Search strategy

A search strategy was developed in consultation with information specialists experienced in systematic review searching. The following databases were searched from inception to January 2017 for relevant RCTs: MEDLINE, EMBASE, CENTRAL, CINAHL, PsychINFO and SportDiscus. A copy of the full strategy is provided (supplementary file 1). We also undertook supplementary searches of the following catalogues for grey literature (i.e. publications beyond the control of commercial publishers): EThOS, Open Grey, Zetoc and PQDT; trial registries: ClinicalTrials.gov, The WHO International Clinical Registry Platform (ICTRP), UK Clinical Trials Gateway, ISRCTN registry; forward and backward citation checking and searched the reference lists of included studies and previous systematic reviews.[14,15].

A single reviewer (GD) initially screened the titles and abstracts and discarded clearly irrelevant studies. Full papers were checked for inclusion by two reviewers (GD and MH, HD or RST) and disagreements about inclusion of studies were resolved by discussion.

Inclusion criteria

Studies were eligible if they fulfilled the following criteria:

- **Design**: RCT
- **Study population**: adults with heart failure or CHD (including myocardial infarction, revascularisation or stable angina).
- **Intervention**: CR, defined as structured exercise or PA programme alone or in combination with education and psychosocial interventions – in any setting (home, centre or community based).
- **Control**: usual care that did not include a structured exercise programme.
- **Outcomes**: PA measured objectively (e.g. accelerometer, pedometer) or subjectively (e.g. interview, questionnaire). We included studies that used amount of exercise undertaken as an acceptable proxy of PA.

We excluded studies if participants had previously received any form of CR.