## Supplementary table 5. Outcome details for studies comparing different imaging techniques or imaging vs. palpation guidance at small joints and periarticular structures (PICO1)

| AUTOR,<br>YEAR                                    | DISEASE             | SITE                           | OUTCOME<br>CATEGORY | OUTCOME<br>DETAIL    | OUTCOME EXPLANATION (UNIT)1   | TIME POINT                        | RESULTS <sup>2</sup>           | OVERALL<br>ROB <sup>3</sup> |  |  |  |  |
|---|---------------------|--------------------------------|---------------------|----------------------|---|-----------------------------------|--------------------------------|-----------------------------|--|--|--|--|
| ULTRASOUND vs. PALPATION GUIDANCE                 |                     |                                |                     |                      |   |                                   |                                |                             |  |  |  |  |
| Park et al.,<br>2015                              | AC joint OA         | AC joint                       | Accuracy            | Accuracy             | Intra-target verified by contrast medium in joint according to X-ray exam (%) | Post-procedure                    | Post-procedure: better for US  | Serious                     |  |  |  |  |
|   |                     |                                | Safety              | Function Pain        | Shoulder Pain and Disability Index (%)  | BSL, 1m, 3m, 6m                   | 6m: better for US              | Serious                     |  |  |  |  |
|   |                     |                                | Safety              | Pain                 | Verbal Numeric Pain Scale at rest (cm)  | BSL, 1m, 3m, 6m                   | no difference                  | Serious                     |  |  |  |  |
|   |                     |                                | Safety              | Pain                 | Verbal Numeric Pain Scale under local pressure (cm)                           | BSL, 1m, 3m, 6m                   | 6m: better for US              | Serious                     |  |  |  |  |
|   |                     |                                | Safety              | Pain                 | Verbal Numeric Pain Scale performing arm adduction (cm)                       | BSL, 1m, 3m, 6m                   | 3,6m: better for US            | Serious                     |  |  |  |  |
| Hak Roh et<br>al., 2019                           | trigger finger      | finger flexor<br>tendon sheath | Safety              | Pain                 | Patient Pain VAS (cm)   | BSL, 3m, 6m                       | no difference                  | some concern                |  |  |  |  |
|   |                     |                                | Safety              | Adverse events       | Complications <sup>4</sup> (n)  | BSL, 3m, 6m                       | no difference                  | some concern                |  |  |  |  |
|   |                     |                                | Efficacy            | Function             | QuickDASH   | BSL, 3m, 6m                       | no difference                  | some concern                |  |  |  |  |
|   |                     |                                | Efficacy            | Patient satisfaction | 5-point scale   | n.a. <sup>5</sup>                 | BSL: better for US             | some concern                |  |  |  |  |
|   |                     |                                | Efficacy            | Treatment failure    | recurrence/persistence of triggering (%)                                      | BSL, 3m, 6m                       | no difference                  | some concern                |  |  |  |  |
| Lee et al.,<br>2018                               | trigger finger      | A1 pulley                      | Safety              | Pain                 | Patient Pain VAS (cm)   | BSL, 2w, 4w, last FU <sup>6</sup> | 2,4w: better for US            | some concern                |  |  |  |  |
|   |                     |                                | Safety              | Adverse events       | Complications <sup>7</sup> (%)  | last FU <sup>6</sup>              | no difference                  | some concern                |  |  |  |  |
|   |                     |                                | Efficacy            | Function             | PIP contracture (°)   | BSL, last FU <sup>6</sup>         | no difference                  | some concern                |  |  |  |  |
|   |                     |                                | Efficacy            | Patient satisfaction | Satisfied/Unsatisfied (%)   | last FU <sup>6</sup>              | no difference                  | some concern                |  |  |  |  |
| Cecen et al.,<br>2015                             | trigger finger      | A1 pulley                      | Safety              | Pain                 | Patient Pain VAS (cm)   | BSL, 6w, 6m                       | no difference                  | high                        |  |  |  |  |
|   |                     |                                | Safety              | Adverse events       | Complications <sup>8</sup> (%)  | BSL, 6w, 6m                       | no difference                  | high                        |  |  |  |  |
|   |                     |                                | Efficacy            | Function             | Quinnell grading  | BSL, 6w, 6m                       | no difference                  | high                        |  |  |  |  |
|   |                     |                                | Efficacy            | Treatment failure    | need for a second injection (%)   | BSL, 6w, 6m                       | no difference                  | high                        |  |  |  |  |
| Pan et al.,<br>2019                               | trigger finger      | A1 pulley                      | Efficacy            | Function             | Amount of triggering (%) – semiquantitative scale                             | BSL, post-procedure, 1w           | no difference <sup>9</sup>     | high                        |  |  |  |  |
|   |                     |                                | Cost/Time           | Time                 | Duration of operation (min)   | during procedure                  | During procedure: worse for US | high                        |  |  |  |  |
| ULTRASOUND vs. FLUOROSCOPY vs. PALPATION GUIDANCE |                     |                                |                     |                      |   |                                   |                                |                             |  |  |  |  |
| Gershkovich<br>et al., 2019                       | Thumb CMC arthritis | CMC joint of the thumb         | Efficacy            | Treatment failure    | Patients needing surgery (%)  | n.a. <sup>5</sup>                 | no difference <sup>10</sup>    | serious                     |  |  |  |  |

|   |     |     | Efficacy  | Time to next intervention | Time from the first injection to the moment of surgery (d) | n.a. <sup>5</sup>                    | better for palpation guidance compared to US   | serious |  |  |  |
|---|-----|-----|-----------|---------------------------|--|--------------------------------------|--|---------|--|--|--|
|   |     |     | Efficacy  | Time to next intervention | Time between the injections (d)11                          | n.a. <sup>5</sup>                    | better for fluoroscopy compared to US for the time between 2nd and 3rd injection <sup>12</sup> | serious |  |  |  |
|   |     |     | Cost/Time | Costs                     | Costs including physician charges and facility charges     | n.a. <sup>5</sup>                    | worse for US <sup>13</sup>   | serious |  |  |  |
| ULTRASOUND/COMPUTED TOMOGRAPHY vs. PALPATION GUIDANCE |     |     |           |                           |  |                                      |  |         |  |  |  |
| Resnick et al., 2017                                  | JIA | TMJ | Safety    | Pain                      | Decrease in pain (%)                                       | BSL, FU <sup>14</sup>                | no difference  | 14/20   |  |  |  |
|   |     |     | Efficacy  | Anatomical differences    | Increase in maximal incisal opening <sup>15</sup> (mm)     | BSL, FU <sup>14</sup>                | no difference  | 14/20   |  |  |  |
|   |     |     | Efficacy  | Treatment response        | Decrease in synovial enhancement ratio <sup>16</sup>       | BSL <sup>17</sup> , FU <sup>18</sup> | no difference  | 14/20   |  |  |  |
|   |     |     | Cost/Time | Time                      | Unitaleral procedure times <sup>19</sup> (min)             | Post-procedure                       | Post-procedure: worse for US   | 14/20   |  |  |  |
|   |     |     | Cost/Time | Time                      | Bilateral Procedure times <sup>19</sup> (min)              | Post-procedure                       | Post-procedure: worse for US   | 14/20   |  |  |  |

The abbreviation BSL (baseline) refers to the time point before the intervention happened

AC joint, Acromicolavicular joint; BSL, Baseline; CMC, carpometacarpal; d, day(s); Fluo., fluoroscopy; JIA, Juvenile idiopathic arthritis; Last FU, last follow-up; m, month(s); PIP, Proximal interphalangeal joint; Quick DASH, Quick Disability of Arm, Shoulder and Hand; TMJ, temporomandibular joint; US, Ultrasound; VAS, visual analogue scale; w, week(s);

<sup>&</sup>lt;sup>1</sup> The outcomes "Complications" are usually only presented in descriptive manner by the respective authors. Statistical tests were not performed by the authors, unless stated otherwise.

<sup>&</sup>lt;sup>2</sup> No difference = at none of the give time points a difference was found between the groups. If differences were found, the time point for the differences is depicted.

<sup>&</sup>lt;sup>3</sup> For details on RoB see supplementary table 3

<sup>4</sup> Described complications included: steroid flare, skin discoloration or subcutaneous fat atrophy, symptoms of digital nerve irritation (tingling/numbness), superficial infection

<sup>5</sup> Not described by the authors

<sup>&</sup>lt;sup>6</sup> The time point for the last follow-up visit is not described

<sup>&</sup>lt;sup>7</sup> Complications included: tenderness around the scar, loss of sensation, and presence of infection

<sup>&</sup>lt;sup>8</sup> Complications included: hemorrhage, hypopigmentation, atrophy of subcutaneous fat, infection, and tendon rupture (none of them happened)

<sup>&</sup>lt;sup>9</sup> Patients were grouped semi quantitatively according to their amount of triggering (0/1/2/3/4 - 4 is worst triggering). The results at baseline days were (% of patients): US: 0/0/10/50/40 vs palpation guidance 0/0/9.5/38/52.4. After the procedure the results were palpation guidance: 0/76.1/14.2/4.8/4.8 vs US: 52.4/40/5/0/0, while after 7 days the results were palpation guidance: 19/71.4/0/4.8/4.8 vs US: 100/0/0/0/0. A statistical test was not performed.

<sup>10</sup> The percentage of patients having surgery in the US, fluoroscopy and palpation guidance group respectively: 27.8%, 17.1%, 10.5%. No statistical test performed

<sup>11</sup> The total no of days between the 1st and the 2nd, the 2nd and the 3rd and the 3rd and the 4th injection

<sup>12</sup> Longer time in the fluoroscopy group by an average number of 9.4 days compared to US. All other comparisons between injections and methods showed no significant differences.

<sup>13</sup> Average US costs: 768\$ (SD 1132), Fluoroscopy costs: 517\$ (SD 608), palpation guidance group costs: 565\$ (SD 777). No statistical comparisons were performed

<sup>&</sup>lt;sup>14</sup> The mean  $\pm$  SD clinical follow-up was 22.6  $\pm$  4.3 months

<sup>15</sup> Maximal incisal opening was assessed using a rigid triangle or ruler while the patient was asked to open the mouth to the point of restriction.

## References

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<sup>16</sup> Synovial enhancement (Synovitis) ratio was calculated from coronal postcontrast fatsaturated T1-weighted MRI series comparing enhancement of the TMJ synovium with the longus capitis muscle

<sup>&</sup>lt;sup>17</sup> Baseline magnetic resonance images were obtained an average of 2.14 ± 1.35 months before the intervention

 $<sup>^{18}</sup>$  Follow up magnetic resonance images were obtained an average of 6.38  $\pm$  2.4 months after intervention

<sup>&</sup>lt;sup>19</sup> Procedure times were determined from the anesthesia record for each encounter