# Table 1: GRADE scoring for each comorbidity in the meta-analysis

| | Comorbidity | Risk of bias | Inconsistency | Imprecision | Indirectness | Publication bias | GRADE score |
|---|---|---|---|---|---|---|---|
| 1 | Any psychiatric comorbidity | 1 | 0 | 1 | 1 | 1 | 4 |
| 2 | Any mood disorder | 1 | 0 | 1 | 1 | 1 | 4 |
| 3 | Major Depressive Disorder | 1 | 0 | 1 (0 for paediatric) | 1 | 1 | 4 (3 for paediatric) |
| 4 | Dysthymia | 1 | 0 | 1 | 1 | 0 | 3 |
| 5 | Bipolar Disorder | 1 | 0 | 1 | 1 | 1 | 4 |
| 6 | Schizophrenia/Any psychotic disorder | 1 | 0 | 1 | 1 | 0 | 3 |
| 7 | Any anxiety disorder | 1 | 0 | 1 | 1 | 1 | 4 |
| 8 | Generalised Anxiety Disorder | 1 | 0 | 1 | 1 | 1 | 4 |
| 9 | Social Anxiety Disorder | 1 | 0 | 1 | 1 | 1 | 4 |
| 10 | Panic Disorder | 1 | 0 | 1 (0 for paediatric) | 1 | 1 | 4 (3 for paediatric) |
| 11 | Agoraphobia | 1 | 0 | 1 | 1 | 0 | 3 |
| 12 | Simple/Specific Phobia | 1 | 0 | 1 | 1 | 1 | 4 |
| 13 | Somatic symptom disorder/Somatoform/Somatization disorder | 1 | 0 | 1 | 1 | 1 | 4 |
| 14 | Hypochondriasis/Illness anxiety disorder | 1 | 0 | 1 | 1 | 1 | 4 |
| 15 | Post-traumatic stress disorder (PTSD) | 1 | 0 | 1 | 1 | 0 | 3 |
| 16 | Any obsessive compulsive related (spectrum) disorders | 1 | 0 | 0 | 1 | 1 | 3 |
| 17 | Body dysmorphic disorder | 1 | 0 | 0 | 1 | 1 | 3 |
| 18 | Trichotillomania | 1 | 0 | 0 | 1 | 1 | 3 |
| 19 | Any tic disorder | 1 | 0 | 1 | 1 | 1 | 4 |
| 20 | Any eating disorder | 1 | 0 | 1 | 1 | 0 | 3 |
| 21 | Anorexia nervosa | 1 | 0 | 1 | 1 | 1 | 4 |
| 22 | Bulimia nervosa | 1 | 1 | 1 | 1 | 1 | 5 |
| 23 | Any substance use disorder | 1 | 0 | 1 | 1 | 1 | 4 |
| 24 | Autism spectrum disorder | 1 | 1 | 1 | 1 | 1 | 5 |
| 25 | Attention deficit hyperactivity disorder | 1 | 0 | 1 | 1 | 1 | 4 |
| 26 | Oppositional defiant disorder | 1 | 0 | 0 | 1 | 1 | 3 |
| 27 | Any personality disorder | 1 | 0 | 1 | 1 | 1 | 4 |
| 28 | Obsessive compulsive (Anankastic) personality disorder | 1 | 0 | 1 | 1 | 0 | 3 |
| 29 | Schizoid personality disorder | 1 | 0 | 1 | 1 | 0 | 3 |
| 30 | Schizotypal personality disorder | 1 | 0 | 1 | 1 | 1 | 4 |

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|---|---|---|---|---|---|---|---|
| 31 | Borderline personality disorder | 1 | 0 | 1 | 1 | 1 | 4 |
| 32 | Histrionic personality disorder | 1 | 0 | 1 | 1 | 1 | 4 |
| 33 | Antisocial personality disorder | 1 | 1 | 1 | 1 | 1 | 5 |
| 34 | Narcissistic personality disorder | 1 | 0 | 1 | 1 | 0 | 3 |
| 35 | Dependent personality disorder | 1 | 0 | 1 | 1 | 1 | 4 |
| 36 | Anxious-avoidant personality disorder | 1 | 0 | 1 | 1 | 1 | 4 |

## Table 2: Operationalized criteria for GRADE

| GRADE criteria | Operationalized criteria | Explanation of GRADE scoring | GRADE Score assignment |
|---|---|---|---|
| Risk of bias | 1. Study design (cohort) | Covered in selection criteria, most studies were cross-sectional, few were longitudinal in nature for the comorbidity assessed | Score of '1' was given to all comorbidities |
| | 2. Representativeness of sample | Covered in selection criteria for studies – we only included studies that did not include/ exclude subjects for any comorbidity | |
| | 3. Standardized assessments | We only included studies that diagnosed OCD and comorbidities using a standardized tool | |
| | 4. Prevalence estimates considered covariates | Moderator (gender, age of onset, age at assessment, illness severity) analyses were performed for all the comorbidities studied | |
| | 5. Sensitivity analyses | Use of leave-one-out analysis, influence and Baujat plots for identification of outliers was done as part of the statistical analysis. | |
| Inconsistency | 1. Heterogeneity ($I^2$) | High heterogeneity (typically >90%) that was statistically significant led to a reduction in the GRADE score | All comorbidities with statistically significant heterogeneity were scored '0'. Only ASD, Bulimia nervosa and ASPD had non-significant heterogeneity and were scored '1'. |
| | 2. Subgroup analysis (by age) | This was done for all comorbidities based on adult versus paediatric age group | |
| | 3. Sample size variations | All included studies had a minimum sample size of 100. There was significant variation between studies for most comorbidities. This perhaps contributed to the high heterogeneity. | |
| Imprecision | 95% confidence intervals | 95% confidence intervals that wide enough to impact clinical implications at the upper and lower limit of intervals resulted in a reduction of the GRADE score | "Any OCRD", "Trichotillomania", "BDD" and "ODD" received a score of 0, along with Panic |

| | | | disorder and MDD in paediatric studies. All others were scored '1'. |
|---|---|---|---|
| Indirectness | Generalizability and applicability of findings | All the included studies recruited subjects from clinical populations, hence the findings may be considered generalizable to clinical populations | All received a score of '1' |
| Publication bias | Funnel plots<br>Egger's test<br>Begg's test | If either of Egger's or Begg's tests were significant, or asymmetry was evident on the Funnel plot, a score of '0' was assigned | Schizophrenia/any psychotic disorder, OCPD and narcissistic personality disorder were given a score of "0", based on Egger's/Begg's test; Dysthymia, Agoraphobia, PTSD, Any eating disorder, and Schizoid personality disorder were given a score of '0' based on the Funnel plots. All others were scored '1'. |