**Supplemental Digital Content 3**

**Methods**

*Sample size calculation*

Our interim analysis showed a significantly lower incidence of complications (33% versus 73%; *p*=0.0096) in patients in the prehabilitation group (*n*=21) than in patients in the usual care group (*n*=22). Although the significance (*p*-value) of this difference was not <0.0054, the difference was obvious and clinically very relevant. Moreover, patient inclusion was challenging. It took over three years to include half of the patients (43 patients) needed for the interim analysis. Therefore, we deliberated with the medical ethics committee about the repercussions of our interim analysis. The medical ethics committee proposed a new sample size calculation. Therefore, we recalculated our sample size with the hypothesis of a complication rate of 33% in the prehabilitation group and a complication rate of 73% in the usual care group, and now needed 27 patients in each group to detect statistically significant differences between groups (α of 0.0492, ß of 80%, taking a 10% dropout rate into account). If the interim analysis would have shown no or minimal difference (<10% on overall complications), the study would have stopped due to futility.