nature portfolio

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Reporting Summary

Nature Portfolio wishes to improve the reproducibility of the work that we publish. This form provides structure for consistency and transparency in reporting. For further information on Nature Portfolio policies, see our Editorial Policies and the Editorial Policy Checklist.

Statistics

For all statistical analyses, confirm that the following items are present in the figure legend, table legend, main text, or Methods section.

n/a	Confirmed	
☐	☒	The exact sample size (*n*) for each experimental group/condition, given as a discrete number and unit of measurement
☐	☒	A statement on whether measurements were taken from distinct samples or whether the same sample was measured repeatedly
☐	☒	The statistical test(s) used AND whether they are one- or two-sided *Only common tests should be described solely by name; describe more complex techniques in the Methods section.*
☐	☒	A description of all covariates tested
☐	☒	A description of any assumptions or corrections, such as tests of normality and adjustment for multiple comparisons
☐	☐	A full description of the statistical parameters including central tendency (e.g. means) or other basic estimates (e.g. regression coefficient) AND variation (e.g. standard deviation) or associated estimates of uncertainty (e.g. confidence intervals)
☐	☒	For null hypothesis testing, the test statistic (e.g. *F*, *t*, *r*) with confidence intervals, effect sizes, degrees of freedom and *P* value noted *Give P values as exact values whenever suitable.*
☒	☐	For Bayesian analysis, information on the choice of priors and Markov chain Monte Carlo settings
☐	☒	For hierarchical and complex designs, identification of the appropriate level for tests and full reporting of outcomes
☒	☐	Estimates of effect sizes (e.g. Cohen's *d*, Pearson's *r*), indicating how they were calculated

Our web collection on statistics for biologists contains articles on many of the points above.

Software and code

Policy information about availability of computer code

Data collection	Clinion Software Version 3.0
Data analysis	Stata Version 16.0

For manuscripts utilizing custom algorithms or software that are central to the research but not yet described in published literature, software must be made available to editors and reviewers. We strongly encourage code deposition in a community repository (e.g. GitHub). See the Nature Portfolio guidelines for submitting code & software for further information.

Data

Policy information about availability of data

All manuscripts must include a data availability statement. This statement should provide the following information, where applicable:

- Accession codes, unique identifiers, or web links for publicly available datasets
- A description of any restrictions on data availability
- For clinical datasets or third party data, please ensure that the statement adheres to our policy

Raw data cannot be publicly shared as per the Health Ministry Screening Committee (HMSC) of the Indian Government (National Regulatory Authority for human research with contributions from other countries), which mandates that no data can be shared beyond the borders without necessary approvals. Anonymized and tabulated or curated data will be made available to bona fide researchers for the purpose of meta-analysis and similar research interests with necessary approvals. Requests may be made to Prof. Prabhakaran - dprabhakaran@ccdcindia.org. All such requests will be responded to within a two-week time frame.

Research involving human participants, their data, or biological material

Policy information about studies with human participants or human data. See also policy information about sex, gender (identity/presentation), and sexual orientation and race, ethnicity and racism.

Reporting on sex and gender	The trial participants included men and women (female 42.1%) with a mean age of 52.1± 11.1 years
Reporting on race, ethnicity, or other socially relevant groupings	The trial was conducted only in south-asian ethnicity i.e., only Indians
Population characteristics	Participants had a mean BMI of 26.5 (SD 4.2) kg/m2. At baseline, 58 % had a diagnosis of hypertension, while 42 % were newly diagnosed. Diabetes was present in 18.6 % of the cohort, and 7.3 % had dyslipidaemia. The prevalence of current smoking was low, at 6.2 %. Symptoms such as dyspnea (5.7 %), orthopnea (4.3 %), and palpitations (3.4 %) were uncommon. There was no history of coronary heart disease or stroke among participants.
Recruitment	The trial recruited hypertensive patients from outpatient clinics at 35 hospitals across India from August 2022 to February 2024. Men and women between 30 and 79 years were eligible if their sitting office systolic blood pressure was between 140 and 159 mmHg on one antihypertensive medication or 150 and 179 mmHg in drug naïve patients. Patients with a history of coronary artery and cerebrovascular diseases, congestive heart failure, serum creatinine above 1.5 mg/dl, current pregnancy and secondary hypertension were excluded.
Ethics oversight	Ethics committee approval were obtained from the Centre for Chronic Disease Control, New Delhi, Imperial College London and all the participating clinical sites. Participating Clinical sites Aman Hospital and Research Center, Vadodara, Gujarat North Eastern Indira Gandhi Regional Institute of Health and Medical Sciences, Shillong, Meghalaya Shri Dharmasthala Manjunatheshwara Medical College, Dharwad, Karnataka Rudraksha Multispeciality Hospital, Ahmedabad, Gujarat Dayanand Medical College & Hospital, Ludhiana, Punjab All India Institute of Medical Sciences, Bathinda, Punjab Sardar Patel Medical College, Bikaner, Rajasthan Shalinitai Meghe Hospital & Research Centre, Nagpur, Maharashtra MediCiti Institute of Medical Sciences, Hyderabad, Telangana Sengupta Hospitals & Research Institute, Nagpur, Maharashtra JSS Hospital, Mysore, Karnataka Apollo Excelcare Hospital, Guwahati, Assam Sri Ramachandra Institute of Higher Education and Research, Chennai, Tamil Nadu Osmania General Hospital, Hyderabad, Telangana B.K.L. Walawalkar Rural Medical College, Sawarde, Maharashtra All India Institute of Medical Sciences, Jodhpur, Rajasthan Apollo Institute of Medical Sciences, Hyderabad, Telangana Apollo DRDO Hospitals, Hyderabad, Telangana Madras Medical College, Chennai, Tamil Nadu Nazareth Hospital, Shillong, Meghalaya All India Institute of Medical Sciences, New Delhi, Delhi Lakshmi Hospital, Palakkad, Kerala Apollo Hospitals, Ahmedabad, Gujarat Lifecare Hospital & Research Centre, Bengaluru, Karnataka Lalitha Super specialties Hospital, Guntur, Andhra Pradesh BLDE Hospital, Vijayapura, Karnataka Indraprastha Apollo Hospitals, New Delhi, Delhi Apollo Hospitals, Madurai, Tamil Nadu Apollo Hospitals, Visakhapatnam, Andhra Pradesh Assam Medical College, Dibrugarh, Assam Bhatia Hospital, Mumbai, Maharashtra Sadbhavna Medical and Heart Institute, Patiala, Punjab Lisie Hospital, Kochi, Kerala Apollo Hospitals, Bhubaneshwar, Odisha Indiana Hospital & Heart Institute, Mangalore, Karnataka Aman Hospital and Research Center, Vadodara, Gujarat North Eastern Indira Gandhi Regional Institute of Health and Medical Sciences, Shillong, Meghalaya Shri Dharmasthala Manjunatheshwara Medical College, Dharwad, Karnataka Rudraksha Multispeciality Hospital, Ahmedabad, Gujarat Dayanand Medical College & Hospital, Ludhiana, Punjab All India Institute of Medical Sciences, Bathinda, Punjab Sardar Patel Medical College, Bikaner, Rajasthan Shalinitai Meghe Hospital & Research Centre, Nagpur, Maharashtra MediCiti Institute of Medical Sciences, Hyderabad, Telangana Sengupta Hospitals & Research Institute, Nagpur, Maharashtra JSS Hospital, Mysore, Karnataka Apollo Excelcare Hospital, Guwahati, Assam

Sri Ramachandra Institute of Higher Education and Research, Chennai, Tamil Nadu
Osmania General Hospital, Hyderabad, Telangana
B.K.L. Walawalkar Rural Medical College, Sawarde, Maharashtra
All India Institute of Medical Sciences, Jodhpur, Rajasthan
Apollo Institute of Medical Sciences, Hyderabad, Telangana
Apollo DRDO Hospitals, Hyderabad, Telangana
Madras Medical College, Chennai, Tamil Nadu
Nazareth Hospital, Shillong, Meghalaya
All India Institute of Medical Sciences, New Delhi, Delhi
Lakshmi Hospital, Palakkad, Kerala
Apollo Hospitals, Ahmedabad, Gujarat
Lifecare Hospital & Research Centre, Bengaluru, Karnataka
Lalitha Super specialties Hospital, Guntur, Andhra Pradesh
BLDE Hospital, Vijayapura, Karnataka
Indraprastha Apollo Hospitals, New Delhi, Delhi
Apollo Hospitals, Madurai, Tamil Nadu
Apollo Hospitals, Visakhapatnam, Andhra Pradesh
Assam Medical College, Dibrugarh, Assam
Bhatia Hospital, Mumbai, Maharashtra
Sadbhavna Medical and Heart Institute, Patiala, Punjab
Lisie Hospital, Kochi, Kerala
Apollo Hospitals, Bhubaneshwar, Odisha
Indiana Hospital & Heart Institute, Mangalore, Karnataka

Note that full information on the approval of the study protocol must also be provided in the manuscript.

Field-specific reporting

Please select the one below that is the best fit for your research. If you are not sure, read the appropriate sections before making your selection.

☒ Life sciences ☐ Behavioural & social sciences ☐ Ecological, evolutionary & environmental sciences

For a reference copy of the document with all sections, see nature.com/documents/nr-reporting-summary-flat.pdf

Life sciences study design

All studies must disclose on these points even when the disclosure is negative.

Sample size	we recruited 1981 people with hypertension. To detect a clinically meaningful difference of 3.0 mmHg between arms in the 24-h mean ASBP assuming an SD in 24-h ASBP of 15 mmHg with 85 % power and adjusting for three comparisons using a two-sided significance level of 0.0167, we needed a minimum of 590 participants per arm. Factoring in a 10 % dropout rate, we were required to recruit a total of 1968 participants (656 participants per arm) to achieve 590 evaluable participants per group.
Data exclusions	None
Replication	TOPSPIN is a original research and first of its kind in the world. It is not a replication of any other studies.
Randomization	Using a blocked design, randomisation was stratified by age (<55 or ≥55 years) and trial site - Computer generated built on Redcap.
Blinding	Participants and investigators were blinded to the treatment received.

Behavioural & social sciences study design

All studies must disclose on these points even when the disclosure is negative.

Study description	*Briefly describe the study type including whether data are quantitative, qualitative, or mixed-methods (e.g. qualitative cross-sectional, quantitative experimental, mixed-methods case study).*
Research sample	*State the research sample (e.g. Harvard university undergraduates, villagers in rural India) and provide relevant demographic information (e.g. age, sex) and indicate whether the sample is representative. Provide a rationale for the study sample chosen. For studies involving existing datasets, please describe the dataset and source.*
Sampling strategy	*Describe the sampling procedure (e.g. random, snowball, stratified, convenience). Describe the statistical methods that were used to predetermine sample size OR if no sample-size calculation was performed, describe how sample sizes were chosen and provide a rationale for why these sample sizes are sufficient. For qualitative data, please indicate whether data saturation was considered, and what criteria were used to decide that no further sampling was needed.*
Data collection	*Provide details about the data collection procedure, including the instruments or devices used to record the data (e.g. pen and paper, computer, eye tracker, video or audio equipment) whether anyone was present besides the participant(s) and the researcher, and whether the researcher was blind to experimental condition and/or the study hypothesis during data collection.*

Timing	*Indicate the start and stop dates of data collection. If there is a gap between collection periods, state the dates for each sample cohort.*
Data exclusions	*If no data were excluded from the analyses, state so OR if data were excluded, provide the exact number of exclusions and the rationale behind them, indicating whether exclusion criteria were pre-established.*
Non-participation	*State how many participants dropped out/declined participation and the reason(s) given OR provide response rate OR state that no participants dropped out/declined participation.*
Randomization	*If participants were not allocated into experimental groups, state so OR describe how participants were allocated to groups, and if allocation was not random, describe how covariates were controlled.*

Ecological, evolutionary & environmental sciences study design

All studies must disclose on these points even when the disclosure is negative.

Study description	*Briefly describe the study. For quantitative data include treatment factors and interactions, design structure (e.g. factorial, nested, hierarchical), nature and number of experimental units and replicates.*
Research sample	*Describe the research sample (e.g. a group of tagged Passer domesticus, all Stenocereus thurberi within Organ Pipe Cactus National Monument), and provide a rationale for the sample choice. When relevant, describe the organism taxa, source, sex, age range and any manipulations. State what population the sample is meant to represent when applicable. For studies involving existing datasets, describe the data and its source.*
Sampling strategy	*Note the sampling procedure. Describe the statistical methods that were used to predetermine sample size OR if no sample-size calculation was performed, describe how sample sizes were chosen and provide a rationale for why these sample sizes are sufficient.*
Data collection	*Describe the data collection procedure, including who recorded the data and how.*
Timing and spatial scale	*Indicate the start and stop dates of data collection, noting the frequency and periodicity of sampling and providing a rationale for these choices. If there is a gap between collection periods, state the dates for each sample cohort. Specify the spatial scale from which the data are taken*
Data exclusions	*If no data were excluded from the analyses, state so OR if data were excluded, describe the exclusions and the rationale behind them, indicating whether exclusion criteria were pre-established.*
Reproducibility	*Describe the measures taken to verify the reproducibility of experimental findings. For each experiment, note whether any attempts to repeat the experiment failed OR state that all attempts to repeat the experiment were successful.*
Randomization	*Describe how samples/organisms/participants were allocated into groups. If allocation was not random, describe how covariates were controlled. If this is not relevant to your study, explain why.*
Blinding	*Describe the extent of blinding used during data acquisition and analysis. If blinding was not possible, describe why OR explain why blinding was not relevant to your study.*

Did the study involve field work? ☒ Yes ☐ No

Field work, collection and transport

Field conditions	35 tertiary care hospitals with primary care feeder clinics in India
Location	India
Access & import/export	Not applicable
Disturbance	Not applicable

Reporting for specific materials, systems and methods

We require information from authors about some types of materials, experimental systems and methods used in many studies. Here, indicate whether each material, system or method listed is relevant to your study. If you are not sure if a list item applies to your research, read the appropriate section before selecting a response.

Materials & experimental systems

n/a	Involved in the study
☒	☐ Antibodies
☒	☐ Eukaryotic cell lines
☒	☐ Palaeontology and archaeology
☒	☐ Animals and other organisms
☐	☒ Clinical data
☒	☐ Dual use research of concern
☒	☐ Plants

Methods

n/a	Involved in the study
☒	☐ ChIP-seq
☒	☐ Flow cytometry
☒	☐ MRI-based neuroimaging

Antibodies

Antibodies used — *Describe all antibodies used in the study; as applicable, provide supplier name, catalog number, clone name, and lot number.*

Validation — *Describe the validation of each primary antibody for the species and application, noting any validation statements on the manufacturer's website, relevant citations, antibody profiles in online databases, or data provided in the manuscript.*

Eukaryotic cell lines

Policy information about cell lines and Sex and Gender in Research

Cell line source(s) — *State the source of each cell line used and the sex of all primary cell lines and cells derived from human participants or vertebrate models.*

Authentication — *Describe the authentication procedures for each cell line used OR declare that none of the cell lines used were authenticated.*

Mycoplasma contamination — *Confirm that all cell lines tested negative for mycoplasma contamination OR describe the results of the testing for mycoplasma contamination OR declare that the cell lines were not tested for mycoplasma contamination.*

Commonly misidentified lines (See ICLAC register) — *Name any commonly misidentified cell lines used in the study and provide a rationale for their use.*

Palaeontology and Archaeology

Specimen provenance — *Provide provenance information for specimens and describe permits that were obtained for the work (including the name of the issuing authority, the date of issue, and any identifying information). Permits should encompass collection and, where applicable, export.*

Specimen deposition — *Indicate where the specimens have been deposited to permit free access by other researchers.*

Dating methods — *If new dates are provided, describe how they were obtained (e.g. collection, storage, sample pretreatment and measurement), where they were obtained (i.e. lab name), the calibration program and the protocol for quality assurance OR state that no new dates are provided.*

☐ Tick this box to confirm that the raw and calibrated dates are available in the paper or in Supplementary Information.

Ethics oversight — *Identify the organization(s) that approved or provided guidance on the study protocol, OR state that no ethical approval or guidance was required and explain why not.*

Note that full information on the approval of the study protocol must also be provided in the manuscript.

Animals and other research organisms

Policy information about studies involving animals; ARRIVE guidelines recommended for reporting animal research, and Sex and Gender in Research

Laboratory animals — *For laboratory animals, report species, strain and age OR state that the study did not involve laboratory animals.*

Wild animals — *Provide details on animals observed in or captured in the field; report species and age where possible. Describe how animals were caught and transported and what happened to captive animals after the study (if killed, explain why and describe method; if released, say where and when) OR state that the study did not involve wild animals.*

Reporting on sex — *Indicate if findings apply to only one sex; describe whether sex was considered in study design, methods used for assigning sex. Provide data disaggregated for sex where this information has been collected in the source data as appropriate; provide overall*

	numbers in this Reporting Summary. Please state if this information has not been collected. Report sex-based analyses where performed, justify reasons for lack of sex-based analysis.
Field-collected samples	*For laboratory work with field-collected samples, describe all relevant parameters such as housing, maintenance, temperature, photoperiod and end-of-experiment protocol OR state that the study did not involve samples collected from the field.*
Ethics oversight	*Identify the organization(s) that approved or provided guidance on the study protocol, OR state that no ethical approval or guidance was required and explain why not.*

Note that full information on the approval of the study protocol must also be provided in the manuscript.

Clinical data

Policy information about clinical studies

All manuscripts should comply with the ICMJE guidelines for publication of clinical research and a completed CONSORT checklist must be included with all submissions.

Clinical trial registration	NCT05683301
Study protocol	https://doi.org/10.1016/j.ijcrp.2024.200346
Data collection	Data was collected by trained clinical research coordinators and site-investigators at baseline, two months, four months and six months. We used a validated electronic clinical data management system - CLINION Software Version 3.0 for transfer of data from the 35 participating clinical sites to the research coordinating centre. The study participant recruitment was conducted between August 2022 to February 2024 and the past participant was followed till August 2024.
Outcomes	The primary outcome was the difference among the treatment groups in the mean reduction in the 24-hour ambulatory systolic blood pressure at six months adjusted for baseline ambulatory systolic blood pressure. Secondary outcomes included a reduction in ambulatory diastolic blood pressure; mean change in the daytime (9 a.m. to 9 p.m.) and nighttime (12 midnight to 6 a.m.) ambulatory blood pressures; change in office blood pressure at 2, 4, and 6 months; the proportion of participants achieving conservative (<140/90 mmHg) or more current (<130/80 mmHg) blood pressure control level at any of the office visits and maintained at six months; the proportion of "responders" to treatment (defined as a reduction of systolic blood pressure of ≥20 mmHg and diastolic blood pressure of ≥10 mmHg at any of the office visits and maintained at 6 months); changes in laboratory investigations, fasting blood glucose, lipid profile, serum sodium, potassium, urea, creatinine and estimated glomerular filtration rate (eGFR). The safety endpoint of the study was the occurrence of adverse or serious adverse events leading to withdrawal of the study drug at any of the follow-ups. Pre-specified sub-group analysis for the primary outcomes were age (<55 and ≥ 55 years), sex (male and female), self-reported history of diabetes at baseline and previously or newly-diagnosed hypertension at baseline, and body mass index (BMI - <23, 23-24.9 and ≥25 Kg/m2).

Dual use research of concern

Policy information about dual use research of concern

Hazards

Could the accidental, deliberate or reckless misuse of agents or technologies generated in the work, or the application of information presented in the manuscript, pose a threat to:

No	Yes	
☒	☐	Public health
☒	☐	National security
☒	☐	Crops and/or livestock
☒	☐	Ecosystems
☒	☐	Any other significant area

Experiments of concern

Does the work involve any of these experiments of concern:

No	Yes	
☒	☐	Demonstrate how to render a vaccine ineffective
☒	☐	Confer resistance to therapeutically useful antibiotics or antiviral agents
☒	☐	Enhance the virulence of a pathogen or render a nonpathogen virulent
☒	☐	Increase transmissibility of a pathogen
☒	☐	Alter the host range of a pathogen
☒	☐	Enable evasion of diagnostic/detection modalities
☒	☐	Enable the weaponization of a biological agent or toxin
☒	☐	Any other potentially harmful combination of experiments and agents

Plants

Seed stocks

Report on the source of all seed stocks or other plant material used. If applicable, state the seed stock centre and catalogue number. If plant specimens were collected from the field, describe the collection location, date and sampling procedures.

Novel plant genotypes

Describe the methods by which all novel plant genotypes were produced. This includes those generated by transgenic approaches, gene editing, chemical/radiation-based mutagenesis and hybridization. For transgenic lines, describe the transformation method, the number of independent lines analyzed and the generation upon which experiments were performed. For gene-edited lines, describe the editor used, the endogenous sequence targeted for editing, the targeting guide RNA sequence (if applicable) and how the editor was applied.

Authentication

Describe any authentication procedures for each seed stock used or novel genotype generated. Describe any experiments used to assess the effect of a mutation and, where applicable, how potential secondary effects (e.g. second site T-DNA insertions, mosiacism, off-target gene editing) were examined.

ChIP-seq

Data deposition

☐ Confirm that both raw and final processed data have been deposited in a public database such as GEO.

☐ Confirm that you have deposited or provided access to graph files (e.g. BED files) for the called peaks.

Data access links
May remain private before publication.

For "Initial submission" or "Revised version" documents, provide reviewer access links. For your "Final submission" document, provide a link to the deposited data.

Files in database submission

Provide a list of all files available in the database submission.

Genome browser session
(e.g. UCSC)

Provide a link to an anonymized genome browser session for "Initial submission" and "Revised version" documents only, to enable peer review. Write "no longer applicable" for "Final submission" documents.

Methodology

Replicates

Describe the experimental replicates, specifying number, type and replicate agreement.

Sequencing depth

Describe the sequencing depth for each experiment, providing the total number of reads, uniquely mapped reads, length of reads and whether they were paired- or single-end.

Antibodies

Describe the antibodies used for the ChIP-seq experiments; as applicable, provide supplier name, catalog number, clone name, and lot number.

Peak calling parameters

Specify the command line program and parameters used for read mapping and peak calling, including the ChIP, control and index files used.

Data quality

Describe the methods used to ensure data quality in full detail, including how many peaks are at FDR 5% and above 5-fold enrichment.

Software

Describe the software used to collect and analyze the ChIP-seq data. For custom code that has been deposited into a community repository, provide accession details.

Flow Cytometry

Plots

Confirm that:

☐ The axis labels state the marker and fluorochrome used (e.g. CD4-FITC).

☐ The axis scales are clearly visible. Include numbers along axes only for bottom left plot of group (a 'group' is an analysis of identical markers).

☐ All plots are contour plots with outliers or pseudocolor plots.

☐ A numerical value for number of cells or percentage (with statistics) is provided.

Methodology

Sample preparation	*Describe the sample preparation, detailing the biological source of the cells and any tissue processing steps used.*
Instrument	*Identify the instrument used for data collection, specifying make and model number.*
Software	*Describe the software used to collect and analyze the flow cytometry data. For custom code that has been deposited into a community repository, provide accession details.*
Cell population abundance	*Describe the abundance of the relevant cell populations within post-sort fractions, providing details on the purity of the samples and how it was determined.*
Gating strategy	*Describe the gating strategy used for all relevant experiments, specifying the preliminary FSC/SSC gates of the starting cell population, indicating where boundaries between "positive" and "negative" staining cell populations are defined.*

☐ Tick this box to confirm that a figure exemplifying the gating strategy is provided in the Supplementary Information.

Magnetic resonance imaging

Experimental design

Design type	*Indicate task or resting state; event-related or block design.*
Design specifications	*Specify the number of blocks, trials or experimental units per session and/or subject, and specify the length of each trial or block (if trials are blocked) and interval between trials.*
Behavioral performance measures	*State number and/or type of variables recorded (e.g. correct button press, response time) and what statistics were used to establish that the subjects were performing the task as expected (e.g. mean, range, and/or standard deviation across subjects).*

Acquisition

Imaging type(s)	*Specify: functional, structural, diffusion, perfusion.*
Field strength	*Specify in Tesla*
Sequence & imaging parameters	*Specify the pulse sequence type (gradient echo, spin echo, etc.), imaging type (EPI, spiral, etc.), field of view, matrix size, slice thickness, orientation and TE/TR/flip angle.*
Area of acquisition	*State whether a whole brain scan was used OR define the area of acquisition, describing how the region was determined.*

Diffusion MRI ☐ Used ☐ Not used

Preprocessing

Preprocessing software	*Provide detail on software version and revision number and on specific parameters (model/functions, brain extraction, segmentation, smoothing kernel size, etc.).*
Normalization	*If data were normalized/standardized, describe the approach(es): specify linear or non-linear and define image types used for transformation OR indicate that data were not normalized and explain rationale for lack of normalization.*
Normalization template	*Describe the template used for normalization/transformation, specifying subject space or group standardized space (e.g. original Talairach, MNI305, ICBM152) OR indicate that the data were not normalized.*
Noise and artifact removal	*Describe your procedure(s) for artifact and structured noise removal, specifying motion parameters, tissue signals and physiological signals (heart rate, respiration).*

Volume censoring

Define your software and/or method and criteria for volume censoring, and state the extent of such censoring.

Statistical modeling & inference

Model type and settings

Specify type (mass univariate, multivariate, RSA, predictive, etc.) and describe essential details of the model at the first and second levels (e.g. fixed, random or mixed effects; drift or auto-correlation).

Effect(s) tested

Define precise effect in terms of the task or stimulus conditions instead of psychological concepts and indicate whether ANOVA or factorial designs were used.

Specify type of analysis: ☐ Whole brain ☐ ROI-based ☐ Both

Statistic type for inference

Specify voxel-wise or cluster-wise and report all relevant parameters for cluster-wise methods.

(See Eklund et al. 2016)

Correction

Describe the type of correction and how it is obtained for multiple comparisons (e.g. FWE, FDR, permutation or Monte Carlo).

Models & analysis

n/a	Involved in the study
☒	☐ Functional and/or effective connectivity
☒	☐ Graph analysis
☒	☐ Multivariate modeling or predictive analysis

Functional and/or effective connectivity

Report the measures of dependence used and the model details (e.g. Pearson correlation, partial correlation, mutual information).

Graph analysis

Report the dependent variable and connectivity measure, specifying weighted graph or binarized graph, subject- or group-level, and the global and/or node summaries used (e.g. clustering coefficient, efficiency, etc.).

Multivariate modeling and predictive analysis

Specify independent variables, features extraction and dimension reduction, model, training and evaluation metrics.