Supplement 1

Checklist: factors to be considered, and recommendations for best practice when designing, conducting and reporting human intervention studies to evaluate the health benefits of foods

Phase	Factors to considered, and recommendation	s for best practice when designing, conducting and reporting hun Recommendations for design and conduct	nan intervention studies to evaluate the health benefits of Recommendations for reporting	Reported on line No
		•	Explicitly state hypothesis, link to primary outcome	81-85
Design	Hypothesis	Clear hypothesis	measures	
	Study design	Appropriate design	Clearly describe, with rationale	114-132
	Duration	Appropriate to design, intervention and outcome measures	Clearly describe, with rationale	114-132
Conduct Analysis and interpretation	Intervention	Test and control products suitably matched	Describe test and control products in detail, with rationale	114-132
	Amount	Appropriate to outcome measures and to practical usage	Clearly describe, with rationale	114-132
	Outcome assessment	Define primary outcomes and methods of measurement	Clearly describe how and when assessed and link to hypothesis	89-113, 134-151
		Define all secondary outcomes and methods of measurement	Clearly describe how and when assessed	89-113
	Eligibility criteria	Define all eligibility criteria	Describe criteria using objective, quantitative descriptors	89-113
			where possible	
	Statistical considerations			
	Randomisation	Use randomised design where possible and ensure appropriate	Clearly describe randomised design and the methods used	114-132
		method for allocation sequence generation and	for randomisation, sequence generation and concealment	
	Blinding	concealment Ensure double blinding if feasible, single blinding if not	Describe how blinding was achieved (who was blinded	114-132
	Billding	Ensure double billiaing in leasible, single billiaing in lot	and how), report success rate	114-132
	Size of study	Conduct power calculation based on primary outcome	Include all elements of power calculation	114-132
	Study protocol	measures		
	**	Obtain full ethical approval, register trial, comply with the	Give details of research ethics authority and approval	04.05
	Ethical approval and trial registration	Declaration of Helsinki	number, and database and registration number	81-85
	Recruitment	Define recruitment strategy and process,	Explicitly describe strategy, provide participant flow diagram	81-85
		including settings and dates	alagiam	
	Data collection	•		
	Background diet and	Select suitable methods to collect and analyse data	Describe assessment and analysis methods, report descriptive	114-132
	monitoring change		data on background diet and changes for all components	114-132
			that may be relevant by allocated intervention group	
	Background health status and	Define relevant measures, select suitable methods of	Justify relevant measures, describe assessment	81-85
	lifestyle,	assessment	methods,	01-00
	and monitoring changes		and report relevant factors and changes by allocated	
	5 5		intervention group	
	Unintended effects	Devise strategy and methods to capture data	Report methods to assess unintended effects and report by allocated intervention group	114-132
	Adverse events	Have mechanisms in place, to record, and	Clearly define and report all adverse events by	106-109
	Adverse events	Have mechanisms in place to record and	allocated	100-109
		respond to adverse events	intervention group	
	Compliance	Define acceptable levels of compliance, use appropriate strategies	Report methods used to measure and maximise compliance,	128-132
		to maximise compliance, select and use rigorous but		
		feasible	report compliance rates numerically and by allocated	
		methods for assessment of compliance	intervention groups	
	Statistical analysis	Devise appropriate analysis methods, based on study	Describe distribution of data, present descriptive	175-181
		design and outcome measures	characteristics by allocated intervention group, present hypothesis tests for comparing allocated intervention	
			groups, make clear distinction between primary	
			v. secondary endpoint analyses, state whether	
			analysis	
			ITT or PP	
	Discussion and interpretation	Consider study limitations and generalisability of findings	Discussion of limitations and generalisability of study findings	386-396
	Conclusion	Relate directly to hypothesis, study design, test product	Clear statement of conclusion	398-405
		and study participants		
ITT intention t	to treat: DD_ner protocol			

ITT, intention to treat; PP, per protocol.

Welch RW, Antoine JM, Berta JL, Bub A, de Vries J, Guarner F, Hasselwander O, Hendriks H, Jäkel M, Koletzko BV, Patterson CC, Richelle M, Skarp M, Theis S, Vidry S, Woodside JV; International Life Sciences Institute Europe Functional Foods Task Force. Guidelines for the design, conduct and reporting of human intervention studies to evaluate the health