

COVID-19 CADTH REFERENCE LIST

Managed Alcohol Programs for Adults with SARS or COVID-19: Safety and Guidelines

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To produce this report, CADTH used a modified approach to the selection, appraisal, and synthesis of the evidence to meet decision-making needs during the COVID-19 pandemic. Care has been taken to ensure the information is accurate and complete, but it should be noted that international scientific evidence about COVID-19 is changing and growing rapidly.

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Research Questions

1. What is the clinical evidence regarding the safety of managed alcohol programs in patients with alcohol addiction with severe acute respiratory syndrome (SARS) or coronavirus disease (COVID-19)?
2. What are the evidence-based guidelines regarding the treatment of alcohol addiction in adults with severe acute respiratory syndrome (SARS) or coronavirus disease (COVID-19)?

Key Findings

No literature was identified regarding the clinical evidence for safety of managed alcohol programs in patients with alcohol addiction with SARS or COVID-19. Additionally, no evidence-based guidelines were identified regarding the treatment of alcohol addiction in adults with SARS or COVID-19.

Methods

A limited literature search was conducted by an information specialist on key resources including PubMed, the Cochrane Library, the University of York Centre for Reviews and Dissemination (CRD) databases, the websites of Canadian and major international health technology agencies, as well as a focused internet search. The search strategy was comprised of both controlled vocabulary, such as the National Library of Medicine’s MeSH (Medical Subject Headings), and keywords. The main search concepts were alcohol programs and COVID-19 and other respiratory illnesses. No search filters were applied to limit retrieval by study type. Where possible, retrieval was limited to the human population. The search was also limited to English language documents published between January 1, 2015 and April 30, 2020. Internet links were provided, where available.

Selection Criteria

One reviewer screened citations and selected studies based on the inclusion criteria presented in Table 1.

Table 1: Selection Criteria

Population	Q1. Adults with alcohol addiction who are being treated for severe acute respiratory syndrome (SARS) or coronavirus disease (COVID-19) Q2. Adults with alcohol addiction who are suspected of having or who have been diagnosed with severe acute respiratory syndrome (SARS) or coronavirus disease (COVID-19)
Intervention	Q1. Managed alcohol programs in a community setting Q2. Strategies for treating alcohol addiction in a community setting (e.g., managed alcohol programs)
Comparator	Q1. Usual care, no treatment or no comparator Q2. Not applicable
Outcomes	Q1. Adverse events (e.g., hospital admissions, complications, side-effects of treatment, symptoms of alcohol withdrawal) Q2. Recommendations regarding managing alcohol addiction in a community setting in adults with SARS or COVID-19
Study Designs	Health technology assessments, systematic reviews, randomized controlled trials, non-randomized studies, evidence-based guidelines

Results

Rapid Response reports are organized so that the higher quality evidence is presented first. Therefore, health technology assessment reports, and systematic reviews, are presented first. These are followed by randomized controlled trials, non-randomized studies, and evidence-based guidelines.

No health technology assessments, systematic reviews, randomized controlled trials or non-randomized studies were identified regarding the clinical evidence for safety of managed alcohol programs in patients with alcohol addiction with SARS or COVID-19. Additionally, no evidence-based guidelines were identified regarding the treatment of alcohol addiction in adults with SARS or COVID-19.

References of potential interest are provided in the appendix.

Overall Summary of Findings

No relevant literature, including recommendations, were found regarding the safety and treatment of managed alcohol programs in patients with alcohol addiction with SARS or COVID-19; therefore, no summary can be provided.

References Summarized

Health Technology Assessments

No literature identified.

Systematic Reviews and Meta-Analyses

No literature identified.

Randomized Controlled Trials

No literature identified.

Non-Randomized Studies

No literature identified.

Guidelines and Recommendations

No literature identified.

Appendix — Further Information

Clinical Practice Guidelines – Methodology Not Specified

1. Clinical guide for the management of people with alcohol dependence during the coronavirus pandemic. Redditch (GB): NHS England. 2020 Apr 8 :
https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/04/C0157-Specialty-guide_-_Alcohol-Dependence-and-coronavirus_8-April.pdf
2. Ahamad K. et al. Risk mitigation in the context of dual public health emergencies. Vancouver (BC): British Columbia Centre on Substance Abuse. 2020 Mar.
<https://www.bccsu.ca/wp-content/uploads/2020/04/Risk-Mitigation-in-the-Context-of-Dual-Public-Health-Emergencies-v1.5.pdf>

Additional References

3. Safer Drinking Tips During COVID-19. Victoria (BC): The Canadian Managed Alcohol Program Study (CMAPS). 2020 Mar 30 :
<https://www.uvic.ca/research/centres/cisur/assets/docs/safer-drinking-covid-march-30.pdf>