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 Webbased and Mobile Health Interventions J Med Internet Res 2011;13(4):e126 URL: <u>http://www.jmir.org/2011/4/e126/</u> doi: 10.2196/jmir.1923 PMID: 22209829

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Your e-mail address * abc@gmail.com

sjcho@gilhospital.com

Title of your manuscript * Provide the (draft) title of your manuscript.

Cognitive Training in Fully Immersive Virtual Reality Improves Visuospatial Function and Frontal-Occipital Functional Connectivity in a Pre-Dementia State: A Randomized Controlled Trial

Name of your App/Software/Intervention *

If there is a short and a long/alternate name, write the short name first and add the long name in brackets.

VR cognitive training

Evaluated Version (if any) e.g. "V1", "Release 2017-03-01", "Version 2.0.27913"

Not publicly and commercially releasec

Language(s) *

What language is the intervention/app in? If multiple languages are available, separate by comma (e.g. "English, French")

Korean language

URL of your Intervention Website or App

e.g. a direct link to the mobile app on app in appstore (itunes, Google Play), or URL of the website. If the intervention is a DVD or hardware, you can also link to an Amazon page.

None.

(!) 유효한 URL이어야 합니다.

URL of an image/screenshot (optional)

내 답변

Accessibility *

Can an enduser access the intervention presently?

- access is free and open
- access only for special usergroups, not open
 - access is open to everyone, but requires payment/subscription/in-app purchases
 -) app/intervention no longer accessible
 -) 기타:

Primary Medical Indication/Disease/Condition *

e.g. "Stress", "Diabetes", or define the target group in brackets after the condition, e.g. "Autism (Parents of children with)", "Alzheimers (Informal Caregivers of)"

Subjective cognitive decline and mild co

Primary Outcomes measured in trial * comma-separated list of primary outcomes reported in the trial

Rey-Osterrieth Complex figure Test, cor

Secondary/other outcomes Are there any other outcomes the intervention is expected to affect?

Comprehensive neuropsychological test (digit span test forward/backward; Boston naming test; Seoul verbal learning test immediate recall/delayed recall/recognition; controlled word association test, semantic/phonemic; trail making test, type A/B; stroop test, color/word reading), psychiatric symptoms (geriatric depression scale, apathy evaluation scale, positive and negative affect schedule, and quality of life-Alzheimer's disease), and resting-state

Recommended "Dose" * What do the instructions for users say on how often the app should be used?							
O Approximately Daily							
O Approximately Weekly							
O Approximately Monthly							
O Approximately Yearly							
O "as needed"							
이다. twice a week, 1-month							

Approx. Percentage of Users (starters) still using the app as recommended after 3 months *							
O unknown / not evaluated							
0-10%							
0 11-20%							
21-30%							
0 31-40%							
O 41-50%							
51-60%							
61-70%							
71%-80%							
81-90%							
91-100%							
이 기타:							

Overall, was the app/intervention effective? *							
yes: all primary outcomes were significantly better in intervention group vs control							
O partly: SOME primary outcomes were significantly better in intervention group vs control							
O no statistically significant difference between control and intervention							
O potentially harmful: control was significantly better than intervention in one or more outcomes							
O inconclusive: more research is needed							
이 기타:							
Article Preparation Status/Stage * At which stage in your article preparation are you currently (at the time you fill in this form)							
O not submitted yet - in early draft status							
not submitted yet - in late draft status, just before submission							

) submitted to a journal but not reviewed yet

submitted to a journal and after receiving initial reviewer comments

) submitted to a journal and accepted, but not published yet

) published

) 기타:

Journal *

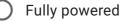
If you already know where you will submit this paper (or if it is already submitted), please provide the journal name (if it is not JMIR, provide the journal name under "other")

not submitted yet / unclear where I will submit this

- Journal of Medical Internet Research (JMIR)
- JMIR mHealth and UHealth
- JMIR Serious Games
- JMIR Mental Health
- JMIR Public Health
- JMIR Formative Research
- Other JMIR sister journal
-) 기타:

Is this a full powered effectiveness trial or a pilot/feasibility trial? *





Manuscript tracking number *

If this is a JMIR submission, please provide the manuscript tracking number under "other" (The ms tracking number can be found in the submission acknowledgement email, or when you login as author in JMIR. If the paper is already published in JMIR, then the ms tracking number is the four-digit number at the end of the DOI, to be found at the bottom of each published article in JMIR)

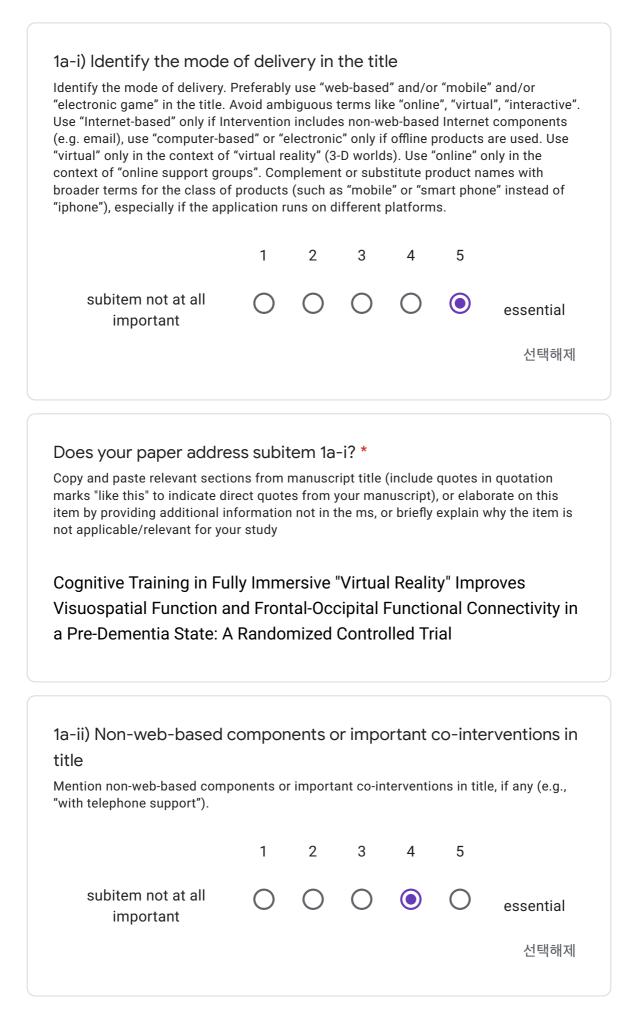
no ms number (yet) / not (yet) submitted to / published in JMIR

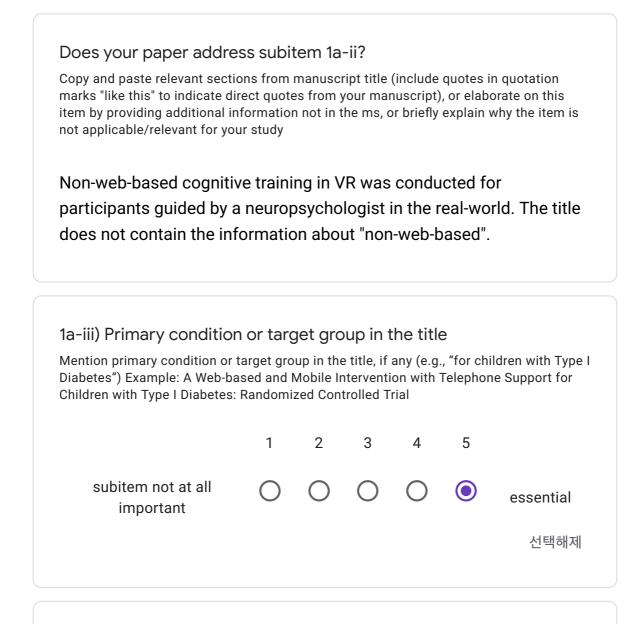
) 기타:

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						
이 기타:						





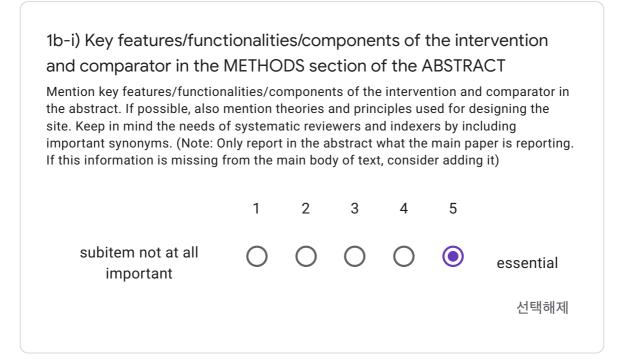
Does your paper address subitem 1a-iii? *

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

Cognitive Training in Fully Immersive "Virtual Reality" Improves Visuospatial Function and Frontal-Occipital Functional Connectivity in a "Pre-Dementia State": A Randomized Controlled Trial

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

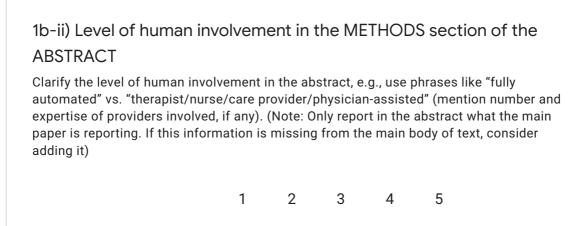
NPT extension: Description of experimental treatment, comparator, care providers, centers, and blinding status.



Does your paper address subitem 1b-i? *

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

The VR group participants received "multi-domain and neuropsychologist-assisted cognitive training in a fully immersive VR environment twice a week for 1 month" and control group participants did not undergo any additional intervention except for their "usual therapy such as cognitive-enhancing medication."



essential

선택해제

Does your paper address subitem 1b-ii?

subitem not at all

important

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

The VR group participants received multi-domain and "neuropsychologist-assisted" cognitive training in a fully immersive VR environment twice a week for 1 month and control group participants did not undergo any additional intervention except for their usual therapy such as cognitive-enhancing medication.

1b-iii) Open vs. closed, web-based (self-assessment) vs. face-toface 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)

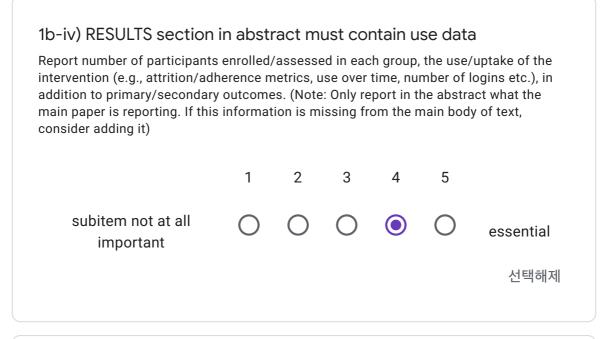


Does your paper address subitem 1b-iii?

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

cognitive impairment "from a memory clinic" were randomly allocated to the VR (n=23) or the control group (n=18). The VR group participants received multi-domain and "neuropsychologist-assisted" cognitive training in a fully immersive VR environment twice a week for 1 month.

Both group participants were evaluated for cognitive function using "face-to-face" comprehensive neuropsychological tests including the Rey–Osterrieth Complex Figure Test (RCFT) copy task.



Does your paper address subitem 1b-iv?

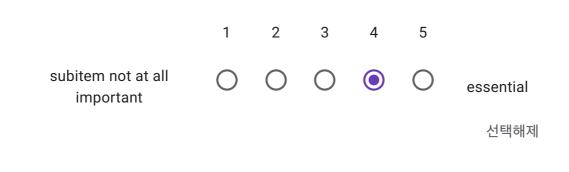
Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your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

After VR cognitive training, the VR group showed significant improvement in "total score (F=14.69, P=.001)" and "basic components score of RCFT copy task (F=9.27, P=0.005)" compared to the control group. The VR group showed a trend in "improvement in naming ability (F=3.55, P=0.68), verbal memory delayed recall (F=3.03, P=.09), and phonemic fluency (F=3.08, P=.09). Improvements in psychiatric symptoms such as apathy (F=7.02, P=.01), affect (F=14.40, P=.001 for positive affect; F=14.40, P=.001 for negative affect), and quality of life (F=4.49, P=.04) were also found in the VR group compared to the control group". rsfMRI revealed that improvement in the RCFT copy task was associated with frontaloccipital FC increase in the VR group compared to the control group.

The results of FC increase are hard to describe by numbers as the numbers differ in voxel by voxel, so we only described the representative brain regions that correlated with improvements in

1b-v) CONCLUSIONS/DISCUSSION in abstract for negative trials

Conclusions/Discussions in abstract for negative trials: Discuss the primary outcome - if the trial is negative (primary outcome not changed), and the intervention was not used, discuss whether negative results are attributable to lack of uptake and discuss reasons. (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)



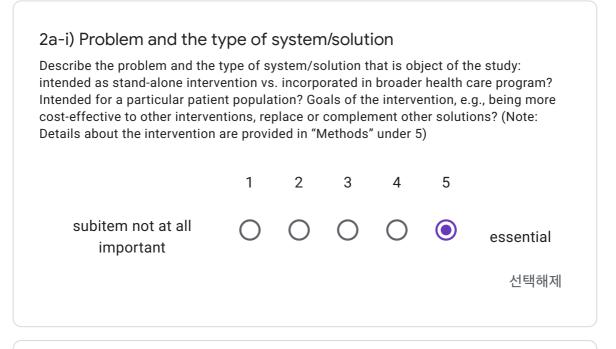
Does your paper address subitem 1b-v?

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

The primary/secondary outcomes were improved as expected and the results are presented in conclusions in the abstract.

INTRODUCTION

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

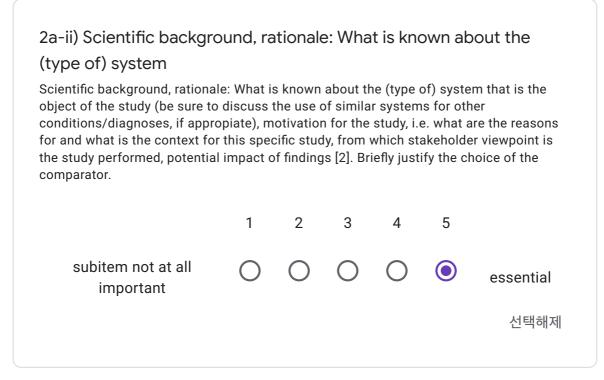


Does your paper address subitem 2a-i? *

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

determine the efficacy and mechanisms of VR cognitive training "in a pre-dementia state".

We aimed to ascertain the effects of VR multidomain cognitive training on "visuospatial function, comprehensive neuropsychological function, and psychiatric symptoms" in a pre-dementia state.



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

environments, facilitating visuospatial function through learning and transference outcomes" [14], and highlighting a role for cognitive training in a virtual environment in basic research and clinical practice. "Owing to the lack of knowledge and dearth of experiments on VR-cognitive training, especially the fully immersive type [15, 16], further studies are needed to ascertain its potential therapeutic efficacy."

We considered that FC studies using "rsfMRI may be able to reveal the neural mechanism, especially in the visual network, responsible for the observed cognitive improvements following VR cognitive training", as such training is based on the cognitive reserve hypothesis associated with functional neural networks [20].

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

We aimed to "ascertain the effects of VR multidomain cognitive training on visuospatial function, comprehensive neuropsychological function, and psychiatric symptoms in a pre-dementia state". Moreover, we aimed to "examine the hypothesis that cognitive improvement could be related to increased FC in the visual network of

METHODS

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

Does your paper address CONSORT subitem 3a? *

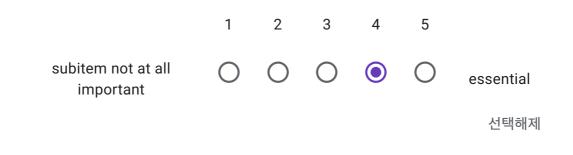
Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

training program on visuospatial function in old individuals with risk for dementia.

Finally, "a total of 45 participants" were randomly assigned to either the VR or the control group. The unblinded randomization was "conducted by drawing lots". 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 No.

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].



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

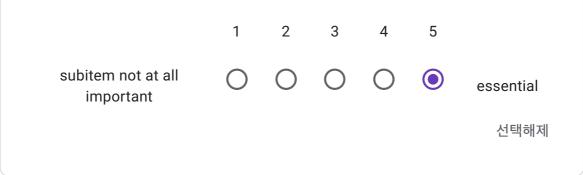
"There were no revisions, updates, or breaches of the program during the study period."

4a) Eligibility criteria for participants Does your paper address CONSORT subitem 4a? * 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. 4a-i) Computer / Internet literacy Computer / Internet literacy is often an implicit "de facto" eligibility criterion - this should be explicitly clarified. 1 2 3 4 5 O O essential \bigcirc \bigcirc subitem not at all important 선택해제 Does your paper address subitem 4a-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

The exclusion criteria for the participants were as follows: "(viii) inability to use VR system"

4a-ii) Open vs. closed, web-based vs. face-to-face assessments:

Open vs. closed, web-based vs. face-to-face assessments: Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic, 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), i.e., to what degree got the study team to know the participant. In online-only trials, clarify if participants were quasi-anonymous and whether having multiple identities was possible or whether technical or logistical measures (e.g., cookies, email confirmation, phone calls) were used to detect/prevent these.



Does your paper address subitem 4a-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

Participants over 60 years old in a pre-dementia state (ranging from subjective cognitive decline to MCI) were prospectively recruited between May and December 2019 "from the memory clinic of the Gachon University Gil Medical Center, Republic of Korea."

This was an "open-label", randomized, controlled trial (KCT0005243) that aimed to investigate the efficacy of fully immersive VR cognitive training program on visuospatial function in old individuals with risk for dementia.

All procedures during the VR cognitive training were "guided by a certified clinical neuropsychologist (SY Lee)" in addition to automatic verbal and visual messages from the program.

All participants underwent "face-to-face" comprehensive neuropsychological tests and evaluations using psychiatric scales, as well as rsfMRI at baseline and after the VR cognitive training period.

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

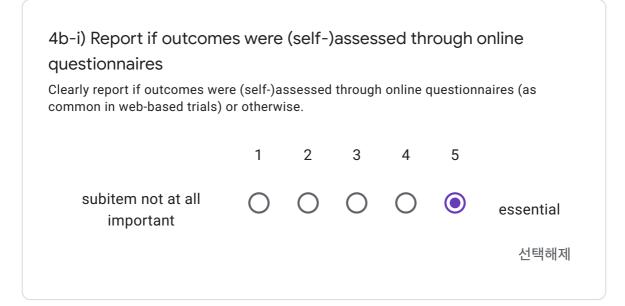
Information on study objectives, group allocation, cognitive intervention, brief study protocol, risk and benefit, and confidentiality was given to all participants before enrollment.

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

Yes.



Does your paper address subitem 4b-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

All participants underwent "face-to-face" comprehensive neuropsychological tests and evaluations using psychiatric scales, as well as rsfMRI at baseline and after the VR cognitive training period.

4b-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)



Does your paper address subitem 4b-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

No.

However, the participants were recruited from a single memory clinic of a tertiary hospital; they might have known that this program was developed by the authors. 5) The interventions for each group with sufficient details to allow replication, including how and when they were actually administered

5-i) Mention names, credential, affiliations of the developers,

sponsors, and owners

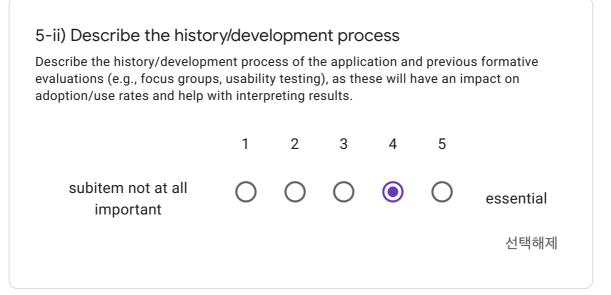
Mention names, credential, affiliations of the developers, sponsors, and owners [6] (if authors/evaluators are owners or developer of the software, this needs to be declared in a "Conflict of interest" section or mentioned elsewhere in the manuscript).



Does your paper address subitem 5-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

The multidomain VR cognitive training program was "developed by the authors who are board-certified geriatric neuropsychiatrists and clinical neuropsychologists with expertise."



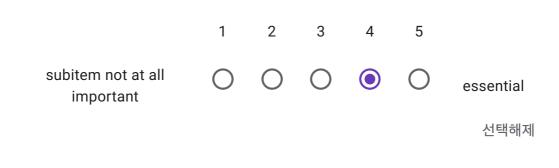
Does your paper address subitem 5-ii?

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 multidomain VR cognitive training program was developed between November 2018 and April 2019" by the authors who are board-certified geriatric neuropsychiatrists and clinical neuropsychologists with expertise.

5-iii) Revisions and updating

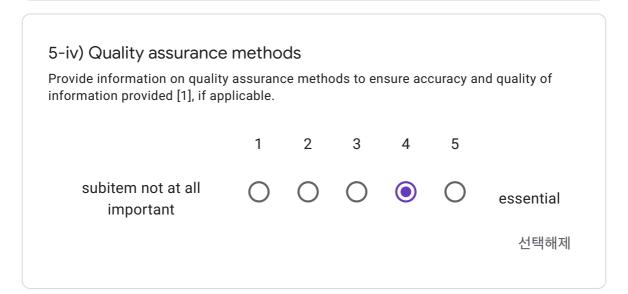
Revisions and updating. Clearly mention the date and/or version number of the application/intervention (and comparator, if applicable) evaluated, or describe whether the intervention underwent major changes during the evaluation process, or whether the development and/or content was "frozen" during the trial. Describe dynamic components such as news feeds or changing content which may have an impact on the replicability of the intervention (for unexpected events see item 3b).



Does your paper address subitem 5-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

"There were no revisions, updates, or breaches of the program during the study period."



Does your paper address subitem 5-iv? 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.									
5-v) Ensure replicability by publishing the source code, and/or providing screenshots/screen-capture video, and/or providing flowcharts of the algorithms used Ensure replicability by publishing the source code, and/or providing screenshots/screen- capture video, and/or providing flowcharts of the algorithms used. Replicability (i.e., other researchers should in principle be able to replicate the study) is a hallmark of scientific reporting.									
	1	2	3	4	5				
subitem not at all important	0	0	0	۲	0	essential			
						선택해제			

Does your paper address subitem 5-v?

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 VR cognitive training program consisted of multiple games involving multidomain cognitive tasks to assess: (i) attention (to find differences); (ii) executive function and memory (to select items needed to perform certain tasks); (iii) working memory and ability to perform mathematical calculations (to prepare an exact amount of money); (iv) visuospatial orientation (to find a path using a memorized map); (v) visuospatial function (to spatially place furniture exactly based on a memorized drawing); (vi) verbal memory (to remember certain words); (vii) visual memory (to remember specific flags and symbols); and (viii) processing speed and working memory (to catch animals in a certain order). All virtual environments were fully immersive 3D settings allowing for feelings of increased presence and visuospatial stimulation; training was accompanied by game elements to increase the interest and motivation of the participants. "Representative images of the VR training program are presented in Figure S1."

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.



Does your paper address subitem 5-vi?

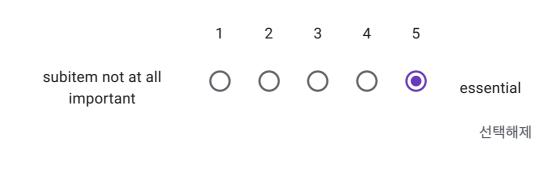
Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No. We do not have URL of the application because this VR program is a preliminary version only for this study. "This program was used only for this study and not open for

commercial use."

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).



Does your paper address subitem 5-vii? *

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 procedures were conducted in the memory clinic of the Gachon University Gil Medical Center and guided by a certified clinical neuropsychologist (SY Lee)" in addition to automatic verbal and visual messages from the program.

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

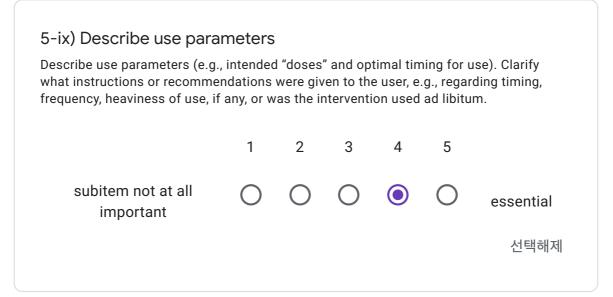
Describe mode of delivery, features/functionalities/components of the intervention and comparator, and the theoretical framework [6] used to design them (instructional strategy [1], behaviour change techniques, persuasive features, etc., see e.g., [7, 8] for terminology). This includes an in-depth description 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].



Does your paper address subitem 5-viii? *

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 multidomain VR cognitive training program was developed between November 2018 and April 2019 by the authors who are board-certified geriatric neuropsychiatrists and clinical neuropsychologists with expertise. The VR cognitive training program consisted of multiple games involving multidomain cognitive tasks to assess: (i) attention (to find differences); (ii) executive function and memory (to select items needed to perform certain tasks); (iii) working memory and ability to perform mathematical calculations (to prepare an exact amount of money); (iv) visuospatial orientation (to find a path using a memorized map); (v) visuospatial function (to spatially place furniture exactly based on a memorized drawing); (vi) verbal memory (to remember certain words); (vii) visual memory (to remember specific flags and symbols); and (viii) processing speed and working memory (to catch animals in a certain order). All virtual environments were fully immersive 3D settings allowing for feelings of increased presence and visuospatial stimulation; training was accompanied by game elements to increase the interest and motivation of the participants. Representative images of the VR training program are presented in Figure S1."



Does your paper address subitem 5-ix?

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

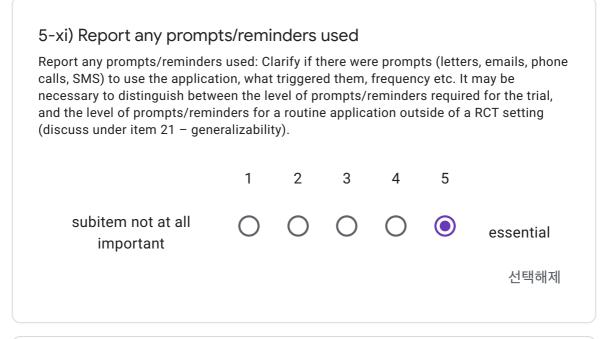
"Each session lasted approximately 20–30 minutes. The VR training took place using a head-mounted Oculus Rift CV1 display, with Oculus Touch controllers in both participants' hands. Each training session was conducted with the participant in a seated position, and the difficulty level increased throughout the study period from easy to difficult (levels 1–4), with two sessions at each difficulty level."

5-x) Clarify the level of human involvement Clarify the level of human involvement (care providers or health professionals, also technical assistance) in the e-intervention or as co-intervention (detail number and expertise of professionals involved, if any, as well as "type of assistance offered, the timing and frequency of the support, how it is initiated, and the medium by which the assistance is delivered". It may be necessary to distinguish between the level of human involvement required for the trial, and the level of human involvement required for a routine application outside of a RCT setting (discuss under item 21 - generalizability). 1 2 4 3 5 $\bigcirc \bigcirc \bigcirc \bigcirc$ subitem not at all essential important 선택해제

Does your paper address subitem 5-x?

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 procedures were done in the memory clinic of the Gachon University Gil Medical Center and guided by a certified clinical neuropsychologist (SY Lee) in addition to automatic verbal and visual messages from the program."



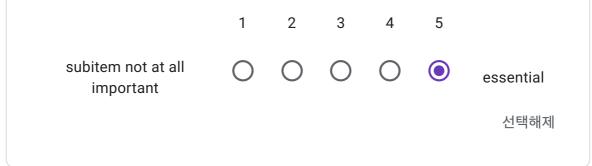
Does your paper address subitem 5-xi? *

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

There were no prompts or reminders because this program was not internet-based and conducted in the memory clinic with the guidance of a neuropsychologist.

5-xii) Describe any co-interventions (incl. training/support)

Describe any co-interventions (incl. training/support): Clearly state any interventions that are provided in addition to the targeted eHealth intervention, as ehealth intervention may not be designed as stand-alone intervention. This includes training sessions and support [1]. It may be necessary to distinguish between the level of training required for the trial, and the level of training for a routine application outside of a RCT setting (discuss under item 21 – generalizability.



Does your paper address subitem 5-xii? *

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

Participants in the VR group underwent VR cognitive training twice a week, for a total of eight sessions "in addition to their usual therapy such as cognitive enhancer"; participants in the control group did not undergo any additional intervention "except for their usual therapy such as cognitive enhancer."

6a) Completely defined pre-specified primary and secondary outcome measures, including how and when they were assessed

Does your paper address CONSORT subitem 6a? *

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.

6a-i) Online questionnaires: describe if they were validated for online use and apply CHERRIES items to describe how the questionnaires were designed/deployed If outcomes were obtained through online questionnaires, describe if they were validated for online use and apply CHERRIES items to describe how the questionnaires were designed/deployed [9]. 1 2 3 4 5 1 2 3 4 5 subitem not at all important

Does your paper address subitem 6a-i?

Copy and paste relevant sections from manuscript text

All participants underwent "face-to-face" comprehensive neuropsychological tests and evaluations using psychiatric scales, as well as rsfMRI at baseline and after the VR cognitive training period.

6a-ii) Describe whether and how "use" (including intensity of use/dosage) was defined/measured/monitoredDescribe whether and how "use" (including intensity of use/dosage) was defined/measured/monitored (logins, logfile analysis, etc.). Use/adoption metrics are important process outcomes that should be reported in any ehealth trial.12345Subitem not at all importantOOOOessentialMethadOOOOOetsentialMethadOOOOOetsential

Does your paper address subitem 6a-ii? Copy and paste relevant sections from manuscript text

"Each training session was conducted with the participant in a seated position, and the difficulty level increased throughout the study period from easy to difficult (levels 1–4), with two sessions at each difficulty level. All procedures were conducted in the memory clinic of the Gachon University Gil Medical Center and guided by a certified clinical neuropsychologist (SY Lee) in addition to automatic verbal and visual messages from the program."

6a-iii) Describe whether, how, and when qualitative feedback from
participants was obtained
Describe whether, how, and when qualitative feedback from participants was obtained
(e.g., through emails, feedback forms, interviews, focus groups).12345Subitem not at all
importantOOOOOessentialdefinalOOOOOdefinal

Does your paper address subitem 6a-iii? Copy and paste relevant sections from manuscript text

"The level of interest and satisfaction were also assessed on a Likert scale ranging from 0 to 100 after the period of VR cognitive training, in a face-to-face manner." 6b) Any changes to trial outcomes after the trial commenced, with reasons

Does your paper address CONSORT subitem 6b? *

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.

7a) How sample size was determined

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

7a-i) Describe whether and how expected attrition was taken into account when calculating the sample size

Describe whether and how expected attrition was taken into account when calculating the sample size.



Does your paper address subitem 7a-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

"Sample calculation was based on a recent meta-analysis on the effectiveness of VR for people with MCI or dementia that produced small-to-medium effect sizes using random-effects model (effect size = 0.29) from a total of 11 studies [15]. Assuming an attrition rate of 20%, a total sample size of 32 patients (16 per treatment group) would provide 0.8 power and at two-sided alpha error of .05. Power analysis was conducted with G*Power software version 3.1.9.2."

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

No.

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

"The unblinded randomization was conducted by drawing lots."

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

No. There was no restriction.

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

No. Drawing lots for randomization was performed with a participant present.

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

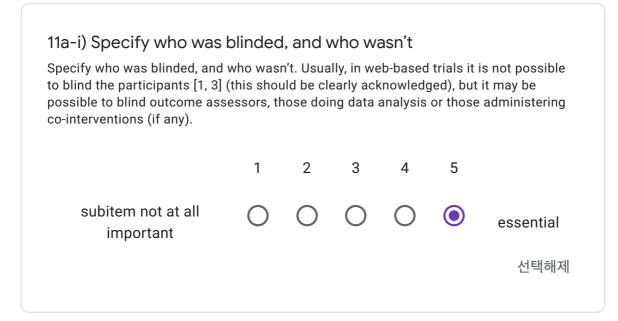
Does your paper address CONSORT subitem 10?*

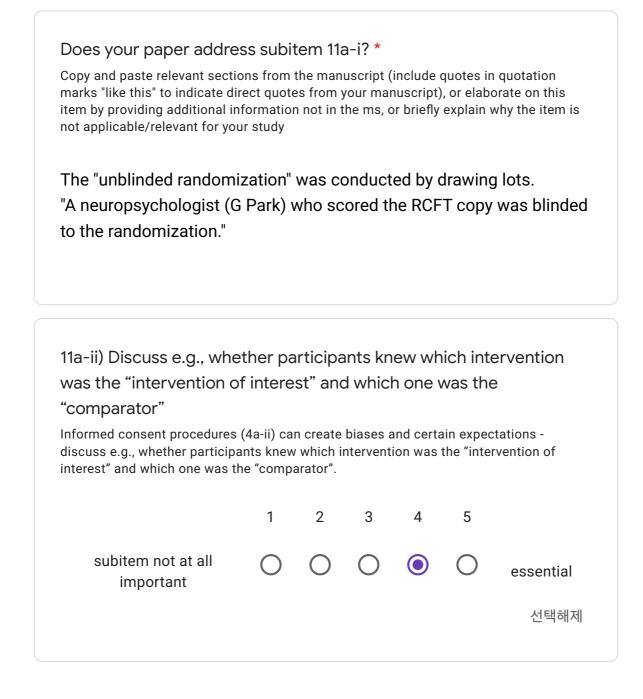
Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Randomization and allocation processes were conducted by a neuropsychologist with a participant present.

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





Does your paper address subitem 11a-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

"Information on study objectives, group allocation, cognitive intervention, brief study protocol, risk and benefit, and confidentiality was given to all participants before enrollment."

The "unblinded randomization" was conducted by drawing lots with a participant present.

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? *

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

"Participants in the VR group underwent VR cognitive training twice a week, for a total of eight sessions in addition to their usual therapy such as cognitive enhancer; participants in the control group did not undergo any additional intervention except for their usual therapy such as cognitive enhancer."

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

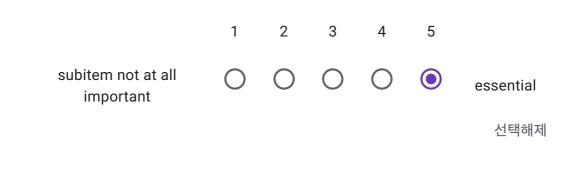
Does your paper address CONSORT subitem 12a? *

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

"Repeated measures analyses of variance" were used to find the group interaction of the VR cognitive training on neuropsychological function and psychiatric symptom scales after adjusting for age, years of education, sex, CDR-SOB, depressive symptoms, and cognitive enhancing medication.



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]).



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

We considered that the "per protocol analysis" can bias the result of the present randomized controlled trial, although the number of participants who dropped out from the study was the same in both groups.

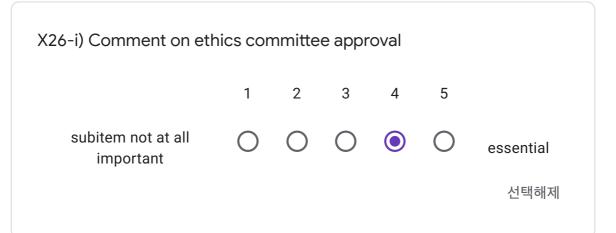
12b) Methods for additional analyses, such as subgroup analyses and adjusted analyses

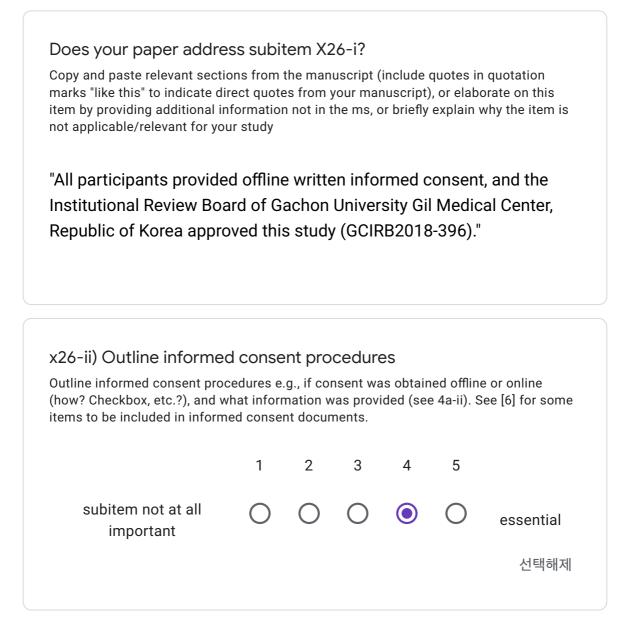
Does your paper address CONSORT subitem 12b? *

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

No.

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

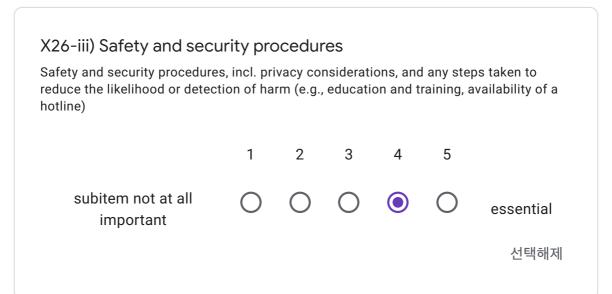




Does your paper address subitem X26-ii?

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

"Information on study objectives, group allocation, cognitive intervention, brief study protocol, risk and benefit, and confidentiality was given to all participant before enrollment. All participants provided offline written informed consent, and the Institutional Review Board of Gachon University Gil Medical Center, Republic of Korea approved this study (GCIRB2018-396)."



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

"The simulator sickness questionnaire (SSQ) was administered after each session to evaluate tolerability of the VR cognitive training program."

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? *

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.

"Of the 45 participants who were randomly allocated to the VR (n = 25) or the control group (n = 20), 41 participants completed the study." "Ultimately, 41 participants were included in the analyses."

In Methods section, information on the number of center and care provider was presented. "All procedures were done in the memory clinic of the Gachon University Gil Medical Center and guided by a certified clinical neuropsychologist (SY Lee) in addition to automatic verbal and visual messages from the program. "

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.

"After allocation, two participants of the VR group were dropped out from the study due to dizziness (n = 1) and unfamiliarity with the VR machine during the first session (n = 1). Two participants of the control group were dropped out because of hospitalization due to traffic accident (n = 1) and unknown personal reason (n = 1). Ultimately, 41 participants were included in the analyses."

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.



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

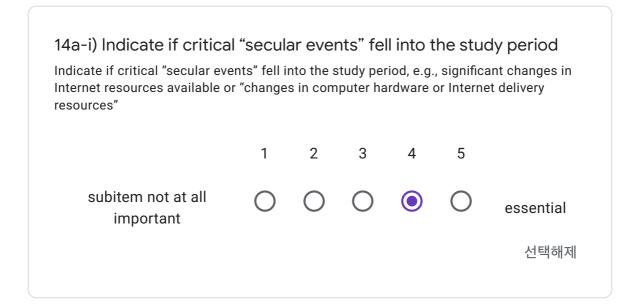
"The trial flow chart is presented in Figure 1."

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

Does your paper address CONSORT subitem 14a? *

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.



Does your paper address subitem 14a-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. there were no secular events such as significant changes in internet resources available or computer hardware resources.

14b) Why the trial ended or was stopped (early)

Does your paper address CONSORT subitem 14b? *

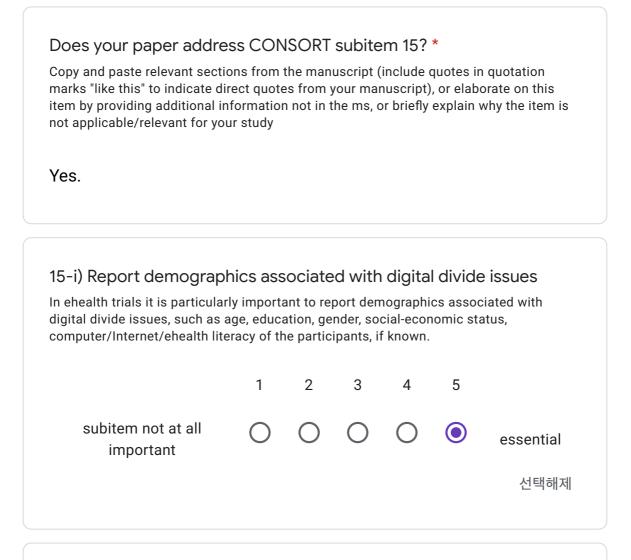
Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"After allocation, two participants of the VR group were dropped out from the study due to dizziness (n = 1) and unfamiliarity with the VR machine during the first session (n = 1). Two participants of the control group were dropped out because of hospitalization due to traffic accident (n = 1) and unknown personal reason (n = 1)."

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

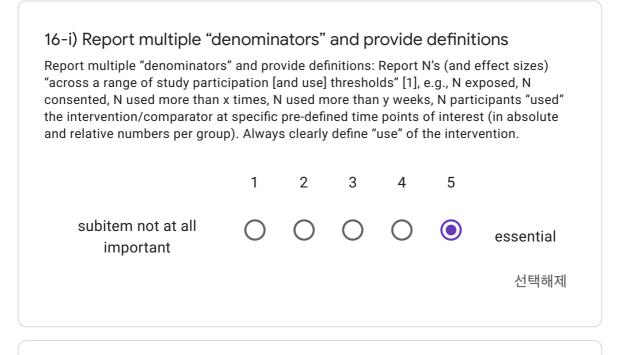


Does your paper address subitem 15-i? *

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

"Table 1 presents the detailed demographic and clinical characteristics of the study participants."

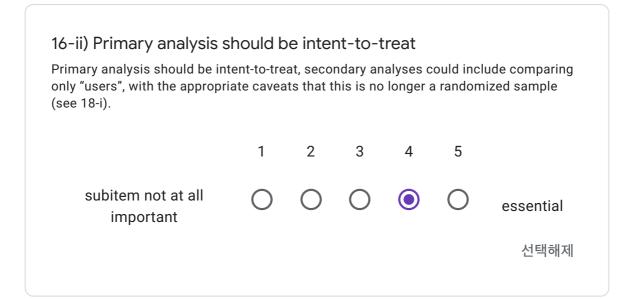
16) For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups



Does your paper address subitem 16-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 included in every tables the number of participants in the group. In Table 2-4, we presented the effect sizes of the interactions between group and effect of VR cognitive training.



Does your paper address subitem 16-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

Strict ITT method was not applied in this study. Two participants from VR group and two from control group were excluded after enrollment and these participants are not included in analyses. We presented this as limitation in Discussion section.

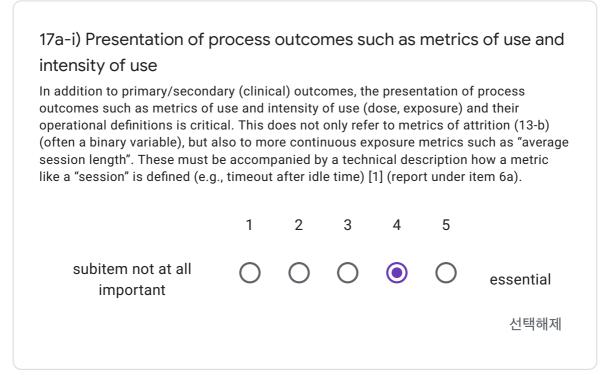
"Second, we considered that the per protocol analysis can bias the result of the present randomized controlled trial, although the number of participants who dropped out from the study was the same in both groups."

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

Yes.



Does your paper address subitem 17a-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

In methods section, we described the intervention for two groups. "Participants in the VR group underwent VR cognitive training twice a week, for a total of eight sessions in addition to their usual therapy such as cognitive enhancer; participants in the control group did not undergo any additional intervention except for their usual therapy such as cognitive enhancer." and

"Each session lasted approximately 20–30 minutes."

17b) For binary outcomes, presentation of both absolute and relative effect sizes is recommended

Does your paper address CONSORT subitem 17b? *

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

There was no binary outcome.

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

There were no subgroup and additionally adjusted analyses.

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).

	1	2	3	4	5	
subitem not at all important	0	0	0	۲	0	essential 선택해제

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

Strict ITT method was not applied in this study. Two participants from VR group and two from control group were excluded after enrollment and these participants are not included in analyses. We presented this as limitation in Discussion section.

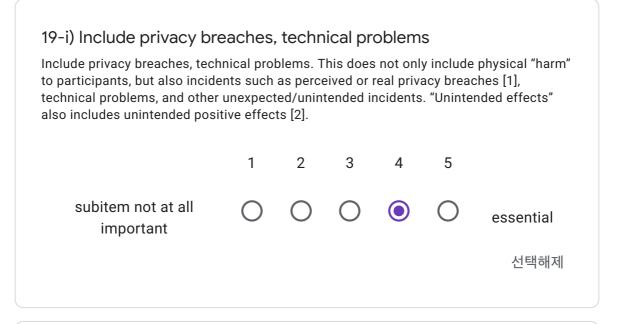
"Second, we considered that the per protocol analysis can bias the result of the present randomized controlled trial, although the number of participants who dropped out from the study was the same in both groups."

19) All important harms or unintended effects in each group (for specific guidance see CONSORT for harms)

Does your paper address CONSORT subitem 19?*

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.

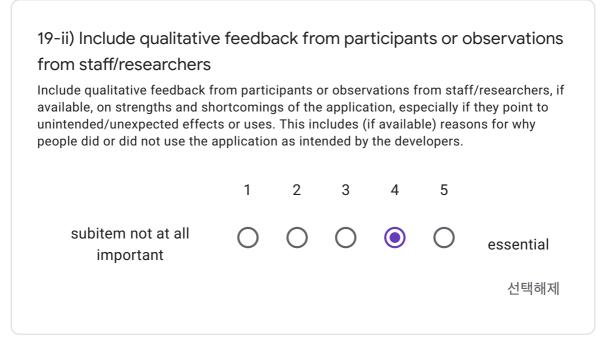


Does your paper address subitem 19-i?

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

"There were no revisions, updates, or breaches of the program during the study period."

There were no specific side effects or unintended effects. We presented the results of simulator sickness questionnaire measuring the side effect such as nausea, eyestrain, and disorientation in Table 5. They showed good tolerability.



Does your paper address subitem 19-ii?

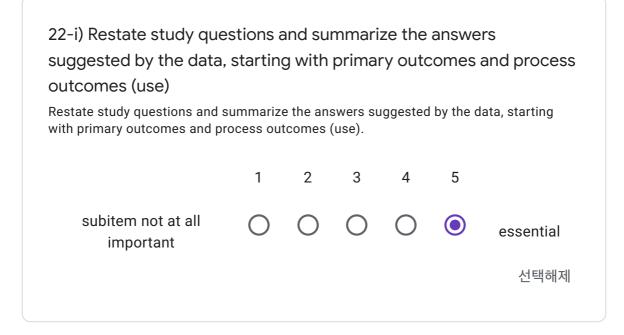
Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Table 5 shows the simulator sickness measured by SSQ after each training session and the level of interest and satisfaction reported in a Likert scale ranging from 0 to 100 by VR group participants."

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

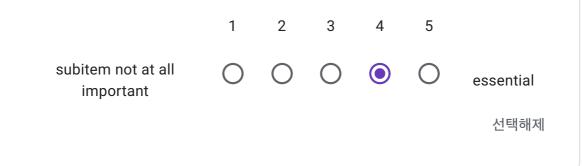


Does your paper address subitem 22-i? *

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

Discussion begins with "This study found that 1-month multidomain cognitive training using fully immersive VR was effective in improving visuospatial function and frontal-occipital FC, as well as apathy, affect, and QoL in older adults in pre-dementia cognitive state.".

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



Does your paper address subitem 22-ii?

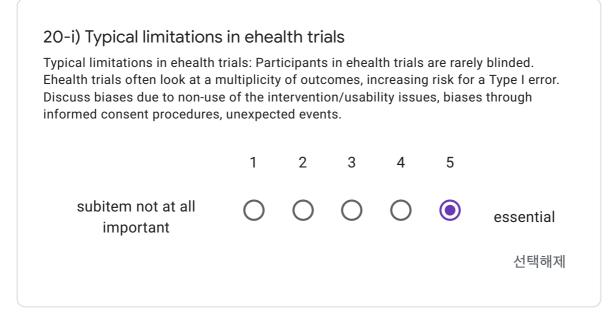
Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Thus, future studies should aim to increase the sample sizes and extend the duration of training period to better evaluate the effect of VR cognitive training."

"In the future, various active control groups should be considered to confirm the effectiveness of VR cognitive training."

"Future studies involving AD biomarkers could clearly explain the pure effect of cognitive training in individuals in preclinical or prodromal dementia state."

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



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

"First, the small sample size and short training period were the main limitations."

"Second, we considered that the per protocol analysis can bias the result of the present randomized controlled trial, although the number of participants who dropped out from the study was the same in both groups."

"Third, the lack of an active control group in this study is another limitation."

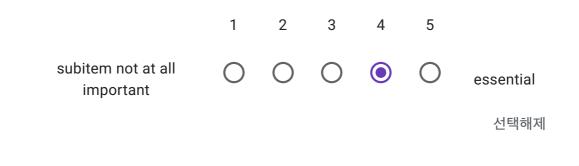
"Fourth, the lack of AD biomarkers can be a limitation because it is unclear whether the participants in our study will develop dementia."

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



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

"Lastly, heterogeneity in patients, practitioners, contents of programs, and accessibility to the VR system can limit the generalizability of the results to other populations."

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

"Second, we considered that the per protocol analysis can bias the result of the present randomized controlled trial, although the number of participants who dropped out from the study was the same in both groups."

OTHER INFORMATION

23) Registration number and name of trial registry

Does your paper address CONSORT subitem 23? *

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

Clinical Research Information Service, conforming to the World Health Organization International Clinical Trials Registry Platform (WHO-ICTRP), KCT0005243.

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

https://cris.nih.go.kr/cris/search/search_result_st01_en.jsp? seq=17055<ype=&rtype=

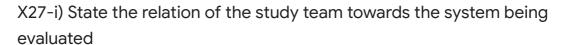
25) Sources of funding and other support (such as supply of drugs), role of funders

Does your paper address CONSORT subitem 25? *

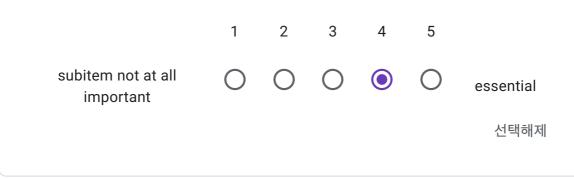
Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

This research was funded by the support program for Development of Dementia Care Service using Advanced ICT Technology 2018 funded by Korea Radio Promotion Association (RAPA) and the MSIT (Ministry of Science and ICT), Korea, under the ITRC (Information Technology Research Center) support program (IITP-2020-2017-0-01630) supervised by the IITP (Institute for Information & Communications Technology Promotion). The funding sources had no role in the study design; collection, analysis, and interpretation of data; writing of the report; or decision to submit the article for publication.

X27) Conflicts of Interest (not a CONSORT item)



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.



Does you	r paper	· address	subitem	X27-i?
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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 stated the information of the program developers in Methods section

"The multidomain VR cognitive training program was developed between November 2018 and April 2019 by the authors who are board-certified geriatric neuropsychiatrists and clinical neuropsychologists with expertise." and "This program was used only for this study and not open for commercial use."

About the CONSORT EF	HEALTH checklist
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As a result of using this checklist, did you make changes in your manuscript? *

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) no

What were the most important changes you made as a result of using this checklist?

X27-i State the relation of the study team towards the system being evaluated.

We added these sentences in the Methods section. "The multidomain VR cognitive training program was developed between November 2018 and April 2019 by the authors who are board-certified geriatric neuropsychiatrists and clinical neuropsychologists with expertise." and "This program was used only for this study and not open for commercial use."

How much time did you spend on going through the checklist INCLUDING making changes in your manuscript *

3 days as a whole.

As a result of using this checklist, do you think your manuscript has improved? *

🕽 yes

) no

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o no	
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