

Author, year	Country	Interventions	Study design	Perspective	Time horizon	Discounting %	Outcomes
Mazari, 2013	British	PTA (n=60) SEP (n=60) Combined treatment (PTA + SEP) (n=58)	Trial	Healthcare provider's perspective	12 months	No discounting	- SF-6D Health Utilities index (calculated from the SF-36). - QALY's (calculated with the AUC) - Costs (calculated using National Health Service 2009–2010 payment-by-results tariffs and the National Institute for Health Research Clinical Research Network Investigation pricing index, and adjusted for reinterventions) - Costs per QALY and incremental costs
Fahkry, 2021 <i>Cost-effectiveness study of the ERASE study</i>	The Netherlands	ER + SET (n=106) SET alone (n=106)	Trial	Societal perspective (health care and non-health care costs) and health care perspective (health care costs)	12 months	No discounting	- Cumulative costs per patient (using in-hospital resource utilization data and cost questionnaires) - QALYs (estimated with the EuroQoL-5D) - ICERs for the health care and societal perspective
Van Reijen, 2022 <i>Cost-effectiveness study of the SUPER studie</i>	The Netherlands	ER (n=111) SET (n=95)	Trial	Restricted societal perspective	12 months	No discounting	- Health status and HRQoL (measured with the EQ5D-3L and VascuQoL-25-NL) - QALYs - Treatment costs (taken from the Dutch Cost Manual of The Netherlands Care Institute or the Amsterdam University Medical Centre hospital ledger) - Travel costs (distance between the patients' home address and practice) - Unit costs (based on the base year 2015)
Van den Houten, 2016	The Netherlands	ER vs SET Hypothetical cohort (n=100,000)	Model	Dutch healthcare payer's perspective	5 year	3 and 5%	Costs, utilities and transition probabilities (derived from the existing medical literature and original patient data from two resources: the EXITPAD trial and the CETAC study)
Spronk, 2008	The Netherlands	ER (n=76) SET (n=75)	Trial	Societal perspective	12 months	3% per annum	- Quality of life (assessed using a self-administered questionnaire, consisting of the EuroQoL-5D and the dimension 'physical functioning' of the SF-36) - QALYs based on the EQ-5D - Health care and non-health care costs (assessed according to national guidelines for cost analyses)
Reynolds, 2014 <i>Cost-effectiveness study of the CLEVER study</i>	US	SET + OMC ST + OMC OMC alone N=98 in total	Trial AND Model based on trial results	US societal perspective	18 months (trial) and 5 years (model)	3% per year (Markov model)	- Costs (assessed using the resource-based methods and hospital billing data) - QALYs (estimated using the EQ-5D)

Table 1. Characteristics of the included cost-effectiveness studies (n=6)