REF	COUNTRY	AIM	CONDITIONS OF FOCUS	PARTICIPANT CHARACTERISTICS	TRIAL COMPARATORS	ATTRITION BEHAVIOUR	DATA COLLECTION METHODS
Nakash et al 2007 [31]	UK	To examine factors affecting response and non-response from the clinical trial participant's perspective.	Severe ankle sprains	8 non-retainers. Age and gender of non-retainers unclear although of the 22 included in this study, 11 were male; 11 female, aged from 16 to 62 yrs (mean age 34 yrs). A purposive sample was sought to represent the diversity of trial participants in age, sex, level of education, occupation and type of ankle support.	Different mechanical supports	Non-response to postal questionnaire follow-up. 8 had not responded to at least one of their follow up questionnaires.	Semi- structured interviews
Nicholas et al 2010 [21]	Australia	To identify participants' reasons for non-adherence to, and attrition from the online intervention	Newly diagnosed bipolar disorder	39 non-retainers. 22 female; 17 male. 20 were aged less than 30 yrs, 14 were married, 29 were tertiary educated and 24 in full time employment. Participants from all 3 study groups were interviewed, 16 from the unsupported intervention group (BEP), 9 from the supported BEP intervention group (BEP+IS), and 14 from the minimal	1 of 2 active interventions (online psycho-education program either alone or with email support from informed supporters) or an attention control condition (online information about bipolar disorder presented in text as bullet points). Both active interventions and control contained 'workbook' activities.	Cessation of therapy sessions and/or non-completion of some or all intervention workbooks; non-completion of some or all control workbooks.	Semi- structured interviews

				information control group.			
Postel et al 2010 [22]	Netherlands	To evaluate an e- therapy program with active therapeutic involvement for problem drinkers. Reasons for drop out were also investigated via a 'dropout' questionnaire consisting mainly of open questions.	Problem drinking	40 non-retainers. No gender or age details provided specifically for non-retainers, although 53.8 % of trial participants were female, mean age 45.3 yrs. Authors also state that in the control group more non-responders than responders were male.	3 month e-therapy programme (consisting of a structured 2 part online treatment programme with asynchronous therapist contact via the internet only) or a waiting list control group (receiving 'no reply' email messages once every 2 weeks). Participants completed online self-report questionnaires at baseline and at 3 months follow up (control group) or at posttreatment, which was approximately 3 months (e therapy group). Weekly alcohol consumption was assessed by a 7 day retrospective drinking diary.	Non-completion of treatment sessions and/or follow-up questionnaires. Non-retention was defined as anyone who did not complete the 3 month assessment. Dropouts in the e therapy group did not complete all 12 treatment sessions: 9 assignments and 3 assessments.	A 'dropout' questionnaire consisting mainly of open questions.
Eborall et al 2011 [30]	UK	To explore people's explanations for declining to participate in the trial, or, having begun the trial, stopping the trial medication	Asymptomatic atherosclerosis	17 non-retainers. No gender or age details provided specifically for non-retainers (as opposed to those who declined to consent), but states that total sample (n=28) had a mean age of 65.2 yrs; 19 were female; wide	Aspirin (100mg daily) or placebo for a mean duration of 8.2 yrs.	Cessation of trial medication (unclear whether active medication or placebo). Nonadherence with study medication throughout the trial was 40%; 15% took their medication for less than 6 months.	Semi- structured interviews (n=11) and one focus group (n=6)

				range of socioeconomic backgrounds.			
Wells et al 2011 [23]	USA	To explore low-income, minority cancer patient perspectives about not adhering or dropping out of depression treatment.	Depression and cancer	20 non-retainers. No gender or age details provided specifically for non-retainers included in the qualitative study but trial non-retainers were described as predominantly female, foreign born, unmarried, unemployed, and older than 50 yrs.	Intervention or usual care. Intervention was an individualised stepped care depression programme provided by a cancer depression clinical specialist in collaboration with a study psychiatrist. Patients in the intervention group were offered antidepressant medication and/or problem solving treatment (PST).	Cessation of problem solving treatment sessions and/or antidepressant medication. PST dropouts were defined as patients who had fewer than 4 PST sessions. PST dropouts included those who initially agreed to be randomised to the intervention, but thereafter had either verbally declined treatment or did not show up for the therapy appointments. This included patients who had refused some sessions, but agreed to remain in the study for outcome interviews. Patients receiving antidepressant medication were dropouts if they discontinued treatment within 30 days.	Semi- structured interviews
Shilling et al 2011 [27]	UK	To investigate recruitment processes across a range of clinical trials and from the perspective of parents, young people and practitioners to identify strategies to	Trial 1: Neuro- development disorders Trial 2: Osteopenia	3 non-retainers from 2 of the 4 included trials. In trial 1, participants were 11-14 yrs; In trial 2, participants were 4-18 yrs (although demographic details of non-retainers unclear).	Trial 1: Melatonin versus placebo (over 12 week treatment period). Families made 3 additional hospital visits, and received 4 home visits by the research nurse and 3 telephone calls.	Cessation of trial medication (unclear whether active medication or placebo)	Semi- structured interviews (with the young people and/or their parents).

Sanders 2012 [28]	UK	improve recruitment and its conduct across a spectrum of trials of medicines for children. NB: This was a monograph that included the reporting of a range of trials, two of which reported data on non-retainers and were included in this meta-ethnography. To explore barriers to participation and adoption of telehealth and tele-care from the perspective of people who declined to participate or withdrew from the trial	Diabetes, COPD, heart failure, or social care needs	3 non-retainers (all in the intervention arm), 1 female (diabetes); 2 male (1 x COPD; 1 x diabetes + heart and lung problems. 73-85 yrs.	Trial 2: bisphosphonate risedronate or vitamin D analogue 1 — alphahydroxychol ecalciferol versus placebo (1 yr treatment period). Young people were seen 7 times over the year. This was timed to coincide with routine clinic visits where possible. Blood samples were also taken (same time as routine visits) and they gave regular urine samples and had 3 x-ray scans and 2 bone radiographs. The RCT was a cluster design with GP practices being randomised to receive access to telehealth or telecare for their populations. Participants randomised to the control arm were offered telehealth or telecare at the end of the 12mth trial. Tele-health equipment included a monitor unit via which recordings from peripheral devices were uploaded to a monitoring centre. The monitoring centres prioritised and	Cessation of use of telehealth equipment or tele care devices (defined as withdrawing from the trial after joining the intervention arm).	Semi- structured interviews
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Johansson	Sweden	To explore	Generalised	7 non-retainers, 6	tailored response according to need based on the information received. Telecare interventions also varied according to assessed need but included various sensors to detect gas, water overflow, falls and movement around the property. Such sensors would trigger alarms direct to a monitoring centre if anything abnormal was detected, allowing emergency intervention.	Non-adherence to internet	Semi-
2015 [24]		participants' experiences of non- adherence to internet-delivered psychological treatment	anxiety disorder	female; 1 male; mean age 39.3 yrs	internet delivered psychological treatment, with weekly support from a licensed clinical psychologist. The treatment consisted of 8 weekly self-help modules of text, audio and illustrations, averaging 21 pages per module. All modules contained a homework assignment that needed to be answered and sent to the guiding therapist.	delivered psychological treatment. Non-adherence was defined as completing at least 1 and no more than 7 treatment modules (out of 8 in total).	interviews

					No details re. control group given.		
Sari 2017 [25]	Denmark	To investigate perceived barriers to participate in an exercise intervention among alcohol use disorder patients, who dropped out from the Healthy Lifestyle Study	Alcohol Use Disorder	17 non-retainers, 4 female; 13 male; age 30-68 yrs. Nine were allocated to the group intervention, 7 were allocated to the individual intervention and one were allocated to the control group.	Treatment as-usual or one of two 6-month interventions that were selected on the basis of existing evidence-based studies. In the first intervention group, participants exercised individually after receiving basic instructions and a training program for home use. In the second intervention group, several patients exercised together with two instructors in 60-min training sessions twice a week. Running was the specific exercise form for both groups in the study.	Drop out was indicated when participants directly reported to project personnel or when they ceded participation without contact. Their length of participation before dropout varied from 2 days to 12 weeks.	Semi- structured interviews
Fernandez -Alvarez 2017 [26]	Spain	To conduct a qualitative analysis of the subjective experience of a sample of patients who dropped out of a transdiagnostic Internet based treatment for emotional disorders.	Obsessive- compulsive disorder; Agoraphobia;So cial Anxiety Disorder; Major Depressive Disorder; Generalized Anxiety Disorder	10 non-retainers, 8 female; 2 men, age 21-59 yrs. Unclear whether control or treatment arm.	The protocol consists of 12 modules, and participants are encouraged to complete one module per week. Two RCTs are being conducted using the protocol. The purpose of one of the RCTs is to analyze the effectiveness of a transdiagnostic IBT compared to treatment as usual as provided in the Spanish public mental	Individuals who dropped out after completing a minimum of 3 modules.	Semi- structured interviews

					health care system. Both treatment protocols are web-based, self- administered treatments		
					with minimum contact/support from a		
					therapist that consists in a weekly phone call lasting 5 to 10 min to each		
					participant. A non-human support is delivered		
					through two weekly mobile phone text		
					messages that are automatically sent and aim to remind the		
					participants of the importance of reviewing		
					the modules as well as doing the homework		
					tasks.		
Henshall 2018 [29]	UK	To determine the overall experiences of newly diagnosed adults with T1D in an	Newly diagnosed Type 1 diabetes	4 non-retainers; 2 female; 2 male age 19 - 55 yrs (2 in intervention arm/2 in	Conventional treatment or exercise, stratified on beta cell function and fitness. The exercise group	No specific details given other than 'those who withdrew before the end of the study'	Semi- structured interviews
		exercise study, and to understand issues that influence the		control arm)	were encouraged to increase their level of activity to a minimum of		
		retention of trial participants in such			150 minutes of moderate to vigorous intensity		
		studies			exercise per week, aiming for 240 minutes per week		
					of exercise for 12 months.		