## **Appendix 1.** Study characteristics.

Study ID (Author / year / reference)	Location of study	N	Study arms	Trial registration / study protocol	Recruitment	Depression Diagnosis	Clinical phase of depress-ion management	Implementat ion in mental health care	Age – M (SD)	Sex (% of females)	Primar outcon applica for me analysi	ne ability ta-
											PT- Depres sion scores (yes / no)	PT- Drop- out rates (yes / no)
Agyapong (2017) [35]	Canada	73	1) Supportive text messages 2) control text messages	no / no	Secondary care (recruited via four community mental health care clinics)	MDD	Acute treatment	Stand-alone intervention	ND	68.5	yes	yes
Andersson (2013) [36]	Sweden	69	1) Internet-based cognitive behavioral therapy 2) in-person group cognitive behavioral therapy	no / no	Community (advertisements)	MDD (71.0% in recurrent episode, 1.45% in single episode, Dysthymia (6.0%), MDD plus dysthymia 21.7%)	Acute treatment	Stand-alone intervention	42.3 (13.5)	78.3	yes	yes
Arjadi (2018) [37]	Indonesi a	313	1) Internet-based behavioral activation intervention 2) Online psychoeducation	yes / yes	Community (advertisements) & referrals from institutions or mental health professionals	MDD (mild (24.16%), moderate (31.19%), severe 40.89%, based on PHQ-9)	Acute treatment	Stand-alone intervention	ND	80.8	yes	yes

Berger (2011) [38]	Switzerl and, German Y	76	1) Guided internet- based CBT 2) unguided internet-based CBT 3) waiting list	no / no	Community (advertisements)	MDD, Dysthymia (9.2%); MDD severity (mild (22.4%), moderate (60.5%), severe (7.9%), based on BDI-II scores)	Acute treatment	Stand-alone intervention	38.8 (14.0)	69.7	yes	yes
Berger (2018) [39]	German y	98	1) regular f2f psychotherapy plus internet-based CBT (Deprexis) 2) regular f2f psychotherapy	yes / yes	Secondary care (outpatient psychotherapeuti c practices)	(ICD-10; F32 Depressive Episode, F33 Recurrent Depressive Disorder, F34 Persistent Affective Disorder, F38 Other Affective Disorder, F39 Unspecified Affective Disorder)	Acute treatment	Blended treatment	43.1 (12.0)	66.3	yes	no
Blackwell (2015) [40]	UK	150	1) imagery cognitive bias modification 2) control condition (without training contingency, which was provided for other intervention arm)	yes / no	Community (advertisements)	MDD	Acute treatment	Stand-alone intervention	ND	68.7	yes	yes
Bowers (1993) [41]	USA	22	1) TAU 2) TAU plus therapist delivered CBT	no / no	Secondary care (inpatient psychiatry service)	MDD	Acute treatment	Blended treatment	ND	68.2	yes	no

			3) TAU plus computer assisted CBT									
Carlbring (2013) [42]	Sweden	80	1) Computer- administered therapy 2) waiting list	no / no	Community (advertisement)	MDD	Acute treatment	Stand-alone intervention	44.50 (13.50)	82.5	yes	no
Celano (2017) [43]	USA	65	1) Positive psychology 2) cognition focused condition	yes / no	Secondary care (inpatient psychiatric units)	MDD	Acute treatment	Enhanced stand-alone intervention	ND	69.2	yes	no
Choi (2012) [44]	Australia	63	1) Internet-based CBT (attuned to Chinese people with depression living in Australia) 2) waiting list	yes / no	Community (online recruitment)	MDD	Acute treatment	Stand-alone intervention	39.0 (11.7)	80	yes	no
Choi (2014) [45]	USA	158	1) Videoconferencing problem solving therapy, 2) face-to- face problem solving therapy 3) telephone support calls	no / no	Recruited by case managers	MDD (65.2%), depressive disorder, NOS (29.7%), dysthymia (5.1%)	Acute treatment	Stand-alone intervention	64.80 (9.18)	78.5	yes	yes
Corruble (2016) [46]	France	221	1) Social rhythm therapy plus face- to-face treatment with a psychiatrist and antidepressant medication 2) clinical management plus face-to-face treatment with a	yes / no	Secondary care (psychiatrists of outpatients)	MDD	Acute treatment	Blended treatment	ND	ND	no	no

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· [		3) TAU (posteriori		·				'			
i I		matched control		,				'			
<u></u> '		group)						<u> </u>			
USA	241	1)	yes / yes	Institutional	MDD	Acute	Stand-alone	63.90	2	no	yes
i I		Videoconferencing		(veterans affairs		treatment	intervention	(5.10)			
i I		behavioral		medical center),				'			
· [		activation		secondary care				'			
· [		treatment		(outpatient based				'			
· [		2) face-to-face		clinics)				'			
· [		behavioral		·				'			
· [		activation		·				'			
· [		treatment		·				'			
USA	90	1) Internet-based	yes / no	Community	MDD (98%)	Acute	Stand-alone	ND	75	yes	no
i I		CBT		(advertisements)		treatment	intervention				
· 		2) waiting list		1				!			
Sweden	42	1) Internet-based	yes / no	Community	MDD	Acute	Enhanced	ND	100	yes	no
· I		CBT plus antenatal		(advertisements)		treatment	stand-alone	'			
· I		TAU		·			intervention	'			
<u> </u>		2) antenatal TAU						<u> </u>			
UK	691	1) Internet-based	yes / yes	Primary care	MDD (81%)	Acute	Enhanced	39.86	67	yes	no
i I		CBT (Beating the		(general		treatment	stand-alone	(12.65)			
i I		Blues) plus usual		practices)			intervention				
i I		GP care		,							
i I		2) internet-based		,							
· I		CBT (MoodGYM)		·				'			
i I		plus usual GP care)		,							
<u> </u>		3) usual GP care									
Netherla	303	1) Internet-based	yes / yes	Community	Recurrent MDD	Acute	1) Enhanced	ND	56.8	yes	no
nds		CBT plus TAU		(advertisement,	(36.30%), single	treatment	stand-alone				
· [		2) internet-based		invitation)	MDD (43.56%)		intervention	'			
· [		CBT		·			2) stand-	'			
· [		3) TAU		·			alone	'			
	1			'			intervention	'			
-	USA Sweden UK	USA 90 Sweden 42 UK 691 Netherla 303	usa system antidepressant medication 3) TAU (posteriori matched control group)  USA 241 1) Videoconferencing behavioral activation treatment 2) face-to-face behavioral activation treatment  USA 90 1) Internet-based CBT 2) waiting list  Sweden 42 1) Internet-based CBT plus antenatal TAU 2) antenatal TAU 2) antenatal TAU 2) antenatal TAU 2) internet-based CBT (MoodGYM) plus usual GP care 2) internet-based CBT (MoodGYM) plus usual GP care 3) usual GP care  Netherla nds 1) Internet-based CBT plus TAU 2) internet-based CBT plus TAU 2) internet-based CBT	antidepressant medication 3) TAU (posteriori matched control group)  USA  241  1) Videoconferencing behavioral activation treatment 2) face-to-face behavioral activation treatment  USA  90  1) Internet-based CBT 2) waiting list  Sweden  42  1) Internet-based CBT plus antenatal TAU 2) antenatal TAU  UK  691  1) Internet-based CBT (Beating the Blues) plus usual GP care 2) internet-based CBT (MoodGYM) plus usual GP care 3) usual GP care Netherla nds  1) Internet-based CBT plus TAU 2) internet-based CBT	usa antidepressant medication 3) TAU (posteriori matched control group)  USA 241 1)	antidepressant medication 3) TAU (posteriori matched control group)  USA  241  1) Videoconferencing behavioral activation treatment 2) face-to-face behavioral activation treatment 1) Internet-based CBT 2) waiting list  Sweden  42  1) Internet-based CBT plus antenatal TAU 2) antenatal TAU  UK  691  1) Internet-based CBT (Beating the Blues) plus usual GP care 2) internet-based CBT (MoodGYM) plus usual GP care) 3) usual GP care Netherla nds  A  antidepressant medical center), secondary care (outpatient based clinics)  MDD (98%)  Community (advertisements)  MDD (81%)  Primary care (general practices)  MDD (81%)  Primary care (general practices)  MDD (81%)  Recurrent MDD (36.30%), single MDD (43.56%)	Sample   S	Stand-alone   Internet-based CBT (Beating the Blues) plus usual GP care 2) internet-based CBT (MoodGYM) plus usual GP care Both CBT (MoodGYM) plus usual GP care 13) TAU   Stand-alone intervention   Stand-alon	Second   S	Bantidepressant medication and the present matched control group)   Stand-alone phenomenate of the present matched control group   Stand-alone phenomenate of the phen	antidepressant medication 3) TAU (posteriori matched control group)  USA 241 1) Videoconferencing behavioral activation treatment 2) face-to-face behavioral activation treatment 3) face-to-face behavioral activation freatment 3) face-to-face behavioral activation freatment 3) face-to-face behavioral activation freatment 3) face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-face-to-f

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Holländare (2011) [16]	Sweden	84	1) Internet-based CBT 2) possibility of non-specific e-mail support	no / no	Community (advertisements)	MDD (100% in partial remission with no current episode of MDD at the time of recruitment)	Aftercare	Stand-alone intervention	45.3 (12.8)	84.5	yes	yes
Hunkeler (2012) [52]	USA	103	1) Collaborative care website plus usual specialty mental health care 2) usual specialty mental health care	no / no	Secondary care (mental health care clinics)	Recurrent MDD	Acute treatment	Collaborative care approach	ND	79.6	yes	no
Johansson (2012) [53]	Sweden	92	1) Internet-based psychodynamic treatment 2) structured support control group	yes / no	Community (advertisement) and recruitment from a waiting list of another trial	Acute MDD (65.2%), partial remitted MDD (34.8%)	Acute treatment	Stand-alone intervention	45.60 (14.0)	75	yes	no
Johansson (2012) [54]	Sweden	121	1) Tailored internet-based CBT 2) standardized internet-based CBT 3) participation in online discussion group during waiting period	yes / no	Community (advertisement) and recruitment from online waiting list of people being interested in iCBT	Acute MDD (73.6%), partial remitted MDD (26.4%), dysthymia (14.0%)	Acute treatment	Stand-alone intervention	44.70 (12.10)	71.1	yes	no
Johansson (2013) [55]	Sweden	100	1) Internet-based psychodynamic treatment 2) waiting list plus continuous contact with therapist	yes / no	Community (advertisement)	Depression and anxiety disorders, data are reported separately for the depressed subgroup (MDD)	Acute treatment	Stand-alone intervention	ND	ND	yes	no

Kenter (2016) [32]	Netherla nds	269	1) Internet-based problem solving therapy 2) waitlist plus selfhelp book	yes / yes	Secondary care (outpatient clinics)	MDD	Bridging waiting period	Stand-alone intervention	38.0 (11.4)	53.9	yes	no
Kessler (2009) [56]	UK	297	1) Online CBT plus usual GP care 2) usual GP care while on waitlist	yes / no	Primary care (general practices)	MDD (mild (5.1%), moderate (26.26%), severe (68.69%), based on BDI score)	Acute treatment	Enhanced stand-alone intervention	ND	68.0	yes	no
Kivi (2014) [57]	Sweden	92	1) Internet-based CBT 2) TAU	no / no	Primary care (via general practitioners and nurses at primary care centers)	MDD (mild (19%), moderate (34%), severe (41%), based on BDI-II cut-off scores)	Acute treatment	Stand-alone intervention	36.6 (11.3)	66	yes	no
Kok (2015) [29]	Netherla nds	239	1) Cognitive therapy plus Mood Monitoring plus TAU 2) TAU	yes / yes	Community (via media), primary care (general practitioners), and mental health care institutions	recurrent MDD (with remission/recove ry for at least 2 months; mild (23.43%), moderate (53.14%), severe (22.59%), based on the number of SCID-I depression symptoms))	Aftercare	Enhanced stand-alone intervention	ND	74.9	yes	yes
Hirsch (2018) [58]	UK	79	1) Online Cognitive Bias Modification with or, 2) without priming of repetitive negative thinking 3) Neutral task control condition	no / yes	Community (via advertisements)	GAD or MDD (outcome data was reported separately)	Acute treatment	Stand-alone intervention	ND	78.5	yes	no

Lam (2013)	Canada	105	1) Telephone CBT	yes / no	Community	Single MDD	Acute	Blended	ND	54.6	yes	yes
[59]	Canada	103	plus medication, 2) medication plus adherence reminder	yes / 110	(advertisement), primary and / or secondary care (referrals)	(33.33%), recurrent MDD (66.66%)	treatment	treatment	IND	34.0	yes	yes
Lang (2012) [60]	UK	28	1) Imagery-focused cognitive Bias modification, 2) Control condition with same stimulus material, but with modified contingencies	no / no	Community (advertisement), primary care (local clinicians)	MDD	Acute treatment	Stand-alone intervention	ND	76.9	yes	no
Lappalainen (2015) [61]	Finland	39	1) Internet-based acceptance and commitment therapy 2) waiting list	no / no	Community (advertisements)	MDD (mild (25.6%), moderate (43.6%), severe (17.9%), based on BDI-II scores)	Acute treatment	Stand-alone intervention	51.89 (12.88)	71.8	yes	no
Lindner (2014) [62]	Sweden	38	1) Self-help program plus telephone support by therapist 2) Self-help program plus email support by therapist	no / no	Community (from waiting list of previous study which was recruited from the general public)	MDD (84.2%), MDD + Dysthymia (15.8%)	Acute treatment	Stand-alone intervention	ND	84.2	yes	yes
Löbner (2018) [63]	German y	647	1) Online CBT plus TAU 2) TAU	yes / no	Primary care (general practices)	MDD	Acute treatment	Enhanced stand-alone intervention	ND	68.5	no	no
Luxton (2016) [64]	USA	121	1) In Home treatment 2) in-person treatment	yes / yes	Institutional (via military treatment facilities)	MDD (9% suffered from minor depression)	Acute treatment	Stand-alone intervention	ND	18.2	yes	yes

C	0.4	4) Consentation	/	C''	MDD MDD and	At	Chanalala	26.40	70	T	1
		based BA intervention 2) smartphone- based mindfulness intervention		(advertisement, mass media)	Dysthymia (49%)	Acute treatment	intervention	(10.80)		yes	yes
Sweden	93	1) Blended treatment (face-to- session plus smartphone application that were used between the sessions) 2) Face-to-face BA	yes / no	Community (advertisement)	MDD	Acute treatment	Blended treatment	30.60 (11.40)	69.9	yes	yes
Japan	164	1) Smartphone CBT plus medication change 2) medication change alone	yes / yes	Secondary care (psychiatrists)	MDD	Acute treatment	Blended treatment	ND	53.1	yes	yes
German y	163	1) Internet-based CBT plus permission of using TAU, 2) TAU	yes / no	Recruitment from another trial (, as depressive symptoms were beyond mild to moderate)	MDD (37.2%), Dysthymia (10.4%), MDD and Dysthymia (39.3%), Neither MDD nor Dysthymia (12.9%)	Acute treatment	Enhanced stand-alone intervention	42.0 (11.39)	74.8	yes	no
Australia	43	1) Internet-based CBT 2) TAU	yes / no	Community (advertisements)	Recurrent MDD (67.44%), single MDD (32.26%)	Acute treatment	Stand-alone intervention	ND	100	yes	no
USA	85	1) Telephone CBT 2) TAU	yes / no	Secondary care (community- based outpatient clinics)	MDD	Acute treatment	Stand-alone intervention	55.90 (10.59)	9.4	yes	no
	Japan German y	Sweden 93  Japan 164  German y 163 y	based BA intervention 2) smartphone-based mindfulness intervention  Sweden 93 1) Blended treatment (face-to-session plus smartphone application that were used between the sessions) 2) Face-to-face BA  Japan 164 1) Smartphone CBT plus medication change 2) medication change 2) medication change alone  German 163 1) Internet-based CBT plus permission of using TAU, 2) TAU  Australia 43 1) Internet-based CBT 2) TAU  USA 85 1) Telephone CBT	based BA intervention 2) smartphone-based mindfulness intervention  Sweden 93 1) Blended treatment (face-to-session plus smartphone application that were used between the sessions) 2) Face-to-face BA  Japan 164 1) Smartphone CBT plus medication change 2) medication change 2) medication change alone  German y 163 1) Internet-based CBT plus permission of using TAU, 2) TAU  Australia 43 1) Internet-based yes / no  CBT carrow yes / no  Australia 43 1) Internet-based yes / no  CBT carrow yes / no  Yes / no	based BA intervention 2) smartphone-based mindfulness intervention  Sweden 93 1) Blended treatment (face-to-session plus smartphone application that were used between the sessions) 2) Face-to-face BA  Japan 164 1) Smartphone CBT plus medication change 2) medication change 2) medication change alone  German y  German y  Australia 43 1) Internet-based CBT plus permission of using TAU, 2) TAU  DIAM 85 1) Telephone CBT 2) TAU  USA 85 1) Telephone CBT 2) TAU  Sweden (advertisement, mass media)  Yes / no Community (advertisements)  Community (advertisements)  Community (advertisements)	based BA intervention 2) smartphone-based mindfulness intervention  Sweden 93 1) Blended treatment (face-to-session plus smartphone application that were used between the sessions) 2) Face-to-face BA  Japan 164 1) Smartphone CBT plus medication change 2) medication change alone  German y  Australia 43 1) Internet-based CBT pursupprinsion of using TAU, 2) TAU  Australia 43 1) Internet-based CBT yes / no Community (advertisement)  Dysthymia (49%)  MDD  Community (advertisement)  MDD (37.2%), Dysthymia (10.4%), MDD and Dysthymia (39.3%), Neither MDD nor Dysthymia (12.9%)  Postportion of Using TAU, 2) TAU  Wes / no Community (advertisements)  Community (advertisements)  MDD (37.2%), Dysthymia (10.4%), MDD and Dysthymia (39.3%), Neither MDD nor Dysthymia (12.9%)  Australia 43 1) Internet-based CBT 2) TAU  USA 85 1) Telephone CBT 2) TAU  Secondary care (community (advertisements)  Secondary care (community (advertisements)  Secondary care (community based outpatient)	Dased BA   Intervention   2) smartphone   Dased mindfulness   Intervention   2) smartphone   Dased mindfulness   Intervention   Dased mindfulness   Dased mindfulnes	Dased BA intervention   Dysthymia (49%)   Ireatment   Intervention	Dased BA   Intervention   Dysthymia (49%)   Dysthymia (49%)   Intervention   Dysthymia (49%)   Dysthymia (49%	Based BA   Intervention   2) smartphone-based mindfulness   Intervention   2) smartphone-based mindfulness   Intervention   2) smartphone-based mindfulness   Intervention   2) smartphone-based mindfulness   Intervention   2) smartphone   Intervention   30.60   69.9	Based BA   Intervention   2) smartphone-based mindfulness intervention   2) smartphone-based mindfulness intervention   2) smartphone-based mindfulness intervention   2) smartphone   2) sm

Mohr (2012) [71]	USA	325	1) Face-to-face CBT 2) Telephone CBT	yes / no	Primary care (primary care	MDD	Acute treatment	Stand-alone intervention	ND	77.5	no	yes
					clinics), secondary care (general internal medicine clinics)							
Mohr (2013) [72]	USA	102	1) Guided internet- based CBT 2) unguided internet-based CBT 3) waiting list	yes / yes	Secondary care (advertisements in general internal medicine clinic)	MDD	Acute treatment	Enhanced stand-alone intervention	ND	71.4	no	no
Montero- Marin (2016) [73]	Spain	296	1) Self-guided online program plus improved TAU 2) therapist-guided online program plus improved TAU 3) improved TAU	yes / yes	Primary care (general practitioners)	MDD	Acute treatment	Blended treatment	43.19 (9.3)	79.2	yes	no
Nakao (2018) [74]	Japan	40	1) Blended CBT plus continuation with TAU with their treating psychiatrist 2) waiting list and continuation with TAU with their treating psychiatrist	yes / no	Primary care (general hospital), secondary care (teaching and psychiatric hospital)	MDD	Acute treatment	Blended treatment	40.20 (9.70)	50	yes	no
Nyström (2017) [75]	Sweden	312	1) Physical activity without rationale 2) physical activity with rationale, 3) BA based on Lewinsohn's model	yes / yes	Community (advertisement)	MDD	Acute treatment	Stand-alone intervention	42.0 (13.5)	76	yes	yes

O'Mahen (2014) [76] Perini (2009) [17]	UK Australia	83	4) BA based on Martell's model, 5) waiting list 1) BA 2) TAU 1) Online CBT 2) waiting list	no / no yes / no	Community (advertisements) Community (website)	MDD MDD	Acute treatment Acute treatment	Stand-alone intervention Stand-alone intervention	ND 49.29 (12.06)	100	yes	no no
Reins (2019) [77]	German y	131	1) Internet-based CBT 2) online psychoeducation	yes / yes	Community (advertisement)	MDD	Acute treatment	Stand-alone intervention	41.60 (10.80)	75.6	yes	yes
Ren (2016) [78]	China	62	1) Internet-based CBT 2) waiting list	no / no	Institutional (via colleges / universities)	MDD	Acute treatment	Stand-alone intervention	ND	ND	yes	yes
Richards (2013) [79]	UK	581	1) Collaborative care intervention plus TAU 2) TAU	yes / no	Primary care (general practices)	MDD (mild (14.3%), moderate (55.6%), severe (29.9%), based on ICD-10 diagnosis)	Acute treatment	Collaborative care approach	44.80 (13.30)	71.9	yes	no
Rollman (2018) [80]	USA	704	1) Internet-based CBT supported by collaborative care manager 2) Internet-based CBT supported by collaborative care manager plus access to internet support group 3) TAU	yes / yes	Primary care (primary care offices)	MDD (81.2%), generalized anxiety disorder (53.5%), panic disorder (15.8%), MDD and anxiety disorder (72.3%)	Acute treatment	Collaborative care approach	42.70 (14.30)	79.8	no	no
Rosso (2017) [81]	USA	77	1) Internet-based CBT 2) monitored attention control	yes / no	Community (advertisement)	Recurrent MDD (74.02%), single MDD (25.97%)	Acute treatment	Stand-alone intervention	ND	68.8	yes	yes

Sandoval (2017) [82]	USA	45	1) Interactive media-based, computer-delivered depression treatment program 2) no treatment control condition	no / no	Community (announcements)	MDD (95%), dysthymia (5%)	Acute treatment	Stand-alone intervention	ND	62.22	yes	no
Schlicker (2018) [30]	German y	226	1) Standardized text message intervention 2) individualized text messages 3) waiting control	yes / no	Secondary care (mental health hospital)	MDD	Aftercare	Stand-alone intervention	ND	64.2	yes	yes
Schuver (2016) [83]	USA	40	Yoga intervention     walking control	yes / no	Community (advertisement)	MDD	Acute treatment	Stand-alone intervention	42.68 (4.95)	100	yes	no
Selmi (1990) [84]	USA	36	1) Computer- administered therapy 2) therapist- administered therapy 3) waiting list	no / no	Community (announcement)	recurrent MDD (19.44%), single MDD (80,56)	Acute treatment	Stand-alone intervention	28.2 (4.58)	63.9	yes	no
Smith (2017) [85]	Australia	270	1) Internet-based CBT, 2) self-help book (CBT), 3) self- help book (meditation), 4) waiting list	yes / no	Community (advertisement) and via virtualclinic.org.a u	MDD	Acute treatment	Stand-alone intervention	ND	81.9	yes	no

Steinmann (2020) [15]	German y	59	1) Telephone CBT with reminding letters 2) telephone CBT without reminding letters	yes / no	Primary care (general practitioner)	MDD	Acute treatment	Stand-alone intervention	45.50 (13.60)	72	yes	yes
Thase (2018) [86]	USA	154	1) Blended CBT treatment 2) face-to-face CBT	no / no	Community (advertisements) and institutional (clinical services of participating sites)	MDD	Acute treatment	Blended treatment	46.30 (14.30)	66.2	yes	yes
Titov (2010) [87]	Australia	141	1) Internet-based CBT plus technician support 2) Internet-based CBT plus clinician support 3) waiting list	yes / no	virtualclinic.org.a u	MDD	Acute treatment	Stand-alone intervention	43.00 (12.86)	74	yes	no
Titov (2011) [88]	Australia	77	1) Internet-based CBT 2) waiting list	yes / no	virtualclinic.org.a u	MDD (51%) (results for depression subgroup reported separately)	Acute treatment	Stand-alone intervention	43.9 (14.6)	73	yes	no
Torkan (2014) [89]	Iran	39	1) Positive imagery cognitive bias modification, 2) non-imagery control condition	no / no	Secondary care (outpatient clinics)	MDD	Acute treatment	Stand-alone intervention	ND	64.1	yes	no

Vernmark (2010) [90]	Sweden	88	1) Email therapy, 2) internet-based, CBT 3) waiting list	no / no	Community (advertisement)	MDD	Acute treatment	Stand-alone intervention	36.82 (12.90)	68.2	yes	no
Watkins (2012) [91]	UK	121	1) Cognitive bias modification plus TAU 2) relaxation training plus TAU 3) TAU	yes / no	Primary care (general practitioners)	MDD	Acute treatment	Enhanced stand-alone intervention	ND	71.9	yes	no
Watts (2013) [92]	Australia	52	1) Mobile-based intervention (via an application) 2) computer-based intervention	yes / no	virtualclinic.org.a u	MDD (mild (50%), moderate (23.53%), severe (14.71%), based on PHQ-9 Severity Status)	Acute treatment	Stand-alone intervention	41.00 (12.38)	80	yes	yes
Williams (2013) [93]	Australia	69	1) imagery-focused cognitive bias modification plus internet-based CBT 2) waiting list	yes / no	virtualclinic.org.a u	MDD	Acute treatment	Stand-alone intervention	ND	76.2	yes	yes

Williams (2015) [94]	Australia	121	1) Positive imagery cognitive bias modification plus internet-based CBT 2) control cognitive bias modification condition plus internet-based CBT	yes / yes	Institutional (not- for-profit clinical and research unit)	MDD	Acute treatment	Stand-alone intervention	ND	73.3	yes	no
Wright (2005) [95]	USA	45	1) Blended cognitive therapy 2) face-to-face cognitive therapy, 3) waiting list	no / no	Community (advertisement), primary and/or secondary care (referral)	single MDD	Acute treatment	Blended treatment	ND	75.6	yes	no
Zagorscak (2018) [96]	German y	1089	1) Internet-based CBT plus standardized, automated feedback and contact on demand 2) internet-based CBT plus semistandardized e-mail feedback	yes / no	Institutional (health insurance)	Single MDD (42.1%), remitted MDD (26.2%), dysthymia (8.3%), double depression (5.3%), Bipolar or NOS (6.0%), no current/past affective disorder (12.2%)	Acute treatment	Stand-alone intervention	45.70 (11.30)	65.6	yes	yes

Zwerenz (2017) [97]	German y	611	1) Blended treatment (inpatient face-to-face sessions plus internet-based CBT), 2) Active control group (inpatient face-to-face sessions plus online information on depression)	yes / yes	Secondary care (psychosomatic clinic)	Recurrent MDD (65.94%), single MDD (31.88), depression severity: mild (0.01%), moderate (79.91%), severe (16.59%) according to ICD-10 classification.	Acute treatment	Blended treatment	47.98 (9.79)	60.7	yes	no
Zwerenz (2017b) [31]	German y	82	1) Psychodynamic web-based intervention plus mindfulness exercises 2) waiting list	yes / yes	Secondary care (after inpatient or day clinic psychotherapy)	Recurrent MDD (44.93%), single MDD (33.34), dysthymia (5.80); depression severity: mild (4.35%), moderate (56.52%), severe (17.39%) according to ICD-10 classification	Aftercare	Stand-alone intervention	ND	71	yes	no
13 further pul	lished trial	s were i	dentified in the course	e of the search	update (August 2020	) in the Cochrane Ce	ntral Register of	Controlled Trial	s. Publica	tions are liste	ed below	1.
Dennis (2020) [98]	Canada	241	1)Telephone interpersonal psychotherapy + locally available standard postpartum care (including postpartum depression service), 2) locally available standard	yes / no	Institutional (public health departments) and community (advertisement)	MDD (postpartum)	Acute treatment	Enhanced stand-alone intervention	ND	100	yes	no

			postpartum care (including postpartum depression service)									
Flygare (2020) [99]	Sweden	95	1) Internet-based CBT, 2) online psychoeducation control condition	no / no	Primary and secondary care	MDD (71.6%), dysthymia (9.5%), Depressive Disorder NOS (4.2%), MDD in partial remission (15.8%)	Acute treatment	Stand-alone intervention	45.30 (12.20)	75.80	yes	yes
Gili (2020) [100]	Spain	221	1) Online healthy lifestyle program, 2) online mindfulness program, 3) online positive affect promotion, 4) improved TAU	yes / yes	Primary care	MDD or dysthymia	Acute treatment	Enhanced stand-alone intervention	ND	77.8	no	yes
Hur (2018) [101]	South Korea	48	1) App-based cognitive restructuring, 2) App-based mood chart control group	no / no	Secondary care (outpatient psychiatric clinics) and community (advertisement)	Other specified depressive disorder	Acute treatment	Stand-alone intervention	ND	88.2	yes	no

Jannati (2020) [102]	Iran	78	1) App-based CBT, 2) waiting list	yes / no	Community (online annoucements)	MDD (postpartum)	Acute treatment	Stand-alone intervention	ND	100	yes	no
Johansson (2019) [108]	Sweden	54	1) Internet-based CBT, 2) waiting list	no / no	Secondary care (referral from psychiatric hospital)	Recurrent MDD (94%)	Acute treatment	Stand-alone intervention	ND	57.0	yes	no
Kooistra (2019) [103]	Netherla nds	103	1) Blended CBT, 2) f2f CBT	yes / yes	Secondary care (routine specialized mental health care)	MDD	Acute treatment	Blended treatment	ND	63.0	yes	yes

Mohr (2019) [33]	USA	312	1) Stepped care program (1st step iCBT, 2nd step telephone CBT), 2) telephone CBT alone	yes / no	Community (advertisement) and health care system data (electronic medical records)	MDD	Acute treatment	Stepped care approach	ND	73.4	yes	yes
Oehler (2020) [104]	German y	348	1) Internet-based CBT, 2) progressive muscle relaxation control group	yes / yes	Community (advertisement)	Recurrent MDD (92.51%), single MDD (1.72%), dysthymia (23.92%)	Acute treatment	Stand-alone intervention	ND	78.7	yes	no
Pfeiffer (2020) [105]	USA	330	1) Peer-supported cCBT, 2) enhanced usual care	yes / no	Institutional (veterans affairs medical center and two of their associated outpatient clinics)	MDD	Acute treatment	Enhanced stand-alone intervention	51.6 (14.9)	20.0	yes	no

Pihlaja (2020) [106]	Finland	100	1) iCBT plus add-on telephone support, 2) iCBT only	yes / no	Recruitment from another trial	MDD	Acute treatment	Stand-alone intervention	63.11 (11.10)	66.00	no	yes
Richards (2020) [34]	UK	169	1) Immediate iCBT (step 2 within a stepped care approach), 2) waiting list	yes / yes	Routine care	MDD	Acute treatment	Stepped care approach	ND	ND	no	no
Welch (2019) [107]	USA	14	1) eCBT plus transcranial direct current stimulation, 2) eCBT plus sham stimulation	no / no	Community (advertisement) and clinician referrals	MDD	Acute treatment	Stand-alone intervention	53.21 (12.48)	85.71	no	yes

**Note.** N = Number of participants randomized; M = Mean; SD = Standard deviation; MDD = Major depressive disorder; ND = No data; PHQ-9 = Patient Health Questionnaire 9 item; BDI = Beck Depression Inventory; CBT = Cognitive behavioral therapy; TAU = treatment as usual; NOS = Not otherwise specified; GP = General practitioner; iCBT = Internet-based cognitive behavioral therapy; GAD = Generalized anxiety disorder; BA = behavioral activation; f2f = face-to-face.