1. Motivational Techniques

1.1 Motivational vs. control; Motivational vs. other intervention

Treatment types: Motivational Techniques:- motivational enhancement therapy with/without relapse prevention, drinker's check-up, FRAMES (feedback, responsibility, advice, menu, empathy, self-efficacy)

Other:- broad spectrum treatment, CBT, TSF, non-directive reflective listening (counselling)

Control:- wait list control, information and referral, feedback

Study (Country)	Treatment Conditions (Forest Plot	Baseline characteristics & Treatment Goal	Outcomes	Setting, Treatment Characteristics & Assessmen
	Labelling) & Number of Participants			Points
DAVIDSON2007	Motivational vs. Other	DSM-IV alcohol dependent	Continuous	Setting
USA)	1.Motivational Enhancement Therapy (MET) n=76	Percent days abstinence approx 30.	*Percentage days abstinent	Outpatient treatment centre
		% heavy drinking days approx 63	*Percentage days heavy drinking (>=4	Treatment Characteristics
	2.Broad Spectrum Treatment (BST) n=73	Abstinent 3-21 days before treatment initiation	drinks per single occasion for women; >=5 for men)	MET: 4 monthly sessions. Session 1 lasted 90
		Treatment goal = abstinence or drinking reduction	Dichotomous	minutes. The remaining 3 sessions lasted 30 minutes each.
			*Attrition (if available): number of	BST: Sessions one and two are MET sessions.
			participants who have dropped out for any reason	Minimum of 8 sessions in total. The first four sessions are weekly. The remaining four are biweekly. The first session lasts 90 minutes. The remaining sessions last 60 minutes.
				**All participants also received Naltrexone for 12 weeks
				Assessment Points
				Post Treatment (3 months)

HESTER2005	Motivational vs. Control	Patients included with AUDIT score of 8+	Continuous	Setting
(USA)	1.Drinker's check-up (DCU) n=35 2.Wait-List Control (CONT) n=26	Baseline drinks/ drinking day from 5-8 across treatment groups Treatment Goal = abstinence or drinking reduction (moderation)	*Average Drinks per day (log transformed) *Drinks per drinking day (log transformed) Dichotomous *Attrition (if available): number of participants who have dropped out for any reason	Computer based intervention Treatment Characteristics DCU: Computerised brief (one session) intervention Assessment Points 1, 2, 12 month follow up
MATCH1997 (USA)	Motivational vs. Other 1.Motivational Enhancement Therapy (MET) n=577 2.Cognitive Behavioural Therapy (CBT) n=567 3.Twelve Step Facilitation (TSF) n=582	DSM-III-R diagnosis of alcohol abuse or dependence. Alcohol as primary drug of abuse. Active drinking 3 months prior to treatment entrance. % days abstinent: approx 30% Drinks/ drinking day: approx 16 drinks Treatment Goal = abstinence or drinking reduction	*Percentage Days Abstinent * Drinks per drinking day Dichotomous *Attrition (if available): number of participants who have dropped out for any reason	Setting Outpatient Clinical Research Unit Treatment Characteristics: 12 week treatment
ROSENBLUM2005 b (USA)	Motivational vs. Control 1.Motivational Enhancement Therapy + Relapse Prevention + information and referral (RPME) n=151 2.Information & Referral Only (CONT) n=139	All DSM IV alcohol dependent/abuse Treatment Goal = drinking reduction	*Number of days any alcohol used *Number of days of heavy alcohol use (>4 drinks) Dichotomous *Attrition (if available): number of participants who have dropped out for	Setting Soup Kitchen Treatment Characteristics MET with relapse prevention: 3 sessions a week over 4 weeks held in small groups followed by 3 sessions per week for 12 weeks of CBT. Assessment Points

			any reason	5 months
SELLMAN2001 (New Zealand)	Motivational vs. Other	All alcohol dependent (based on DSM-IV)	Continuous	Setting
(ivew Zealand)	Motivational vs. Control 1.Motivational Enhancement Therapy (MET) n=42	Unequivocal heavy drinking 6+ times in the 6 months prior to treatment: 90.2%		Outpatient treatment centre
			•	* Exceeded national guidelines 6 or more times
	2.Non-Directive Reflective Listening (NDRL) n=40		*Drank more than 10 standard drinks at	Assessment Points
	3.No Further Treatment - control		least once	6 month & 5 year follow-up
	(CONT) n=40		*Drank more than 10 standard drinks six or more times	
			Dichotomous	
			*Number of participants lapsed	
			*Number of participants relapsed	
			*Attrition (if available): number of participants who have dropped out for any reason	
SHAKESHAFT200	Motivational vs. Other	Weekly consumption of approx 32 Australian	Continuous	Setting
2 (Australia)	1. FRAMES (feedback, responsibility, advice, menu, empathy, self-efficacy)	units/week	*Drinks per week	Community based drug and alcohol counselling centre
	n=147		*Binge consumption:- occasions in prior 30 days where at least 7 (male) or 5 (female) drinks consumed	Treatment Characteristics
	2.Cognitive Behaviour Therapy (CBT) n=148		Dichotomous	FRAMES: 1 or more sessions with face-to-face counselling exceeding 90 minutes
			*Attrition (if available): number of participants who have dropped out for	CBT: 6 consecutive weekly 45 minute sessions
			any reason	Assessment Points
				6 months

SOBELL2002	Motivational vs. Other	All alcohol abusers (drinking approximately	Continuous	Setting
(USA)	1.Motivational Enhancement/Personalized Feedback	12 drinks/week and drinking 5 or more drinks on at least 5 days in the past year)	*Days drinking per week	Community mail level intervention
	(MET) n=414		*Drinks per drinking day	Treatment Characteristics
	2.Bibliotherapy/ Drinking Guidelines (PSYEDU) n=411		*Drinks per week	Bibliotherapy: participants received alcohol information available to the general public.
			*Days drinking >=5 drinks	MET: participants received personalised advice
			Dichotomous	feedback based on responses to an alcohol
				questionnaire.
			*Attrition (if available): number of participants who have dropped out for	Assessment Points
			any reason	ASSESSMENT TORKS
				1 year follow-up
UKATT2005 (UK)	Motivational vs. Other	DSM-IV alcohol dependent/abuse	Continuous	Setting
	1. Motivational Enhancement Therapy (MET) n=422	Alcohol as clients' main problem	*Number of drinks per drinking day	Outpatient treatment clinic
		Drank alcohol in the last 3 months	Percentage days abstinent	Treatment Characteristics
	2.Social Behaviour & Network Therapy (SBNT) n=320	Percent Days abstinent- 29.5%	Dichotomous	*MET:- three 50 minute sessions over 8-12 weeks
		No. of drinks/drinking day- 26.8	*Attrition (if available): number of participants who have dropped out for	*SBNT: eight 50 minutes sessions over 8-12 weeks
		Treatment Goal = abstinence or drinking	any reason	Assessment Points
		reduction		3, 12 month follow up

2 Twelve-Step Facilitation (TSF)

2.1 TSF vs. other intervention; different formats of TSF

Treatment types: TSF:- TSF with/without counselling, intensive TSF, directive TSF, motivational TSF

Other:- cognitive behavioural therapy, brief relationship therapy, BCT, psychoeducational control, motivational enhancement therapy, coping skills

Study (Country)	Treatment Conditions (Forest Plot Labelling) & Number of Participants	Baseline characteristics & Treatment Goal	Outcomes	Setting, Treatment Characteristics & Assessment Points
EASTON2007 (USA)	TSF vs. Other	DSM-IV alcohol dependent	Continuous	Setting
	1.Twelve-Step Facilitation (TSF) n=38	Approx 19 years of alcohol use.	*Percent days abstinent	Outpatient Substance Abuse Treatment Program
			Dichotomous	Treatment Characteristics
	2.Cognitive Behavioural Therapy (CBT) n=40	Days alcohol use in past 28: approx 6	*Attrition (if available): number of participants who have dropped out	Weekly 90-min sessions over 12 weeks
		Treatment Goal = drinking reduction	for any reason	Group sessions had a maximum of 10 participants per group
		reduction		Assessment Points
				12 weeks post treatment and 6 months
TALOGERAL ADEC CO	TOTAL OIL			
FALSSTEWART2005 (USA)	TSF vs. Other	DSM-IV alcohol dependent	Continuous	Setting
	1.Individual-Based Twelve- Step	% days heavy drinking from	*Percentage days heavy drinking (>=6	

	Facilitation & Group Counselling (TSF) n=25 2. Behavioural Couples Therapy & Group Counselling (BCT) n=25 3.Brief Relationship Therapy & Group Counselling (BRT) n=25 4.Psychoedcuational Attention Control Treatment (PACT) n=25	56-59% across treatment groups.	standard drinks) Dichotomous *Attrition (if available): number of participants who have dropped out for any reason	Outpatient treatment clinic Treatment Characteristics PACT, BRT, IBT conditions: 18 sessions, 12 weeks, which included weekly 12-step oriented group sessions and condition specific treatment every other week BCT: 24 sessions (2 sessions per week) for 12 weeks; included 1 group therapy session and 1 BCT session All treatments: therapy groups = 90 mins, condition-specific treatment = 60 minutes Assessment Points Post-Treatment 3, 6, 9, 12 months follow-up
FALSSTEWART2006 (USA)	TSF vs. Other 1.Individual Based Twelve-Step Facilitation only (TSF) n=46 2.Behavioral Couples Therapy & Individual-Based Treatment (BCT) n=46 3.Psychoedcuational Attention Control Treatment (PACT) n=46	DSM-IV alcohol dependent/abuse % days abstinent from 40- 44% across treatment groups Treatment Goal = abstinence	Percentage days abstinent (in last 90 days) Dichotomous *Attrition (if available): number of participants who have dropped out for any reason	Outpatient treatment centre Treatment Characteristics BCT: 32 sessions, 12 of which were attended with the participant's partner. The remaining 20 sessions were individual 12-step facilitation. TSF: 32 individual 12-step facilitation sessions PACT: 20 sessions of individual treatment and 12 lectures on substance abuse which were attended with a partner All sessions were 60 minutes Assessment Points Post Treatment 3, 6, 9, 12 month follow-up

MATCH 1997 (USA)	TSF vs. Other	DSM-III-R alcohol	Continuous	Setting
, , ,		dependent/abuse		
	1.Twelve Step Facilitation (TSF)	dependent, de dec	*Percentage Days Abstinent	Outpatient clinical research unit
	n=582	Alcohol as primary drug of		1
		abuse.	* Drinks per drinking day	Treatment Characteristics
	2.Motivational Enhancement	as ase.		
	Therapy (MET) n=577	Active drinking 3 months	Dichotomous	12 week treatment
	, ,	prior to treatment entrance.		
	3.Cognitive Behavioural Therapy	prior to treatment critical	*Attrition (if available): number of	Assessment Points
	(CBT) n=567	% days abstinent: approx	participants who have dropped out	
		30%	for any reason	Post Treatment (3 month)
		30,0		
		Drinks/ drinking day:		6, 9, 12, 15 month follow-up
		approx 16 drinks		
		T F		
		Treatment Goal =		
		abstinence or drinking		
		reduction		
TIMKO2008 (USA)	Different formats of TSF	Substance use disorder	Continuous	Setting
, ,		outpatients		
	1.Intensive TSF (I-TSF) n=181		*Percent of participants Abstinent	Outpatient treatment clinic
		ASI alcohol score: approx		
	2.Standard TSF (S-TSF) n=164	0.28	Dichotomous	Treatment Characteristics
			*Attrition (if available): number of	Standard: patient given AA schedule and encouraged to attend sessions.
			participants who have dropped out	Counsellors and patients reviewed relapse prevention, but treatment was
			for any reason	more focused on psychoeducation.
				Intensive: Standard treatment plus active arrangement of AA meeting
				attendance by the counsellor. Participants were encouraged to keep an AA
				attendance journal.
				Assessment Points
				6 and 12 month fallow up
				6 and 12 month follow-up
WALITZER2009	TSF vs. Other	Outpatient alcoholics.	Continuous	Setting
(USA)	151 VS. OHIEI	outpatient aicononics.	Commuous	ocum <u>e</u>
(U3A)	Different formats of TSF	% days abstinent: 35.4	*Percent days abstinent	Outpatient treatment centre
	Different formats of 151	70 days absument. 30.4	1 creen days absument	Outputera treatment terrare
	1.Twelve-Step Facilitation-			
	1.1 Welve outpracmation			

Directive Approach & Coping	% days heavy drinking: 32.7	*Percent days heavy drinking	Treatment Characteristics
Skills (TSFdire) n=53			
	DrInC score= 41.3	Dichotomous	12 sessions (Initial session lasted 90 mins; subsequent sessions lasted 60
2.Twelve-Step Facilitation			mins) with weekly encouragement to attend AA meetings.
Motivational Approach & Coping		*Attrition (if available): number of	
Skills (TSFmot) n=58		participants who have dropped out	Assessment Points
, ,		for any reason	
3. Coping Skills alone (CS) n=58			Post Treatment
			3, 6, 9, 12 month follow-up

2.2 Studies not included in meta-analyses but described in evidence summary

Study Characteristics & Reason for Exclusion	Treatment Characteristics
KAHLER2004 (USA)	Baseline characteristics
Intensive vs. Brief TSF	*Current alcohol dependence diagnosis
1.Brief TSF	*Mean drinks per drinking ay: approx 23 drinks
2.Motivatioinal (intensive) TSF	*Alcohol Dependence Scale score: approx 23
Reason for Exclusion from Meta-Analyses	*Percentage of days abstinent: approx 15%
No available outcomes for inclusion in meta-analyses	Setting:- Inpatient treatment clinic
	Treatment Characteristics
	Brief TSF – 5-min session, describe AA, information leaflet
	Motivational TSF – manual-based, 60-min session, extensive discussion about merits of AA
	Assessment Points:- 1,3, 6 month follow-up

Cognitive Behavioural Therapies

3.1 Cognitive Behavioural vs. TAU; Cognitive Behavioural vs. other intervention; different formats of cognitive behavioural therapies

Treatment types: Cognitive behavioural therapy:- individual CBT with/without relapse prevention or MET, alcohol-focused coping skills, group CBT, broad spectrum treatment, group social skills training, communication skills training with/without family therapy, cognitive behavioural mood management training, coping skills with/without cue exposure or MET, relapse prevention with MET

Other:- MET, TSF with/without coping skills, counselling, BCT, psychodynamic therapy, cue exposure, FRAMES

Control:- non-specific supportive therapy, TAU with a daily craving record, Information and referral

Study (Country)	Treatment Conditions (Forest Plot Labelling)	Baseline characteristics & Treatment	Outcomes	Setting & Treatment Characteristics
	& Number of Participants	Goal		
BURTSCHEIDT20	Cognitive Behavioural vs. TAU	DSM-III-R/ICD-10 alcohol dependent	Dichotomous	Setting
01a (Germany)				
	Different formats of cognitive behavioural	Consuming alcohol in an addictive	*Attrition (if available): number of participants	Outpatient treatment clinic
		manner for at least 6 months pre	who have dropped out for any reason	
	1.Cognitive Behaviour Therapy (CBT) n=31	detoxification		Treatment Characteristics
			*Abstinent:- no subjective or objective (CDT<30	
	2.Coping Skills (CS) n=32		U/1) during last 6 months	*CBT & CS: 100 minute sessions weekly
				for 26 weeks over the course of 6 months.
	3. Non-Specific Supportive Therapy (TAU)		*Lapse/Improved:- in last 6 months no more than	
	n=40		3 drinking episodes lasting <1 week OR <30g	Group sessions (max 6 participants)
			(women or <60g (men) alcohol per day on a	
			regular basis; no signs pathological drinking	Assessment Points
			*Relapse:- >3 lapses or regular consumption of	6, 12, 18 and 24 month follow-up
			>30/60g alcohol per day; alcohol use disorder or	
			in-patient treatment in last 6 months	
			m-patient treatment in last 6 months	

MARQUES2001	Different formats of cognitive behavioural	DSM-III-R alcohol and/or drug dependent	Dichotomous	Setting
(Brazil)	Different formats of cognitive behavioural	Down-in-K alcohol and/ of drug dependent	Denotomous	Setting
(DIazii)	1.Group Cognitive-Behavioural Psychotherapy	In the last 90 days: Number of drinking	*Number of heavy drinkers >20 drinks/week and	Outpatient drug dependence clinic
	(GR) n=78	days- 49	>10% heavy days (>+ 5 drinks/occasion) in 90	
			days prior to assessment	Treatment Characteristics
	2.Individual Cognitive-Behavioural	Number of heavy drinking days- 34.5 (sig.		
	Psychotherapy (IND) n=77	more drinking in group treatment than	*Attrition (if available): number of participants	17 sessions over 8 months. There was one
		individual treatment group)	who have dropped out for any reason	session/week in month 1-2, one session
				fortnightly in months3-5, and one session
		Number of problem drinking days- 16.5		per month in the final 3 months.
		(significantly more drinking in group		Group sessions had approximately seven
		treatment than individual treatment		participants.
		group)		participants.
		Mean weekly consumption- 36.5 (sig. more		Assessment Points
		drinking in group treatment than		
		individual treatment group)		15 month follow up
		marriada nedinen group)		
		SADD score abstinence/ moderate rates:		
		17%		
CONNORS2001	Cognitive Behavioural vs. Other	DSM-III-R lifetime alcohol dependence.	Continuous	Setting
CONNORS2001 (USA)		-		
	Cognitive Behavioural vs. Other Different formats of cognitive behavioural	DSM-III-R lifetime alcohol dependence. Dependence- moderate: 66%	Abstinent/Light (1-3 standard drinks) drinking	Setting Outpatient Clinical Research Unit
	Different formats of cognitive behavioural	Dependence- moderate: 66%		Outpatient Clinical Research Unit
	Different formats of cognitive behavioural 1.Alcohol-Focused Coping Skills & Life Skills	-	Abstinent/Light (1-3 standard drinks) drinking days	
	Different formats of cognitive behavioural 1.Alcohol-Focused Coping Skills & Life Skills (General Coping Skills) – NORMAL	Dependence- moderate: 66% Dependence- severe: 8.3	Abstinent/Light (1-3 standard drinks) drinking	Outpatient Clinical Research Unit
	Different formats of cognitive behavioural 1.Alcohol-Focused Coping Skills & Life Skills	Dependence- moderate: 66%	Abstinent/Light (1-3 standard drinks) drinking days	Outpatient Clinical Research Unit Treatment Characteristics
	Different formats of cognitive behavioural 1.Alcohol-Focused Coping Skills & Life Skills (General Coping Skills) – NORMAL	Dependence- moderate: 66% Dependence- severe: 8.3	Abstinent/Light (1-3 standard drinks) drinking days Dichotomous	Outpatient Clinical Research Unit Treatment Characteristics All received: Coping Skills over 10 weekly
	Different formats of cognitive behavioural 1.Alcohol-Focused Coping Skills & Life Skills (General Coping Skills) – NORMAL INTENSITY (AFCS+LS+NOR) n= 39	Dependence- moderate: 66% Dependence- severe: 8.3 Dependence- mild: 18.1 Average monthly abstinence days: 10.1	Abstinent/Light (1-3 standard drinks) drinking days Dichotomous *Attrition (if available): number of participants	Outpatient Clinical Research Unit Treatment Characteristics All received: Coping Skills over 10 weekly 2 hour outpatient group (3-6 people)
	Different formats of cognitive behavioural 1. Alcohol-Focused Coping Skills & Life Skills (General Coping Skills) – NORMAL INTENSITY (AFCS+LS+NOR) n= 39 2. Alcohol-Focused Coping Skills alone-	Dependence- moderate: 66% Dependence- severe: 8.3 Dependence- mild: 18.1	Abstinent/Light (1-3 standard drinks) drinking days Dichotomous *Attrition (if available): number of participants	Outpatient Clinical Research Unit Treatment Characteristics All received: Coping Skills over 10 weekly 2 hour outpatient group (3-6 people) sessions and drinking-reduction training (13hrs)
	Different formats of cognitive behavioural 1. Alcohol-Focused Coping Skills & Life Skills (General Coping Skills) – NORMAL INTENSITY (AFCS+LS+NOR) n= 39 2. Alcohol-Focused Coping Skills alone– MORE INTENSIVE & Psychoeducational	Dependence- moderate: 66% Dependence- severe: 8.3 Dependence- mild: 18.1 Average monthly abstinence days: 10.1 Light days: 6.1	Abstinent/Light (1-3 standard drinks) drinking days Dichotomous *Attrition (if available): number of participants	Outpatient Clinical Research Unit Treatment Characteristics All received: Coping Skills over 10 weekly 2 hour outpatient group (3-6 people) sessions and drinking-reduction training
	Different formats of cognitive behavioural 1. Alcohol-Focused Coping Skills & Life Skills (General Coping Skills) – NORMAL INTENSITY (AFCS+LS+NOR) n= 39 2. Alcohol-Focused Coping Skills alone-	Dependence- moderate: 66% Dependence- severe: 8.3 Dependence- mild: 18.1 Average monthly abstinence days: 10.1	Abstinent/Light (1-3 standard drinks) drinking days Dichotomous *Attrition (if available): number of participants	Outpatient Clinical Research Unit Treatment Characteristics All received: Coping Skills over 10 weekly 2 hour outpatient group (3-6 people) sessions and drinking-reduction training (13hrs) Divided (according to group):
	Different formats of cognitive behavioural 1. Alcohol-Focused Coping Skills & Life Skills (General Coping Skills) – NORMAL INTENSITY (AFCS+LS+NOR) n= 39 2. Alcohol-Focused Coping Skills alone– MORE INTENSIVE & Psychoeducational	Dependence- moderate: 66% Dependence- severe: 8.3 Dependence- mild: 18.1 Average monthly abstinence days: 10.1 Light days: 6.1 Moderate days: 8	Abstinent/Light (1-3 standard drinks) drinking days Dichotomous *Attrition (if available): number of participants	Outpatient Clinical Research Unit Treatment Characteristics All received: Coping Skills over 10 weekly 2 hour outpatient group (3-6 people) sessions and drinking-reduction training (13hrs)
	Different formats of cognitive behavioural 1. Alcohol-Focused Coping Skills & Life Skills (General Coping Skills) – NORMAL INTENSITY (AFCS+LS+NOR) n= 39 2. Alcohol-Focused Coping Skills alone– MORE INTENSIVE & Psychoeducational	Dependence- moderate: 66% Dependence- severe: 8.3 Dependence- mild: 18.1 Average monthly abstinence days: 10.1 Light days: 6.1	Abstinent/Light (1-3 standard drinks) drinking days Dichotomous *Attrition (if available): number of participants	Outpatient Clinical Research Unit Treatment Characteristics All received: Coping Skills over 10 weekly 2 hour outpatient group (3-6 people) sessions and drinking-reduction training (13hrs) Divided (according to group): *Life Skills (general coping skills) (7hrs)
	Different formats of cognitive behavioural 1.Alcohol-Focused Coping Skills & Life Skills (General Coping Skills) – NORMAL INTENSITY (AFCS+LS+NOR) n= 39 2. Alcohol-Focused Coping Skills alone– MORE INTENSIVE & Psychoeducational (AFCS+PSY+INT) n= 41	Dependence- moderate: 66% Dependence- severe: 8.3 Dependence- mild: 18.1 Average monthly abstinence days: 10.1 Light days: 6.1 Moderate days: 8	Abstinent/Light (1-3 standard drinks) drinking days Dichotomous *Attrition (if available): number of participants	Outpatient Clinical Research Unit Treatment Characteristics All received: Coping Skills over 10 weekly 2 hour outpatient group (3-6 people) sessions and drinking-reduction training (13hrs) Divided (according to group):
	Different formats of cognitive behavioural 1.Alcohol-Focused Coping Skills & Life Skills (General Coping Skills) – NORMAL INTENSITY (AFCS+LS+NOR) n= 39 2. Alcohol-Focused Coping Skills alone– MORE INTENSIVE & Psychoeducational (AFCS+PSY+INT) n= 41 3. Alcohol-Focused Coping Skills & Life Skills	Dependence- moderate: 66% Dependence- severe: 8.3 Dependence- mild: 18.1 Average monthly abstinence days: 10.1 Light days: 6.1 Moderate days: 8 Heavy days: 5.7	Abstinent/Light (1-3 standard drinks) drinking days Dichotomous *Attrition (if available): number of participants	Outpatient Clinical Research Unit Treatment Characteristics All received: Coping Skills over 10 weekly 2 hour outpatient group (3-6 people) sessions and drinking-reduction training (13hrs) Divided (according to group): *Life Skills (general coping skills) (7hrs) *Psychoeducational (7hrs)
	Different formats of cognitive behavioural 1.Alcohol-Focused Coping Skills & Life Skills (General Coping Skills) – NORMAL INTENSITY (AFCS+LS+NOR) n= 39 2. Alcohol-Focused Coping Skills alone– MORE INTENSIVE & Psychoeducational (AFCS+PSY+INT) n= 41 3. Alcohol-Focused Coping Skills & Life Skills (General Coping Skills) - MORE INTENSIVE	Dependence- moderate: 66% Dependence- severe: 8.3 Dependence- mild: 18.1 Average monthly abstinence days: 10.1 Light days: 6.1 Moderate days: 8 Heavy days: 5.7	Abstinent/Light (1-3 standard drinks) drinking days Dichotomous *Attrition (if available): number of participants	Outpatient Clinical Research Unit Treatment Characteristics All received: Coping Skills over 10 weekly 2 hour outpatient group (3-6 people) sessions and drinking-reduction training (13hrs) Divided (according to group): *Life Skills (general coping skills) (7hrs)
	Different formats of cognitive behavioural 1.Alcohol-Focused Coping Skills & Life Skills (General Coping Skills) – NORMAL INTENSITY (AFCS+LS+NOR) n= 39 2. Alcohol-Focused Coping Skills alone– MORE INTENSIVE & Psychoeducational (AFCS+PSY+INT) n= 41 3. Alcohol-Focused Coping Skills & Life Skills	Dependence- moderate: 66% Dependence- severe: 8.3 Dependence- mild: 18.1 Average monthly abstinence days: 10.1 Light days: 6.1 Moderate days: 8 Heavy days: 5.7	Abstinent/Light (1-3 standard drinks) drinking days Dichotomous *Attrition (if available): number of participants	Outpatient Clinical Research Unit Treatment Characteristics All received: Coping Skills over 10 weekly 2 hour outpatient group (3-6 people) sessions and drinking-reduction training (13hrs) Divided (according to group): *Life Skills (general coping skills) (7hrs) *Psychoeducational (7hrs) *Booster sessions (more intensive) = 8

				Assessment Points
	4. Alcohol-Focused Coping Skills alone - NORMAL INTENSITY & Psychoeducational (AFCS+PSY+NOR) n= 31			6,12, 18 month follow-up
DAVIDSON2007 (USA)	Cognitive Behavioural vs. Other	DSM-IV alcohol dependent	Continuous	Setting
(3311)	1.Broad Spectrum Treatment (BST) n=73	% days abstinence approx 30	*Percentage days abstinent	Outpatient treatment centre
	2.Motivational Enhancement Therapy (MET) n=76	% heavy drinking days approx 63	*Percentage days heavy drinking (>=4 drinks per single occasion for women; >=5 for men)	Treatment Characteristics
		Abstinent 3-21 days before treatment	P. Latanana	BST: Sessions one and two are MET
		initiation	Dichotomous	sessions. Minimum of 8 sessions in total. The first four sessions are weekly. The
		Treatment goal = abstinence or drinking reduction	*Attrition (if available): number of participants who have dropped out for any reason	remaining four are bi-weekly. The first session lasts 90 minutes. The remaining sessions last 60 minutes.
				MET: 4 monthly sessions. Session 1 lasted 90 minutes. The remaining 3 sessions lasted 30 minutes each.
				All participants also received Naltrexone for 12 weeks
				Assessment Points
				Post Treatment (3 months)
EASTON2007 (USA)	Cognitive Behavioural vs. Other	DSM-IV alcohol dependent	Continuous	Setting
(USA)	1.Cognitive Behavioural Therapy (CBT) n=40	Approx 19 years of alcohol use.	*Percent days abstinent	Outpatient substance abuse program
	2.Twelve-Step Facilitation (TSF) n=38	Days alcohol use in past 28: approx 6	Dichotomous	Treatment Characteristics
		Treatment Goal = drinking reduction	*Attrition (if available): number of participants who have dropped out for any reason	Weekly 90-min sessions over 12 weeks
			who have dropped out for any reason	Group sessions had a maximum of 10

				participants per group Assessment Points 12 weeks post treatment and 6 months
ERIKSEN1986 (Norway)	Cognitive Behavioural vs. Other 1.Social Skills Training Group (CopSk) n=12 2.Group Counselling (COUNS) n=12	A serious alcohol problem but no drug addiction. Previous alcoholism inpatient status: 66.7% No. of alcoholism inpatient treatments: 1.85 Years of self-acknowledged problem drinking: 11.95 Treatment Goal= sober days; reduced quantity of alcohol consumed	* Alcohol Consumption (cl pure alcohol) *Sober Days Over the previous 2 weeks Dichotomous *Attrition (if available): number of participants who have dropped out for any reason	Outpatient treatment program Treatment Characteristics 8 weekly 90 minute small group sessions Assessment Points 12 month follow-up
LAM2009 (USA)	Cognitive Behavioural vs. Other 1.Individual-Based Coping Skills (CS) N=10 2.Behavioural Couples Therapy & Parental Skills Training (PSBCT) N=10 3. Behavioural Couples Therapy (BCT) n=10	DSM-IV alcohol dependent/abuse % days abstinent: approx 37	*Percentage Days Abstinent Dichotomous *Attrition (if available): number of participants who have dropped out for any reason	Outpatient Treatment Center Treatment Characteristics Two 60-min sessions/week for 12 weeks. Treatment consists of: 12 standard individual treatment sessions plus 12 BCT sessions or 12 PSBCT sessions (included 6 BCT & parental-skills training) or 12 individual coping skills sessions

				Assessment Points
				Post-treatment (3 months)
				6 & 12 month follow-up
LITT2003 (USA)	Cognitive Behavioural vs. Other	DSM-IV alcohol dependent/abuse	Continuous	Setting
	1. Coping Skills (COPSK) n=69	Drinking days 6 months prior to intake: 72%	*Proportion Days Abstinent	Outpatient clinical research unit
	2.Group Counselling (COUNS) n=59	D: 1.11	*Time to 1st drink (days	Treatment Characteristics
		Prior alcohol treatments: 1.5	*Time to 1st Heavy drink (days)	26 weekly 90 minute sessions
		Proportion days abstinent: 0.38	*Proportion days heavy drinking:- 6 for men, 4 for	Assessment Points
		Proportion heavy drinking days: 0.48	women, standard drinks – 0.5oz absolute alcohol – consumed in a 24-hr period)	3, 6, 9, 12, 15, 18 month follow-up
			Proportion abstinent	
			In last 90 days	
			Dichotomous	
			*Attrition (if available): number of participants who have dropped out for any reason	
LITT2009 (USA)	Different formats of cognitive behavioural	DSM-IV alcohol abuse or dependence.	Continuous	Setting
	therapy	Proportion days abstinence: 0.19	*Proportion Days Abstinent	Outpatient
	1.Packaged CBT Program (PCBT) n=53	Proportion days heavy drinking: approx	*Proportion Days Heavy Drinking	Treatment Characteristics
	2.individual Assessment Treatment Program (IATP) n=57	0.59	Dichotomous	12 weekly, 60 min out-patient sessions
			*Attrition (if available): number of participants	Assessment Points

			who have dropped out for any reason	Post Treatment (3 months)
MATCH1997	Cognitive Behavioural vs. Other	DSM-III-R alcohol dependent/abuse	Continuous	Setting
(USA)	1.Cognitive Behavioural Therapy CBT) n=567	Alcohol as primary drug of abuse.	*Percentage Days Abstinent	Outpatient clinical research unit
	2.Motivational Enhancement Therapy (MET) n=577	Active drinking 3 months prior to treatment entrance.	* Drinks per drinking day	Treatment Characteristics
			Dichotomous	12 week treatment
	3.Twelve Step Facilitation (TSF) n=582	% days abstinent: approx 30%	*Attrition (if available): number of participants	Assessment Points
		Drinks/ drinking day: approx 16 drinks	who have dropped out for any reason	Post Treatment (3 month)
		Treatment Goal = abstinence or drinking reduction		6, 9, 12, 15 month follow-up
MONTI1990	Different formats of cognitive behavioural	DSM-III alcohol dependent	Continuous	Setting
(USA)	therapy 1.Communication Skills Training (CST) n=23	Down in aconor dependent	Continuous	Setting
		% possible drinking days abstinent: approx 42	*Percent days abstinent	Inpatient VA medical centre
			*Percentage heavy drinking days	Treatment Characteristics
	2.Communciation Skills Training with Family Therapy (CSTF) n=23	% possible days drinking heavily: approx 46	*Number of drinks per possible drinking day	12 hours over 4 weeks
	3.Cognitive Behavioural Mood Management Training (CBMMT) n=23	No. of drinks/ possible drinking day: 11 No. of drinks/ actual drinking day: 18	*Number of drinks per actual drinking days	All conditions included 28 day standard
			*Number of days to 1st drink	in-patient treatment
		, , ,	*Normalism of James to 10th accordated in a James	Assessment Points
			*Number of days to 1st heavy drinking day	6 month follow-up
			All assessed for 'possible drinking days' – day not in in-patient treatment or prison	
			Heavy drinking: ≥6 drinks per drinking day	
			Dichotomous	
			*Attrition (if available): number of participants who have dropped out for any reason	

MONTI1993 (USA)	Cognitive Behavioural vs. TAU 1.Cue Exposure & Coping Skills (CE+CS) n=22 2.TAU & daily cravings recorded (TAU) n=18	DSM-III alcohol dependent, with heavy drinking the week prior to admission. ADS score: 20.7 SMAST: 9.97 TLFB: 12.1 drinks/drinking day, 47% days abstinent, 45% heavy drinking days.	*Number of Participants Lapsed *Number of Participants Relapsed (at least 6 standard drinks) *Attrition (if available): number of participants who have dropped out for any reason	Setting Inpatient VA medical centre Treatment Characteristics CE+CS= 6 weekly 55 minute sessions for 2 weeks Assessment Points 0-3 months, 3-6 months
MORGANSTERN 2007 (USA)	Cognitive Behavioural vs. Other 1.Coping Skills & Motivational Enhancement Therapy (CS+MET) n=47 2.Motivational Enhancement Therapy (MET) n=42	87.9% of participants met DSM-IV criteria for alcohol dependence. Average drinks per drinking day: 9.5 Average drinks/day: 6.1 Mean ADS score: 12.2 Treatment Goal = drinking reduction	*Drinks per day Dichotomous *Attrition (if available): number of participants who have dropped out for any reason	Setting Outpatient clinical research unit Treatment Characteristics CS+MET: 12 weekly sessions MET alone: 4 sessions delivered over 12 weeks Assessment Points 6 weeks, post-treatment (3 months), 6 and 12 months
ROSENBLUM200 5a (USA)	Different formats of cognitive behavioural therapy 1.Relapse Prevention (RP) n=114 2.Relapse Prevention with Motivational enhancements (GMI) n=116	DSM-IV alcohol/drug dependent/ abuse. Days abstinent: 14 ASI alcohol score: approx 0.47	*Percent Days Abstinent Dichotomous *Attrition (if available): number of participants who have dropped out for any reason	Setting Outpatient clinical research unit Treatment Characteristics 2 sessions per week for 10 weeks (20 sessions) All group sessions Assessment Points

				15 week follow-up
ROSENBLUM200 5b (USA)	Cognitive behavioural vs. Control	DSM IV alcohol dependent/abuse	Continuous	Setting
30 (O3A)	1.Relapse Prevention & Motivational Enhancement Therapies - Service Outreach		*Number of days drank any alcohol	Soup Kitchen
	and recovery (RPME) n=151		*Days of heavy drinking (4oz liquor, 4 cups wine or 4 12oz bottles/cans beer, or more)	Treatment Characteristics
	2.Information and Referral only (CONT) n=139		of 4 1202 bottles) calls beet, of more)	MET with relapse prevention: 3 sessions a week over 4 weeks held in small groups
			In the past 30 days	followed by 3 sessions per week for 12 weeks of relapse prevention
			Dichotomous	Assessment Points
			*Attrition (if available): number of participants who have dropped out for any reason	Post Treatment (5 months)
SANDAHL1998	Cognitive Behavioural vs. Other	DSM-III-R alcohol dependent and	Continuous	Setting
(Sweden)	1.Relapse Prevention (RP) n=24	antisocial personality disorder	*Number of abstinent days	Outpatient treatment clinic
	2.Time-limited Group Psychotherapy	Decentiles on AVI: 4.3	*g.abs.alc/drinking day	Treatment Characteristics
	(psychodynamic therapy) (PSYDY) n=25	Duration of abuse: 11 years	*Days>80g abs.alc	15 weekly 90 minute group sessions
		Age of onset of uncontrolled drinking: 36 years		Assessment Points
		Reported morning drinking: 75.5%	Dichotomous	15 month follow-up
		Treatment Goal = Drinking reduction	*Attrition (if available): number of participants who have dropped out for any reason	
SHAKESHAFT20 02 (Australia)	Cognitive Behavioural vs. Other	Weekly consumption of approx 32 Australian units/ week	Continuous	Setting
02 (Australia)	1. Cognitive Behaviour Therapy (CBT) n=148	Australian units/ week	*Drinks per week	Community based drug and alcohol counselling centre
	2.FRAMES (feedback, responsibility, advice, menu, empathy, self-efficacy) n=147		*Binge consumption:- occasions in prior 30 days where at least 7 (male) or 5 (female) drinks	Treatment Characteristics
			consumed	FRAMES: 1 or more sessions with face-to-

			Dichotomous	face counselling exceeding 90 minutes
			*Attrition (if available): number of participants who have dropped out for any reason	CBT: 6 consecutive weekly 45 minute sessions
				Assessment Points
				6 month follow-up
SITHARTHAN19 97 (Australia)	Cognitive Behavioural vs. Other	A score of ≥10 on the ICQ and <30 on the SADQ-C.	Continuous	Setting
, ,	1.Cognitive Behaviour Therapy (CBT) n=20	SADQ-C score: 18.81	*Drinking days per month	Outpatient
	2.Cue Exposure (CE) n=22	ICQ score: 13.05	*Number of standard drinks per occasion	Treatment Characteristics
		CDSES score: 35.93		Group Treatment, six, 90 minute weekly sessions
		Drinking days/ month: 20.2	*Attrition (if available): number of participants	Assessment Points
		Consumption/ occasion: 8.82	who have dropped out for any reason	6 month follow-up
		Treatment Goal= Moderation		
VEDEL2008 (Netherlands)	Cognitive Behavioural Therapy vs. Other	DSM-IV alcohol abuse or dependence.	Continuous	Setting
(retrierarius)	1.Cognitive-Behavoiral Therapy (CBT) n=34	62% diagnosed as alcohol dependent.	*Units per week	Outpatient treatment centre
	2.Behavioural Couples Therapy (BCT) n=30	50% when drinking drank 7+ units.	*Severe lapse (>6 units per occasion)	Treatment Characteristics
		57% drank daily or nearly daily Treatment Goal = abstinence or controlled	Dichotomous	Both treatments 10 sessions over 5-6 month period
		drinking (with guidelines)	*Attrition (if available): number of participants	*CBT:- 45-60 mins per session
			who have dropped out for any reason	* BCT:- 90 mins per session
				Assessment Points
				Post-treatment
				6 month follow-up

WALITZER2009	Cognitive Behavioural vs. Other	Outpatient alcoholics.	Continuous	Setting
(USA)	1. Coping Skills (CS) n=58	% days abstinent: 35.4	*Percent days abstinent	Outpatient treatment centre
	2Twelve-Step Facilitation-Directive Approach & Coping Skills (TSFdire) n=58	% days heavy drinking: 32.7	*Percent days heavy drinking	Treatment Characteristics
		DrInC score= 41.3	Dichotomous	12 sessions (Initial session lasted 90 mins;
	3. Twelve-Step Facilitation Motivational Approach & Coping Skills		*Attrition (if available): number of participants	subsequent sessions lasted 60 mins) with weekly encouragement to attend AA
			who have dropped out for any reason	meetings.
				Assessment Points
				Post Treatment
				3, 6, 9, 12 month follow-up

3.2 Studies not included in meta-analyses but described in evidence summary

Study Characteristics & Reason for Exclusion	Treatment Characteristics		
KÄLLMÉN2003	Baseline characteristics		
Cognitive Behavioural vs. Control	*Grams of alcohol per week: 657 – 742g across groups		
1. Coping Skills	Treatment Goal:- abstinence or drinking reduction/moderation		
2. Control	Setting:- Outpatient clinical research unit		
Reason for Exclusion from Meta-Analyses	Treatment Characteristics:- Six group meetings		
No available outcomes for inclusion in meta-analyses	Assessment Points:- 6, 18 month follow-up		

4 Behavioural Therapies

4.1 Behavioural vs. TAU or control; Behavioural vs. other intervention; different formats of behavioural therapy

Treatment types: Behavioural:- BSMT/ BSCT, moderation-oriented cue exposure, cue exposure with CBT, emotional cue exposure with CBT, cue exposure with coping skills

Other:-developmental counselling, CBT, behavioural couples therapy, alcohol focused spousal involvement

Control:- wait list control, treatment as usual

Study (Country)	Treatment Conditions (Forest Plot Labelling) & Number of Participants	Baseline characteristics & Treatment Goal	Outcomes	Setting & Treatment Characteristics
ALDEN1988 (Canada)	Behavioural vs. Control	Consuming more than 84 standard ethanol units/week (abstinent for the	Continuous	Setting Output first Clinical Processed Units
	Behavioural vs. Other Treatment 1.Behavioural Self Management Training (BSMT) n=40	duration of the study) and had episodes of alcohol idiosyncratic intoxication according to DSM-III	* Total Weekly Consumption (in 2 weeks prior)- standard drinks (1/2 oz ethanol)	Outpatient Clinical Research Unit Treatment Characteristics
	2.Developmental Counselling	Treatment Goal= Moderation, abstinence later if desired	*Abstinent Days per Week * Controlled Days per week (≤3	12 weekly individual sessions

	(COUNS) n=33		standard ethanol units)	Assessment Points
	3.Waiting List Control (CONT) n=54		*Attrition (if available): number of participants who have dropped out for any reason	Post-treatment assessment and follow up points at 6 month, I year, 18 month and 2 years NOTE:- Alden(MOCEvsCOUNS)1988B is the follow up which includes participants whom were in the waiting list control
HEATHER2000 (UK)	Different formats of behavioural therapy 1.Moderation-Oriented Cue Exposure (MOCE) n=48 2.Behavioural Self-Control Training (BSCT) n=43	Individuals seeking help for alcohol problems. Drinks/drinking day: 19.96 % days abstinent: 19.14 SADQ-C score: 18.70 APQ score: 10.10 Treatment Goal= Moderation	*Number abstinent *Drinks per Drinking Day *% days abstinent (in last 2 months) Dichotomous *Attrition (if available): number of participants who have dropped out for any reason	Setting Outpatient Clinical Research Unit Treatment Characteristics MOCE=90 min sessions BSCT=60 minute sessions Assessment Points Post-treatment 6 month follow-up
KAVANAGH20 05 (Australia)	Different formats of behavioural therapy 1.Cue Exposure + CBT (CE) n=52	DSM-IV criteria for alcohol abuse or dependence. Weekly alcohol consumption: 40.4 (men), 33.6 (women). Sig. difference.	*Number of drinks per week Dichotomous *Attrition (if available): number of	Setting Outpatient Clinical Research Unit Treatment Characteristics

	2.Emotional Cue Exposure + CBT (ECE) n=56 3.CBT alone (CBT) n=55	AUDIT score: 28.7 (men), 27.7 (women) SADQ-C score: 14.9 (men), 12.5 (women) Treatment Goal= Moderation	participants who have dropped out for any reason	8 weekly 75 minute sessions over 10 weeks Assessment Points Post-treatment 3,6, 9 &12 month follow-up
MONTI1993 (USA)	Behavioural. vs. Control 1.Cue Exposure & Coping Skills (CE+CS) n=22 2.Control(TAU & daily cravings recorded) (TAU) n=18	DSM-III criteria for alcohol dependence, with heavy drinking the week prior to admission. ADS score: 20.7 SMAST: 9.97 TLFB: 12.1 drinks/drinking day, 47% days abstinent, 45% heavy drinking days.	*Number of Participants Lapsed *Number of Participants Relapsed (at least 6 standard drinks) *Attrition (if available): number of participants who have dropped out for any reason	Setting Inpatient VA medical centre Treatment Characteristics CE+CS= 6 weekly 55 minute sessions for 2 weeks Assessment Points 0-3 months, 3-6 months
SITHARTHAN1 997 (Australia)	Behavioural vs. Other 1.Cue Exposure (CE) n=22 2.Cognitive Behavioural Therapy (CBT) n=22	A score of ≥10 on the ICQ and <30 on the SADQ-C. SADQ-C score: 18.81 ICQ score: 13.05 CDSES score: 35.93 Drinking days/ month: 20.2 Consumption/ occasion: 8.82 Treatment Goal= Moderation	*Drinking days per month *Number of standard drinks per occasion Dichotomous *Attrition (if available): number of participants who have dropped out for any reason	Setting Outpatient Treatment Characteristics Group Treatment, six, 90 minute weekly sessions Assessment Points 6 month follow-up
WALITZER2004 (USA)	Behavioural vs. Other 1.Behavioural Self-Management (BSM) n=22 2.Behavioural Couples Therapy & Alcohol-Focused Spousal	Abstinent days/ month: 11.0 Frequency of >6 drinks/ drinking period: 5.1 days/ month ADS score: 8.4.	*Abstinent/Light (0-3) drinking days per month *Heavy(>6) drinking days per month	Setting Outpatient Clinical Research Unit Treatment Characteristics

Involvement (BCT) n=21	85% had low level alcohol dependence	Dichotomous	Group treatment, 10 weekly, 2 hour sessions
	and 15% had moderate levels		
3. Alcohol Focused Spousal		*Attrition (if available): number of	Assessment Points
Involvement (AFSI) n=21	Treatment Goal = drinking reduction	participants who have dropped out for	
		any reason	Post-treatment
			3, 6, 9 & 12 month follow-ups

5 Social Network and Environment Based Therapies

5.1 Soc/Net Therapy vs. control; Soc/Net Therapy vs. other intervention

Treatment types: Soc/Net therapy:- volunteer support, network support with/without contingency management, social behaviour and network therapy

Other: Office based intervention (no direct support), motivational enhancement therapy

Control:- Case management

Study	Treatment Conditions	Baseline characteristics & Treatment	Outcomes	Setting & Treatment Characteristics
(Country)	(Forest Plot Labelling) &	Goal		
	Number of Participants			
LEIGH1999	Soc/Net Therapy vs.	Outpatient alcoholics drinking 5.5 days	Continuous	Setting
(Canada)	Other	per week.		
			*Number of drinking days	Outpatient treatment centre
	1.Volunteer Support (VS)	Drinks/week ranged from 73.5-89.2		
	n=92		*Mean quantity/day	Treatment Characteristics
		Treatment goal = abstinence or drinking	D'abeteure	A11 1: 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	2.Office-Based (OB) n=101	reduction	Dichotomous	All clients attended eight 1-hour sessions over 16 weeks
			*Attrition (if available): number of participants	*VS condition – volunteer part of all but first session; 4-6 hrs per
			who have dropped out for any reason	week with participant in their community
			who have dropped out for any reason	week with participant in their continuity
				Assessment Points
				1355555410110 1 04410
				1, 6, 12 month follow-up
LITT2007	Soc/Net Therapy vs.	DSM-IV alcohol dependent/ abuse	Continuous	Setting
		_		

(USA)	Control	Drinking days in past 3 months: 72%	* Proportion days abstinent	Outpatient treatment centre
	Network Support & Contingency Management	Prior treatments for alcohol dependence: 1.3	*Drinks per drinking day	Treatment Characteristics
	(NS+CM) n=70	1.5	(previous 90 days)	12 weekly 60 minute sessions
	2.Network Support only		Dichotomous	CM: rewards for a negative urine sample
	(NS) n=71		*Attrition (if available): number of participants who have dropped out for any reason	Assessment Points
	3.Case Management (CONT) n=69		who have dropped out for any reason	Post-treatment (3 months)
				6, 9, 12, 15, 18, 21, 24, 27 month follow-up
UKATT2005 (UK)	Soc/Net Therapy vs. Other	DSM-IV alcohol dependent/abuse	Continuous	Setting
(CII)	1.Social Behaviour &	Alcohol as clients' main problem	*Number of drinks per drinking day	Outpatient treatment clinic
	Network Therapy (SBNT) n=320	Drank alcohol in the last 3 months	Percentage days abstinent	Treatment Characteristics
	11-320	Percent Days abstinent- 29.5%	Dichotomous	*MET:- three 50 minute sessions over 8-12 weeks
	2.Motivational Enhancement Therapy	No. of drinks/drinking day- 26.8	*Attrition (if available): number of participants who have dropped out for any reason	*SBNT: eight 50 minutes sessions over 8-12 weeks
	(MET) n=422	Treatment Goal = abstinence or	who have dropped out for any reason	Assessment Points
		drinking reduction		3, 12 month follow up

6 Couples therapy

6.1 Couples therapy vs. other intervention; behavioural couples therapy (BCT) vs. other couples therapy; intensive vs. brief couples therapy; parental skills & BCT vs. BCT alone

Treatment type: Couples therapy:- behavioural couples therapy with or without group counselling/ individual based treatment/ parenting skills, brief relationship therapy,

behavioural martial therapy, directed social support, natural social support, alcohol focused spousal involvement Other:- TSF, psychoeducational intervention, coping skills, counselling, CBT, behavioural self-management training

Study (Country)	Treatment Conditions (Forest Plot	Baseline characteristics &	Outcomes	Setting & Treatment Characteristics
	Labelling) & Number of Participants	Treatment Goal		
EAL COTEMA DEO	C 1 TI OII	0/ 1 1 1 1 1 1	Confinence	Cattle
FALSSTEWART20	Couples Therapy vs. Other	% days heavy drinking from 56-59% across treatment	Continuous	Setting
05 (USA)	BCT vs. Other Couples Therapy	groups.	*Percentage days heavy drinking (>=6	Outpatient treatment clinic
	The state of the s	groups.	standard drinks)	1
	Intensive vs. Brief Couples Therapy	All DSM-IV diagnosed	,	Treatment Characteristics
		alcohol dependent	Dichotomous	DAGE PRE INC. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10
	1. Behavioural Couples Therapy (Plus		***************************************	PACT, BRT, IBT conditions: 18 sessions, 12 weeks, which
	Group Counselling) (BCT) n=25		*Attrition (if available): number of participants who have dropped out for	included weekly 12-step oriented group sessions and condition specific treatment every other week
	2.Brief Relationship Therapy (Plus		any reason	specific treatment every other week
	Group Counselling) (BRT) n=25		uny reason	BCT: 24 sessions (2 sessions per week) for 12 weeks; included 1
				group therapy session and 1 BCT session
	3.Individual-Based Treatment (Twelve-			
	Step Facilitation & Group Counselling)			All treatments: therapy groups = 90 mins, condition-specific
	(TSF) n=25			treatment = 60 minutes
	4.Psychoedcuational Attention Control			Assessment Points
	Treatment (PSYEDU) n=25			1250005ARON 1 OAND
				Post-Treatment
				3, 6, 9, 12 months follow-up
FALSSTEWART20	Couples Therapy vs. Other	DSM-IV alcohol	Continuous	Setting
06 (USA)		dependent/abuse		
	1.Behavioral Couples Therapy &	_	Percentage days abstinent (in last 90 days)	Outpatient treatment centre
	Individual-Based Treatment (BCT) n=46	% days abstinent from 40-	D'al-at-man	To a toward Classical disc
	2 I dii dal P d Tatant Ola	44% across treatment groups	Dichotomous	Treatment Characteristics
	2.Individual Based Treatment Only (Twelve-Step Facilitation) (TSF) n=46	Treatment Goal =	*Attrition (if available): number of	BCT: 32 sessions, 12 of which were attended with the
	(Twerve-step Facilitation) (131) if 40	abstinence	participants who have dropped out for	participant's partner. The remaining 20 sessions were individual
	3.Psychoedcuational Attention Control	abounteree	any reason	12-step facilitation.
	Treatment (PACT) n=46			
				TSF: 32 individual 12-step facilitation sessions
				PACT: 20 sessions of individual treatment and 12 lectures on
				substance abuse which were attended with a partner
				The state of the s
				All sessions were 60 minutes

LAM2009 (USA)	Parental Skills & BCT vs. BCT alone Couples Therapy vs. Other 1.Behavioural Couples Therapy & Parental Skills Training (PSBCT) n=10 2. Behavioural Couples Therapy (BCT) n=10	DSM-IV alcohol abuse or dependence. % days abstinent: approx 37	*Percentage Days Abstinent Dichotomous *Attrition (if available): number of participants who have dropped out for any reason	Assessment Points Post Treatment 3, 6, 9, 12 month follow-up Setting Outpatient Treatment Centre Treatment Characteristics Two 60-min sessions/week for 12 weeks. Treatment consists of: 12 standard individual treatment sessions plus 12 BCT sessions
	2.Individual-Based Therapy (Coping Skills) (CS) n=10		·	or 12 PSBCT sessions (included 6 BCT & parental-skills training) or 12 individual coping skills sessions Assessment Points Post-treatment (3 months) 6 & 12 month follow-up
OFARRELL1992 (USA)	Couples Therapy vs. Other BCT vs. Other Couples Therapy 1.Interactional Couples Therapy (ICT) n=12 2.Behavioural Marital Therapy (BCT) n=10 3.Counselling (COUNS) n=12	Alcohol Use Disorder documented by a score of seven or greater on the Michigan Alcoholism Screening Test Years of problem drinking: 15.79 Previous alcohol hospitalisations: 2.09 Treatment goal = abstinence	Percent days abstinent (in last 4 months) Dichotomous *Attrition (if available): number of participants who have dropped out for any reason	Outpatient VA treatment centre Treatment Characteristics 10 weekly 2-hr sessions Counselling was individual Assessment Points Post-treatment 2, 6, 12, 18, 24 month follow-up
SOBELL2000	1.Directed Social Support (DS) n=28	Primary alcohol problem.	Continuous	Setting

(Canada)	2.Natural Social Support (NS) n=28	ADS score: 12.6	*Proportion of days abstinent	Outpatient Clinical Research Unit
		1 year pre-treatment: Days abstinent- approx 0.22 Days drinking 1-4 drinks- approx 0.35 Days drinking 5-9 drink- 0.32 Days drinking 10+ drinks- 0.12 Mean no. drinks/ drinking day- approx 6 Treatment Goal = clients with medical contraindications of drinking = abstinence; others could choose a moderation (with guidelines - see paper)	*Proportion of days 1-4 drinks (light drinking) *Proportion of days 5-9 drinks (moderate drinking) *Proportion of days >=10 drinks (heavy drinking) *Drinks per drinking day Dichotomous *Attrition (if available): number of participants who have dropped out for any reason	Treatment Characteristics *In both groups participant received four 60 minute sessions of guided self-change program *Spouse received two 90-min sessions which differed by treatment condition Assessment Points 12 month follow-up
VEDEL2008 (Netherlands)	Couples Therapy vs. Other 1.Behavioural Couples Therapy (BCT) n=30 2.Cognitive-Behavoiral Therapy (CBT) n=34	DSM-IV alcohol abuse or dependence. 62% diagnosed as alcohol dependent. 50% when drinking drank 7+ units. 57% drank daily or nearly daily Treatment Goal = abstinence or controlled drinking (with guidelines)	*Units per week *Severe lapse (>6 units per occasion) Dichotomous *Attrition (if available): number of participants who have dropped out for any reason	Outpatient treatment centre Treatment Characteristics Both treatments 10 sessions over 5-6 month period *CBT:- 45-60 mins per session * BCT:- 90 mins per session Assessment Points Post-treatment

				6 month follow-up
WALITZER2004 (USA)	Couples Therapy vs. Other	Abstinent days/ month: 11.0	Continuous	Setting
()	BCT vs. Other Couples Therapy	Frequency of >6 drinks/ drinking period/ month: 5.1	*Abstinent/Light (0-3) drinking days per month	Outpatient Clinical Research Unit
	1.Behavioural Couples Therapy & Alcohol-Focused Spousal Involvement	85% had low level alcohol	*Heavy(>6) drinking days per month	Treatment Characteristics
	(BCT) n=21	dependence and 15% had moderate levels	Dichotomous	Group treatment, 10 weekly, 2 hour sessions
	2. Alcohol Focused Spousal Involvement (AFSI) n=21	Treatment Goal = drinking	*Attrition (if available): number of	Assessment Points
	3.Behavioural Self-Management (BSM)	reduction	participants who have dropped out for any reason	Post-treatment
	n=22			3, 6, 9 & 12 month follow-ups
ZWEBEN1988 (Canada)	Intensive vs. Brief Couples Therapy	ADS scale:8.4	Continuous	Setting
	1.Conjoint Therapy (CT-8) n=70	In the past year:	*Percent days abstinent	Outpatient treatment centre
	2.Advice Counselling (couples counselling) (CCoun1) n=46	44% heavy drinking	*Percent days moderate drinking	Treatment Characteristics
		36.5% abstinent	*Percent days heavy drinking	CT: 8 outpatient sessions
		MAST score approx 20	Moderate drinking = 1-4 standard drinks/day	CCoun1: one session, 1.5 hrs
		Treatment goal = abstinence or moderate drinking	Heavy drinking = 5 or more standard	Assessment Points
			drinks/ day	1, 2, 6, 12, 18 month follow-up
			Standard drink = 0.6oz ethanol (1.5oz whiskey, 12oz beer, 3.5 fortified wine, 5oz wine)	
			Dichotomous	
			*Attrition (if available): number of participants who have dropped out for any reason	

6.2 Studies not included in meta-analyses but described in evidence summary

Study Characteristics & Reason for Exclusion	Treatment Characteristics
MCCRADY2009	Baseline characteristics
Couple Therapy vs. Other Intervention	*DSM-IV alcohol dependent/abuse
1. Behavioral Couples Therapy	*Percentage days heavy drinking: approx 57%
2. Individually Based Coping Skills	*Percentage days abstinent: approx 33%
Reason for Exclusion from Meta-Analyses	Setting:- Outpatient clinical research unit
Research Assistants collecting data not blinded to treatment allocation	Treatment Goal:- Abstinence
	Assessment Point:- Telephone (3, 9 & 15 month follow-up); In person interview (6, 12, 18 month follow-up)

7 Contingency Management (CM)

7.1 CM vs. control; CM vs. TAU; CM vs. other intervention

Treatment types: CM:- CM plus standard treatment or network support

Other:- Network support

Control: Standard treatment, case management

Study	Treatment Conditions (Forest Plot	Baseline characteristics &	Outcomes	Setting & Treatment Characteristics
(Country)	Labelling) & Number of Participants	Treatment Goal		
ALESSI2007	Contingency Management vs. TAU	Current DSM-IV alcohol	Continuous	Setting
(USA)		dependent/abuse		
	1.CM plus Standard Treatment and		* Proportion days abstinent	Outpatient treatment program
	monitoring (CM) n=46	Past year DSM alcohol		
		dependent/abuse (with or	*Drinks per drinking day	Treatment Characteristics
	2.Standard Treatment plus monitoring	without other substance		
	(TAU) n=57	abuse): 62.2% participants	(previous 90 days)	Standard Treatment: 12 weeks intensive outpatient treatment
		Past year DSM alcohol	Dichotomous	CM: rewards for attendance and negative urine samples
		abuse or dependence only:		

		7.85% participants Treatment goal = abstinence	*Attrition (if available): number of participants who have dropped out for any reason	Assessment Points Post-treatment
LITT2007 (USA)	Contingency Management vs. Control Contingency Management vs. Other 1. CM & Network Support (CM+NS) n=70 2.Network Support only (NS) n=71 3.Case Management (CONT) n=69	DSM-IV alcohol dependent/ abuse Drinking days in past 3 months: 72% Prior treatments for alcohol dependence: 1.3	* Proportion days abstinent *Drinks per drinking day (previous 90 days) Dichotomous *Attrition (if available): number of participants who have dropped out for any reason	Setting Outpatient treatment centre Treatment Characteristics 12 weekly 60 minute sessions CM: rewards for a negative urine sample Assessment Points Post-treatment (3 months) 6, 9, 12, 15, 18, 21, 24, 27 month follow-up
PETRY2000 (USA)	Contingency Management vs. TAU 1.CM & Standard Treatment (CM) n=19 2. Standard Treatment alone (TAU) n=23	DSM-IV alcohol dependent Years of alcohol dependence: 23.5 years Treatment goal = abstinence	*Relapsed to heavy drinking *Lapsed (non-abstinent) *Attrition (if available): number of participants who have dropped out for any reason	Setting Outpatient VA treatment Centre Treatment Characteristics Standard Care: 4 week intensive outpatient day program followed by aftercare CM: Rewards for negative samples (warned during treatment and aftercare) Total = 8 weeks Assessment Points Post-treatment

8 Counselling

8.1 Counselling vs. other intervention; counselling vs. control (no active treatment)

Treatment types: Counselling:- Individual or group counselling, non-directive reflective listening

Other:- Social skills training, multi-modal treatment, coping skills, interactional couples' therapy, behavioural marital therapy, motivational enhancement therapy

Control:- Feedback only

Study (Country)	Treatment Conditions (Forest Plot Labelling) & Number of Participants	Baseline characteristics & Treatment Goal	Outcomes	Setting & Treatment Characteristics
ERIKSEN1986 (Norway)	Counselling vs. Other 1.Counselling (group) (COUNS) n=12 2.Social Skills Training Group (CopSk) n=12	A serious alcohol problem but no drug addiction. Previous alcoholism inpatient status: 66.7% No. of alcoholism inpatient treatments: 1.85 Years of self-acknowledged problem drinking: 11.95 Treatment Goal= sober days; reduced quantity of alcohol consumed	*Alcohol Consumption (cl pure alcohol) *Sober Days Over the previous 2 weeks Dichotomous *Attrition (if available): number of participants who have dropped out for any reason	Setting Outpatient treatment program Treatment Characteristics 8 weekly 90 minute small group sessions Assessment Points 12 month follow-up
JOHN2003 (Germany)	Counselling vs. Other 1.Individual Counselling (COUNS) n=161 2.Multi-Modal Treatment (MM) n=161	ICD-10 alcohol dependent Treatment Goal = abstinence	Dichotomous *Number Abstinent (converted to lapse) *Number Drank Alcohol (lapse) *Attrition (if available): number of participants who have dropped out for any reason	Setting Inpatient Psychiatric Hospital Treatment Characteristics Individual: Three 40 minute sessions Group:- Nine 90 minutes sessions within a 14-day standardised treatment programme followed by 4 outpatient group session

LITT2003 (USA) Counselling vs. Other DSM-IV Met alcohol dependent/ abuse 1.CBT with an interactional *Proportion Date	1-6, 7-12 months Setting
abuse *Proportion Date *1.CBT with an interactional *1.CBT with an interac	
focus (CopSk) n=69 Proportion days abstinent: 0.38 Proportion heavy drinking days: 0.48 *Proportion days abstinent: 0.38 Proportion days abstinent: 0.38 *Proportion days abstinent: 0.38 In last 90 days Dichotomous *Attrition (if an	Treatment Characteristics 26 weekly 90 minute sessions 28 weekly 90 minute sessions Assessment Points 3, 6, 9, 12, 15, 18 month follow-up 3, 6, 9, 12, 15, 18 month follow-up
(COUNS) n=12 2.Interactional Couples Therapy group (ICT) n=12 3.Behavioural Marital Therapy (BCT) n=10 Test Years of problem drinking: 15.79 Previous alcohol hospitalisations: 2.09 *Attrition (if a who have droped)	vailable): number of participants pped out for any reason Counselling was individual Assessment Points Post-treatment 2, 6, 12, 18, 24 month follow-up
SELLMAN2001 Counselling vs. Other All alcohol dependent (based on Continuous	Setting

(New Zealand)	Counselling vs. Control	DSM-IV)	*Exceeded national guidelines at least once	Outpatient treatment centre
	1.Non-Directive Reflective	Unequivocal heavy drinking 6+	* Exceeded national guidelines 6 or more times	Treatment Characteristics
	Listening (Counselling) (NDRL) n=40	times in the 6 months prior to treatment: 90.2%	*Drank more than 10 standard drinks at least	4 sessions in 6 week period
	2.Motivational		once	Assessment Points
	Enhancement Therapy		*Drank more than 10 standard drinks six or	
	(MET) n=42		more times	6 month & 5 year follow-up
	3.No Further Treatment		Dichotomous	
	(feedback only) (CONT) n=40		*Number of participants lapsed	
			*Number of participants relapsed	
			*Attrition (if available): number of participants who have dropped out for any reason	

9 Psychodynamic Therapy

9.1 Psychodynamic vs. other intervention

Treatment types: Psychodynamic:- Time-limited group psychotherapy

Other:- Relapse prevention

Study	Treatment Conditions (Forest Plot	Baseline characteristics & Treatment	Outcomes	Setting & Treatment Characteristics
(Country)	Labelling) & Number of	Goal		
	Participants			
SANDAHL1998	1.Time-limited Group	DSM-III-R alcohol dependent and	Continuous	Setting
(Sweden)	Psychotherapy (PSYDY) n=25	antisocial personality disorder		
			*Number of abstinent days	Outpatient alcohol treatment clinic
	2.Relapse Prevention (RP) n=24	Decentiles on AVI: 4.3		
			*g.abs.alc/drinking day	Treatment Characteristics
		Duration of abuse: 11 years		
			*Days>80g abs.alc	15 weekly 90 minute group sessions
		Age of onset of uncontrolled drinking: 36		

	years	Dichotomous	Assessment Points
	Reported morning drinking: 75.5% Treatment Goal = Drinking reduction	*Attrition (if available): number of participants who have dropped out for any reason	15 month follow-up

10 Multi-Modal Treatment

10.1 Multi-Modal vs. Other intervention

Treatment types: Multi-modal:-Standard multi-modal outpatient treatment

Other:- Psychoeducational intervention, individual counselling

Study (Country)	Treatment Conditions (Forest Plot Labelling) & Number of Participants	Baseline characteristics & Treatment Goal	Outcomes	Setting & Treatment Characteristics
DAVIS2002 (USA)	Multi-Modal vs. Other 1.Standard Multi-Modal Outpatient Treatment (MM) n=53 2.Psychoeducational (PSYCHEDU) n=52	DSM-III alcohol dependent/abuse *Days Drinking approx 110 days/6 months Treatment Goal = drinking reduction	*Days drinking *Amount (oz./day) *Length of Sobriety (months) Over last 6 months Dichotomous *Number participants non- abstinent *Attrition (if available): number of participants who have dropped out for any reason	Setting Outpatient treatment clinic Treatment Characteristics Standard Multi-dimensional outpatient treatment:- 3 week orientation (6 group therapy sessions, 3 alcohol education sessions, 3 leisure education sessions, 3 community meetings, minimum 6 AA meetings). Treatment period lasted 6 months Psychoeducational: 13 films each shown twice over a 26 week period (once a week in a group setting with no discussion) Assessment Points Post-Treatment (at 6 months)
JOHN2003	Multi-Modal vs. Other	ICD-10 alcohol	Dichotomous	Setting

(Germany)	1.Multi-Modal Treatment	dependent	*Number Abstinent (converted to	Inpatient Psychiatric Hospital
	(MM) n=161		lapse)	
		Treatment Goal =		Treatment Characteristics
	2.Individual Counselling	abstinence	*Number Drank Alcohol (lapse)	
	(COUN) n=161			Individual: Three 40 minute sessions
			*Attrition (if available): number of	
			participants who have dropped out	Group:- Nine 90 minutes sessions within a 14-day standardised treatment programme followed by
			for any reason	4 outpatient group session
				Assessment Points
				1-6, 7-12 months
				1-0, / -12 IIIOIIIIIS

11 Self-Help Based Treatment

11.1 Different formats of self-help

Treatment types: Guided self-change, self-help manual (non-guided)

Study (Country)	Treatment Conditions	Baseline characteristics &	Outcomes	Setting & Treatment Characteristics
	(Forest Plot Labelling) &	Treatment Goal		
	Number of Participants			
ANDREASSON2002	Different formats of self-	SADD questionnaire score:	Continuous	Setting
(Sweden)	help	12.1 indicates a medium level		
		of dependence	*Number of standard drinks per week	Outpatient treatment clinic
	1.Guided Self-Change (GSC)	-		
	n=46		*Drinks per drinking day	Treatment Characteristics
	2.Advice Only & Self-Help		In the last 90 days	GSC:- 1 assessment session, 4 treatment sessions, 2 follow-up
	Manual (SHM) n=47			telephone calls; brief cognitive-behavioural/motivational
			1 standard rink = 12g alcohol	enhancement therapy
			Dichotomous	SHM:- 1 assessment session, 1 session feedback/advice, 24-page self-
				help manual
			*Attrition (if available): number of	
			participants who have dropped out for	Assessment Points
			any reason	
				9 & 23 month follow-up

12 Psychoeducational Intervention

12.1 Psychoeducational vs. other intervention

Treatment types: Psychoeducational:- psychoeducational with alcohol-focused coping skills & life skills, psychoeducational attention control treatment, bibliotherapy/drinking guidelines

Other:- general coping skills, standard multi-modal outpatient treatment, behavioural couples therapy, brief relationship therapy, TSF with group counselling

Study (Country)	Treatment Conditions (Forest Plot Labelling) & Number of Participants	Baseline characteristics & Treatment Goal	Outcomes	Setting & Treatment Characteristics
CONNORS2001 (USA)	Psychoeducational vs. Other 1. Alcohol-Focused Coping Skills alone - NORMAL INTENSITY & Psychoeducational (PSYnorLS) n=31 2. Alcohol-Focused Coping Skills alone- MORE INTENSIVE & Psychoeducational (PSYintLS) n=41 3. Alcohol-Focused Coping Skills & Life Skills (General Coping Skills) - NORMAL INTENSITY n=39 4. Alcohol-Focused Coping Skills & Life Skills (General Coping Skills) - MORE INTENSIVE n=33	DSM-III-R lifetime diagnoses. Dependence- moderate: 66% Dependence- severe: 8.3 Dependence- mild: 18.1 Average monthly abstinence days: 10.1 Light days: 6.1 Moderate days: 8 Heavy days: 5.7 Treatment Goal = drinking reduction	Abstinent/Light (1-3 standard drinks) drinking days Dichotomous *Attrition (if available): number of participants who have dropped out for any reason	Setting Outpatient Clinical Research Unit Treatment Characteristics All received: Coping Skills over 10 weekly 2 hour outpatient group (3-6 people) sessions and drinking-reduction training (13hrs) Divided (according to group): *Life Skills (general coping skills) (7hrs) *Psychoeducational (7hrs) *Booster sessions (more intensive) = 8 additional 90-min sessions at weeks 2, 4, 7, 10, 13, 16, 20, 24 post treatment. Assessment Points 6,12, 18 month follow-up
DAVIS2002 (USA)	Psychoeducational vs. Other 1.Psychoeducational (PSYCHEDU) n=52 2.Standard Multi-Modal Outpatient	DSM-III alcohol dependent/abuse *Days Drinking approx 110 days/6 months	*Days drinking	Setting Outpatient treatment clinic

	Treatment (MM) n=53	Treatment Goal = drinking reduction	*Amount (oz./day) *Length of Sobriety (months) Over last 6 months Dichotomous *Number participants non- abstinent *Attrition (if available): number of participants who have dropped out for any reason	Treatment Characteristics Standard Multi-dimensional outpatient treatment:- 3 week orientation (6 group therapy sessions, 3 alcohol education sessions, 3 leisure education sessions, 3 community meetings, minimum 6 AA meetings). Treatment period lasted 6 months Psychoeducational: 13 films each shown twice over a 26 week period (once a week in a group setting with no discussion) Assessment Points
FALSSTEWART20 05 (USA)	Psychoeducational vs. Other 1.Psychoeducational Attention Control Treatment (PSYEDU) n=25 2. Behavioural Couples Therapy (Plus Group Counselling) (BCT) n=25 3.Brief Relationship Therapy (Plus Group Counselling) (BRT) n=25 4.Individual-Based Treatment (Twelve-Step Facilitation & Group Counselling) (TSF) n=25	DSM-IV alcohol dependent % days heavy drinking from 56- 59% across treatment groups.	*Percentage days heavy drinking (>=6 standard drinks) *Dichotomous *Attrition (if available): number of participants who have dropped out for any reason	Post-Treatment (at 6 months) Setting Outpatient treatment clinic Treatment Characteristics PACT, BRT, IBT conditions: 18 sessions, 12 weeks, which included weekly 12-step oriented group sessions and condition specific treatment every other week BCT: 24 sessions (2 sessions per week) for 12 weeks; included 1 group therapy session and 1 BCT session All treatments: therapy groups = 90 mins, condition-specific treatment = 60 minutes Assessment Points Post-Treatment 3, 6, 9, 12 months follow-up
FALSSTEWART20 06 (USA)	Psychoeducational vs. Other 1.Psychoedcuational Attention Control	DSM-IV alcohol dependent/abuse Percent days abstinent from 40-	Continuous Percentage days abstinent (in last 90 days)	Setting Outpatient treatment centre

	Treatment (PACT) n=46	44% across treatment groups	Dichotomous	Treatment Characteristics
	2.Behavioral Couples Therapy & Individual-Based Treatment (BCT) n=46 3.Individual Based Treatment Only (Twelve-Step Facilitation) (TSF) n=46	Treatment Goal = abstinence	*Attrition (if available): number of participants who have dropped out for any reason	BCT: 32 sessions, 12 of which were attended with the participant's partner. The remaining 20 sessions were individual 12-step facilitation. IBT: 32 individual 12-step facilitation sessions PACT: 20 sessions of individual treatment and 12 lectures on substance abuse which were attended with a partner All sessions were 60 minutes Assessment Points Post Treatment 3, 6, 9, 12 month follow-up
SOBELL2002 (USA)	Psychoeducational vs. Other 1.Bibliotherapy/Drinking Guidelines (PSYEDU) n=411 2.Motivational Enhancement/Personalized Feedback (MET) n=414	All alcohol abusers (drinking approximately 12 drinks/week and drinking 5 or more drinks on at least 5 days in the past year)	*Days drinking per week *Drinks per drinking day *Drinks per week *Days drinking >=5 drinks Dichotomous *Attrition (if available): number of participants who have dropped out for any reason	Community mail level intervention Treatment Characteristics Bibliotherapy: participants received alcohol information available to the general public. MET: participants received personalised advice feedback based on responses to an alcohol questionnaire. Assessment Points 1 year follow-up

13 Psychological intervention studies EXCLUDED from this guideline

Study ID	Reason for Exclusion
AALTO2001a (males)	Opportunistic not planned intervention
AALTO2001b (females)	Opportunistic not planned intervention
AALTO2002	No relevant alcohol outcomes
ACADEMIC2007 (ED	Opportunistic not planned intervention; hazardous not harmful drinking
SBIRT research group)	population; quasi experimental study design
ADAMSON2005	Therapy preference and treatment; no usable outcome data
ALDEN1988	No usable data
ALLSOP1997	Did not meet randomization criteria
ALMANZA2006	No relevant alcohol outcomes
APODACA2007	Opportunistic not planned intervention
ARAKI2000	Not severe enough drinking (hazardous)
BABOR2006	Quasi-experimental
BACK2007	No primary alcohol outcomes
BAER2001	Preventative study; not drinking enough
BAER2007	Focus on substance and not alcohol abuse/dependence
BAIRD2007	Opportunistic not planned intervention
BALL2007	Not severe enough drinking (hazardous)
BALL2007A	Outcomes were related to which site treatment was given; no relevant alcohol outcomes
BANAJEE2007	Not high enough of sample abusing alcohol; mixed in with drug measures
BARROWCLOUGH2009	Not high enough percentage of population meets criteria for AUD
BECKHAM2002	Not severe enough drinking (hazardous)
BEICH2007	Opportunistic not planned intervention; hazardous drinking population
BERNSTEIN2008	Opportunistic not planned intervention
BERSAMIN2007	Not severe enough drinking (hazardous)
BERTHOLET2009	Not severe enough drinking (hazardous)
BEWICK2008	Not severe enough drinking (hazardous)
BLOW2006	Opportunistic not planned intervention
BLOW2009	Opportunistic not planned intervention
BOBO1998	Not a blinded study
BOMBARDIER1999	Opportunistic not planned intervention; Non RCT (Case series)
BORSARI2000	Not severe enough drinking (hazardous); not good randomization procedure (flipping coin)
BOWERS1990	Too small sample size, n=less than 10 in each treatment group
BRESLIN2002	No primary alcohol outcome; only overall drug use measure
BRITT2002	Not severe enough drinking (hazardous)
BROWN1993	Not severe enough drinking (hazardous)
BROWN1997	Small sample size; not randomized (cohort study)
BROWN2007B	Opportunistic not planned intervention
BURLING1994	Not randomized study design
BURTON2007	No alcohol measures; can't separate drug from alcohol use in outcomes
BUTLER2009	Not severe enough drinking (hazardous)
CADOGAN1973	Not randomized study design
CAREY2006	Not severe enough drinking (hazardous)
CARROLL2001	MI techniques not intervention; not relevant to psych interventions but more to "screening"
CARROLL2006	No baseline severity; unable to separate alcohol measures from drug measures; not high enough percentage of sample meeting alcohol abuse/dependence criteria.
CARROLL2008	Not severe enough drinking (hazardous)

CASE2007 Not RCT; focus on drugs not alcohol

Study ID	Reason for Exclusion
CASTELLANOS2006	No relevant alcohol outcomes; matching study
CAUDILL2007	No usable outcome data
CHERPITEL2009	Opportunistic not planned intervention
CHIAUZZI2005	Not severe enough drinking (hazardous)
CHOSSIS2007	Not severe enough drinking (hazardous)
CIMINI2009	Not severe enough drinking (hazardous)
COATSWORTH2001	No relevant alcohol outcomes
CONNELL2007	No relevant outcomes; no usable data
CONROD2006	Not severe enough drinking (hazardous)
CORBY2000	Too small sample size, n=8
CORDOBA1998	Opportunistic not planned intervention
CORDOBA1998	Not severe enough drinking (hazardous)
COULTON2009	Opportunistic not planned intervention
CUNNINGHAM2002	Not severe enough drinking (hazardous)
CUNNINGHAM2005	Not severe enough drinking (hazardous); not randomized
CUNNINGHAM2006	Not severe enough drinking (hazardous)
CURRY2003	Not severe enough drinking (hazardous)
DAEPPEN2007	Opportunistic not planned intervention
DAEPPEN2007b	Opportunistic not planned intervention
DAMICO2008	Marijuana primary substance, not alcohol
DAVIS2003	No usable outcome data
DAWE2002	Randomisation method unclear
DENT2002	Opportunistic not planned intervention
DENT2008	Opportunistic not planned intervention
DESY2008	More focus on training than trial; hazardous drinking population not harmful
DONOFRIO2005	Opportunistic not planned intervention
DONOFRIO2008	Not severe enough drinking; opportunistic rather than planned intervention
DONOHUE2004	Not severe enough drinking (hazardous)
Drummond1994	Study not truly randomized (sequential assignment):
DRUMMOND2009	Opportunistic not planned intervention
DUFFY2006	Too small sample size; irrelevant alcohol outcomes
EBERHARD2009	Not severe enough drinking (hazardous)
EPSTEIN2004	Focus on pre-treatment change
EPSTEIN2007	Cohort study, 50% alcohol dependence, predominantly focused on drugs
FALSSTEWART2009	No usable data, split by sexual orientation
FALLSTEWART2003	No relevant alcohol outcomes; matching study
FALSSTEWART1996	Not enough of the sample met criteria for alcohol dependence/abuse (40%)
FALSSTEWART2000	Primary focus of paper was drug not alcohol use
FALSSTEWART2002	No relevant alcohol outcomes; data not usable
FINGFELDCONNETT2008	Not severe enough drinking (hazardous)
FIORENTINE2000	Primary focus of paper was drug not alcohol use
FLEMING2009a	No relevant alcohol outcomes
FORSBERG2000	Opportunistic not planned intervention
FREYERADAM2001	Not severe enough drinking (hazardous)
GAUME2009	Not severe enough drinking (hazardous)
GEISNER2007	Not severe enough drinking (hazardous)
GENTILELLO1999	Opportunistic not planned intervention
GESHI2007	Not severe enough drinking (hazardous)

GILLASPY2002	No relevant alcohol outcomes
GODFREY2002	Not enough of the sample met criteria for alcohol dependence/abuse (57%)
GOODALL2008	Opportunistic not planned intervention
GORDON2003	Not severe enough drinking (hazardous)

Study ID	Reason for Exclusion
GREENFIELD2007	Too small sample size
GUREVICH1996	Not enough of the sample met criteria for alcohol dependence/abuse
HALLETT2009	Not randomised
HARWOOD2006	No relevant alcohol outcomes
HASSAN2009	Not enough of the sample met criteria for alcohol dependence/abuse
HEATHER1987	Opportunistic not planned intervention
HENGGELER1999	Drugs not alcohol primary focus
HERNANDEZ2006	Irrelevant outcome measures for the guideline
HOGUE2006	Drugs not alcohol primary focus
HOLLOWAY2007	Opportunistic not planned intervention
HOULT1984	No relevant alcohol outcomes
HULSE2002	No usable outcome data (reports interquartile ranges)
HULSE2003	No relevant alcohol outcomes
HUMPHREYS1999	No usable outcome data; not randomized
HUMPHREYS2007	Quasi-randomized; does not meet randomization criteria; matching study
	Matching study based on participant characteristics; small sample size; no usable
HUNT1973	outcome data
ISRAEL1996	No information about how many patients are in each treatment arm
JOHANSSON2006	Not enough of the sample met criteria for alcohol dependence/abuse
JOHNSSON2006	No usable outcome data
KAHLER2004	No usable outcome data
KAHLER2008	Not severe enough drinking (hazardous)
KALLMEN2003	No usable outcome data
KAMINER1999	Too small sample size, n=12
KARLSSON2005	No usable outcomes or data
KAYSEN2009	Not severe enough drinking (hazardous)
KELLEY2002	Does not distinguish between alcohol and drugs in outcome data
KELLY2000	Not severe enough drinking (hazardous)
KELLY2006	No usable data
KENDZOR2004	No usable outcome data (reports interquartile ranges)
KING2009	Primary focus of paper was drug not alcohol use
KINNAMAN2007	No relevant alcohol outcomes
KNIGHT2005	Not randomised
KUCHIPUDI1990	Opportunistic not planned intervention; hazardous drinkers
KUENZLER2003	No relevant outcomes
KYPRI2003	Not randomised
KYPRI2007A	Not severe enough drinking (hazardous)
KYPRI2008	Unusable data; not severe enough drinking population
KYPRI2009	Not severe enough drinking (hazardous)
LABRIE2008	Not severe enough drinking (hazardous)
LABRIE2008A	Not severe enough drinking (hazardous)
LAM2008	No usable outcome data; not relevant population
LANE2008	opportunistic not planned intervention
LARIMER2001	Not severe enough drinking (hazardous)
LARIMER2007	Not severe enough drinking (hazardous)

LATIMER2003	Not severe enough drinking (hazardous)
LAUBARRACO2008	Not severe enough drinking (hazardous)
LEDGERWOOD2006	Drugs not alcohol primary focus; Not enough of sample (only 50%) met criteria for alcohol abuse/dependence.
LEDGERWOOD2008	Not randomized
LEWIS2007	Not severe enough drinking (hazardous)
LI2007	No relevant alcohol outcomes

Study ID	Reason for Exclusion
LIDDLE2008	Drugs not alcohol primary focus
LINCOURT2002	Not randomized
LOCK2005	Opportunistic not planned intervention
LOEBER2006	Did not meet randomization criteria; sequential assignment.
LUKAS2005	Not severe enough drinking (hazardous)
MAIO2005	Opportunistic not planned intervention
MAISTO1995	No usable alcohol outcomes
MAISTO2003	Not severe enough drinking (hazardous)
MANWELL2000	Not severe enough drinking (hazardous)
MARCUS2009	Not randomized
MARQUES2001	Did not meet randomization criteria
MARTENS2007	Not severe enough drinking (hazardous); non-RCT
MATANO2007	Not severe enough drinking (hazardous)
MCCRADY1986	No usable data
MCCRADY1986	Assessors not blinded to treatment allocation
MCMANUS2003	No usable data
MCMILLAN1986	Not randomized
MCNALLY2005	Not severe enough drinking (hazardous)
MCQUEEN2004	Opportunistic not planned intervention
MCRADY1991	No usable data
MELLO2005	Opportunistic not planned intervention
MELLO2008	Opportunistic not planned intervention
MENGIS2002	Drugs not alcohol primary focus
MEZZANI2007	Not severe enough drinking (hazardous)
MICHAEL2006	Exploratory analysis; not harmful drinkers (hazardous)
MILLER1978	Not severe enough drinking (hazardous)
MILLER1980	Not severe enough drinking (hazardous)
MILLER1999A	No relevant alcohol outcomes
MILLER2003	No alcohol outcomes
MONTI1999	Opportunistic not planned intervention
MONTI2007	Opportunistic not planned intervention
MONTI2007	Opportunistic not planned intervention
MOORE2005	Not severe enough drinking (hazardous)
MOOS1999	Naturalistic study
MORGENSTERN2008	Cluster-randomized trial; school-based alcohol education - not relevant; no relevant alcohol outcomes
MORGERNSTERN2003	Not relevant outcomes
MURGRAFF2007	Not severe enough drinking (hazardous)
MURPHY1984	Not severe enough drinking (hazardous)
MURPHY2001	Hazardous not harmful drinkers
MURPHY2004	Hazardous not harmful drinkers; no usable outcome data

MURPHY2005	Not an RCT; using behavioural theories of choice to predict drinking
MURRAY2007	Hazardous not harmful drinking population
NAGEL2009	Not high enough % of population meets AUD
NEIGHBORS2004	Hazardous not harmful drinkers; no relevant outcomes
NEUMANN2006	Opportunistic not planned intervention
NIELSEN2007	Quasi-randomized (due to attrition and small groups); does not meet randomization criteria.

NILSSEN2004	Opportunistic not planned intervention Not relevant - no useful alcohol outcomes
	Not relevant - no useful alcohol outcomes
OAKEY2007	
	Opportunistic not planned intervention; not severe enough drinking (hazardous)
OCKENE1999	Not severe enough drinking (hazardous)
OCKENE1999	Opportunistic not planned intervention
OFARRELL1985	Irrelevant outcome measures
OFARRELL2007	Quasi-experimental study design
OFARRELL2008	Outcome variable does not dissociate between drugs and alcohol
OGBORNE1979	Not randomized study; no usable outcome data
OJEHAGEN1992	No usable data
OMALLEY2009	Not severe enough drinking (hazardous)
OSILLA2008	Not severe enough drinking (hazardous)
OUIMETTE1997	Did not meet randomization criteria
PAL2007	Inappropriate randomisation method
PARKER1978A	No relevant outcomes
PARKER1987	No relevant outcomes
PARSONS2001	Not severe enough drinking (hazardous)
PETERSON2006	No relevant outcomes, no usable data
PETRY2006	Not enough of sample meets alcohol dependence (60-61%)
PETRY2006	Not enough of sample meets AUD criteria (63%)
PRADO2007	Not severe enough drinking (hazardous)
	Not able to separate which groups of drinkers are in which treatment group therefore outcome data is not usable.
PRENDERGAST2008	Drugs not alcohol outcomes
RAPP2001	Not enough of sample population meets alcohol misuse; mostly other drugs
RASH2008	Combined data from Petry 2004, 2005, and 2006
RASSOOL2008	No relevant outcome measures; quasi-experimental study design
REIFHEKKING2001	Not severe enough drinking (hazardous)
	Opportunistic not planned intervention
RESNICK2007	Outcome measures not relevant to guidelines
REYNOLDS2005a	Not high enough percentage of pop meets AUD
RICHMOND1995	Opportunistic not planned intervention
RICHMOND2000	Not severe enough drinking (hazardous)
RIPER2008	Not severe enough drinking (hazardous)
RIPER2009	Not full randomized study design
ROLL2005	Not an RCT
ROUDSARI2009	Opportunistic not planned intervention
	Not high enough of sample population meeting AUD (primarily other psychiatric diagnoses or substance misuse)
RUSH2008	No relevant interventions
	Opportunistic not planned intervention
	Not severe enough drinking (hazardous)

SANCHEZCRAIG2996 Not severe enough drinking (hazardous)

Study ID	Reason for Exclusion
SAPIRWEISE1999	No relevant outcome measures
SCHAUS2009	Not severe enough drinking (hazardous)
SCHERMER2006	Opportunistic not planned intervention
SCHILLING2002	Not randomized
SJOBERG1985	Too small of a sample size when randomized into conditions; no usable outcome data
SMITH2006	No relevant alcohol outcomes; not severe enough drinkers
SOBELL2000	Opportunistic not planned intervention
SODERSTROM2007	Opportunistic not planned intervention
SOMMERS2006	Opportunistic not planned intervention
SPIRITO2004	Opportunistic not planned intervention
SPOTH2002	No relevant alcohol outcomes
STAHLBRANDT2007	Not severe enough drinking (hazardous)
STAIGER1999	No relevant outcomes, no usable data
STAIGER1999	No relevant outcome measures
STEIN2002b	Not severe enough drinking (hazardous)
SUSSMAN2003	No relevant alcohol outcomes
SZAPOCZNIK1983	No relevant outcomes
SZAPOCZNIK1986	No relevant outcomes
TAIT2004	Opportunistic not planned intervention
TAIT2005	Opportunistic not planned intervention
TEICHNER2002	Not enough of sample meets AUD (45-47%)
TEVYAW2007	Not severe enough drinking (hazardous)
TIMKO1999	Not randomized; self-selected into groups
TIMKO2006	Not high enough proportion of sample meeting AUD (45,9%) rest of sample using drugs.
TIMKO2007	Not high enough proportion of sample meeting AUD(45,9%) rest of sample using drugs.
TONEATTO2005	After attrition, n=7 in each group; too small of a sample size
TRACY2007	Opportunistic not planned intervention
VAN2006	Methodologically flawed (Attrition bias; Issues administering treatment)
WALTERS2000	Not severe enough drinking (hazardous)
WALTERS2007	Not severe enough drinking (hazardous)
WALTERS2009d	Not severe enough drinking (hazardous)
WALTON2008	Opportunistic not planned intervention
WASHINGTON2001	No differentiation between types of substance abuse
WATSON1999	Quasi-experimental
WATSON1999	Quasi-experimental study design
WATT2006	Not severe enough drinking (hazardous)
WATT2008	Opportunistic not planned intervention
WEINSTOCK2007	Only 52% have AUD
WEISNER2001	Not high enough percentage of population meets alcohol abuse/dependence; not relevant outcomes

Appendix 16d

WERCH2000	Hazardous not harmful drinkers
WHITE2005	Not severe enough drinking (hazardous)
WHITE2007A	Not severe enough drinking (hazardous)
WHITE2008A	Not severe enough drinking (hazardous)
WINTERS2002	Does not distinguish between alcohol and drugs in outcome data
WINTERS2002	Can't separate drugs from alcohol measures
WINTERS2007	Drugs not alcohol measures
WOOD2007	Not randomized, not drinking enough, study excluded those drinking >40 drinks per week
WUTZKE2002	Not severe enough drinking (hazardous)
ZEMORE2007	Not randomized
ZLOTNICK2009	Drugs not alcohol primary focus