

CADTH Reference List

Non-Medical Withdrawal Management Services for Substance Use Disorder

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Key Messages

- No evidence was identified regarding the comparative clinical effectiveness of non-medical withdrawal management services versus medical withdrawal management services for substance use disorder.
- No evidence was identified regarding the cost-effectiveness of non-medical withdrawal management services for substance use disorder.

Research Questions

1. What is the comparative clinical effectiveness of non-medical withdrawal management services versus medical withdrawal management services for substance use disorder?
2. What is the cost-effectiveness of non-medical withdrawal management services for substance use disorder?

Methods

Literature Search Methods

A limited literature search was conducted by an information specialist on key resources including MEDLINE, the Cochrane Database of Systematic Reviews, the international HTA database, the websites of Canadian and major international health technology agencies, as well as a focused internet search. The search strategy comprised both controlled vocabulary, such as the National Library of Medicine's MeSH (Medical Subject Headings), and keywords. The main search concepts were substance use disorder and withdrawal management. No 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, 2016 and November 19, 2021. Internet links were provided, where available.

Selection Criteria

One reviewer screened literature search results (titles and abstracts) and selected publications according to the inclusion criteria presented in Table 1. Full texts of study publications were not reviewed

Results

No relevant health technology assessments, systematic reviews, randomized controlled trials, or non-randomized studies were identified regarding the comparative clinical effectiveness of non-medical withdrawal management services versus medical withdrawal management services for substance use disorder. No relevant economic evaluations were identified

Table 1: Selection Criteria

Criteria	Description
Population	Individuals with substance use disorder in the community
Intervention	Non-medical withdrawal management services (e.g., counselling, peer support, case management)
Comparator	Medical withdrawal management services (e.g., pharmacological therapy)
Outcomes	Q1: Clinical effectiveness (e.g., harm reduction, substance use, adherence to recovery goals, safety [patient harms and benefits]) Q2: Cost-effectiveness (e.g., cost per hospitalization avoided, cost per overdose avoided, cost per quality-adjusted life-year increased)
Study designs	Health technology assessments, systematic reviews, randomized controlled trials, non-randomized studies, economic evaluations

regarding the cost-effectiveness of non-medical withdrawal management services for substance use disorder.

References of potential interest that did not meet the inclusion criteria are provided in Appendix 1.

References

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.

Economic Evaluations

No literature identified.

Appendix 1: References of Potential Interest

Previous CADTH Reports

1. Tran K, McGill S. Treatment programs for substance use disorder. *Can J Health Technol.* 2021;1(6). Available from: <https://www.cadth.ca/sites/default/files/pdf/htis/2021/RC1360%20Treatment%20Programs%20for%20SUD%20Final.pdf>. Accessed 2021 Nov 23.
2. Hafizi D, Argáez C. Telehealth and mobile services for substance use disorder: clinical effectiveness, cost-effectiveness and guidelines. (*CADTH rapid response report: summary of abstracts*). Ottawa (ON): CADTH; 2020: <https://www.cadth.ca/sites/default/files/pdf/htis/2020/RB1423%20Telehealth%20Opioids%20Final.pdf>. Accessed 2021 Nov 23.

Systematic Reviews and Meta-analyses

Unclear Comparator

3. AshaRani PV, Hombali A, Seow E, Ong WJ, Tan JH, Subramaniam M. Non-pharmacological interventions for methamphetamine use disorder: a systematic review. *Drug Alcohol Depend.* 2020 Jul 1;212:108060. [PubMed](#)
4. O'Connor EA, Perdue LA, Senger CA, et al. Screening and behavioral counseling interventions to reduce unhealthy alcohol use in adolescents and adults: an updated systematic review for the U.S. Preventive Services Task Force. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2018: <https://www.ncbi.nlm.nih.gov/books/NBK534916/>. Accessed 2021 Nov 23.

Guidelines and Recommendations

5. Holowaty M, Martel D, Knight E. Practical approach to substance use disorders for the family physician. Mississauga (ON): College of Family Physicians of Canada; 2021: <https://www.cfpc.ca/CFPC/media/PDF/MIGS-2021-Addiction-Medicine-ENG-Final.pdf>. Accessed 2021 Nov 23.
See: Non-pharmacological treatments, p.8; Non-pharmacological treatments, p.11; Non-pharmacological treatments, p.16
6. Duong T, Vytialingam R, O'Regan R. A brief guide to the management of alcohol and other drug withdrawal. Perth (AU): Government of Western Australia Mental Health Commission; 2018: <https://www.mhc.wa.gov.au/media/2558/a-brief-guide-to-the-management-of-alcohol-and-other-drug-withdrawal.pdf>. Accessed 2021 Nov 23.
See: 3.5 Psychosocial intervention, p.12; 3.3 Psychological and social support, p. 21; 3.3 Psychological and social support, p. 25

Review Articles

7. Singh AK. Critical review of alcohol, alcoholism and the withdrawal symptoms. II. Treatment strategies. *Arch Addict Rehabil.* 2017;1(1):31-50. Available from: <https://pdfs.semanticscholar.org/ca15/1adbe16d314d89927255ad4b03ade377e6f8.pdf>. Accessed 2021 Nov 23.

Additional References

8. Rush B, Furlong A. Rapid access models for substance use services: a rapid review. Ottawa (ON): Canadian Centre on Substance Use and Addiction; 2020: <https://www.ccsa.ca/sites/default/files/2020-10/CCSA-Rapid-Access-Models-Substance-Use-Services-Rapid-Review-Report-2020-en.pdf>. Accessed 2021 Nov 23.
9. Meister S, Maloney-Hall B, Urbanoski K, National Treatment Indicators Working Group. Withdrawal management services in Canada: the national treatment indicators report. 2015-2016 data. Ottawa (ON): Canadian Centre on Substance Use and Addiction; 2019: <https://www.ccsa.ca/sites/default/files/2019-04/CCSA-National-Treatment-Indicators-Report-2019-en.pdf>. Accessed 2021 Nov 23.
10. Opioid use disorder care for people 16 years of age and older. Toronto (ON): Health Quality Ontario; 2018: <https://www.hqontario.ca/portals/0/documents/evidence/quality-standards/qs-opioid-use-disorder-clinician-guide-en.pdf>. Accessed 2021 Nov 23.
See: Quality Statement 3: Addressing Physical Health, Mental Health, Additional Addition Treatment Needs, and Social Needs, p. 13