APPENDIX 1

LEVEL 1: CHARACTERISTICS OF RCTS

Please, report Characteristics
1. Name of the journal (please specify full journal title):
2. What is the country of the corresponding author?
3. State the authors' number
4. What is the year of publication?

Methods Characteristics
5. In the methods, did the authors specify which are the primary and secondary outcomes?
   Yes ☐   No ☐
6. In the methods, how many outcomes are investigated?
7. Please, insert the number of randomized participants included in the RCT (sample size)

Funding
8. Please, state if funding is present
   Yes ☐   No ☐
   If yes specify_____

Please, check all outcomes present in your RCTs
- ☐ pain
- ☐ disability
- ☐ clinical signs of radiculopathy
- ☐ quality of life
- ☐ range of motion
- ☐ recurrence of LBP
- ☐ patient ability to self-help
- ☐ coping
- ☐ confidence
- ☐ satisfaction with care
- ☐ life satisfaction
- ☐ psychological status
- ☐ personality
- ☐ beliefs and fear
- ☐ self-efficacy belief
- ☐ depression
- ☐ anxiety
- ☐ emotional distress
- ☐ number of days to recovery
- ☐ sick leave during initial episode
- ☐ sick leave during recurrence
- ☐ bed day
- ☐ sick day
- ☐ days of reduced activity
- ☐ work absenteeism symptoms
- ☐ physician's clinical impression
- ☐ medication used
- ☐ health care utilization
- ☐ social health
- ☐ endurance
- ☐ strength
- ☐ maximal oxygen consumption
- ☐ cost of health care consumption
- ☐ fatigue
- ☐ trigger points
- ☐ proprioception
- ☐ adverse events
- ☐ other (type text please) _____
- ☐ other (type text please) _____
- ☐ other (type text please) _____
- ☐ other (type text please) _____

LEVEL 2: MOST REPORTED OUTCOMES

For the four most reported outcomes, completeness of outcome reporting was assessed. As an example, we report the data collection form for pain.
1. Was the concept/dimension (outcome) under evaluation clearly defined (e.g., pain)?
   Yes ☐   No ☐
2. Was the specific instrument use to measure the outcome reported (e.g., visual analogue scale, VAS)?
   Yes ☐   No ☐
3. Was the process of measurement of the outcome fully described? Were the instrument properties or operationalization of the construct reported (e.g., VAS from 0 to 100) ?
   Yes ☐   No ☐
4. Were the validity and reliability of the instrument proved (in the study or reference to a validation study provided)?
   Yes ☐   No ☐
5. Was the follow-up schedule detailed? (e.g., outcome was assessed at week 4 and week 10 since physio-therapy was completed)?
   Yes ☐   No ☐
6. Was the assessor of the outcome stated? (e.g., VAS delivered by a physical therapist)?
   Yes ☐   No ☐
7. Where data collection method clearly specified? (e.g., paper, telephone, electronic, other)?
   Yes ☐   No ☐
8. In the methods , was the process to protect against bias reported (e.g., independent outcome assessor blinded to treatment allocation)?
   Yes ☐   No ☐
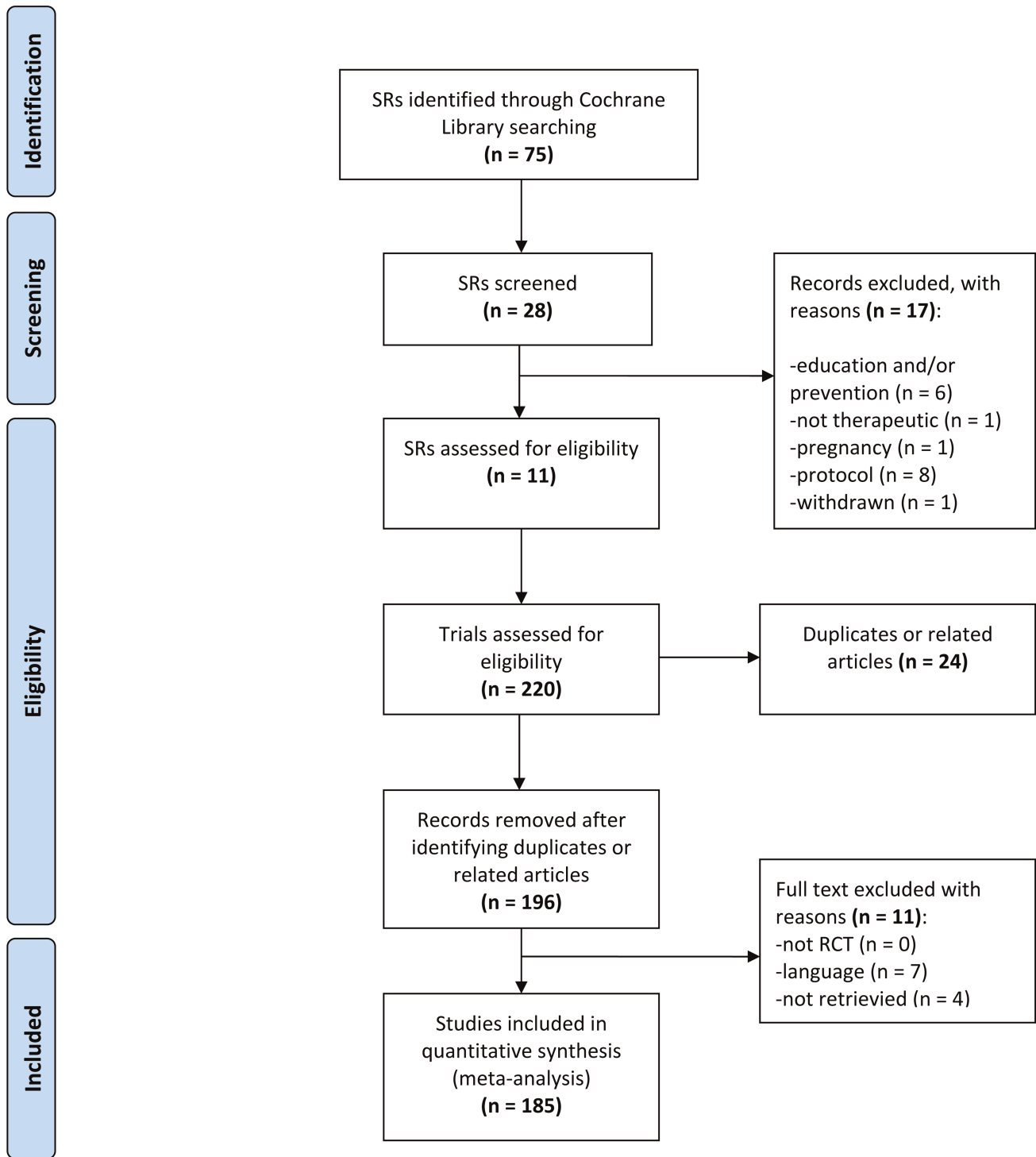
Additional questions about quality of reporting
9. Was the process assessed in blinding? Clear Response
   ☐ yes (reported as "yes")
   ☐ no (reported as "no")
   ☐ unclear (information not reported, can't tell)
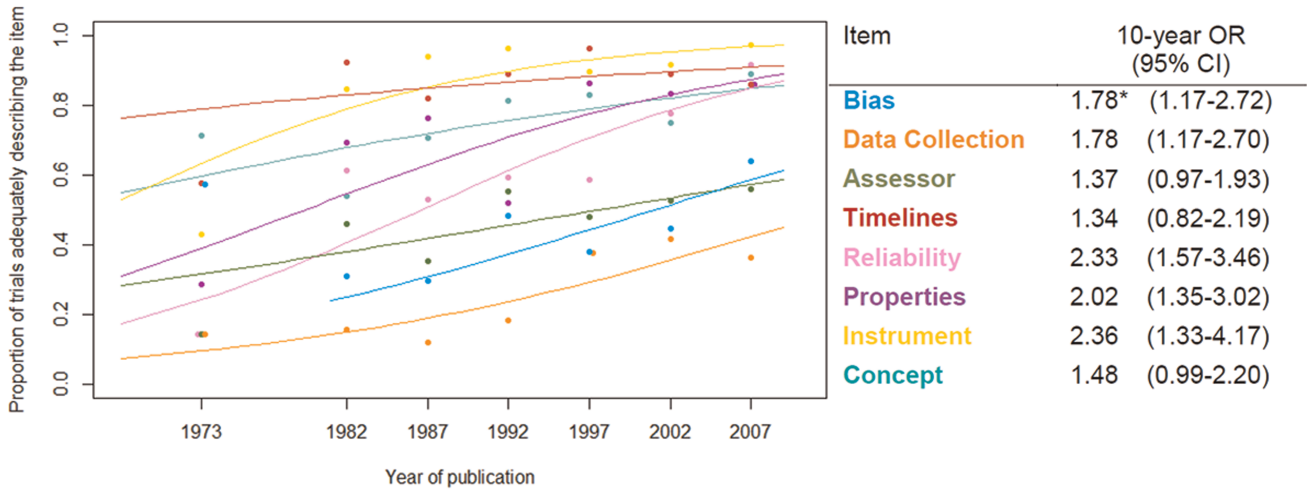
Pain measurement instruments

Check the measurement instruments reported

- ☐ VAS 0–10 cm
- ☐ VAS 0–100 cm
- ☐ 9-point numeric scale
- ☐ 11-point numeric scale
- ☐ 10-point numeric scale
- ☐ 4-point numeric scale
- ☐ 5-point numeric scale
- ☐ Standardised Nordic questionnaire
- ☐ WHYMPI
- ☐ 101-point numeric scale
- ☐ The Pain Perception Profile
- ☐ Brief Pain Inventory
- ☐ The Pain and Distress Scale
- ☐ affective Vas
- ☐ p-vas
- ☐ BOX
- ☐ duration
- ☐ frequency
- ☐ dVAS
- ☐ intensity of back pain
- ☐ NRS
- ☐ Manniche's Low Back Pain Rating Scale
- ☐ McGill
- ☐ modified Borg
- ☐ Pain Questionnaire developed by Carlsson
- ☐ Pain Rating Index
- ☐ Relief of pain—percentage
- ☐ VAS sensory
- ☐ not reported
- ☐ other (type text)

Identification

Screening

Eligibility

Included

SRs identified through Cochrane
Library searching
(n = 75)

SRs screened
(n = 28)

Records excluded, with
reasons **(n = 17)**:

-education and/or
prevention (n = 6)
-not therapeutic (n = 1)
-pregnancy (n = 1)
-protocol (n = 8)
-withdrawn (n = 1)

SRs assessed for eligibility
(n = 11)

Trials assessed for
eligibility
(n = 220)

Duplicates or related
articles **(n = 24)**

Records removed after
identifying duplicates or
related articles
(n = 196)

Full text excluded with
reasons **(n = 11)**:
-not RCT (n = 0)
-language (n = 7)
-not retrievied (n = 4)

Studies included in
quantitative synthesis
(meta-analysis)
(n = 185)

Figure S1 Description of the study selection (flowchart).
SR = systematic review.

Item	10-year OR (95% CI)	
Bias	1.78*	(1.17-2.72)
Data Collection	1.78	(1.17-2.70)
Assessor	1.37	(0.97-1.93)
Timelines	1.34	(0.82-2.19)
Reliability	2.33	(1.57-3.46)
Properties	2.02	(1.35-3.02)
Instrument	2.36	(1.33-4.17)
Concept	1.48	(0.99-2.20)

Figure S2   Relationship between adequate reporting and publication year for the pain outcome.
Note: Data points represent the proportion of RCTs reporting the eight items by 5-year publication time periods (except for the first time interval from 1967 to 1980). The continuous curves display the relationship between the reporting of each item and the year of publication, estimated from the logistic model and back-transformed on the proportion scale. The 10-year OR from the univariate model is also reported for each item.
*The reported OR refers to the regression model, including studies published starting in 1980, the year that the increasing trend in reporting is linear on the logit scale.
RCT = randomized controlled trial; OR = odds ratio.

Item	10-year OR (95% CI)	
Bias	2.54	(1.40-4.59)
Data Collection	1.87	(1.04-3.37)
Assessor	1.45	(0.87-2.40)
Timelines	1.28	(0.63-2.60)
Reliability	5.64	(2.38-13.34)
Properties	1.07	(0.64-1.81)
Instrument	4.90	(1.59-15.09)
Concept	1.47	(0.84-2.59)
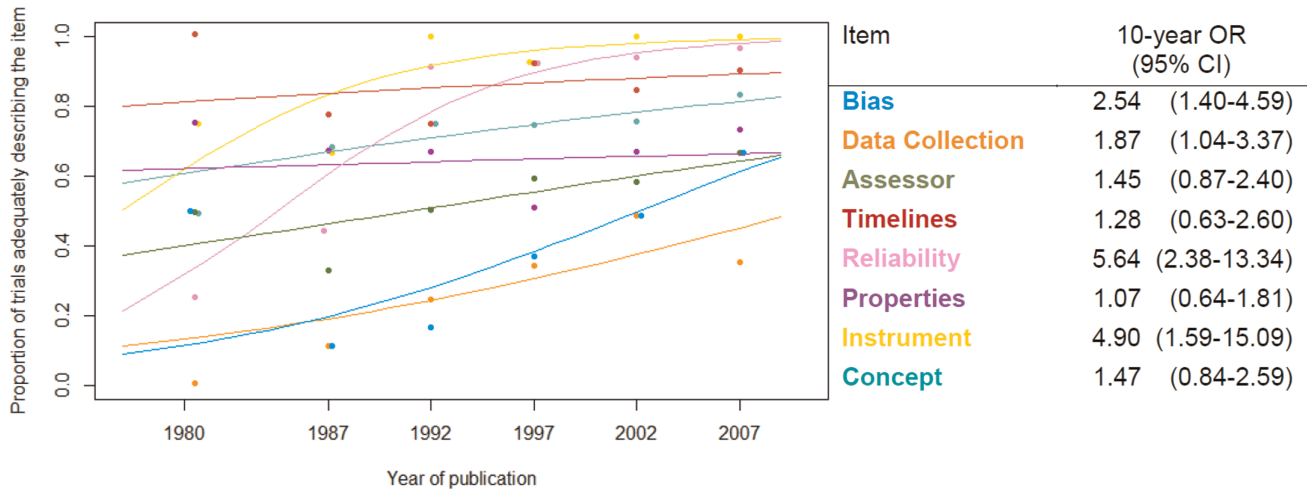
Figure S3   Relationship between adequate reporting and publication year for the disability outcome.
Note: Data points represent the proportion of RCTs reporting the eight items by 5-year publication time periods (except for the first time interval from 1977 to 1985). The continuous curves display the relationship between the reporting of each item and the year of publication, estimated from the logistic model and back-transformed on the proportion scale. The 10-year OR from the univariate model is also reported for each item.
RCT = randomized controlled trial; OR = odds ratio.

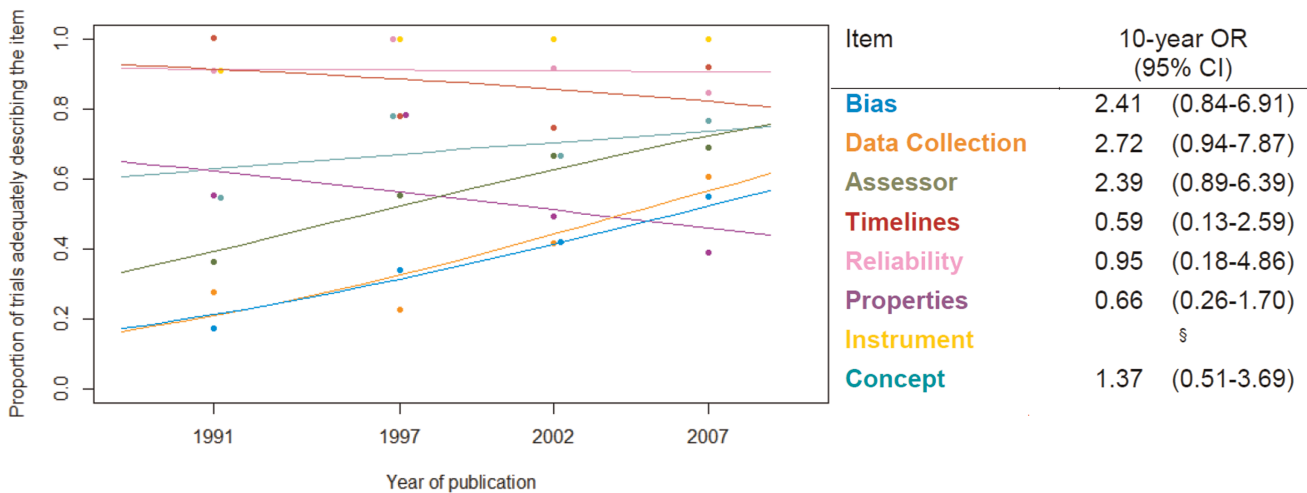| Item	10-year OR (95% CI)	
Bias	1.24	(0.77-1.99)
Data Collection	1.25	(0.71-2.22)
Assessor	1.19	(0.74-1.92)
Timelines	1.14	(0.57-2.28)
Reliability	1.42	(0.87-2.30)
Properties	1.78	(1.06-3.00)
Instrument	4.41*	(1.65-11.78)
Concept	1.70	(0.90-3.22)
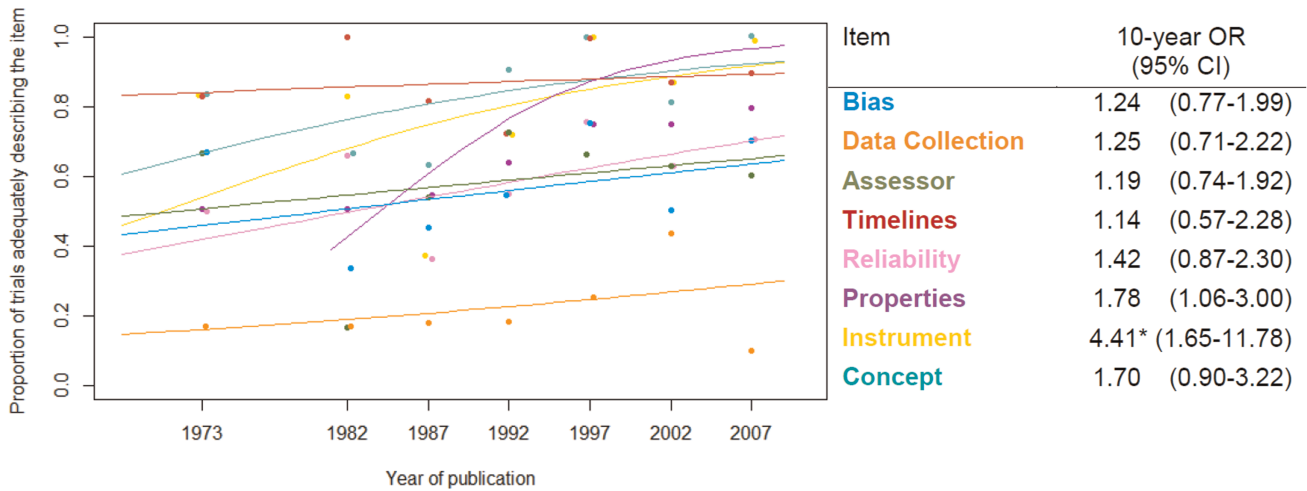
Figure S4 Relationship between adequate reporting and publication year for the range of motion outcome.
Note: Data points represent the proportion of RCTs reporting the eight items by 5-year publication time periods (except for the first time interval from 1967 to 1980). The continuous curves display the relationship between the reporting of each item and the year of publication, estimated from the logistic model and back-transformed on the proportion scale. The 10-year OR from the univariate model is also reported for each item.
*The reported OR refers to the regression model, including only studies published from 1980, year that the increasing trend in reporting began to be linear on the logit scale.
RCT = randomized controlled trial; OR = odds ratio.

Item	10-year OR (95% CI)	
Bias	2.41	(0.84-6.91)
Data Collection	2.72	(0.94-7.87)
Assessor	2.39	(0.89-6.39)
Timelines	0.59	(0.13-2.59)
Reliability	0.95	(0.18-4.86)
Properties	0.66	(0.26-1.70)
Instrument	§	
Concept	1.37	(0.51-3.69)

Figure S5 Relationship between adequate reporting and publication year for the HRQOL outcome.
Note: Data points represent the proportion of RCTs reporting the eight items by 5-year publication time periods (except for the first time interval from 1988 to 1995). The continuous curves display the relationship between the reporting of each item and the year of publication, estimated from the logistic model and back-transformed on the proportion scale. The 10-year OR from the univariate model is also reported for each item.
*It is not possible to fit the logistic model for Instrument as the proportion was almost always close to 1.
RCT = randomized controlled trial; OR = odds ratio.