

## SUPPLEMENTARY MATERIALS

### Clinical assessment

The diagnosis of schizophrenia was confirmed by the Structured Clinical Interview for the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition Axis I Disorders.<sup>1</sup> Throughout the study period, all patients were maintained on their medications (i.e., 2 patients were taking clozapine and atypical antipsychotics, 2 patients were taking clozapine only, and 3 patients were taking atypical antipsychotics only). The clinical status of each patient was assessed twice: at baseline (pre-tDCS) and after completing 10 stimulation sessions (post tDCS). The Positive and Negative Symptom Scale<sup>2</sup> and the Psychotic Symptom Rating Scales<sup>3</sup> were used to measure the severity of the psychotic symptoms. The Auditory Hallucination Rating Scale<sup>3</sup> and the Hamilton Program for Schizophrenia Voices Questionnaire<sup>4</sup> were used to assess the severity of the auditory hallucinations. All clinical assessments were conducted by experienced psychiatrists.

### Image acquisition

Functional and structural images were collected with a Siemens 3T Trio MRI scanner (Siemens Magnetom Trio, Erlangen, Germany) using a 32-channel head coil. A T1-weighted structural image was obtained using magnetization prepared rapid gradient-echo [echo time (TE)/repetition time (TR)=1.89/1670 ms, field of view (FOV)=250 mm, flip angle=9°, matrix=256×256, voxel size=1.0×1.0×1.0 mm<sup>3</sup>, and 208 slices]. We acquired a rest scan comprising 244 contiguous echo-planar imaging (EPI) functional images (TE/TR=30/2000 ms, FOV=220 mm, flip angle=80°, matrix=64×64, voxel size=3.4×3.4×3.4 mm<sup>3</sup>, and 38 slices). During the rest scan, participants were asked to close their eyes and relax. Custom-built cushions were used to minimize motion artifacts, and participants were asked to move as little as possible. The time required to collect the resting-state scans was 8 minutes and 16 seconds.

### REFERENCES

1. First MB, Spitzer RL, Gibbon M, Williams JB. Structured Clinical Interview for DSM IV Axis I Disorders. New York: New York State Psychiatric Institute; 1995.
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3. Haddock G, McCarron J, Tarrier N, Faragher E. Scales to measure dimensions of hallucinations and delusions: the psychotic symptom rating scales (PSYRATS). *Psychol Med* 1999;29:879-889.
4. Van Lieshout RJ, Goldberg JO. Quantifying self-reports of auditory verbal hallucinations in persons with psychosis. *Can J Behav Sci* 2007;39:73-77.