

Table S1. Characteristics of included studies

Author Year of publication	Design; Intervention	Objective	HRQoL instru- ment	Patients, <i>n</i> (M/F) ^a	Sample	Age, years mean (SD)	Sub-type ^b	Severity, mean (SD) ^a	HRQoL baseline score Mean (SD) (M/F) ^a
Aksoy et al., 2010 (2)	Observational prospective cohort; Various therapies	To determine HRQoL of rosacea patients, its relationship to clinical and demographic variables, change in HRQoL following various treatments	DLQI	308 (87/221)	Rosacea patients from dermatology clinics at their first visit, being unresponsive to previously given therapy	42.7 (14.0)	1–3	Mean: 4.0 (1.9) Mild to moderate PODSI Range 0–12 sg 0–3 (135) sg 3.1–6 (134) sg 6.1–9 (36) Moderate: 41% Severe: 8% Mean: NP Self-assessment symptoms Range 0–4 Extent of rosacea/ phyma	6.9 (5.2) 3 (4.3)/7.7 (5.2)
Böhm et al., 2013 (5)	Observational study; Intervention: NA	To explore relationships between self-reported symptom severity and psychological sequelae, including HRQoL.	DLQI	168 (80/88)	Members of a German rosacea organization	56	NP	Mean: NP Self-assessment symptoms Range 0–4 Extent of rosacea/ phyma	sg 6.0 (5.2) sg 7.1 (4.9) sg 9.6 (5.4) 4.1 (4.7) 4.8 (5.3)/3.3 (3.9)
Hiltscher et al., 2001 (7)	Observational study; Intervention: NA	To investigate the impact of rosacea and rhinophyma on HRQoL	DLQI	40	Rosacea and rhinophyma patients from a University Hospital and from a private practice	54.4	1–3	Mean: NP Self-assessment symptoms Range 0–4 Extent of rosacea/ phyma	6.1
Langenbruch et al., 2011 (9)	Cross-sectional study on the quality of health care of rosacea; Intervention: NA	To collect data on quality of care of rosacea and to compare care indicators, including HRQoL, with those found in atopic dermatitis and psoriasis	DLQI	475 (93/370)	Members of a rosacea patient association	56.3 (12.5)	NP	16.5 (15.2)% Size of the rosacea foci 2.5 (nose), 2.4 (cheeks) Intensity of rosacea Range 0–4 NP	4.3 (4.6)
Menezes et al., 2009 (10)	Prospective study; Pulsed dye laser	To evaluate the impact of the pulsed dye laser on patients' HRQoL	DLQI	22 (7/15)	Patients with rosacea subtype 1, who received pulsed dye laser therapy	55.6	1	Range 0–4 NP	5.6
Shim et al., 2013 (12)	Prospective study; Pulsed dye laser	To investigate the impact of pulsed dye laser on patients' HRQoL	DLQI	20 (11/9)	Patients with rosacea subtype 1, who received pulsed dye laser therapy	42 (range 27–58)	1	NP	17.3
Weissenbacher et al., 2007 (13)	Randomized controlled trial; Pimecrolimus cream or vehicle	To investigate the effect of pimecrolimus cream 1% in the treatment of papulopustular rosacea	DLQI	40 (25/15)	Patients with rosacea from a single centre	58 (range 36–76)	2	≥6.0 as well as erythema ≥ 2 and scaling ≥ 1 PODSI Range 0–9 Mild to severe IGA and Moderate to severe CEA Range 0–4	6.1
Baldwin et al., 2010 (3)	Open-label multicentre trial; Doxycycline 40 mg monotherapy or as add on therapy (12 weeks)	To explore the effect of mild to severe rosacea and its treatment on HRQoL	RosaQoL	966 (282/684)	Rosacea patients who would have otherwise been treated with 100 mg doxycycline	50.6 (range 18–87)	2	Range 0–4 and Moderate to severe CEA Range 0–4	3.3

Table SI cont'd.

Bamford et al., 2012 (4)	Randomized, double-blind trial; 220 mg of zinc sulphate or placebo	To determine whether oral zinc sulphate would be associated with significant improvement in rosacea	RosaQoL 44	Patients from outpatient family practice clinics and a dermatology department of a healthcare system	NP	NP
			22 (7/20) sg: Zinc	52.8 (IQR 48.7, 57.0) sg: Zinc	6.3 (IQR 5.8, 6.9) RSS Range 0–12 sg: Zinc	3.1 (IQR 2.9, 3.3) SX: 3.2 (IQR 2.8, 3.5) EX: 3.3 (IQR 3.0, 3.5) FX: 2.4 (IQR 2.0, 2.8) sg: Zinc 3.3 (IQR 3.1, 3.5) SX: 3.2 (IQR 2.9, 3.6) EX: 3.5 (IQR 3.3, 3.7) FX: 2.6 (IQR 2.2, 3.2) sg: Placebo 3.2 (0.7) SX: 3.1 EX: 3.4 (0.8) FX: 2.7 (1.0)
Fleischer & Suephy, 2005 (6)	Observational study; Azelaic acid gel (monotherapy) or azelaic acid gel and combination treatment (combination therapy)	To examine the clinical efficacy and HRQoL changes resulting from treatment of rosacea with azelaic acid gel	RosaQoL 583 (135/448)	Rosacea patients for whom their physician believed azelaic acid was appropriate	NP	NP
			22 (7/19) sg: Placebo	47.3 (IQR 41.9, 52.7) sg: Placebo	6.9 (IQR 6.3, 7.6) RSS Range 0–12 sg: Placebo	3.5 (1.3) (3.9/3.4) Mild to moderate IGA Range 0–7
Kini et al., 2010 (8)	Cross-sectional study; Intervention: NA	To determine the impact of rosacea on HRQoL among the 3 cutaneous types of rosacea	RosaQoL 135 (36/99) 34 (8/26) sg: subtype1 47 (10/37) sg: subtype2 54 (18/36) sg: subtype3	Rosacea patients from a dermatology clinic	Overall NP 58.7 (12.5) sg: subtype1 56.2 (14.9) sg: subtype2 55.7 (14.6) sg: subtype3	Overall NP 2.6 (0.6) SX: 2.4 (0.7) EX: 2.7 (0.8) FX: 2.5 (0.8) sg: subtype 1 2.6 (0.8) SX: 2.7 (0.8) EX: 2.6 (0.9) FX: 2.3 (1.0) sg: subtype 2 3.0 (0.6) SX: 3.0 (0.7) EX: 3.1 (0.7) FX: 2.5 (0.9) sg: subtype 3 PCS: 44.7 (11.1) MCS: 43.1 (14.4) PCS: 48.3 (8.9) MCS: 43.1 (14.4) sg: rosacea, no concomitant diseases
Salamon et al., 2008 (11)	Cohort; Intervention: NA	To evaluate the HRQoL in people with rosacea and to compare with HRQoL of people without skin lesions	SF-36 40 (9/31) 24 sg: rosacea, no concomitant diseases	Patients with rosacea from a dermatology clinic	50.7 (range 28–82) (SD 10.36)	NP

Studies 1–7 used the DLQI, studies 8–11 used the RosaQoL, study 12 used the SF-36. ^aDetails for subgroups (sg) when available. ^bSubtype 1 = erythematotelangiectatic rosacea. Subtype 2 = papulopustular rosacea. Subtype 3 = phymatous rosacea. PODSI: Perioral Dermatitis Severity Index (Wollenberg 2006). IGA: Investigator Global Assessment. CEAA: Clinician Erythema Assessment. RSS: Rosacea Severity Score, adapted from Standard Grading System for Rosacea (Wilkin 2004); DLQI: Dermatology Life Questionnaire Index; RosaQoL: Rosacea Quality of Life Index; HRQoL: health-related quality of life; NA: not applicable; NP: not provided; F: female; M: male; SX: Symptom; FX: Function; EX: Emotion.