Author(s):
Date: 2010-04-06
Question: Should pure self-help vs comparator be used for pure GAD, mixed anxiety disorders or both population?
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Bibliography:

No of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision	Other considerations	pure self-help	comparator	Relative (95% CI)	Absolute	Quality	Importance
Quality assessment							**Summary of findings**					
							No of patients		**Effect**			
Non remission - Mixed anxiety population-pure self help vs TAU												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	no serious imprecision	none	12/18 (66.7%)	15/16 (93.8%)	RR 0.71 (0.5 to 1.01)	272 fewer per 1000 (from 469 fewer to 9 more)	⊕⊕⊕⊕ HIGH	
								94.5%		274 fewer per 1000 (from 472 fewer to 9 more)		
Anxiety -Mixed anxiety population- Pure bibliotherapy vs Non active control (Better indicated by lower values)												
4	randomised trials	serious[1]	no serious inconsistency	no serious indirectness	no serious imprecision	none	86	56	-	SMD 0.76 lower (1.12 to 0.4 lower)	⊕⊕⊕O MODERATE	
Anxiety-Pure GAD population- Pure bibliotherapy vs WLC (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	no serious imprecision	none	17	18	-	SMD 1.06 lower (1.77 to 0.35 lower)	⊕⊕⊕⊕ HIGH	
Anxiety - combined population-Pure self help vs TAU (Better indicated by lower values)												
1	randomised trials	serious[2]	no serious inconsistency	no serious indirectness	no serious imprecision	none	18	16	-	SMD 0.7 lower (1.4 to 0.01 lower)	⊕⊕⊕O MODERATE	
Non remission - Mixed anxiety population-pure self help vs non active control												
2	randomised trials	no serious limitations	no serious inconsistency	serious[3]	no serious imprecision	none	25/39 (64.1%)	35/37 (94.6%)	RR 0.68 (0.53 to 0.87)	303 fewer per 1000 (from 123 fewer to 445 fewer)	⊕⊕⊕O MODERATE	
								94.5%		302 fewer per 1000 (from 123 fewer to 444 fewer)		
Anxiety - combined population-Pure self help vs non active control (Better indicated by lower values)												
6	randomised trials	serious[1]	no serious inconsistency	no serious indirectness	no serious imprecision	none	153	124	-	SMD 0.74 lower (0.99 to 0.49 lower)	⊕⊕⊕O MODERATE	
Discontinuation due to any reason - mixed anxiety population- Pure bibliotherapy vs non active control)												
2	randomised trials	no serious limitations	no serious inconsistency	serious[3]	serious[4]	none	2/41 (4.9%)	5/39 (12.8%)	RR 0.5 (0.09 to 2.84)	64 fewer per 1000 (from 117 fewer to 236 more)	⊕⊕OO LOW	
								12.7%		64 fewer per 1000 (from 116 fewer to 234 more)		
Anxiety-Pure GAD population- Pure computer mindfulness therapy vs WLC (Better indicated by lower values)												
1	randomised	no serious	no serious	no serious	no serious	none	50	50	-	SMD 0.61 lower (1.01 to	⊕⊕⊕⊕	

	trials	limitations	inconsistency	indirectness	imprecision					0.21 lower)	HIGH	

Depression - Mixed anxiety population-pure bibliotherapy vs non active control (Better indicated by lower values)

| 2 | randomised trials | serious[1] | no serious inconsistency | no serious indirectness | no serious imprecision | none | 57 | 28 | - | SMD 0.78 lower (1.27 to 0.3 lower) | ⊕⊕⊕O MODERATE | |

Non remission - Mixed anxiety population-pure self help vs WLC

| 1 | randomised trials | no serious limitations | no serious inconsistency | no serious indirectness | no serious imprecision | none | 13/21 (61.9%) | 20/21 (95.2%) / 94.5% | RR 0.65 (0.46 to 0.92) | 333 fewer per 1000 (from 76 fewer to 514 fewer) / 331 fewer per 1000 (from 76 fewer to 510 fewer) | ⊕⊕⊕⊕ HIGH | |

Anxiety - combined population-Pure self help vs WLC (Better indicated by lower values)

| 5 | randomised trials | serious[1] | no serious inconsistency | no serious indirectness | no serious imprecision | none | 135 | 108 | - | SMD 0.74 lower (1.01 to 0.48 lower) | ⊕⊕⊕O MODERATE | |

Discontinuation due to any reason - pure GAD population- Pure bibliotherapy vs WLC

| 1 | randomised trials | no serious limitations | no serious inconsistency | no serious indirectness | serious[4] | none | 2/19 (10.5%) | 1/19 (5.3%) / 27.9% | RR 2 (0.2 to 20.24) | 53 more per 1000 (from 42 fewer to 1013 more) / 279 more per 1000 (from 223 fewer to 5368 more) | ⊕⊕⊕O MODERATE | |

Discontinuation due to any reason - pure GAD population- Pure computer mindfulness therapy vs WLC (Copy)

| 1 | randomised trials | serious[5] | no serious inconsistency | no serious indirectness | no serious imprecision | none | 32/116 (27.6%) | 58/115 (50.4%) / 27.9% | RR 0.55 (0.39 to 0.77) | 227 fewer per 1000 (from 116 fewer to 308 fewer) / 126 fewer per 1000 (from 64 fewer to 170 fewer) | ⊕⊕⊕O MODERATE | |

Discontinuation due to any reason - combined population- Pure self help vs non active control

| 4 | randomised trials | serious[1] | no serious inconsistency | serious[3] | no serious imprecision | none | 36/187 (19.3%) | 64/185 (34.6%) / 27.9% | RR 0.56 (0.4 to 0.78) | 152 fewer per 1000 (from 76 fewer to 208 fewer) / 123 fewer per 1000 (from 61 fewer to 167 fewer) | ⊕⊕OO LOW | |

Discontinuation due to any reason - combined population- Pure self help vs WLC

| 3 | randomised trials | serious[1] | no serious inconsistency | no serious indirectness | no serious imprecision | none | 34/156 (21.8%) | 62/155 (40%) / 27.9% | RR 0.55 (0.37 to 0.82) | 180 fewer per 1000 (from 72 fewer to 252 fewer) / 126 fewer per 1000 (from 50 fewer to 176 fewer) | ⊕⊕⊕O MODERATE | |

Discontinuation due to any reason - combined population- Pure self help vs WLC (Copy)

| 1 | randomised trials | serious[2] | no serious inconsistency | no serious indirectness | serious[4] | none | 2/20 (10%) | 2/18 (11.1%) / 27.9% | RR 0.9 (0.14 to 5.74) | 11 fewer per 1000 (from 96 fewer to 527 more) / 28 fewer per 1000 (from 240 fewer to 1322 more) | ⊕⊕OO LOW | |

[1] majority completer analysis and unclear bias which may likely inflate the effect size
[2] Unclear attrition bias and completer analysis
[3] different comparison group (WLC and TAU)
[4] 95% confidence interval include no effect
[5] High attrition bias and completer analysis

Author(s):
Date: 2010-04-06
Question: Should guided self help vs comparator be used for pure GAD, mixed anxiety disorders or both population?
Settings:
Bibliography:

No of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision	Other considerations	guided self help	comparator	Relative (95% CI)	Absolute	Quality	Importance
				Quality assessment			**No of patients**		**Effect**		**Quality**	**Importance**
Anxiety - mixed anxiety population- guided bibliotherapy vs WLC (Better indicated by lower values)												
1	randomised trials	serious[1]	no serious inconsistency	no serious indirectness	no serious imprecision	none	27	33	-	SMD 0.62 lower (1.14 to 0.1 lower)	⊕⊕⊕O MODERATE	
Anxiety - mixed anxiety population-guided bibliotherapy vs TAU (Better indicated by lower values)												
2	randomised trials	no serious limitations	no serious inconsistency	serious[2]	serious[3]	none	80	44	-	SMD 0.15 higher (0.22 lower to 0.51 higher)	⊕⊕OO LOW	
Anxiety-pure GAD population-guided CCBT vs WLC (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	no serious imprecision	none	24	21	-	SMD 1.22 lower (1.86 to 0.57 lower)	⊕⊕⊕⊕ HIGH	
Anxiety - combined population-guided self help vs non active control (Better indicated by lower values)												
4	randomised trials	serious[1]	serious[4]	serious[2,5]	serious[3]	none	131	98	-	SMD 0.38 lower (0.99 lower to 0.24 higher)	⊕OOO VERY LOW	
Anxiety - combined population-guided self help vs WLC (Better indicated by lower values)												
2	randomised trials	serious[1]	no serious inconsistency	serious[5]	no serious imprecision	none	51	54	-	SMD 0.89 lower (1.47 to 0.31 lower)	⊕⊕OO LOW	
Depression - mixed anxiety population-guided bibliotherapy vs WLC (Better indicated by lower values)												
1	randomised trials	serious[1]	no serious inconsistency	no serious indirectness	serious[3]	none	27	33	-	SMD 0.44 lower (0.95 lower to 0.08 higher)	⊕⊕OO LOW	
Depression - mixed anxiety population-guided bibliotherapy vs TAU (Better indicated by lower values)												
2	randomised trials	no serious limitations	serious[4]	serious[2]	serious[3]	none	78	44	-	SMD 0.03 higher (0.78 lower to 0.84 higher)	⊕OOO VERY LOW	
Depression-pure GAD population-guided CCBT vs WLC (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	no serious imprecision	none	24	21	-	SMD 0.85 lower (1.46 to 0.23 lower)	⊕⊕⊕⊕ HIGH	
Depression - combined population-guided self help vs non active ctrl (Better indicated by lower values)												
4	randomised trials	serious[1]	serious[4]	serious[2,5]	serious[3]	none	129	98	-	SMD 0.31 lower (0.86 lower to 0.25 higher)	⊕OOO VERY LOW	
Depression - combined population-guided self help vs WLC (Better indicated by lower values)												

2	randomised trials	serious[1]	no serious inconsistency	serious[5]	no serious imprecision	none	51	54	-	SMD 0.63 lower (1.02 to 0.23 lower)	⊕⊕OO LOW	

Worry - mixed anxiety population-guided bibliotherapy vs TAU (Better indicated by lower values)

| 1 | randomised trials | no serious limitations | no serious inconsistency | no serious indirectness | serious[3] | none | 53 | 26 | - | SMD 0.17 higher (0.3 lower to 0.64 higher) | ⊕⊕⊕O MODERATE | |

Worry-pure GAD population-guided CCBT vs WLC (Better indicated by lower values)

| 1 | randomised trials | no serious limitations | no serious inconsistency | no serious indirectness | no serious imprecision | none | 24 | 21 | - | SMD 0.93 lower (1.55 to 0.32 lower) | ⊕⊕⊕⊕ HIGH | |

Non remission - combined population-guided self help vs non active control

| 2 | randomised trials | serious[1] | very serious[6] | serious[5] | serious[3] | none | 53/72 (73.6%) | 62/69 (89.9%) | RR 0.71 (0.32 to 1.59) | 261 fewer per 1000 (from 611 fewer to 530 more) | ⊕OOO VERY LOW | |
| | | | | | | | | 86.6% | | 251 fewer per 1000 (from 589 fewer to 511 more) | | |

Non remission - mixed anxiety population-guided bibliotherapy vs WLC

| 1 | randomised trials | serious[1] | no serious inconsistency | no serious indirectness | no serious imprecision | none | 42/48 (87.5%) | 42/48 (87.5%) | RR 1 (0.86 to 1.16) | 0 fewer per 1000 (from 122 fewer to 140 more) | ⊕⊕⊕O MODERATE | |
| | | | | | | | | 87.5% | | 0 fewer per 1000 (from 122 fewer to 140 more) | | |

Worry -combined population-guided self help vs non active control (Better indicated by lower values)

| 2 | randomised trials | no serious limitations | serious[6] | serious[5] | serious[3] | none | 77 | 47 | - | SMD 0.36 lower (1.44 lower to 0.71 higher) | ⊕OOO VERY LOW | |

Non-remission- pure GAD population-guided CCBT vs WLC

| 1 | randomised trials | no serious limitations | no serious inconsistency | no serious indirectness | no serious imprecision | none | 11/24 (45.8%) | 20/21 (95.2%) | RR 0.48 (0.31 to 0.75) | 495 fewer per 1000 (from 238 fewer to 657 fewer) | ⊕⊕⊕⊕ HIGH | |
| | | | | | | | | 85.7% | | 446 fewer per 1000 (from 214 fewer to 591 fewer) | | |

Non-response-pure GAD population-guided CCBT vs WLC

| 1 | randomised trials | no serious limitations | no serious inconsistency | no serious indirectness | no serious imprecision | none | 15/24 (62.5%) | 21/21 (100%) | RR 0.63 (0.46 to 0.87) | 370 fewer per 1000 (from 130 fewer to 540 fewer) | ⊕⊕⊕⊕ HIGH | |
| | | | | | | | | 90.5% | | 335 fewer per 1000 (from 118 fewer to 489 fewer) | | |

Discontinuation due to any reason - Mixed anxiety population-guided bibliotherapy vs (WLC

| 1 | randomised trials | serious[1] | no serious inconsistency | no serious indirectness | serious[3] | none | 21/47 (44.7%) | 15/48 (31.3%) | RR 1.4 (0.83 to 2.37) | 125 more per 1000 (from 53 fewer to 428 more) | ⊕⊕OO LOW | |
| | | | | | | | | 12.9% | | 52 more per 1000 (from 22 fewer to 177 more) | | |

Discontinuation due to any reason - Mixed anxiety population-guided bibliotherapy vs TAU

No of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision	Other considerations	Control/Intervention 1	Intervention 2	Relative effect (95% CI)	Absolute	Quality
2	randomised trials	no serious limitations	serious[4]	serious[2]	serious[3]	none	9/96 (9.4%)	6/57 (10.5%)	RR 0.57 (0.03 to 9.99)	45 fewer per 1000 (from 102 fewer to 946 more)	⊕OOO VERY LOW
								12.9%		55 fewer per 1000 (from 125 fewer to 1160 more)	
Discontinuation due to any reason - pure GAD population-guided CCBT vs WLC											
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	no serious imprecision	none	6/24 (25%)	2/21 (9.5%)	RR 2.62 (0.59 to 11.64)	154 more per 1000 (from 39 fewer to 1013 more)	⊕⊕⊕⊕ HIGH
								9.5%		154 more per 1000 (from 39 fewer to 1011 more)	
Discontinuation due to any reason - combined population-guided self help vs non active control											
4	randomised trials	no serious limitations[1]	no serious inconsistency	serious[2]	serious[3]	none	36/168 (21.4%)	23/126 (18.3%)	RR 1.42 (0.7 to 2.91)	77 more per 1000 (from 55 fewer to 349 more)	⊕⊕OO LOW
								12.9%		54 more per 1000 (from 39 fewer to 246 more)	
Discontinuation due to any reason - combined population-guided self help vs WLC											
2	randomised trials	serious[1]	no serious inconsistency	serious[5]	serious[3]	none	27/72 (37.5%)	17/69 (24.6%)	RR 1.5 (0.91 to 2.47)	123 more per 1000 (from 22 fewer to 362 more)	⊕OOO VERY LOW
								12.9%		64 more per 1000 (from 12 fewer to 190 more)	

[1] quasi-RCT
[2] treatment group not comparable (treatment only and treatment plus TAU)
[3] 95% confidence interval include no effect
[4] moderate heterogeneity (50-80%)
[5] different target population (mixed anxiety and pure GAD population)
[6] high heterogeneity (>80%)

Author(s):
Date: 2010-04-06
Question: Should group psychoeducation (CBT) vs comparator be used for pure GAD, mixed anxiety disorders or both population?
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No of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision	Other considerations	group psychoeducation (CBT)	comparator	Relative (95% CI)	Absolute	Quality	Importance
			Quality assessment				**No of patients**		**Effect**			
Anxiety - mixed anxiety population-psychoeducational group vs WLC (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious[1]	none	25	24	-	SMD 0.34 lower (0.9 lower to 0.23 higher)	⊕⊕⊕O MODERATE	
Anxiety-pure GAD population-psychoeducational group vs WLC (Better indicated by lower values)												
1	randomised trials	serious[2]	no serious inconsistency	no serious indirectness	serious[1]	none	22	11	-	SMD 0.7 lower (1.45 lower to 0.04 higher)	⊕⊕OO LOW	
Anxiety - combined population-psychoeducational group vs WLC (Better indicated by lower values)												
2	randomised trials	serious[2]	no serious inconsistency	serious[3]	no serious imprecision	none	47	35	-	SMD 0.47 lower (0.92 to 0.02 lower)	⊕⊕OO LOW	
Depression - mixed anxiety population-psychoeducational group vs WLC (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	no serious imprecision	none	25	24	-	SMD 0.49 lower (1.06 lower to 0.08 higher)	⊕⊕⊕⊕ HIGH	
Depression- pure GAD population-psychoeducational group vs WLC (Better indicated by lower values)												
1	randomised trials	serious[2]	no serious inconsistency	no serious indirectness	serious[1]	none	22	11	-	SMD 0.51 lower (1.25 lower to 0.22 higher)	⊕⊕OO LOW	
Depression - combined population-psychoeducational group vs WLC (Better indicated by lower values)												
2	randomised trials	serious[2]	no serious inconsistency	serious[3]	no serious imprecision	none	47	35	-	SMD 0.5 lower (0.95 to 0.05 lower)	⊕⊕OO LOW	
Worry - mixed anxiety population-psychoeducational group vs WLC (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious[1]	none	25	24	-	SMD 0.36 lower (0.93 lower to 0.2 higher)	⊕⊕⊕O MODERATE	
Discontinuation due to any reason-pure GAD population-psychoeducational group vs WLC												
1	randomised	very serious[2,4]	no serious	no serious	serious[1]	none	4/26 (15.4%)	0/11 (0%)	RR 4 (0.23	0 more per 1000	⊕OOO	

	trials		inconsistency	indirectness					to 68.57)	(from 0 fewer to 0 more)	VERY LOW	
								0%		0 more per 1000 (from 0 fewer to 0 more)		

[1] 95% confidence interval include no effect
[2] quasi-RCT
[3] different target population (pure GAD and mixed anxiety)
[4] high selection bias and completer analysis

No of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision	Other considerations	Group CBT	Group Anxiety Management Training	Relative (95% CI)	Absolute	Quality	Importance
Quality assessment							**Summary of findings**					
							No of patients		**Effect**			
Discontinuation due to any reason												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious[1]	none	9/25 (36%)	8/24 (33.3%)	RR 1.08 (0.5 to 2.33)	27 more per 1000 (from 167 fewer to 443 more)	⊕⊕⊕O MODERATE	
								0%		0 more per 1000 (from 0 fewer to 0 more)		
Anxiety (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious[1]	none	25	24	-	SMD 0.16 higher (0.4 lower to 0.72 higher)	⊕⊕⊕O MODERATE	
Depression (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious[1]	none	25	24	-	SMD 0.1 higher (0.46 lower to 0.66 higher)	⊕⊕⊕O MODERATE	
Worry (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious[1]	none	25	24	-	SMD 0.28 lower (0.84 lower to 0.29 higher)	⊕⊕⊕O MODERATE	

[1] 95% confidence interval include no effect

Author(s):
Date: 2010-04-12
Question: Should Pure bibliotherapy vs Pure audiotherapy be used in pure GAD population?
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Bibliography:

Quality assessment							Summary of findings					Importance
							No of patients		Effect		Quality	
No of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision	Other considerations	Pure bibliotherapy	Pure audiotherapy	Relative (95% CI)	Absolute		
Anxiety (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious[1]	none	11	11	-	SMD 0.55 lower (1.4 lower to 0.31 higher)	⊕⊕⊕O MODERATE	

[1] 95% confidence interval include no effect

Author(s):
Date: 2010-04-12
Question: Should Guided CBT bibliotherapy vs High intensity CBT be used for mixed anxiety population?
Settings:
Bibliography:

Quality assessment							Summary of findings					Importance
							No of patients		Effect		Quality	
No of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision	Other considerations	Guided CBT bibliotherapy	High intensity CBT	Relative (95% CI)	Absolute		
Discontinuation due to any reason												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious[1]	none	6/53 (11.3%)	9/63 (14.3%)	RR 0.79 (0.3 to 2.08)	30 fewer per 1000 (from 100 fewer to 154 more)	⊕⊕⊕O MODERATE	
								0%		0 fewer per 1000 (from 0 fewer to 0 more)		
Anxiety (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious[1]	none	53	63	-	SMD 0.3 higher (0.07 lower to 0.67 higher)	⊕⊕⊕O MODERATE	
Depression (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious[1]	none	53	63	-	SMD 0.25 higher (0.11 lower to 0.62 higher)	⊕⊕⊕O MODERATE	
Worry (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious[1]	none	53	63	-	SMD 0.28 higher (0.09 lower to 0.64 higher)	⊕⊕⊕O MODERATE	

[1] 95% confidence interval include no effect