Data supplement to Diefenbach et al. Repetitive transcranial magnetic stimulation for generalised anxiety disorder: pilot randomised, double-blind, sham-controlled trial. Br J Psychiatry doi: 10.1192/bjp.bp.115.168203

Online supplement DS1

## **Competers sample**

*Completers sample baseline characteristics* 

There were no differences between the active and sham groups on baseline demographic or

clinical characteristics (See Table DS1).

Table DS1. Demographic	and Clinical Ch	naracteristics by C	Group for Com	pleters sample
		2		

Characteristic	Active	Sham	Test
	( <i>n</i> = 9)	( <i>n</i> = 10)	
Age	46.44 (10.81)	41.40 (14.07)	t = 0.87
N (%) Women	8 (88.9%)	7 (70.0%)	$\chi^2 = 1.02$
N (%) White	9 (100%)	10 (100%)	Not computed
N (%) Non-Hispanic	9 (100%)	10 (100%)	Not computed
N (%) with High	9 (100%)	10 (100%)	Not computed
School diploma			
N (%) Working	6 (66.7%)	6 (60.0%)	$\chi^2 = 0.09$
N (%) Married	6 (66.7%)	7 (70.0%)	$\chi^2 = 0.02$
CGI-Severity	5.11 (0.78)	4.50 (0.71)	t = 1.78
HRSA	24.89 (5.23)	21.10 (3.98)	<i>t</i> = 1.79
PSWQ	69.67 (5.41)	62.10 (10.55)	<i>t</i> = 1.93
HRSD	14.67 (3.40)	13.40 (2.31)	<i>t</i> = 0.96

DASS-Depression	15.33 (10.98)	13.50 (8.38)	t = 0.41
N (%) Taking	6 (66.7%)	7 (70.0%)	$\chi^2 = 0.02$
psychotropic meds			
N (%) Any	6 (66.7%)	6 (60.0%)	$\chi^2 = 0.09$
comorbid disorder			
N (%) Comorbid	3 (33.3%)	4 (40.0%)	$\chi^2 = 0.09$
anxiety disorder			
N (%) Comorbid	5 (55.6%)	3 (30.0%)	$\chi^{2} = 1.27$
depressive disorder			

*Note*. all tests p < .05; t df = 17;  $\chi^2 df = 1$ , N = 19; CGI-Severity = Clinical Global Impression-Severity Scale; HRSA = Hamilton Rating Scale for Anxiety; PSWQ = Penn State Worry Questionnaire; HRSD = Hamilton Rating Scale for Depression; DASS-Depression = Depression Anxiety Stress Scales Depression Subscale

#### Completers sample data analyses

*Data Analytic Plan.* Patient attrition (n = 1) at the 3-month follow-up caused unequal sample sizes across time. Thus, in order to include all available data and maximize power, separate 2 condition (active versus sham) by 2 time repeated measures analysis of variance (ANOVAs) were conducted: 1) with pretreatment and posttreatment as time variables and 2) with pretreatment and follow-up as time variables. The primary statistic of interest was the condition by time interaction effect and statistically significant interactions were followed by within-group paired *t*-tests. Within-group effect sizes (Cohen's *d*) are also presented and interpreted as 0.30 = small, 0.50 = medium, and  $0.08 = \text{large.}^{41}$  Given that this is a pilot study with small samples, statistical trends (p < .10) are also reported for future hypothesis generation purposes.

*Posttreatment Results.* Table DS2 displays descriptive statistics and paired *t*-tests of outcome variables and effect sizes for treatment completers at posttreatment. For the HRSA there was a significant effect of time [F(1, 17) = 56.89, p < .001] and group by time interaction [F(1, 17) = 6.49, p < .05]. This interaction resulted from a larger improvement in active versus sham,

although it should be noted that HRSAS effect sizes for both treatment conditions were large and statistically significant. Regarding secondary symptoms, there was a significant improvement over time for the DASS-DEP [F(1, 17) = 6.23, p < .05] and HRSD [F(1, 17) = 15.92, p < .001], and a trend for the PSWQ [F(1, 17) = 4.21, p = .056]. None of the group by time interaction effects were statistically significant for secondary symptoms, although there was a trend toward interaction effects for the HRSD [F(1, 17) = 3.83, p = .067] and PSWQ [F(1, 17) = 3.26, p = .089]. In addition, a review of effect sizes indicated larger improvements in secondary symptoms for active (d range = moderate to large effects) versus sham (d range = small to moderate effects).

*3-Month Follow-up Results.* Means, standard deviations, paired *t*-tests, and effect sizes of outcome variables for participants completing 3-month follow-up are displayed in Table DS2. A significant time effect suggested overall improvements in anxiety [HRSA *F* (1, 16) = 26.22, *p* < .001], worry [PSWQ *F* (1, 16) = 21.43, *p* < .001], and depressive symptoms [HRSD *F* (1, 16) = 8.14, *p* < .05; DASS-DEP *F* (1, 16) = 5.19, *p* < .05]. Significant treatment condition by time interactions were also found for anxiety [HRSA *F* (1, 16) = 16.37, *p* = .001], worry [PSWQ *F* (1, 16) = 5.64, *p* < .05] and clinician-rated [HRSD *F* (1, 16) = 10.55, *p* < .01], but not self-reported depressive symptoms [DASS-DEP *F* (1, 16) = 1.50, *p* > .05]. The interactions occurred due to large (all  $ds \ge 0.80$ ) and statistically significant improvements in the active group with nonsignificant, and smaller, more variable effect sizes (*d* range = negligible to moderate) in sham.

#### Additional references

41 Cohen J (1988): *Statistical power analysis for the behavioral sciences*. 2nd ed. Hillsdale, NJ: Lawrence Erlbaum Associates.

Variable	Treatment		Posttreat	ment Com	pleters		3MFU Completers		
	Condition	Pre	Post	t	<i>d</i> pre-post [95% CI]	Pre	3MFU	t	<i>d</i> pre-FU [95% CI]
HRSA	Sham	21.10	14.50	4.68***	1.48 [0.55 – 2.38]	21.44	19.56	1.26	0.40
		(3.98)	(5.13)			(4.07)	(7.58)		[-0.26 – 1.03]
	Active	24.89	11.56	5.78***	1.93 [0.78 – 3.04]	24.89	8.78	5.06***	1.79
		(5.23)	(6.50)			(5.23)	(8.33)		[0.62 – 2.92]
PSWQ	Sham	62.10	61.60	0.30	0.09 [-0.53 – 0.71]	63.33	58.11	2.12	0.71
		(10.55)	(9.11)			(10.39)	(9.97)		[-0.05 – 1.43]
	Active	69.67	61.89	2.02	0.67	69.67	53.44	4.13**	1.46
		(5.40)	(10.30)			(5.40)	(9.89)		[0.42 - 2.46]
HRSD	Sham	13.40	11.50	2.48*	0.78 [0.05 - 1.48]	13.78	14.33	-0.30	-0.10
		(2.32)	(3.71)			(2.11)	(6.16)		[-0.56 – 0.75]
	Active	14.67	9.11	3.12*	1.04 [0.20 - 1.84]	14.67	6.11	4.02**	1.42
		(3.39)	(5.15)		[]	(3.39)	(5.32)		[0.39 – 2.41]

Table DS2. Completers Sample Means, Standard Deviations, Paired t-tests and Effect Sizes for Outcome Variables

DASS-	Sham	13.50	10.60	2.37*	0.75	13.67	10.89	0.86	0.29
					[0.03 - 1.44]				
DEP		(8.38)	(7.27)			(8.87)	(12.58)		[-0.39 – 0.95]
	Active	15.33	8.67	1.74	0.58	15.33	6.11	2.21	0.78
					[-0.15 - 1.28]				
		(10.98)	(10.14)			(10.97)	(11.09)		[-0.04 – 1.56]

*Note*. Active n = 9 for pretreatment, posttreatment, and 3 month follow-up. Sham n = 10 for pre-to-posttreatment analyses and n = 9 for pre-to-3-month follow-up analyses. \* p < .05, \*\* p < .01, \*\*\* p < .001. FU = follow-up; HRSA = Hamilton Rating Scale for Anxiety; PSWQ = Penn State Worry Questionnaire; HRSD = Hamilton Rating Scale for Depression; DASS-DEP = Depression Anxiety Stress Scales-Depression Subscale; CI = confidence interval.





## 34 participants enrolled

Withdrew prior to randomization (n = 8) or data excluded from analyses (n = 1)

- No longer interested (n = 4)
- Wanted to pursue alternative treatment (n = 2)
- Declined to do MRI (n = 1)
- Did not want randomization (n = 1)
- Data excluded due to violation of the treatment schedule (n = 1 active)

## 25 participants Randomized and included in Intent-to-Treat Sample (n = 13 active, n = 12 sham)

#### Withdrew/Excluded after initiating treatment (n = 6)

- Unable to adhere to treatment schedule (n = 2 active, n = 1 sham)
- Medical illness or event (n = 1 active, n = 1 sham)
- Patient discontinued without giving a reason (*n* = 1 active)

**19** participants in treatment completers sample (n = 9 active rTMS, n = 10 sham)

Lost to Follow-up (n = 1, sham)

18 participants completed 3-month follow-up through 9/26/14

# Figure DS2. CONSORT Checklist

Section/Topic	ltem No	Checklist item	Reported on page No
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	1-2
objectives	2b	Specific objectives or hypotheses	2
Methods			
Trial design	3a	Description of trial design (such as parallel, factorial) including allocation ratio	3
0	3b	Important changes to methods after trial commencement (such as eligibility criteria), with reasons	3
Participants	4a	Eligibility criteria for participants	2
-	4b	Settings and locations where the data were collected	3
Interventions	5	The interventions for each group with sufficient details to allow replication, including how and when they were	
		actually administered	2-3
Outcomes	6a	Completely defined pre-specified primary and secondary outcome measures, including how and when they were appaared	0.0
	6h	Any changes to trial outcomes after the trial commenced, with reasons	<u>2-3</u> N/A
Sample size	00 7a	How sample size was determined	3
Oumple Size	74 7h	When applicable, explanation of any interim analyses and stopping quidelines	<u> </u>
Randomisation <sup>.</sup>	10	when applicable, explanation of any interim analyses and stopping guidelines	
Sequence	8a	Method used to generate the random allocation sequence	3
generation	8b	Type of randomisation; details of any restriction (such as blocking and block size)	3
Allocation	9	Mechanism used to implement the random allocation sequence (such as sequentially numbered containers),	
concealment		describing any steps taken to conceal the sequence until interventions were assigned	
mechanism			3
Implementation	10	Who generated the random allocation sequence, who enrolled participants, and who assigned participants to	
		interventions	3
Blinding	11a	If done, who was blinded after assignment to interventions (for example, participants, care providers, those	
		assessing outcomes) and how	3

	11b	If relevant, description of the similarity of interventions	2
Statistical methods	12a	Statistical methods used to compare groups for primary and secondary outcomes	3
	12b	Methods for additional analyses, such as subgroup analyses and adjusted analyses	3
Results			
Participant flow (a	13a	For each group, the numbers of participants who were randomly assigned, received intended treatment, and	
diagram is strongly		were analysed for the primary outcome	Figure DS1
recommended)	13b	For each group, losses and exclusions after randomisation, together with reasons	Figure DS1
Recruitment	14a	Dates defining the periods of recruitment and follow-up	Figure DS1
	14b	Why the trial ended or was stopped	N/A
Baseline data	15	A table showing baseline demographic and clinical characteristics for each group	Table 1,
			Table DS1
Numbers analysed	16	For each group, number of participants (denominator) included in each analysis and whether the analysis was	
		by original assigned groups	3
Outcomes and	17a	For each primary and secondary outcome, results for each group, and the estimated effect size and its	
estimation		precision (such as 95% confidence interval)	Table 2,
			Table DS2
	17b	For binary outcomes, presentation of both absolute and relative effect sizes is recommended	NR
Ancillary analyses	18	Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing	4-5
	40	pre-specified from exploratory	4 Table 0
Harms	19	All Important narms or unintended effects in each group (for specific guidance see CONSORT for harms)	4, Table 3
Discussion			
Limitations	20	Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses	6
Generalisability	21	Generalisability (external validity, applicability) of the trial findings	5-6
Interpretation	22	Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence	5-6
Other information			
Registration	23	Registration number and name of trial registry	3
Protocol	24	Where the full trial protocol can be accessed, if available	N/A
Funding	25	Sources of funding and other support (such as supply of drugs), role of funders	6

Note: N/A = not applicable. NR = not reported



Figure DS3 A Group (rTMS vs. Sham) × Time (pre- vs. posttreatment) interaction in right DLPFC during the gambling decision making fMRI task (p < 0.05 uncorrected, k = 30). The green dot represents the point of rTMS stimulation.