APPENDIX 22: HEALTH ECONOMIC EVIDENCE TABLES

Pharmacological interventions 2
Psychological interventions – cognitive behavioural therapy 3
Psychological interventions – self-help (internet) with support 4

Abbreviations

CBT	cognitive behavioural therapy
DSM-IV	*Diagnostic and Statistical Manual of Mental Disorders*, 4th Edition
EQ-5D	European Quality of Life - 5 Dimensions
GP	general practitioner
HRQoL	health-related quality of life
LSAS	Liebowitz Social Anxiety Scale
n/N	number of studies
NA	not applicable
NHS	National Health Service
RCT	randomised controlled trial
SF-6D	Short Form Questionnaire Six Dimensional Health State Classification
UK	United Kingdom
USA	United States of America
WTP	willingness to pay
YLD	years lived with disability

PHARMACOLOGICAL INTERVENTIONS

François C, Montgomery SA, Despiegel N, Aballéa S, Roïz J, Auquier P. Analysis of health-related quality of life and costs based on a randomised clinical trial of escitalopram for relapse prevention in patients with generalised social anxiety disorder. International Journal of Clinical Practice. 2008;62:1693-702.

Study ID **Country** **Study type**	**Intervention details**	**Study population** **Study design** **Data sources**	**Costs: description and values** **Outcomes: description and values**	**Results: cost effectiveness**	**Comments**
Francois et al., 2008. UK. Cost-effective-ness analysis.	**Intervention:** Escitalopram 10 to 20 mg/day. **Control:** Placebo.	**Population:** People with generalised social anxiety disorder who had responded to previous treatment with escitalopram. **Study design:** RCT (N = 371) [MONTGOMERY2005]. **Source of effectiveness data:** RCT (n = 351). **Source of resource use data:** RCT (n = 201). **Source of unit cost data:** national reference costs.	**Costs:** Physician consultations, other healthcare professional visits, hospitalisation, drug acquisition costs; productivity costs reported separately. **Cost results** (NHS perspective – including only participants NOT relapsing): *Escitalopram:* 1. 0 to 12 weeks: £110.53. 2. 12 to 24 weeks : £124.32. *Placebo:* 1. 0 to 12 weeks: £180.20 (p = 0.3877). 2. 12 to 24 weeks : £201.74 (p = 0.4431). **Primary outcome:** HRQoL (SF-6D score). **Effectiveness result:** 1. 12 weeks: figures not reported (p = 0.1942). 2. 24 weeks: escitalopram: 0.715; placebo: 0.698 (p = 0.009).	Escitalopram dominant (similar costs, better outcome at endpoint of analysis).	**Perspective**: NHS (and societal). **Currency**: UK pounds sterling. **Cost year:** 2006. **Time horizon**: 24 weeks. **Discounting**: NA. Costs reported only for non-relapsed participants. **Applicability**: directly applicable. **Quality**: minor limitations.

PSYCHOLOGICAL INTERVENTIONS – COGNITIVE BEHAVIOURAL THERAPY

Gould R, Buckminster S, Pollack M, Otto M, Yap L. Cognitive-behavioral and pharmacological treatment for social phobia: a meta-analysis. Clinical Psychology Science and Practice. 1997;4:291-306.

Study; Country; Study type	**Intervention details**	**Study population; Study design; Data sources**	**Costs: description and values; Outcomes: description and values**	**Results: cost effectiveness**	**Comments**
Gould et al., 1997. USA. Cost-effective-ness analysis.	Group CBT. Pharmacological treatment, comprising phenelzine or fluvoxamine or clonazepam. Combined CBT and pharmacological treatment (combination).	**Population**: People with social phobia. **Study design**: Narrative synthesis. **Source of clinical effectiveness data**: Systematic review and meta-analysis. **Source of resource use data**: Published studies and further estimates. **Source of unit costs**: Authors' estimates.	**Costs:** Intervention costs (CBT sessions including booster sessions, drug acquisition costs and prescription charges, doctor consultations). **Total cost per person over 2 years:** *Group CBT*: $760. *Pharmacological treatment*: ranging from $1,744 to $5,496. *Combination*: ranging from $2,504 to $6,256. **Primary outcome measure**: Effect size for symptoms of social anxiety or avoidance (versus mainly waiting list, minimal intervention or placebo). **Mean effect size:** *Group CBT*: 0.74. *Pharmacological treatment*: 0.62. *Combination*: 0.49.	Group CBT dominant.	**Perspective**: third party payer. **Cost year**: not specified, possibly 1996. **Currency**: US dollars. **Time horizon**: 2 years. **Discounting**: not necessary. **Applicability**: partially applicable. **Quality**: potentially serious limitations.

PSYCHOLOGICAL INTERVENTIONS – SELF-HELP (INTERNET) WITH SUPPORT

Hedman E, Andersson E, Ljotsson B, Andersson G, Ruck C, Lindefors N. Cost-effectiveness of Internet-based cognitive behavior therapy vs. cognitive behavioral group therapy for social anxiety disorder: results from a randomized controlled trial. Behaviour Research and Therapy. 2011a;49:729-36.

Study; Country; Study type	**Intervention details**	**Study population; Study design; Data sources**	**Costs: description and values; Outcomes: description and values**	**Results: cost effectiveness**	**Comments**
Hedman et al., 2011. Sweden. Cost-effective-ness analysis.	**Intervention:** Computer-based supported self-help. **Comparator:** Group CBT.	**Population:** People with social anxiety disorder according to DSM-IV, aged 18 to 64 years. **Study design**: RCT (HEDMAN2011). **Clinical effectiveness data source**: RCT (N = 126). **Resource use data source**: RCT (N = 126). **Source of unit costs:** national sources and published literature.	**Costs considered:** Intervention (therapist's time), GP visits, consultation with doctors, counsellors, psychotherapists, medical specialists, physiotherapists, health-related services (for example, alternative and home care, self-help groups), productivity losses including informal care. **Costs per person:** *Post-treatment (15 weeks):* Mean medical costs: self-help: $1,343; group CBT: $3,502. Mean total costs: self-help: $6,598; group CBT: $8,647. *Follow-up (15 weeks to 6 months):* Mean medical costs: self-help: $1,067; group CBT: $841. Mean total costs: self-help: $5,163; group CBT: $4,964.	Self-help dominant (slightly better outcome at a lower cost). **Reported probabilistic sensitivity analysis findings:** Self-help has 81% probability of being cost effective at zero WTP per extra responder. Self-help has 89% probability of being cost effective at WTP of $3,000/extra responder. Self-help has 79%	**Perspective**: societal (medical costs reported separately). **Cost year**: 2009. **Currency**: US$. **Time horizon**: 6 months. **Discounting**: not needed. **Applicability**: partially applicable. **Quality**: potentially serious limitations.

			Primary outcomes: LSAS. Percentage of responders defined using the Jacobson and Truax criteria. EQ-5D UK tariff score. **Outcomes**: *Post-treatment (15 weeks):* LSAS: self-help: 39.4 (SD 19.9); group CBT: 48.5 (SD 25.0). Responders: self-help: 55%; group CBT: 34%. EQ-5D: self-help: 0.82 (SD 0.14); group CBT: 0.80 (SD 0.17). *Follow-up (6 months):* LSAS: self-help: 32.1 (SD 23.1); group CBT: 40.7 (SD 23.7). Responders: self-help: 64%; group CBT: 45%. EQ-5D: self-help: 0.85 (SD 0.14); group CBT: 0.81 (SD 0.17).	probability of being cost effective at WTP of $40,000/change in utility score (EQ-5D) at 6 months.	

Titov N, Andrews G, Johnston L, Schwencke G, Choi I. Shyness programme: longer term benefits, cost-effectiveness, and acceptability (Provisional abstract). Australian and New Zealand Journal of Psychiatry. 2009b;43:36-44.

Study; Country; Study type	**Intervention details**	**Study population; Study design; Data sources**	**Costs: description and values; Outcomes: description and values**	**Results: cost effectiveness**	**Comments**
Titov et al., 2009. Australia. Cost effectiveness analysis.	Intervention Computer-based supported self-help - the Shyness programme. Comparators Face-to-face group CBT.	**Population:** Adults with social phobia diagnosed using DSM-IV. **Study design**: basic modelling. **Source of clinical effectiveness data**: two RCTs [TITOV2008a and TITOV2008b] and one non-comparative study. **Source of resource use data**: authors' assumptions and non-comparative study. **Source of unit costs**: not stated.	**Costs included:** therapist's time. **Total cost per person**: *Self-help*: AUS$300. *Group CBT*: AUS$800. **Primary outcome measure:** Number of YLD averted. **Number of YLD averted:** *Self-help versus waiting list*: 0.2007. *Group CBT versus do nothing*: 0.1407.	**Cost per YLD averted**: *Self-help versus waiting list*: AU$1,495. **Group CBT versus do nothing:** AU$5,686	**Perspective**: health service. **Cost year**: 2008. **Currency:** Australian dollars. **Time horizon:** 6 months. **Discounting:** not needed. **Applicability**: partially applicable. **Quality**: potentially serious limitations.