Online supplementary material S3

Table 1. Risk of bias assessment of randomised clinical trials (RoB 2).

Author, year	Randomisation process	Deviations from intended interventions	Missing outcome data	Measurement of the outcome	Selection of the reported result	Overall Bias
Amorim 2019	Low	Low	Some concerns[1]	Some concerns[2]	Low	Some concerns
Azma 2017	Some concerns[3]	Low	Low	High[4]	Low	High
Bennell 2017	Low	Low	Low	Low	Some concerns[5]	Some concerns
Berdal 2018	Low	Low	Low	Low	Low	Low
Cuperus 2015	Low	Low	Low	Low	Low	Low
Cuperus 2016	Low	Low	Low	Low	High[6]	High
Thurah 2017	Low	Low	Low	Low	Low	Low
Friesen 2017	Low	Low	Low	Low	Low	Low
Geragthy 2018	Low	Low	Low	Low	Some concerns[7]	Some concerns
Gossec 2019	Some concerns[8]	Low	Low	Low	Low	Some concerns
Hinman 2019	Low	Low	Low	Low	Low	Low
Khan 2020	Low	Low	High[9]	Low	High[10]	High
Kloek, Bossen 2018	Low	Low	High[11]	Low	High[12]	High
Kloek, van Dongen 2018	Low	Low	High[13]	Low	Low	High
Taylor-Gjevre 2017	Low	Low	High[14]	Low	Low	High
Salaffi 2016	Low	High[15]	Low	Some concerns[16]	Low	High
Solomon 2012	Low	Low	Low	High[17]	Low	High

[1]10/34 patients in control group dropped out. Their responses to the outcomes may have influenced the effect size; [2]Little info how outcomes were assessed and by whom. Maybe only electronically but it is not clearly written.; [3]Nearly no information on the randomization process at all; [4]Outcome assessor was not blinded; [5]Multiple ways to measure pain, function and physical activity were used and some ways showed significant results while others did not; [6]Cost utility was assessed using different scales in for the same outcome category. Conclusions were drawn as one of these scales reported a statistical significance.; [7]There is no info on possible protocol changes. Multiple quantitative Data that was measured but results were not shown comparing the groups; [8]Little to no information on the randomization process; [9]In the per protocol analysis a considerable amount of patients was lost; [10]Data were only statistically significant in the per protocol group not in the IIT group. Conclusions were drawn only on behalf of the per protocol analysis; [11]At 3 month follow up approximately 15% and at 12-month follow up 35% of patients were lost to follow up; [12]Multiple outcomes for the same outcomes' category. However, the majority of results was insignificant between the groups; [13]At 3 month follow up approximately 15% and at 12-month follow up 35% of patients were lost to follow up; [14]High drop-out rates, especially in the telehealth group; [15]The telehealth group had an overall stricter therapy algorithm than the control group; [16]unclear who the outcome assessor was; [17]No information on the outcome assessors.

Table 2. Risk of bias assessment of non-randomised studies of the effects of interventions (ROBINS-I tool).

Author, year	Bias due to confounding	Bias in selection of participants into the study	Bias in classification of interventions	Bias due to deviations from intended interventions	Bias due to missing data	Bias in measurement of outcomes	Bias in selection of the reported results	Overall Bias
Ammerlaan, 2014	Serious[1]	Low	Low	Moderate[2]	Low	Serious[3]	Moderate[4]	Serious
Kennedy 2017	Moderate[5]	Low	Low	Low	Serious[6]	NI[7]	Low	Serious
Legget, 2000	Moderate[8]	Moderate[9]	Low	Low	Low	Low	Low	Moderate
Nero, 2017	Serious[10]	Moderate[11]	Moderate[12]	Moderate[13]	Serious[14]	Moderate[15]	Low	Serious
Nguyen-Oghalai 2018	Moderate[16]	Low	Low	Low	Low	Low	Low	Moderate
Wood, 2019	Low	Low	Moderate[17]	Low	Low	Serious[18]	Low	Serious
Peterson, 2018	Low	Low	Moderate[19]	Low	Low	Moderate[20]	Low	Moderate

[1]Disease activity or other confounding variables were not taken into consideration; [2]Little to no info on the comparator group; [3]The outcomes were assessed in different ways between the groups; [4]Multiple sub outcomes resulted in one general outcome; [5]Confounding variables like different hospitals who recruited patients were not controlled for; [6]Especially at the 6 month follow up data was only available for 62% of patients. Missing data was found mainly in one group; [7]No info whether patients (who assessed the outcome themselves) were aware of the groups; [8]There is no info on the time to the last meeting. The time might have influenced patient satisfaction; [9]Little to no info on the patient selection; [10]Other reasons for pain not assessed. Also different treatment durations; [11]Little to no info on the patient selection; [12]Little to no info on patient classification; [13]Little to no info on the comparator group; [14]25% of patients lost to follow up; [15]Little to no info on how the outcome was assessed in the comparator group; [16]Factors like bad connection were not considered in the analysis; [17]Litte information on the intervention; [18]unclear whether methods of outcome assessment were comparable across intervention groups; [19]Little information who performed intervention; [20]no info on the outcome assessors.

Table 3. Risk of bias assessment of cross sectional studies (JBI Critical Appraisal Checklist for Analytical Cross Sectional Studies)

Author, year	Were the criteria for inclusion in the sample clearly defined?	Were the study subjects and the setting described in detail?	Was the exposure measured in a valid and reliable way?	Were objective, standard criteria used for measurement of the condition?	Were confounding factors identified?	Were strategies to deal with confounding factors stated?	Were the outcomes measured in a valid and reliable way?	Was appropriate statistical analysis used?
Bullock et al. (2017)	Yes	Yes	Yes	Yes	Unclear	Unclear	Yes	Yes
Dejaco et al. (2020)	Yes	Yes	Yes	Yes	Unclear	Unclear	Yes	Yes
Ferwerda et al. (2013)	Yes	Yes	Yes	Yes	Unclear	Unclear	Yes	Yes
Lawford et al. (2017)	Yes	Yes	Yes	Yes	Unclear	Unclear	Yes	Yes
Lawford et al. (2018)	Yes	Yes	Yes	Yes	Unclear	Unclear	Yes	Yes
Magnol et al. (2021)	Yes	Yes	Yes	Yes	Unclear	Yes	Yes	Yes
Opinc et al. (2020)	Yes	Yes	Yes	Yes	Unclear	Unclear	Yes	Yes
Kessler et al (2016	Yes	Yes	Yes	Yes	Unclear	Unclear	Yes	Yes

Table 4. Risk of bias assessment of qualitative studies studies (JBI Critical Appraisal Checklist for qualitative research)

Author, year	Is there congruity between the stated philosophical perspective and the research methodology?	Is there congruity between the research methodology and the research question or objectives?	Is there congruity between the research methodology and the methods used to collect data?	Is there congruity between the research methodology and the representation and analysis of data?	Is there congruity between the research methodology and the interpretation of results?	Is there a statement locating the researcher culturally or theoretically?	Is the influence of the researcher on the research, and vice-versa, addressed?	Are participants, and their voices, adequately represented?	Is the research ethical according to current criteria or, for recent studies, and is there evidence of ethical approval by an appropriate body?	Do the conclusions drawn in the research report flow from the analysis, or interpretation, of the data?
Barber et al. (2019)	Unclear	Yes	Yes	Yes	Yes	Unclear	Yes	Yes	Yes	Yes
Hinman et al. (2017)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Knudsen et al. (2018)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Mathijssen et al. (2018)	Unclear	Yes	Yes	Yes	Yes	Unclear	Yes	Yes	Yes	Yes
Navarro-Millan et al. (2019)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes