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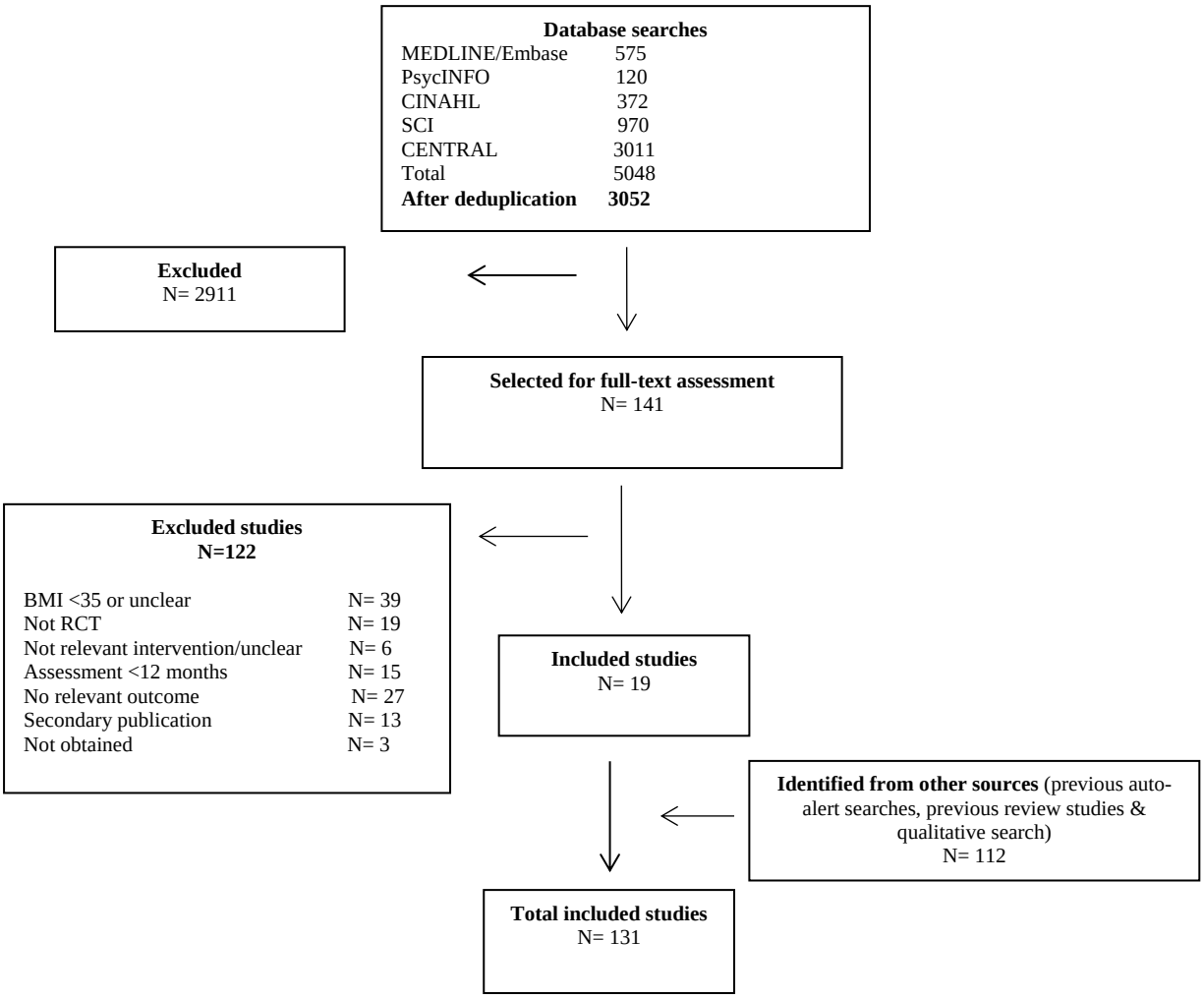
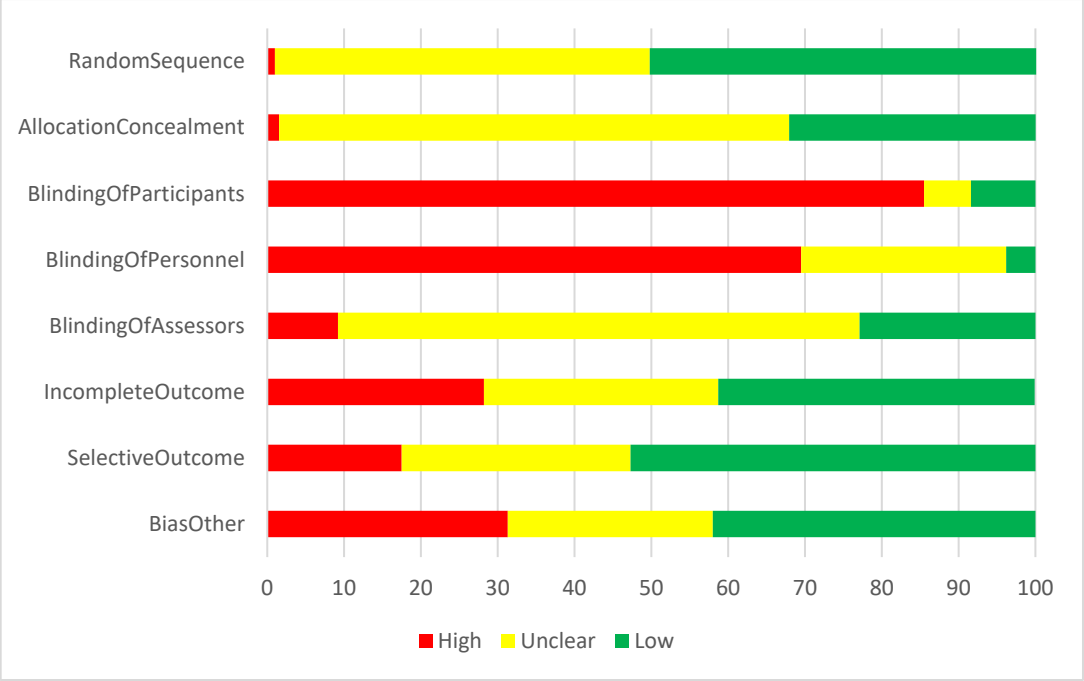
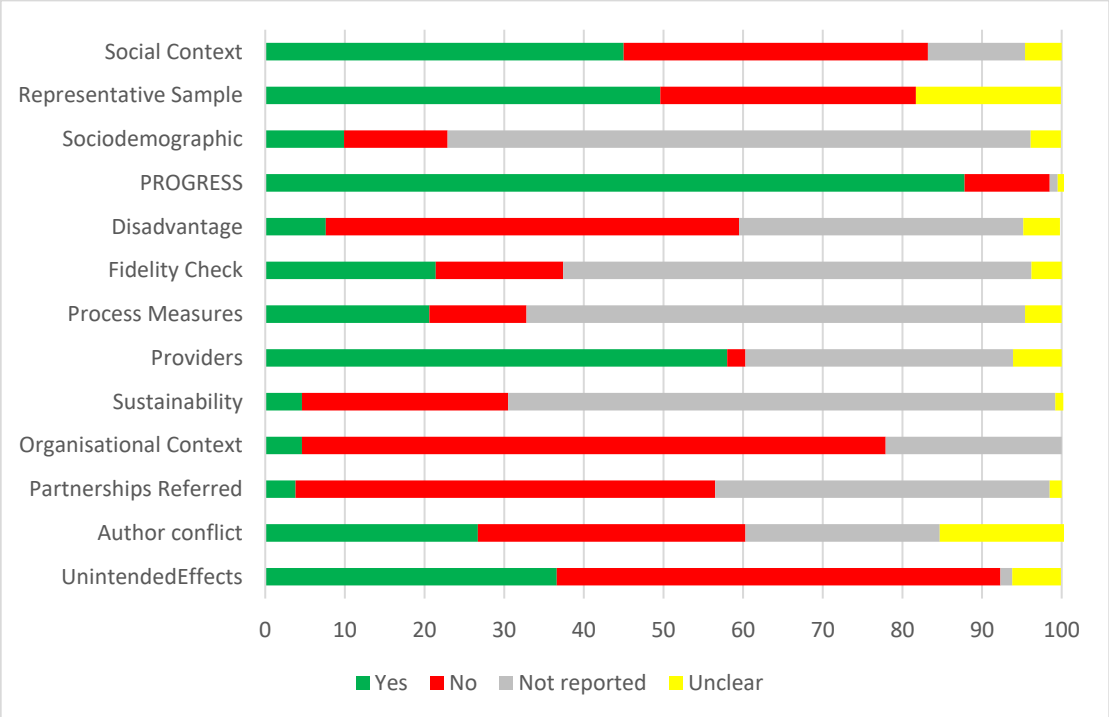


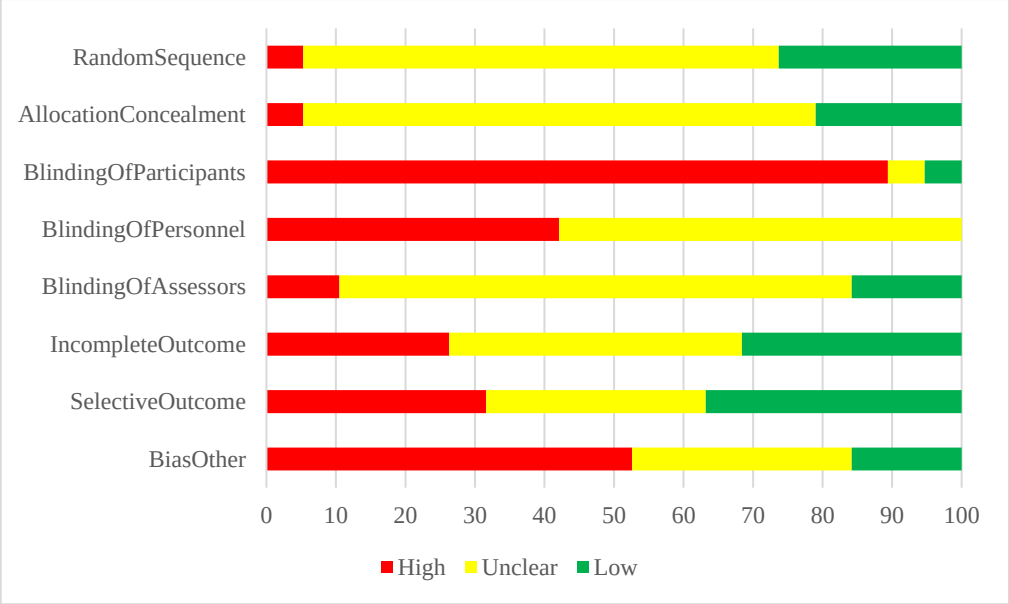
E1 PRISMA Flow chart



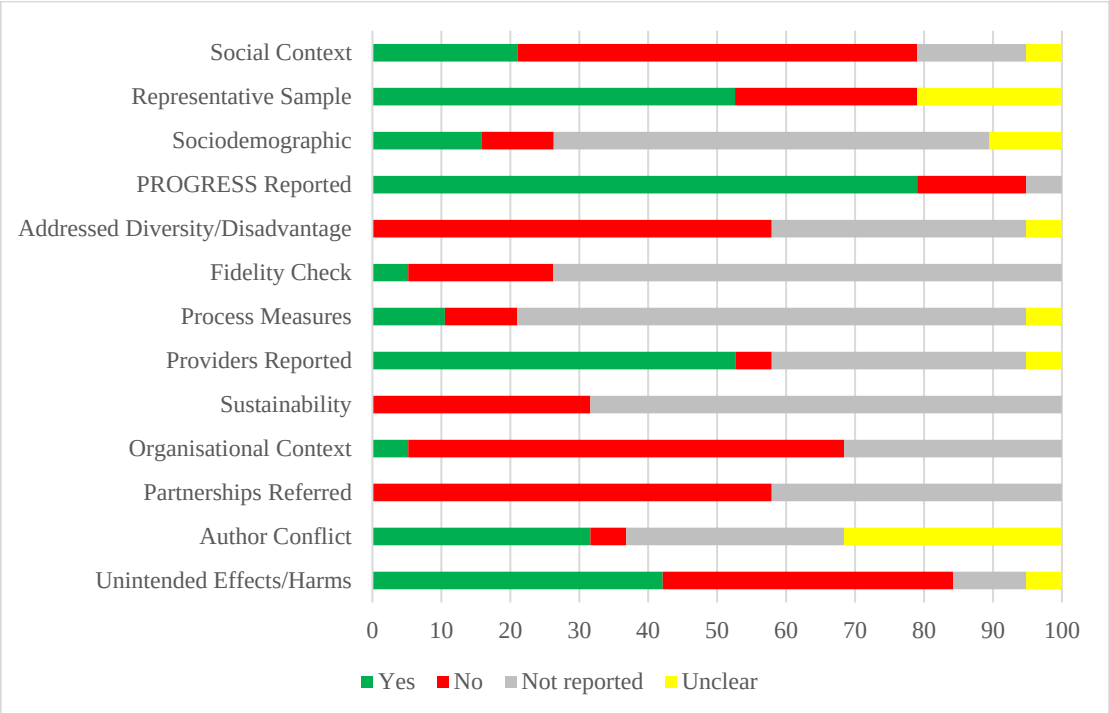
E2 Risk of bias assessment for all RCTs



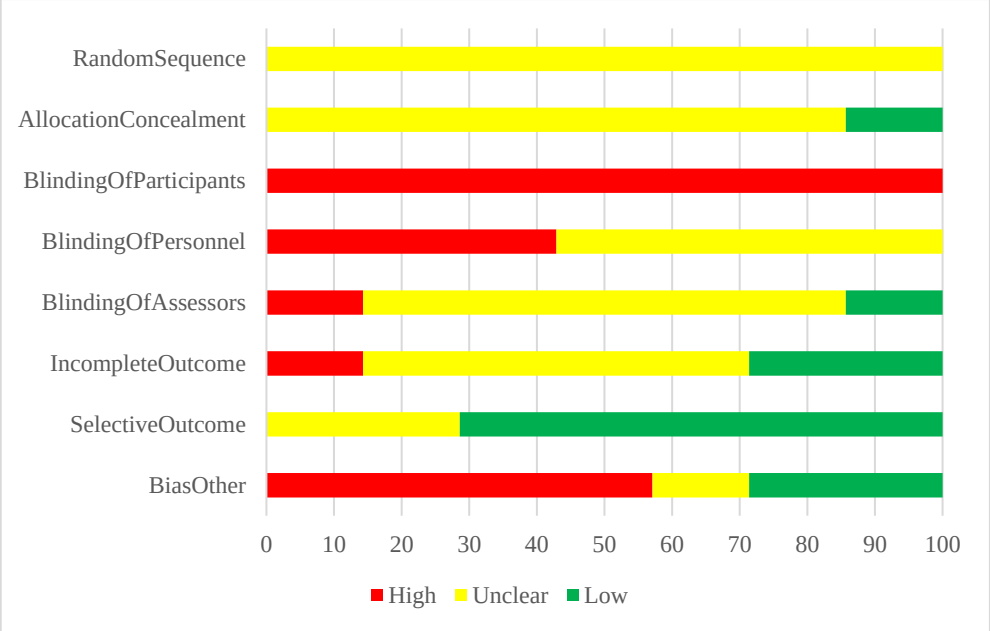
E3 Equity assessment for all RCTs



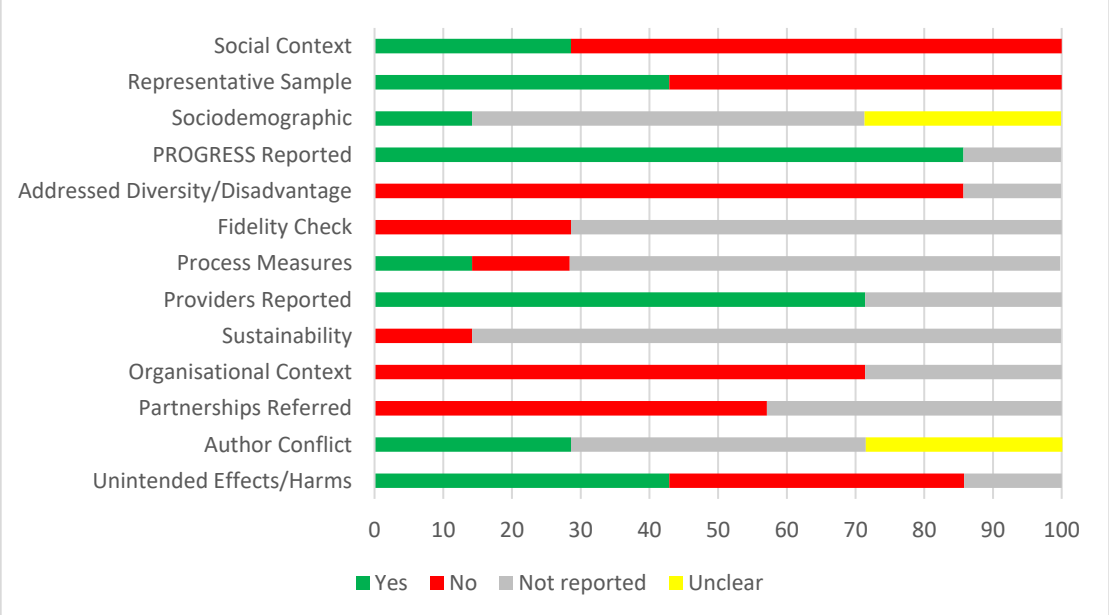
E4 Risk of bias for all VLCD RCTs



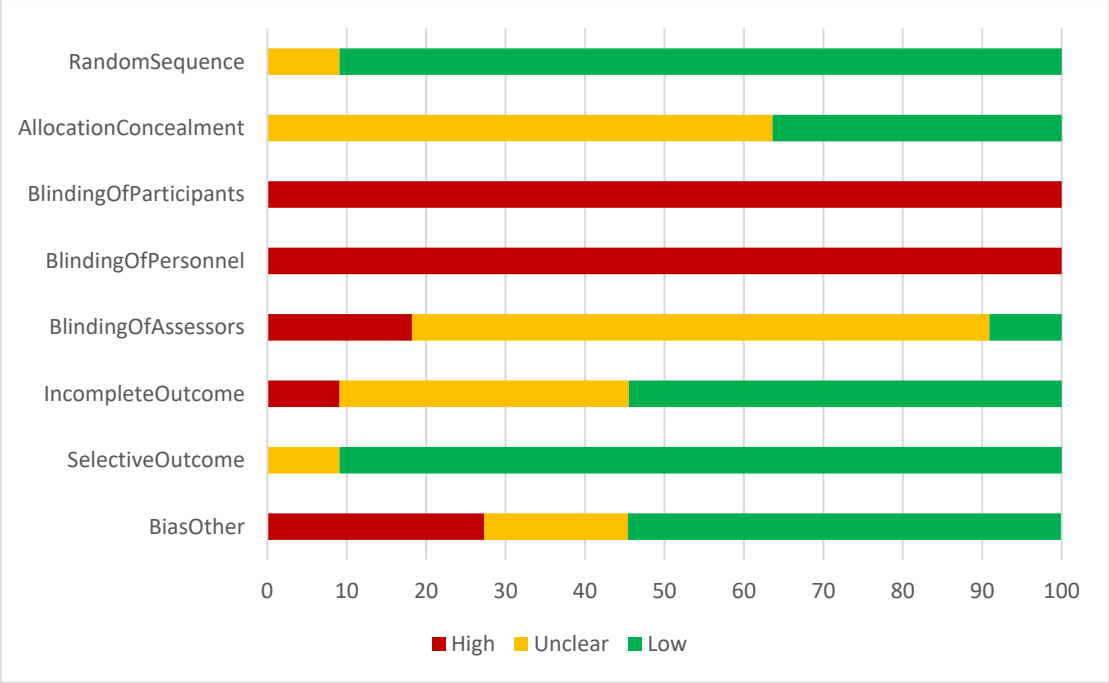
E5 Equity assessment for all VLCD RCTs



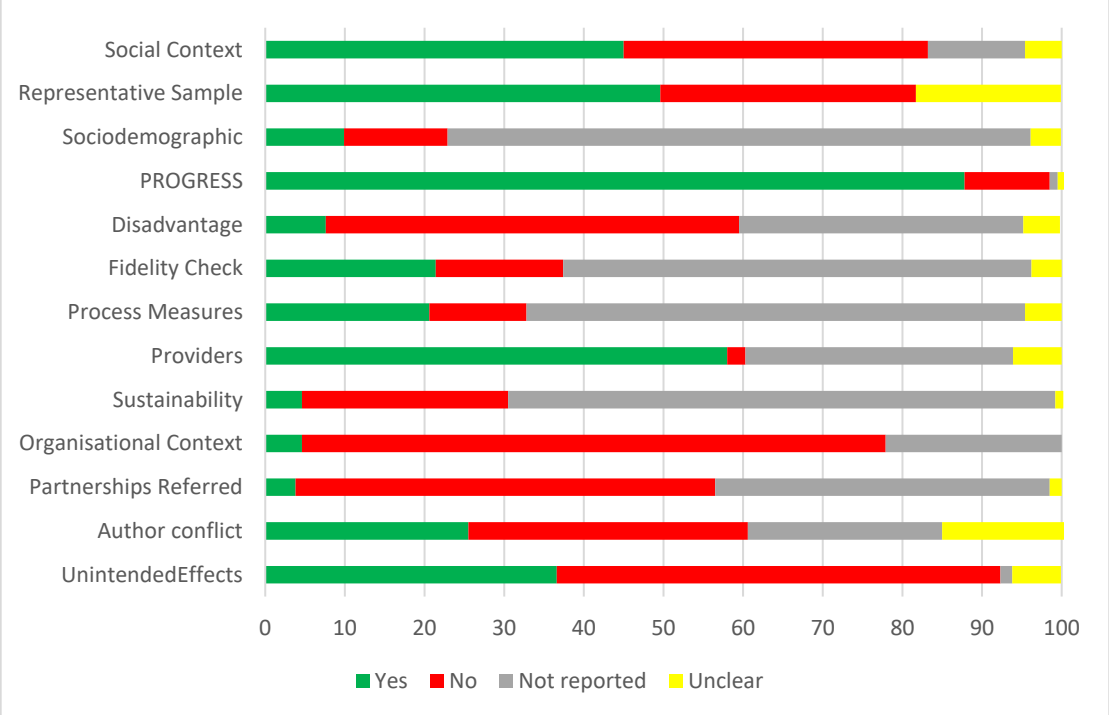
E6 Risk of bias assessment for randomised controlled trials of VLCD and dietary intervention versus dietary intervention



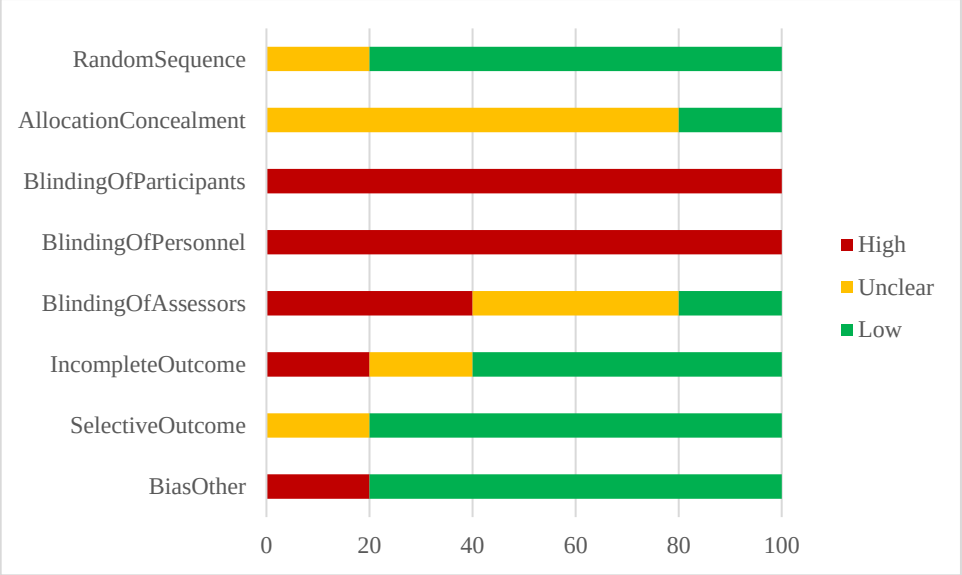
E7 Equity assessments for randomised controlled trials of VLCD and dietary intervention versus dietary intervention



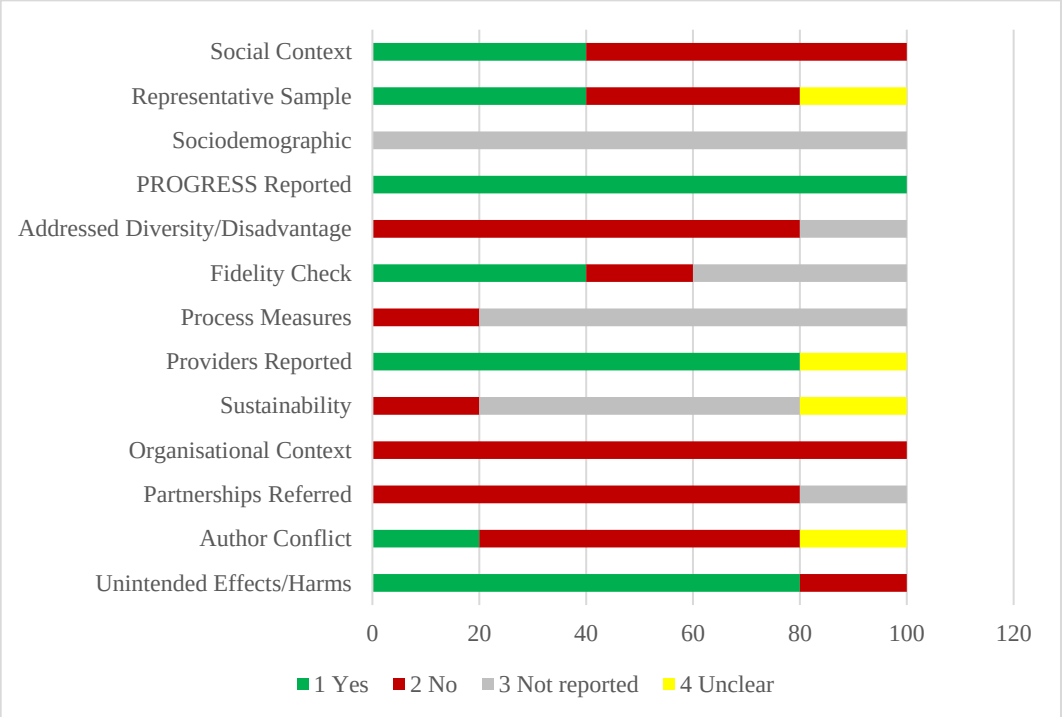
E8 Risk of bias assessment of bariatric surgery RCTs



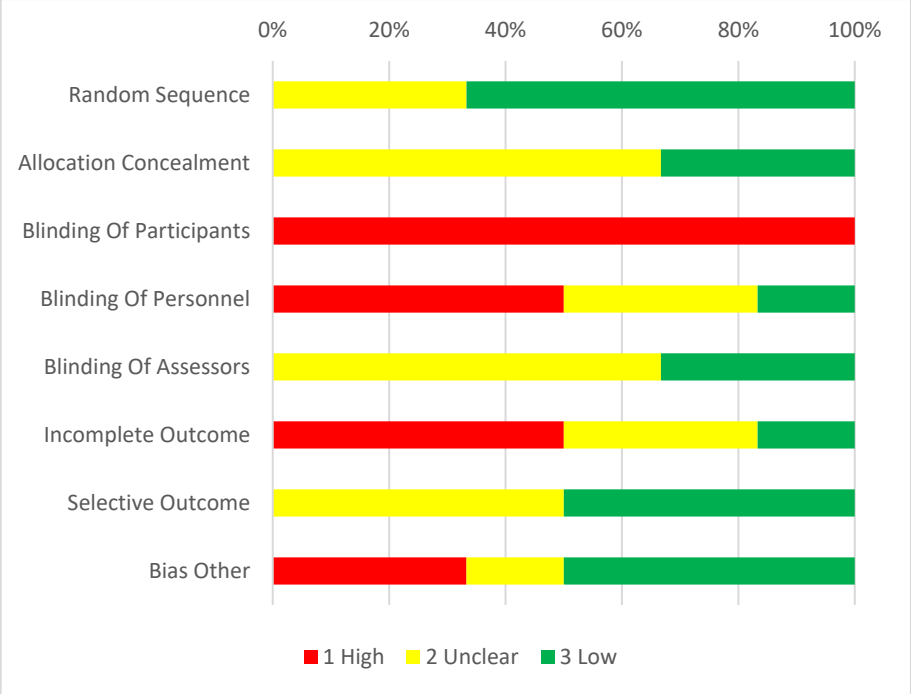
E9 Equity assessment for bariatric surgery RCTs



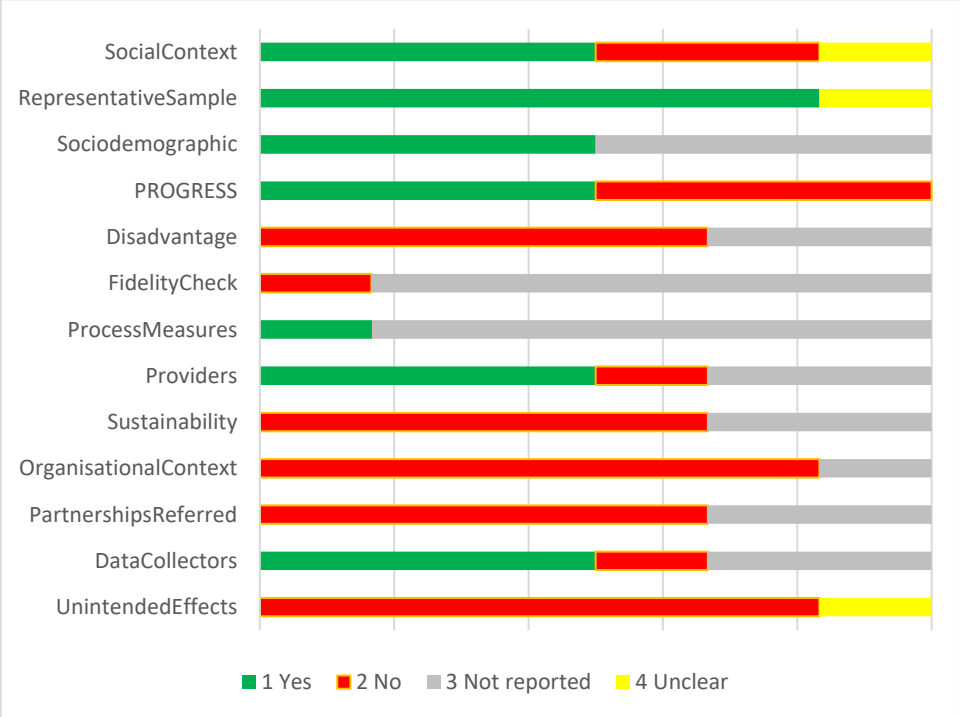
E10 Risk of bias assessment for the low CHO versus other diet RCTS



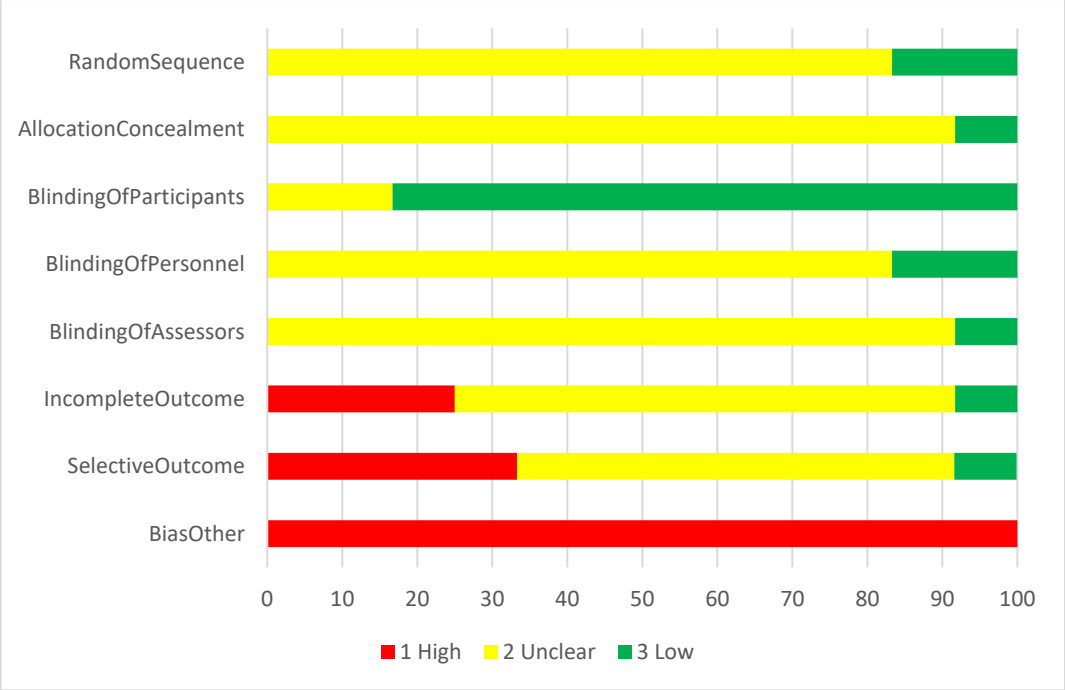
E11 Equity assessment for the low CHO versus other diet RCTS



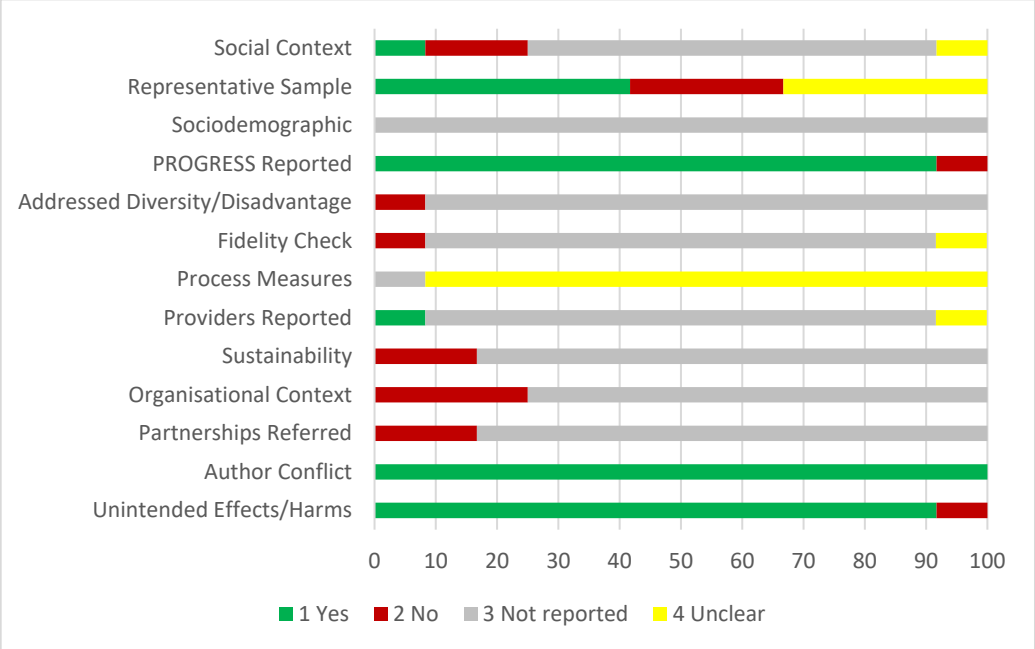
E12 Risk of bias assessment for higher protein versus lower protein RCTs



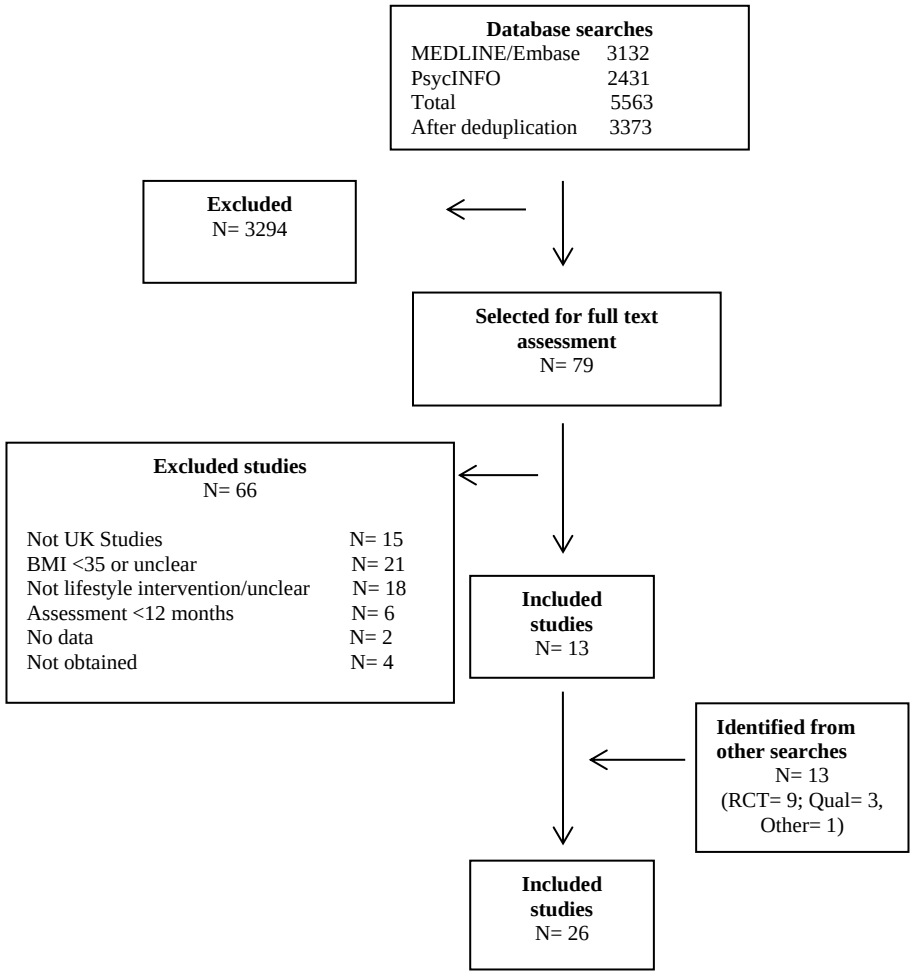
E13 Equity assessment for higher protein versus lower protein RCTs



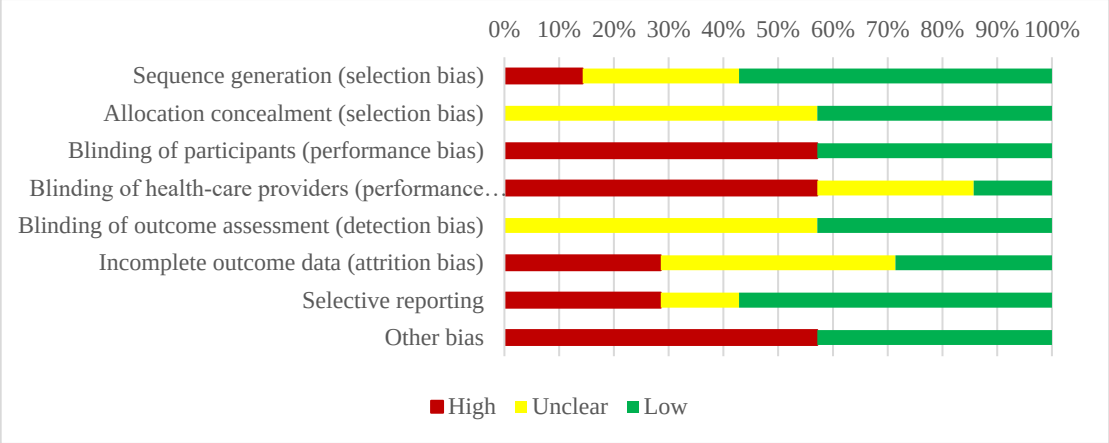
E14 Risk of bias assessment for orlistat RCTs



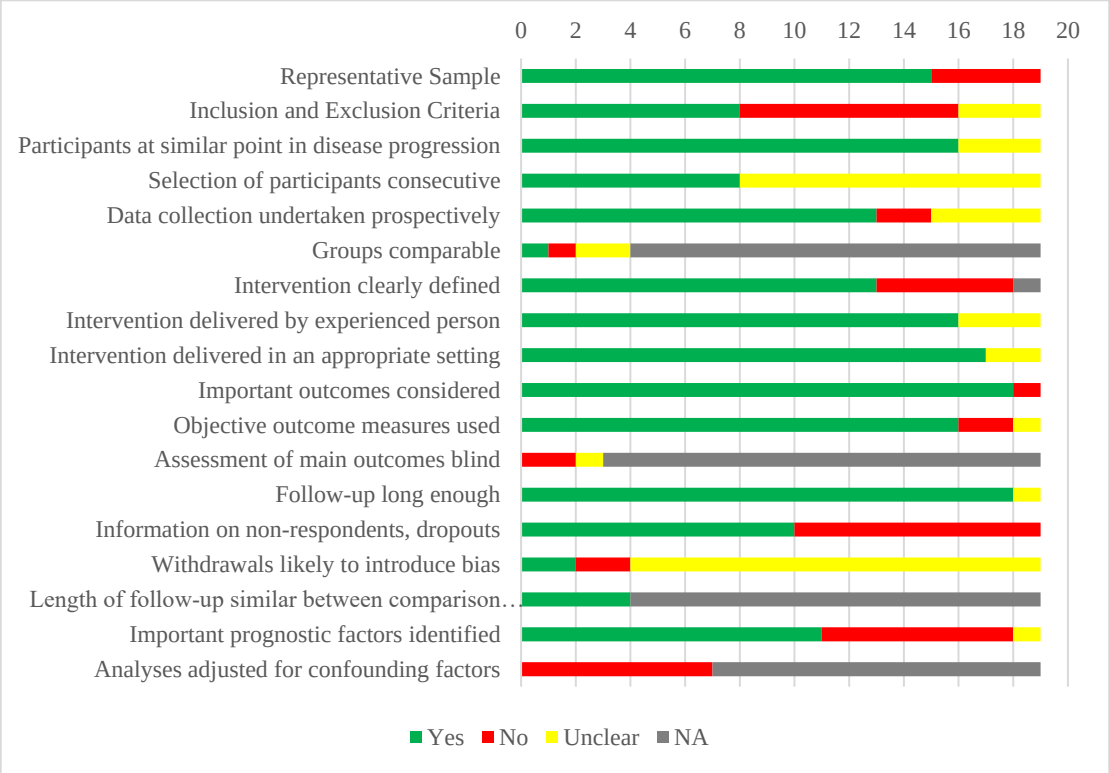
E15 Equity assessment for orlistat RCTs



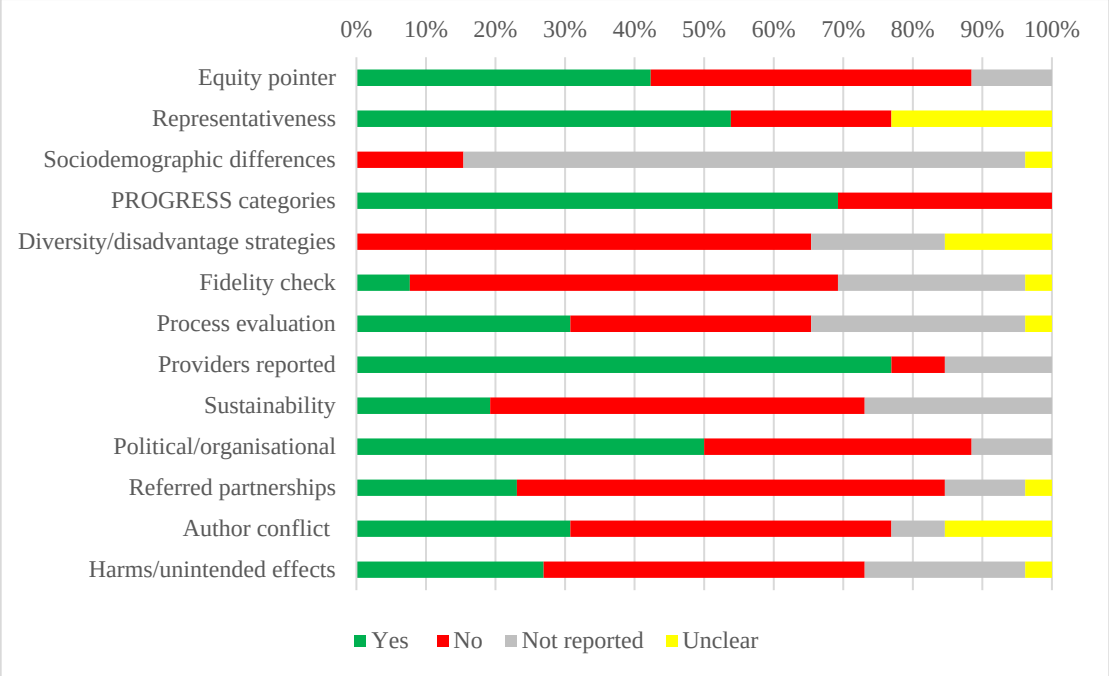
E16 PRISMA diagram



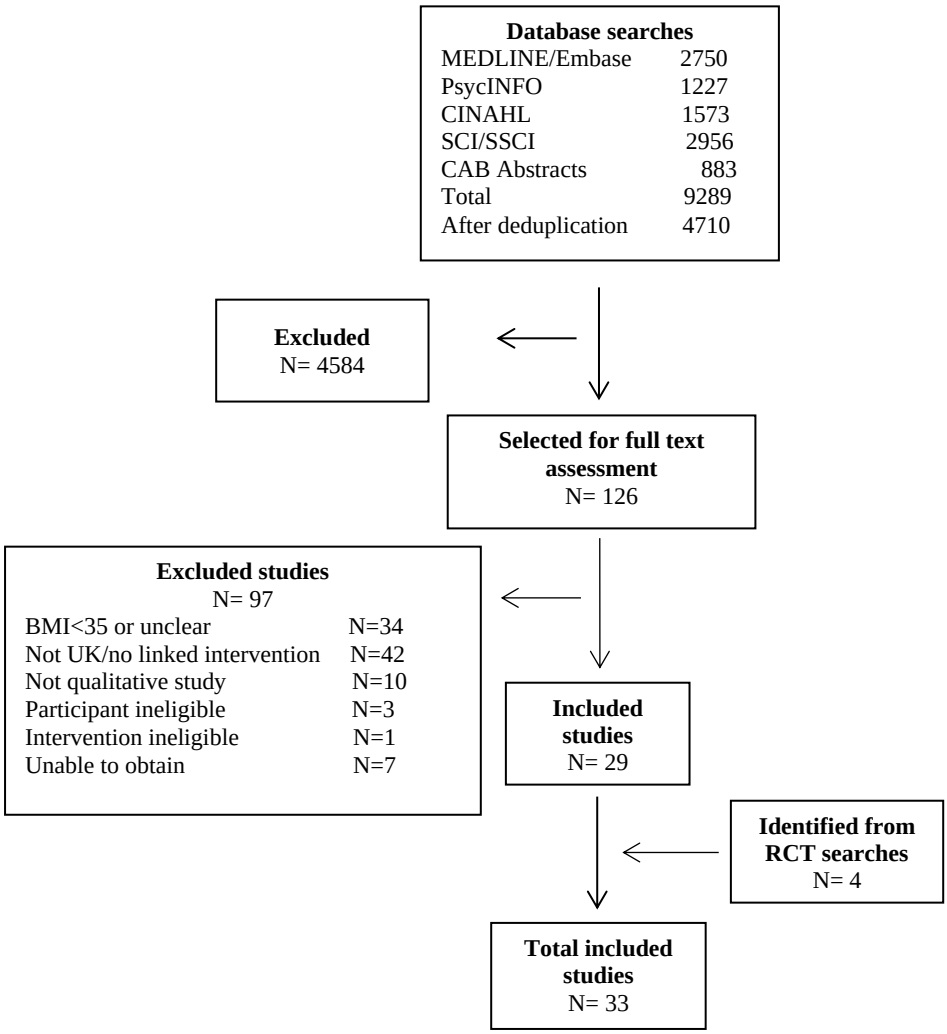
E17 Risk of bias assessment for RCTs



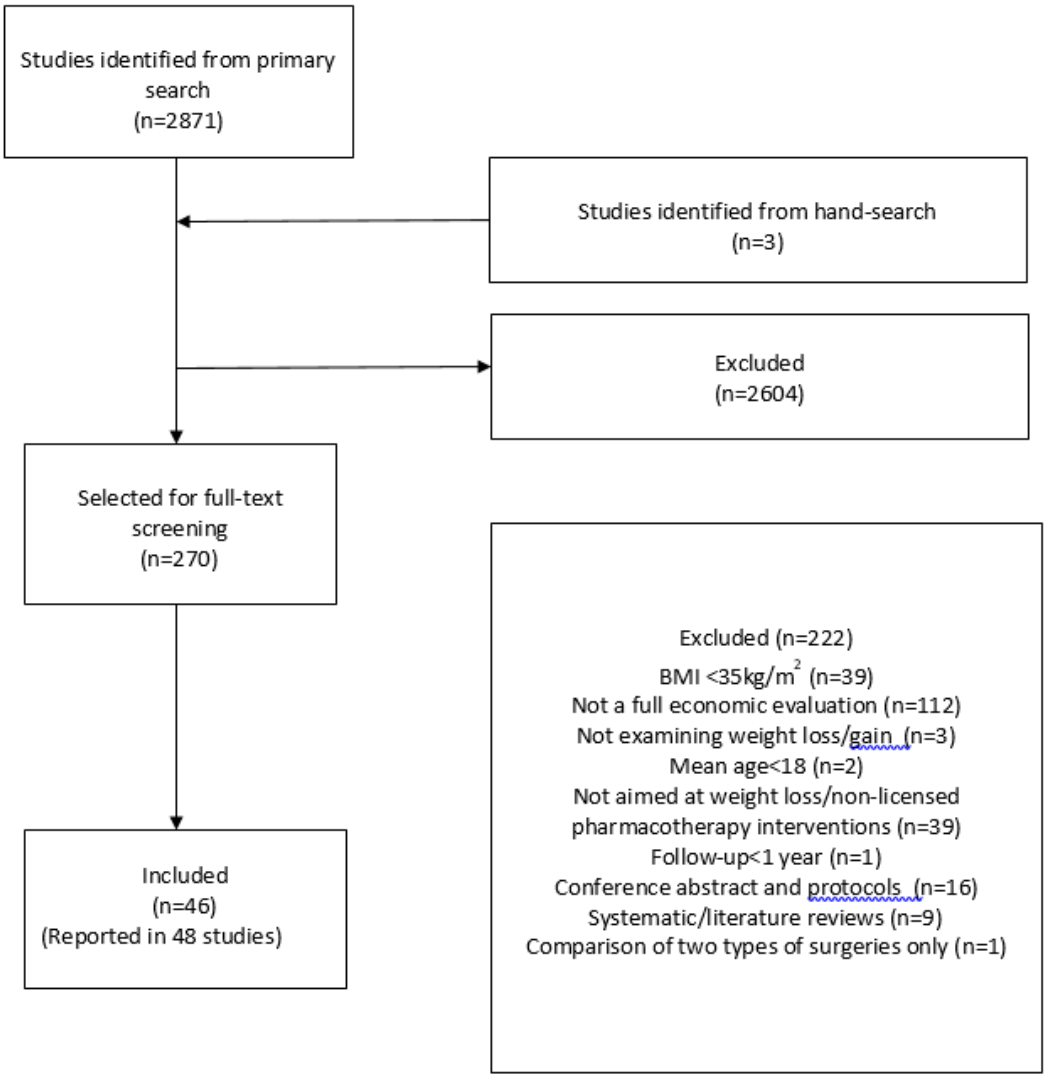
E18 Risk of bias assessment for non-randomised studies. NA = not applicable



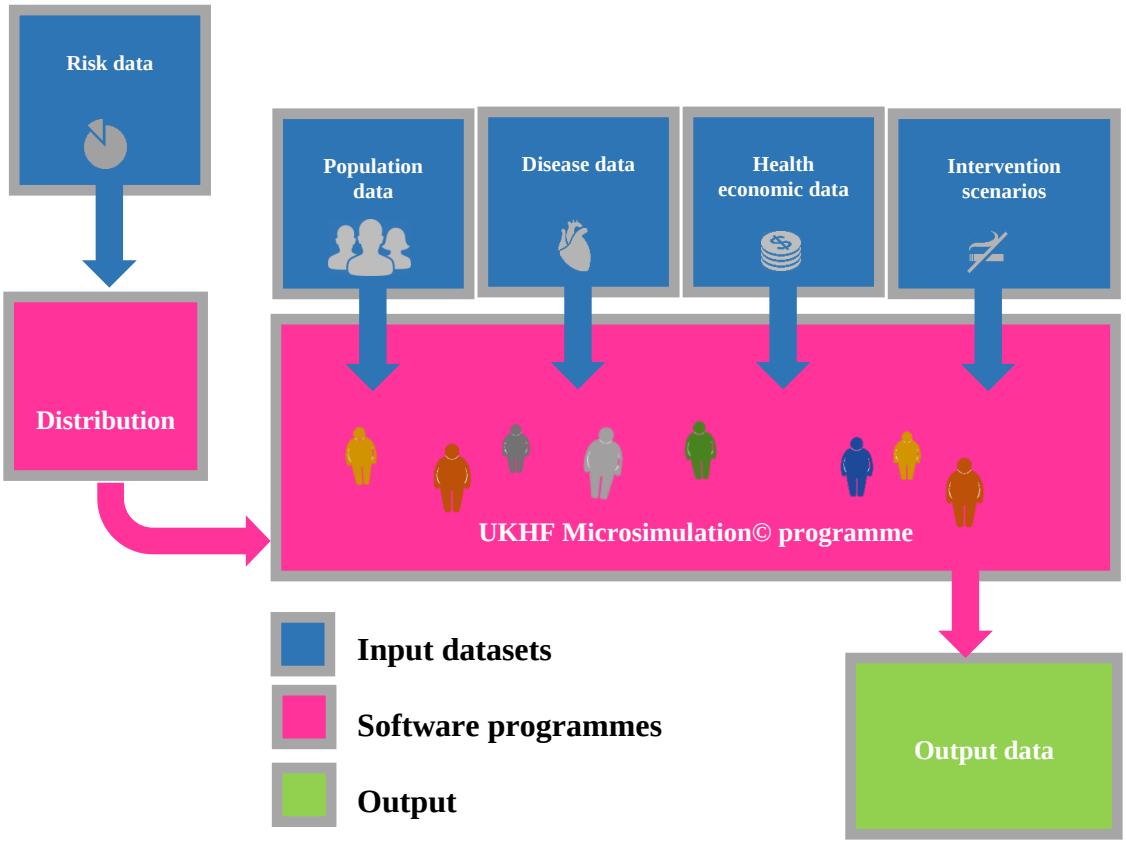
E19 Equity assessment for all UK studies



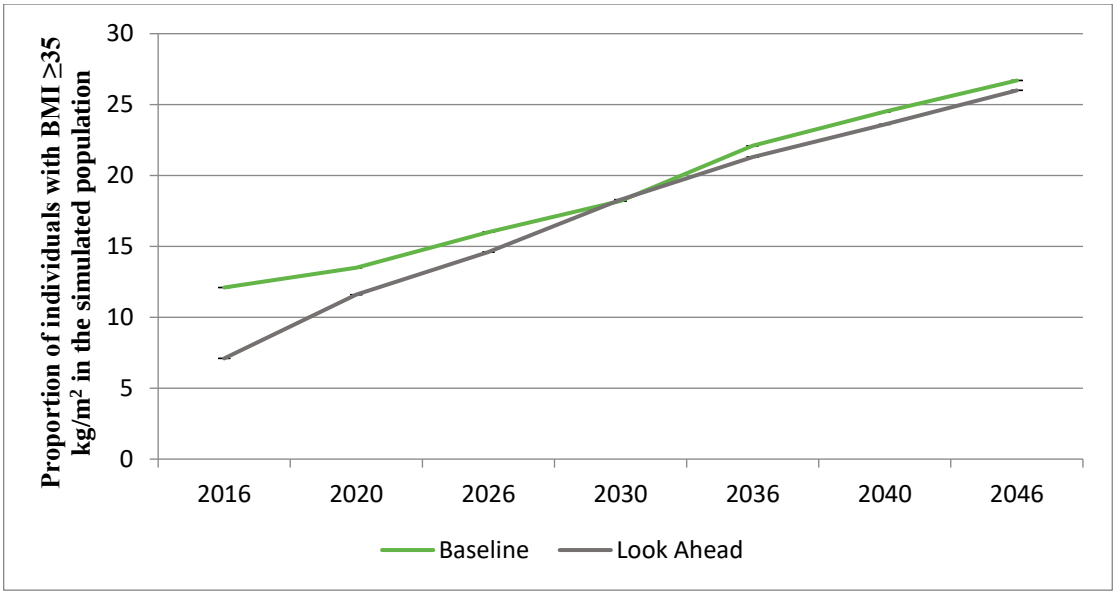
E20 Flow chart of included studies



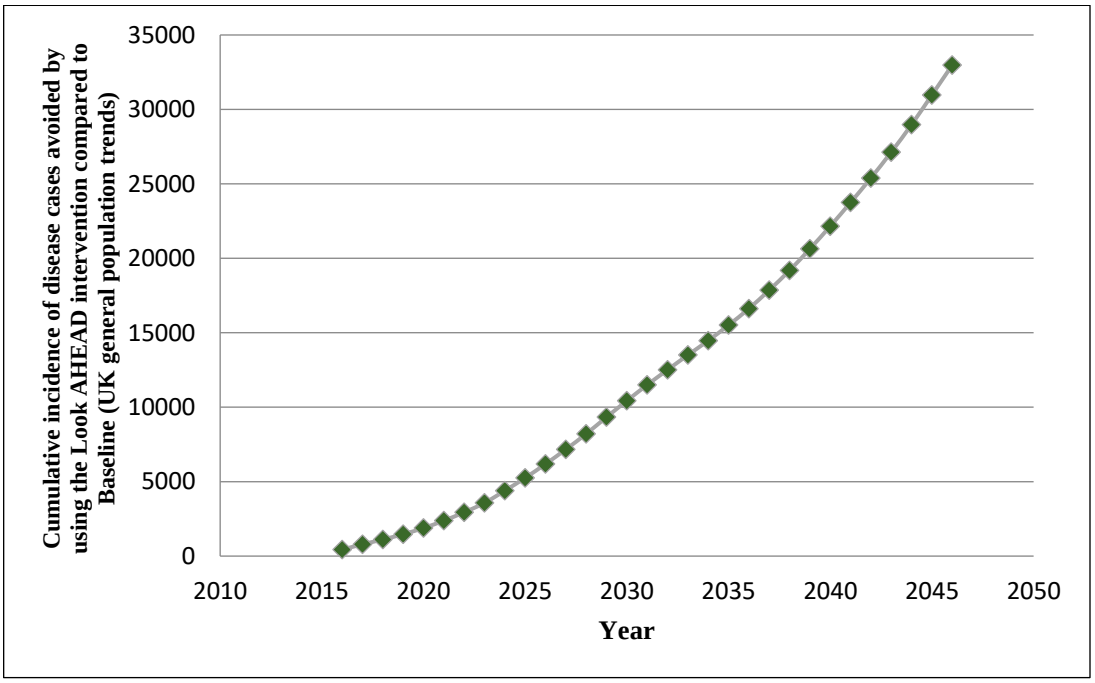
E21 Flow chart for identification of studies



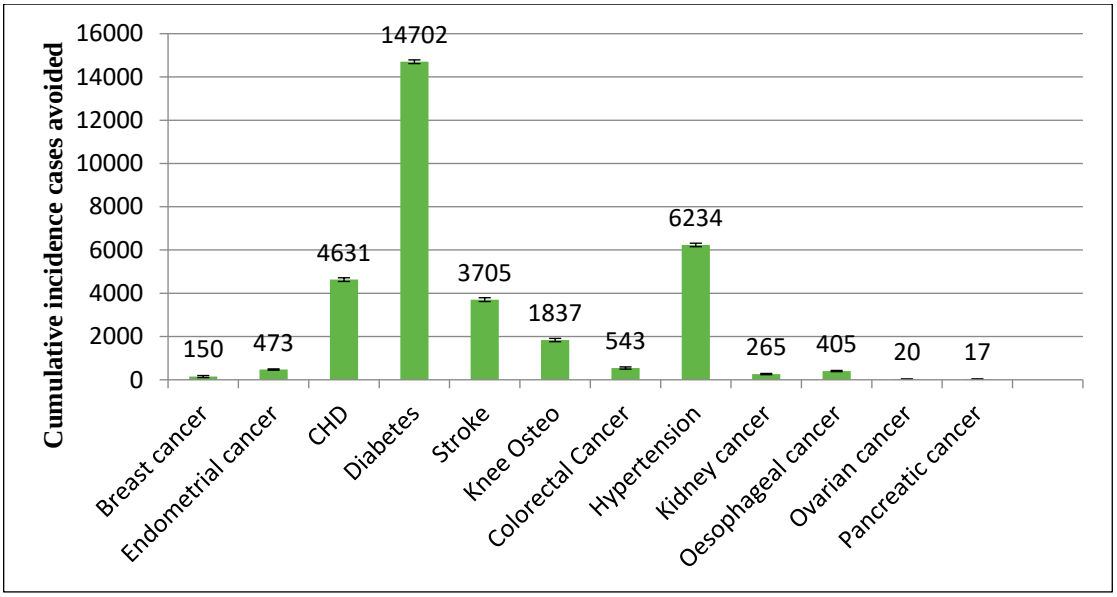
E22 The UKHF micro-simulation model



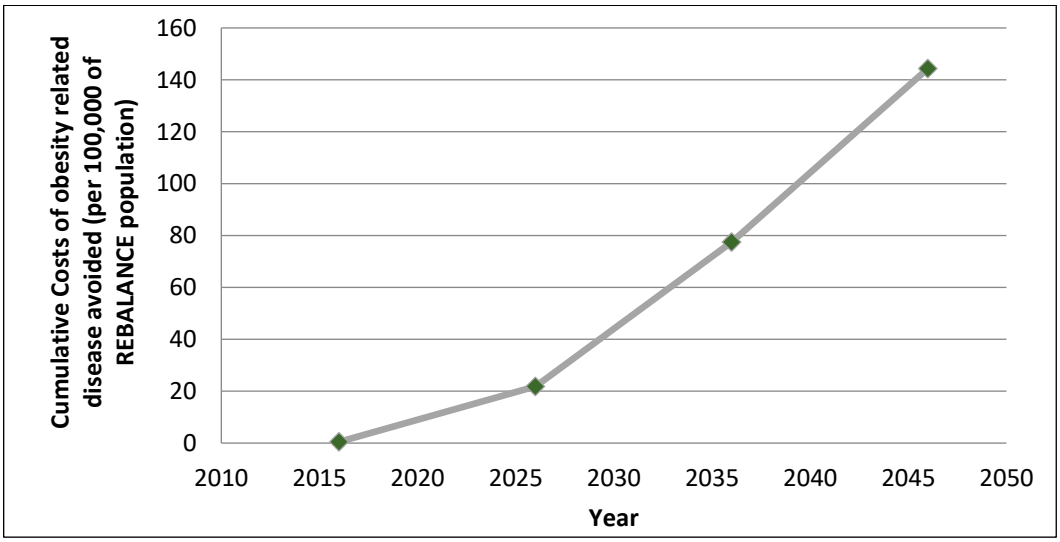
E23 Proportion of individuals with BMI ≥35 kg/m^2 in the simulated population, 2016-2046



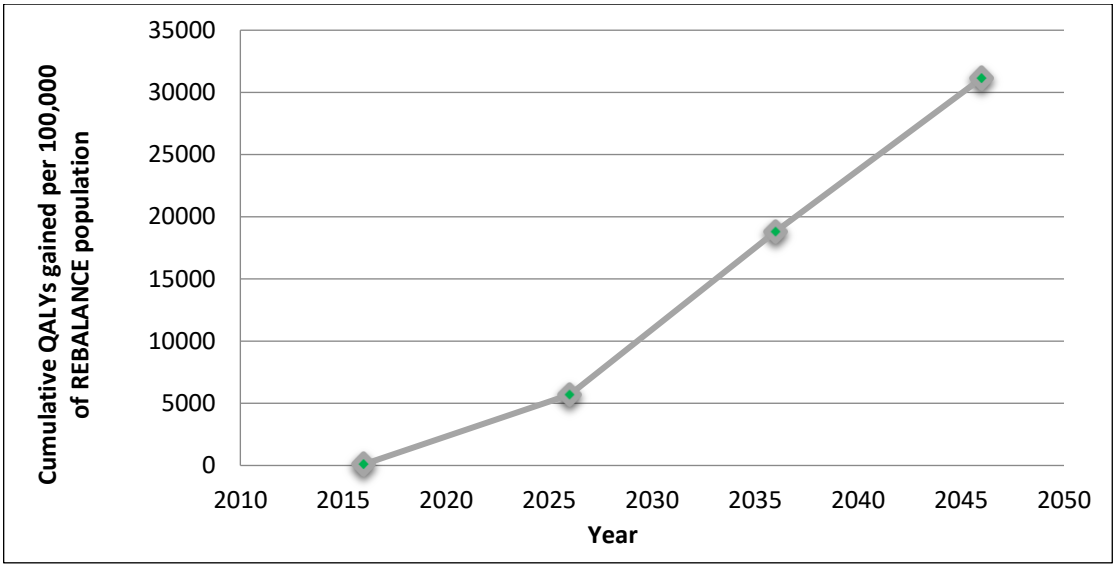
E24 Look AHEAD cumulative disease cases avoided per 100,000 individuals with BMI≥35 kg/m^2 over time



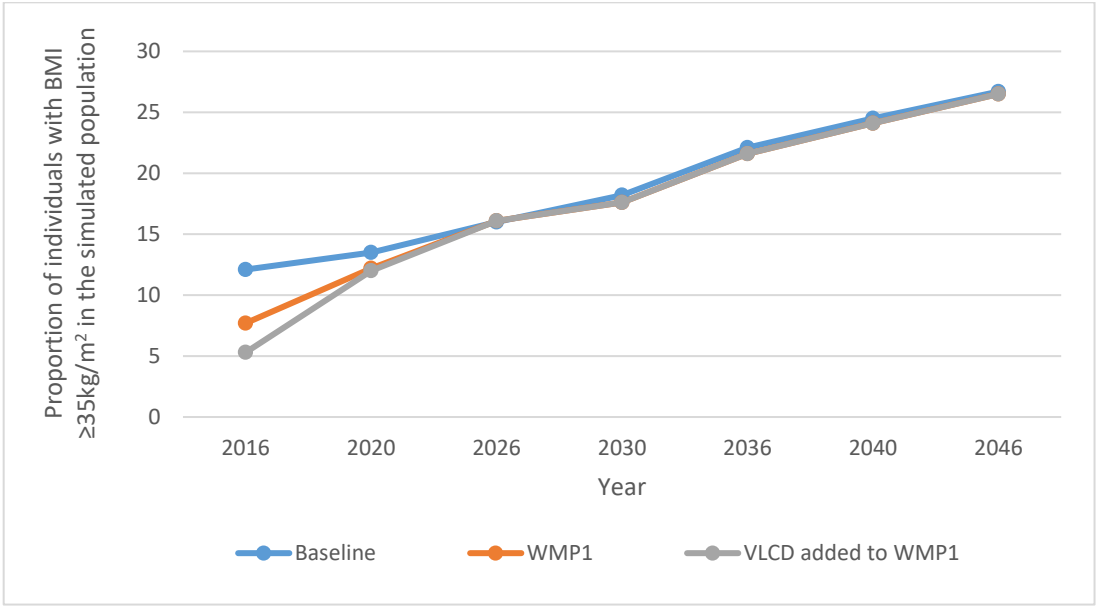
E25 Look AHEAD cumulative cases avoided per 100,000 of individuals with BMI ≥35 kg/m^2 per disease in 2046



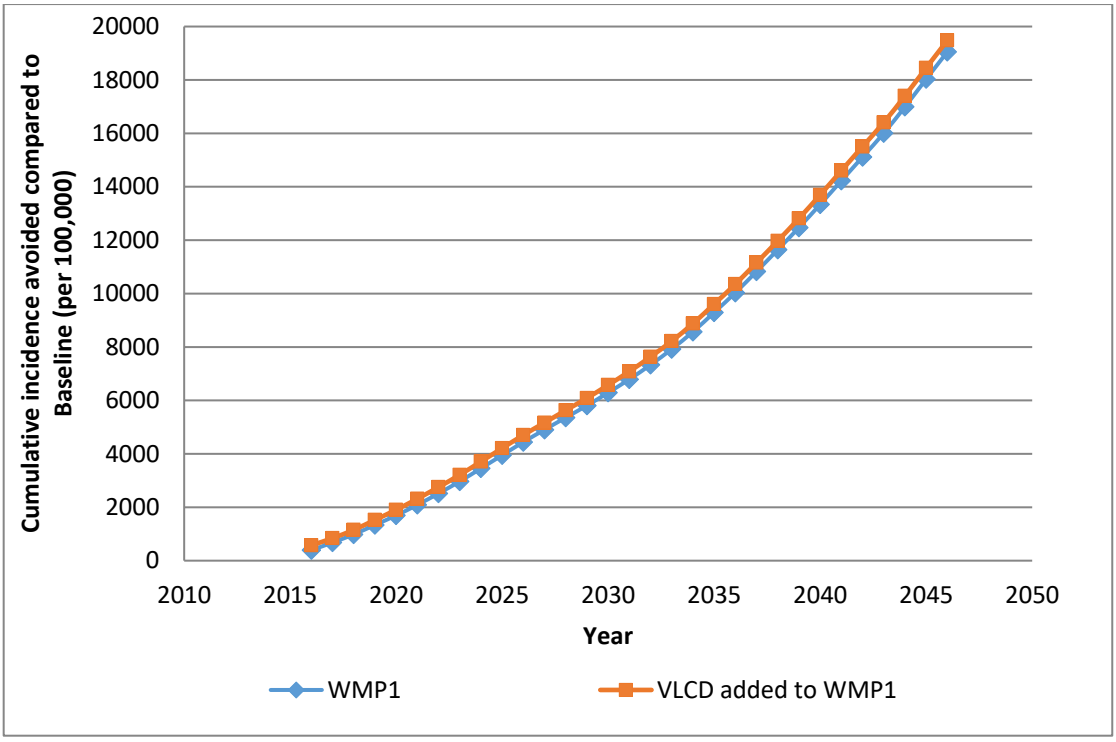
E26 Look AHEAD direct healthcare costs avoided per 100,000 of individuals with a BMI ≥35 kg/m^2 per year (in millions)



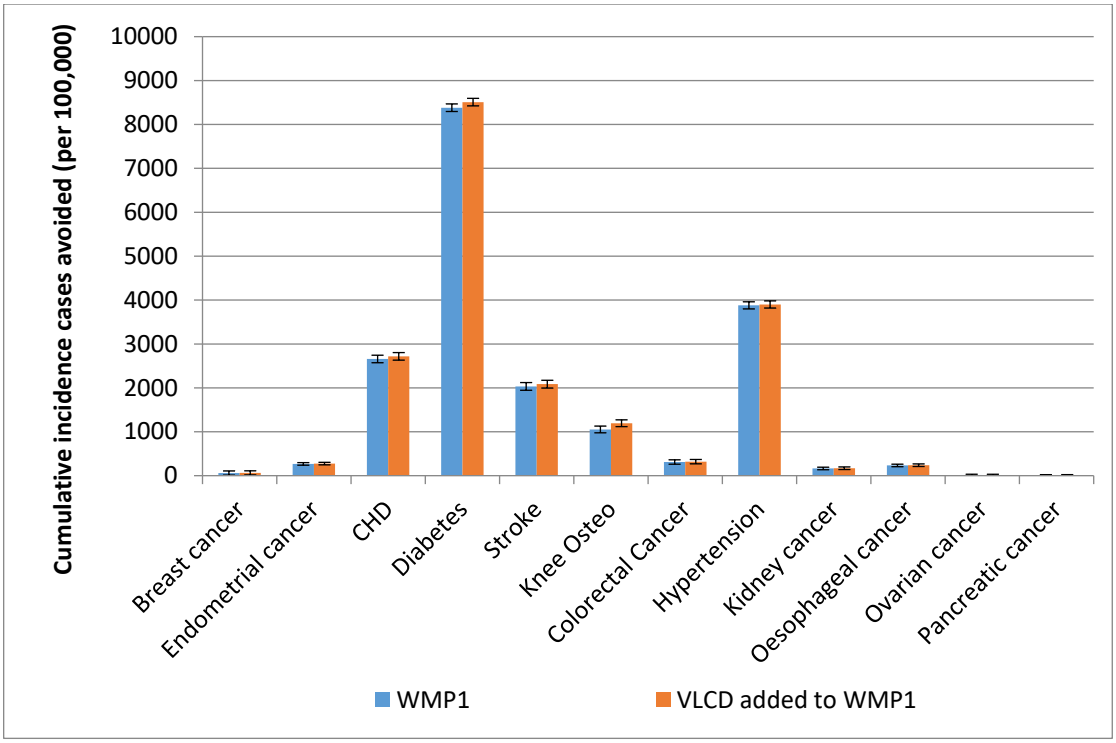
E27 Look AHEAD QALYs gained per 100,000 of individuals with a BMI ≥35 kg/m^2 per year



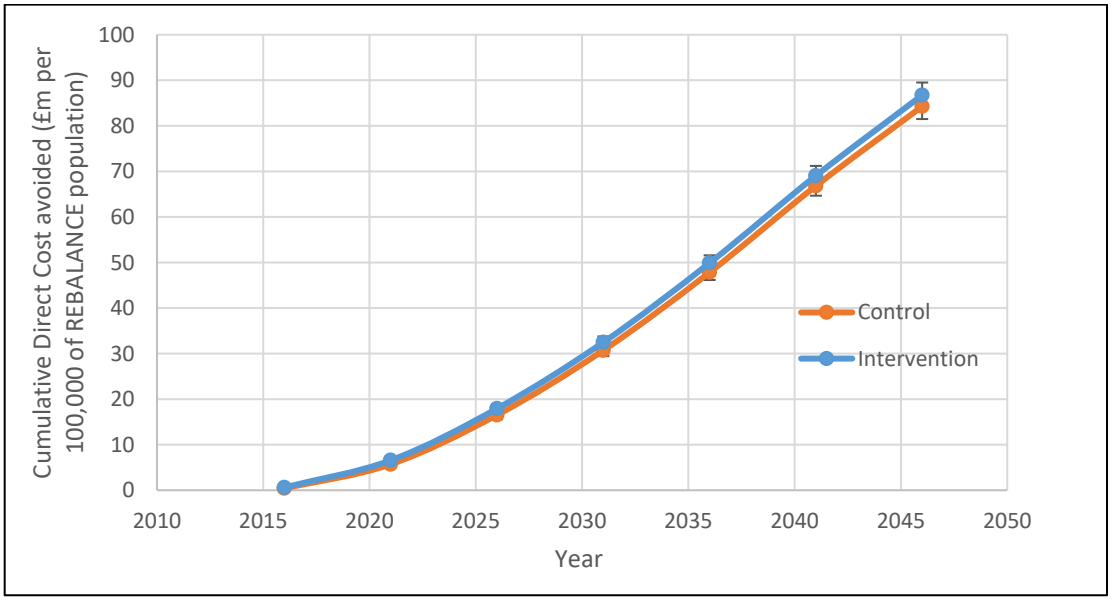
E28 Proportion of individuals with BMI≥35 kg/m^2 in the simulated population, 2016-2046



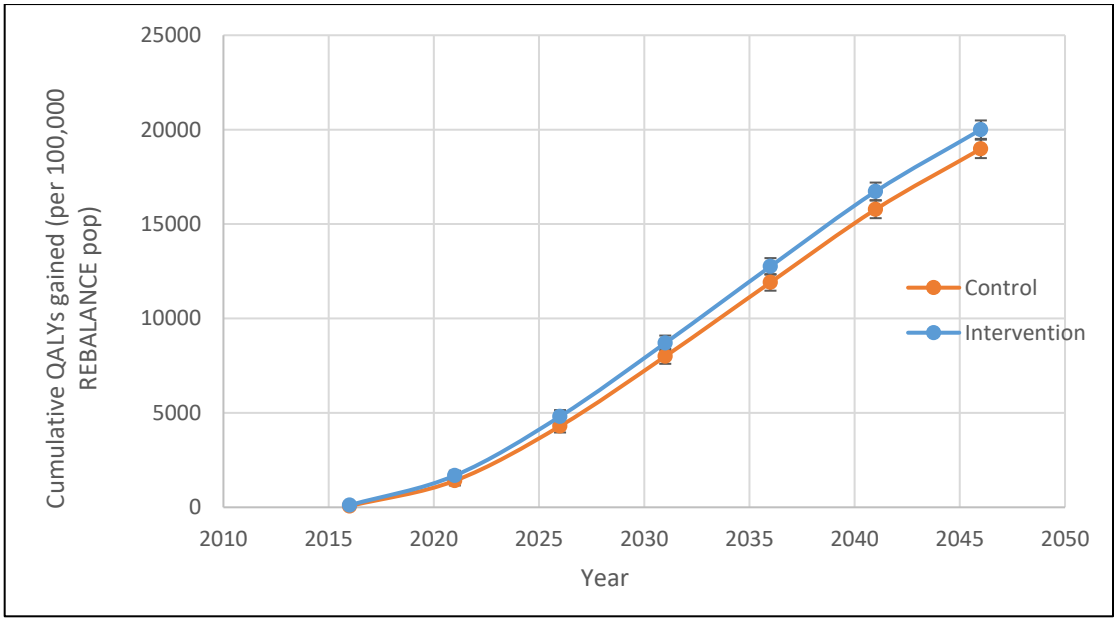
E29 Cumulative total disease cases avoided per 100,000 of individuals with a BMI ≥35 kg/m^2 over time for WMP1 and VLCD added to WMP1



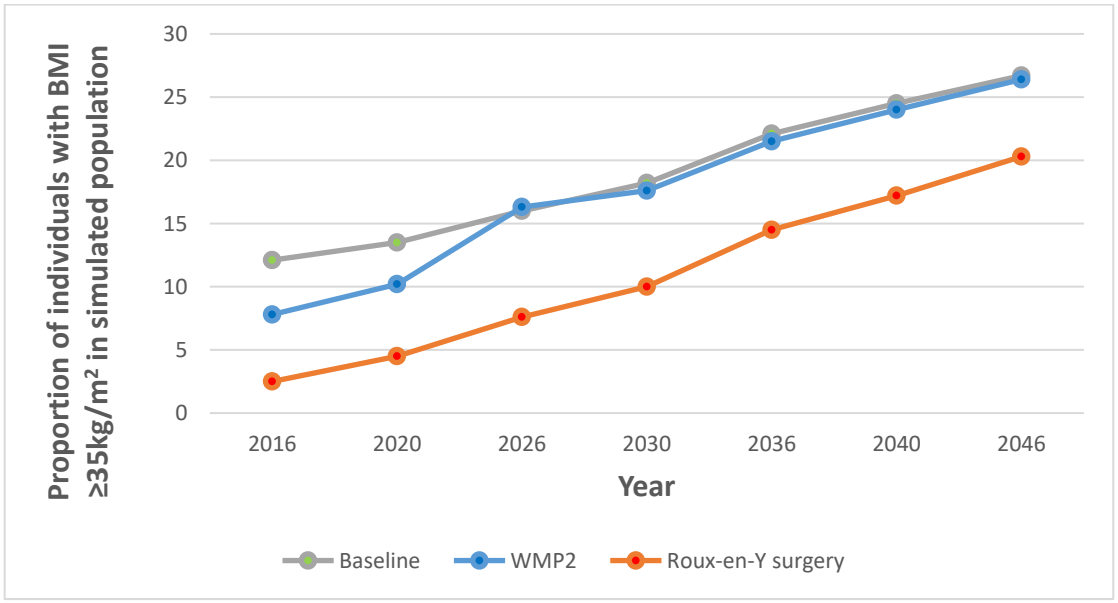
E30 Cumulative cases avoided per 100,000 of individuals with a BMI ≥35 kg/m^2 per disease in 2046 for both WMP1 and VLCD added to WMP1 in the VLCD comparison



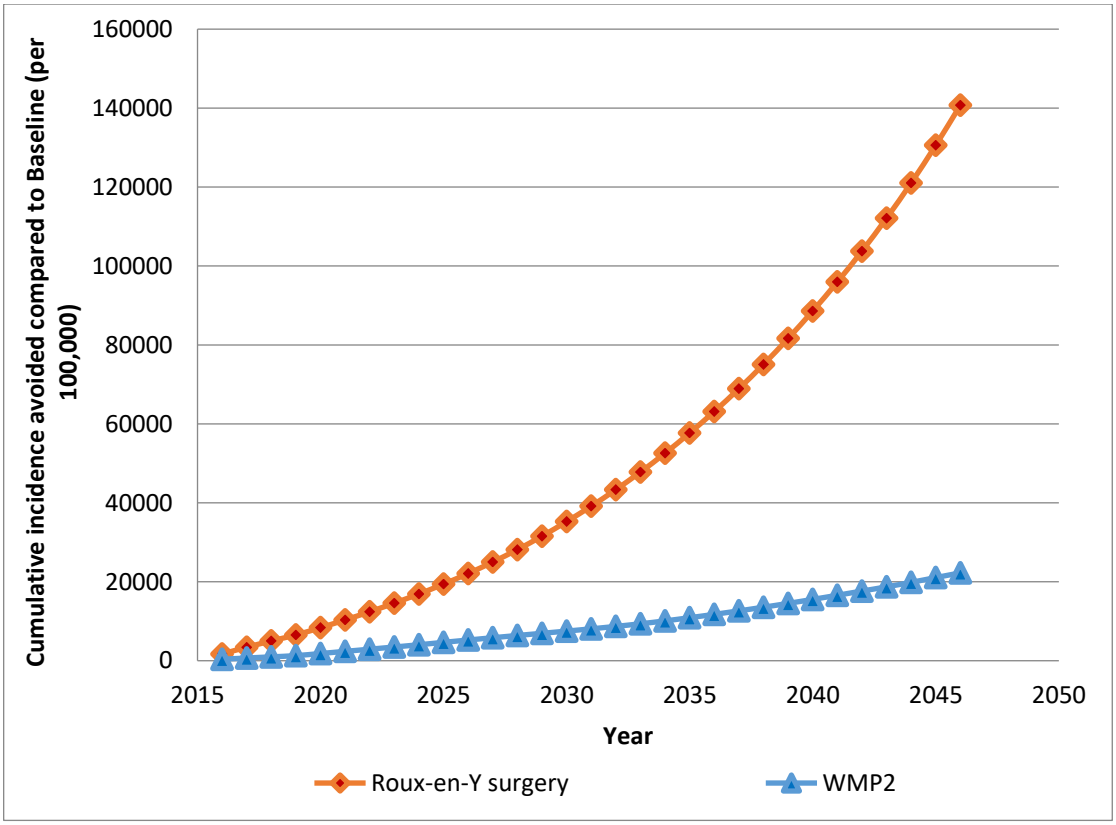
E31 Direct healthcare costs avoided per 100,000 of individuals with a BMI ≥35 kg/m^2 per year for WMP1 (control) and VLCD + WMP1 (intervention) compared to baseline



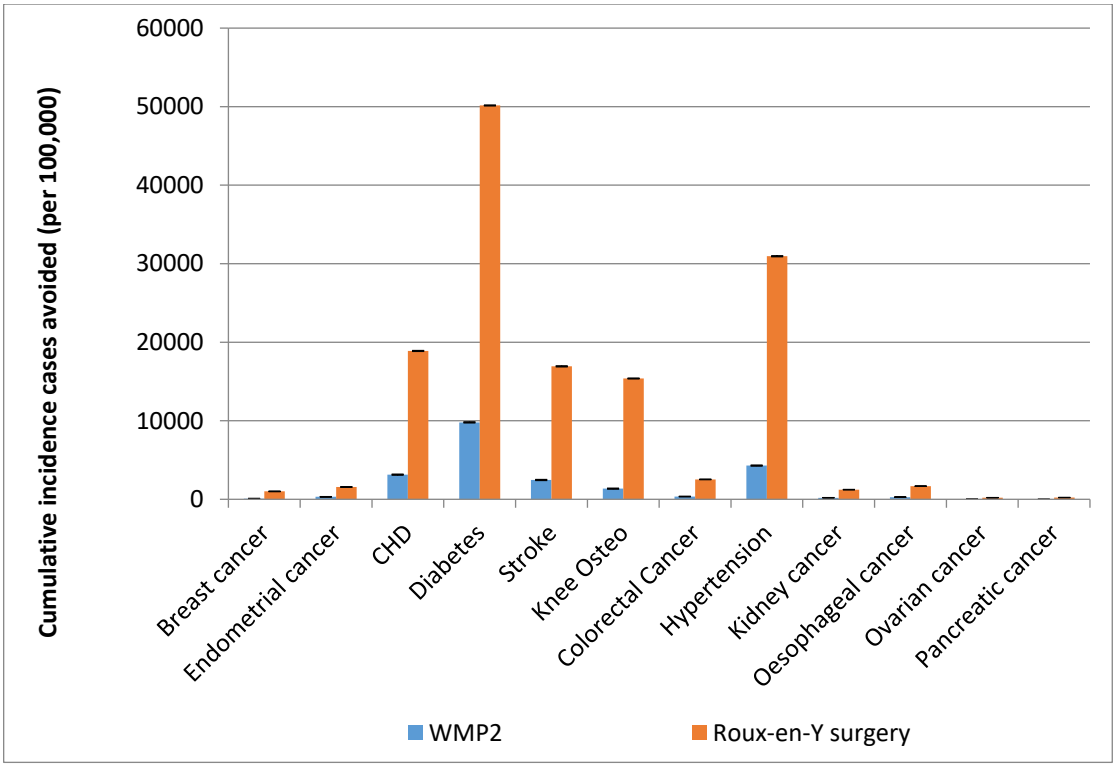
E32 Cumulative QALYs gained per 100,000 of individuals with a BMI≥35 kg/m^2 per year for WMP1 (control) and VLCD + WMP1 (intervention) compared to baseline



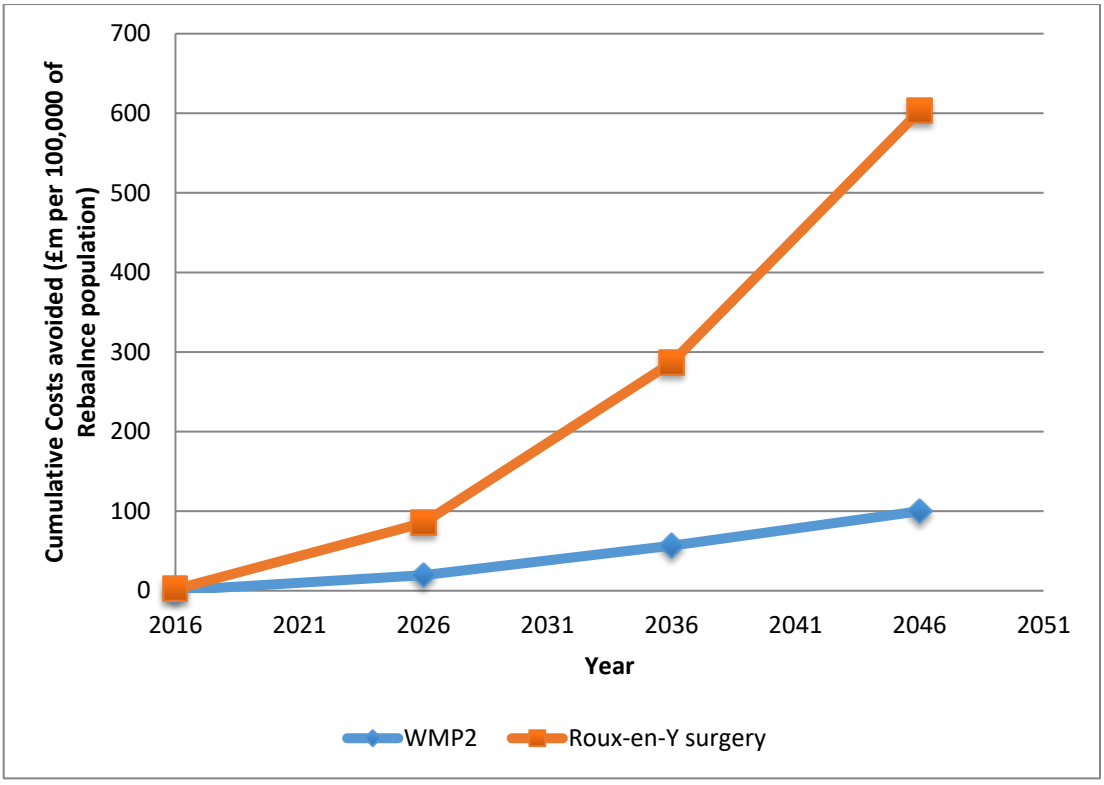
E33 Proportion of individuals with BMI≥35 kg/m^2 in the simulated population, 2016-2046



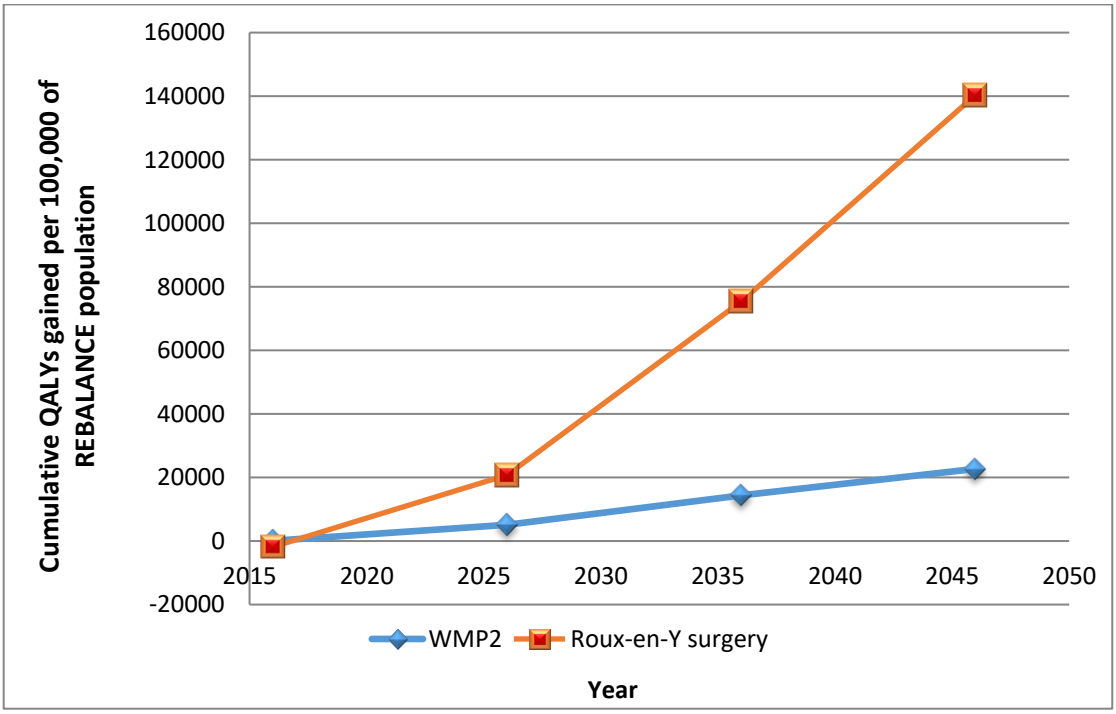
E34 Cumulative total disease cases avoided per 100,000 of individuals with a BMI ≥35 kg/m^2 over time for both WMP2 and the RYGB



E35 Cumulative cases avoided per 100,000 of individuals with a BMI ≥35 kg/m^2 per disease in 2046 for both WMP2 and the RYGB



E36 Cumulative direct healthcare costs avoided per 100,000 individuals with a BMI ≥35 kg/m^2 by year for WMPs and Roux-en-Y surgery



E37 Cumulative QALYs gained per 100,000 individuals with a BMI≥35 kg/m^2 per year