CONSORT-EHEALTH (V 1.6.1) - Submission/Publication Form

The CONSORT-EHEALTH checklist is intended for authors of randomized trials evaluating web-based and Internet-based applications/interventions, including mobile interventions, electronic games (incl multiplayer games), social media, certain telehealth applications, and other interactive and/or networked electronic applications. Some of the items (e.g. all subitems under item 5 - description of the intervention) may also be applicable for other study designs.

The goal of the CONSORT EHEALTH checklist and guideline is to be a) a guide for reporting for authors of RCTs.

b) to form a basis for appraisal of an ehealth trial (in terms of validity)

CONSORT-EHEALTH items/subitems are MANDATORY reporting items for studies published in the Journal of Medical Internet Research and other journals / scientific societies endorsing the checklist.

Items numbered 1., 2., 3., 4a., 4b etc are original CONSORT or CONSORT-NPT (non-pharmacologic treatment) items.

Items with Roman numerals (i., ii, iii, iv etc.) are CONSORT-EHEALTH extensions/clarifications.

As the CONSORT-EHEALTH checklist is still considered in a formative stage, we would ask that you also RATE ON A SCALE OF 1-5 how important/useful you feel each item is FOR THE PURPOSE OF THE CHECKLIST and reporting guideline (optional).

Mandatory reporting items are marked with a red *.

In the textboxes, either copy & paste the relevant sections from your manuscript into this form - please include any quotes from your manuscript in QUOTATION MARKS, or answer directly by providing additional information not in the manuscript, or elaborating on why the item was not relevant for this study.

YOUR ANSWERS WILL BE PUBLISHED AS A SUPPLEMENTARY FILE TO YOUR PUBLICATION IN JMIR AND ARE CONSIDERED PART OF YOUR PUBLICATION (IF ACCEPTED).

Please fill in these questions diligently. Information will not be copyedited, so please use proper spelling and grammar, use correct capitalization, and avoid abbreviations.

DO NOT FORGET TO SAVE AS PDF _AND_ CLICK THE SUBMIT BUTTON SO YOUR ANSWERS ARE IN OUR DATABASE !!!

Citation Suggestion (if you append the pdf as Appendix we suggest to cite this paper in the caption):

Eysenbach G, CONSORT-EHEALTH Group

CONSORT-EHEALTH: Improving and Standardizing Evaluation Reports of Web-based and Mobile Health Interventions

J Med Internet Res 2011;13(4):e126 URL: http://www.jmir.org/2011/4/e126/

doi: 10.2196/jmir.1923 PMID: 22209829

*Obligatorisk

Your name *	
First Last	
Johan Lundo	gren
University of T	iation (short), City, Country * Toronto, Toronto, Canada niversity, Nor
Your e-mail a	
johan.lundgr	
	manuscript * raft) title of your manuscript.
on patients v	guided web-based cognitive behavioral therapy with depressive symptoms and heart failure- A controlled trial
At which stage	ration Status/Stage * e in your article preparation are you currently (at the time you fill in this form) tted yet - in early draft status
	tted yet - in late draft status, just before submission
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	ber (yet) / not (yet) submitted to / published in JMIR

○ Övrigt:
TITLE AND ABSTRACT
1a) TITLE: Identification as a randomized trial in the title
1a) Does your paper address CONSORT item 1a? * I.e does the title contain the phrase "Randomized Controlled Trial"? (if not, explain the reason under "other")
yes
○ Övrigt:
Identify the mode of delivery. Preferably use "web-based" and/or "mobile" and/or "electronic game" in the title. Avoid ambiguous terms like "online", "virtual", "interactive". Use "Internet-based" only if Intervention includes non-web-based Internet components (e.g. email), use "computer-based" or "electronic" only if offline products are used. Use "virtual" only in the context of "virtual reality" (3-D worlds). Use "online" only in the context of "online support groups". Complement or substitute product names with broader terms for the class of products (such as "mobile" or "smart phone" instead of "iphone"), especially if the application runs on different platforms.
subitem not at all important () () essential
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Does your paper address subitem 1a-i? * Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study
"effect of guided web-based cognitive behavioral therapy"
1a-ii) Non-web-based components or important co-interventions in title Mention non-web-based components or important co-interventions in title, if any (e.g., "with telephone support").
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subitem not at all important () () essential

Does your	paper	address	subitem	1a-ii?
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Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

N/A, intervention (and control group) did not include any non-web-based or non-internet-based components. Pre-intervention contact during the inclusion process, to assess potential participants and prevent multiple registrations by telephone clearly described in methods section " Candidates were contacted by telephone to check any uncertainties in the screening forms, and to prevent multiple registrations"

1a-iii) Primary condition or target group in the title

Mention primary condition or target group in the title, if any (e.g., "for children with Type I Diabetes") Example: A Web-based and Mobile Intervention with Telephone Support for Children with Type I Diabetes: Randomized Controlled Trial

Does your paper address subitem 1a-iii? *

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"on patients with depressive symptoms and heart failure"

1b) ABSTRACT: Structured summary of trial design, methods, results, and conclusions

NPT extension: Description of experimental treatment, comparator, care providers, centers, and blinding status.

1b-i) Key features/functionalities/components of the intervention and comparator in the METHODS section of the ABSTRACT

Mention key features/functionalities/components of the intervention and comparator in the abstract. If possible, also mention theories and principles used for designing the site. Keep in mind the needs of systematic reviewers and indexers by including important synonyms. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

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subitem not at all important					0	essential

Does your	paper	address	subitem	1b-i? *
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Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Internet-based cognitive behavioral therapy (CBT) as guided self-help CBT programs (ICBT) have shown good effects in the treatment of depression. Until now ICBT has not previously been evaluated in patients with HF with depressive symptoms."

"The aims of this study were to: (I) evaluate the effect of a nineweek guided ICBT program on depressive symptoms in patients with HF"

^

1b-ii) Level of human involvement in the METHODS section of the ABSTRACT

Clarify the level of human involvement in the abstract, e.g., use phrases like "fully automated" vs. "therapist/nurse/care provider/physician-assisted" (mention number and expertise of providers involved, if any). (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

1 2 3 4 5 subitem not at all important \bigcirc \bigcirc \bigcirc \bigcirc essential

Does your paper address subitem 1b-ii?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"evaluate the effect of a nine-week guided ICBT program"

1b-iii) Open vs. closed, web-based (self-assessment) vs. face-to-face assessments in the METHODS section of the ABSTRACT

Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic or a closed online user group (closed usergroup trial), and clarify if this was a purely web-based trial, or there were face-to-face components (as part of the intervention or for assessment). Clearly say if outcomes were self-assessed through questionnaires (as common in web-based trials). Note: In traditional offline trials, an open trial (open-label trial) is a type of clinical trial in which both the researchers and participants know which treatment is being administered. To avoid confusion, use "blinded" or "unblinded" to indicated the level of blinding instead of "open", as "open" in web-based trials usually refers to "open access" (i.e. participants can self-enrol). (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

Does your paper address subitem 1b-iii?

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applicable/relevant for your study

In the abstract this is not clearly discussed, partly due to space limitation, partly due to that author instruction for JMIR does not include discussion in the structure of the abstract. However, the conclusion formulated so that it is clear that we did not find any statistically significant differences between the intervention group (ICBT) and the control group (receiving a online moderated discussion forum) "Guided ICBT adapted for persons with HF and depressive symptoms can potentially

INTRODUCTION

2a) In INTRODUCTION: Scientific background and explanation of rationale

2a-i) Problem and the type of system/solution

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"Depressive symptoms are failure (HF) (20-40%)[1-3]. mortality and diminish self-(QoL) [3]. However, treatme symptoms in patients with H4]."	The care ent s	y lea and strate	d to heal	high lth-re for (er me elated depre	orbidity and d quality of life essive	
". ICBT has been shown to method for the treatment of	dep	ress	ive s	ymp	toms	s, and also	~
2a-ii) Scientific backgroun	ıd, r	atior	nale:	: Wh	at is	known about	t the (type of) system

Scientific background, rationale: What is known about the (type of) system that is the object of the study (be sure to discuss the use of similar systems for other conditions/diagnoses, if appropiate), motivation for the study, i.e. what are the reasons for and what is the context for this specific study, from which stakeholder viewpoint is the study performed, potential impact of findings [2]. Briefly justify the choice of the comparator.

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Does your paper address subitem 2a-ii? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"In general depressive symptoms can be treated, by psychotherapy or by pharmacology[12]. However, the impact of pharmacological treatment of depression in HF is not clear [4] and may be complicated due to an already complex pharmacological treatment regime [2]. Furthermore, patients with heart disease seem to prefer talking therapies such as cognitive behavioral therapy (CBT) over pharmacological treatment [8].

2b) In INTRODUCTION: Specific objectives or hypotheses

Does your paper address CONSORT subitem 2b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The primary aim of this study was therefore to evaluate the effect of ICBT on depressive symptoms in patients with HF. Since the frequency of participation in the CBT treatment [18], level of depressive symptoms pre-intervention [19], age [20], sex and New York Heart Association Class (NYHA class)[2] may impact changes in depressive symptoms, a second aim was to assess these factors' associations with the change in depressive symptoms. A third aim was to investigate the effect

METHODS

3a) Description of trial design (such as parallel, factorial) including allocation ratio

Does your paper address CONSORT subitem 3a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"An open label, randomized control design was used."
"Randomization was performed by a person blinded to screening and baseline data using Stata v.13 proc Ralloc with a block size of two."

3b) Important changes to methods after trial commencement (such as eligibility criteria), with reasons

Does your paper address CONSORT subitem 3b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

N/A, no such changes made after commencement of this study.

3b-i) Bug fixes, Downtimes, Content Changes

Bug fixes, Downtimes, Content Changes: ehealth systems are often dynamic systems. A description of changes to methods therefore also includes important changes made on the intervention or comparator during the trial (e.g., major bug fixes or changes in the functionality or content) (5-iii) and other "unexpected events" that may have influenced study design such as staff changes, system failures/downtimes, etc. [2].

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Does your paper address subitem 3b-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No such actions needed during the study period. However changes made in the content after the proof of concept study performed previously is reported: "Compared to the ICBT-program tested in the proof of concept study, a short non-mandatory relaxation exercise was added in module three. No changes were made to the program during the trial."

4a) Eligibility criteria for participants

Does your paper address CONSORT subitem 4a? *

"To recruit participants an patients who had an outpa admitted to hospital with the and 2014 in four hospitals Sweden" "Inclusion criter symptoms (PHQ-9 ≥5), reginternet connection, access participate in treatment of da-ri) Computer / Internet	tient ie m in th ria w gular s to depr	app ain d e so ere: acce a cel essiv	ointniagnuth-eat le at le ess t	nent osis east c ast n o a c ne, b	or work of Hold of hol	tho had been F during 2013 depressive puter with an motivated to	
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4a-ii) Open vs. closed, well Open vs. closed, web-based recruited (online vs. offline), this was a purely web-based intervention or for assessme In online-only trials, clarify if identities was possible or who confirmation, phone calls) we	vs. f e.g., trial nt), i parti nethe ere u	ace-t from , or th i.e., to cipal er tec	o-factorial of the control of the co	ce as open were at de vere al or etect	sses: acce fac egree quas logi /pre	sments: Mention ess website or e-to-face comp e got the study si-anonymous a stical measure	on how participants were from a clinic, and clarify if conents (as part of the team to know the participant. and whether having multiple
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To find possible candidate for the intervention hospital records over patients treated for heart failure were used and a letter with information about the study was sent home to these patients (previously tested recruitment by advertisement in news-papers proved to be ineffective in our proof of concept study). "To recruit participants an information letter was sent to all patients who had an outpatient appointment or who had been admitted to hospital with the main diagnosis of HF during

4a-iii) Information giving during recruitment

Information given during recruitment. Specify how participants were briefed for recruitment and in the informed consent procedures (e.g., publish the informed consent documentation as appendix, see also item X26), as this information may have an effect on user self-selection, user expectation and may also bias results.

Does your paper address subitem 4a-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"To recruit participants an information letter was sent to all patients who had an outpatient appointment or who had been admitted to hospital with the main diagnosis of HF during 2013 and 2014 in four hospitals in the south-east of Sweden" The information described that the study had the aim of investigating the effect of the ICBT in patients with HF and stated the inclusion criteria for the study. Patients that had felt them self depressed or down hearted during at least two

4b) Settings and locations where the data were collected

Does your paper address CONSORT subitem 4b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"However, recipients interested in participation had to register at the study web-site and completed an online screening form including the assessment of depressive symptoms by means of the Patient Health Questionnaire –9 (PHQ-9), self-reported use of medication, co-morbidities, NYHA class and demographics."

"Self-assessed data were collected online at baseline (before

4b-i) Report if outcomes were (self-)assessed through online questionnaires

Clearly report if outcomes were (self-)assessed through online questionnaires (as common in web-based trials) or otherwise.

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Ab-ii) Report how institutional affiliations are displayed Report how institutional affiliations are displayed to potential participants [on ehealth media] as affiliations with prestigious hospitals or universities may affect volunteer rates, use, and reactions with regards to an intervention. (Not a required item – describe only if this may bias results) 1 2 3 4 5 Subitem not at all important • • • essential Does your paper address subitem 4b-ii? Copy and paste relevant sections from the manuscript (include quotes in quotation marks "lilithis" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study This is not clearly addressed in the manuscript. However in the information letter sent out it is stated that the study is performed in a cooperation between the university and a university hospital in south east Sweden. On the study website part of the research team is presented and affiliation to there university is possible to find, but no logotypes for the university of the university hospital is used on the web-site, nor is the URL of the site associated with any of them. 5) The interventions for each group with sufficient details to allow replication, including how and wheathey were actually administered 6-i) Mention names, credential, affiliations of the developers, sponsors, and owners [6] (if authors/evaluators are owners or developer of the software, this needs to be declared in a Conflict of interest" section or mentioned elsewhere in the manuscript).		e direct quotes mation not in ed data were o e intervention)	from you	our m or br onlir	nanui iefly ne at	expl base	t), or el ain why eline (b	aborate the ite efore	on t	his	item	by pro	oviding]
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Flowchart of participants presented in figure 1. Screen shots of part of the web-based platform presented in figure 2. A multimedia appendix presents a more comprehensive description of the platform. Table 1 gives an overview of the ICBT-program and the discussion forum.

"To summarize, the ICBT program consisted of seven consecutive modules that were worked with over nine weeks

5-vi) Digital preservation

Digital preservation: Provide the URL of the application, but as the intervention is likely to change or disappear over the course of the years; also make sure the intervention is archived (Internet Archive, <u>webcitation.org</u>, and/or publishing the source code or screenshots/videos alongside the article). As pages behind login screens cannot be archived, consider creating demo pages which are accessible without login.

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Does your paper address subitem 5-vi?

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Archiving by Internet Archives not possible due to technical reasons. Multimedia appendix contains videos on the pages behind login screens.

5-vii) Access

Access: Describe how participants accessed the application, in what setting/context, if they had to pay (or were paid) or not, whether they had to be a member of specific group. If known, describe how participants obtained "access to the platform and Internet" [1]. To ensure access for editors/reviewers/readers, consider to provide a "backdoor" login account or demo mode for reviewers/readers to explore the application (also important for archiving purposes, see vi).

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"No economical compensation was given to the participants"
Participants had to provide there own internet access during
the study. Access to the platform was obtained after inclusion
in the study and by to factor identification. How participants
accessed the Internet is not investigated or recorded in this
study.

5-viii) Mode of delivery, features/functionalities/components of the intervention and comparator, and the theoretical framework

Describe mode of delivery, features/functionalities/components of the intervention and comparator, and the theoretical framework [6] used to design them (instructional strategy [1], behaviour change techniques, persuasive features, etc., see e.g., [7, 8] for terminology). This includes an in-depth description of the content (including where it is coming from and who developed it) [1]," whether [and how] it is tailored to individual circumstances and allows users to track their progress and receive feedback" [6]. This also includes a description of communication delivery channels and — if computer-mediated communication is a component — whether communication was synchronous or asynchronous [6]. It also includes information on presentation strategies [1], including page design principles, average amount of text on pages, presence of hyperlinks to other resources, etc. [1].

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Some of this has been described in the previously published proof of concept study where the theoretical underpinning for the intervention is given. (reference given in the manuscript)

"Each module contained texts to be read and assignments to be completed by the participants. Written feedback was provided on each assignment. Participants could ask questions about the feedback or the content of the module using the

5-ix) Describe use parameters

Describe use parameters (e.g., intended "doses" and optimal timing for use). Clarify what instructions or recommendations were given to the user, e.g., regarding timing, frequency, heaviness of use, if any, or was the intervention used ad libitum.

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Does your paper address subitem 5-ix?

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					how the clustering by care provides or
7a-i) Describe whether and calculating the sample size		xpec	ted	attri	ition was taken into account when
		attrit	ion v	vas t	taken into account when calculating the
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subitem not at all important	0 0	0	0	0	essential
this" to indicate direct quotes	ions fro from yo	m ma	anus	scrip	t title (include quotes in quotation marks "like ot), or elaborate on this item by providing lain why the item is not applicable/relevant

7b) When applicable, explanation of any interim analyses and stopping guidelines

Does your paper address CONSORT subitem 7b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not addressed in manuscript. Level of depressive symptoms (including suicidal thought/level) monitored weekly by self assessment form.

8a) Method used to generate the random allocation sequence

NPT: When applicable, how care providers were allocated to each trial group

Does your paper address CONSORT subitem 8a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Randomization was performed by a person blinded to screening and baseline data using Stata v.13 proc Ralloc with a block size of two."

8b) Type of randomisation; details of any restriction (such as blocking and block size)

Does your paper address CONSORT subitem 8b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Randomization was performed by a person blinded to screening and baseline data using Stata v.13 proc Ralloc with a block size of two."

9) Mechanism used to implement the random allocation sequence (such as sequentially numbered containers), describing any steps taken to conceal the sequence until interventions were assigned

Does your paper address CONSORT subitem 9? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

List with study id-number of included participants (with out any other information) sent to blinded person performing randomization. "Randomization was performed by a person blinded to screening and baseline data using Stata v.13 proc Ralloc with a block size of two."

10) Who generated the random allocation sequence, who enrolled participants, and who assigned participants to interventions

Does your paper address CONSORT subitem 10? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Random allocation sequence generated by blinded statistician, enrollment preformed by the first author (JL), assignment performed by last author (PJ) who at that time was blinded to participants identity, study id and, screening and baseline data.

11a) If done, who was blinded after assignment to interventions (for example, participants, care providers, those assessing outcomes) and how

NPT: Whether or not administering co-interventions were blinded to group assignment

11a-i) Specify who was blinded, and who wasn't

Specify who was blinded, and who wasn't. Usually, in web-based trials it is not possible to blind the participants [1, 3] (this should be clearly acknowledged), but it may be possible to blind outcome assessors, those doing data analysis or those administering co-interventions (if any).

1 2 3 4 5

Does your paper address subitem 11a-i? * Copy and paste relevant sections from the manuscript (include quotes in quotation marks "lithis" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study No blinding after intervention had commenced. 11a-ii) Discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator" Informed consent procedures (4a-ii) can create biases and certain expectations - discuss e.g whether participants knew which intervention was the "intervention of interest" and which on was the "comparator". 1 2 3 4 5 subitem not at all important 1 2 3 4 5 subitem not at all important 1 0 essential Does your paper address subitem 11a-ii? Copy and paste relevant sections from the manuscript (include quotes in quotation marks "lithis" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study Not clearly addressed in the manuscript. However the information given (written and verbal) given to participants prior to informed consent was obtained stated that the purpose of the study was to investigate the effect of ICBT in patients with	subitem not at all importa	ant O O essential	
11a-ii) Discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator" Informed consent procedures (4a-ii) can create biases and certain expectations - discuss e.g whether participants knew which intervention was the "intervention of interest" and which on was the "comparator". 1 2 3 4 5 subitem not at all important • • • essential Does your paper address subitem 11a-ii? Copy and paste relevant sections from the manuscript (include quotes in quotation marks "likthis" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study Not clearly addressed in the manuscript. However the informed consent was obtained stated that the purpose of the study was to investigate the effect of ICBT in patients with	Copy and paste relevant s this" to indicate direct quo additional information not	sections from the manuscript (include quotes in quotation otes from your manuscript), or elaborate on this item by pr	oviding
"intervention of interest" and which one was the "comparator" Informed consent procedures (4a-ii) can create biases and certain expectations - discuss e.g whether participants knew which intervention was the "intervention of interest" and which on was the "comparator". 1 2 3 4 5 subitem not at all important • essential Does your paper address subitem 11a-ii? Copy and paste relevant sections from the manuscript (include quotes in quotation marks "likthis" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study Not clearly addressed in the manuscript. However the information given (written and verbal) given to participants prior to informed consent was obtained stated that the purpose of the study was to investigate the effect of ICBT in patients with	No blinding after interver	ention had commenced.	
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11b) If relevant, description of the similarity of interventions

(this item is usually not relevant for ehealth trials as it refers to similarity of a placebo or sham intervention to a active medication/intervention)

Does your paper address CONSORT subitem 11b? *

Both intervention (ICBT) and control (moderated discussion forum) were performed thru a web-based platform, requiring the same log-in procedure. Assessments (self-reported online questionnaires and telephone interview at inclusion) was identical. Reminders if assessment forms were not completed were identical. Both interventions regarded the same health problems (heart failure and depressive symptoms).

12a) Statistical methods used to compare groups for primary and secondary outcomes

NPT: When applicable, details of whether and how the clustering by care providers or centers was addressed

Does your paper address CONSORT subitem 12a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Analysis of participants' characteristics was performed with descriptive statistics (mean, standard deviation, percent and frequencies). Differences in continuous variables were analyzed with a t-test. A chi-square test was used for nominal data, and if the expected number of observations was less than five, Fisher's exact test was used. Data was checked for assumptions of normality and primary outcome measurements were found suitable for parametric analysis. All analysis were

12a-i) Imputation techniques to deal with attrition / missing values

Imputation techniques to deal with attrition / missing values: Not all participants will use the intervention/comparator as intended and attrition is typically high in ehealth trials. Specify how participants who did not use the application or dropped out from the trial were treated in the statistical analysis (a complete case analysis is strongly discouraged, and simple imputation techniques such as LOCF may also be problematic [4]).

1 2 3 4 5 subitem not at all important \bigcirc \bigcirc \bigcirc \bigcirc essential

Does your paper address subitem 12a-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"A total of 18.4% of the participants had missing data at the 9W follow-up measurement. Missing values analysis was performed and data missing completely at random (MCAR) was assumed since there were no significant differences between background variables for participants with complete data versus incomplete data, and Little's test for MCAR was not significant (2(111, N = 50) =82.07, P=.98). Missing values were imputed using the expectation-maximization (EM)

12b) Methods for additional analyses, such as subgroup analyses and adjusted analyses

Does your paper address CONSORT subitem 12b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Subgroup analysis was performed on perticipants with	
"Subgroup analysis was performed on participants with complete data."	^
	V

X26) REB/IRB Approval and Ethical Considerations [recommended as subheading under "Methods"] (not a CONSORT item)

X26-i) Comment on ethics committee approval

essential

Does your paper address subitem X26-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

1	^

x26-ii) Outline informed consent procedures

Outline informed consent procedures e.g., if consent was obtained offline or online (how? Checkbox, etc.?), and what information was provided (see 4a-ii). See [6] for some items to be included in informed consent documents.

	1	2	3	4	5	
subitem not at all important	0	0	•	0	0	essential

Does your paper address subitem X26-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"All participants gave written informed consent."
Informed consent was obtained both online (when participants registered there interest for participation in the study, by checkbox) and offline by mailing a signed consent form after the telephone interview (only participants that was not excluded before this stage in the inclusion process).

X26-iii) Safety and security procedures

Safety and security procedures, incl. privacy considerations, and any steps taken to reduce the likelihood or detection of harm (e.g., education and training, availability of a hotline)

	1	2	3	4	5	
subitem not at all important	0	0	0	•	0	essential

Does your paper address subitem X26-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Each participant received a password and an unidentifiable username. Login to the web-portal (to access the treatment program, feedback, secure e-mail, and assessment forms) required a two-factor authentication system to protect sensitive information. If technical problems occurred, both the therapist and the participants could get support from a computer technician."

RESULTS

13a) For each group, the numbers of participants who were randomly assigned, received intended treatment, and were analysed for the primary outcome

NPT: The number of care providers or centers performing the intervention in each group and the number of patients treated by each care provider in each center

Does your paper address CONSORT subitem 13a? *

Yes see figure 1 (flowchart) and table 2 and: "Mean values for PHQ-9 at baseline and 9W follow-up in the two groups (n=25 ICBT and n=25 DF)" "Change in cardiac anxiety (CAQ) — mean values for total score and subscales in the two groups (n=25 ICBT and n=25 DF)" "Change in Minnesota Living with Heart Failure (MLHF) — total score and factors in the two groups (n=25 ICBT and n=25 DF)"

13b) For each group, losses and exclusions after randomisation, together with reasons

Does your paper address CONSORT subitem 13b? (NOTE: Preferably, this is shown in a CONSORT flow diagram) *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes se figure 1 (flowchart)	
	^
	V

13b-i) Attrition diagram

Strongly recommended: An attrition diagram (e.g., proportion of participants still logging in or using the intervention/comparator in each group plotted over time, similar to a survival curve) or other figures or tables demonstrating usage/dose/engagement.

	1	2	3	4	5	
subitem not at all important	0	0	•	0	0	essential

Does your paper address subitem 13b-i?

Copy and paste relevant sections from the manuscript or cite the figure number if applicable (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

U

14a) Dates defining the periods of recruitment and follow-up

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14b) Why the tri Does your paper address Copy and paste relevant sect his" to indicate direct quotes additional information not in or your study	ON ions	SOR fror m yo	T sun the	ubite e mai	m 1	4b? * ript (include qu t), or elaborate	uotes in quotation marks "like on this item by providing
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15) A table showing baseline demographic and clinical characteristics for each group

NPT: When applicable, a description of care providers (case volume, qualification, expertise, etc.) and centers (volume) in each group

Does your paper address CONSORT subitem 15? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study.

Yes, see table 2.	^
	\vee

15-i) Report demographics associated with digital divide issues

In ehealth trials it is particularly important to report demographics associated with digital divide issues, such as age, education, gender, social-economic status, computer/Internet/ehealth literacy of the participants, if known.

	1	2	3	4	5	
subitem not at all important	0	0	0	•	0	essential

Does your paper address subitem 15-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Age and gender reported.	^
	V

16) For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups

16-i) Report multiple "denominators" and provide definitions

Report multiple "denominators" and provide definitions: Report N's (and effect sizes) "across a range of study participation [and use] thresholds" [1], e.g., N exposed, N consented, N used more than x times, N used more than y weeks, N participants "used" the

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17a) For each primary and secondary outcome, results for each group, and the estimated effect size and its precision (such as 95% confidence interval)

Does your paper address CONSORT subitem 17a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing

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N/A no binary outcomes.							^
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18) Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing pre-specified from exploratory

Does your paper address CONSORT subitem 18? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

or your orday	
"Subgroup analysis was performed on participants with complete data."	^
	~

18-i) Subgroup analysis of comparing only users

A subgroup analysis of comparing only users is not uncommon in ehealth trials, but if done, it must be stressed that this is a self-selected sample and no longer an unbiased sample from a randomized trial (see 16-iii).

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subitem not at all important	0	0	0	•	0	essential

Does your paper address subitem 18-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Subgroup anal complete data."	ysis was performed on participants with	

19) All important harms or unintended effects in each group

(for specific guidance see CONSORT for harms)

Does your paper address CONSORT subitem 19? *

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An important part of the evaluation of a intervention. In our manuscript this is not covered because we intend to present a separate manuscript on this with an in-depth qualitative analysis of the participants experiences (data collected and analysis in progress).

DISCUSSION

22) Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence

NPT: In addition, take into account the choice of the comparator, lack of or partial blinding, and unequal expertise of care providers or centers in each group

22-i) Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use)

Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use).

1 2 3 4 5
subitem not at all important \bigcirc \bigcirc \bigcirc \bigcirc essential

Does your paper address subitem 22-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"We found that after using a guide self-help ICBT program patients depressive symptoms and fear was reduced. The results are encouraging in the sense that the depressive symptoms were significantly lower at the 9W follow-up compared to baseline. However, the between group analysis only showed non-significant tendencies in favor of the ICBT group. The lack of significant difference might partly be explained by the slight reduction of depressive symptoms in



22-ii) Highlight unanswered new questions, suggest future research

Highlight unanswered new questions, suggest future research.

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subitem not at all important () () essential

Does your paper address subitem 22-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing

additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The effect of our ICBT program, focusing mainly on depressive symptoms, may therefore be improved by also adding CBT components that focus on worries and anxiety." "Our ICBT program relied to a large extent on behavioral activation and to a lesser extent on problem-solving therapy [17]. The majority of patients with HF are older and vulnerable, which raises an important question of whether problem-solving therapy should be used to a greater extent in

20) Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses

20-i) Typical limitations in ehealth trials

Typical limitations in ehealth trials: Participants in ehealth trials are rarely blinded. Ehealth trials often look at a multiplicity of outcomes, increasing risk for a Type I error. Discuss biases due to non-use of the intervention/usability issues, biases through informed consent procedures, unexpected events.

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subitem not at all important	0	0	•	0	0	essential

Does your paper address subitem 20-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"A major limitation of our study is that it is underpowered. Recruitment of participants was more difficult than expected" "With our study's limitation of sample size and its recruitment difficulties, the results may best serve as a foundation for further research rather than as clinical recommendations."

21) Generalisability (external validity, applicability) of the trial findings

NPT: External validity of the trial findings according to the intervention, comparators, patients, and care providers or centers involved in the trial

21-i) Generalizability to other populations

Generalizability to other populations: In particular, discuss generalizability to a general Internet population, outside of a RCT setting, and general patient population, including applicability of the study results for other organizations

	1	2	3	4	5	
subitem not at all important	0	0	•	0	0	essential



Does your paper address subitem 21-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"With our study's limitation of sample size and its recruitment difficulties, the results may best serve as a foundation for further research rather than as clinical recommendations."

21-ii) Discuss if there were elements in the RCT that would be different in a routine application setting

Discuss if there were elements in the RCT that would be different in a routine application setting (e.g., prompts/reminders, more human involvement, training sessions or other co-interventions) and what impact the omission of these elements could have on use, adoption, or outcomes if the intervention is applied outside of a RCT setting.

Does your paper address subitem 21-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

N/A more research on the study area is needed before elaborating on this.

OTHER INFORMATION

23) Registration number and name of trial registry

Does your paper address CONSORT subitem 23? *

"The study is registered at clinicaltrails.gov (NCT01681771)."	^

24) Where the full trial protocol can be accessed, if available

Does your paper address CONSORT subitem 24? *

Cite a Multimedia Appendix, other reference, or copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

one by explain why the item is not applicable/relevant for you	ai Study
Yes by contact with the research team	^
	V

25) Sources of funding and other support (such as supply of drugs), role of funders

Does your paper address CONSORT subitem 25? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

X27) Conflicts of Interest (not a CONSORT item)

X27-i) State the relation of the study team towards the system being evaluated In addition to the usual declaration of interests (financial or otherwise), also state the relation of the study team towards the system being evaluated, i.e., state if the authors/evaluators are distinct from or identical with the developers/sponsors of the intervention.

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Does your pape	er address subitem X27-i?
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Lung Association Medical Resear numbers FORS Region Östergö LIO-443711 and	funded by grants from the Swedish Heart and on (grant number E087/13 and E08/14), the rch Council of Southeast Sweden (grant SS-374721 and FORSS-470121) and the otland (grant numbers LIO-355611, LIO-374831, d LIO-470271). The funding sources had no e design, procedure, analysis or interpretation of
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As a result of u	sing this checklist, did you make changes in your manuscript? *
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