

Table S1*Parts of the Coding Handbook*

Item	Description	Coding	Additional coding information
Harms	Any information regarding possible harm	<p>0 = Nothing stated</p> <p>1 = States something regarding harm – indirect/ not explicit</p> <p>2 = States something explicit regarding harms</p>	<p>(Remission, stepped care, drop-out, alliance, satisfaction, money)</p> <p>E.g., health care utilization, response, improvement, clinical significant change, recurrence</p> <p>E.g., AE, SAE, side effect, harm, safety, protection, (para-)suicidality, suicidal ideation, self-harm, (re-) hospitalization, non-response, deterioration, relapse</p> <p>*Only if all participants are assessed (everything else code as “special”)</p> <p><i>Pdf “Strg + f”:</i></p> <p><i>safety</i></p> <p><i>cris</i></p> <p><i>emergenc</i></p> <p><i>protect</i></p> <p><i>monitor</i></p> <p><i>adverse</i></p> <p><i>serious</i></p> <p><i>side</i></p> <p><i>harm</i></p> <p><i>suicid</i></p> <p><i>hospital</i></p> <p><i>care / service use / uti</i></p> <p><i>respons</i></p> <p><i>change</i></p> <p><i>deteriorat</i></p> <p><i>worse</i></p> <p><i>relaps</i></p> <p><i>recurr</i></p>

Item	Description	Coding	Additional coding information
Harms_term	Term used to describe potential harm	999 = No harms mentioned 0 = No harm-term used 1 = (Serious) adverse event/effect/ (adverse) psychological reaction 2 = Side effect 3 = Harm 4 = Safety/ protection 5 = Emergency	<i>Code hierarchic!</i> <i>If another relevant term occurs add to list</i> 0: E.g., in case of (para-) suicidality, suicidal ideation, self-harm, non-response, deterioration, relapse, etc
Harms_specify		<i>Specify (page)</i>	
Harms_session		0 = No session monitoring 1 = Session monitoring 2 = Other monitoring during treatment	<i>Search via measurement time points and outcomes (abstract information is often insufficient)</i> 2: E.g., midtreatment or bi-weekly assessment <i>Pdf “Strg + f”: each/every session, monitor</i>
Harms_safety	Is a safety plan or something similar described?	0 = Nothing mentioned 1 = Crisis protocol/plan 2 = Safety protocol/ plan/ manual measures/ aspects/ net 3 = Data safety monitoring plan 4 = Individual emergency plan 5 = Suicide risk management plan	Only code if explicitly named
AE	Adverse events/ effects	0 = Nothing stated 1 = AE mentioned	As defined by author(s) <i>Pdf “Strg + f”: adverse</i>
AE_specify		<i>Specify (page)</i>	

Item	Description	Coding	Additional coding information
SAE	Serious adverse events	0 = Nothing stated 1 = SAE are assessed - as defined by authors & in general 2 = SAE are assessed - as defined in general (but not mentioned as SAE by authors) 3 = SAE are assessed - as defined by authors (but not in accordance with general definition) 4 = SAE are assessed (not defined by author)	<u>“General definition:”</u> SAE: threatens life or function, e.g. hospitalisation, suicide/death (FDA, 1995) suicide attempts, completed suicides, and psychiatric hospitalizations (Peterson et al., 2013)
SAE_specify		<i>specify (page)</i>	
Harms_assess	Harm assessment	0 = No harm assessment 1 = Assessment not specified 2 = Apecified, systematic assessment 3 = Unsystematic assessment	Only for direct/explicit harm assessment! (<u>not</u> for non-response, deterioration, etc which are measured via symptom change, also not for health care utilization/health service use) 1: E.g., “suicidality was assessed.” But how? 3: E.g., only instruction to contact therapist/ researcher if experiencing AE
Harms_assess_specify	Harm assessment	<i>Specify detailed description how harms will be assessed (e.g., instrument used)</i>	

Item	Description	Coding	Additional coding information
Harms_assess_instrument	Instrument used for harm assessment (e.g. manualized diagnostic interview, questionnaires)	0 = No instrument used 1 = Suicide risk/ ideation/ attempt 2 = Other harm instruments 3 = Instruments for both suicide risk and other harm are used	Only for direct/ explicit harm (<u>not</u> symptom change) – but e.g. BDI is codable in case of explicitly reference to the suicide item 2: E.g., AE checklist
Harms_instrument_specify		<i>Specify</i>	
Harms_quest	Harm assessment through questionnaire	0 = No 1 = Yes	
Harms_interview	Harm assessment through interview	0 = No 1 = Yes	
Harms_assess_during	Harm assessment during treatment period	0 = No harm assessment during treatment period 1 = During treatment period	
Harms_assess_post	Harm assessment after treatment period	0 = No harm assessment after treatment period 1 = After treatment period	
Harms_assess_follow	Harm assessment follow-up	0 = No follow-up harm assessment 1 = Follow-up harm assessment	
Harms_assess_participant	Harm assessment from participant perspective	0 = No 1 = Yes	
Harms_assess_therapist	Harm assessment from therapist perspective	0 = No 1 = Yes	

Item	Description	Coding	Additional coding information
Harms_assess_others	Harm assessment from other perspective	0 = No 1 = Yes	E.g., participant's partner/family
Harms_consequences	Harm consequences	0 = Nothing stated 1 = States how harms/harmed pb will be handled	
Harm_consequences_specify	Harm consequences specify	<i>Specify detailed description how harms will be handled</i>	
Non-response		0 = Nothing stated 1 = Non-response will be assessed 2 = Response will be assessed	Non-response = 1 – response Clinical significant change <i>If both 1 & 2 → code as 1</i> <i>Pdf "Strg + f": response</i>
Non-response_specify		<i>Specify (page)</i>	
Deterioration	Assessment of deterioration	0 = Nothing stated 1 = Deterioration is assessed	≠ Relapse <i>Pdf "Strg + f": deteriorat</i>
Deterioration_specify		<i>Specify (page)</i>	
Drop-out		0 = Nothing stated 1 = Drop-out/withdrawal/ITT is mentioned	<i>Pdf "Strg + f": drop, withdraw, interrupt, intention(-to-treat), ITT, discontinue</i>
Drop-out_specify		<i>Specify (page)</i>	
Th-effects	Therapist effects	999 = Nothing mentioned regarding therapist effects 0 = Therapist effects mentioned – but NO explicit planned analysis 1 = Planned analysis of therapist effects	<i>Pdf "Strg + f": (therapist) effect, therapist drift, practitioner effect, regression</i>
Th-effects_specify		<i>Specify</i>	

Item	Description	Coding	Additional coding information
Alliance	Assessment of therapeutic alliance	0 = Nothing stated 1 = Therapeutic alliance is assessed	<i>Pdf “Strg + f”: alliance, relation</i>
Alliance_specify	Specify assessment of therapeutic alliance	<i>Specify</i>	E.g., instrument used for assessment, perspective (patient vs. therapist), time point...
Satisfaction	Assessment of satisfaction with therapy	0 = Nothing stated 1 = Satisfaction with therapy is assessed	<i>Pdf “Strg + f”: satisf</i>
Satisfaction_specify	Specify assessment of satisfaction with therapy	<i>Specify</i>	E.g., instrument used for assessment, time point...

Note: AE: Adverse event. SAE: Serious adverse event.

Table S2*Characteristics of the Included Study Protocols*

Study	Population	Diagnosis (severity) Comorbidity/ sex/special	Psychotherapy Condition bona fide PT /non-bona fide PT	No. of sessions x duration in min. = approx. total duration in hrs. (treatment period)	<u>Additional Treatment:</u> Psychopharmacological medication (no/ stable/ individual) Other baseline treatment (PT-TAU/ PsyPharmTAU/ medical/ mixed)	Control(s) Control condition
Ambresin (2012) ACTRN12612000909820 Switzerland	130 [18-65]	Depression (severe)	Inpatient brief psychodynamic PT (IBPP)	12 sessions x 45 min. = 9 hrs. (4 weeks)	Individual med. Mixed baseline	Baseline
Andreasson (2014) NCT01512602 Denmark	160 [18-65]	BPD History of recent suicide event	Dialectical behavior therapy (DBT)	[± 16 sessions x 60 min. individual PT] + [32 sessions x 120 min. GST] = 48 hrs. (16 weeks)	Individual med. -	-
			Collaborative assessment and management of suicidality-informed supportive PT (CAMS)	± 16 sessions x [45-60 min.] = 14 hrs. (16 weeks)		
Arnfred (2017) NCT02954731 Denmark	248 [18-65]	Depression Anxiety Anxiety	Transdiagnostic group CBT Diagnosis specific group CBT	± 14 sessions x 120 min. = 28 hrs. (14 weeks) ± 14 sessions x 120 min. = 28 hrs. (14 weeks)	No/stable med. Mixed baseline	-

Study	Population		Psychotherapy Condition			Control(s)
Baas (2010) ISRCTN65811640 The Netherlands	122 [18-70]	Depression	Protocolized brief cognitive behavioral therapy (bCBT)	± 8 sessions x 50 min. = 7 hrs. (12 weeks)	Individual med. -	TAU
Babl (2016) NCT02822443 Switzerland	130 [>18]	Anxiety/depression	Psychological therapy as usual	± 25 sessions x 50 min. = 21 hrs. (25 weeks)	No/stable med. -	-
			Psychological therapy with integrated emotion-focused components (EFT)	± 25 sessions x 50 min. = 21 hrs. (25 weeks)		
Baillie (2013) ACTRN12608000228381 Australia	200 [>18]	Anxiety Alcohol use disorder	Combined Alcohol Social Phobia (CASP)	± 9 sessions x [60-90 min.] = 13 hrs. (max. 5 months)	No/stable med. -	Other PT
Balje (2016) NTR3921 The Netherlands	128 [18-65]	Anxiety/avoidant personality disorder	Group schema therapy (GST)	± 30 sessions x 90 min. = 45 hrs. (9 months)	No/stable med. -	-
			Group CBT (GCBT)	± 30 sessions x 90 min. = 45 hrs. (9 months)		
Becker (2017) DRKS00010249 Germany	60 [18-65]	Depression Alcohol dependency	Behavioral activation treatment (BAT)	6 sessions x 120 min. = 12 hours (6 weeks)	Individual med. -	-
			Mindfulness based therapy	6 sessions x 120 min. = 12 hours (6 weeks)		
Beutel (2012) ISRCTN91956346 Germany	360 [21-60]	Depression Partial randomization preference trial	Psychoanalytic therapy	± 80 sessions (1 year)	No/stable med. -	-
			CBT	± 60 sessions (1 year)		

Study	Population	Psychotherapy Condition	Control(s)
de Bont (2013) ISRCTN79584912 The Netherlands	240 [18-65] PTSD Psychosis	Prolongued exposure (PE) 8 sessions x 90 min. = 12 hrs. (8 weeks)	No/stable med. Mixed baseline Baseline treatment
		Eye movement desensitization and reprocessing (EMDR) 8 sessions x 90 min. = 12 hrs. (8 weeks)	
van den Bosch (2014) - The Netherlands	70 [18-45] BPD (severe)	Intensified inpatient dialectic behavioral therapy (inpatient DBT) followed by standard outpatient DBT	Individual med. - -
		Standard outpatient DBT	
Bruijniks (2015) NTR4856 The Netherlands	200 [>18] Depression	CBT twice a week ± 16 sessions x 45 min. =12 hrs. (16 weeks)	No/stable med. - -
		CTB once a week ± 16 sessions x 45 min. =12 hrs. (24 weeks)	
		ITP twice a week ± 16 sessions x 45 min. =12 hrs. (16 weeks)	
		ITP once a week ± 16 sessions x 45 min. =12 hrs. (24 weeks)	

Study	Population	Psychotherapy Condition	Control(s)
Campbell (2015) ACTRN12615000547549 International multicenter	108 [18-70]	PTSD Chronic whiplash disorder	Trauma-focused CBT 10 sessions x [60-90 min.] = 13 hrs. (10 weeks)
		Supportive therapy 10 sessions x [60-90 min.] = 13 hrs. (10 weeks)	Individual med. -
Carletto (2016) NCT02611401 Italy	88 [18-65]	Depression (mild to moderate) Multiple sclerosis/ caregivers will participate in groups together with patients	Mindfulness based Intervention (MBI) [8 sessions x 180 min.] + [1 session x 7 hrs.] = 31 hrs. (8 weeks)
Carr (2017) ISRCTN18164037 UK	30 [>18]	Depression Long-term depression (> 12 months)	Group music therapy 42 sessions x 90 min. = 63 hrs. (14 weeks)
Chanen (2015) ACTRN12610000100099 Australia	135 [15-25]	BPD	CAT (time-limited, integrative psychotherapy) 16 sessions x 50 min. = 13 hrs. (16-26 weeks)
Chibanda (2015) PACTR201410000876178 Zimbabwe	576 [>18]	Common mental disorders	Problem solving therapy (PST) ± 6 sessions x [30-45 min.] = 4 hrs. (4-6 weeks)
Cladder-Micus (2015) NTR4843 The Netherlands	94 [>18]	Depression (moderate to severe)	Mindfulness-Based Cognitive Therapy (MBCT) 8 sessions x 150 min. = 20 hrs. (8 weeks)
Cloitre (2014) NCT01488539 USA	352 [18-65]	PTSD women	STAIR Narrative Therapy (SNT) ± 20 sessions x 60 min. = 20 hrs. (24 weeks)
Collado (2014) NCT01958840 USA	60 [>18]	Depression US Latinos with limited English language proficiency	Behavioral activation treatment for depression (BATD) 10 sessions x 60 min. = 10 hrs. (10 weeks)

Study	Population	Psychotherapy Condition			Control(s)	
Compare (2012) NCT01543815 Europe	160 [nr]	Depression Cardiac disease	CBT	8 sessions x 45 min. = 6 hrs. (7 weeks)	Individual med. -	TAU
Compen (2015) NCT02138513 The Netherlands	245 [nr]	Depression/anxiety Cancer	Mindfulness-based cognitive group therapy (group MBCT)	8 sessions x 150 min. = 20 hrs. (8 weeks)	No/stable med. -	TAU
			Internet-based MBCT intervention	9 sessions (9 weeks)		
Crawcour (2012) NCT01388231 Germany	162 [18-70]	Anxiety Veterans	Training in manualized CBT	± [25-30 sessions] x 50 min. = 23 hrs.	No/stable med. -	Other PT
Cully (2012) NCT01149772 USA	320 [nr]	Depression/anxiety Chronic obstructive pulmonary disease	(*) Brief CBT (bCBT)	[6 sessions] + [2 telephone booster sessions x 10-15 min.] (4 months)	Individual med. -	TAU
Dennis (2012) ISRCTN88987377 Canada	240 [nr]	Depression Women 2 to 24 weeks postpartum	* IPT	± 12 sessions x [50- 60 min.] = 11 hrs. (12-16 weeks)	No med. Medical baseline	Baseline treatment
Driessen (2007) ISRCTN31263312 The Netherlands	300 [18-65]	Depression	* CBT	16 sessions (22 weeks)	Individual med. -	-
			Short psychodynamic supportive therapy (SPSP)	16 sessions (22 weeks)		
Dunlop (2012) NCT00360399 USA	400 [18-65]	Depression (moderate to severe)	CBT	± 16 sessions x 60 min. = 16 hrs. (12 weeks)	No med. -	Pharmaco- therapy Pharmaco- therapy

Study	Population	Psychotherapy Condition	Control(s)
Ehret (2014) NCT01330485 Germany	120 [>18] Depression	Affect regulation training (ART) 18 hrs. (8 weeks)	Individual med. - Waitlist Treatment other than PT
Ekberg (2011) NCT01205191 Sweden	450 [18-25] Anxiety	* CBT-cell phone 6 sessions x 45 min. = 5 hrs. (3 months) CBT-TAU 6 sessions x 45 min. = 5 hrs. (3 months) CBT-placebo 6 sessions x 45 min. = 5 hrs. (3 months)	Individual med. - -
Feixas (2013) ISRCTN92443999 NCT01542957 Spain	112 [18-70] Depression	Individual dilemma focused therapy (DFT) 8 sessions x 60 min. = 8 hrs. (8 weeks) Individual CBT 8 sessions x 60 min. = 8 hrs. (8 weeks)	Individual med. PT-TAU baseline -
Flückiger (2014) NCT02039193 Switzerland	60 [>18] Anxiety	CBT - adherence priming 14 sessions x 50 min. = 12 hrs. (14 weeks) + 1 booster session after 6 months CBT - resource priming 14 sessions x 50 min. = 12 hrs. (14 weeks) + 1 booster session after 6 months CBT - supportive resource paradigm 14 sessions x 50 min. = 12 hrs. (14 weeks) + 1 booster session after 6 months	No/stable med. - -

Study	Population	Psychotherapy Condition	Control(s)
Fuhr (2017) NCT02375308 Germany	160 [18-70] Depression (mild to moderate)	Activating cognitive depression therapy (ACDT) 20 sessions x 50 min. = 17 hrs. (24 weeks)	No/stable med. -
		Hypnotherapeutic depression therapy (HDT) 20 sessions x 50 min. = 17 hrs. (24 weeks)	-
Gawlytta (2017) DRKS00010676 Germany	98 [>18] PTSD Patients after intensive care and/or spouses	* Internet-based cognitive-behavioral writing therapy (IB-CBWT)	10 sessions x 50 min. = 8 hrs. (5 weeks) Individual med. -
Gega (2012) ISRCTN98677176 UK	200 [>18] Depression	* Extended-clinician support for computerized CBT (cCBT)	8 sessions x 50 min. cCBT = 7 hrs. (12 weeks) + [± 12 supportive telephone calls x 20-30 min.] = 5 hrs. (12-24 weeks)
		* Extended-assistant support for cCBT	8 sessions x 50 min. cCBT = 7 hrs. (12 weeks) + [± 12 supportive telephone calls x 20-30 min.] = 5 hrs. (12-24 weeks)
Ghielen (2015) NCT02054845 The Netherlands	36 [nr] Anxiety Parkinson's Disease	Body awareness training (BEWARE)	12 sessions x 60min. = 12 hrs. (6 weeks) Stable med. -
			Other PT

Study	Population		Psychotherapy Condition			Control(s)
Gibbons (2014) NCT01207271 USA	237 [18-65]	Depression (moderate to severe)	Supportive-expressive dynamic psychotherapy	16 sessions (5 months)	Individual med. -	-
			CT	16 sessions (5 months)		
Giosan (2014) ISRCTN64664414 Romania	100 [>18]	Depression	CT	12 sessions x 60 min. = 12 hrs. (6 weeks)	Individual med. -	-
			Evolutionary-driven CT (ED-CT)	12 sessions x 60 min. = 12 hrs. (12 weeks)		
Gomes (2017) NCT02766361 Brazil	60 [18-55]	Depression (mild to moderate)	Cognitive Behavioral Rehabilitation (CBR)	12 sessions x 90 min. = 18 hrs. (12 weeks)	Individual med. PsyPharm-TAU baseline	Baseline treatment
Gorini (2008) NCT00602212 Italy	75 [18-69]	Anxiety	(*) Virtual reality	14 sessions (7 weeks)	Stable med. -	Waitlist
			(*) Non-virtual reality group	14 sessions (7 weeks)		
Boterhoven de Haan (2017) ACTRN12614000750684 International multicenter	142 [18-70]	PTSD	Eye Movement Desensitization and Reprocessing (EMDR)	± 12 sessions x 90 min. = 18 hrs. (6-8 weeks)	No/stable med. -	-
			Imagery rescripting (ImRs)	± 12 sessions x 90 min. = 18 hrs. (6-8 weeks)		
Hallford (2013) ACTRN12613000084785 Australia	38 [18-25]	Depression (moderate to severe)	Cognitive-remembrance therapy	6 sessions x 60 min. = 6 hrs. (6 weeks)	No med. -	Other PT
Hassiotis (2011) ISRCTN38099525 UK	30 [>18]	Depression/anxiety	Manualised individual CBT	± 16 sessions x 60 min. = 16 hrs. (4 months)	Individual med. -	TAU

Study	Population	Psychotherapy Condition			Control(s)	
Heller (2014) NTR4321 The Netherlands	286 [>18]	Depression/anxiety pregnant women	* Internet-based problem solving treatment (PST)	6 sessions (6 weeks)	Individual med. Mixed baseline	Baseline treatment
Hofmann (2015) NCT01912287 USA	230 [>18]	Anxiety	CBT	12 sessions x 120 min. = 24 hrs. (12 weeks)	No/stable med. -	Treatment other than PT
Hosseini (2016) - Iran	160 [<65]	Depression and anxiety Breast cancer/women	CBT	12 sessions x 60 min. = 12 hrs. (12 weeks)	Individual med. Medical baseline	Pharmacotherapy
			Religious CBT (RCBT)	12 sessions x 60 min. = 12 hrs. (12 weeks)		Baseline treatment
Hudson (2016) NCT023528702 UK	60 [>18]	Depression/anxiety (mild to moderate) Renal disease	*iDiD online CBT website plus therapist-led telephone support	iDiD online CBT treatment access for 12 weeks + 3 sessions x 30 min. therapist-led telephone support = 2 hrs. (12 weeks)	No/stable med. Medical baseline	Treatment other than PT
Hunger (2016) NCT02360033 Germany	32 [18-65]	Anxiety	CBT	Max. 26 sessions x 60 min. = 26 hrs. (26 weeks)	No/stable med. -	-
			Systemic therapy (ST)	Max. 26 sessions x 60 min. = 26 hrs. (26 weeks)		
Ito (2016) NCT02003261 Japan	54 [18-75]	Depression/anxiety/PTSD/OCD	Unified protocol for transdiagnostic treatment of emotional disorders (UP)	± 16 sessions x [50-60 min.] = 15 hrs. (20 weeks)	Individual med. Mixed baseline	Baseline treatment
Ito (2017) UMIN000021670 Japan	58 [18-70]	PTSD	Cognitive Processing Therapy	± [12-16 sessions] (16 weeks)	Individual med. Mixed baseline	Baseline treatment

Study	Population	Psychotherapy Condition			Control(s)	
Jahoda (2015) ISRCTN 09753005 UK	166 [>18]	Depression Intellectual disabilities	Behavioural activation for depression (beat-it)	± [8-12 sessions] (4 months)	Individual med. -	Treatment other than PT
Jak (2015) - USA	90 [nr]	PTSD Traumatic brain injury/ veterans	SMART-CP	12 sessions x 75 min. = 15 hrs. (12 weeks)	No/stable med. PT-TAU	-
			Cognitive processing therapy - cognitive only (CPT-C)	12 sessions x 50 min. = 10 hrs. (12 weeks)		
Jakobsen (2012) NCT01070134 Denmark	84 [18-65]	Depression	Third Wave cognitive therapy	[18 sessions x 45-50 min. individual Third Wave CT] + [18 sessions x 90 min. GmST] = 41 hrs. (18 weeks)	Individual med. Mixed baseline	-
			Mentalization-based therapy	[18 sessions x 45-50 min. individual mentalization-based therapy] + [18 sessions x 90 min. GmST] = 41 hrs. (18 weeks)		
Jauregui (2015) NCT01907035 Spain	246 [18-75]	Depression/anxiety (mild to moderate)	CBT	8 sessions x 60 min. = 8 hrs. (8 weeks)	Individual med. Baseline (details nr)	Baseline treatment
Johnson (2016) NCT01685294 USA	180 [18-65]	Depression Prisoners	Standard group interpersonal psychotherapy (IPT)	[20 group + 4 individual sessions] x 90 min. = 36 hrs. (10 weeks)	Individual med. Mixed baseline	Baseline treatment
Jones (2012) ISRCTN43062149 UK	72 [18-65]	Depression	Individual recovery focused CBT intervention	± 18 sessions x 45- 60 min. = max. 18 hrs. (6 months)	Individual med. -	TAU

Study	Population	Psychotherapy Condition			Control(s)
Jones (2013) ISRCTN84288072 UK	72 [>18]	Depression/anxiety	Time limited CBT informed psychological therapy	10 sessions Individual med. -	TAU
Kleiboer (2016) France: NCT02542891 Germany: DRKS00006866 Netherlands: NTR4962 Poland: NCT02389660 Spain: NCT02361684 Sweden: NCT02449447 Switzerland: NCT02410616 UK: ISRCTN12388725	1200 [>18]	Depression	(*) bCBT	11-20 sessions depending on country Individual med. -	TAU
Kok (2012) NTR2233 The Netherlands	244 [>18]	Anxiety	* Internet-based guided self-help exposure therapy	(5 weeks) No/stable med. -	Treatment other than PT
Kooistra (2014) NTR4650 The Netherlands	150 [>18]	Depression	Cognitive behavioural treatment-as-usual (CBTAU) Blended cognitive behavioural treatment (bCBT)	± 20 sessions x 45 min. = 15 hrs. (20 weeks) [10 face-to-face + 9 online sessions] x 45 min. = 14 hrs. (10 weeks)	Individual med. - -
Kovacs (2015) NCT01881893 Canada	40 [>18]	Depression/anxiety Congenital heart disease	Adult Congenital Heart Disease - Coping And Resilience (ACHD- CARE)	8 sessions x 90 min. = 12 hrs. (8 weeks) Individual med. -	TAU

Study	Population		Psychotherapy Condition			Control(s)
Krieger (2014) ISRCTN20165665 Germany	800 [>18]	Depression	(*) Deprexis + regular PT	± [10 Deprexis modules x 10-60 min.] + [12 PT sessions x 60 min.] = 18 hrs. (12 weeks)	Individual med. -	-
			Regular PT	± 12 sessions x 60 min. = 12 hrs. (12 weeks)		
Külz (2014) DRKS00004525 Germany	148 [18-70]	OCD	Mindfulness based cognitive therapy (MBCT)	8 sessions x 120 min. = 16 hrs. (8 weeks)	No/stable med. -	Treatment other than PT
Kyrios (2014) - Australia	212 [>18]	OCD Crossover study	* Therapist-assisted internet-based cognitive behavioural therapy (iCBT)	12 sessions (12 weeks)	Individual med. Baseline (details nr)	Treatment other than PT
Langdon (2013) ISRCTN 30265294, UKCRN 8370 UK	36 [16-65]	Anxiety Asperger Syndrome, high functioning autism or pervasive developmental disorder/crossover study	CBT	[3 individual + 21 group sessions] x 60 min. = 24 hrs. (24 weeks)	Individual med. Baseline (details nr)	Baseline treatment
Laurensen, Westra et al. (2014) NTR2175 The Netherlands	108 [nr]	BPD (severe)	Day hospital mentalization-based treatment (MBT-DH)	4.5 hrs. x 5 days/week for 18 months + 18 months maintenance mentalizing group therapy	Individual med. -	TAU

Study	Population	Psychotherapy Condition	Control(s)
Laurensen, Smits et al. (2014) NTR2292 The Netherlands	90 [>18]	Day hospital mentalization-based treatment (MBT-DH)	Pretreatment + 5 days/week (e.g. daily group PT, weekly individual PT) for max. 18 months
			Individual med. -
Lemmens (2011) ISRCTN67561918 The Netherlands	180 [18-65]	Depression CT	Intensive outpatient mentalisation-based treatment (MBT-IOP)
			Pretreatment + [twice weekly group PT + weekly individual PT + individual crisis management on indication]
Lutz (2017) NCT03107845 Germany	254 [nr]	Anxiety/depression CBT	± [12-20 sessions] x 45 min. = 12 hrs. (7 months)
			No med. -
Luxton (2014) NCT01599585 USA	120 [18-65]	Depression U.S. military personnel and veterans	IPT
			± [12-20 sessions] x 45 min. = 12 hrs. (7 months)
Lutz (2017) NCT03107845 Germany	254 [nr]	Anxiety/depression CBT	nr
			Individual med. -
Luxton (2014) NCT01599585 USA	120 [18-65]	Depression U.S. military personnel and veterans	CBT + computer-based feedback to therapist
			nr
Luxton (2014) NCT01599585 USA	120 [18-65]	Depression U.S. military personnel and veterans	* Behavioral activation treatment (BATD) via web-cam
			8 sessions (8 weeks)
Luxton (2014) NCT01599585 USA	120 [18-65]	Depression U.S. military personnel and veterans	Standard in-office behavioral activation treatment (in-office BATD)
			8 sessions (8 weeks)

Study	Population	Psychotherapy Condition			Control(s)	
Lynch (2015) ISRCTN85784627 UK	276 [>18]	Depression	Radically open - dialectical behavior therapy (RO-DBT)	[29 sessions x 50-60 min. individual PT] + [27 sessions x 150 min. GST] = 94 hrs. (7 months)	Individual med. Mixed baseline	Baseline treatment
MacPherson (2012) ISRCTN63787732 UK	755 [>18]	Depression (moderate to severe)	Counseling	± 12 sessions (12 weeks)	Individual med. Mixed baseline	Baseline treatment Treatment other than PT
Mander (2015) NCT02270073 Germany	150 [18-65]	Depression/anxiety	Session-introducing mindfulness element (SIIME) + standard individual therapy (TAU)	25 sessions x 50 min. = 21 hrs.	Individual med. -	-
			PMR + TAU	25 sessions x 50 min. = 21 hrs.		
			Standard individual therapy (TAU)	25 sessions x 50 min. = 21 hrs.		
Margrain (2012) ISRCTN46824140 UK	150 [>18]	Depression Visual impairment	Problem Solving Therapy (PST)	(6-8 weeks)	No med. -	TAU Waitlist
Mathiasen (2016) NCT02796573 Denmark	130 [>18]	Depression	(*) Blended CBT (B- CBT)	[6 sessions face-to- face individual CBT] + [6-8 online CBT modules] (12 weeks)	No/stable med. -	-
			Face-to-face CBT (TAU)	12 sessions (12 weeks)		

Study	Population		Psychotherapy Condition			Control(s)
McEvoy (2017) ACTRN12616000579493 Australia	96 [>18]	Anxiety	Verbally-based cognitive behavior group therapy (VB- GCBT)	± 13 sessions x 120 min. = 26 hrs. (16 weeks)	Individual med. PsyPharm-TAU baseline	-
			Imagery-enhanced cognitive behavior group therapy (IE- GCBT)	± 13 sessions x 120 min. = 26 hrs. (16 weeks)		
Meganck (2017) ISRCTN17130982 Belgium	104 [18-65]	Depression	CBT	± 16-20 sessions x 45 min. = 14 hrs.	Individual med. -	-
			Short-term psychodynamic psychotherapy (STPP)	± 16-20 sessions x 45 min. = 14 hrs.		
Meijer (2011) NTR2242 The Netherlands	300 [nr]	Depression/anxiety Peri-/postnatal women	CBT	± 10-14 sessions	Individual med. Medical baseline	TAU
Menchetti (2010) ACTRN12608000479303 Italy	300 [>18]	Depression	Interpersonal counseling (IPC)	± 6-8 sessions x 30 min. = 4 hrs.	Individual med. -	Pharmaco- therapy
Messerli-Bürgy (2012) ISRCTN45945396 Switzerland	80 [>18]	Depression Cardiovascular disorder	* Guided web-based psychological treatment Deprexis	10 online modules x 10-60 min. = 6 hrs. (10 weeks)	Individual med. -	Waitlist
Milgrom (2014) ACTRN12612001110875 Australia	100 [>18]	Depression Women	Postnatal depression programme (PND) + HUGS	12 sessions PND (9 weeks) + 4 sessions HUGS (4 weeks)	Med. nr -	-
			Postnatal depression programme (PND) + playtime (attention control)	12 sessions PND (9 weeks) + 4 sessions playtime (4 weeks)		

Study	Population	Psychotherapy Condition	Control(s)
Mitchell (2015) - USA	1200 [nr] Depression (moderate to severe)	* Re-Engineered Discharge for patients with depression (RED-D) 12 sessions x 60 min. = 12 hrs. (12 weeks)	Individual med. - TAU
Moreno-Alcázar (2017) NCT02634372 Spain	82 [18-65] Depression/PTSD General medical patients	Eye Movement Desensitization and Reprocessing (EMDR) 20 sessions x 60 min. = 20 hrs. (6 months) Individual supportive therapy (ST) 20 sessions x 60 min. = 20 hrs. (6 months)	Individual med. - -
Nadort (2009) NTR (TC = 1781) The Netherlands	60 [18-60] BPD	*Schema therapy (ST) with therapist telephone availability outside office hours ± [twice weekly 45-min. sessions in the first year] + [weekly 45-min. sessions in the second year] *Schema therapy (ST) (without therapist telephone availability outside office hours) ± [twice weekly 45-min. sessions in the first year] + [weekly 45-min. sessions in the second year]	Individual med. - -
Nakagawa (2014) UMIN000001218 Japan	80 [20-65] Depression (moderate to severe)	CBT ± 16 sessions x 50 min. = 13 hrs. (16 weeks)	Individual med. PsyPharm-TAU baseline
Nakimuli-Mpungu (2017) PACTR201608001738234 Uganda	1140 [>19] Depression (mild to moderate) HIV	Group Support Psychotherapy (GSP) 8 sessions	No med. Medical baseline
O'Neil (2011) ACTRN12609000386235 Australia	125 [21-65] Depression (mild to moderate) Acute coronary syndrome	* MoodCare 10 sessions x 30-40 min. = 6 hrs. (6 months)	Individual med. - Waitlist
Onu (2016) NCT02320799 Kenya	200 [>18] Depression/PTSD HIV/women	IPT 12 sessions x 60 min. = 12 hrs. (12 weeks)	Individual med. Medical baseline Baseline treatment

Study	Population	Psychotherapy Condition			Control(s)
Van Passel (2016) NTR3865 The Netherlands	128 [18-60]	Eating disorder/OCD (moderate to severe) Treatments as TAU enhancement	Cognitive remediation therapy (CRT)	10 sessions x 45 min. = 8 hrs. (5 weeks)	No/stable med. - Treatment other than PT
Pepping (2017) ACTRN12616001018404 Australia	50 [18-25]	Depression Sexual minority young adults	Compassion-focused therapy program (CFT)	8 sessions x 60 min. = 8 hrs. (8 weeks)	Individual med. - Treatment other than PT
Petrak (2013) ISRCTN89333241 Germany	251 [21-69]	Depression Type 1 or 2 diabetes mellitus	Diabetes specific cognitive behavioral group therapy (CBT)	10 sessions x 120 min. = 20 hrs. (12 weeks)	No/stable med. Medical baseline Pharmaco- therapy
Polak (2012) NTR2235 The Netherlands	90 [>18]	Depression (moderate to severe)	Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)	± 12 sessions x [60- 90 min.] = 15 hrs. (12 weeks)	Individual med. - Pharmaco- therapy
Powers (2016) NCT01988935 USA	80 [18-65]	PTSD Nicotine dependence	Integrated PTSD and Smoking Treatment (IPST)	12 sessions x 90 min. = 18 hrs. (12 weeks)	Individual med. Mixed baseline Baseline treatment
Rhodes (2014) ISRCTN27473954 UK	440 [>18]	Depression	CBT	± max. 20 sessions x 60 min. = 20 hrs. (16 weeks) + 4 booster sessions	Individual med. - -
			Behavioural activation (BA)	± max. 20 sessions x 60 min. = 20 hrs. (16 weeks) + 4 booster sessions	
Riemann (2014) NTR4016 The Netherlands	140 [18-65]	Depression/BPD	Systems Training for Emotional Predictability and Problem Solving (STEPPS)	20 sessions x 150 min. = 50 hrs. (6 months)	Stable med. Mixed baseline Baseline treatment
Rohan (2013) NCT01714050 USA	160 [>18]	Depression	Cognitive-behavioral group therapy (CBT)	12 sessions x 90 min. = 18 hrs. (6 weeks)	No/stable med. - Treatment other than PT

Study	Population		Psychotherapy Condition			Control(s)
Romijn (2015) NTR4912 The Netherlands	156 [>18]	Anxiety	(*) Blended cognitive behavioural therapy (bCBT)	15 sessions x 45 min. = 11 hrs. (15 weeks)	No med. -	-
			Face-to-face cognitive behavioural therapy (fCBT)	15 sessions x 45 min. = 11 hrs. (15 weeks)		
Ross (2016) ACTRN12613000876796 Australia	200 [>18]	Depression Substance use disorder	Behavioural activation treatment (Activate)	± 10 sessions x 60 min. = 10 hrs. (3 months)	Individual med. Mixed baseline	Baseline treatment
Ruesch (2015) DRKS00005140 Germany	128 [>18]	Depression Chronic somatic disease	CBT group program (STEpS)	8 sessions x 100 min. = 13 hrs. (10 weeks)	Individual med. -	Waitlist
Rutledge (2014) NCT01865123 USA	210 [nr]	PTSD Veterans	Prolonged Exposure (PE)	12 sessions x 90 min. = 18 hrs. (12 weeks)	No/stable med. Mixed	Treatment other than PT
Sandell (2015) NCT01606592 Sweden	216 [18-70]	Anxiety Partial randomization preference trial	Panic control treatment (PCT)	± [12-14 sessions] x [60-120 min.] = 16 hrs. (10-16 weeks)	No/stable med. -	Waitlist
			Panic-focused psychodynamic psychotherapy (PFPP)	± [19-24 sessions] x 45 min. = 16 hrs. (10-16 weeks)		
Saxon (2017) ISRCTN06461651 UK	550 [>18]	Depression (moderate to severe)	Counselling for Depression (CfD)	± max. 20 sessions	No/stable med. Mixed baseline	-
			Beckian CBT	± max. 20 sessions		
Schäfer (2017) DRKS00009007 Germany	158 [18-65]	PTSD Substance use disorder	Eye Movement Desensitization and Reprocessing (EMDR)	50 min. weekly sessions	Individual med. Mixed baseline	Other PT

Study	Population		Psychotherapy Condition			Control(s)
Schramm (2011) NCT00970437 Germany	268 [18-65]	Depression (severe)	Cognitive Behavioral Analysis System of Psychotherapy (CBASP)	24 sessions x 50 min. = 20 hrs. (20 weeks) + continuation treatment: 8 sessions x 50 min. = 7 hrs. (28 weeks)	No med. -	-
			Supportive Psychotherapy	24 sessions x 50 min. = 20 hrs. (20 weeks) + continuation treatment: 8 sessions x 50 min. = 7 hrs. (28 weeks)		
Serfaty (2016) ISRCTN07622709 UK	240 [>18]	Depression Terminal advanced cancer	(*) CBT and TAU	± max. 12 sessions x 60 min. = 12 hrs. (3 months)	Individual med. Mixed baseline	Baseline treatment
Sloan (2016) NCT01800773 USA	126 [>18]	PTSD	Written Exposure Therapy (WET)	5 sessions x 40 min. = 3 hrs. (5 weeks)	No/stable med. -	-
			Prolonged Exposure (PE)	12 sessions x 60 min. = 12 hrs. (12 weeks)		
Sugg (2016) ISRCTN17544090 UK	72 [>18]	Depression With or without accompanying DSM anxiety disorder(s)	Morita Therapy	± 8-12 sessions x 60 min. = 10 hrs. (10 weeks)	Individual med. PsyPharm-TAU baseline	TAU
Suszek (2015) NCT02126787 Poland	199 [18-65]	Anxiety (mild to moderate) Depression or personality disorder	Short-term intensive psychodynamic group therapy	± 50 sessions x 90 min. = 75 hrs. (12 weeks)	No/stable med. -	Waitlist
			Short-term intensive transdiagnostic cognitive-behavioral group therapy	± 50 sessions x 90 min. = 75 hrs. (12 weeks)		

Study	Population	Psychotherapy Condition	Control(s)
Taylor (2012) ISRCTN40586372 UK	129 [18-65] Depression Treatment resistant/treatment refractory depression	Psychoanalytic psychotherapy ± 60 sessions x 50 min. = 50 hrs. (18 months)	Individual med. - TAU
Tovote (2013) NCT01630512 The Netherlands	126 [18-70] Depression Type 1 or 2 diabetes mellitus	CBT 8 sessions x 45-60 min. = 7 hrs. (8 weeks) Mindfulness-Based Cognitive Therapy (MBCT) 8 sessions x 45-60 min. = 7 hrs. (8 weeks)	No/stable med. Medical baseline Waitlist
Tully (2016) ACTRN12615000555550 Australia	50 [>18] Depression/anxiety/ PTSD Recent CVD hospitalization	Transdiagnostic unified protocol intervention (UP) ± 12-18 sessions (12-18 weeks)	Individual med. Medical baseline TAU
Watzke (2017) NCT02667366 Switzerland	216 [>18] Depression (mild to moderate)	* Telephone- administered short- term cognitive- behavioural therapy (T-CBT) for depression ± [1 face-to-face + 8-10 telephone + 2 optional booster sessions] x [30-40 min.] = 6 hrs. (3-4 months)	No/stable Baseline (details nr) Treatment other than PT
Wetzelaer (2014) NTR2392 International multicenter	448 [18-65] BPD	Group schema therapy - format A (GST-A) ± [2 individual + max. 18 optional individual + 124 group sessions] x 90 min. = max. 216 hrs. (2 years) Group schema therapy - format B (GST-B) [62 individual sessions x 50 min.] + [74 group sessions x 90 min.] = 163 hrs. (2 years)	Individual med. - TAU

Study	Population		Psychotherapy Condition			Control(s)
Wiltink (2011) DRKS00000570 Germany	105 [18-70]	Anxiety	Short Term Psychodynamic Psychotherapy (STPP)	± 25 sessions (6 months)	No/stable med. -	-
			Standard psychodynamic treatment	± 25 sessions (6 months)		
Wong (2011) CUHK_CCT00267 China	228 [21-65]	Anxiety	Mindfulness based cognitive therapy (MBCT)	8 sessions x 120 min. = 16 hrs. (8 weeks)	No/stable med. Baseline (details nr)	Treatment other than PT Baseline treatment
Zwerenz (2012) ISRCTN96793588 Germany	180 [18-70]	Depression Breast cancer	Short-term psychodynamic psychotherapy (STPP)	± 5 pre-treatment + max. 20 therapeutic sessions (6 months)	Individual med. Medical baseline	TAU

Note: BPT: Borderline personality disorder. CBT: Cognitive behavioral therapy. CT: Cognitive therapy. GmST: Group mindfulness-skills training.

GST: Group Skill Training. Hrs.: Hours. IPT: Interpersonal therapy. Max.: Maximal. Med.: Medication. Min.: Minutes. Mixed baseline:

Psychotherapeutic and pharmacological treatment. Nr: Not reported. OCD: Obsessive-compulsive disorder. PT: Psychotherapy. PTSD:

Posttraumatic stress disorder. PT-TAU: Psychotherapeutic treatment as usual. PsyPharm-TAU: Psychopharmacological treatment as usual; TAU:

Treatment as usual. TRN: Trial registration number. *: Tele/eHealth psychotherapy. (*): Blended face-to-face and tele/eHealth psychotherapy. ±: At

least to some extent flexible treatment amount. Numbers are rounded to whole numbers.

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S4 Result Tables and Figures

Table S4.1*Characteristics of Psychotherapeutic Interventions*

Characteristics	<i>i</i>
Theoretical orientation	
- CBT (including 3 rd wave CBT)	123
- Psychodynamic therapies	13
- Integrative therapies	13
- Behavior therapies	7
- Humanistic therapies	5
- Systemic therapies	3
- Other psychotherapies	4
Bona-fide criteria	
- Bona fide psychotherapies	134
- Non-bona fide psychotherapies	34
Format	
- Individual	125
- Group	29
- Combined individual and group	14
Tele/eHealth	
- Face-to-face	142
- TeleHealth and eHealth	16
- Blended face-to-face and tele/eHealth	10
Additional medication	
- No pharmacological treatment restrictions	94
- No or stable pharmacological treatment	72

Note: CBT: Cognitive behavioral therapy. *i*: Number of psychotherapy conditions.

Table S4.2*Description of Randomized Control Conditions*

Type of comparator	<i>j</i>
Baseline treatment	22
Treatment other than psychotherapy	21
TAU	20
Waitlist/untreated	11
Pharmacological treatment	6
Other psychotherapy	5

Note: Baseline treatment: Concomitant treatment which all trial participants receive,

independent from treatment condition. *j*: Number of control conditions. Other psychotherapy:

Reasons for psychotherapy groups considered controls and not interventions are e.g., if TAU is labelled psychotherapy without a more precise description or if psychotherapy focuses on the non-primary comorbid mental disorder. TAU: Treatment as usual. Treatment other than psychotherapy: E.g., common factor control, minimal contact condition.

Table S4.3*Operationalization of Harm and SE*

Term	Category	Operationalization
Harm	Definition	- Clinically significant increase in primary symptomatology - Superiority of (non-) manualized reference treatment over the to-be implemented manualized one
	Range	- Physical or mental harm - Caused by AEs
	Risk	- Unexpected during psychotherapeutic intervention - Not possible to rule out harm - Potential is minimal (virtual reality)
	Assessment	- Recording of any incidents that could be harmful to the patient (regardless of causality) - Harm expectancy vs. harm experience rating (pre-/post-session)
	Example	- Potential harm of virtual reality: cybersickness
	Insurance	- Insurance coverage for harmed patients
SE	Risk	- Rather rare for evidence-based psychotherapies
	Assessment	- SEPS: Side Effects of Psychotherapy Scale
	Example	- Transient worsening of symptoms - Transient risk of suicidality at the beginning of therapy (due to breaking out of avoidance behavior)

Note: SE: Side effects.

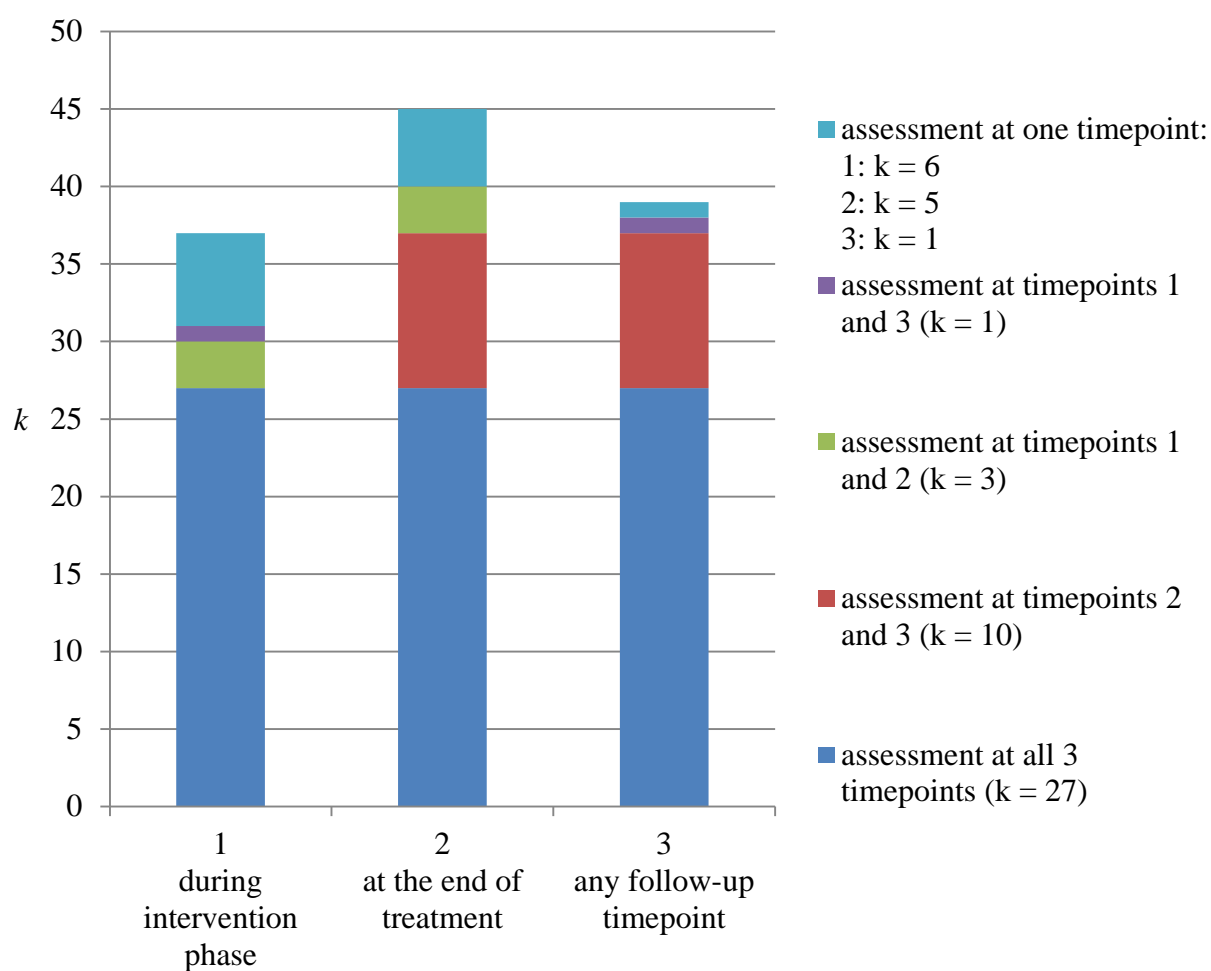
Figure S4.1*Timepoints of Harm Assessment*

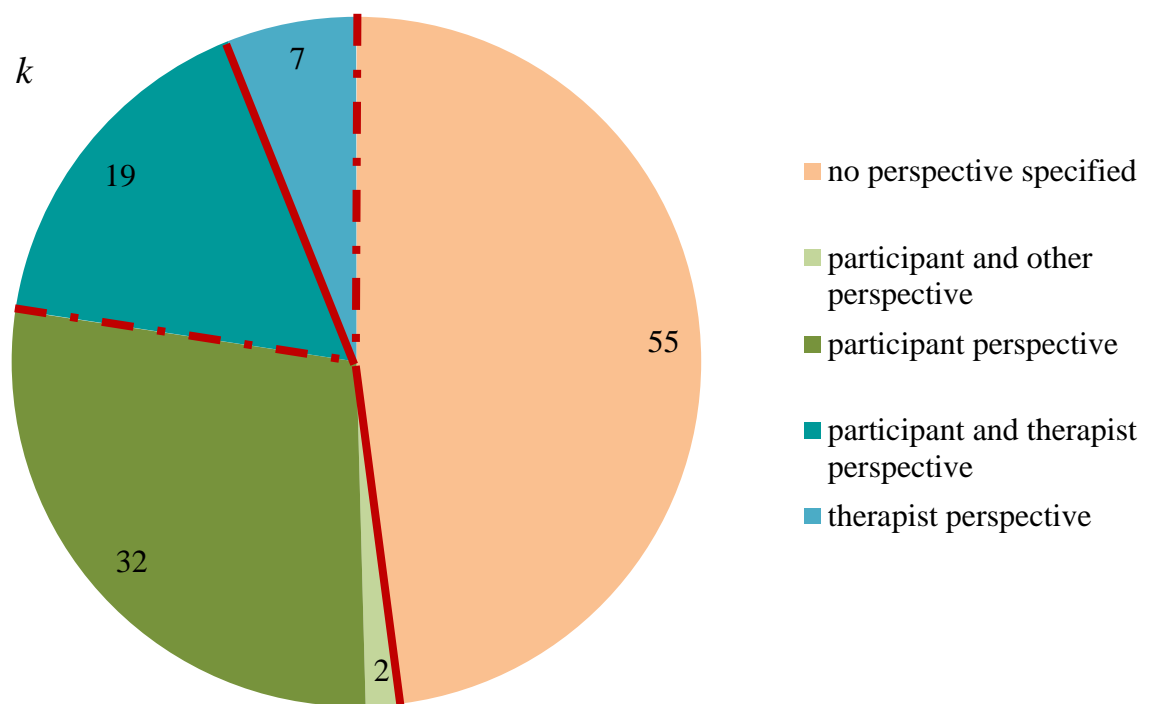
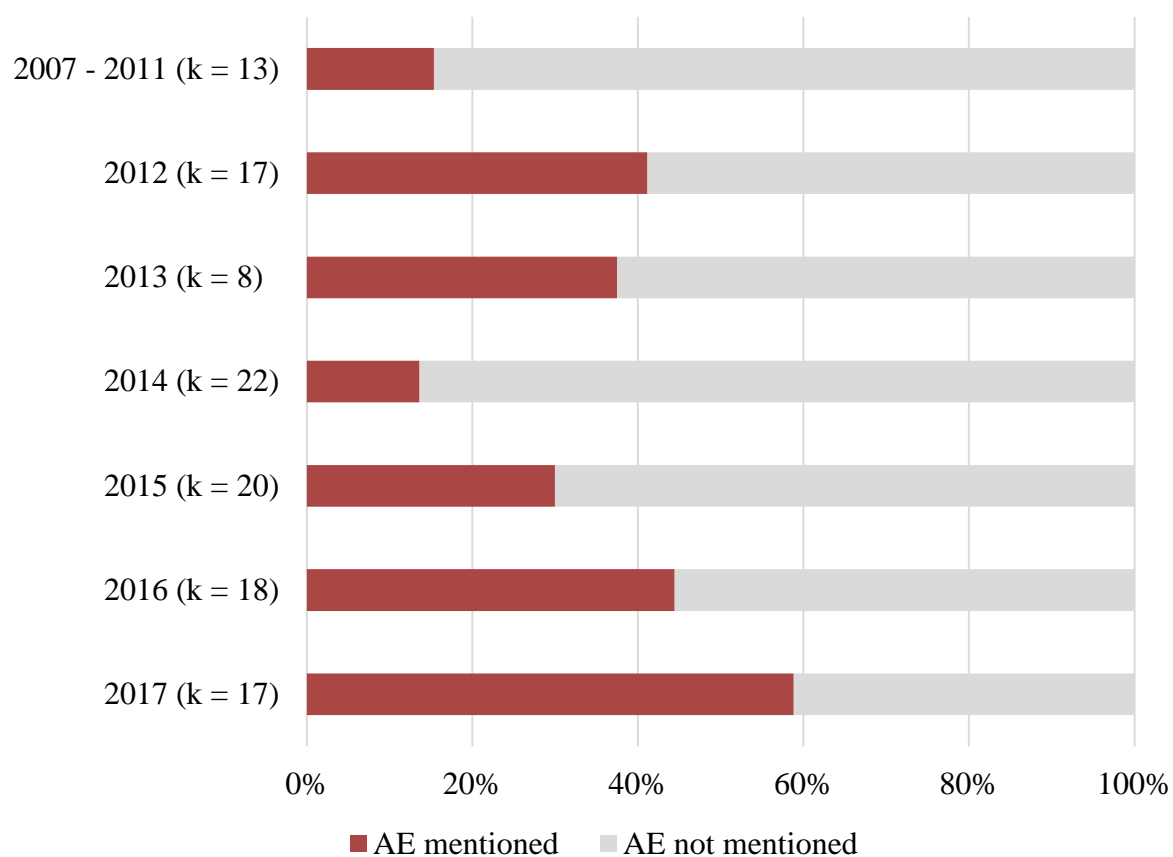
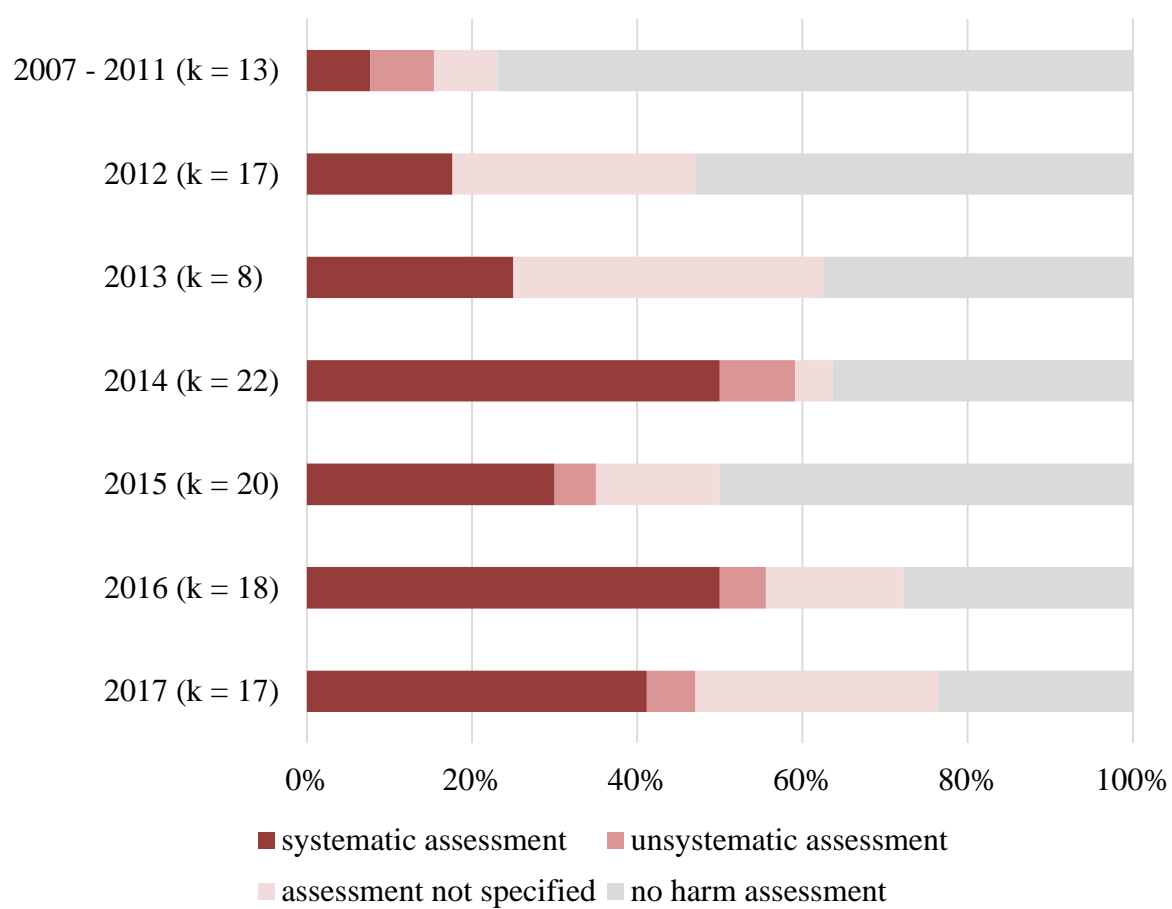
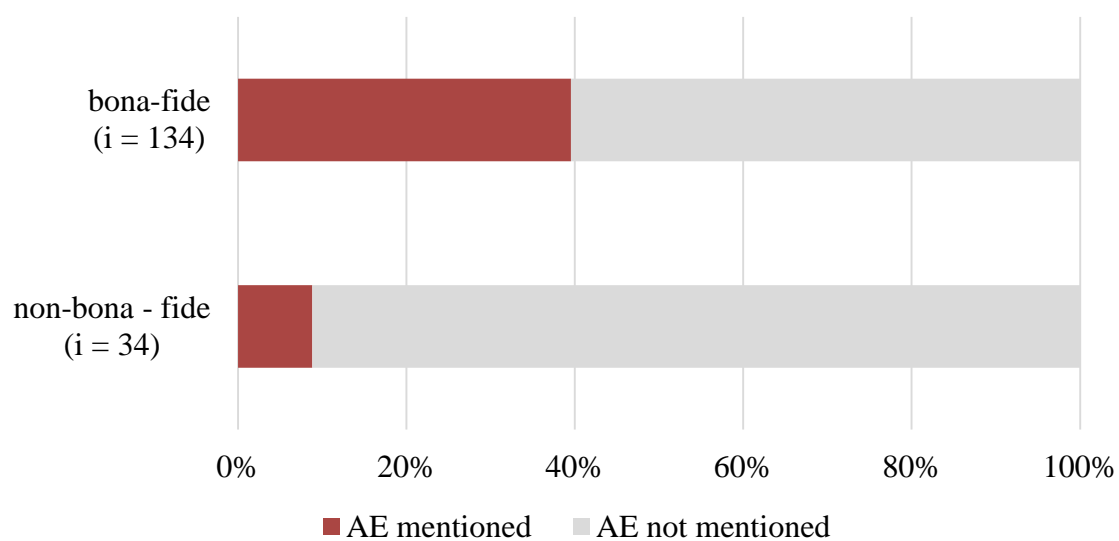
Figure S4.2*Perspectives of Harm Assessment*

Figure S4.3*Consideration of AEs per Year of Protocol Publication*

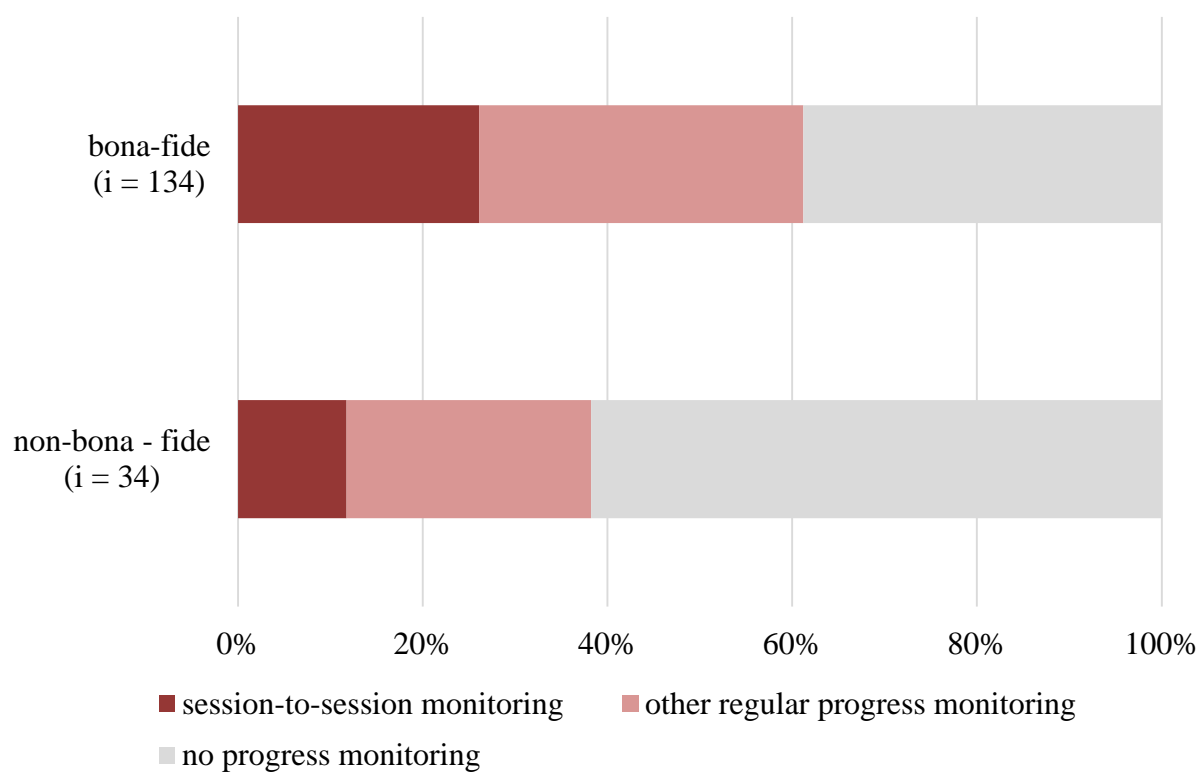
Note: k: Number of study protocols.

Figure S4.4*Harm Assessment per Year of Protocol Publication*

Note: k: Number of study protocols.

Figure S4.5*Consideration of AE and (Non-)bona fide Classification*

Note: i: Number of psychotherapeutic interventions.

Figure S4.6*Progress Monitoring and (Non-)bona fide Classification*

Note: i: Number of psychotherapeutic interventions.

Basic (S)AE* recording form

Date			
Incident number (Report number)			
Initials of reporting person			
Trial Registration Number (Chief investigator)			
Participant - Number - If applicable other organizational information (e.g., site number) - Date of birth - Gender - Other possibly relevant characteristic			
Treatment group			
Date of last intervention session			
Description of incident including - Start date - Duration			
Rating of seriousness/degree of burden*	<input type="checkbox"/> mild	<input type="checkbox"/> moderate	<input type="checkbox"/> severe
Rating of causality*: a) relatedness to treatment	<input type="checkbox"/> not assessable <input type="checkbox"/> not related	<input type="checkbox"/> unlikely related <input type="checkbox"/> possibly related	<input type="checkbox"/> probably related <input type="checkbox"/> clearly related
b) relatedness to study	<input type="checkbox"/> not assessable <input type="checkbox"/> not related	<input type="checkbox"/> unlikely related <input type="checkbox"/> possibly related	<input type="checkbox"/> probably related <input type="checkbox"/> clearly related
Action required regarding participant			
Action required regarding treatment/ study			
Plan for follow-up of incident			
Follow-up reports as necessary			
Outcome	e.g. recovered partially/fully		

*Underlying definitions should be attached.