The number of deaths in the control arm exceeded that in the intervention arm.

The side effect profile was very similar between the two groups.

Liver and kidney function was normal for all patients. (Two outcomes: liver function, kidney function)

The patient’s systolic blood pressure rose over the course of treatment.

Hyperthyroidism was diagnosed in seven patients.

The most clinically significant evidence of harm was evident in the carbamazepine group, most notably by the number of patients who experienced arrythmia and muscle weakness over the course of their treatment.

The most common adverse event was blurred vision.

Patients receiving intravenous treatment were more likely to require rescue intervention than those in the oral treatment group.

The total cost of clozapine was determined for patient each using national health service prescription data.

The rate of admission to intensive care was recorded over the first 28 days following surgery.

We are interested in assessing whether patients receiving standard care are more likely to be transferred to a nursing home following surgery compared to those who receive enhanced rehabilitation care.

Patients felt empowered and affirmed when they were able to discuss their treatment choices with their treating physician.

Patients’ overall quality of life, wellbeing and perceived health status improved over the follow up period, markedly so during the first 6 months of therapy.

The primary outcome was re-employment.

Fidelity to the topic guide was poor among therapists.

Patients were asked to provide honest records of their adherence to prescribed medication on a weekly basis, in particular the dose of treatment taken.

Change in physical functioning was determined by assessing activities of daily living at baseline and 6m.

Most patients reported increased confidence and the ability to re-engage with social interaction following cognitive behavioural therapy, but this benefit was not reported in the control arm.

Long term measures of interest included the impact on personal circumstances, in particular income and place of residence.

The results regarding appropriateness and accessibility of treatment in this feasibility trial were encouraging.

Conversion to open surgery was more common among patients with multiple pre-existing comorbidities.

Only one patient reported being unable to concentrate due to sleep deprivation.