D1. Title and abstract screening form

For screening, the criteria will be suitably broad to exclude only those articles that are obviously irrelevant to the descriptive overview (topic I); the review of evidence on the state of the research literature (topic II); and the effects, efficacy and effectiveness of meditation (topics III to V).

For each title/abstract, go through the five rejection criteria R1 to R5, in any order. Any article must clearly satisfy one of the criteria below in order to be considered clearly irrelevant. Stop at the first "Yes" and classify the study as “Do not retrieve article”. Otherwise, classify it as “Retrieve article”. If it is unclear whether an article meets any of the criteria below, the article will be considered eligible for retrieval and further review.

Reference ID #:	Reviewer ID #:
Author(s):	Year of Publication:

Criteria of Irrelevance:

	Yes	No	Unsure
R1: Non-English study	☐	☐	☐
R2: Study participants clearly < 18 years old	☐	☐	☐
R3: Clearly not on meditation	☐	☐	☐
R4: Case report/case series/editorial/letter/lay press	☐	☐	☐
R5: Total study population clearly < 10	☐	☐	☐

Decisions:

Retrieve article ☐
Do not retrieve article ☐

Specific instructions:

R2: Primary studies that clearly indicate that only pediatric populations (< 18 years) were studied will be considered irrelevant.
R3: An article will be considered irrelevant if: 1) the main topic of the article does not include the word meditation or a synonym, 2) the article does not include any of the specific terms listed in the list of potentially relevant techniques, or 3) it is clear that the topic is not related to meditation or any of the meditation practices.

D2. Inclusion and exclusion form

Reference ID #:	Reviewer ID #:		
Author(s):	Year of Publication:		
1. TOPIC/INTERVENTION			
a. Primary research evaluating the effects of meditation	Yes ☐	No ☐	Unsure ☐
b. Secondary research on practice of meditation	Yes ☐	No ☐	Unsure ☐
c. Do the authors of the study explicitly describe the intervention as meditation or as involving a meditative component?	Yes ☐	No ☐	Unsure ☐
d. Does the TEP consider the intervention as a meditation practice or involving a meditative component?	Yes ☐	No ☐	Unsure ☐
e. Does the intervention satisfy the operational criteria developed by consensus?	Yes ☐	No ☐	Unsure ☐
2. DESIGN			
Does the study satisfy any of the following designs?	Yes ☐	No ☐	Unsure ☐
a. Narrative/systematic review	Yes ☐	No ☐	Unsure ☐
b. RCT/NRCT	Yes ☐	No ☐	Unsure ☐
c. Prospective cohort study with concurrent control group	Yes ☐	No ☐	Unsure ☐
d. Prospective cohort study with historical control group	Yes ☐	No ☐	Unsure ☐
e. Retrospective cohort study with control group (any type)	Yes ☐	No ☐	Unsure ☐
f. Case-control study	Yes ☐	No ☐	Unsure ☐
g. Cross-sectional study with controls	Yes ☐	No ☐	Unsure ☐
h. Before-and-after study	Yes ☐	No ☐	Unsure ☐
3. CONTROLS			
a. Does the study provide a comparison or control condition population with which to compare the intervention group?	Yes ☐	No ☐	Unsure ☐
4. PARTICIPANTS			
a. Does the study population consist of adults (i.e.., individuals who are ≥ 18 years of age), or Does the study population include a subgroup of adults for which separate data can be analyzed?	Yes ☐	No ☐	Unsure ☐
b. Study population is ≥10?	Yes ☐	No ☐	Unsure ☐
5. OUTCOMES			
a. Study reports numeric data on at least one health-related outcome?	Yes ☐	No ☐	Unsure ☐

REVIEWER'S DECISION:

TO INCLUDE IN Q1		To INCLUDE IN Q2	
• Meets 1b	☐	• Meets 1a	☐
• Meets at least two of 1c, 1d, or 1e	☐	• Meets at least two of 1c, 1d, or 1e	☐
• Meets 2a	☐	• Meets any from 2b to 2h	☐
		• Meets all from 3 to 5	☐
INCLUDE Q1 Yes ☐ No ☐ Unsure ☐		INCLUDE Q2 Yes ☐ No ☐ Unsure ☐	
TEP TO VERIFY INTERVENTION ☐		Useful background information (TO FLAG): ☐	

Intervention Studies

Jadad scale—RCTs

ITEMS	YES	NO
1. Was the study described as randomized (this includes the use of words such as randomly, random and randomization)?	1	0
2. Was the study described as double-blind?	1	0
3. Was there a description of withdrawals and drop-outs?	1	0
4. Method to generate the sequence of randomization was described and was appropriate (e.g. table of random numbers, computer generated, coin tossing, etc.)	1	0
5. Method of double-blinding described and appropriate (identical placebo, active placebo, or dummy)?	1	0
6. Method of randomization described and it was inappropriate (allocated alternately, according to date of birth, hospital number, etc.)?	-1	0
7. Method of double-blinding described but it was inappropriate (comparison of tablet vs. injection with no double dummy)?	-1	0
OVERALL SCORE (Maximum 5)		

Schultz concealment of treatment allocation—RCTs

Concealment of treatment allocation	☐ Adequate ☐ Inadequate ☐ Unclear
Adequate:	Central randomization; numbered/coded containers; drugs prepared by pharmacy; serially numbered, opaque, sealed envelopes
Inadequate:	Alternation, use of case record numbers, dates of birth or day of week; open lists
Unclear:	Allocation concealment approach not reported or fits neither above category

Jadad Scale (modified)—NRCTs

ITEMS	**YES**	**NO**
2. Was the study described as double-blind?	1	0
3. Was there a description of withdrawals and drop-outs?	1	0
5. Method of double-blinding described and appropriate (identical placebo, active placebo, dummy)?	1	0
6. Method of randomization described and it was **in**appropriate (allocated alternately, according to date of birth, hospital number, etc.)?	-1	0
7. Method of double-blinding described but it was **in**appropriate (comparison of tablet vs. injection with no double dummy)?	-1	0
OVERALL SCORE (Maximum 3)		

Questions for quality assessment for before-and-after studies

1. Was the study population representative of the target population?	YES	NO
2. Was the method of outcome assessment the same for the pre- and post- intervention periods for all participants?	YES	NO
3. Were outcome assessors blind to intervention and assessment period?	YES	NO
4. Did the study report the number of and reasons for study withdrawals?	YES	NO

Observational Analytical Studies

Newcastle-Ottawa Scale for case-control studies

Note: A study can be awarded a maximum of one star for each numbered item within the Selection and Exposure categories. A maximum of two stars can be given for Comparability.

Selection

1) Is the case definition adequate?
   - a) Yes, with independent validation * (1)
   - b) Yes, e.g. record linkage or based on self reports (0)
   - c) No description (0)

2) Representativeness of the cases
   - a) Consecutive or obviously representative series of cases * (1)
   - b) Potential for selection biases or not stated (0)

3) Selection of Controls
   - a) Community controls * (1)
   - b) Hospital controls (0)
   - c) No description (0)

4) Definition of Controls
   - a) No history of disease (endpoint) * (1)
   - b) No description of source (0)

Comparability

1) Comparability of cases and controls on the basis of the design or analysis
   - a) Study controls for _____ (select the most important factor.) * (1)
   - b) Study controls for any additional factor * (this criteria could be modified to indicate specific control for a second important factor.) (1)

Exposure

1) Ascertainment of exposure
   - a) Secure record (e.g. surgical records) * (1)
   - b) Structured interview where blind to case/control status * (1)
   - c) Interview not blinded to case/control status (0)
   - d) Written self report or medical record only (0)
   - e) No description (0)

2) Same method of ascertainment for cases and controls
   - a) Yes * (1)
   - b) No (0)

3) Nonresponse rate
   - a) Same rate for both groups * (1)
   - b) Non respondents described (0)
   - c) Rate different and no designation (0)

Newcastle-Ottawa Scale for cohort studies

Note: A study can be awarded a maximum of one star for each numbered item within the Selection and Outcome categories. A maximum of two stars can be given for Comparability

Selection

1) Representativeness of the exposed cohort
   - a) Truly representative of the average _____ (describe) in the community * (1)
   - b) Somewhat representative of the average _____ in the community * (1)
   - c) Selected group of users e.g. nurses, volunteers
   - d) No description of the derivation of the cohort

2) Selection of the non exposed cohort
   - a) Drawn from the same community as the exposed cohort * (1)
   - b) Drawn from a different source
   - c) No description of the derivation of the non exposed cohort

3) Ascertainment of exposure
   - a) Secure record (e.g. surgical records) * (1)
   - b) Structured interview
   - c) Written self report
   - d) No description

4) Demonstration that outcome of interest was not present at start of study
   - a) Yes * (1)
   - b) No

Comparability

5) Comparability of cohorts on the basis of the design or analysis
   - a) Study controls for _____ (select the most important factor) * (1)
   - b) Study controls for any additional factor * (this criteria could be modified to indicate specific control for a second important factor) (1)

Outcome

6) Assessment of outcome
   - a) Independent blind assessment * (1)
   - b) Record linkage * (1)
   - c) Self report
   - d) No description

7) Was follow-up long enough for outcomes to occur
   - a) Yes (select an adequate follow up period for outcome of interest) * (1)
   - b) No

8) Adequacy of followup of cohorts
   - a) Complete follow up - all subjects accounted for * (1)
   - b) Subjects lost to follow up unlikely to introduce bias - small number lost - > ____ % (select an adequate %) follow up, or description provided of those lost) * (1)
   - c) Follow up rate < ____% (select an adequate %) and no description of those lost
   - d) No statement

Newcastle-Ottawa Scale (modified) for cross-sectional studies

Note: A study can be awarded a maximum of one star for each numbered item within the Selection and Outcome categories. A maximum of two stars can be given for Comparability

Selection

1) Representativeness of the study group
   - a) Truly representative of the average _____ (describe) in the community * (1)
   - b) Somewhat representative of the average _____ in the community * (1)
   - c) Selected group of users e.g. nurses, volunteers
   - d) No description of the derivation of the cohort

2) Selection of the comparison group
   - a) Drawn from the same community as the study group * (1)
   - b) Drawn from a different source
   - c) No description of the derivation of the comparison group

3) Ascertainment of exposure
   - a) Secure record (e.g., surgical records) * (1)
   - b) Structured interview
   - c) Written self report
   - d) No description

Comparability

5) Comparability of cohorts on the basis of the design or analysis
   - a) Study controls for _____ (select the most important factor) * (1)
   - b) Study controls for any additional factor * (this criteria could be modified to indicate specific control for a second important factor) (1)

Outcome

6) Assessment of outcome
   - a) Independent blind assessment * (1)
   - b) Record linkage * (1)
   - c) Self report
   - d) No description

D4. Data extraction form

1. GENERAL INFORMATION

Reference ID:			Reviewer ID			Verifier ID	
First author			Year				
Country			Publication type				
Specify source of funding: (Check all that apply)							
Pharmaceutical industry	☐	Industry, other than pharmaceutical	☐	Government agency	☐	Foundation/charity	☐
Internal funds	☐	Professional organizations	☐	Other	☐	Specify:	

2. SPECIFIC INFORMATION

Study characteristics

Study Setting					
Acute care hospital ☐		Community ☐		Complementary Medicine practice ☐	
University ☐		Primary care/outpatient service ☐		Extended care facility ☐	
Other ☐		Specify:			
Study design					
RCT ☐	NRCT ☐	Cross-sectional ☐	Cohort ☐	Case-control ☐	Before-and-after ☐
Aim(s) of the study:					

Population characteristics:

Target population				**Type of primary health problem/condition/population (describe)**	
Clinical population only ☐		Normals only ☐	Both normal and clinical ☐		
If health problem, specify body system/problem involved (Check all that apply)				Selection criteria for participation in study	
Circulatory/Cardio-vascular	☐	Musculoskeletal	☐	Inclusion	Exclusion
Dermatological	☐	Neuropsychiatric (addictions, stress, depression, etc)	☐		
Endocrine	☐	Oncology	☐		
Gastrointestinal	☐	Respiratory/Pulmonary	☐		
Genitourinary	☐	Rheumatologic	☐		
Gynecological	☐	Other	☐		
Head/eyes/ears/nose/throat	☐	Specify:			
Hematological	☐				

D4. Data extraction form (continued)

Number of patients recruited:
Note: Add as many columns as study groups

Total enrolled (or randomized, if applicable):	Group 1:
	Group 2:
Total analyzed:	Group 1
	Group 2
Losses to follow up:	Group 1
	Group 2

Characteristics of participants: *Note: Add as many columns as study groups*

	GROUP 1 (n =)		**GROUP 2 (n =)**		**TOTAL (N =)**	
Gender	Female n =	Male n =	Female n =	Male n =	Female n =	Male n =
Age	Mean =	SD =	Mean =	SD =	Mean =	SD =
Ethnicity (n)						
Education (n)						
Principal health problem, condition or diagnosis (n)						
Stage/severity of problem/illness (n)						
Duration of disease described (time)						
Comorbidities/other health problem/s (if relevant) (specify) (n)						
Other relevant social/demographic info						
Cointerventions						

Intervention characteristics: *Note: Add as many columns as study groups*

	Intervention (Group 1)	**Control (Group 2)**
Name		
Description of intervention		
Frequency (how many times per week/day?)		
Duration (total time = # sessions x length of time in min)		
Intensity (time per session)		
Details of the trainers (a) W*ho delivered the intervention?; b) number of providers; c) training of providers*		
Details of the trainees		
Co-interventions (list)		

Outcomes
Outcome characteristics

Outcome	Instrument/units	Timing of outcome assessment		
		< 3 months	3 to 6 months	> 6 months
1.		☐	☐	☐
2.		☐	☐	☐
3.		☐	☐	☐
4.		☐	☐	☐
5.		☐	☐	☐
6.		☐	☐	☐
7.		☐	☐	☐
8.		☐	☐	☐
9.		☐	☐	☐
10.		☐	☐	☐

Results

For continuous outcomes
Note: Add as many columns as study groups

Outcome	Intervention (Group 1)				Control (Group 2)			
	Baseline		Final		Baseline		Final	
	Mean	SD	Mean	SD	Mean	SD	Mean	SD
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.								

D4. Data extraction form (continued)

For categorical outcomes
Note: Add as many columns as study groups

Outcome	Intervention (Group 1)		Control (Group 2)	
	Final		Final	
	n	N	n	N
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

n = # events; N = total # subjects per group

D5. Guidelines for data extraction

GENERAL GUIDELINES:

- Please, do not leave empty spaces. Enter either **NA** (not applicable) or **NR** (not reported), as required.
- Double check with a senior member of the research team if you have any doubts about the correct data that should be extracted.

1. GENERAL INFORMATION

1. Data extracted by:

- Choose your name from the available list.

2. Data verified by:

- Complete this field ONLY if you are doing data verification. You do not have to answer this question if you are doing data extraction.
- Choose your name from the available list.

3. Country:

- Enter country where the study took place.
- If not reported, enter **NR** (not reported).

Note*: If the article does not specify in the background/method sections where the study took place, enter the corresponding author's country (and specify this in brackets: **"CAC")*.

4. Study source:

- **Abstract:** The study is reported only in abstract form.
- **Journal article:** The study is published as full text in a journal.
- **Conference proceeding:** The study comes from a conference book.
- **Other, specify:** Click here if the study is reported in any other form. Describe the source (book chapter, web-info).

5. Source of funding:

- Check all that apply if more than one option is applicable. Check "None reported" if no source of funding is reported.
- If the source of funding is "academic/from university", report it under "Other" and specify as "Academic".

2. SPECIFIC INFORMATION

Study characteristics

6. Population source:

- It refers to where the study population comes from.
- Check all that applies if more than one population source is cited in the study (i.e. cases from hospitals, controls from community).

7. Number of centres:

- Single centre: If study was conducted in ONE centre.
- Multicentre: If the study was conducted in MORE THAN ONE centre.
- Unclear/not reported: If no information is provided regarding the number of centres, or if it is hard to identify how many centres participated in the study.
- For studies other than RCTs and NRCTs, a multicenter study is a study where more than one source of population is used: For example: cases come from more than one facility/hospital, and controls come from more than one community. Therefore, a single center study collects cases from ONE hospital/facility, and controls from ONE community.

8. Study design:

- **RCT:** A planned experiment or research study in which subjects are allocated to intervention or control groups using a random method, and between-group comparisons are made for the outcomes of interest.
- **NRCT:** Subjects are allocated to intervention or control groups using a quasi-random or nonrandom method and the outcomes are compared.
- **Prospective cohort study with concurrent control group:** A type of analytical observational study where a group of subjects with a specific characteristic or exposure (e.g., being meditators) are followed over a period of time to assess outcomes. Comparisons are made with a concurrent control group. No interventions are normally applied to the participants. It is important to note that: 1) They are longitudinal and go forward over time, 2) Compare exposed vs. nonexposed persons, 3) Start with a defined group of people (defined by exposure). 4) Participants are followed through time for occurrence of disease/outcome of interest.
- **Prospective cohort study with historical control group:** A type of analytical observational study where a group of subjects with a specific characteristic or exposure (e.g., being meditators) are followed over a period of time to assess outcomes. Comparisons are made with a historical control group (e.g. nonmeditators). **Retrospective cohort study with control group (any type):** A type of observational investigation in which medical/other records of groups of individuals who are alike in many ways but differ by a certain characteristic (for example, exposure status to meditation) are compared for a particular outcome. Also called a historic cohort study.
- **Case-control study:** A case-control study is an observational investigation in which people with a condition ("cases") are identified, suitable comparison subjects ("controls") are identified, and the two groups are compared with respect to prior exposure to certain factors (e.g. meditation). Thus, subjects are sampled by disease status. It is important to note that: 1) They are generally retrospective. 2) Start with disease of interest (cases), 3) Compare people with a condition to people without the the condition, 4) Compare frequency of the exposure of interest between cases and controls.
- **Cross-sectional study with controls:** A study where a group of individuals defined by a certain characteristic of interest (e.g. being meditators) are compared at a single point in time cross-sectionally with a control group without that characteristic (nonmeditators) on certain characteristics/outcomes of interest.
- **Before-and-after study:** A nonexperimental study design where data are collected before and after the intervention is implemented. Participants act as their own controls based on previous baseline data.

9. Design source:

- Reported by authors: The authors clearly report the type of study design (and the designation is correct). Use this category when you agree with what the author's report.
- Classified by reviewer: The reviewer used the criteria in **#8** to classify the study design. Use this category when you disagree with the author's design classification, or when the authors failed to provide a clear statement regarding the study design.
- Unclear: It is hard to identify the study design.

10. Aims of study:

- Enter as reported in the study.
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

Population characteristics

11. Target population: Clinical population only: The study population consists ENTIRELY of participants with a clinical condition/disorder.

- Normal population only: The study population consists ENTIRELY of "healthy"/normal participants (e.g. students, community members, and/or people without clinical conditions/disorders).
- Both normal and clinical population: The study combines both participants with a clinical condition/disorder and "healthy"/normal participants.
- Not reported: The study does not provide a description of the participants in terms of the type of population.

12. Type of primary health problem/condition/population:

- Enter the type of health problem/condition/population as reported in the study.
- If the study participants are **normals**, enter the specific type of population, if available (e.g., university students, workers, etc).
- Enter either **NA** (not applicable) or **NR** (not reported), if required.

13. If health problem, specify body system involved:

- Choose the corresponding category of response according to the health problems of the study population.
- Check all that apply if more than one health problem/condition/population is relevant.
- If health problem is "None" (e.g. **normals**), enter this information in the OTHER category and specify "None".

14. Are the inclusion/exclusion criteria for participation in the study specified?

- **Yes:** The study provides data on the set of inclusion and/or exclusion criteria.
- **No:** The study does not FORMALLY provide data on the set of inclusion and/or exclusion criteria.
- Don't make assumptions regarding I/E based on the description of characteristics of participants. The study authors must provide a description of the inclusion/exclusion criteria.

15. Specify **INCLUSION** criteria and
16. Specify **EXCLUSION** criteria:

- Enter as reported in the study.
- Enter either **NA** (not applicable) or **NR** (not reported), if required.

Characteristics of participants

General remarks: This section should be adapted according to the design of the study (e.g. cohort, case-control, cross sectional).

- If it is an RCT/NRCT, Group 1 refers to the group receiving the active intervention of interest in the study. Group 2 and the others, refer to the comparators. If it is not clearly stated what intervention is the main intervention of interest in the study, it does not matter what you choose to be Group 1 or Group 2, but it is important to be consistent with reporting throughout the form.
- For all other designs, the groups with the exposure of interest (e.g., being meditators) are Group 1, and the comparators are Group 2, 3 etc.

Specify 'N' values for each group

- Complete for all comparison/intervention groups.
- Ideally, the population characteristics refer to those participants who entered the study (not only completers). Otherwise, enter as reported in the study.
- If it is a before-and-after study (within-subject design), enter data only for Group 1.
- For RCTs/NRCTs: The INTERVENTION group (Group 1) comprises individuals receiving the treatment that the study is aimed to evaluate.

17. Total N:

- Enter the total number of study participants in each group (raw numbers).
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

18. Female N:

- Enter the number of females in each group (raw numbers).
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

19. Male N:

- Enter the number of males in each group (raw numbers).
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

Specify age variables

- If reported by gender, enter: M = xxxx; F = xxxxx; T = xxxxx

20. Age range:

- Enter the age range of study participants in years (per group and total), when reported. Ex: 18 – 65 years.
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

21. Mean age:

- Enter the mean age of study participants in years (per group and total), when reported. Ex: 26.3 years.
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

D5. Guidelines for data extraction (continued)

22. Median age:
- Enter the median age of study participants in years (per group and total), when reported. Ex: 26.3 years.
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

23. Standard deviation:
- Enter the standard deviation of mean age of study participants (per group and total), when reported. Ex: SD = 3.
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

24. Standard error of the mean:
- Enter the standard error of the mean age of study participants (per group and total), when reported. Ex: SEM = 3.
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

25. Age groups (%) as reported:
- If the ages of study participants are reported according to age groups, describe the distribution of percentages across these age groups (n and % per group and total). Ex: 18 – 35 years: 20% (20/100); 36 – 50: 25% (25/100), and so on.
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

Other Characteristics of Participants:
- When reported, enter the distribution of study participants (n and % per group and total) according to other characteristics as described below:
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

26. Ethnicity:
- Enter the distribution of study participants (n and % per group and total) according to ethnicity, if reported.
- Ex: White: 20% (20/100); Black: 25% (25/100), etc.
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

27. Education:
- Enter as reported in the study
- Enter the distribution of study participants (n and % per group and total) according to education level, if reported.
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

28. Principal health problem, condition or diagnosis:
- Enter as reported in the study.
- Enter the distribution of study participants (n and % per group and total) according to the principal health problem, condition or diagnosis (if more than one).
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

29. Stage/severity of problem/illness:
- Enter as reported in the study
- Enter the distribution of study participants (n and % per group and total) according to stage/severity of the problem, if reported.
- The stage/severity of problem can be also reported as a mean score on a certain scale. In that case, specify measure used to grade the level of severity, if available.
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

30. Duration of disease:
- Enter as reported in the study (in years or months)
- Enter the distribution of study participants (n and % per group and total) according to duration of the problem, if reported.
- The duration of the problem/disease can be also reported as a mean value (years or months).
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

D5. Guidelines for data extraction (continued)

31. Comorbidities/other health problems
- Enter as reported in the study.
- Enter the distribution of study participants (n and % per group and total) according to the presence of any co-morbidities or health problems other than the main condition of interest.
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

32. Other social/demographic details (eg. literacy or reading level, income, employment status, marital status):
- Enter as reported in the study.
- Specify the social/demographic variable. Enter the distribution of study participants (n and % per group and total) according to this variable.
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

Intervention characteristics:

33. Specify the type of intervention:
- Single intervention: When meditation comprises a single set of techniques.
- Composite intervention: When a meditation practice is combined with other techniques (they can be other meditation techniques or other interventions).

34. Is meditation used as a control group for a nonmeditation intervention under study?
- This mainly applies when meditation is not the main focus of the study.
- **YES:** Meditation is used only as a control group for other "active" intervention (other than meditation), or intervention of interest under study.
- If the study compares two different meditation techniques, enter **NO**.

35. Sample size:
- Enter the number of participants (per group and total) that were enrolled in the study, and that completed the study.
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

36. Name of the intervention(s)/control:
- Enter the name of the intervention(s)/control as reported in the study.
- If the study is other than RCT/NRCT, describe the intervention that was used to classify participants into Group 1.

37. Description of interventions/control:
- Enter as described in the study protocol/description of procedures.
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

38. Frequency:
- Enter how many times per week/day the intervention was practiced.
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

39. Duration:
- Enter the total time = #sessions x length of time in minutes
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

40. Intensity (Time per session):
- Enter the duration of each session in minutes, if available.
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

41. Trainer details (who delivered intervention; number of providers; training of providers for delivery of intervention):
- Enter as reported in the study.
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

D5. Guidelines for data extraction (continued)

42. Trainee details:

- Enter as reported in the study.
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

43. Cointerventions:

- List any intervention that was co-administered for any of the groups.
- Enter "None" if no interventions were co-administered.
- Enter either **NA** (not applicable) or **NR** (not reported), as required.

Outcome characteristics (#44 and others)

The following information should be completed for each reported outcome. Enter either **NA** (not applicable) or **NR** (not reported), as required.

- NAME: Name of the outcome, as reported in the study.
- CATEGORY OF OUTCOME: Classify according to:
  1 = Physiological markers (e.g., cardiovascular, respiratory, brain, immune, etc).
  2 = Disease/functional outcomes (any outcome reporting either the incidence of discrete events or scores on questionnaires/ tests other than physiological).
  3 = Health care utilization (e.g., frequency and type of healthcare visits, use of medication, cost-effectiveness data).
  4 = Other outcomes (e.g., outcomes difficult to classify in any of the categories above).

- MEASUREMENT TOOL/UNITS:
  Enter the name of the assessment tool (if scales or questionnaires) that was used to evaluate the outcome. Report the measure units, if applicable.

- METHODS OF ASSESSING OUTCOME MEASURES: Enter
  P = Patient (if the measure is self-rated),
  A = assessor (if the measure is assessed by a second person: clinician, family),
  L = laboratory rated (if the measure is assessed using instruments/lab equipment),
  NR = Not reported.

- VALIDITY and/or RELIABILITY: (Applicable for scales and questionnaires)
  Yes: Validity and/or reliability of measurement tool known or described.
  No: Validity and/or reliability of measurement tool unknown.
  NA = Not applicable.
  NR = Not reported.

Note: *The important issue here is whether the scale properties have been published, not the quality of reporting of these characteristics. If the study reports that a "checklist" was developed for the study purposes, it is likely that the instrument has not been validated. In that case, enter* ***"No".*** *On the other hand, if the study uses for example, a scale that it is likely to have reliability and/or validity data available from other sources (e.g. Beck questionnaire for depression), but the study does not mention this, enter* ***"NR".*** *What is important is to know whether the scale properties have been published, or are known, not the reporting of specific details on validity and reliability.*

- TIMING OF OUTCOME ASSESSMENT/FOLLOWUP MEASURES: Enter
  1 = Short term: outcome is assessed in the period less or equal to 3 months.
  2 = Medium term: outcome is assessed in the period greater than three but equal to 6 months.
  3 = Long-term: outcome is assessed for more than 6 months.
  4 = If timing of outcome assessment is not reported.

Note: *Baseline measures are not included for timing of outcome assessment.*

D6. Structured format for peer reviewer comments

Thank you for agreeing to review the draft of this evidence-based report. We are relying on your expertise to address the questions below and provide insight that will assist us in improving the content and format of the report. This is still in the draft stages and a thorough copy edit will take place before the publication of the final report. Please remember that the information in this manuscript is confidential.

When assessing the report, please consider the following points:

Problem Formulation

- Are the review questions well formulated with specified key components?

Study Identification

- Is there a comprehensive search for relevant data using appropriate resources?
- Are there unbiased explicit searching strategies that are appropriately matched to the research question?

Study Selection

- Are appropriate inclusion and exclusion criteria used to select articles?
- Are selection criteria applied in a manner that limits bias?
- Are efforts made to identify unpublished data, if this is appropriate?
- Are major changes in selection criteria avoided during the review process?
- Are reasons for excluding studies from the report stated?

Appraisal of Studies

- Is the validity of individual studies addressed in a reliable manner?
- Are important parameters (e.g., setting, study population, study design) that could affect study results systematically addressed?

Data Collection

- Is there a minimal amount of missing information regarding outcomes and other variables considered key to interpretation of results?
- Are efforts made to reduce bias in the data collection process?

Data Synthesis

- Are important parameters, such as study designs, considered in the synthesis?
- Are reasonable decisions made concerning whether and how to combine the data?
- Are results sensitive to changes in the way the analysis was done?
- Is precision of results reported?

Discussion

- Are the discussion and conclusions well balanced and adequately supported by the data?
- Are limitations and inconsistencies of studies stated?
- Are limitations of the review process stated?
- Are review finding integrated within the context of relevant indirect evidence?
- Are implications for research discussed
- Are implications for practice discussed?

Conclusions

- Are conclusions supported by the data reviewed?
- Are plausible competing explanations of observed effects addressed?
- Is evidence appropriately interpreted as inconclusive (no evidence of effect) or as showing a particular strategy did not work (evidence of no effect)?

- Are important considerations for decision makers identified, including values and contextual factors that might influence decisions?
- Is a summary of pertinent findings provided?
- Is the writing acceptable?

Please make your review as constructive and detailed as possible in your comments so that we have the opportunity to overcome any serious deficiencies that you find and please also divide your comments into the following categories:

Discretionary Revisions. Recommendations for improvement but which the author can choose to ignore.

Minor Essential Revisions. E.g., missing labels on figures, or the wrong use of a term, which the author can be trusted to correct.

Major Compulsory Revisions. Revisions that the author must respond to before a decision on publication can be reached.