

Supplementary Table 1. Pooled estimates of the final prediction models for treatment success after stand-alone internet-based VR at six months follow-up (stand-alone participants; n=98).

	Predictors	Regression coefficient	Odds ratio (95% confidence interval)	p-value
‘Successful treatment’ 1: Clinically relevant improvement in VSS-SF score				
	Living alone	-0.95	0.39 (0.15 to 1.00)	0.05
‘Successful treatment’ 2: Clinically relevant improvement in DHI score				
	Living alone	1.02	2.79 (1.07 to 7.27)	0.04
	Age	-0.05	0.95 (0.90 to 1.00)	0.06
‘Successful treatment’ 3: Clinically relevant improvement in both VSS-SF and DHI score				
	NO VARIABLES IN FINAL MODEL			

VR = vestibular rehabilitation; VSS-SF = vertigo symptom scale short-form; DHI = dizziness handicap inventory

*Age was analysed as a linear predictor in all models, spine regression modelling revealed no non-linear relationship of age with the outcome.

Supplementary Table 2. Pooled estimates of the final prediction models for treatment success after blended internet-based VR at six months follow-up (blended participants; n=104).

	<u>Predictors</u>	<u>Regression coefficient</u>	<u>Odds ratio (95% confidence interval)</u>	<u>p-value</u>
‘Successful treatment’ 1: Clinically relevant improvement in VSS-SF score				
	Living alone	-1.06	0.35 (0.13 to 0.95)	0.04
	Presence of a psychiatric disorder	1.12	3.05 (0.77 to 12.14)	0.11
‘Successful treatment’ 2: Clinically relevant improvement in DHI score				
	Level of education	-0.85	0.43 (0.18 to 0.99)	0.05
‘Successful treatment’ 3: Clinically relevant improvement in both VSS-SF and DHI score				
	Time since onset	-0.88	0.42 (0.18 to 0.96)	0.04

VR = vestibular rehabilitation; VSS-SF = vertigo symptom scale short-form; DHI = dizziness handicap inventory

*Age was analysed as a linear predictor in all models, spine regression modelling revealed no non-linear relationship of age with the outcome.

Supplementary Table 3. Internal validation and performance of the final prediction models for treatment success after stand-alone internet-based VR (stand-alone participants; n=98) and blended internet-based VR (blended participants; n=104).

Stand-alone internet-based VR (n=98)	Hosmer-Lemeshow statistic (p-value)	Shrinkage factor	Corrected median AUC
'Successful treatment' 1: Clinically relevant improvement in VSS-SF score	0.69	0.59	0.53
'Successful treatment' 2: Clinically relevant improvement in DHI score	0.92	0.61	0.58
'Successful treatment' 3: Clinically relevant improvement in both VSS-SF and DHI score	0.99	0.49	0.42
Blended internet-based VR (n=104)			
Blended internet-based VR (n=104)	Hosmer-Lemeshow statistic	Shrinkage factor	Corrected median AUC
'Successful treatment' 1: Clinically relevant improvement in VSS-SF score	0.93	0.61	0.56
'Successful treatment' 2: Clinically relevant improvement in DHI score	0.87	0.61	0.53
'Successful treatment' 3: Clinically relevant improvement in both VSS-SF and DHI score	0.38	0.61	0.54

VR = vestibular rehabilitation; VSS-SF = vertigo symptom scale short-form; DHI = dizziness handicap inventory