

1. Original research (no review articles, editorials, letters to the editor) published in English?

- Yes
- No
- Cannot determine

2. Study was conducted in adult patients with treatment resistant depression (two or more failed prior adequate trials of an evidence-based intervention) and compares at least one of the following interventions with another, a pharmacological intervention or placebo (check all that apply):

- A - Electroconvulsive Therapy (ECT)
- B - Repetitive Transcranial Magnetic Stimulation (rTMS)
- C - Vagus Nerve Stimulation
- D - Psychotherapy such as Cognitive Behavioral Therapy (CBT) or Interpersonal Therapy (IPT)
- E - Placebo
- F - Pharmacological intervention
- G - Deep Brain Stimulation
- H - Magnetic Seizure Therapy
- I - Other?
- J - Cannot determine
- K - None of the above (i.e. not adults, not TRD, not a relevant intervention)

3. (Only answer this if you chose K in the above question, otherwise skip #3) Has no comparison but is in adults with TRD, examining one of the nonpharmacological interventions, for example it is a case series looking at 40 recipients of magnetic seizure therapy?

- Yes
- No

4. Addresses one or more of the following key questions (check all that apply):

- KQ1 For adults with treatment-resistant depression (TRD, defined as two or more failed adequate trials of a biologic intervention), do non-pharmacologic interventions such as electroconvulsive therapy (ECT), vagus nerve stimulation (VNS), repetitive transcranial magnetic stimulation (TMS), or an evidence-based psychotherapy (e.g., cognitive therapy [CBT or IPT]) differ in efficacy or effectiveness in treating acute phase depressive symptoms (e.g., response and remission), whether as a single treatment or part of a combination treatment?
- KQ2- For adults with TRD, do non-pharmacologic interventions differ in their efficacy or effectiveness for maintaining response or remission (e.g., preventing relapse or recurrence) whether as a single treatment or part of a combination treatment?
- KQ3 Do non-pharmacologic interventions (single or combination) differ in their efficacy or

effectiveness for treating TRD as a function of particular symptom subtypes (e.g., catatonic (frozen or hyper) or psychotic symptoms)?

KQ4 For adults with treatment-resistant depression, do non-pharmacologic interventions differ in safety, adverse events, or adherence? Adverse effects of interest include but are not limited to: amnesia, memory loss, headaches, post-operative complications.

KQ5 How does the efficacy, effectiveness, or harms of treatment with non-pharmacologic treatments for treatment-resistant depression differ for subpopulations?

KQ6 For adults with treatment-resistant depression, do non-pharmacologic interventions differ in regards to other health-related outcomes (e.g., quality of life)?

Cannot determine

None of the above

5. Study design is one of the following:

RCT

Systematic review (Qualitative or quantitative)

Observational Study

Other?

Cannot determine

Case series (no comparison arm)

6. Use for background? (If Yes, check and flag article)

Yes

No