

A1.12 Should psychosocial treatments be used in addition to pharmacological maintenance treatments?

GRADE evidence profile

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Question:	Should psychosocial plus pharmacological maintenance treatments versus pharmacological maintenance treatments alone be used for opioid dependence?
Patient or population:	Opiate dependent patients
Settings:	Outpatient
Systematic review:	Amato et al.; <i>Psychosocial combined with agonist maintenance treatments versus agonist maintenance treatments alone for treatment of opioid dependence</i> (CLIB 4, 2004) ^[257] .

Quality assessment						Summary of findings				Quality	Importance
No. studies	Design	Limitations	Consistency	Directness	Other considerations	Psychosocial plus pharmacological maintenance treatments	Pharmacological maintenance treatments alone	Relative risk (RR) (95% CI)	Absolute risk (AR) (95% CI)		
Retention in treatment ^[247, 248, 249, 212, 250, 251, 252, 253] (Objective follow-up: 6-24 weeks ^d)											
8 ^a	Randomized trials	No limitations ^b	No important inconsistency	No uncertainty	None	228/296 (77%)	170/214 (79,4%)	RR 0.94 ^{c,e} (0.85 to 1.02)	50 less / 1 000 (120 less to 20 more)	⊕⊕⊕⊕	High
Use of opiates ^[254, 156, 251, 252, 253] (Objective ^g follow-up: 6-32 weeks ^d)											
5 ^f	Randomized trials	No limitations ^h	No important inconsistency	No uncertainty	None	70/187 (37,4%)	105/201 (52,2%)	RR 0.69 ^c (0.53 to 0.91)	190 less / 1 000 (320 less to 50 less)	⊕⊕⊕⊕	High
Retention in treatment at the end of follow-up ^[255, 248, 256] (Objective follow-up: 4-48 weeks)											
3 ^f	Randomized trials	No limitations ^k	No important inconsistency	No uncertainty	None	105/163 (64,4%)	62/87 (71,3%)	RR 0.90 ^c (0.76 to 1.07)	70 less / 1 000 (190 less to 50 more)	⊕⊕⊕⊕	High
Abstinent at the end of follow-up ^[248, 256] (follow-up: 1-12 months)											
2 ^l	Randomized trials	No limitations ^m	Important inconsistency (-1) ⁿ	No uncertainty	Imprecise or sparse data (-1) ⁿ	44/70 (62,9%)	27/38 (71,1%)	RR 0.88 ^c (0.67 to 1.15)	90 less / 1 000 (260 less to 90 more)	⊕⊕○○	Low

- ^a All outpatient and all conducted in USA
^b All but 1 unclear allocation concealment, 1 inadequate; 2 double blind
^c Fixed effect model
^d Length of treatment
^e Excluding the study with inadequate allocation concealment the result do not change
^f All outpatient and all conducted in USA
^g Based on urinalysis
^h All with unclear allocation concealment, 1 double blind
ⁱ Random effect model
^j All outpatient and all conducted in USA
^k All with unclear allocation concealment, 1 double blind
^l Both outpatient and both conducted in USA
^m 1 double blind, 2 unclear allocation concealment
ⁿ Two studies with conflicting results