## **Supplement 4**

## **CONSORT Checklist**

Section/Topic	Item No	Checklist item	Reported on page N
_		Title and abstract	
	1a	Identification as a randomised trial in the title	1
	1b	Structured summary of trial design, methods, results, and conclusions (for specific guidance see CONSORT for abstracts)	1
		Introduction	
Background and	2a	Scientific background and explanation of rationale	2
objectives	2b	Specific objectives or hypotheses	2,10
		Methods	
Trial design	3a	Description of trial design (such as parallel, factorial) including allocation ratio	10, Appendix
	3b	Important changes to methods after trial commencement (such as eligibility criteria), with reasons	n/a
Participants	4a	Eligibility criteria for participants	10
	4b	Settings and locations where the data were collected	10
Interventions	5	The interventions for each group with sufficient details to allow	10.11
		replication, including how and when they were actually administered	Table 1
Outcomes	6a	Completely defined pre-specified primary and secondary outcome measures, including how and when they were assessed	12,13,14
	6b	Any changes to trial outcomes after the trial commenced, with reasons	n/a
Sample size	7a	How sample size was determined	n/a
	7b	When applicable, explanation of any interim analyses and stopping guidelines	n/a
Randomisation:		gaideinies	
Sequence generation	8a	Method used to generate the random allocation sequence	10
	8b	Type of randomisation; details of any restriction (such as blocking and block size)	10
Allocation	9	Mechanism used to implement the random allocation sequence (such	12
concealment		as sequentially numbered containers), describing any steps taken to	
mechanism		conceal the sequence until interventions were assigned	
Implementation	10	Who generated the random allocation sequence, who enrolled participants, and who assigned participants to interventions	12
Blinding	11a	If done, who was blinded after assignment to interventions (for	12
C		example, participants, care providers, those assessing outcomes) and how	
	11b	If relevant, description of the similarity of interventions	12
Statistical methods	12a	Statistical methods used to compare groups for primary and secondary outcomes	14
	12b	Methods for additional analyses, such as subgroup analyses and	14
		adjusted analyses  Results	
Participant flow (a	13a	For each group, the numbers of participants who were randomly	Appendi
diagram is strongly recommended)	134	assigned, received intended treatment, and were analysed for the primary outcome	A
	13b	For each group, losses and exclusions after randomisation, together	10
Recruitment	14a	with reasons  Dates defining the periods of recruitment and follow-up	11
	14a 14b	Why the trial ended or was stopped	n/a
Baseline data	15	A table showing baseline demographic and clinical characteristics for	4
Numbers analysed	16	each group  For each group, number of participants (denominator) included in	4,5
		each analysis and whether the analysis was by original assigned groups	

Section/Topic	Item No	Checklist item	Reported on page No
Outcomes and estimation	17a	For each primary and secondary outcome, results for each group, and the estimated effect size and its precision (such as 95% confidence interval)	6
	17b	For binary outcomes, presentation of both absolute and relative effect sizes is recommended	7
Ancillary analyses	18	Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing pre-specified from exploratory	n/a
Harms	19	All important harms or unintended effects in each group (for specific guidance see CONSORT for harms)	7
		Discussion	
Limitations	20	Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses	7
Generalisability	21	Generalisability (external validity, applicability) of the trial findings	8
Interpretation	22	Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence	9
		Other information	
Registration	23	Registration number and name of trial registry	10
Protocol	24	Where the full trial protocol can be accessed, if available	10
Funding	25	Sources of funding and other support (such as supply of drugs), role of funders	15