**Description:** Appendix A1 is a Table consisting of articles that their full-text was reviewed but they were not included in the systematic review because they did not meet the inclusion criteria. The reasons for exclusion of each article is listed.

**Appendix A1. Excluded articles.**

|  |  |
| --- | --- |
| **Article** | **Reason(s) for exclusion** |
| 1. Castrillo A, Olmos LG, Rodríguez F, Duarte J. Gait Disorder in a Cohort of Patients With Mild and Moderate Alzheimer’s Disease. Am J Alzheimer's Dis Other Demen. 2016(3):257-62. | 1. Falls were not an outcome measure |
| 2. Davis JC, Best J, Hsu CL, Nagamatsu LS, Dao E, Liu‐Ambrose T. Examining the Effect of the Relationship Between Falls and Mild Cognitive Impairment on Mobility and Executive Functions in Community‐Dwelling Older Adults. J Am Geriatr Soc. 2015;63(3):590-3. | 1. Falls recorded retrospectively
2. Regression analysis was not performed
 |
| 3. Doi T, Shimada H, Makizako H, Tsutsumimoto K, Hotta R, Nakakubo S, Suzuki T. Mild cognitive impairment, slow gait, and risk of disability: a prospective study. J Am Med Dir Assoc. 2015;16(12):1082-6. | 1. Gait not investigated as a risk factor for falls.
2. Falls were not an outcome measure
 |
| 4. Shimada H, Park H, Makizako H, Tsutsumimoto K, Uemura K, Nakakubo S, Hotta R, Suzuki T. Cognitive function and falling among older adults with mild cognitive impairment and slow gait. Geriatr Gerontol Int. 2015;15(8):1073-8. | 1. Falls recorded retrospectively
 |
| 5. Buri H, Picton J, Dawson P. Perceptual Dysfunction in Elderly People with Cognitive Impairment: a Risk Factor for Falls?. Br J Occup Ther. 2000;63(6):248-53. | 1. Falls recorded retrospectively
2. Gait assessment tools not used
3. Falls were not an outcome measure
4. Demographic information not provided
5. Regression analysis was not performed
 |
| 6. van Dijk PT, Meulenberg OG, Van de Sande HJ, Habbema JD. Falls in dementia patients. Gerontologist. 1993;33(2):200-4. | 1. Falls recorded retrospectively

2. Gait was not assessed. 3. Regression analysis was not performed |
| 7. Brody EM, Kleban MH, Moss MS, Kleban F. Predictors of falls among institutionalized women with Alzheimer's disease. J Am Geriatr Soc. 1984;32(12):877-82. | 1. Gait was not assessed. |
| 8. Rolenz E, Reneker JC. Validity of the 8-Foot Up and Go, Timed Up and Go, and Activities-Specific Balance Confidence scale in older adults with and without cognitive impairment. J Rehab Res Dev. 2016;53(4):511-9. | 1. Falls recorded retrospectively 2. Regression analysis was not performed |
| 9. Lockhart T, Kim S, Kapur R, Jarrott S. Evaluation of gait characteristics and ground reaction forces in cognitively declined older adults with an emphasis on slip-induced falls. Assist Technol. 2009;21(4):188-95. | 1. Falls recorded retrospectively
2. Falls were not an outcome measure
3. Regression analysis was not performed
 |
| 10. Suttanon P, Hill KD, Said CM, LoGiudice D, Lautenschlager NT, Dodd KJ. Balance and mobility dysfunction and falls risk in older people with mild to moderate Alzheimer disease. Am J Phys Med Rehab. 2012;91(1):12-23. | 1. Falls recorded retrospectively 2. Regression analysis was not performed |
| 11. Kosse NM, de Groot MH, Vuillerme N, Hortobágyi T, Lamoth CJ. Factors related to the high fall rate in long-term care residents with dementia. Int Psychogeriatr. 2015;27(5):803-14. | 1. Falls were measured prospectively, but gait was measured retrospectively2. Adjusted risk estimates were not reported |
| 12. Kikuchi R, Kozaki K, Iwata A, Hasegawa H, Toba K. Evaluation of risk of falls in patients at a memory impairment outpatient clinic. Geriatr Gerontol Int. 2009;9(3):298-303. | 1. No sub-group analysis for patients with dementia. |
| 13. Whitney J, Close JC, Lord SR, Jackson SH. Identification of high risk fallers among older people living in residential care facilities: a simple screen based on easily collectable measures. Arch Gerontol Geriatr. 2012;55(3):690-5. | 1. No sub-group analysis for patients with dementia. 2. Falls recorded retrospectively  |
| 14. Ryan JJ, McCloy C, Rundquist P, Srinivasan V, Laird R. Fall risk assessment among older adults with mild Alzheimer disease. J Geriatr Phys Ther. 2011;34(1):19-27. | 1. Falls recorded retrospectively 2. Regression analysis was not performed |
| 15. Kato-Narita EM, Radanovic M. Characteristics of falls in mild and moderate Alzheimer's disease. Dement Neuropsychol. 2009;3(4):337-43. | 1. Regression analysis was not performed  |
| 16. Eriksson S, Gustafson Y, Lundin-Olsson L. Characteristics associated with falls in patients with dementia in a psychogeriatric ward. Aging Clin Exp Res. 2007;19(2):97-103. | 1. Falls recorded retrospectively
 |
| 17. Ballard CG, Shaw F, Lowery K, McKeith I, Kenny R. The prevalence, assessment and associations of falls in dementia with Lewy bodies and Alzheimer’s disease. Dement Geriatr Cogn Disord. 1999;10(2):97-103 | 1. Regression analysis was not performed |
| 18. Vassallo M, Mallela SK, Williams A, Kwan J, Allen S, Sharma JC. Fall risk factors in elderly patients with cognitive impairment on rehabilitation wards. Geriatr Gerontol Int. 2009;9(1):41-6. | 1. No sub-group analysis for patients with dementia  |
| 19. Taylor ME, Delbaere K, Mikolaizak AS, Lord SR, Close JC. Gait parameter risk factors for falls under simple and dual task conditions in cognitively impaired older people. Gait Posture. 2013;37(1):126-30. | 1. Regression analysis was not performed. |
| 20. Taylor ME, Delbaere K, Lord SR, Mikolaizak AS, Close JC. Physical impairments in cognitively impaired older people: implications for risk of falls. Int Psychogeriatr. 2013;25(1):148-56. | 1. No sub-group analysis for patients with dementia. |
| 21. McGough EL, Logsdon RG, Kelly VE, Teri L. Functional mobility limitations and falls in assisted living residents with dementia: physical performance assessment and quantitative gait analysis. J Geriatr Phys Ther. 2013;36(2):78-86. | 1. Regression analysis was not performed. |
| 22. Nakamura T, Meguro K, Sasaki H. Relationship between falls and stride length variability in senile dementia of the Alzheimer type. Gerontol. 1996;42(2):108-13. | 1. Regression analysis was not performed. |