

Characteristics of mobile app and SMS mHealth interventions for physical and mental health.

Author (year) and app	Trial type and primary outcome measure	Intervention and control group	Main findings	Within F and between g effect size
Abroms et al [53] Quit4baby	Within-group Pregnancy smoking cessation	Intervention n=20 Control Not applicable (N/A)	High retention rate. Highly rated aspects of program. Reportedly helpful for cessation and psychoeducation	Smoking cessation $d=0.12_{a,f}$
Abroms et al [54] Text2Quit	Randomized controlled trial (RCT) Smoking cessation	Intervention n=262 Control n=241	Biochemically confirmed abstinence favored the intervention group	N/A
Buller et al [58] REQ-Mobile	RCT Smoking cessation	Intervention n=51 Control n=51	App was a feasible method of smoking cessation	Point-prevalence abstinence $d=0.45_{a,g,i}$ $d=0.30_{b,g}$ $d=0.13_{d,g}$ $d=0.27_{e,g}$
Choi et al [59] Unnamed	RCT Inactivity of pregnant women	Intervention n=15 Control n=15	Intervention group reported lower perceived barrier to being active, lack of energy than the control group	Steps per day $d=0.05_{b,g}$ $d=0.16_{c,g}$ $d=0.48_{d,g}$ $d=3.25_{b,f}$ $d=3.08_{c,f}$ $d=3.10_{d,f}$ Center for Epidemiologic Studies Depression Scale (CES-D) $d=0.2_{d,f}$ $d=0.17_{a,g}$ $d=0.44_{d,g}$
Glynn et al [60] SMART MOVE	RCT Physical activity and perceived health state	Intervention n=37 Control n=40	Significant increase of physical activity	Step count $d=0.23_{a,g}$ $d=0.26_{c,g}$ $d=0.08_{c,f}$ $d=0.42_{c,f,h}$ EuroQol-Visual Analogue Scale

				(EQ-VAS) $d=0.56_{c,f}$ $d=0.32_{c,f}$ $d=0.05_{a,g}$ $d=0.15_{c,g}$
Harries et al [61] bActive	RCT Physical activity	Intervention (a) n=53 Intervention (b) n=50 Control n=49	Individual and social weekly feedback groups had significantly higher amount of steps	N/A
Hertzberg et al [62] mCM	RCT Smoking cessation	Intervention n=11 Control n=11	High compliance rates + mobile Contingency Management (mCM) may be a useful adjunctive smoking cessation treatment	N/A
Lee et al [55] mScreening	Within-group Psychoeducation	Intervention n=30 Control N/A	High usage rate and significant increase in cervical cancer psychoeducation	Knowledge about human papillomavirus (HPV) and vaccination $d=1.4_{a,f,j}$
McGillicuddy et al [63] FORA device	RCT Medication adherence	Intervention n=9 Control n=10	High participation and retention rates. mHealth intervention group exhibited significant improvements in medication adherence and significant reductions in clinic-measured systolic blood pressures	Medication adherence $d=0.63_{b,f}$ $d=0.80_{c,f}$ $d=0.86_{d,f}$ $d=0.77_{b,g}$ $d=0.88_{c,g}$ $d=1.02_{d,g}$
Mira et al [64] ALICE	RCT Medication adherence	Intervention n=51	Experimental group missed fewer doses of medication.	Morisky Medication Adherence Scale-4 (MMAS-4)

		Control n=51	Higher adherence, fewer missed doses, and fewer medication errors in patients with no experience of using information and communication technology (ICT). Furthermore, 88% of participants agreed ALICE improved medication management	$d=0.12_{a,f,j}$ $d=0.07_{a,f}$ $d=0.12_{a,g,j}$ Self-perceived health status $d=0.04_{a,f}$ $d=0.20_{a,f}$ $d=0.30_{a,g}$
Park et al [56] Unnamed	RCT Medication adherence	Intervention (a) n=30 Intervention (b) n=30 Control n=30	Text message (TM) shown higher correct doses	MMAS-8 $d=0.22_{b,g}$ $d=0.40_{b,g}$ $d=0.16_{b,g}$ $d=0.16_{b,f}$ $d=0.48_{b,f}$ $d=0.57_{b,f}$
Partridge et al [78] TXT2BFIT	RCT Weight management	Intervention n=125 Control n=125	Adherence to calls and short message service (SMS) exceeded 90%. At 12-week follow-up, intervention group had lost more weight, ate less sugar and takeout meals, and consumed more vegetables than control. Also increased physical activity	Weight management $d=0.17_{d,f}$ $d=0.02_{d,f,i}$ $d=0.26_{d,g,i}$ Body mass index (BMI) $d=0.42_{d,f,j}$ $d=0.12_{d,f,h}$ $d=0.19_{d,g,h}$
Turner-McGrievy	RCT	Intervention	Podcast + mobile	Weight loss $d=0.02_{e,f}$

and Tate [65] Mobile POD	Weight loss	n=47 Control n=49	were 3.5 times more likely than podcast to use intervention	$d=0.02_{e,f}$ $d=0.00_{d,g}$ $d=0.00_{d,g}$
Laing et al [66] My-FitnessPal	RCT Weight loss and dietary intake	Intervention n=105 Control n=107	Significant increase in self-monitoring of calorie intake	N/A
Arean et al [67] Project: EVO iPST Health Tips	RCT Depression	Intervention (a) n=209 Intervention (b) n=211 Control n=216	Cognitive control (CC) + problem-solving therapy (PST) had a greater effect on mood than information control (IC)	Patient Health Questionnaire -9 (PHQ-9) $d=0.81_{b,f}$ $d=1.02_{d,f}$ $d=0.96_{b,f}$ $d=1.22_{d,f}$ $d=0.12_{a,g}$ $d=0.20_{b,g}$ $d=0.32_{d,g}$
Kinderman et al [68] Catch it	Within-group Depression	Intervention n=285 Control N/A	Negative mood decreased and positive mood increased	Negative and positive mood $d=0.69_{a,f}$ $d=0.17_{a,f}$
Kuhn et al [69] PTSD Coach	Within-group and Qualitative Post-traumatic stress syndrome (PTSD)	Intervention n=45 Control N/A	Results show app is an effective self-management tool for PTSD	N/A
Proudfoot et al [70] myCompass	RCT Depression + anxiety + stress	Intervention (a) n=242 Intervention (b) n=248 Control n=230	Results show significantly greater improvement in depression, anxiety, and stress and social functioning symptoms. Symptoms remained same at 3-month follow-up	Depression and Anxiety Stress Scale (DASS) Depression (myCompass) $d=0.50_{a,f}$ $d=0.34_{b,f}$ $d=0.46_{a,g}$ (Attention control) $d=0.13_{a,f}$ $d=0.27_{b,f}$ $d=0.10_{a,g}$ DASS Anxiety

				<p>(myCompass) $d=0.25_{a,f}$ $d=0.52_{b,f}$ $d=0.46_{a,g}$ (Attention control) $d=0.13_{a,f}$ $d=0.27_{b,f}$ $d=0.13_{a,g}$</p> <p>DASS Stress (myCompass) $d=0.41_{a,f}$ $d=0.47_{b,f}$ $d=0.35_{a,g}$ (Attention control) $d=0.20_{a,f}$ $d=0.27_{b,f}$ $d=0.35_{a,g}$</p>
Pramana et al [71] SmartCAT	Within-group Anxiety	Intervention n=9 Control N/A	App was highly usable and reduced childhood anxiety with brief cognitive behavioral therapy (CBT)	N/A
Whittaker et al [57] MEMO	RCT Depression	Intervention n=426 Control n=429	Significantly assisted participants to rid their selves of negative thoughts	Increased positivity $d=1.19_{a,g,j}$ Use the Internet safely $d=3.37_{a,g,j}$
Kauer et al [72]	RCT Depression	Intervention n=69 Control n=49	Indirect effect of intervention on depressive symptoms via Emotional Self Awareness (ESA) statistically significant	<p>DASS Stress: $d=0.37_{a,f}$ $d=0.59_{b,f,j}$ $d=0.14_{a,g}$ $d=0.22_{b,g}$</p> <p>DASS Anxiety: $d=0.31_{b,f}$ $d=0.45_{b,f,h}$ $d=0.25_{a,g}$ $d=0.07_{b,g}$</p> <p>DASS Depression: $d=0.34$ $d=0.64_{b,j}$ $d=0.11_{a,g}$</p>

				$d=0.09_{b,g}$ ESA: $d=0.31_a$ $d=0.66_{b,h}$ $d=0.09_{a,g,j}$ $d=0.58_{b,g,h}$
Watts et al [27] Get Happy programme	RCT Depression	Intervention $n=22$ Control $n=30$	Mobile and computer groups had statistically significant benefits in PHQ-9 posttest. This remained true still at 3-month follow-up	PHQ-9 $d=1.56_{a,f,j}$ $d=-0.14_{a,g}$ $d=1.69_{b,f,j}$ $d=-0.28_{b,g}$ Beck Depression Inventory-II (BDI-II) $d=1.90_{a,f,j}$ $d=-0.11_{a,g}$ $d=2.11_{b,f,j}$ $d=-0.48_{b,g}$
Ben-Zeev et al [73] FOCUS	Within-group Schizophrenia	Intervention $n=33$ Control N/A	FOCUS shown significant reductions in psychotic symptoms, depression, and general psychopathology after 1-month usage	BDI-II $d=0.50_{a,e,g}$ Positive and Negative Syndrome Scale (PANSS) Positive scale $d=0.70_{a,e,h}$ Negative scale $d=0.20_{a,e}$ General psychopathology scale $d=0.73_{a,e,g}$
Torous et al [74] Mindful Moods	Within-group Major depressive disorder (MDD)	Intervention $n=13$ Control N/A	High adherence and perceived levels of confidentiality	N/A
Hidalgo-Mazzei et al [75] SIMPLe	Within-group Psychoeducation	Intervention $n=51$ Control N/A	Feasible intervention for self-management in bipolar	N/A

Pham et al [76] Flowy	RCT Common mental health disorders	Intervention n=31 Control n=32	High usage and reduction in anxiety, panic, and self-report hyperventilation scores	Generalized anxiety disorder-7 (GAD-7) $d=0.41_{a,f}$ $d=0.03_{a,g}$ Panic Disorder Severity Scale-Self Report (PDSS-SR) $d=0.30_{a,f}$ $d=0.21_{a,g}$ Quality of Life Enjoyment and Satisfaction Questionnaire (Q-LES-Q-SF) $d=0.50_{a,g,h}$ $d=0.51_{a,g,h}$
Ly et al [77] Unnamed	RCT Stress	Intervention n=36 Control n=37	Mobile app stress intervention based on Acceptance and Commitment Therapy (ACT) reduces perceived stress and increase general health	Generalized Health Questionnaire (GHQ-12) $d=0.41_{a,f}$ $d=0.37_{a,g}$ Perceived Stress Scale-14 (PSS-14) $d=0.50_{a,f}$ $d=0.62_{a,g}$ Multifactor Leadership Questionnaire (MLQ, trans) $d=0.49_{a,f}$ $d=0.35_{a,g}$

^a immediately posttest.

^b1-month follow-up

^c2-month follow-up.

^d3-month follow-up.

^e6-month follow-up.

^wwithin-group effect.

^gbetween-group effect.

^h $P < .05$.

ⁱ $P < .01$.

^j $P < .001$.

- [53]Abroms, L. C., Johnson, P. R., Heminger, C. L., Van Alstyne, J. M., Leavitt, L. E., Schindler-Ruwisch, J. M., & Bushar, J. A. Quit4baby: results from a pilot test of a mobile smoking cessation program for pregnant women. *JMIR Mhealth Uhealth*. 2015 Jan 23;3(1):e10. doi: 10.2196/mhealth.3846. PMID: 25650765
- [54]Abroms, L. C., Boal, A. L., Simmens, S. J., Mendel, J. A., & Windsor, R. A. A randomized trial of Text2Quit: a text messaging program for smoking cessation. *American journal of preventive medicine*, 47(3), 242-250. *Am J Prev Med*. 2014 Sep;47(3):242-50. doi: 10.1016/j.amepre.2014.04.010. Epub 2014 Jun 6. PMID: 24913220
- [58]Buller, D. B., Borland, R., Bettinghaus, E. P., Shane, J. H., & Zimmerman, D. E. Randomized trial of a smartphone mobile application compared to text messaging to support smoking cessation. *Telemed J E Health*. 2014 Mar;20(3):206-14. doi: 10.1089/tmj.2013.0169. Epub 2013 Dec 18. PMID: 24350804
- [59]Choi, J., hyeon Lee, J., Vittinghoff, E., & Fukuoka, Y. mHealth physical activity intervention: a randomized pilot study in physically inactive pregnant women. *Matern Child Health J*. 2016 May;20(5):1091-101. doi: 10.1007/s10995-015-1895-7. PMID: 26649879
- [60]Glynn, L. G., Hayes, P. S., Casey, M., Glynn, F., Alvarez-Iglesias, A., Newell, J., ... & Murphy, A. W. Effectiveness of a smartphone application to promote physical activity in primary care: the SMART MOVE randomised controlled trial. *Br J Gen Pract*. 2014 Jul;64(624):e384-91. doi: 10.3399/bjgp14X680461. PMID: 24982490
- [61]Harries, T., Eslambolchilar, P., Stride, C., Rettie, R., & Walton, S. (2013, September). Walking in the wild—Using an always-on smartphone application to increase physical activity. In *IFIP Conference on Human-Computer Interaction* (pp. 19- 36). Springer Berlin Heidelberg.
- [62]Hertzberg, J. S., Carpenter, V. L., Kirby, A. C., Calhoun, P. S., Moore, S. D., Dennis, M. F., ... & Beckham, J. C. Mobile contingency management as an adjunctive smoking cessation treatment for smokers with posttraumatic stress disorder. *Nicotine Tob Res*. 2013 Nov;15(11):1934-8. doi: 10.1093/ntr/ntt060. Epub 2013 May 3. PMID: 23645606
- [55] Lee, H. Y., Koopmeiners, J. S., Rhee, T. G., Raveis, V. H., & Ahluwalia, J. S. Mobile phone text messaging intervention ulfor cervical cancer screening: changes in knowledge and behavior pre-post intervention. *J Med Internet Res*. 2014 Aug 27;16(8):e196. doi: 10.2196/jmir.3576. PMID: 25164545
- [63]McGillicuddy, J. W., Gregoski, M. J., Weiland, A. K., Rock, R. A., Brunner-Jackson, B. M., Patel, S. K., ... & Treiber, F. A. Mobile health medication adherence and blood pressure control in renal transplant recipients: a proof-of-conceprandomized controlled trial. *JMIR Res Protoc*. 2013 Sep 4;2(2):e32. doi: 10.2196/resprot.2633. PMID: 24004517
- [64]Mira, J. J., Navarro, I., Botella, F., Borrás, F., Nuño-Solinís, R., Orozco, D., ... & Toro, N. A Spanish pillbox app for elderly patients taking multiple medications: randomized controlled trial. *J Med Internet Res*. 2014 Apr 4;16(4):e99. doi: 10.2196/jmir.3269. PMID: 24705022
- [56] Park, L. G., Howie-Esquivel, J., Chung, M. L., & Dracup, K. A text messaging intervention to promote medication adherence for patients with coronary heart disease: a randomized controlled trial. *Patient Educ Couns*. 2014 Feb;94(2):261- 8. doi: 10.1016/j.pec.2013.10.027. Epub 2013 Nov 18. PMID: 24321403
- [78] Partridge, S. R., McGeechan, K., Hebden, L., Balestracci, K., Wong, A. T., Denney-Wilson, E., ... & Allman-Farinelli, M. Effectiveness of a mHealth lifestyle program with telephone support (TXT2BFiT) to prevent unhealthy weight gain in young adults: randomized controlled trial. *JMIR Mhealth Uhealth*. 2015 Jun 15;3(2):e66. doi: 10.2196/mhealth.4530. PMID: 26076688
- [65]Turner-McGrievy, G., & Tate, D. Tweets, Apps, and Pods: Results of the 6-month Mobile Pounds Off Digitally (Mobile POD) randomized weight-loss intervention among adults. *J Med Internet Res*. 2011 Dec 20;13(4):e120. doi: 10.2196/jmir.1841. PMID: 22186428
- [66]Laing, B. Y., Mangione, C. M., Tseng, C. H., Leng, M., Vaisberg, E., Mahida, M., ... & Bell, D. S. Effectiveness of a smartphone application for weight loss compared with usual Care in Overweight Primary Care PatientsA randomized, controlled TrialSmartphone application for weight loss in overweight primary care patients. *Ann Intern Med*. 2014 Nov 18;161(10 Suppl):S5-12. doi: 10.7326/M13-3005. PMID: 25402403
- [67]Areal, P. A., Hallgren, K. A., Jordan, J. T., Gazzaley, A., Atkins, D. C., Heagerty, P. J., & Anguera, J. A. The Use and Effectiveness of Mobile Apps for Depression: Results From a Fully Remote Clinical Trial. *J Med Internet Res*. 2016 Dec 20;18(12):e330. doi: 10.2196/jmir.6482. PMID: 27998876
- [68]Kinderman, P., Hagan, P., King, S., Bowman, J., Chahal, J., Gan, L., ... & Tai, S. The feasibility and effectiveness of Catch It, an innovative CBT smartphone app. *BJPsych Open*. 2016 May 13;2(3):204-209. eCollection 2016. PMID: 27703777

- [69]Kuhn, E., Greene, C., Hoffman, J., Nguyen, T., Wald, L., Schmidt, J., ... & Ruzek, J. Preliminary evaluation of PTSD Coach, a smartphone app for post-traumatic stress symptoms. *Mil Med.* 2014 Jan;179(1):12-8. doi: 10.7205/MILMED-D-13-00271. PMID: 24402979
- [70]Proudfoot, J., Clarke, J., Birch, M. R., Whitton, A. E., Parker, G., Manicavasagar, V., ... & Hadzi-Pavlovic, D. Impact of a mobile phone and web program on symptom and functional outcomes for people with mild-to-moderate depression, anxiety and stress: a randomised controlled trial. *BMC Psychiatry.* 2013 Nov 18;13:312. doi: 10.1186/1471-244X-13-312. PMID: 24237617
- [71]Pramana, G., Parmanto, B., Kendall, P. C., & Silk, J. S. (2014). The SmartCAT: an m-health platform for ecological momentary intervention in child anxiety treatment. *Telemed J E Health.* 2014 May;20(5):419-27. doi: 10.1089/tmj.2013.0214. Epub 2014 Feb 28. PMID: 24579913
- [57] Whittaker, R., Merry, S., Stasiak, K., McDowell, H., Doherty, I., Shepherd, M., ... & Rodgers, A. MEMO—a mobile phone depression prevention intervention for adolescents: development process and postprogram findings on acceptability from a randomized controlled trial. *J Med Internet Res.* 2012 Jan 24;14(1):e13. doi: 10.2196/jmir.1857. PMID: 22278284
- [72] Kauer, S. D., Reid, S. C., Crooke, A. H. D., Khor, A., Hearps, S. J. C., Jorm, A. F., ... & Patton, G. Self-monitoring using mobile phones in the early stages of adolescent depression: randomized controlled trial. *J Med Internet Res.* 2012 Jun 25;14(3):e67. doi: 10.2196/jmir.1858. PMID: 22732135
- [27] Watts, S., Mackenzie, A., Thomas, C., Griskaitis, A., Mewton, L., Williams, A., & Andrews, G. CBT for depression: a pilot RCT comparing mobile phone vs. computer. *BMC Psychiatry.* 2013 Feb 7;13:49. doi: 10.1186/1471-244X-13-49. PMID: 23391304
- [73]Ben-Zeev, D., Brenner, C. J., Begale, M., Duffecy, J., Mohr, D. C., & Mueser, K. T. Feasibility, acceptability, and preliminary efficacy of a smartphone intervention for schizophrenia. *Schizophr Bull.* 2014 Nov;40(6):1244-53. doi: 10.1093/schbul/sbu033. Epub 2014 Mar 8. PMID: 24609454
- [74]Torous, J., Staples, P., Shanahan, M., Lin, C., Peck, P., Keshavan, M., & Onnela, J. P. Utilizing a personal smartphone custom app to assess the patient health questionnaire-9 (PHQ-9) depressive symptoms in patients with major depressive disorder. *JMIR Ment Health.* 2015 Mar 24;2(1):e8. doi: 10.2196/mental.3889. PMID: 26543914
- [75]Hidalgo-Mazzei, D., Mateu, A., Reinares, M., Murru, A., del Mar Bonnín, C., Varo, C., ... & Vieta, E. (2016). Psychoeducation in bipolar disorder with a SIMPLe smartphone application: Feasibility, acceptability and satisfaction. *J Affect Disord.* 2016 Aug;200:58-66. doi: 10.1016/j.jad.2016.04.042. Epub 2016 Apr 20. PMID: 27128358
- [76]Pham, Q., Khatib, Y., Stansfeld, S., Fox, S., & Green, T. Feasibility and efficacy of an mHealth game for managing anxiety: "Flowy" randomized controlled pilot trial and design evaluation. *Games Health J.* 2016Feb;5(1):50-67. doi: 10.1089/g4h.2015.0033. Epub 2015 Nov 4. PMID: 26536488
- [77]Ly, K. H., Asplund, K., & Andersson, G. (2014). Stress management for middle managers via an acceptance and commitment-based smartphone application: A randomized controlled trial. *Internet Interventions*, 1(3), 95-101.