## Appendix 34. Risk of bias (Quality of studies: representativeness)

Study	Cohort representativeness	Exclusions	Comparability of cohort Age (SD), % female, indication	Outcome assessment Follow up
Hip replacem	ent			
Registry				
Nikolajson et	Consecutive patients	Not degenerative hip arthritis	71.6 (8.7)	Self-completed
al. 2006[23]	identified in a national	Not age 18-90 years	% female not reported	5.9% lost to follow up
	joint registry with 94%	Not postero-lateral surgical approach	100% degenerative hip	
	of hip replacements	No pre-operative registration of pain	arthritis, operation	
	recorded. 93.6%	Previous or subsequent ipsilateral or contralateral hip	through a posterolateral	
	response rate to postal	operations	surgical approach	
	questionnaire			
Multiple centr				
Jones et al.	Approximately 81% of	On health region waiting list for less than 7 days	68.2 (11.1)	Self-completed
2000[24]	consecutive patients	Non-elective	60%	5.8% lost to follow up
	listed for and who	Hemiarthroplasties, revisions and emergency surgery	94% OA	or died
	subsequently received	Not resident in health region		
	joint replacement in	Age <40 years		
	health region.	Non-English speaking		
		Living in long-term care		
Quintana et	Consecutive patients	Not on waiting list for THR	69.1	Self-completed
al. 2006[30]	scheduled to undergo	Severe comorbidities, such as cancer, terminal	48.3%	(postal)
	total hip replacement in	disease, or psychiatric conditions	100% OA	25.5% lost to follow
	7 teaching hospitals.	Main diagnosis not hip OA		up
	82.4% response			
Single centre				~ 12
Nilsdotter et	Consecutive patients at	Not primary unilateral THR	71 (range 50-92)	Self-completed
al. 2003[26]	single department of orthopaedics	Not primary OA	55% 100% OA	5.9% lost to follow up
	ormopacuics		10070 OA	

Singh & Lewallen 2010[27]	Consecutive patients from single centre joint registry sent postal questionnaire or completed at outpatient clinic or telephone	Not alive at follow up Not primary THA	65.0 (13.3) 51% 87% OA	Self-completed (postal or in clinic) or administered on telephone by experienced registry staff 37.7% lost to follow up
Wylde et al. 2011[28]	Consecutive patients on an orthopaedic centre database	Not primary THR	Median 73 range 65-78) 63% Majority OA	Self-completed postal questionnaire 47.6% lost to follow up
Knee replacer	ment			
Registry				
Baker et al. 2007[31]	Random sample of patients in national joint registry	Not primary unilateral TKR No contact details recorded Known to have died	70.7 (range 25-98) 57% (estimate) 96% OA	Self-completed postal questionnaire 14.9% lost to follow up
Multiple centr	res			
Jones et al. 2000[24]	Approximately 81% of consecutive patients listed for and who subsequently received joint replacement in health region.	On health region waiting list for less than 7 days Non-elective Hemiarthroplasties, revisions and emergency surgery Not resident in health region Age <40 years Non-English speaking Living in long-term care	69.2 (9.2) 59% 94% OA	Self-completed 5.8% lost to follow up or died
Quintana et al. 2006[30]  Single centre	Consecutive patients scheduled to undergo total knee replacement in 7 teaching hospitals. 83.4% response	Not on waiting list for TKR Severe comorbidities, such as cancer, terminal disease, or psychiatric conditions Main diagnosis not knee OA	71.9 73% 100% OA	Self-completed (postal) 24.1% lost to follow up

Núñez et al. 2007[35]	Consecutive patients at a single tertiary care centre	Not OA grade IV Kellgren and Lawrence criteria grade 4 Did not agree to participate and give informed consent (2 out of 90)	74.8 (5.6) 81% 100% OA	Self-completed at clinic 5.0% lost to follow up
- C. 1	D	Functional illiteracy or severe psychopathology	(7.4 (0.1) C.11 1	0.10 1.1
Stephens 2002[34]	Patients referred for and receiving TKR	Age <50 years Significant cognitive impairment (Telephone Interview for Cognitive Status)	67.4 (8.1) followed up 54% followed up 100% OA	Self-completed (postal) 7.4% lost to follow up
Lundblad et al. 2008[37]	Patients scheduled for TKR at a single hospital	No consent Not Caucasian Not scheduled for TKR for OA	68 (range 40-80) 50.7% 100% OA	Self-completed postal 10.1% lost to follow up
Nilsdotter et al. 2009[36]	Patients on waiting list for knee replacement at a single hospital department of orthopaedics	Not primary TKR Not knee OA	71 (8) 61.8% 100% OA	Self-completed postal 12.7% lost to follow up
Vuorenmaa 2008[38]	Patients referred for and receiving TKR at a single hospital	Age >80 years Knee OA rating not 3–4 by Ahlbäck classification Inflammatory joint disease Early TKR Medical diagnosis of serious disease	70 (5) 86% 100% OA	Self completed VAS pain score at clinic 11.8% lost to follow up
Czurda et al. 2010[32]	Consecutive patients at single centre	Not primary TKR Not degenerative OA Rheumatoid arthritis, post-operative infection and/or if the pain they suffered from at the time of follow-up appeared after falling or another traumatic experience Not performed by experienced surgeon <18 months follow up	75-76 (range 45-96) 76% 100% OA	Telephone interview with patient-reported outcome measure 13.4% lost to follow up
Wylde et al. 2011[28]	Consecutive patients on an orthopaedic centre	Not primary TKR	Median 73 (range 28- 96)	Self-completed postal questionnaire

	database		59% Majority OA	45.3% lost to follow up
Single surgeor	1			•
Brander et al. 2003[33]	Consecutive patients treated by single surgeon at single centre	Not degenerative arthritis Not intact cognitive abilities Younger than 18 years Depression or treatment with antidepressant or anxiolytic Concurrent musculoskeletal diagnosis (fibromyalgia, spinal stenosis, significant ipsilateral hip OA) No signed consent form.	66 (10.5) 55.2% 94% OA	Self-completed questionnaire 0% lost to follow up

THR total hip replacement, TKR total knee replacement, OA osteoarthritis, WOMAC Western Ontario and McMaster Universities Arthritis Index, VAS visual analogue scale, KOOS Knee Osteoarthritis Outcome Score