## A Checklist for Randomized Controlled Trials (PLOS ONE)

1. Title and Abstract: The study design could not be described so clearly in p.1-2, see a flowchart in **Figure-1** 

Introduction

2. Background: reported as INTRODUCTION in p.3-4

Methods

- 3. Participants: see Patients in p.4-5
- 4. Interventions: see **Randomization and treatments** in p.5-6 and a flowchart in **Figure-1**
- 5. Objectives: reported as **INTRODUCTION** in p.3-4
- Outcomes: We considered the ratio of the number of improved cases concerned with all the data in the present study, see Vestibular and Auditory assessments, Laboratory Tests and Questionnaires and Statistical analysis in p.6-8
- Sample size: We finished this study based on the duration between January, 2010 and December, 2012, see Patients and Randomization and treatments in p.4-6, samples in all the four groups shown in Table-1

Randomization

- 8. Sequence generation: see **Randomization and treatments** in p.5-6 and a flowchart in **Figure-1**
- 9. Allocation concealment: see **Randomization and treatments** in p.5-6 and a flowchart in **Figure-1**
- 10. Implementation: see **Randomization and treatments** in p.5-6 and a flowchart in **Figure-1**
- 11. Blinding/Masking: Blinding was performed only for patients (not for doctors) in the present study, see Randomization and treatments in p.5-6 and a flowchart in Figure-1
- 12. Statistical methods: see Statistical analysis in p.8

Results

- participant flow: see Randomization and treatments in p.5-6 and a flowchart in Figure-1
- 14. Recruitment: see Randomization and treatments in p.5-6 and a flowchart in Figure-1
- 15. Baseline data: reported as INTRODUCTION in p.3-4
- 16. Number analyzed: described in **RESULTS** in p.8-9 and in **Table-1**

- 17. Outcomes and estimation: described in **RESULTS** in p.8-9 and in **Table-2**
- 18. Ancillary analyses: see **Statistical analysis** in p.8 and **ACKNOWLEDGEMENTS** in p.14
- 19. Adverse events: effects and side effects were described as a flowchart in Figure-1 and % graphs in Figures 2,3

Comment

- 20. Interpretation: Interpretation (the 1<sup>st</sup> paragraph in p.9-10) and limitation (the 6<sup>th</sup> paragraph in p.12-13) in the present study were described in **DISCUSSION**
- 21. Generalizability: The present findings encourage us to think further ideal treatments beyond this paper and that was described in DISCUSSION (the 5<sup>th</sup> paragraph in p.12)
- 22. Overall evidence: described in DISCUSSION (1ine.13-15 at the end of the 1<sup>st</sup> paragraph in p.10)