Web Appendix 1: Interview schedule

**Background / introduction to the interview**

I am interested in attrition from randomised trials. We define attrition as incomplete ascertainment of the primary outcome, but will subsequently use the term “loss to follow-up”. I want to explore trialist’s opinions on if and when loss to follow-up has been a problem in their experience and the strategies they may have used to deal with or to prevent loss to follow-up. I also want to find out more about trialists preferred strategies for preventing loss to follow-up.

**Topic guide questions**

1. **Can you tell me about recent trials you have worked on?**
   - Were there any with high follow-up?
   - Were there any with low follow-up?

2. **What do you think are the factors that lead to loss to follow-up in trials?**
   - Why do you think it can be difficult to keep participants in randomised trials?

3. **What are the factors that lead to retention in randomised trials?**

4. **What strategies to increase follow-up have been successful for you in trials you have worked on?**
   - Why do you think these have worked?
   - What strategies have been unsuccessful?
   - Why have these not worked?

**Decision making around strategies used to reduce loss to follow-up**

1. When do you perceive loss to follow-up to be a problem?
2. How do you decide which strategies to improve follow-up work best?
3. How did/ do you implement the strategies to improve follow-up that worked best?
4. How is loss to follow-up monitored in trials you have worked on?
5. Who deals with loss to follow-up when it presents?

**Impact of research governance**

1. What do you feel about using incentives to keep participants in trials?
2. Have you had any experience with ethics committees?
3. What do you feel about ethics committees asking about payments or giving other incentives to participants?
4. Has ethics committees approach to payments affected any trials you have worked on in anyway?

Ask this next question at the end of the interview

These are the strategies to reduce attrition/ improve retention identified by the Cochrane review.
Show participant each card separately (See below). Then ask the following questions for each strategy discussed:

1. Have you used these?
2. What do you think about using this strategy?
3. Might you have considered using this strategy in your trial?
4. What could be the advantages of using the strategy?
5. What could be the disadvantages of using this strategy?

Each card shown individually

**Card no 1**
Communication strategies. e.g. email, telephone, text messages, letters signed by different study personnel, type of delivery - e.g. post 1st 2nd class, or recorded delivery, type of envelope used for response.

**Card no 2**
Incentives to either participants or trialists e.g. gifts pens, pins, monetary incentives, offers of incentives, vouchers.

**Card no 3**
Methodological strategies blind versus un blind trials.

**Card no 4**
Different length of questionnaire: Short versus long.

**Card no 5**
Using case management. Having trial assistants manage participant follow-up, for example arranging transport and services to enable participants to keep trial follow-up appointments.

**Card no 6**
Motivational/educational strategies. Such as arranging workshops to give participants information about goal setting and time management.