

Online supplement: Internal validity of included studies

Study	Prognostically homogenous study population	Concealment of random allocation	Prestratification (prognostically relevant variables)	Description of randomisation procedure	Registration of loss to follow-up	Registration of co-interventions for each group	Blinding of outcome assessors	Check success of blinding
Bernard ¹	+/-	-	-	+/-	+	-	-	-
Casaburi ²	-	-	-	-	+/-	-	-	-
Coppoolse ³	+	-	-	+	+	-	-	-
Martinez ⁴	-	-	-	-	+	-	-	-
Mador ⁵	+/-	+/-	-	-	+	+/-	-	-
Normandin ⁶	-	-	-	-	+	-	-	-
Ortega ⁷	+/-	-	-	-	-	-	-	-
Ries ⁸	-	-	-	-	+	-	-	-
Rooyackers ⁹	-	-	-	-	-	-	-	-
Sivori ¹⁰	+	-	-	+/-	+	-	-	-
Spruit ¹¹	+/-	+/-	-	-	+	-	+	-
Vallet ¹²	+	-	-	-	+	-	-	-
Vogiatzis ¹³	+/-	-	+	-	+	-	-	-
Wurtemberger ¹⁴	+	-	-	-	-	-	-	-

+ Item properly addressed; +/- Item partially addressed; - Item not addressed.

Items “blinding of treatment providers” and “blinding of patients” rated as “not applicable” and therefore omitted from table.

¹ 14 of 18 trials were included in the quality assessment. 4 trials were only available as abstracts and provided little details on internal validity.

Reference List

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12. Vallet G, Ahmaidi S, Serres I, Fabre C, Bourgooin D, Desplan J *et al.* Comparison of two training programmes in chronic airway limitation patients: standardized versus individualized protocols. *European Respiratory Journal* 1997;**10**:114-22.
13. Vogiatzis I, Nanas S, Roussos C. Interval training as an alternative modality to continuous exercise in patients with COPD. *European Respiratory Journal* 2002;**20**:12-9.
14. Wurtemberger G, Bastian K. [Functional effects of different training in patients with COPD]. *Pneumologie* 2001;**55**:553-62.