APPENDIX 19: HEALTH ECONOMIC EVIDENCE – GRADE PROFILES

1.1.1 Children and young people: non-pharmacological management

<table>
<thead>
<tr>
<th>Study and country</th>
<th>Limitations</th>
<th>Applicability</th>
<th>Other comments</th>
<th>Incremental cost(^c)</th>
<th>Incremental effect</th>
<th>Incremental cost-effectiveness ratio ($/effect)</th>
<th>Uncertainty</th>
</tr>
</thead>
</table>
| LeBel and Goldstein (2005) US | Potentially serious limitations\(^b\) | Partially applicable\(^b\) | • Before–after study  
• Content of intervention unclear  
• Primary outcome: episodes of restraint  
• Other outcomes: medication use, recidivism, rehospitalisation, restraint related injuries | -£1,016,204 | Episodes of restraint reduced from 3991 to 373 | Management programme dominant | Not examined |

1. Costs converted and uplifted to 2014 UK pounds, using purchasing power parity exchange rates and the UK hospital and community health services inflation index.
2. Before and after study, no formal statistical analysis, unclear discounting, poorly defined intervention, cost of implementation not measured, carried out in one centre.
3. US study, no quality of life years estimated, but intervention dominant according to the outcome measure used.