**SUPPLEMENTARY DIGITAL CONTENT 1**

**TABLE S1.** Overview of the Patient-Reported Outcomes used to Assess Workplace Productivity and Functioning

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| **Work Limitations Questionnaire (WLQ)** | |
| **Objective** | To assess the impact of health problems, including major depressive disorder, on at-work performance and productivity (presenteeism)1,2 |
| **Rater** | Patient |
| **Recall period** | 2 weeks |
| **Domains** | Time management (five items assessing difficulty in working the required hours and managing time and scheduling demands)  Physical demands (six items assessing ability to perform work-related physical activities)  Mental-interpersonal demands (nine items assessing difficultly with cognitively demanding tasks and interactions with co-workers)  Output demands (five items assessing difficulty with handling the workload and meeting deadlines) |
| **Scoring** | Items are rated on a scale from 1 (all of the time) to 5 (none of the time)  Domain scores range from 0% (limited none of the time) to 100% (limited all of the time)  The WLQ productivity loss score is derived from a weighted sum of the scores from the four WLQ domains (known as the WLQ Index Score), which is then converted to generate a percentage productivity loss estimate relative to healthy controls (range 0–25%), with higher scores indicating more severe impairment |
| **Reliability** | Cronbach’s α, ≥0.90 in patients with asthma, gastrointestinal diseases, psychiatric disorders (depression and/or generalized anxiety), and epilepsy1 |
| **Work Productivity and Activity Impairment (WPAI) questionnaire** | |
| **Objective** | To assess the impact of a health problem and symptom severity on work productivity3 |
| **Rater** | Patient |
| **Recall period** | 7 days |
| **Domains** | Number of hours missed due to the health problem  Number of hours missed due to other reasons  Hours actually worked  Degree to which the health problem affected productivity while working  Degree to which the health problem affected non-work daily activities |
| **Scoring** | Based on validated algorithms, the WPAI yields four subscores, with higher scores indicating greater impairment:   * Absenteeism (percent work time missed) * Presenteeism (percent time impaired at work) * Work productivity loss (percent overall work impairment) * Percent activity impairment |
| **Reliability** | Evaluation of internal consistency reliability not applicable, as responses are obtained using a single construct (productivity at work)4 |
| **Sheehan Disability Scale (SDS)** | |
| **Objective** | To assess the degree of functional impairment on work/school, social, and family life5,6 |
| **Rater** | Patient |
| **Recall period** | 7 days |
| **Domains** | Work/school  Social life/leisure  Family life/home responsibilities |
| **Scoring** | The degree of impairment for each domain is rated on a scale of 0–10, with higher values indicating greater impairment  Scores for the individual domains can be combined to generate a measure of global functional impairment that ranges from 0 (unimpaired) to 30 (highly impaired)  Functional remission is defined as an SDS total score of ≤6 |
| **Reliability** | Cronbach’s α, 0.83–0.89 in primary care patients, including those with depression8 |
| **World Health Organization Disability Assessment Schedule 2.0 (WHODAS 2.0)** | |
| **Objective** | Generic instrument to assess functioning and disability that can be used across all diseases, including mental health disorders9 |
| **Rater** | Patient |
| **Recall period** | 30 days |
| **Domains** | Cognition (understanding and communicating)  Mobility (ability to move and get around)  Self-care (hygiene, dressing, eating, and staying alone)  Interpersonal actions (getting along with others)  Life activities (work, domestic, and leisure activities)  Participation (joining in community activities) |
| **Scoring** | Each of the 12 items is scored from 0 (no difficulty) to 4 (extreme difficulty/cannot do) to provide a global disability score ranging from 0 (no disability) to 100 (full disability)  There is no agreed score for identifying good health  In a 2016 Canadian study, the mean WHODAS score in an overall community population was 14.2 (95% confidence interval, 14.1 to 14.3)10 |
| **Reliability** | Cronbach’s α, 0.98 in patients with mental health disorders11 |

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