

Supplementary material 2 – Data Extraction Form

Author, Year, Country	Study design	Study population, Recruitment, Follow up	Sickness absence duration at baseline (mean)	Intervention, Comparator (no. of participants allocated), Total sample size	Dropouts per group, total dropouts	Sickness absence outcomes, Results	Statistical significance of the results
De Vente et al, 2008, The Netherlands	RCT	employees in the Netherlands, recruited by occupational health services, general practitioners and by self-referral in reaction to advertisements, 10 months	2 weeks – 6 months (IG 1: 9.59 weeks, IG 2: 8.61 weeks, CG: 8.73 weeks)	IG 1 ^a : individual CBT based SMT (n=28), IG 2 ^a : group CBT based SMT (n=28), CG ^a : care as usual (n=26), n=82	IG 1: n=3, IG 2: n=5, CG: n=12, n=20	-number of days absent (mean) at 4, 7 and 10 months FU IG 1: 63.59, 27.85, 21.73 IG 2: 55.91, 16.88, 18.79 CG: 54.89, 13.50, 14.89 -weeks (mean) until complete work resumption: IG 1: 37 IG 2: 32 CG: 32	n.s.
Lindegård et al, 2022, Sweden	RCT	patients referred by public primary care units, occupational health care centers and private general practitioners to the Institute of Stress Medicine in Gothenburg, Sweden, 15 months	-not longer than 6 months -at least 25% sickness absence at baseline	IG ^b : care as usual + individually tailored interventions (n=71), CG ^b : care as usual (n=71), n=142	IG: n=3, CG: n=4, n=7	number of sick leave days, gross and net, (mean) at 15-month FU: -gross: IG: 390 CG: 389 -net: IG: 332 CG: 306	n.s.
Nieuwenhuijsen et al, 2017, The Netherlands	RCT	employees (age 18-65) from the south of the Netherlands, recruited through social media, newspapers, general practitioners and an occupational health service, 6 months	-not described -at least 50% sickness absence at baseline	IG ^c : light therapy/electromagnetic field therapy + coaching (not described), PG ^c : not activated light therapy/electromagnetic field therapy + coaching (not described), CG ^c : coaching (not described), n=96	not described, n=12	number of worked hours per week at 12 weeks and 24 weeks compared to the number of contract hours in the week prior to the study (median (scores between 0 (no working hours) and 100 (number of contract hours working))): IG: 22.5, 94.7 PG: 14.3, 88.2 CG: 25.0, 62.5	n.s.
Salomonsson et al, 2020, Sweden	RCT	primary care patients (age 18-65) in Stockholm County, Sweden,	1 – 6 months (IG: 53.7 days, CG 1: 57.7 days, CG 2: 54.3)	Stress subgroup: IG 1: CBT (n=52), IG 2 ^d : RTW-I (n=49), IG 3 ^d : CBT + RTW-I (n=51),	n=6	number of days on sick leave one year after treatment start (mean) Stress subgroup: IG:	n.s.

		recruited by general practitioners of four primary care centers, 1 year		n=152		136.5 CG 1: 132.1 CG 2: 147.8	
Stenlund et al, 2009, Sweden	RCT	patients (age 25-55) referred by general practitioners to the Stress Clinic of Umea, Sweden, 1 year	3 – 24 months (IG: 326 days, CG: 344)	IG ^o : CBR + Qigong (n=67), CG ^o : Qigong (n=69), n=136	IG: n=13, CG: n=30, n=43	sick leave rate (100%, 75%, 50%, 25%, 0%) measured at 12-month FU: IG: 39%, 9%, 21%, 4%, 28% CG: 37%, 10%, 24%, 6%, 22%	n.s.
Stenlund et al, 2012, Sweden	RCT	patients (age 25-55) referred by general practitioners to the Stress Clinic of Umea, Sweden, 3 years	3 – 24 months (IG: 326 days, CG: 344)	IG ^o : CBR + Qigong (n=58), CG ^o : Qigong (n=49), n=107	IG: n=9, CG: n=28, n=37	full-time sick leave rate at 36-month FU: IG: 25% CG: 25%	n.s.
Willert et al, 2011, Denmark	RCT	persons from the working population (age 18-67) in the municipality of Aarhus, Sweden, recruited by general practitioners, union social workers and direct inquiry, 11 months	2 – 26 weeks (IG: 14.5 weeks, CG: 16 weeks)	IG: stress management intervention (n=29), CG: wait list (n=32), n=61 (subgroup on sick leave)	not described for subgroup on sick leave	median period of return to work: IG: week 16 CG: week 33	n.s.
Grossi et al, 2009, Sweden	quasi-experimental study	women, sick-listed by the municipal company health center in Eskilstuna, Sweden, 5 years	1 – 3 years (IG: 1.9 years, CG: 1.7 years)	IG ^o : care as usual + group rehabilitation programme + individual rehabilitation meetings (n=12), CG ^o : care as usual (n=12), n=24	n=0	sick leave rate (100%, 75%, 50%, 25%) measured at 15-month FU (n): IG: 0,1,0,0 CG: 0,0,0,0	n.s.
Karlson et al, 2010, Sweden	prospective controlled study	sick-listed employed people, recruited in co-operation with regional social insurance offices in the two southern counties of Sweden, 18 months	2 – 6 months	IG ^o : care as usual + convergence dialogue meeting (n=92), CG ^o : care as usual (n=74), n=166	IG: n=18, CG: n=0, n=18	sick leave rate (100%, 75%, 50%, 25%, 0%) measured at 18-month FU: IG: 10.8%, 2.7%, 16.2%, 6.8%, 63.5% CG: 27%, 0%, 5.4%, 5.4%, 4.1%, 63.5%	s.

Karlson et al, 2014, Sweden	prospective controlled study	sick-listed employed people, recruited in co-operation with regional social insurance offices in the two southern counties of Sweden, 30 months	2 – 6 months	<u>IG</u> ^h : care as usual + convergence dialogue meeting (n=74), <u>CG</u> ^h : care as usual (n=74), n=148	<u>IG</u> : n=6, <u>CG</u> : n=6, n=12	sick leave rate (100%, 75%, 50%, 25%, 0%) measured at 30-month FU: -Participants of 45 years or younger: <u>IG</u> : 11.4%, 0%, 2.9%, 2.9%, 82.9% <u>CG</u> : 30.3%, 0%, 0%, 0%, 69.7% -Participants of 46 years or older: <u>IG</u> : 24.2%, 0%, 15.2%, 6.1%, 54.5% <u>CG</u> : 14.3%, 0%, 8.6%, 0%, 77.1%	-Participants of 45 years or younger: s. -Participants of 46 years or older: n.s.
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IG: intervention group, CG: comparator group, PG: placebo group, CBT: cognitive behavioral treatment, SMT: stress management training, CBR: cognitively oriented behavioral rehabilitation RTW-I: return-to-work intervention, PTSS: posttraumatic stress disorder, OCD: obsessive compulsive stress disorder, AD: adjustment disorder, ED: exhaustion disorder, n.s.: non-significant, s.: significant