

Supplementary Material

Table S1. The COS-STAR Statement

SECTION/TOPIC	ITEM No.	CHECKLIST ITEM	page no.
TITLE/ABSTRACT			
Title	1a	Identify in the title that the paper reports the development of a COS	1
Abstract	1b	Provide a structured summary	3,4
INTRODUCTION			
Background and Objectives	2a	Describe the background and explain the rationale for developing the COS	6,7
	2b	Describe the specific objectives with reference to developing a COS	6,7
Scope	3a	Describe the health condition(s) and population(s) covered by the COS.	6-8
	3b	Describe the intervention(s) covered by the COS.	6-8
	3c	Describe the setting(s) in which the COS is to be applied.	6-8
METHODS			
Protocol/Registry Entry	4	Indicate where the COS development protocol can be accessed, if available, and/or the study registration details.	7,8
Participants	5	Describe the rationale for stakeholder groups involved in the COS development process, eligibility criteria for participants from each group, and a description of how the individuals involved were identified.	7,8
Information Sources	6a	Describe the information sources used to identify an initial list of outcomes.	8-11
	6b	Describe how outcomes were dropped/combined, with reasons (if applicable).	8-11
Consensus Process	7	Describe how the consensus process was undertaken.	11-13

Outcome Scoring Consensus Definition	8	Describe how outcomes were scored and how scores were summarized.	11-13
	9a	Describe the consensus definition.	12,13
	9b	Describe the procedure for determining how outcomes were included or excluded from consideration during the consensus process.	12,13
Ethics and Consent	10	Provide a statement regarding the ethics and consent issues for the study.	8
RESULTS			
Protocol Deviations	11	Describe any changes from the protocol (if applicable), with reasons, and describe what impact these changes have on the results.	8
Participants	12	Present data on the number and relevant characteristics of the people involved at all stages of COS development.	15-18 and Supplementary materials
Outcomes	13a	List all outcomes considered at the start of the consensus process.	15-18 Table 1-3
	13b	Describe any new outcomes introduced and any outcomes dropped, with reasons, during the consensus process.	15-17
COS	14	List the outcomes in the final COS.	18-20, Table 4, figure 1
DISCUSSION			
Limitations	15	Discuss any limitations in the COS development process.	21-22
Conclusions	16	Provide an interpretation of the final COS in the context of other evidence, and implications for future research.	21-24
OTHER INFORMATION			
Funding	17	Describe sources of funding/role of funders.	25
Conflicts of Interest	18	Describe any conflicts of interest within the study team and how these were managed.	25

Table S2. The COS-STAD checklist

Domain	Standard number	Methodology	page no.
Scope specification	1	The research or practice setting(s) in which the COS is to be applied	7,8
	2	The health condition(s) covered by the COS	7,8
	3	The population(s) covered by the COS	7,8
	4	The intervention(s) covered by the COS	7,8
Stakeholders involved	5	Those who will use the COS in research	7,11,12
	6	Healthcare professionals with experience of patients with the condition	11,12
	7	Patients with the condition or their representatives	11,12
Consensus process	8	The initial list of outcomes considered both healthcare professionals' and patients' views.	13-17, table1-3
	9	A scoring process and consensus definition were described a priori.	7,8
	10	Criteria for including/dropping/adding outcomes were described a priori.	11-13
	11	Care was taken to avoid ambiguity of language used in the list of outcomes.	11-13

Table S3. Search strategies and results

Databases	Search strategies	Results to Jan 1st, 2022
PUBMED	("chin med"[Journal] OR ("chinese"[All Fields] AND "medicine"[All Fields]) OR "chinese medicine"[All Fields] OR "tuina"[All Fields] OR ("massage"[MeSH Terms] OR "massage"[All Fields] OR "massages"[All Fields] OR "massaged"[All Fields] OR "massager"[All Fields] OR "massagers"[All Fields] OR "massaging"[All Fields]) OR ("cupping"[All Fields] OR "cuppings"[All Fields]) OR ("moxibustion"[MeSH Terms] OR "moxibustion"[All Fields]) OR ("acupunctural"[All Fields] OR "acupuncture"[MeSH Terms] OR "acupuncture"[All Fields] OR "acupuncture therapy"[MeSH Terms] OR ("acupuncture"[All Fields] AND "therapy"[All Fields]) OR "acupuncture therapy"[All Fields] OR "acupuncture s"[All Fields] OR "acupunctured"[All Fields] OR "acupunctures"[All Fields] OR "acupuncturing"[All Fields]) OR ("trends cardiovasc med"[Journal] OR "case manager"[Journal] OR "tcm"[All Fields]) OR "taichi"[All Fields]) AND ("spinal stenosis"[MeSH Terms] OR ("spinal"[All Fields] AND "stenosis"[All Fields]) OR "spinal stenosis"[All Fields])	195
Embase	((('chinese'/exp OR chinese) AND ('medicine'/exp OR medicine) OR taichi) AND spinal AND ('stenosis'/exp OR stenosis) AND ([chinese]/lim OR [english]/lim) AND [humans]/lim AND [clinical study]/lim AND [embase]/lim AND [<1966-2021]/py	160
Cochrane Library	(chinese medicine or TCM or tuina or massage or acupuncture or cupping or Moxibustion or taichi):ti,ab,kw and (Spinal stenosis):ti,ab,kw	73
CNKI	SU='中医'+ '中药'+ '中西医结合'+ '中医药'+ '针灸'+ '推拿'+ '手法'+ '针刺'+ '艾灸'+ '拔罐'+ '汤药'+ '针刀'+ '热敷'+ '功法'+ '导引'+ '放血'+ '刺络'+ '泡洗'+ '太极'+ '按摩'+ '正骨'+ '点穴'+ '穴位注射' AND SU='腰椎管狭窄'+ '腰椎管狭窄症'+ '椎管狭窄'+ '椎管狭窄症'+ '退行性腰椎管狭窄症'+ '间歇性跛行'	988
Wanfang	主题:("中医" or "中医药" or "中西医结合" or "中药" or "针灸" or "针刺" or "艾灸" or "穴位注射" or "推拿" or "手法" or "按摩" or "正骨" or "拔罐" or "放血" or "刺络" or "泡洗" or "热敷" or "针刀" or "导引" or "功法" or "太极" or "点穴" or "汤药") and 主题:("腰椎管狭窄" or "腰椎管狭窄症" or "	1784

	椎管狭窄" or "椎管狭窄症" or "退行性腰椎管狭窄症")	
Sinomend	((("电针"[常用字段:智能] OR "针刺"[常用字段:智能] OR "正骨"[常用字段:智能] OR "拔罐"[常用字段:智能] OR "艾灸"[常用字段:智能] OR "放血"[常用字段:智能] OR "刺络"[常用字段:智能] OR "泻血"[常用字段:智能] OR "火罐"[常用字段:智能]) OR ("中医"[常用字段:智能] OR "中药"[常用字段:智能] OR "中医药"[常用字段:智能] OR "针灸"[常用字段:智能] OR "方剂"[常用字段:智能] OR "汤药"[常用字段:智能] OR "推拿"[常用字段:智能] OR "手法"[常用字段:智能] OR "拔罐"[常用字段:智能])) AND ("腰椎管狭窄症"[常用字段:智能] OR "椎管狭窄症"[常用字段:智能] OR "腰椎管狭窄"[常用字段:智能] OR "椎管狭窄"[常用字段:智能]))	1084
VIP	M=(腰椎管狭窄) AND U=(针灸 OR 推拿 OR 艾灸 OR 针刺 OR 手法 OR 拔罐 OR 功法 OR 太极 OR 中医)	1480

Table S4. Patient features representing the target participants

Category	Features
Age	8 patients ≥65 years of age
	8 patients <65 years of age
Sex	8 females
	8 males
Disease courses	8 patients ≥10 years
	8 patients <10 years
Radiographic classification	Covering lateral recess, central spinal canal
	intervertebral foramen
territorial region	At least more than 5 regions of China

Table S5. Studies’ Characteristics and Outcome Measurement Instruments

First author, year	Partici pants	Interventions	Comparator	Outcome Measurement Instruments	Treat ment durati on	OMI measuring time	Subdomain outcomes	COMET outcomes	criter ia for respo nder rates
Zeng Haobin, 2020[1]	60/60	Manual therapy+Usual care	Celecoxib+Usual care	JOA VAS parameters of computed tomography	2w	Pre- and post-treatment, follow-up 3m and 6m	pain/function/ ADL pain Radiographic changes	pain function Physiologi cal	NR
Chen Jian, 2019[2]	30/30	CM herb	Aceclofenac+Mecobal amin	JOA IL-6/CRP ODI AE hepatic and renal function tests	4w	Pre-treatment, 2 and 4w after treatment Pre- and post-treatment for hepatic and renal function tests	pain/function/ ADL Inflammatory markers function AE Physiological index	pain function Physiologi cal AE	JOA
Feng Sui 2009[3]	40/40	Acupotomy	Traction	Responder rates	2m	Pre- and post-treatment	pain/function	pain function	DEC - TCM
Geng Xiaoyan, 2017[4]	46/46	CM herb	Salvia (Danshen) injection+Diclofenac	JOA	NR	Pre- and post-treatment	pain/function/ ADL	pain function	NR

Gu Qi, 2015[5]	30/30	CM herb	Glucos	mJOA VAS SPWT Responder rates	2w	Pre- and post-treatment, follow-up 1m for Responder rates	pain/function/ ADL pain measure of walking pain/function/ ADL	pain function	JOA
Guan Xiaoyong, 2015[6]	47/47	CM herb	Salvia (Danshen) injection+Diclofenac	VAS Responder rates	1m	Pre- and post-treatment	pain pain	pain	VAS
Hou Yu, 2019[7]	22/23	Manual therapy	NSAIDs+Drugs for protecting gastric mucosa and nourishing nerves	JOA VAS	4w	Pre- and post-treatment	pain/function/ ADL pain	pain function	NR
Huang Zheng, 2017[8]	31/33/ 32/33	CM herb Acupuncture CM herb+Acupuncture	Diclofenac+Mecobala min	JOA/improvement of JOA Responder rates AE	3m	Pre-treatment, 1, 2 and 3m after treatment	pain/function/ ADL pain/function/ AE	pain function AE	DEC - TCM
Huang Zhifen, 2009[9]	50/46	CM herb	Diclofenac	Responder rates AE	4w	Pre- and post-treatment	pain/function/ AE	pain function AE	DEC - TCM
Ji Wei, 2013[10]	35/34	CM herb	Mecobalamin	Responder rates VAS mJOA	4w	Pre- and post-treatment	pain/function/ pain pain/function/ ADL	pain function	DEC - TCM

Jia Yingchun, 2005[11]	45/22	CM herb+CM rehabilitation	Drugs (Diclofenac tablets or Diethylamine Emulgel, Chondroitin Sulfate Tablets, VB1, VB6, et al)	VAS Self-made symptoms rating scale UBA pain behavior scale Responder rates	2w	Pre- and post-treatment	pain symptoms pain pain/function/	pain function	DEC - TCM
Li Jinxue, 2007[12]	40/40/ 44/42	CM herb CM herb+CM granules CM herb+CM granules+Erigeron breviscapus	GIucos	Responder rates VAS parameters of computed tomography	4w	Pre- and post-treatment for Responder rates/VAS/Radiographic changes, follow-up 12month for Responder rates	pain/function/ADL pain Radiographic changes	pain function Physiological	JOA
Li Jinxue, 2013[13]	92/83	CM herb	GIucos	Responder rates VAS Walking capacity	2w	Pre- and post-treatment for Responder rates/VAS/Walking capacity, follow-up 1m for Responder rates/Walking capacity	pain/function/ pain measure of walking	pain function	GPC R-ND

Li Qiming, 2018[14]	98/60	CM herb	Usual care	JOA VAS	2w	Pre- and post-treatment	pain/function/ ADL pain pain/function/ ADL pain pain/function/ QOL: physical function, role-	pain function	NR
Li Rui, 2016[15]	43/43	CM herb	Loxoprofen sodium	JOA VAS Responder rates SF-36 AE	2m	Pre- and post-treatment	physical, bodily pain, general health, vitality, social function, role- emotional, mental health Psychosocial AE pain pain/function/ ADL pain/function/ ADL AE	AE mental health Psychosoc ial AE	NR
Li Zhiwei, 2008[16]	20/20	CM herb	Diclofenac	VAS JOA Responder rates AE	4w	Pre-treatment, 1, 2, 3 and 4w after treatment		pain function AE	JOA

Lin Yuanfang, 2017[17]	33/32	Manual therapy	Traction	Responder rates JOA Rang of Lumbar spine extension	20d	Pre- and post-treatment	pain/function/ pain/function/ ADL ROM	pain function AE	DEC - TCM
Liu Chenhui, 2019[18]	30/30	CM herb	Celecoxib+Mecobala min+Hydrotalcite Tablets	VAS SPWT CM Zheng scores Responder rates AE	2w	Pre- and post-treatment	pain Measure of walking CM Zheng pain/function/ AE	pain function AE CM indictor	DEC - TCM
Liu Haifan, 2010[19]	30/30	Acupotomy	Canal injection	Global Rating of Change Scale Responder rates	2w	Pre- and post-treatment	Global rating of change pain/function/	pain function	DEC - TCM
Liu Jun, 2020[20]	46/46	CM herb	Mannitol Injection+Mecobalami n	Responder rates	3w	Pre- and post-treatment	pain/function/	pain function	NR
Sheng Xinjun, 2016[21]	40/40	Acupotomy	Traction	Responder rates VAS JOA Changes in T lymphocyte subsets	20d	Pre- and post-treatment	pain/function/ pain pain/function/ ADL Immunologica l indicators	pain function Physiologi cal	DEC - TCM
Su Lianshu, 2015[22]	38/37	Acupotomy	Canal injection	VAS JOA Responder rates	3w	Pre-treatment, 1 and 4w after treatment	pain pain/function/ ADL pain/function/	pain function	DEC - TCM

Sun Biyun, 2021[23]	40/40	Acupuncture	Sham Acupuncture	NRS mRMDQ HADS Treatment Adherence index AE	6w	Pre-treatment, 6w after treatment, follow-up 12w and 24w for NRS/RMDQ/HADS	pain function Psychological assessment Adherence and attrition AE	pain function mental health compliance	NR
Tang Hanwu, 2015[24]	35/34	CM herb	Celecoxib+Mecobalamin	Responder rates VAS JOA Near-infrared imaging system on DU meridian	4w	Pre- and post-treatment	pain/function/ pain pain/function/ ADL CM meridian	pain function CM indicator	DEC - TCM
Wang Chenghong, 2009[25]	46/44	acupuncture	Traction+Physical therapy	JOA mRMDQ responder rates	2w	Pre- and post-treatment, follow-up 6m	pain/function/ ADL function pain/function/ ADL	pain function	JOA
Wang Guanjun, 2019[26]	53/53	CM herb	Mannitol Injection+Mecobalamin	VAS JOA Responder rates	3w	Pre- and post-treatment	pain pain/function/ ADL pain/function/	pain function	DEC - TCM ; JOA

Wang Haijun, 2017[27]	47/47	Acupotomy	Traction+Physical therapy	VAS JOA Responder rates	14d	Pre- and post-treatment, follow-up 1m and 6m	pain pain/function/ ADL pain/function/	pain function	VAS ; JOA
Wang Hua, 2017[28]	50/50	Manual therapy	Epidural injection	Responder rates	4w	Pre- and post-treatment	pain/function/	pain function	DEC - TCM
Wu Shizhen, 2016[29]	13/13	Acupotomy	Canal injection	Global Rating of Change Scale Responder rates	NR	Pre- and post-treatment	Global rating of change pain	pain function	NR
Xiao Zhenhua, 2021[30]	23/23	Acupotomy	Canal injection	VAS JOA	20d	Pre- and post-treatment	pain pain/function/ ADL pain/function/	pain function	NR
Zhou Qishi, 2002[31]	51/51	CM herb	Vitamin B1 B6	Responder rates SPWT Serum endothelin	4w	Pre- and post-treatment	Measure of walking Physiological index function QOL: physical function, role-	function Physiological	NR
kim, 2016[32]	26/24	Acupuncture	Usual care	ODI SF-36	6w	Pre- and post-treatment, follow-up 3m	physical, bodily pain, general health, vitality, social function, role-	pain function QOL mental health Psychosocial	NR

Psychosocial									
emotional, mental health									
Pain									
function									
satisfaction									
Quality of life									
Health-related quality of life									
Patient satisfaction									
Adverse events									
Oka, 2018[33]	41/38/40	Acupuncture	Drugs/Exercise therapy	ZCQ	1m	Pre- and post-treatment	pain/function/satisfaction	pain function satisfaction	NR
Qin, 2020[34]	40/40	Acupuncture	Sham Acupuncture	RMDQ NRS SSS Satisfaction subdomain of SSS	8w	Pre-treatment, 4 and 8w after treatment, follow-up 3m and 6m	function pain pain/function/satisfaction	pain function satisfaction	NR
Xu Jialong, 2021[35]	29/29	CM herb+Usual care	Drugs+Usual care	VAS JOA SPWT CM Zheng scores AE	4w	Pre-treatment, 2 and 4w after treatment for VAS, JOA Pre- and post-treatment for SPWT, CM Zheng scores	pain pain/function/ADL Measure of walking CM Zheng AE	pain function CM indicators AE	DEC - TCM
Zhu Shuxian, 2014[36]	30/30	Manual therapy+Usual care	Traction+Usual care	Responder rates VAS ODI	3w	Pre- and post-treatment	pain/function/pain function	pain function	DEC - TCM

Liu Li, 2020[37]	32/32	Acupuncture+Moxibustion	Acupuncture	Responder rates Self-made symptoms rating scale JOA VAS	20d	Pre- and post-treatment	pain/function/symptoms pain/function/ADL pain	pain function	DEC - TCM
Wang Chenghu, 2014[38]	45/45	Acupuncture+Moxibustion	Ibuprofen	Responder rates	10d	Pre- and post-treatment	pain/function/	pain function	DEC - TCM
Su Tao, 2011[39]	60/60	Acupuncture+Moxibustion+manual therapy	manual therapy	Responder rates	12d	Pre- and post-treatment	pain/function/	pain function	DEC - TCM
Liao Jian, 2017[40]	30/30	CM herb+Acupuncture	Acupuncture	Responder rates RMDQ	2w	Pre- and post-treatment	pain/function/function	pain function	DEC - TCM
Shan Jinchun, 2013[41]	48/48	CM herb+manual therapy	manual therapy	Responder rates CM Zheng scores	1m	Pre- and post-treatment	pain/function/CM Zheng	pain function CM indicators	COC E
Hu Kaixia, 2021[42]	20/20	CM herb+CM fumigation	CM fumigation	VAS JOA ODI Pain-free walking distance CM Zheng scores	4w	Pre-treatment, 2w and 4w after treatment, follow-up 1m	pain pain/function/ADL function Measure of walking CM Zheng	pain function CM indicators	NR

He Yuanzhen g, 2009[43]	60/60	CM herb+manual therapy	manual therapy	Responder rates	1m	Pre- and post-treatment	pain/function/	pain function	DEC - TCM
Li Zhulie, 2012[44]	30/30	Electrothermal acupuncture	Acupuncture	JOA Responder rates AE	10 times	Pre-treatment, 1, 2, and 3 course after treatment, follow-up 1m	pain/function/ ADL pain/function/ ADL AE	pain function AE	JOA
Chen Xiaoyun, 2009[45]	30/30	Electropuncture+Bloodletting therapy	Electropuncture	Responder rates Global Rating of Change Scale VAS JOA IL-6\IL-4\IL-10\TNF	20d	Pre- and post-treatment	pain/function/ symptoms pain pain/function/ ADL	pain function	DEC - TCM
Lei Xiaoping, 2020[46]	34/34	CM herb+Acupuncture	GIucos+Mecobalamin	Blood viscosity/plasma viscosity/RBC hematocrit Responder rates AE	1m	Pre- and post-treatment	Inflammatory markers Hemorheological indicators pain/function/ AE	pain function AE Physiologic	DEC - TCM
Cai Lijun, 2012[47]	32/64	CM herb+kerotherapy	Drugs/Traction	Responder rates JOA	3w	Pre- and post-treatment	pain/function/ pain/function/ ADL	pain function	DEC - TCM ; JOA

Yu Weimin, 2012[48]	32/28	CM herb+Manual therapy	Canal injection	Responder rates	NR	Pre- and post-treatment	pain/function/	pain function	STI-ICWM
Zhang Zhirong, 2017[49]	31/31	Acupuncture+Moxibustion	Acupuncture	Responder rates	20d	Pre- and post-treatment	pain/function/ADL	pain function	JOA
Wu Zhijun, 2018[50]	30/30	CM herb+manual therapy	manual therapy	Responder rates AE	4w	Pre- and post-treatment	pain/function/AE	pain function AE	NR
Tang Ning, 2016[51]	19/19	CM herb+manual therapy	manual therapy	JOA VAS Responder rates	4w	Pre- and post-treatment	pain/function/ADL pain pain/function/	pain function	NR
Tian Qiang, 2015[52]	35/35	CM herb+manual therapy	CM herb	VAS RMDQ Responder rates	4w	Pre- and post-treatment, follow-up 6m	pain function pain/function/	pain function	DEC-TCM
Ge Caihua, 2016[53]	30/30	Topical CM+hot compress	Diclofenac Diethylamine Emulgel	JOA VAS	4w	Pre- and post-treatment	pain/function/ADL pain pain	pain function	JOA
Liang Yihao, 2016[54]	29/29	manual therapy+Exercise therapy	Exercise therapy	VAS JOA SPWT ODI Responder rates AE	3m	Pre-treatment, 1w, 1m and 3m after treatment	pain/function/ADL measure of walking function pain/function/	pain function AE	VAS; JOA\ ODI

Liang Bojin, 2005[55]	25/24	CM herb+Manual therapy	Manual therapy	VAS SF-36 Pain-free walking distance ODI	2m	Pre- and post-treatment	ADL AE pain QOL: physical function, role-physical, bodily pain, general health, vitality, social function, role-emotional, mental health Psychosocial Measure of walking function	pain function QOL mental health Psychosocial	DEC - TCM
Lin Tingyue, 2010[56]	48/45	Acupuncture+Moxibustion	Acupuncture	Responder rates	36d	Pre- and post-treatment	pain/function/	pain function	DEC - TCM

					SPWT VAS JOA IL-6\IL-1B\TNF\CRP Blood viscosity/plasma viscosity/RBC hematocrit Responder rates			measure of walking pain pain/function/ADL Inflammatory markers Hemorheological indicators pain/function/ADL		
Xu Shiliang, 2014[57]	47/48	CM herb+manual therapy	GIucos			4w	Pre- and post-treatment for all, and follow-up 4w for SPWT, VAS, JOA		pain function Physiological	JOA
Lu Yaoyu, 2014[58]	40/40/40	CM herb+Manual therapy	CM herb+sham Manual therapy sham CM herb+Manual therapy		Responder rates Self-made symptoms rating scale	6w	Pre- and post-treatment	pain/function/symptoms	pain function	GPCR-ND
Mao Xiaohui, 2008[59]	52/52	CM herb+Manual therapy+CM fumigation	Drugs +Traction +TDP		Global Rating of Change Scale Responder rates Responder rates Self-made symptoms rating scale	10d	Pre- and post-treatment	symptoms pain/function/symptoms	pain function	DEC-TCM
Yuan Zhixian, 2020[60]	30/30	CM herb+Acupuncture+Moxibustion	Usual care		JOA VAS AE	4w	Pre- and post-treatment	pain/function/ADL pain AE	pain function AE	CA-TCM

Dou Qunli, 2007[61]	83/83	CM herb+Manual therapy	Canal injection + Traction	Responder rates	2m	Pre- and post-treatment	pain/function/	pain function	DEC - TCM
Chen Shulie, 2006[62]	32/7	Manual therapy+Topical CM	Drugs	Responder rates	4w	Pre- and post-treatment	pain/function/	pain function	NR
Wang Fuyu, 2018[63]	48/48	CM herb+Acupuncture	Usual care	JOA VAS IL-1 TNF	4w	Pre-treatment, 2 and 4w after treatment	pain/function/ ADL pain Inflammatory markers	pain function Physiological	JOA
Xiong Junwei, 2015[64]	30/30	Acupotomy+Manual therapy	Acupotomy	JOA Responder rates AE	3w	Pre-treatment, 1, 2 and 3w after treatment, follow-up 2w	pain/function/ ADL pain/function/ ADL AE	pain function AE	JOA
Chen Jianhong, 2004[65]	60/60	Acupotomy+CM herb	Drugs + Traction	Global Rating of Change Scale SPWT Rang of Lumbar spine extension Responder rates	14d	Pre- and post-treatment	Global rating of change Measure of walking ROM pain/function/	pain function	DEC - TCM
Wang Wenli, 2018[66]	30/30	Electropuncture+fire d cupping+Bloodletting therapy	Physical therapy	SSS Responder rates Satisfaction	8w	Pre-treatment, 4 and 8w after treatment, follow-up 4w	pain/function/ pain/function/ satisfaction AE	pain function satisfactio	DEC - TCM

					subdomain of SSS AE		for Patient satisfaction index	n AE		
Zhong Hongzhen g, 2016[67]	100/10 0	Acupuncture+Moxib ustion	Diclofenac	ODI		30d	Pre-treatment, 10d and 25d after treatment, follow-up 3m	function	function	NR
Jing Lei, 2019[68]	29/30	Electropuncture+fire d cupping+Bloodlettin g therapy	Physical therapy	SSS Responder rates		8w	Pre-treatment, 4 and 8w after treatment	pain/function/s atisfaction pain/function/	pain function satisfactio n	DEC - TCM
Wang Hongmei, 2019[69]	40/40	Acupuncture+Moxib ustion	GIucos	JOA IL-6/TNF/CRP		10d	Pre- and post- treatment	pain/function/ ADL Inflammatory markers	pain function Physiologi cal	NR
Wang Jian, 2013[70]	72/72	Acupuncture+cuppin g	GIucos	JOA Responder rates AE		36d	Pre- and post- treatment, follow-up 1m	pain/function/ ADL pain/function/ ADL AE	pain function AE	JOA
Zhang Hong, 2014[71]	37/36	Acupuncture+acupoi nt injection	Acupuncture	JOA Responder rates		12d	Pre- and post- treatment	pain/function/ ADL pain/function/ ADL	pain function	JOA

Lin Jincai, 2016[72]	35/35	Acupuncture+CM herb injection	Acupuncture	Rang of Lumbar spine extension VAS JOA Pain-free walking distance AE	2w	Pre- and post-treatment	ROM pain function measure of walking AE	pain function AE	NR
Lv Xiaohua, 2014[73]	40/40	Acupuncture+Bloodletting therapy	Dexamethasone+mannitol+CM herb injection	Responder rates	10d	Pre- and post-treatment	pain/function/	pain function	NR
Shi Jianwei, 2013[74]	37/37	Acupuncture+manual therapy	Dexamethasone+mannitol+Salvia (Danshen) injection	Responder rates	23d	Pre- and post-treatment	pain/function/	pain function	DEC - TCM
Xu Yunyu, 2014[75]	35/35	Acupuncture+Moxibustion	Acupuncture	JOA Responder rates	25d	Pre- and post-treatment, follow-up 1m	pain/function/ADL pain/function/ADL	pain function	JOA
Zhang Huajun, 2016[76]	40/40	Acupuncture+CM herb+moxibustion	Acupuncture+CM herb	VAS JOA CRP ESR	14d	Pre- and post-treatment, follow-up 1m	pain pain/function/ADL Inflammatory markers	pain function Physiological	JOA
Ji Yuejun, 2010[77]	64/62	CM herb+Manual therapy	Acupuncture	self-made lumbar fuction evaluation scale Responder rates	10d	Pre- and post-treatment	function pain/function/	pain function	DEC - TCM

Ouyang Song, 2014[78]	34/34	Electropuncture+manual therapy	Traction+Physical therapy	Responder rates	NR	Pre- and post-treatment	pain/function/	pain function	NR
Lian Chongguang, 2009[79]	40/40	CM herb+Manual therapy+CM fumigation	Drugs+Traction+TDP	Responder rates Global Rating of Change Scale	3w	Pre- and post-treatment	pain/function/symptoms	pain function	DEC - TCM
Xiong Yumo, 2017[80]	30/30	CM herb+CM fumigation+Acupotomy	Drugs+Traction+TDP	Responder rates Global Rating of Change Scale	3w	Pre- and post-treatment	pain/function/symptoms	pain function	DEC - TCM
Wei Shengqing, 2019[81]	42/42	Acupotomy+Manual therapy	Manual therapy	VAS JOA ODI AE	3w	Pre- and post-treatment	pain/function/ADL function AE	pain function AE	VAS ; JOA
Miao Zezheng, 2017[82]	56/56	Manual therapy+Topical CM+CM herb	Usual care	VAS JOA	NR	Pre- and post-treatment	pain pain/function/ADL	pain function	NR
Yang Guang, 2010[83]	45/45	Manual therapy+Topical CM+CM herb	Usual care	VAS JOA	1m	Pre- and post-treatment	pain pain/function/ADL	pain function	NR
Xie Weixiong, 2017[84]	40/40	Manual therapy+Topical CM+CM herb	Usual care	JOA Responder rates	2w	Pre- and post-treatment	pain/function/ADL pain/function/	pain function	NR

Yin Xiaoxia, 2020[85]	51/51	CM herb+Manual therapy	Manual therapy	Responder rates JOA VAS ODI Pain-free walking distance IL-6/TNF	4w	Pre- and post-treatment	pain/function/ ADL pain/function/ ADL pain function measure of walking Inflammatory markers	pain function Physiological	JOA
Zhang Shengquan, 2018[86]	46/46	CM herb+Manual therapy	Celecoxib+Mecobalamin+Electrical Nerve Stimulmion	Responder rates	4w	Pre- and post-treatment	pain/function/	pain function	DEC - TCM

Notes: CM, Chinese medicine; SPWT, Self-Paced Walk Test; JOA, Japanese Orthopedic Association Score; mJOA, modified Japanese Orthopedic Association Score; VAS, visual analogue scale; NRS, numerical rating scale; AE, adverse events; SF-36, 6-Item Short Form Survey; ADL, activities of daily living; ROM, Range of Movement; RMDQ, Roland Morris Disability Questionnaire; mRMDQ, modified Roland Morris Disability Questionnaire; HADS, Hospital Anxiety and Depression Scale; ODI, Oswestry Disability Index; QOL, Quality of Life; SSS, Spinal Stenosis Scale; ZCQ, Zurich Claudication Questionnaire; TNF, Tumor Necrosis Factor; RBC, Red blood cell; CRP, C-reactive protein; DECTCM, Diagnosis and evaluation Criteria of TCM Diseases and Syndromes; GPCR-ND, Guiding Principles for Clinical Research of New Drugs; CA-TCM, Lumbar spinal stenosis, China Association of Traditional Chinese Medicine, 2013; STI-ICWM, Clinical Research on the Treatment of Soft tissue Injury by Integrated Chinese and Western Medicine; COCE, Criteria for Orthopedic clinical evaluation; nr, no reported.

Table S6. Characteristics of patients in interviews and Delphi rounds

patients	gender	age (years)	disease course (years)	Complicating lumbar spondylolisthesis	Radiographic classification	experience of CM treatment	territorial region	consensus meeting
A1	Female	73	10	n	lateral recess	y	Beijing	n
A2	Female	66	3	n	central spinal canal	y	Hebei	y
A3	Male	69	2	y	intervertebral foramen	y	Beijing	n
A4	Female	71	9	n	central spinal canal	y	Beijing	n
A5	Male	58	8	y	central spinal canal	n	Beijing	n
A6	Male*	73	11	n	lateral recess	y	Shandong	n
A7	Female*	64	7	y	lateral recess	y	Guangdong	y
A8	Female*	63	3	n	intervertebral foramen	n	Changchun	y
A9	Male*	68	6	y	central spinal canal	y	Changchun	n
A10	Female	55	7	y	lateral recess	y	Beijing	y
A11	Female	75	13	n	lateral recess	y	Shandong	n
A12	Male	83	10	n	central spinal canal	y	Beijing	n
A13	Female*	55	1	y	intervertebral foramen	n	Liaoning	y
A14	Male*	54	2	y	central spinal canal	y	Liaoning	y
A15	Female*	69	1	n	central spinal canal	y	Beijing	y
A16	Female*	64	20	y	lateral recess	y	Shanghai	y
A17	Female	72	30	n	intervertebral foramen	y	Beijing	n
A18	Male	60	4	y	lateral recess	y	Beijing	y

Note: * presents the patients interview conducted via WeChat software; CM, Chinese medicine; y, yes; n, no;

Table S7. Characteristics of experts in Delphi rounds

experts	gender	age (years)	work experience (years)	title	medical major	academic researcher	territorial region	consensus meeting
Ex 1	male	49	24	senior	Tuina	Y	Beijing	Y
Ex 2	male	54	31	senior	Tuina	Y	Beijing	N
Ex 3	male	56	33	senior	Tuina	Y	Beijing	Y
Ex 4	male	60	38	senior	Tuina	Y	Beijing	Y
Ex 5	male	39	11	intermediate	orthopaedics	Y	Beijing	N
Ex 6	male	50	28	intermediate	orthopaedics	Y	Beijing	N
Ex 7	male	32	7	intermediate	orthopaedics	Y	Guizhou	Y
Ex 8	male	48	24	senior	acupuncture	Y	Beijing	Y
Ex 9	female	41	11	intermediate	acupuncture	Y	Beijing	Y
Ex 10	male	37	8	intermediate	acupuncture	Y	Beijing	N
Ex 11	male	43	20	senior	acupuncture	Y	Beijing	N
Ex 12	male	56	31	senior	pain management	Y	Shandong	Y
Ex 13	male	36	8	intermediate	rehabilitation	Y	Beijing	Y
Ex 14	female	57	35	senior	general family medicine	N	Beijing	Y
Ex 15	female	56	32	intermediate	pain management	N	Beijing	Y
Ex 16	female	37	15	intermediate	nursing	Y	Beijing	N
Ex 17	male	48	24	senior	orthopaedics	Y	Shanghai	Y
Ex 18	male	50	26	senior	orthopaedics	Y	Guangdong	Y
Ex 19	male	53	30	senior	orthopaedics	Y	Xinjiang	Y
Ex 20	male	42	16	intermediate	orthopaedics	Y	Changchun	Y
Ex 21	female	39	11	intermediate	rehabilitation	Y	Liaoning	Y

Note: y, yes; n, no.

Table S8. Candidate outcomes ratings from patients and experts in Delphi 2 rounds and voting at consensus meeting

Candidate Outcomes		Delphi round 1 (n=39)						Delphi round 2 (n=39)						consensus meeting voting (n=24)		
		experts (n=21)			patients (n=18)			experts (n=21)			patients (n=18)			NGT re-identified outcomes	experts (n=15) % yes	patients (n=9) % yes
		% score 1-3	% score 4-6	% score 7-9	% score 1-3	% score 4-6	% score 7-9	% score 1-3	% score 4-6	% score 7-9	% score 1-3	% score 4-6	% score 7-9			
Pain		0%	10%	90%	0%	0%	100%	nr	nr	nr	nr	nr	nr	Pain and discomfort	100%	100%
Function		5%	5%	90%	0%	6%	94%	nr	nr	nr	nr	nr	nr	lumbar function	100%	100%
ADL		0%	10%	90%	0%	0%	100%	nr	nr	nr	nr	nr	nr	ADL	93%	89%
ROM		10%	33%	57%	11%	11%	78%	5%	19%	76%	6%	17%	78%	ROM	60%	33%
Symptoms		0%	10%	90%	11%	22%	67%	0%	0%	100%	11%	17%	72%	nr	nr	nr
Measure of walking	of	0%	33%	67%	11%	22%	67%	0%	5%	95%	0%	11%	89%	Walking function	100%	89%

Global rating of change	0%	24%	76%	6%	28%	67%	0%	14%	86%	6%	17%	78%	Patient global assessment	93%	78%
AE	0%	24%	76%	0%	11%	89%	0%	24%	76%	0%	6%	94%	AE	100%	100%
Biomarkers	29%	43%	29%	28%	33%	39%	29%	52%	19%	11%	50%	39%	Biomarkers	0%	11%
Radiographic changes	5%	43%	52%	6%	22%	72%	5%	33%	62%	0%	28%	72%	Radiographic changes	47%	22%
CM specific outcomes	10%	24%	67%	6%	33%	61%	0%	14%	86%	6%	28%	67%	CM specific outcomes	100%	67%
Mental health	5%	38%	57%	6%	33%	61%	0%	43%	57%	0%	17%	83%	Mental health	53%	78%
Satisfaction index	0%	29%	71%	0%	28%	72%	0%	24%	76%	0%	28%	72%	Satisfaction index	7%	44%
Quality of life	5%	14%	81%	0%	11%	89%	nr	nr	nr	nr	nr	nr	health related QOL	100%	78%
Adherence and attrition	14%	29%	57%	0%	33%	67%	10%	14%	76%	0%	50%	50%	Adherence and attrition	7%	0%
Psychosocial	48%	38%	14%	44%	39%	17%	19%	71%	10%	28%	50%	22%	Psychosocial	13%	33%
Resource use	14%	24%	62%	0%	22%	78%	5%	24%	71%	6%	22%	72%	Resource use	47%	78%

Note: CM, Chinese medicine; AE, adverse events; ADL, activities of daily living; ROM, Range of Movement; QOL, quality of life; nr, no reported. The Bold number in this table met the predefined "consensus in" thresholds

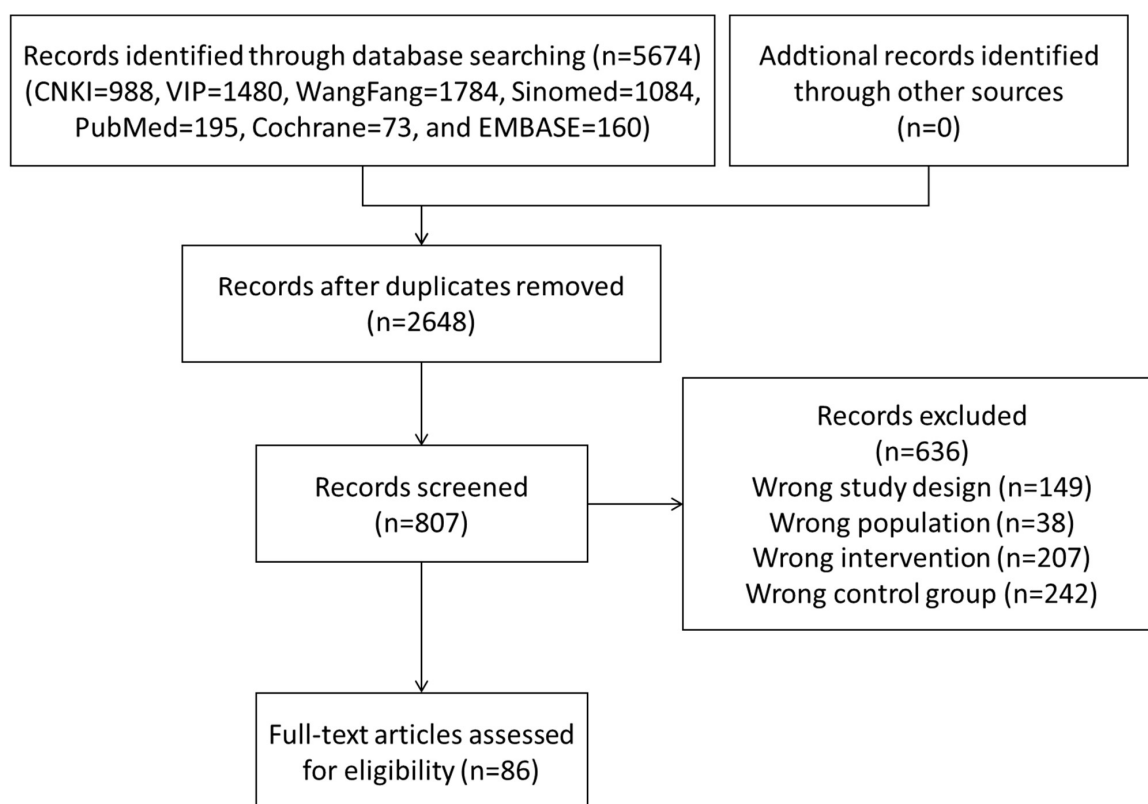


Figure S1. PRISMA flow diagram

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