Table 5. Barriers to Adherence

		Investigator Reported Barriers		Patient Reported Barriers
Study Author	Data collection Method	Assumed barriers	Barriers Reported Based on Study Data	
Kaskutas, Powell 2013	Standardised telephone interviews	Not Discussed	Not Discussed	Difficulties carrying out functional daily activities such as taking care of baby, cooking and job involving keyboard work.
Kolmus et al 2012	Participant reported	Not Discussed	Not Discussed	Patients perceived splint no longer required, therefore removed by 6 weeks.
Loewenstein et al 2022	Not Clear	Correlation between adherence and financial burden of attending routine appointments. Authors also suggested a link between clinician empathy and adherence.	Not Discussed	Not Discussed
Mercurio et al 2023	Analysis of study data	Not Discussed	Correlations between female sex and adherence to the brace, and between adherence to the splint and the number of weeks it was worn, while no correlation emerged between adherence to the brace and functional and psychological results.	Not Discussed
Mottay 2020	Clinician focus groups	Link between patients' perception of injury being resolved and early splint removal. Correlation between decreased perception of injury severity and rehabilitation complexity and non-adherence. Language and comprehension of instructions also thought to be a barrier. Suggested link between the financial burden of attending appointments and non- adherence.	Not Discussed	Not Discussed

O'Brien 2010	Patient reported - qualitative interviews	Not Discussed	Not Discussed	Patients who did not perceive their injury to be significant were less likely to be adherent. Also reported that patients believed the outcome will be improved by being adherent to treatment.
O'Brien and Bailey 2011	Adherence based on a predetermined criterion, using a 3-point scale designed by Groth et al.	Some assumed barriers inferred related to adherence and attendance to clinical appointments, but not clearly discussed.	Not Discussed	Not Discussed
Roh et al 2016	Barriers identified from correlations between the quantitative data	Correlation between decreased occupational level, physical activity and psychological factors and non- adherence	Correlations between data and adherence, poor health literacy,	Not Discussed
Savaş and Aydoğan, 2022	Participants completed a questionnaire at 3 weeks	Not Discussed	Correlation between non- adherence and Beck's depression inventory score.	Difficulties with daily activities e.g using the bathroom, dressing, personal hygiene, grooming, eating, worship, housework, dressing kids, driving, using mobile phone, using remote control, working. Also reported not wanting to wear splint and ashamed of splint. Some patients reported that they did not care or believe in the splint benefit.
Silverio, Cheung 2014	Analysis of study data	Not Discussed	Correlation between being a smoker and non-adherence.	Not Discussed
Mortazavi et al 2023	Patient Diaries	Splint discomfort and stiffness	Not Discussed	Not Discussed
Weir et al 2023	Study data correlated with adherence	Not Discussed	Correlation between male sex and higher BMI	Not Discussed
Cole et al 2023	Semi-structured interviews and	Not Discussed	Not Discussed	Difficulties carrying out work duties, washing hands, holding mugs, dressing and writing.

photovoice	Some patients thought the splint
software	became grubby and did not like the
	appearance.
	Skin problems also reported due to
	moisture under splint.