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SUPPLEMENTARY FILES

Supplementary Table 1 – Main observational studies analyzed

1st Author	Year	Country	n	Physical Activity Assessment	Conclusions
Physical Functioning					
Painter	2017	USA	45	Gait speed, chair stand, 6min walk, ISWT, SF-36	HD patients' PF/PA ≈ PD patients' PF/PA
As'habi	2018	Iran	79	Bioelectrical impedance analysis, handgrip strength	Dynapenia ↔ ↓PA, ↑Age, ↑diabetes mellitus
Cupisti	2017	Italy	151	RAPA, 30" STS chair test	↑PA ↔ ↓MIS, ↑BCMI
Nutritional Status					
Cobo	2015	Spain	64	Pedometer	↑PA ↔ ↑Nutritional Status, ↑Lean body mass, ↓CRP
Wakamiya	2015	Japan	44	GNRI, accelerometer	↓PA ↔ ↓Nutritional Status
Masuda	2009	Japan	26	Pedometer	↑PA ↔ ↑HDL-3C
Hard Clinical Outcomes					
Stack	2005	Ireland	1203	USRDS	4-5/weeks PE ↔ ↑Survival
Ming Pei	2019	Sweden	400	SF-36	↑PA ↔ ↓ all-cause mortality
Grincenkov	2015	Brazil	1624	SF-36	↓HRQoL ↔ ↓Survival
Health-Related Quality of Life					
Uchiyama	2018	Japan	50	ISWT, handgrip and quadriceps strength, KDQoL-SF	↑ISWT ↔ ↑HRQoL
Johansen	2010	USA	1457	USRDS, Self-reporting questionnaire	↓PA ↔ ↓Physical function, ↓Mental Health
Bakewell	2002	UK	88	SGA, KDQoL-SF	↓Nutritional Status ↔ ↓Physical and Mental health

Table 1. PD - *Peritoneal Dialysis;* ***HD -*** *Hemodialysis;* ***PE -*** *physical exercise;* ***PA -*** *physical activity;* ***RAPA -*** *rapid assessment of physical activity test;* ***MIS -*** *malnutrition-inflammation score;* ***BCMI -*** *body cell mass index;* ***CRP -*** *C-reactive protein;* ***GNRI -*** *Geriatric Nutritional Risk Index;* ***USRDS -*** *United States Renal Data System;* ***HRQoL -*** *health-related quality of life;* ***ISWT -*** *Incremental Shuttle Walking test;* ***SF-36 -*** *Short Form 36 Health Survey;* ***KDQoL-SF -*** *Kidney Disease Quality of Life Short Form*

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Supplementary Table 2 – Main interventional studies analyzed

Author	Year	Country	n	Intervention	Follow-up Duration	Conclusions
Uchiyama	2019	Japan	47	Aerobic exercise and resistance training	3M	↑HRQoL, ↑Physical capacity (ISWT)
Koufaki	2002	UK	12	Bike ergometer, 3x/week	3M	↑Peak exercise capacity (VO_2 peak)
Mustata	2005	Canada	6	Tai chi	3M	↑Physical functioning (SF-36)
Lee	2004	Korea	19	Telephone-based PA Reinforcement Program, SCL-90-R	3M	↑Exercise compliance, ↓Depression
Chi-yuen Lo	1998	China	13	Treadmill, cycling and arm ergometers, 45-60min, 3x/week	3M	↑HRQoL, ↑Physical functioning, ↓FBS, ↑HDL
Shahgholian	2015	Iran	22	Cycling, 40min, 2x/week	2M	↓FBS, ↓PPBS
Derici	2005	Turkey	3	Cycling in a supine position, 30min/daily	1M	Reinforcement of the abdominal musculature helps leaks resolution

***Table 2. HRQoL -** health-related quality of life; **ISWT -** incremental shuttle walking test; **SF-36 -** short form 36 health survey; **SCL-90-R -** Symptom Checklist-90-R; **FBS -** fasting blood sugar; **PPBS -** post-prandial blood sugar*

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Supplementary Table 3 – Most frequent barriers and limitations to physical exercise practice by PD patients

Barriers and Limitations to Physical Exercise Practice
Fatigue
Frailty
Weakness
Shortness of breath
Reduced physical capacity
High economic costs
Lack of time
Lack of adequate exercise programs
Fear of abdominal herniation
Fear of abdominal dialysate leaks
Fear of catheter site infection
Lack of information and instructions
Inadequate exercise monitoring and follow-up
Poor motivation