

Supplementary Table 1. Generic questionnaire assessing health-related quality of life

Questionnaire	Item	Structure	Scoring system	Advantage	Disadvantage
SF-36	36 Likert scale	Two summary components: physical component summary+mental component summary Eight domains: physical functioning, physical role, bodily pain, general health, vitality, social functioning, emotional role, mental health	All domains and summary scores expressed as T-scores. Higher scores mean better HRQoL.	Easy to complete, higher sensitivity, most widely used questionnaire, multiple language versions, norm based scoring, shorter forms available (SF-8, SF-12)	License fee, need to use scoring algorithms, different normative data according to population
SIP	136 dichotomous scale	Twelve domains in 3 dimensions: 1) Independent dimension: sleep & rest, eating, work, home management, recreation & pastimes. 2) Physical dimension: ambulation, mobility, body care, movement. 3) Psychosocial dimension: social interaction, alertness, behavior, emotional behavior, communication.	All domains and overall scores expressed as scales (0–100). Higher scores mean worse HRQoL.	Widely used, comparable with other diseases	Burdensome to respond for severe patients, license fee to use, no validated foreign language forms
NHP	45 Likert scale	Six domain scores: energy, pain, emotional reaction, sleep, social isolation, physical abilities. Seven life areas affected: occupation, jobs in home, home life, social life, sex, hobbies, holidays,	Domain scores expressed as scales (0–100). Higher scores mean worse HRQoL.	No license fee, short time to complete, validated foreign language forms	Less used in liver disease patients

SF-36, Medical Outcomes Study Short Form-36; HRQoL, health-related quality of life; SIP, Sickness Impact Profile; NHP, Nottingham health profile.