

Supplementary Table 1. Baseline characteristics of included studies

Study (Author, year)	Sample Size (n)	Baseline PDQ Score (mean \pm SD)	Months of Follow-Up	Follow-up PDQ Score (mean \pm SD)	Mean Age at Surgery (years)	Disease Duration at Surgery (years)	Gender (% Male)
Acera 2019	40	38.1 \pm 13	12 60	27.4 \pm 14.6 36.7 \pm 15.4	62.2	14.1	64
Bjerkness 2020	53	27 \pm 12	12	20 \pm 15	62	11	75
Bjerkness 2022	46	26 \pm 11.9	60	27.3 \pm 15.2	63	12	72
Boussac 2021	303	31.3 \pm 11.4	12	26.8 \pm 13.5	60	10.1	67.3
Chan 2016	18	47.1 \pm 10.9	12 24	32.1 \pm 11.4 28.3 \pm 11.6	55	13	68
Chen asleep 2023	25	29.2 \pm 12.1	12	21.8 \pm 14.3	57.3	10.3	68
Chen awake 2023	21	29.4 \pm 11.7	12	21.1 \pm 12.2	53.8	9.0	71
Chircop 2018	24	37.5 \pm 14.7	12	17.9 \pm 9.5	60.2	8.8	62
Dafsari 2018	65	33.3 \pm 17.4*	24	30.6 \pm 18.5*	62.3	10.9	75
Drapier 2005	27	44.1 \pm 10.9	12	34.8 \pm 12.3	60.8	14.6	70
Erdem 2023	22	42.3 \pm 22	12	27.1 \pm 22	57.3	11	63.6
Follett 2010	147	46.9 \pm 12.6	24	42.7 \pm 15.6	61.9	11.1	79
Georgiev 2021	28	53.4 \pm 4.5	12 24 36	39.0 \pm 3.6 40.2 \pm 2.9 46.14 \pm 4.1	64.4	8.5	61
Hong 2024	27	28.9 \pm 9.2	24	17.6 \pm 3.7	48.4	8.9	67
Houeto 2006	20	43.1 \pm 13.1	24	30.9 \pm 13	54.9	10.9	75
Jiang 2015	10	32.4 \pm 14.1	12 36 60	19.8 \pm 8.5 13.5 \pm 10.5 26.1 \pm 9.7	59.4	9.3	60
Jiang 2023	53	36.73 \pm 16.86	12 60	27.29 \pm 16.51 38.8 \pm 21.19	58.89	9.45	45
Jost 2021	73	32.8 \pm 16.8*	36	31.1 \pm 20.2*	62	10.3	59
Jost 2024	61 57	31.8 \pm 14.5* 31.8 \pm 14.5*	12 60	23.4 \pm 14.6* 37.1 \pm 17.0*	62.6	10.4	60
Krause 2022	46	39 \pm 15	12	28.8 \pm 18	51	12.9	59
Lewis 2014	28	36.3 \pm 13.76	12	30.84 \pm 14.07	61.18	12.43	61
Lezcano 2016	64 54	41.1 \pm 14.1 41.1 \pm 14.1	12 60	26.1 \pm 14.1 37.5 \pm 16.5	61.3 61.1	13.2 13	61 57

Li 2020	16	52.49 ± 17.93	12	24.72 ± 9.83	60.25	10.38	50
Lin 2021	40	63.20 ± 26.43	12	45.20 ± 29.74	61.3	9.98	57
Liu 2019	45	39.05 ± 14.23	12	31.45 ± 17.75	61.8	11.9	47
Liu 2021	47	34.00 ± 2.64	12	23.45 ± 2.45	65.3	11.9	n.r.
	23		36	31.68 ± 3.44			
Lu 2020	87	58 ± 1.92	12	34.74 ± 5	62	n.r.	70
Lu_LA 2022	81	64 ± 9.6	12	40.6 ± 5.7	63.7	9.5	60
			24	48.0 ± 5.1			
Lu_GA 2022	76	64.7 ± 7.8	12	42.4 ± 9.1	62.8	9.3	60
			24	48.7 ± 7.8			
Luo 2023	12	33.0 ± 10.3	12	20.9 ± 14.1	61.3	11.3	50
Lyons 2005	59	41.7 ± 11.8	12	28.2 ± 13.6	59.5	11.9	75
Mameli 2022	20	40.15 ± 14.80*	12	30.73 ± 17.88*	57.6	10.95	40
Moran 2020	137	37.59 ± 21.15	12	29.98 ± 23.31	60	11	n.r.
Nazzaro 2011	24	32.4 ± 14.2	12	17.2 ± 9.6	64.2	10.6	67
Pintér direc. 2022	52	28.4 ± 15	12	17.3 ± 10.8	60.3	9.7	63
Pintér omni. 2022	57	24.5 ± 12.2	12	18.9 ± 13.9	59.7	10.3	65
Schuepbach 2013	110	30.1 ± 14.68	24	22 ± 12.59	52.9	7.3	76
Sobstyl 2014	16	35.4 ± 6.6	12	24.7 ± 4.2	63.5	n.r.	69
	14	35.8 ± 6.9	24	26.0 ± 3.9			
Soulas 2011	35	49.89 ± 11.06	12	39.12 ± 16.09	62.02	14.49	n.r.
Tykocki 2012	74	64.95 ± 30.09	12	39.51 ± 17.54	55.6	12.3	51
			24	43.15 ± 20.54			
Vats young 2019	20	24.55 ± 2.14	12	19.59 ± 2.32	51.95	n.r.	75
			24	17.54 ± 2.51			
Vats old 2019	20	22.82 ± 3.33	12	19.90 ± 1.95	68.75		
			24	18.16 ± 1.84			
Vinke 2022	29	46.9 ± 21.5	12	39.2 ± 20.8	62	9	83
Weaver 2012	66	48.1 ± 13.2	24	39.5 ± 15.3	60.7	11.3	80
	62		36	44 ± 15.1			
Williams 2010	183	37.5 ± 14.6	12	32.5 ± 15.8	59	11.5	68
Yamamoto 2016	31	33.63 ± 2.70	12	28.29 ± 2.72	66.7	11.6	n.r.
	12	33.63 ± 2.70	36	28.08 ± 5.61			
	7	33.63 ± 2.70	60	42.05 ± 7.77			

* PDQ8 was used to measure quality of life.

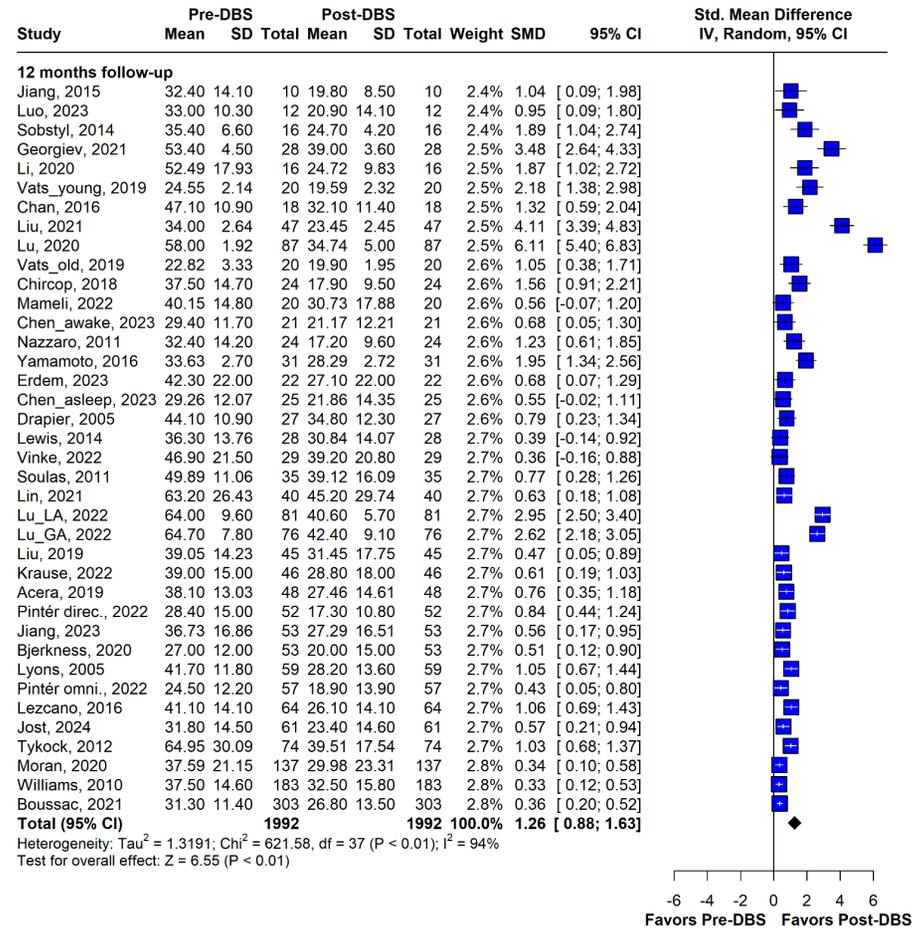
n.r., not reported; PDQ, Parkinson's Disease Questionnaire.

REFERENCES OF INCLUDED STUDIES

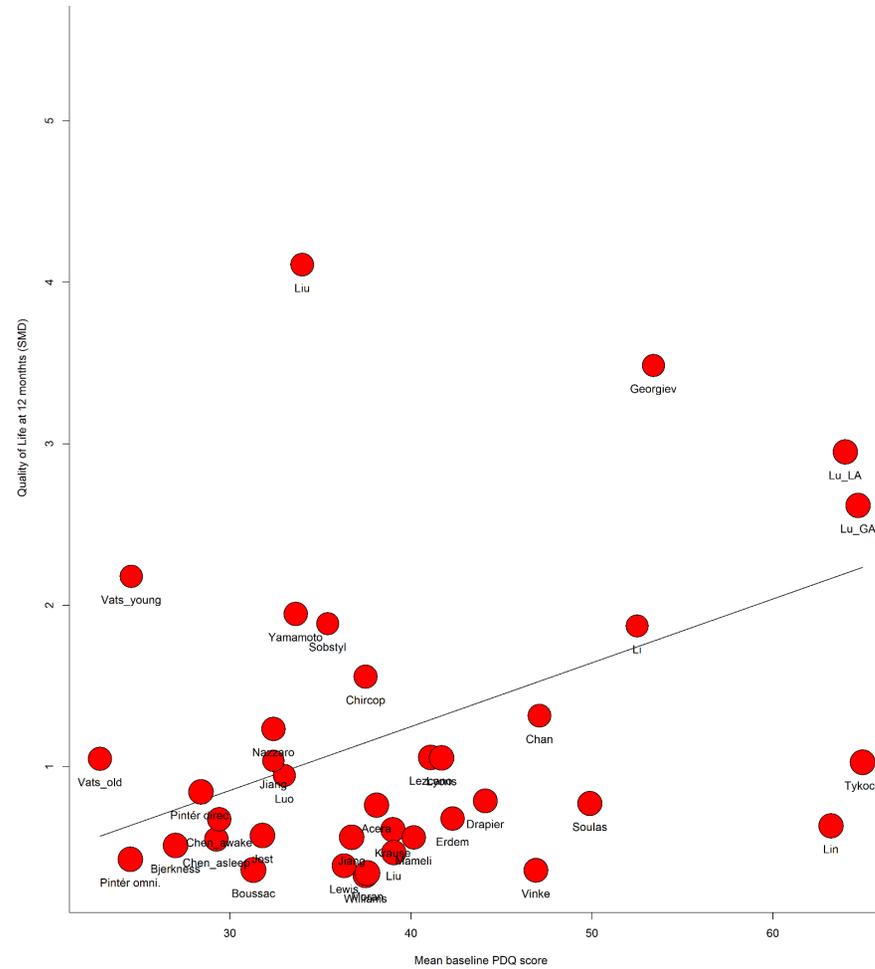
1. Acera M, Molano A, Tijero B, et al. Long-term impact of subthalamic stimulation on cognitive function in patients with advanced Parkinson's disease. *Neurologia (Engl Ed)*. 2019 Nov-Dec;34(9):573-581. English, Spanish. doi: 10.1016/j.nrl.2017.05.009. Epub 2017 Jul 14
2. Bjerknes S, Skogseid IM, Hauge TJ, et al. Subthalamic deep brain stimulation improves sleep and excessive sweating in Parkinson's disease. *NPJ Parkinsons Dis*. 2020 Oct 14;6:29. doi: 10.1038/s41531-020-00131-0
3. Bjerknes S, Toft M, Brandt R, et al. Subthalamic Nucleus Stimulation in Parkinson's Disease: 5-Year Extension Study of a Randomized Trial. *Mov Disord Clin Pract*. 2021 Oct 18;9(1):48-59. doi: 10.1002/mdc3.13348
4. Boussac M, Arbus C, Klinger H, et al. Personality Related to Quality-of-Life Improvement After Deep Brain Stimulation in Parkinson's Disease (PSYCHO-STIM II). *J Parkinsons Dis*. 2022;12(2):699-711. doi:10.3233/JPD-212883
5. Chan DT, Zhu CX, Lau CK, et al. Subthalamic Nucleus Deep Brain Stimulation for Parkinson Disease in Hong Kong: A Prospective Territory-Wide 2-Year Follow-Up Study. *World Neurosurg*. 2016;93:229-236. doi:10.1016/j.wneu.2016.06.002.
6. Chen W, Zhang C, Jiang N, et al. The efficacy and safety of asleep and awake subthalamic deep brain stimulation for Parkinson's disease patients: A 1-year follow-up. *Front Aging Neurosci*. 2023;15:1120468. Published 2023 Apr 18. doi:10.3389/fnagi.2023.1120468
7. Chircop C, Dingli N, Aquilina A, Zrinzo L, Aquilina J. MRI-verified "asleep" deep brain stimulation in Malta through cross border collaboration: clinical outcome of the first five years. *Br J Neurosurg*. 2018;32(4):365-371. doi:10.1080/02688697.2018.1478061
8. Dafsari HS, Silverdale M, Strack M, et al. Nonmotor symptoms evolution during 24 months of bilateral subthalamic stimulation in Parkinson's disease. *Mov Disord*. 2018;33(3):421-430. doi:10.1002/mds.27283
9. Drapier S, Raoul S, Drapier D, et al. Only physical aspects of quality of life are significantly improved by bilateral subthalamic stimulation in Parkinson's disease. *J Neurol*. 2005;252(5):583-588. doi:10.1007/s00415-005-0704-4
10. Erdem NŞ, Gencer GYG, Özkaynak SS, Uçar T, Baysal ÖD. Neuropsychiatric Effects of Bilateral Subthalamic Nucleus Deep Brain Stimulation in Parkinson's Disease: Results at the 12-Month Follow-up. *Noro Psikiyatrs Ars*. 2023;60(2):169-173. Published 2023 May 4. doi:10.29399/npa.28241
11. Follett KA, Weaver FM, Stern M, et al. Pallidal versus subthalamic deep-brain stimulation for Parkinson's disease. *N Engl J Med*. 2010;362(22):2077-2091. doi:10.1056/NEJMoa0907083
12. Georgiev D, Mencinger M, Rajnar R, et al. Long-term effect of bilateral STN-DBS on non-motor symptoms in Parkinson's disease: A four-year observational, prospective study. *Parkinsonism Relat Disord*. 2021;89:13-16. doi:10.1016/j.parkreldis.2021.06.017
13. Hong J, Xie H, Chen Y, et al. Effects of STN-DBS on cognition and mood in young-onset Parkinson's disease: a two-year follow-up. *Front Aging Neurosci*. 2024;15:1177889. Published 2024 Jan 16. doi:10.3389/fnagi.2023.1177889
14. Houeto JL, Mallet L, Mesnage V, et al. Subthalamic stimulation in Parkinson disease: behavior and social adaptation. *Arch Neurol*. 2006;63(8):1090-1095. doi:10.1001/archneur.63.8.1090
15. Jiang LL, Liu JL, Fu XL, et al. Long-term Efficacy of Subthalamic Nucleus Deep Brain Stimulation in Parkinson's Disease: A 5-year Follow-up Study in China. *Chin Med J (Engl)*. 2015;128(18):2433-2438. doi:10.4103/0366-6999.164925
16. Jiang JL, Chen SY, Tsai ST, Ma YC, Wang JH. Long-Term Effects of Subthalamic Stimulation on Motor Symptoms and Quality of Life in Patients with Parkinson's Disease. *Healthcare (Basel)*. 2023;11(6):920. Published 2023 Mar 22. doi:10.3390/healthcare11060920
17. Jost ST, Visser-Vandewalle V, Rizos A, et al. Non-motor predictors of 36-month quality of life after subthalamic stimulation in Parkinson disease. *NPJ Parkinsons Dis*. 2021;7(1):48. Published 2021 Jun 8. doi:10.1038/s41531-021-00174-x
18. Jost ST, Aloui S, Evans J, et al. Neurostimulation for Advanced Parkinson Disease and Quality of Life at 5 Years: A Nonrandomized Controlled Trial. *JAMA Netw Open*. 2024;7(1):e2352177. Published 2024 Jan 2. doi:10.1001/jamanetworkopen.2023.52177
19. Krause P, Reimer J, Kaplan J, et al. Deep brain stimulation in Early Onset Parkinson's disease. *Front Neurol*. 2022;13:1041449. Published 2022 Nov 17. doi:10.3389/fneur.2022.1041449
20. Lewis CJ, Maier F, Eggers C, et al. Parkinson's disease patients with subthalamic stimulation and carers judge quality of life differently. *Parkinsonism Relat Disord*. 2014;20(5):514-519. doi:10.1016/j.parkreldis.2014.02.009
21. Lezcano E, Gómez-Esteban JC, Tijero B, et al. Long-term impact on quality of life of subthalamic nucleus stimulation in Parkinson's disease. *J Neurol*. 2016;263(5):895-905. doi:10.1007/s00415-016-8077-4
22. Li H, Liang S, Yu Y, et al. Effect of Subthalamic Nucleus Deep Brain Stimulation (STN-DBS) on balance performance in Parkinson's disease. *PLoS One*. 2020;15(9):e0238936. Published 2020 Sep 11. doi:10.1371/journal.pone.0238936

23. Lin W, Shi D, Wang D, Yang L, Wang Y, Jin L. Can Levodopa Challenge Testing Predict the Effect of Deep Brain Stimulation? One-Year Outcomes in a Chinese Cohort. *Front Aging Neurosci.* 2021;13:764308. Published 2021 Oct 20. doi:10.3389/fnagi.2021.764308
24. Liu FT, Lang LQ, Yang YJ, et al. Predictors to quality of life improvements after subthalamic stimulation in Parkinson's disease. *Acta Neurol Scand.* 2019;139(4):346-352. doi:10.1111/ane.13056
25. Liu W, Yamamoto T, Yamanaka Y, et al. Neuropsychiatric Symptoms in Parkinson's Disease After Subthalamic Nucleus Deep Brain Stimulation. *Front Neurol.* 2021;12:656041. Published 2021 May 4. doi:10.3389/fneur.2021.656041
26. Jingchao Lu, Zhaohai Feng, Xin Shi, Lei Jiang, Yujun Hao, Correlation between programmed stimulation parameters and their efficacy after deep brain electrode implantation for Parkinson's disease, *Journal of Neurorestoratology*, Volume 8, Issue 1, 2020, Pages 53-59. <https://doi.org/10.26599/JNR.2019.9040018>.
27. Lu Y, Chang L, Li J, et al. The Effects of Different Anesthesia Methods on the Treatment of Parkinson's Disease by Bilateral Deep Brain Stimulation of the Subthalamic Nucleus. *Front Neurosci.* 2022;16:917752. Published 2022 May 26. doi:10.3389/fnins.2022.917752
28. Luo G, Shi X, Jiang L, et al. Effects of STN-DBS surgery on cerebral glucose metabolism and distribution of DAT in Parkinson's disease. *Brain Behav.* 2023;13(8):e3172. doi:10.1002/brb3.3172
29. Lyons KE, Pahwa R. Long-term benefits in quality of life provided by bilateral subthalamic stimulation in patients with Parkinson disease. *J Neurosurg.* 2005;103(2):252-255. doi:10.3171/jns.2005.103.2.0252
30. Mameli F, Ruggiero F, Dini M, et al. Energy Delivered by Subthalamic Deep Brain Stimulation for Parkinson Disease Correlates With Depressive Personality Trait Shift. *Neuromodulation.* 2023;26(2):394-402. doi:10.1016/j.neurom.2022.01.004
31. Moran CH, Pietrzyk M, Sarangmat N, et al. Clinical Outcome of "Asleep" Deep Brain Stimulation for Parkinson Disease Using Robot-Assisted Delivery and Anatomic Targeting of the Subthalamic Nucleus: A Series of 152 Patients. *Neurosurgery.* 2020;88(1):165-173. doi:10.1093/neuros/nyaa367
32. Nazzaro JM, Pahwa R, Lyons KE. The impact of bilateral subthalamic stimulation on non-motor symptoms of Parkinson's disease. *Parkinsonism Relat Disord.* 2011;17(8):606-609. doi:10.1016/j.parkreldis.2011.05.009
33. Pintér D, Járdaházi E, Balás I, et al. Antiparkinsonian Drug Reduction After Directional Versus Omnidirectional Bilateral Subthalamic Deep Brain Stimulation. *Neuromodulation.* 2023;26(2):374-381. doi:10.1016/j.neurom.2022.01.006
34. Schuepbach WM, Rau J, Knudsen K, et al. Neurostimulation for Parkinson's disease with early motor complications. *N Engl J Med.* 2013;368(7):610-622. doi:10.1056/NEJMoa1205158
35. Sobstyl M, Ząbek M, Górecki W, Mossakowski Z. Quality of life in advanced Parkinson's disease after bilateral subthalamic stimulation: 2 years follow-up study. *Clin Neurol Neurosurg.* 2014;124:161-165. doi:10.1016/j.clineuro.2014.06.019
36. Soulas T, Sultan S, Gurruchaga JM, Palfi S, Fénelon G. Depression and coping as predictors of change after deep brain stimulation in Parkinson's disease. *World Neurosurg.* 2011;75(3-4):525-532. doi:10.1016/j.wneu.2010.06.015
37. Tykocki T, Szalecki K, Koziara H, Nauman P, Mandat T. Quality of life and depressive symptoms in Parkinson's disease after subthalamic deep brain stimulation: a 2-year follow-up study. *Turk Neurosurg.* 2013;23(3):379-384. doi:10.5137/1019-5149.JTN.7184-12.1
38. Vats A, Amit A, Doshi P. A comparative study of bilateral subthalamic nucleus DBS in Parkinson's disease in young versus old: A single institutional study. *J Clin Neurosci.* 2019;70:85-91. doi:10.1016/j.jocn.2019.08.065
39. Vinke RS, Selvaraj AK, Geerlings M, et al. The Role of Microelectrode Recording and Stereotactic Computed Tomography in Verifying Lead Placement During Awake MRI-Guided Subthalamic Nucleus Deep Brain Stimulation for Parkinson's Disease. *J Parkinsons Dis.* 2022;12(4):1269-1278. doi:10.3233/JPD-223149
40. Weaver FM, Follett KA, Stern M, et al. Randomized trial of deep brain stimulation for Parkinson disease: thirty-six-month outcomes. *Neurology.* 2012;79(1):55-65. doi:10.1212/WNL.0b013e31825dcd1
41. Williams A, Gill S, Varma T, et al. Deep brain stimulation plus best medical therapy versus best medical therapy alone for advanced Parkinson's disease (PD SURG trial): a randomised, open-label trial. *Lancet Neurol.* 2010;9(6):581-591. doi:10.1016/S1474-4422(10)70093-4
42. Yamamoto T, Uchiyama T, Higuchi Y, et al. Long term follow-up on quality of life and its relationship to motor and cognitive functions in Parkinson's disease after deep brain stimulation. *J Neurol Sci.* 2017;379:18-21. doi:10.1016/j.jns.2017.05.037

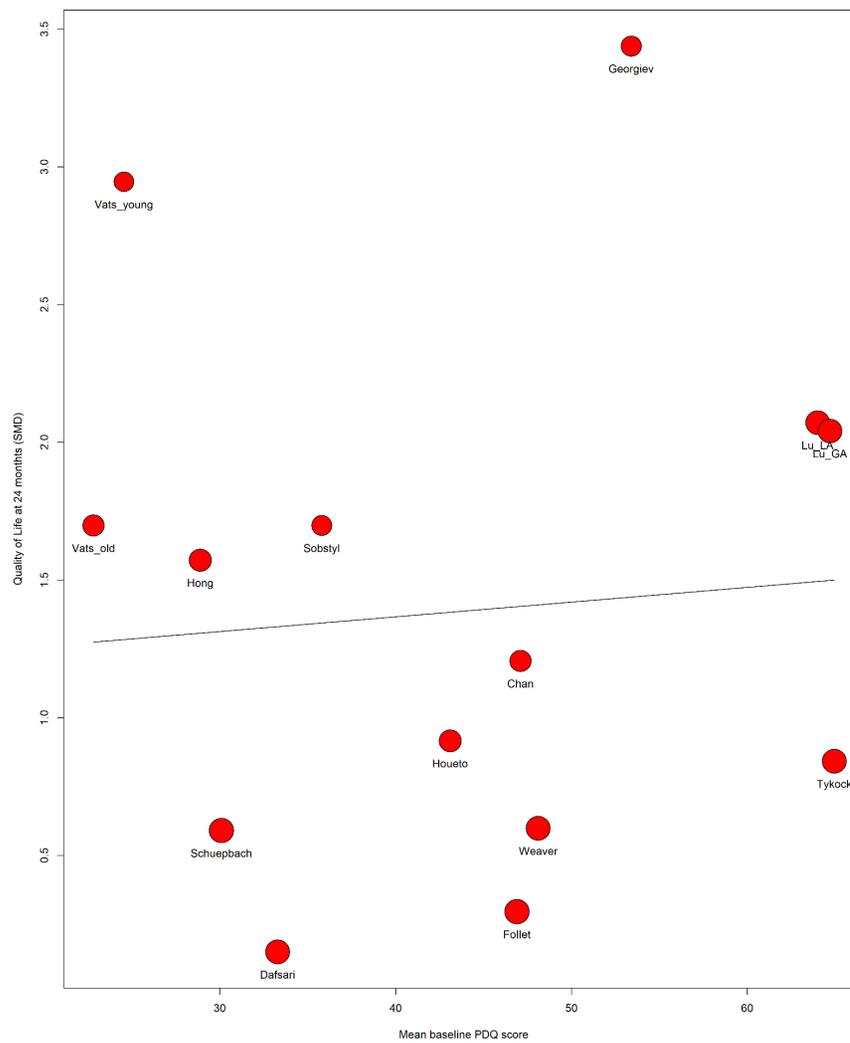
Supplementary Figure 1. Forest plot of the follow-up period of 12 months showing the SMD and the weights for the random effects analysis of each study. DBS, deep brain stimulation; SMD, standardized mean difference.



Supplementary Figure 2. Meta-regression modeling for the impact of mean baseline PDQ score and QoL at 12 months follow-up ($p = 0.011$).



Supplementary Figure 3. Meta-regression modeling for the impact of mean baseline PDQ score and QoL at 24 months follow-up ($p = 0.772$).



Supplementary Figure 4. Critical appraisal of individual studies according to Cochrane’s tools for assessing risk of bias in non-randomized studies (ROBINS-I).

Study	Risk of bias domains							Overall
	D1	D2	D3	D4	D5	D6	D7	
Acera 2019	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Boussac 2021	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Chan 2016	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Chen 2023	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Chircop 2018	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Dafsari 2018	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Drapier 2005	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Erdem 2023	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Georgiev 2021	Low	Low	Low	Low	Moderate	Moderate	Low	Moderate
Hong 2024	Low	Low	Low	Low	Moderate	Moderate	Low	Moderate
Houeto 2006	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Jiang 2015	Low	Low	Low	Low	Moderate	Moderate	Low	Moderate
Jiang 2023	Low	Low	Low	Low	Moderate	Moderate	Low	Moderate
Jost 2021	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Jost 2024	Low	Low	Low	Low	Moderate	Moderate	Low	Moderate
Krause 2022	Low	Low	Low	Low	Moderate	Moderate	Low	Moderate
Lewis 2014	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Lezcano 2016	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Li 2020	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Lin 2021	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Liu 2019	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Liu 2021	Low	Low	Low	Low	Moderate	Moderate	Low	Moderate
Lu 2020	Serious	Low	Low	Low	Low	Serious	Low	Serious
Lu 2022	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Luo 2023	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Lyons 2005	Low	Low	Low	Low	Moderate	Moderate	Low	Moderate
Mameli 2022	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Moran 2020	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Nazzaro 2011	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Pintér 2022	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Sobstyl 2014	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Soulas 2011	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Tyckock 2014	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Vats 2019	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Vinke 2022	Low	Low	Low	Low	Low	Moderate	Low	Moderate
Yamamoto 2016	Low	Low	Low	Low	Low	Moderate	Low	Moderate

Domains:
D1: Bias due to confounding.
D2: Bias due to selection of participants.
D3: Bias in classification of interventions.
D4: Bias due to deviations from intended interventions.
D5: Bias due to missing data.
D6: Bias in measurement of outcomes.
D7: Bias in selection of the reported result.

Judgement
Serious
Moderate
Low

Supplementary Figure 5. Critical appraisal of individual studies according to the Cochrane’s Collaboration’s tool for assessing risk of bias in randomized trials (RoB 2).

		Risk of bias domains					Overall
		D1	D2	D3	D4	D5	
Study	Bjerkness 2020						
	Bjerkness 2022						
	Follet 2010						
	Schuepbach 2013						
	Weaver 2012						
	Williams 2010						

Domains:
D1: Bias arising from the randomization process.
D2: Bias due to deviations from intended intervention.
D3: Bias due to missing outcome data.
D4: Bias in measurement of the outcome.
D5: Bias in selection of the reported result.

Judgement
 Low

Supplementary Figure 6. Funnel plot of the follow-up period of 12 months showing signs of asymmetry, indicating small-study effect, confirmed by Egger's test ($p=0.0003$).

