

Appendix Table 2. Trial details of the 38 included behavioral interventions												
Trial	Start Year	Pub Year <sup>a</sup>	Ct.gov	Date reg	Intervention	Comparator	Intervention Length (Intensive/Fu II)	Analyzed	Foll ow-up	Participant Description	N size Interv ention	N Size Comparator
<b>ACT</b> <sup>22</sup>	1994	2001	NCT00000551	1999	Exercise	Brief provider advice	24 mos/24 mos	24 mos	No	Inactive adults (women reported here)	130	133
<b>Be Fit, Be Well</b> <sup>32</sup>	2006	2012	NCT00661817	2008	Multi-factor (diet, exercise)	Usual care & education materials	12 mos/24 mos	12 mos	No	Obese patients receiving hypertension treatment	148	166
<b>BPTEACH</b> <sup>33</sup>	2004	2011	NCT00101478	2005	Patient communication with clinicians	Usual care	6 mos	6 mos	No	African American hypertensive	43	57
<b>DEER</b> <sup>34, b</sup>	1991	1998	NCT00000598	1999	Multi-factor (diet, exercise)	Assessment only	3 mos/12 mos	12 mos	No	Postmenopausal adults (women reported here)	43	45
<b>DISH</b> <sup>35</sup>	1980	1985	NCT00000497	1999	Weight control	No-medication control	56 weeks	56 weeks post baseline	No	Participants in heart disease trial (HDFP)	87	89
<b>DPP</b> <sup>15,36,a</sup>	1994	2002	NCT00004992	2000	Multi-factor (diet, exercise)	Placebo	24 weeks/2.8yrs	24 weeks/2.8yrs	No	Pre-diabetic	1079	1082
<b>ENRICHD</b> <sup>37</sup>	1990	2003	NCT00000557	1999	Cognitive Behavioral Therapy	Education materials	6 mos;9 mos	6 mos;4 years	Yes	Patients with MI in past 28 days	1238	1343
<b>HARP</b> <sup>38</sup>	2001	2011	NR		Med adherence	Cancer control	6 mos	6 mos	No	Hypertensive adults	221	213
<b>HART</b> <sup>39</sup>	2001	2010	NCT00018005	2001	Self-management counseling plus heart failure education	Heart failure education	12 mos	12 mos; 2.5 yrs	Yes	Patients with mild to mod heart failure	451	451
<b>HCP</b> <sup>40</sup>	1980	1987	NCT00000498	1999	Nutrition	Discontinued drug use	4 years	4 years	No	Participants in heart disease trial (HDFP)	97	44

<b>Health Literacy</b> <sup>41,42, a</sup>	2006	2012	NCT00037890	2006	Health Literacy	Single session health literacy	1mos, 12 mos	12 mos	No	Patients with heart failure	303	302
<b>Help PD</b> <sup>43</sup>	2004	2013	NCT00631345	2008	Multi-factor (diet, exercise)	usual care + RD	6 mos, 24 mos	24 mos	No	Pre-diabetic	151	150
<b>HF-ACTION</b> <sup>44, a</sup>	2002	2009	NCT00047437	2002	Exercise	Education materials	3 mos; 12 mos	3 mos, 30.1 mos	Yes	Patients with heart failure	1159	1172
<b>HOME_BP</b> <sup>45</sup>	2004	2010	NCT00139490	2005	Home blood pressure monitor	Home blood pressure monitor & log	3 mos	3 mos	No	High-risk African American patients	221	217
<b>HOPP</b> <sup>46</sup>	1992	1999	NR		Smoking cessation	Education materials	6 mos; 7 mos	3 mos	Yes	Pregnant smokers	306	297
<b>HPT</b> <sup>47</sup>	1981	1990	NCT00000501	1999	Sodium restriction	Assessment only	10 weeks; 3 years	6, mos, 3 years	No	Adults with mid-range blood pressure	196	196
<b>Htn Prev</b> <sup>48</sup>	1979	1989	NCT00000495	1999	Multi-factor (diet, exercise, sodium)	Usual care	5 years	5 years	No	Adults with mild hypertension	102	99
<b>ICAN</b> <sup>49</sup>	2003	2004	NCT00364312	2006	Multi-factor (diet, exercise)	Usual care	12 mos	12 mos	Not pub	Obese, type 2 diabetics	73	71
<b>IN CONTROL</b> <sup>50</sup>	1993	1999	NCT0005698	2000	BP monitor	Usual care	3 mos	3 mos	No	Adults with elevated blood pressure	209	212
<b>iReach</b> <sup>23, c</sup>	2000	2010	NCT00265954	2005	Multi-factor (diet, exercise)	In-person	6 mos	6 mos	No	Overweight adults	158	161
<b>Look Ahead</b> <sup>2,3, 51,52, a</sup>	1999	2013	NCT00017953	2001	Multi-factor (diet, exercise)	Usual care & diabetes education	6 mos; 4 years	12 mos; 13 years	Yes	Overweight/obese, type 2 diabetics	2570	2575
<b>Mediterranean Lifestyle</b> <sup>53-55</sup>	1999	2005	NCT00142701	2005	Multi-factor	Usual care	6 mos	6 mos	No	Post-menopausal women, type 2 diabetics	163	116
<b>MRFIT</b> <sup>56-59</sup>	1972	1982	NCT00000487	1999	Multi-factor (smoking, diet)	Usual care	4 mos; 6 years	12mos; 6 years	Yes	Men at risk of CHD death but no clinical evidence	6428	6438
<b>Optimal Exercise</b>	1986	1991	NCT00000523	1999	Exercise	Assessment only	12 mos	12 mos	No	Sedentary adults (men	40	41

Regimens <sup>60</sup>										reported here)		
<b>PAD_RF</b> <sup>31</sup>	2005	2011	NCT00217919	2005	Patient communication with clinicians	Attention control	12 mos/12 mos	12 mos	No	Patients with PAD	97	111
<b>PAD Treadmill</b> <sup>61</sup>	2003	2009	NCT00106327	2005	Exercise	Assessment only	6 mos	6 mos post-baseline	No	Patients with PAD	51	53
<b>POWER</b> <sup>62</sup>	2006	2011	NCT00783315	2008	Multi-factor (diet, exercise) remote counseling	Usual care	6 mos, 24 mos	6 mos, 24 mos	No	Obese adults	139	138
<b>POWER-UP</b> <sup>63</sup>	2006	2011	NCT00826774	2009	Multi-factor (diet, exercise) Brief lifestyle counseling	Usual care & quarterly counseling	12 mos, 24 mos	12 mos, 24 mos	No	Obese adults	131	130
<b>PREMIER</b> <sup>64</sup>	1998	2009	NCT00000616	1999	Multi-factor (diet, exercise, sodium) Established + DASH diet	Education materials & 1 time counseling	6 mos, 18 mos	6 mos	No	Adults with untreated pre or stage 1 hypertension	269	273
<b>SCRIP</b> <sup>65</sup>	1983	1994	NCT00000508	1999	Multi-factor (diet, exercise, sodium, smoking)	Usual care	4 years	4 years	No	Adults with atherosclerosis	145	155
<b>SWCP</b> <sup>66,d</sup>	1979	1991	NCT00000519	1999	Multi-factor (diet, exercise)	Assessment only	3mos, 12 mos	12 mos	No	Moderately overweight(men reported here)	39	40
<b>TCYB</b> <sup>67</sup>	2003	2009	NCT00123058	2005	Blood pressure monitor	Usual care	24 mos	24 mos	No	Hypertensive adults	159	159
<b>TELE-HF</b> <sup>68</sup>	2005	2010	NCT00303212	2006	Telemonitoring	Education materials	180 days	180 days	No	Recently hospitalized for heart failure	826	827
<b>TOHP</b> <sup>69</sup>	1986	2001	NR		Multi-factor (diet, exercise)	Usual care	14 mos, 3-4 years		No	Recent weight loss participants	595	596
<b>TOURS</b> <sup>70</sup>	2003	2008	NCT00201006	2005	Multi-factor (diet, exercise)	Education materials	12 mos	12 mos	No	Obese women in rural areas who recently completed lifestyle intervention	83	79

<b>Training Levels Comparison<sup>71</sup></b>	1986	2001	NCT00000460	1999	High intensity Exercise	Low intensity exercise	12 mos	12 mos	No	Male adults with CHD	103	82
<b>WHI-DM<sup>72,e</sup></b>	1993	2006	NCT00000611	1999	Nutrition Personal Contact	Education materials	1 year, 6.1 years	1, 3, 6.1 years	No	Overweight or obese with hypertension, dislipidemia	19541	29294
<b>WLM<sup>73</sup></b>	2003	2008	NCT00054925	2003	Multi-factor (diet, exercise)	Self-directed maintenance	30 mos	30 mos	No	post-menopausal women	341	341

Data in cells are: study acronym (some trials did not provided acronym therefore we abbreviated title); start year is first year of funding; publication year is publication of main outcome;ct.gov is registration number with ClinicalTrials.gov; date registered is with ClinicalTrials.gov; Intervention and Comparator detail treatment and control arms; Intervention length is described as the intensive period (if any) and the full intervention period; Analyzed reports the time points analyzed in this paper; Follow-up was defined as follow-up without any intervention contact; Participant description and sample sizes for both arms.

NR = Not registered

a. Publication year is of main outcome trial. Fort trials with this superscript, we had to extract data from multiple papers.

b. The Deer study had 12 month intervention with the first 3 months intensive but only reported 12 month data.

c. In iReach, study authors compared an in-person to an internet or internet in-person hybrid study. Authors evaluated how well an internet-deliver would do compared with an in person version. We coded the in person arm as the treatment arm and the internet-delivery arm as the control.

d. SWCP was a 12 month intervention with the first 3 months intensive; however only 12 month data were available in the publication.

e. WHI had an intensive intervention for 12 months and then quarterly contact through the remainder of the year. Behavioral outcomes are reported at 18 months. Physiological outcomes were not published at 12 or 18 months. The closest follow-up to the end of the intensive intervention was at 3 years.

Trial titles from registry or publications for each acronym. Some trials did not provide a short title or acronym; therefore study authors created a condensed title: ACT<sup>22</sup> =Activity counseling trial; Be Fit, Be Well<sup>32</sup> = Evaluating a blood pressure reduction and weight loss program in a low income, ethnically diverse population; BPTEACH<sup>33</sup> = Baltimore partnership to educate and achieve control of hypertension; DEER<sup>34</sup> = Diet and exercise for elevated risk; DISH<sup>35</sup> = Dietary intervention study for hypertension; DPP<sup>15,36</sup> = Diabetes prevention program; ENRICH<sup>37</sup> = Enhancing recovery in coronary heart disease patients; HARP<sup>38</sup> = Hypertension and adherence in rural practice; HART<sup>39</sup> = Heart failure adherence and retention randomized behavioral trial; HCP<sup>40</sup> = Hypertension control program; Health Literacy<sup>41,42</sup> = Health literacy and self-management in heart failure; Help PD<sup>43</sup> = Healthy living partnerships to prevent diabetes; HF-ACTION<sup>44</sup> = Heart failure: A controlled trial investigating outcomes of exercise training (HF-ACTION); HOME\_BP<sup>45</sup> = Home-based blood pressure interventions for African Americans; HOPP<sup>46</sup> = Healthy options for pregnancy and parenting; HPT<sup>47</sup> = Hypertension prevention trial; Htn Prev<sup>48</sup> = Primary prevention of hypertension by nutritional-hygienic means; ICAN<sup>49</sup> = Improving control with activity and nutrition; IN CONTROL<sup>50</sup> = Hypertension reduction in inner city Seattle; iReach<sup>23</sup> = Internet assisted obesity treatment; Look Ahead<sup>2,3,51,52</sup> = Action for health in diabetes; Mediterranean Lifestyle<sup>53-55</sup> = Effect of the Mediterranean lifestyle program on multiple risk behaviors and psychosocial outcomes; MRFIT<sup>56-59</sup> = Multiple risk factor intervention trial; Optimal Exercise Regimens<sup>60</sup> = Optimal exercise regimens for persons at increased risk; PAD\_RF<sup>31</sup>= Reducing risk factors in peripheral arterial disease; PAD Treadmill<sup>61</sup> = Improving functioning in peripheral arterial disease; POWER<sup>62</sup> = Practice-based opportunities for weight reduction; POWER-UP<sup>63</sup> = Practice-based opportunities for weight reduction trial at the University of Pennsylvania; PREMIER<sup>64</sup>= Lifestyle intervention blood pressure control; SCRIP<sup>65</sup> = Stanford coronary risk

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intervention project; SWCP<sup>66</sup> = Stanford weight control program; TCYB<sup>67</sup> = Take control of your blood pressure study; TELE-HF<sup>68</sup> = Yale heart failure tele-monitoring study; TOHP<sup>69</sup> = Trials of hypertension prevention, phase II; TOURS<sup>70</sup> = Treatment of obesity in underserved rural settings; Training Level Comparison<sup>71</sup> = Training level comparison Trial; WHI-DM<sup>72</sup> = Women's Health Initiative randomized controlled dietary modification trial; WLM<sup>73</sup> = Weight loss maintenance randomized controlled trial

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