**Additional file 1. Intervention details according to STRICTA 2010 checklist**

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| **Item** | Detail | Contents |
| **Moxibustion rationale** | (a) Style of acupuncture | (a) Traditional Korean medical moxibustion |
| (b) Reasoning for treatment provided, based on historical context, literature sources, and consensus methods, with references where appropriate | (b) Literature review, textbook and experts’ consensus |
| (c) Extent to which treatment was varied | (c) Fixed acupoints, individualized sessions |
| **Details of moxibustion** | (a) Number of moxibustion performed per subject per session (mean and range where relevant) | (a) 1 to 7 pieces |
| (b) Names (or location if no standard name) of points used (uni/bilateral) | (b) Median CV4, Bilateral SP6, Bilateral LR3 |
| (c) Depth of insertion, based on a specified unit of measurement, or on a particular tissue level | (c) N-A |
| (d) Response south (eg. De qi or muscle twitch response) | (d) Warm sensation |
| (e) Needle stimulation (eg. Manual, electrical) | (e) N-A |
| (f) Moxibustion retention time | (f) Total 30 minutes |
| (g) Moxibustion type (diameter, length, and manufacturer or material) | (g) mini-moxa of 5\*5\*15 mm; moxa cone of 20\*20\*10 mm |
| **Treatment regimen** | (a) Number of treatment sessions | (a) 8-12 sessions |
| (b) Frequency and duration of treatment sessions | (b) 2-3 times per week; For 4 weeks |
| **Other components of treatment** | (a) Details of other interventions administered to the moxibustion group (eg, acupuncture, cupping, herbs, exercises, lifestyle advice) | (a) Lifestyle advice |
| (b) Setting and context of treatment, including instructions to practitioners, and information and explanations to patients | (b) Unnecessary conversation was prohibited.  Lifestyle advice was offered according to OAB guideline |
| **Practitioner background** | (a)Description of participating acupuncturists (qualification or professional affiliation, years in acupuncture practice | (a) Traditional Korean Medical Doctor who has more than 2-year clinical experience performed the intervention under supervision of Korean internal medicine professor who has more than 10-year clinical experience |
| **Control or comparator interventions** | (a) Rationale for the control or comparator in the context of the research question, with sources that justify this choice | (a) Watchful waiting is recommended for OAB patients. We tried to manage their symptoms as well as to set control group for comparison with moxibustion. |
| (b) Precise description of the control or comparator. If sham acupuncture or any other type of acupuncture-like control is used, provide details as for Items 1 to 3 above. | (b) Control group will be treated with the moxibustion after 4 weeks from randomization. |

N-A, not-applicable; OAB, overactive bladder

**Additional file 2. Effects of treatment with moxibustion (PP analysis)**

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|  |  | Changes between baseline (T1) and T2 | | | |  | Changes between T2 and T3 | | |  | Changes between T1 and T3 | |
|  |  | Baseline | After 4-wks | Mean change  *(p-value a)* | MD [95% CI],  *(p-value b)*  Hedge’s *g* |  | After 8-wks | Mean change  *(p-value a)* | MD [95% CI],  *(p-value b)*  Hedge’s *g* |  | Mean change*(p-value a)* | MD [95% CI],  *(p-value b)*  Hedge’s *g* |
| OAB-V8 | Gr. A  (n=14) | 14.57±6.79 | 11.07±5.68 | -3.50±7.07  *(p=.1670)* | 2.70 [-1.72, 7.12]  *(p=.4282)* |  | 8.57±4.55 | -2.50±4.50  *(p=.3213)* | -4.50 [-11.07, 2.07]  *(p=.2404)* |  | -6.00±6.25  (p=.0140*\**) | -1.80 [-8.22, 4.62]  *(p=.9298)* |
| Gr. B  (n=10) | 16.00±8.63 | 15.20±8.19 | -0.80±2.97  *(p=.8203)* | -0.453 |  | 8.20±6.44 | -7.00±8.78  *(p=.0340\*)* | 0.659 |  | -7.80±8.97  (p=.0253*\**) | 0.232 |
| OAB  SS | Gr. A  (n=14) | 7.14±3.03 | 4.14±2.44 | -3.00±2.00  *(p=.0275\*)* | 3.2 [1.63, 4.77]  *(p=.0005\*)* |  | 4.57±3.11 | 0.43±2.24  *(p=.7267)* | -3.02 [-5.07, -0.99]  *(p=.0052\*)* |  | -2.57±3.23  (p=.0461*\**) | 0.17 [-2.65, 2.99]  *(p=.9056)* |
| Gr. B  (n=10) | 6.20±2.90 | 6.40±2.76 | 0.20±1.55  *(p=.8188)* | -1.689 |  | 3.80±2.30 | -2.60±2.55  *(p=.0263\*)* | 1.233 |  | -2.40±3.37  (p=.0419*\**) | -0.050 |
| VAS | Gr. A  (n=14) | 57.93±19.55 | 33.43±23.93 | -24.50±24.73  *(p=.0035\*)* | 20.10 [-0.15, 40.35]  *(p=.0350\*)* |  | 27.71±22.79 | -5.71±15.10  *(p=6126)* | -11.59 [-26.82, 3.65]  *(p=.1429)* |  | -30.21±19.45  (p=.0011*\**) | 8.51 [-10.66, 27.69]  *(p=.3193)* |
| Gr. B  (n=10) | 60.30±24.05 | 55.90±19.78 | -4.40±21.81  *(p=.4494)* | -0.823 |  | 38.60±24.70 | -17.30±20.99  *(p=.1303)* | 0.631 |  | -21.70±25.93  (p=.0637) | -0.368 |
| DITI | Gr. A  (n=14) | 29.89±3.30 | 28.50±1.60 | -1.39±3.68  *(p=.6132)* | 1.40 [-0.89, 3.69]  *(p=.3798)* |  | 28.73±0.99 | 0.24±1.08  *(p=.9085)* | -0.73 [-1.67, 0.21]  *(p=.0404\*)* |  | -1.15±3.05  (p=.8542) | 0.67 [-1.29, 2.64]  *(p=.9533)* |
| Gr. B  (n=10) | 29.01±1.32 | 29.02±1.33 | 0.01±1.50  *(p=.7054)* | -0.453 |  | 28.53±0.94 | -0.50±1.11  (*p=.1735)* | 0.654 |  | -0.48±1.48  (p=.0000*\**) | -0.256 |

OAB-V8, OAB-validated 8-question awareness tool; OABSS, overactive bladder symptom scores; VAS, visual analog scale; DITI, Digital Infrared Thermal Imaging; MD, mean difference; T1, baseline; T2, 4-weeks after baseline; T3, 8-weeks after baseline; data are presented as mean±standard deviation, mean difference (95% CI), or Hedge’s *g* (0.2, small; 0.5, medium; 0.8, large; 1.2, very large; 2.0, huge); a , Wilcoxon signed rank test within each group; b, Mann–Whitney U test between two groups for the changes;