

Column name	Explanation (data type, levels)
Baseline data	
Gender	Gender (string, male/female)
age_collapsed	Patients' age grouped into 5 year ranges (string)
diagnosis_collapsed	Neurological main diagnosis (string), grouped into cerebrovascular disorders, neuromuscular disorders, epilepsy, movement disorders and others
marital_status_collapsed	Marital state (string, married; not married)
Living_situation	Living situation (string, alone or not alone, e.g. with partner or family)
education	Education (string, high: German abitur or university, ≥ 12 years; medium: German Realschule or general certificate of secondary education, 8 to 12 years; and low: German Hauptschule or no school ≤ 8 years)
tablets_preparation	Preparation and taking of medication independently (string, independent vs needs help from others)
number of drugs per day	total amount of different medications taken daily (integer)
sams_1 to sam_18	Items for Stendal Adherence to Medication Score (SAMS), multinomial/integer, range 0 – 4, with higher numbers indicating higher levels of nonadherence
SAMS	Stendal Adherence to Medication Score (SAMS) total sum score, integer
BDI	Beck's Depression Inventory (BDI) II sum score, integer Note: values with * were taken from neuropsychological testing performed in routine assessment on the wards, not by study staff, hence only sum scores are available
BFI	Personality according to Big Five Inventory (BFI) 10 (string, agreeableness, conscientiousness, extraversion, openness, neuroticism)
HCCQ	Sum Score of Health Care Climate Questionnaire (HCCQ) (numeric/float)
moca_edu_extra	Additional point for less than 12 years of education
MoCA	Sum Score for Montreal Cognitive Assessment, integer, range 19-30 Note: values with * were taken from neuropsychological testing performed in routine assessment on the wards, not by study staff, hence only sum scores are available
TuG	Timed Up and Go (TuG) duration in seconds, grouped into grouped into <20 sec, 20 – 30 sec, > 30 sec, and inability to perform the test due to medical reasons (string)
doc_app_frequency_quarterly	Number of doctor consultations per quarter

	(float)
Walking Aid	Use of any form of walking aid, e.g. wheelchair, walking stick, crutches etc. (string, yes/no)
nonmedical_treat	Use of any nonmedical treatment, e.g. physiotherapy, occupational therapy, or speech therapy (string, yes/no)
frequency of consultation quarterly	Number of doctor consultations per quarter (float)
medication_change	Has there been a change in medication in the last 6 months? (string, yes/no)
medic_change_type	What kinds of changes were made? "Cannot provide information" = patient reports a change was made but cannot name what was changed (string, new medicament, reduction, increase, medicament discontinued, other)
rphysf_c	SF-36 domain Physical functioning (integer)
rsocf_c	SF-36 domain Social functioning (float)
rrolef_c	SF-36 domain Role limitations due to physical health (integer)
rrolee_c	SF-36 domain Role limitations due to emotional problems (integer)
rment_c	SF-36 domain Emotional well-being (integer)
rvit_c	SF-36 domain Energy/fatigue (integer)
rpain_c	SF-36 domain Pain (float)
rgenh_c	SF-36 domain General health (integer)
rhchange_c	SF-36 domain Health change (integer)
Follow-Up interview 1 month after discharge from hospital	
geradh4_FUI_medication_change	Follow-Up I Item, Change of medication since discharge from hospital (string, yes/no)
geradh6_FUI_medication_change_by_whom	Follow-Up I Item, Change of medication issued by whom? (string, physician, patient without consulting physician, other)
geradh7_FUI_medication_change_reason	Follow-Up I Item, reason for change of medication (string, new indication, no effect, side effects, polymedication (too many prescriptions), other)
Follow-Up interview 12 months after discharge from hospital	
geradh4_FU2_medication_change	Follow-Up II Item, Change of medication in the last year?

	(string, yes/no)
geradh6_FU2_medication_change_by_whom	Follow-Up II Item, Change of medication issued by whom? (string, physician, patient without consulting physician, other)
geradh7_FU2_medication_change_reason	Follow-Up II Item, reason for change of medication (string, new indication, no effect, side effects, polymedication (too many prescriptions), other)
sams_1_FU	Follow-Up II SAMS Item 2, Do you know the reason for taking your medication? integer, range 0-4, 0 = for none, 4 = for all
sams_2_FU	Follow-Up II SAMS Item 2, Do you know the dosages of your medication? integer, range 0-4, 0 = for all, 4 = for none
sams_4_FU	Follow-Up II SAMS Item 4, Do you take your medication regularly? integer, range 0-4, 0 = all, 4 = none
sams_8_FU	Follow-Up II SAMS Item 8, Do you stop taking your medication when you feel better? integer, range 0-4, 0 = never, 4 = most of the time
sams_11_FU	Follow-Up II SAMS Item 11, If you think you have side effects due to of the medications (such as tremors, nausea etc.), do you reduce the dose without consulting a doctor? integer, range 0-4, 0 = never, 4 = most of the time
sams_12_FU	Follow-Up II SAMS Item 12, If you think you have side effects due to of the medications (such as tremors, nausea etc.), do you not take the medication for a while, i.e. take a break? integer, range 0-4, 0 = never, 4 = most of the time
sams_13_FU	Follow-Up II SAMS Item 13, If you feel you have to take too many, do you stop taking those medications you consider to be less important than the others without consulting your doctor? integer, range 0-4, 0 = never, 4 = most of the time
sams_14_FU	Follow-Up II SAMS Item 14, If you forget or omit your medication, do you forget it in the morning? integer, range 0-4, 0 = never, 4 = most of the time
sams_15_FU	Follow-Up II SAMS Item 15, If you forget or omit your medication, do you forget it at noon? integer, range 0-4, 0 = never, 4 = most of the time
sams_16_FU	Follow-Up II SAMS Item 16, If you forget or omit your medication, do you forget it in the evening? integer, range 0-4, 0 = never, 4 = most of the time
SF12_1	SF-12 general health (integer, 1 = excellent, 2 = very good, 3 = good, 4 = fair, 5 = poor)
SF12_2	SF-12 limited in moderate activities (integer, 1 = limited a lot, 2 = limited a little, 3 = not limited at all)
SF12_3	SF-12 limited in climbing several flights of stairs

	(integer, 1 = limited a lot, 2 = limited a little, 3 = not limited at all)
SF12_4	SF-12 accomplishing less (physical) (integer, 1 = yes, 2 = no)
SF12_5	SF-12 limited in the kind of work or other activities (physical) (integer,
SF12_6	SF-12 accomplishing less (emotional) (integer, 1 = yes, 2 = no)
SF12_7	SF-12 less carefully (emotional) (integer, 1 = yes, 2 = no)
SF12_8	SF-12 interference of pain with work (integer, 1 = not at all, 2 = a little bit, 3 = moderately, 4 = quite a bit, 5 = extremely)
SF12_9	SF-12 felt calm and peaceful (integer, 1 = all of the time, 2 = most of the time, 3 = a bit of the time, 4 = some of the time, 5 = a little bit of the time, 6 = none of the time)
SF12_10	SF-12 had lot of energy (integer, 1 = all of the time, 2 = most of the time, 3 = a bit of the time, 4 = some of the time, 5 = a little bit of the time, 6 = none of the time)
SF12_11	SF-12 felt downhearted and blue (integer, 1 = all of the time, 2 = most of the time, 3 = a bit of the time, 4 = some of the time, 5 = a little bit of the time, 6 = none of the time)
SF12_12	SF-12 time of interference with social activities integer, 1 = all of the time, 2 = most of the time, 3 = some of the time, 4 = a little bit of the time, 5 = none of the time)

References

1. Beck, A., Steer, R. & Brown, G. Beck depression inventory—second edition: manual. *San Antonio: The Psychological Corporation* **4**, 561-571 (1996).
2. Hautzinger, M., Keller, F. & Kühner, C. *Beck-Depressions-Inventar: Revision*. (Harcourt test services, 2006).
3. Nasreddine, Z. S. *et al.* The Montreal Cognitive Assessment, MoCA: a brief screening tool for mild cognitive impairment. *J Am Geriatr Soc* **53**, 695-699, doi:10.1111/j.1532-5415.2005.53221.x (2005).
4. Podsiadlo, D. & Richardson, S. The timed "Up & Go": a test of basic functional mobility for frail elderly persons. *J Am Geriatr Soc* **39**, 142-148, doi:10.1111/j.1532-5415.1991.tb01616.x (1991).
5. John, O. P., Donahue, E. M. & Kentle, R. L. *The Big Five Inventory--Versions 4a and 54*. (University of California, Berkeley, Institute of Personality and Social Research, 1991).
6. Rammstedt, B. The 10-item Big Five Inventory: Norm values and investigation of sociodemographic effects based on a German population representative sample. *European Journal of Psychological Assessment* **23**, 193-201, doi:10.1027/1015-5759.23.3.193 (2007).
7. Schmidt, K. *et al.* Autonomy support in primary care—validation of the German version of the Health Care Climate Questionnaire. *Journal of Clinical Epidemiology* **65**, 206-211, doi:10.1016/j.jclinepi.2011.06.003 (2012).
8. Gremigni, P. Validation of the Health Care Communication Questionnaire (HCCQ) to measure patients evaluation of hospital personnel communication skills. *Patient Education and Counseling* **71**, 57-64 (2008).
9. Ware, J. E., Jr. & Sherbourne, C. D. The MOS 36-item short-form health survey (SF-36). I. Conceptual framework and item selection. *Med Care* **30**, 473-483 (1992).
10. Ware, J., Jr., Kosinski, M. & Keller, S. D. A 12-Item Short-Form Health Survey: construction of scales and preliminary tests of reliability and validity. *Med Care* **34**, 220-233, doi:10.1097/00005650-199603000-00003 (1996).
11. Franke, G. H., Nentzl, J. & Jagla-Franke, M. SAMS. Stendal Adherence to Medication Score. Testmanual. www.psychometrikon.de, doi:10.6099/1000372 (2020).