

1 Case management in alcohol use disorders

1.1. Case Management vs TAU for Alcohol Use Disorders

Quality assessment							Summary of findings				Importance	
No of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision	Other considerations	No of patients		Effect			Quality
							Case Management	TAU	Relative (95% CI)	Absolute		
Number of participants non-abstinent - at 6 month follow-up												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹	none	4/18 (22.2%)	15/18 (83.3%)	RR 0.27 (0.11 to 0.65)	608 fewer per 1000 (from 292 fewer to 742 fewer)	<div style="display: flex; align-items: center;"> □ □ □ □ </div> MODERATE	
								83.3%		608 fewer per 1000 (from 292 fewer to 741 fewer)		
Number of participants non-abstinent - at 12-month follow-up (RCT)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ²	none	11/18 (61.1%)	16/18 (88.9%)	RR 0.69 (0.46 to 1.03)	276 fewer per 1000 (from 480 fewer to 27 more)	<div style="display: flex; align-items: center;"> □ □ □ □ </div> MODERATE	
								88.9%		276 fewer per 1000 (from 480 fewer to 27 more)		
Number of participants non-abstinent - at 2 year follow-up (non-RCT)												
1	observational studies	no serious limitations	no serious inconsistency	no serious indirectness	serious ³	none	45/70 (64.3%)	49/52 (94.2%)	RR 0.68 (0.57 to 0.82)	302 fewer per 1000 (from 170 fewer to 405 fewer)	<div style="display: flex; align-items: center;"> □ □ □ □ </div> VERY LOW	
								94.2%		301 fewer per 1000 (from 170 fewer to 405 fewer)		
Number of participants non-abstinent - at 3 year follow-up (non-RCT)												
1	observational studies	no serious limitations	no serious inconsistency	no serious indirectness	serious ⁴	none	40/70 (57.1%)	47/52 (90.4%)	RR 0.63 (0.51 to 0.79)	334 fewer per 1000 (from 190 fewer to 443 fewer)	<div style="display: flex; align-items: center;"> □ □ □ □ </div> VERY LOW	
								90.4%		334 fewer per 1000		

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										(from 190 fewer to 443 fewer)		
Number of participants non-abstinent - at 4 year follow-up (non-RCT)												
1	observational studies	no serious limitations	no serious inconsistency	no serious indirectness	serious ⁵	none	36/70 (51.4%)	44/52 (84.6%)	RR 0.61 (0.47 to 0.78)	330 fewer per 1000 (from 186 fewer to 448 fewer)	□□□□	VERY LOW
								84.6%			330 fewer per 1000 (from 186 fewer to 448 fewer)	
Number of participants non-abstinent - at 5 year follow-up (non-RCT)												
1	observational studies	no serious limitations	no serious inconsistency	no serious indirectness	serious ⁶	none	32/70 (45.7%)	38/52 (73.1%)	RR 0.63 (0.46 to 0.85)	270 fewer per 1000 (from 110 fewer to 395 fewer)	□□□□	VERY LOW
								73.1%			270 fewer per 1000 (from 110 fewer to 395 fewer)	
Drinking Frequency - Mean days of alcohol intoxication (Better indicated by lower values)												
2	observational studies	no serious limitations	no serious inconsistency	no serious indirectness	no serious imprecision	none	184	353	-	SMD 0.07 lower (0.25 lower to 0.11 higher)	□□□□ LOW	
Drinking Frequency - days any alcohol use at 6 month follow-up (Better indicated by lower values)												
2	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	no serious imprecision	none	286	255	-	SMD 0.1 lower (0.4 lower to 0.2 higher)	□□□□ HIGH	
Drinking Frequency - Days using alcohol since last interview at 6 month follow-up (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	no serious imprecision	none	105	83	-	SMD 0.34 lower (0.63 to 0.05 lower)	□□□□ HIGH	
Drinking Frequency - days drinking any alcohol, in last 30 days, at 9 month follow-up (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	no serious imprecision	none	178	170	-	SMD 0.13 lower (0.34 lower to 0.08 higher)	□□□□ HIGH	
Drinking Frequency - days drinking any alcohol, in last 30 days, at 12 month follow-up (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	no serious imprecision	none	108	85	-	SMD 0.21 lower (0.49 lower to 0.08 higher)	□□□□ HIGH	
Drinking Frequency - Days using alcohol since last interview at 12 month follow-up (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	no serious imprecision	none	105	83	-	SMD 0.3 lower (0.59 to 0.01 lower)	□□□□ HIGH	
Drinking Frequency - days drinking any alcohol, in last 30 days, at 18 month follow-up (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	no serious imprecision	none	108	85	-	SMD 0.33 lower (0.62 to 0.05 lower)	□□□□ HIGH	
Drinking Frequency - Days using alcohol since last interview at 18 month follow-up (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	no serious imprecision	none	105	83	-	SMD 0.49 lower (0.78	□□□□	

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	trials	limitations	inconsistency	indirectness	imprecision						to 0.2 lower)	HIGH	
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¹ Relative risk reduction greater than 25%

² 95% confidence interval includes no effect. Relative risk reduction greater than 25%

³ Relative risk reduction greater than 25%

⁴ Relative risk reduction greater than 25%

⁵ Relative risk reduction greater than 25%

⁶ Relative risk reduction greater than 25%

Economic profile

Stepped care versus minimal intervention							
Study & country	Limitations	Applicability	Other comments	Incremental cost (£)	Incremental effect (QALYs)	ICER (£/QALY)	Uncertainty
Drummond et al. 2009, UK	Minor Limitations ¹	Directly applicable ²		Unable to calculate ³	Unable to calculate	Unable to calculate	98% probability of stepped care intervention being cost-effective at UK £20-30,000 threshold- based on 1000 bootstrap samples

¹ Short time horizon; no formal synthesis of incremental costs and effectiveness

² Societal perspective including criminal justice costs;

³ Not possible to calculate ICER with data available. Authors did not report total costs over 6-month period