Appendix 3 List of included studies

Anchor method \((n = 253)\)


47. Coeytaux RR, Kaufman JS, Chao R, Mann JD, Devellis RF. Four methods of estimating the minimal important difference score were compared to establish a clinically significant change in Headache Impact Test. *J Clin Epidemiol* 2006;59:374–80.


126. Kelly AM. Does the clinically significant difference in visual analog scale pain scores vary with gender, age, or cause of pain? Acad Emerg Med 1998;5:1086–90.


144. Landorf KB, Radford JA. Minimal important difference: values for the Foot Health Status Questionnaire, Foot Function Index and visual analogue scale. *Foot* 2008;18:15–19.


237. Weisscher N, Vermeulen M, Roos YB, de Haan RJ. What should be defined as good outcome in stroke trials; a modified Rankin score of 0–1 or 0–2? J Neurol 2008;255:867–74.


240. Wheaton L, Pope J. The minimally important difference for patient-reported outcomes in spondyloarthropathies including pain, fatigue, sleep, and Health Assessment Questionnaire. *J Rheumatol* 2010;37:816–22.


**Distribution method (n = 171)**


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**Health economic method (n = 13)**


**Opinion-seeking method (n = 60)**


52. Van Der Heijde D, Lassere M, Edmonds J, Kirwan J, Strand V, Boers M. Minimal clinically important
difference in plain films in RA: group discussions, conclusions, and recommendations. OMERACT

53. van Walraven C, Mahon JL, Moher D, Bohm C, Laupacis A. Surveying physicians to determine
the minimal important difference: implications for sample-size calculation. *J Clin Epidemiol*


56. Wengritzky R, Mettheo T, Myles PS, Burke J, Kakos A. Development and validation of a postoperative

57. Wong RK, Gafni A, Whelan T, Franssen E, Fung K. Defining patient-based minimal clinically
important effect sizes: a study in palliative radiotherapy for painful unresectable pelvic recurrences

58. Wyrwich KW, Fihn SD, Tierney WM, Kroenke K, Babu AN, Wolinsky FD. Clinically important changes
in health-related quality of life for patients with chronic obstructive pulmonary disease: an expert

59. Wyrwich KW, Nelson HS, Tierney WM, Babu AN, Kroenke K, Wolinsky FD. Clinically important
differences in health-related quality of life for patients with asthma: an expert consensus panel

differences in health status for patients with heart disease: an expert consensus panel report. *Am
Heart J* 2004;147:615–22.

**Pilot study method (n = 5)**

1933–40.

physiotherapy, for acute low back pain patients, who show signs of developing chronic pain. *Adv

3. Kraemer HC, Mintz J, Noda A, Tinklenberg J, Yesavage JA. Caution regarding the use of pilot studies
to guide power calculations for study proposals. *Arch Gen Psychiatry* 2006;63:484–9.


5. Wang SJ, Hung HM, O’Neill RT. Adapting the sample size planning of a phase III trial based on

**Review of evidence base method (n = 22)**

1. Blumenauer B. Quality of life in patients with rheumatoid arthritis: which drugs might make a


**Standardised effect size (n = 37)**


**Multiple methods (n = 216)**


33. Copay AG, Glassman SD, Subach BR, Berven S, Schuler TC, Carreon LY. Minimum clinically important difference in lumbar spine surgery patients: a choice of methods using the Oswestry Disability Index, Medical Outcomes Study questionnaire Short Form 36, and pain scales. *Spine J* 2008;8:968–74.


39. de Morton NA, Davidson M, Keating JL. Validity, responsiveness and the minimal clinically important difference for the de Morton Mobility Index (DEMMI) in an older acute medical population. *BMC Geriatrics* 2010;10:72.


44. Demoulin C, Ostelo R, Kootte JA, Smeets RIEM. Quebec back pain disability scale was responsive and showed reasonable interpretability after a multidisciplinary treatment. *J Clin Epidemiol* 2010;63:1249–55.


130. Patrick DL, Burns T, Morosini P, Gagnon DD, Rothman M, Adriaenssen I. Measuring social functioning with the personal and social performance scale in patients with acute symptoms of


155. Schmitt JS, Di Fabio RP. Reliable change and minimum important difference (MID) proportions facilitated group responsiveness comparisons using individual threshold criteria. *J Clin Epidemiol* 2004;57:1008–18.


214. Yost KJ, Cella D, Chawla A, Holmgren E, Eton DT, Ayanian JZ, et al. Minimally important differences were estimated for the Functional Assessment of Cancer Therapy-Colorectal (FACT-C)
