

Supplementary figure 2: Cost-Effectiveness Acceptability Curves (CEACs)

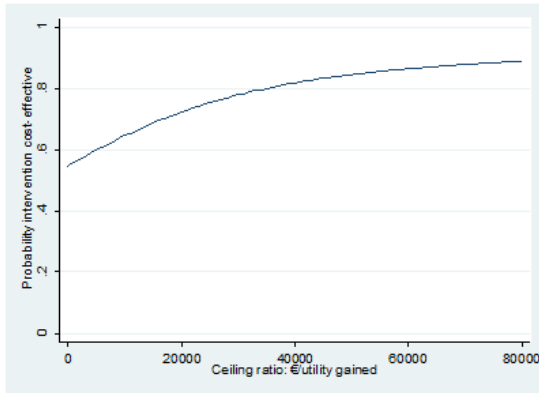


Figure 2a: CEAC indicating the probability of the TCM being cost-effective in comparison with usual care for different values (€) of willingness to pay per utility gained (EQ5D-3L).

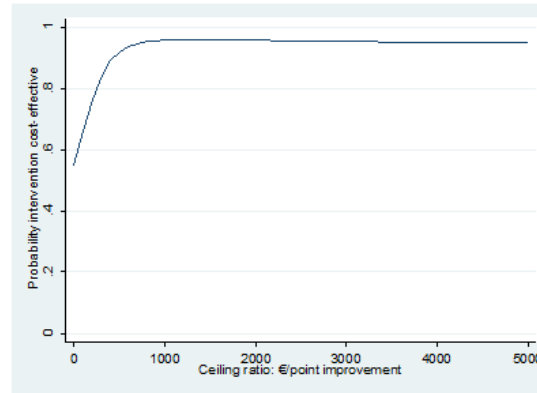


Figure 2b: CEAC indicating the probability of the TCM being cost-effective in comparison with usual care for different values (€) of willingness to pay per 1-point improvement in disease-specific HR-QOL (DSQOL-OA).

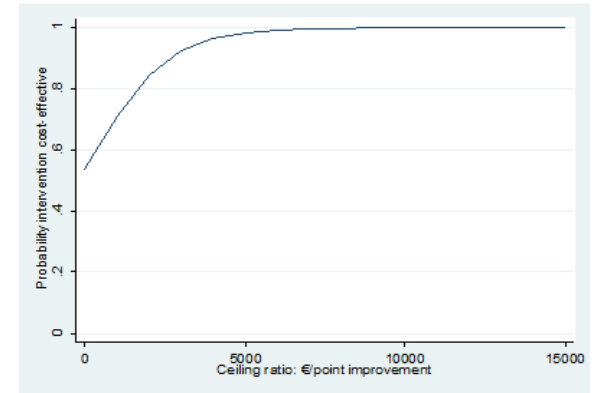


Figure 2c: CEAC indicating the probability of the TCM being cost-effective in comparison with usual care for different values (€) of willingness to pay per 1-point improvement in pain (NPRS).

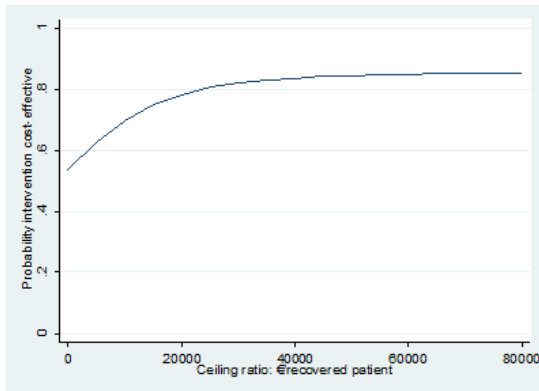


Figure 2d: CEAC indicating the probability of the TCM being cost-effective in comparison with usual care for different values (€) of willingness to pay per recovered patient.

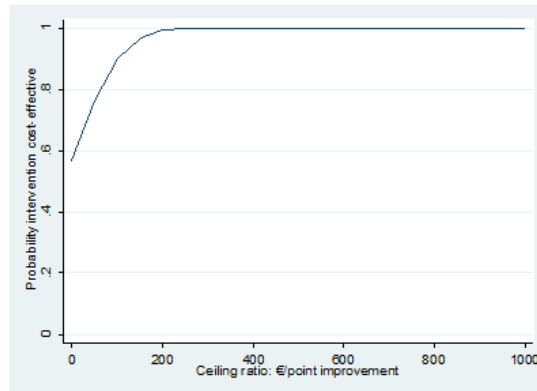


Figure 2e: CEAC indicating the probability of the TCM being cost-effective in comparison with usual care for different values (€) of willingness to pay per point improvement in functional status (PSFS).