensity ($< 60\%$)	0=		0 =	-	-
Dynamic resistance training	<u>0</u> =		0 =	-	-
Compared to control groups at middle term (up to 2				<u> </u>	<u> </u>
Combined training	\ <u>\\\</u> =	WCCKS)	<u> </u>	T _	_
Exercise training	<u> </u>	<u>'</u>	<u>○</u> ↑	_	-
Exercise training: 24h ambulatory BP	0 ↑		⊗ ↑	_	-
Dynamic resistance training (versus aerobic training)	0=		0 =	-	-
	SBI	P	DBP	MBP	Adverse events
Compared to control groups at middle to long term (24)	4 to 6	64 weeks)		
Any Aerobic training	0 ↑		⊗ ↑	-	-
Combined training	0=		<u></u>	-	-
Exercise training	<u>0</u> =		<u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	-	-
Exercise training: high intensity (≥ 60%)	0=		<u></u>	-	-
Exercise training (versus diet)	0		0=	-	-
Dynamic resistance training	% =		0 =		-
	SBI		DBP	MBP	Adverse events
Compared to control groups at long term (48 to 6	4 we		0 =	1	
Exercise training Exercise training: 24h ambulatory BP	0 =		0 =	-	-
Exercise training. 24th announdtory DF	SBI		DBP	- MBP	Adverse events
	I OD	L	שטע	MIDP	Auverse events

Abbreviations: BP: Blood pressure; DBP: diastolic blood pressure; HIIT: High-intensity interval training; MICT: moderate-intensity continuous training; SBP: Systolic blood pressure.

Moderate certainty of the evidence.
Low certainty of the evidence.
Very low certainty of the evidence.

↑: Effect estimates to favor interventions.

\$\d\tau\$: Effect estimates to favor interventions.

=: Not differences between groups.