

Supplementary Material 1 Literature Search and Results

Overall review objective:

To synthesise the origin, definition, and evolution of comprehensive care

Research question:

- When was comprehensive care developed (origin)?
- What is comprehensive care?
- How has comprehensive care evolved?

Literature search:

We searched ("comprehensive care" [Title/Abstract]) AND (defin*[Title/Abstract] OR history[Title/Abstract] OR evol*[Title/Abstract]) in the title or abstract via PubMed, CINAHL, and Scopus in Jan 2024.

To identify all relevant studies and limit the risk of publication bias, our extensive search strategy included grey literature. We searched on Google Scholar using the keyword "comprehensive care" to locate older publications (up to 1960) that pertained to our review topic. This consists of searching the top 100 search hits and stops when nothing is relevant on the three final and consecutive pages. Reference lists of the included papers were also be checked to find additional studies.

Search strategy

PubMed

("comprehensive care" [Title/Abstract]) AND (defin*[Title/Abstract] OR history[Title/Abstract] OR evol*[Title/Abstract])

CINAHL

(TI comprehensive care OR AB comprehensive care) AND ((TI defin* OR AB defin*) OR (TI history OR AB history) OR (TI evol* OR AB evol*))

Scopus

TITLE-ABS("comprehensive care") AND (TITLE-ABS(defin*) OR TITLE-ABS(history) OR TITLE-ABS(evolver*))

Data screening

The data screening and extraction were performed independently by two researchers. Any disagreements about the inclusion or exclusion of studies that arose between the reviewers were resolved through discussion or with an additional reviewer until a consensus was reached.

Inclusion and exclusion criteria

The inclusion criteria consisted of articles that: (1) used comprehensive care as an autonomous concept, a variable of the study, or as the fundamental concept that was defined, described, or developed explicitly, (2) explicitly discussed or investigated the origin, definition, and evolution of comprehensive care, (3) used any study designs (including reviews and editorials), (4) from academic journals or books.

The exclusion criteria were any studies that: (1) comprehensive care was not the main focus; (2) focused exclusively on the "treatment" of a specific disease; (3) not in English, (4) without full text (e.g. conference abstract)

Data extraction

The charted data were entered into a 'data charting form' using the software Excel. The content of the data charting form includes:

- Author(s), year of publication, country of study or publication
- Title, setting, methodology
- Terminology and similar terms
- Relevant results: definition, history or origin, and evolution or development

Results

Through the search and screening, 75 articles were included in this review (Figure 1), including 19 quantitative, 8 qualitative, and 34 reviews (including 25 narrative reviews) (Table 1). The included studies were published between 1954 and 2023, and most were conducted in the USA ($n = 33$), Canada ($n = 11$), and China ($n = 5$). The results of charted data for each article are provided in Supplementary file 2.

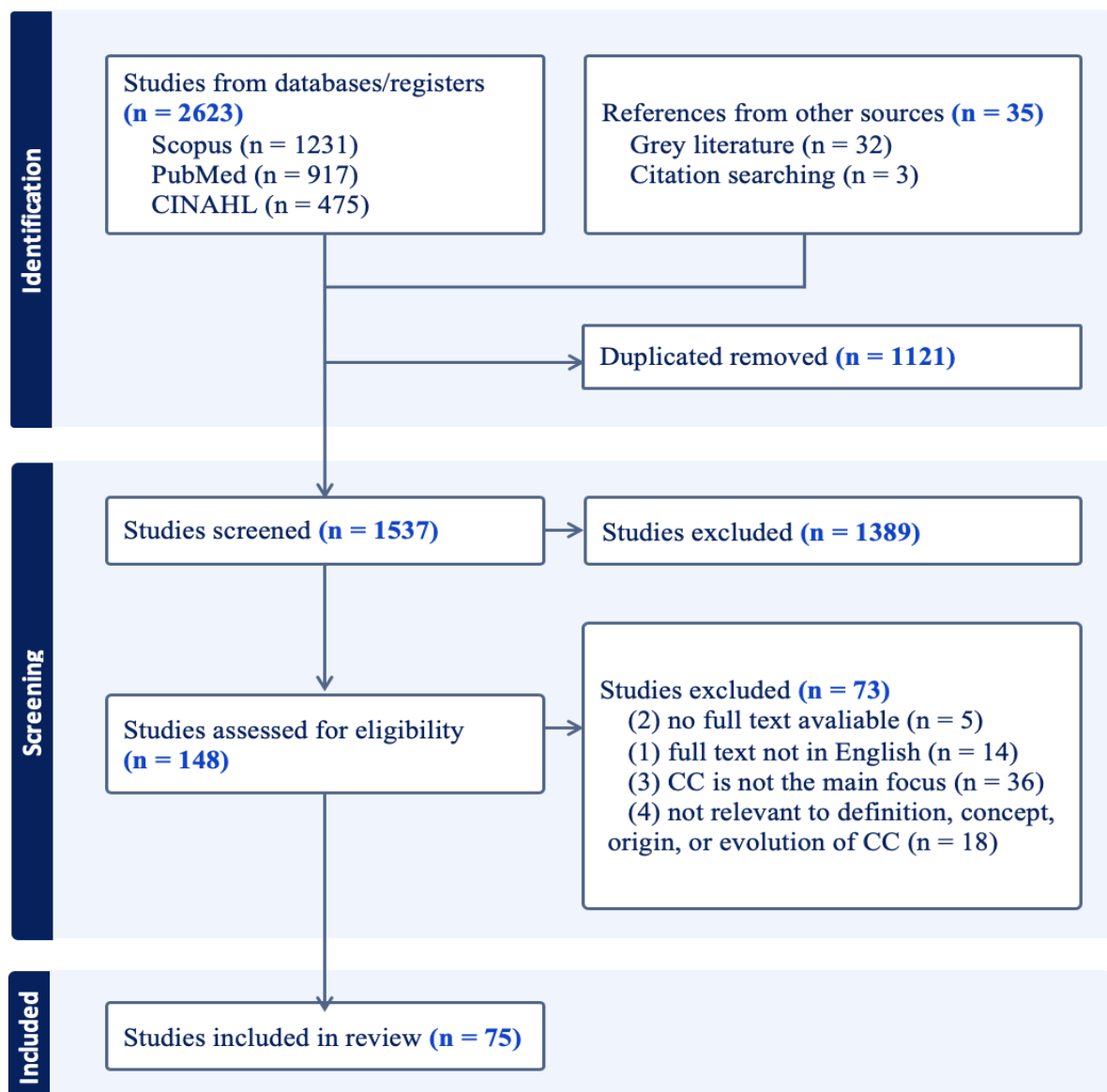


Figure 1. PRISMA flow diagram of the selection process for articles related to comprehensive care

Table 1. Characteristics of included articles (N=75)

Item	Count (n)	Percentage (%)
Country		
USA	33	44.0
Canada	11	14.7
China	5	6.7
UK	4	5.3
Iran	4	5.3
India	4	5.3
Other	14	18.7
Article type		
Review ¹	34	45.3
Quantitative	19	25.3
Qualitative	8	10.7
Other ²	14	18.7
Setting³		
Hospital	42	56.0
Community	36	48.0
School	10	13.3
Centre or Medical Home	6	8.0
Clinic	5	6.7
Terms³		
Comprehensive care ⁴	57	76.0
Primary care ⁵	14	18.7
Person-centred care ⁶	9	12.0
Integrated care ⁷	7	9.3
Holistic care ⁸	6	8.0
Multidisciplinary care ⁹	4	5.3
Dimension of Comprehensive Care³		
Whole person/holistic care/comprehensiveness	65	86.7
Coordinated care	38	50.7
Individualised/personalised/tailored care	36	48.0
Multidisciplinary care	34	45.3
Shared decision making/collaborative care	18	24.0
Individuals Involved in Care (N=71)		
Health professional	34	47.9
Health professionals; Patient; Family	19	26.8
Health professionals; Patient	11	15.5
Health professionals; Patient; Family; Carers	5	7.0
Health professionals; Family	2	2.7
Health Professions Involved in Care (N=69)		
Multidisciplinary care teams (including doctor, nurse, etc)	33	47.8
Medical staff	29	42.0
Nursing staff	7	10.1

Notes:

1. Review includes: Narrative review (n=25), Systematic review (n=9)

2. Point of view, book, book review, communication, editorial, feature, discussion, mixed method

3. Some articles had multiple settings, used multiple terms interchangeably, and had multiple dimensions of comprehensive care, so the total of terms used was greater than 75. These were combined for ease of discussion and comprehension
4. Other terms include: Comprehensive patient care, comprehensive health care, comprehensive medical care, comprehensive medicine, comprehensive services, comprehensiveness of care
5. Other terms include: Primary health care, family medicine, comprehensive family medicine, general practice, general medical care
6. Other terms include: Patient-centred care, patient-centred comprehensive care
7. Other terms include: Integrated health, integrated health care, care integration
8. Other terms include: Whole-person care
9. Other terms include: Interdisciplinary collaboration, collaboration of care