



Figure S1. Acupuncture points for treatment group. Figure Legend: The Figure represent acupoint that are indicated to treat indigestion and indigestion related symptoms. The acupoints were: ST36 (Zusanli), ST37 (Shangjuxu), ST39 (Xiajuxu), PC6 (Neiguan), and LI4 (Hegu).

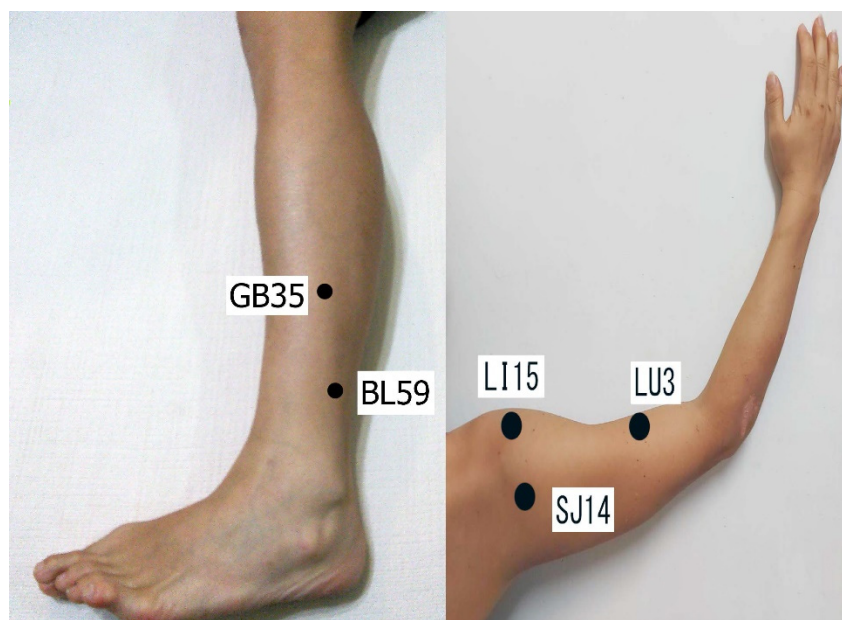


Figure S2. Acupuncture points for control group. Figure Legend: The Figure represent acupoint that are not indicated to treat indigestion or indigestion related symptoms. The acupoints were: LI 15 (Jiayu), SJ 14 (JianLiao), LU3 (Tianfu), GB35 (Yangjiao), BL 59 (Fuyang).

Table S1. Acupuncturist group speculation.

	Intervention group	Control group	P-value
Guess correct	12 (91.6%)	12 (91.6%)	1.000
Guess wrong	1 (8.3%)	1 (8.3%)	1.000

Supplementary Table 1: The table describes the percentage of acupuncturist correct and incorrect guess for each intervention. Data are presented as N and percentage values, * refers to significant P-value levels lower to 0.05.

Table S2. STRICTA 2010 checklist.

Item	Detail	Page
1. Acupuncture rationale	1a) Style of acupuncture (e.g. Traditional Chinese Medicine, Japanese, Korean, Western medical, Five Element, ear acupuncture, etc)	4
	1b) Reasoning for treatment provided, based on historical context, literature sources, and/or consensus methods, with references where appropriate	4,10, published protocol
	1c) Extent to which treatment was varied	4
2. Details of needling	2a) Number of needle insertions per subject per session (mean and range where relevant)	4
	2b) Names (or location if no standard name) of points used (uni/bilateral)	4
	2c) Depth of insertion, based on a specified unit of measurement, or on a particular tissue level	4
	2d) Response sought (e.g. <i>de qi</i> or muscle twitch response)	4
	2e) Needle stimulation (e.g. manual, electrical)	4
	2f) Needle retention time	4
	2g) Needle type (diameter, length, and manufacturer or material)	4
3. Treatment regimen	3a) Number of treatment sessions	4
	3b) Frequency and duration of treatment sessions	4
4. Other components of treatment	4a) Details of other interventions administered to the acupuncture group (e.g. moxibustion, cupping, herbs, exercises, lifestyle advice)	4
	4b) Setting and context of treatment, including instructions to practitioners, and information and explanations to patients	4
5. Practitioner background	5) Description of participating acupuncturists (qualification or professional affiliation, years in acupuncture practice, other relevant experience)	4
6. Control or comparator interventions	6a) Rationale for the control or comparator in the context of the research question, with sources that justify this choice	5
	6b) 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.	5

Note: This checklist, which should be read in conjunction with the explanations of the STRICTA items provided in the main text, is designed to replace CONSORT 2010's item 5 when reporting an acupuncture trial.

Citation: MacPherson H, Altman DG, Hammerschlag R, Youping L, Taixiang W, White A, Moher D; STRICTA Revision Group. Revised STAndards for Reporting Interventions in Clinical Trials of Acupuncture (STRICTA): extending the CONSORT statement. PLoS Med. 2010 Jun 8;7(6):e1000261