Final checklist of items to assess quality of randomized controlled trials of nonpharmacological treatment.

1. **Was the generation of allocation sequences adequate?**	Yes / No / Unclear
2. **Was the treatment allocation concealed?**	Yes / No / Unclear
3. **Were details of the intervention administered to each group made available[1]?**	Yes / No / Unclear
4. **Were care providers' experience or skill[2] in each arm appropriate[3]?**	Yes / No / Unclear
5. **Was participant (ie, patients) adherence assessed quantitatively[4]?**	Yes / No / Unclear
6. **Were participants adequately blinded?**	Yes No, because blinding is not feasible No, although blinding is feasible Unclear
6.1. If participants were <u>not adequately blinded</u>	
6.1.1. Were all other treatments and care (ie, co-interventions) the same in each randomized group?	Yes / No / Unclear
6.1.2. Were withdrawals and lost to follow-up the same in each randomized group?	Yes / No / Unclear
7. **Were care providers or persons caring for the participants adequately blinded?**	Yes No, because blinding is not feasible No, although blinding is feasible Unclear
7.1. If care providers were <u>not adequately blinded</u>	
7.1.1. Were all other treatments and care (ie, co-interventions) the same in each randomized group?	Yes / No / Unclear
7.1.2. Were withdrawals and lost to follow-up the same in each randomized group?	Yes / No / Unclear
8. **Were outcome assessors adequately blinded to assess the primary outcomes?**	Yes No, because blinding is not feasible No, although blinding is feasible Unclear
8.1. If outcome assessors were <u>not adequately blinded</u>, were specific methods used to avoid ascertainment bias (systematic differences in outcome assessment)[5]	Yes / No / Unclear
9. **Was the follow-up schedule the same in each group[6]?**	Yes / No / Unclear
10. **Were the main outcomes analyzed according to the intention-to-treat principle?**	Yes / No / Unclear

[1] The answer should be "**yes**" for this item if these data were either described in the report or made available for each arm (reference to a preliminary report, online addendum etc.)

[2] Care providers' experience or skill will be assessed only **for therapist-dependent interventions** (i.e., interventions where the success of the treatment are directly linked to care providers' technical skill). For other treatment, this item is **not relevant** and should **be removed** from the checklist or answered "unclear".

[3] Appropriate experience or skill should be determined according to published data, preliminary studies, guidelines, run-in period or a group of experts and **prespecified** in the protocol for each study arm before the beginning of the survey.

[4] Treatment adherence will be assessed only **for treatments necessitating iterative interventions** (e.g., physiotherapy that supposes several sessions, in contrast to a "one-shot" treatment such as surgery). For **one-shot treatment**, this item is n**ot relevant** and should be **removed** from the checklist or answered "unclear"

[5] The answer should be "yes" for this item, if the main outcome is **objective or "hard**" or outcomes were assessed by a **blinded or at least an independent endpoint review committee** or outcomes were assessed by an **independent outcome assessor trained** to perform the measurements in a standardized manner or the outcome assessor was **blinded to the study purpose and hypothesis**.

[6] This item is not relevant for trials in which **follow-up is part of the question**. For example, this item is not relevant for a trial assessing frequent versus less frequent follow-up for cancer recurrence. In these situations, this item should be **removed** from the checklist or answered "unclear".