

NKR 13 Alkoholbehandling Naltrexon for alcohol dependence

Review information

Authors

Sundhedsstyrelsen¹

¹[Empty affiliation]

Citation example: S. NKR 13 Alkoholbehandling Naltrexon for alcohol dependence. Cochrane Database of Systematic Reviews [Year], Issue [Issue].

Characteristics of studies

Characteristics of included studies

Ahmadi 2002

Methods	
Participants	
Interventions	
Outcomes	
Notes	For more information see Rösner S, Hackl-Herrwerth A, Leucht S, Vecchi S, Srisurapanont M, Soyka M. Opioid antagonists for alcohol dependence. Cochrane Database of Systematic Reviews 2010, Issue 12. Art. No.: CD001867. DOI: 10.1002/14651858.CD001867.pub3.

Risk of bias table

Bias	Authors' judgement	Support for judgement
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Incomplete outcome data (attrition bias)	Unclear risk	
Selective reporting (reporting bias)	Unclear risk	
Other bias	Unclear risk	

Anton 1999

Methods	
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Anton 2005

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Balldin 2003

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Baltieri 2008

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BALTIERI2008

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Chick 2000

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Other bias	Unclear risk	

Garbutt 2016

Methods	Study design: Study grouping:
Participants	Baseline Characteristics Intervention: naltrexone 50 mg/day Control: placebo tablets Overall Included criteria: Excluded criteria: Pretreatment:
Interventions	Intervention Characteristics Intervention: naltrexone 50 mg/day <ul style="list-style-type: none"> ● <i>Description:</i> ● <i>Duration (weeks)</i> 12 weeks: ● <i>50 mg daily:</i> ● <i>Follow-up time 12 weeks = by end of treatment period:</i> ● <i>all received BRENDAL alcohol psycho social counseling:</i> Control: placebo tablets <ul style="list-style-type: none"> ● <i>Description:</i> ● <i>Duration (weeks)</i> 12 weeks: ● <i>50 mg daily:</i> ● <i>Follow-up time 12 weeks = by end of treatment period:</i> ● <i>all received BRENDAL alcohol psycho social counseling:</i>
Outcomes	<i>Drop out due to all causes</i> <ul style="list-style-type: none"> ● Outcome type: Dichotomous Outcome ● Reporting: Fully reported ● Direction: Lower is better ● Data value: Endpoint <i>Procent dage afholdende</i>

	<ul style="list-style-type: none"> ● Outcome type: Dichotomous Outcome ● Reporting: Fully reported ● Direction: Higher is better ● Data value: Endpoint <p><i>Fra fald pga. bivirkninger</i></p> <ul style="list-style-type: none"> ● Outcome type: Dichotomous Outcome ● Reporting: Fully reported ● Direction: Lower is better ● Data value: Endpoint
Notes	

Risk of bias table

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Random sequence generation (selection bias)	Unclear risk	hydrochloride, 50 mg/d, or to matching placebo, with randomization balanced by SL vs SDL status and high vs low levels of craving (dichotomized for randomization only on median PACS scores from prior trials 22) based on a 1:1 algorithm assignment (SAS software; SAS Institute Inc) within the 4 respective blocks provided by one of us (R.J.G.) The University of North Carolina In- vestigational Drug Service assigned participants to interventions based on the randomization schedule.
Allocation concealment (selection bias)	Low risk	The University of North Carolina In- vestigational Drug Service assigned participants to interventions based on the randomization schedule. Participants
Blinding of participants and personnel (performance bias)	Low risk	identical pills
Blinding of outcome assessment (detection bias)	Unclear risk	I assume that the outcome assessors were not able to tell the difference between intervention and placebo, but it is not clearly described
Incomplete outcome data (attrition bias)	Low risk	intention to treat analysis, Outcomes according to study protocol and few drop outs
Selective reporting (reporting bias)	Low risk	similar to pretreatment protocol

Other bias	Low risk	broad inclusion criteria. No role of sponsor
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Gastpar 2002

Methods	
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Guardia 2002

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Heinälä 2001

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Huang 2005

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Kiefer 2003

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Killeen 2004

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Kranzler 2000

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Krystal 2001

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Latt 2002

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Lee 2001

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Other bias	Unclear risk	

Mann2013

Methods	RCT 12 weeks naltrexon, "support" for 6 months
Participants	alcohol dependent, admitted for alcohol detoxification, no major psychiatric illness
Interventions	naltrexon and medical management biweekly
Outcomes	drop-out due to all reasons, time to heavy drinking (not a outcome for the NKR group)
Notes	Federal Government of Germany + medication donated by Bristol Meyer Squibb and MERCK Serono

Risk of bias table

Bias	Authors' judgement	Support for judgement
Random sequence generation (selection bias)	Unclear risk	p681 of Mann et al., 2009 ("Searching for Responders to Acamprosate and Naltrexone in Alcoholism Treatment: Rationale and Design of the Predict Study") states "For allocating these patients to the 3 treatment arms, an imbalanced randomization algorithm is used ensuring proportions of 2:2:1 between acamprosate, naltrexone, and placebo, respectively." It is unclear how this was done and by whom.
Allocation concealment (selection bias)	Unclear risk	p681 of Mann et al., 2009 ("Searching for Responders to Acamprosate and Naltrexone in Alcoholism Treatment: Rationale and Design of the Predict Study") states "For allocating these patients to the 3 treatment arms, an imbalanced randomization algorithm is used ensuring proportions of 2:2:1 between acamprosate, naltrexone, and placebo, respectively." It is unclear how this was done and by whom.
Blinding of participants and personnel (performance bias)	Low risk	p 939-940: "To ensure double-blind treatment, each patient had to take seven pills daily (three in the morning, two at noon and two in the late afternoon), regardless of the drug they were taking. Each blister pack contained a 1-week supply of medication". There was no information in the text to state whether the tablets for both active treatments and for placebo all look identical - but I presume they did. The protocol (Mann et al., 2009 -Searching for Responders to Acamprosate and Naltrexone in Alcoholism Treatment: Rationale and Design of the Predict Study) does not provide any further details.
Blinding of outcome assessment (detection bias)	Unclear risk	There were no details in the actual paper and no further details in the protocol
Incomplete outcome data (attrition bias)	Low risk	Figure 1 clearly states number of patients who discontinued, and the number of patients that were included in the analyses. The number of patients included in the analyses in figure 1 agrees with data in table 1
Selective reporting (reporting bias)	Low risk	Primary outcome and primary efficacy analysis are same in protocol and paper.
Other bias	Unclear risk	No other types of bias noted

Monti 2001

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Morley 2006

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Morris 2001

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O'Malley 1992

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Oslin 1997

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Volpicelli 1992

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Volpicelli 1997

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Other bias	Unclear risk

Footnotes

Characteristics of excluded studies

Bold 2016

Reason for exclusion	Wrong study design
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Bujarski 2017

Reason for exclusion	Wrong study design
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Busch 2017

Reason for exclusion	Wrong comparator
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Canidate 2017

Reason for exclusion	Wrong study design
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Chen 2016

Reason for exclusion	Wrong comparator
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Chen 2017

Reason for exclusion	Wrong study design
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DeMartini 2014

Reason for exclusion	Wrong study design
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DeMartini 2016

Reason for exclusion	Wrong study design
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DeSousa 2014

Reason for exclusion	Wrong study design
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Harris 2015

Reason for exclusion	Wrong study design
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Jonas 2014

Reason for exclusion	Wrong study design
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McCormack 2017

Reason for exclusion	Wrong study design
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Miranda 2014

Reason for exclusion	Wrong study design
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Mouaffak 2017

Reason for exclusion	Wrong study design
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O'Malley 2015

Reason for exclusion	Wrong study design
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Oslin 2015

Reason for exclusion	Wrong study design
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Palpacuer 2017

Reason for exclusion	Wrong study design
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*Footnotes***Characteristics of studies awaiting classification***Footnotes***Characteristics of ongoing studies***Footnotes***References to studies****Included studies**

Ahmadi 2002

[Empty]

Anton 1999

[Empty]

Anton 2005

[Empty]

Anton 2006

[Empty]

Balldin 2003

[Empty]

BALTIERI2008

[Empty]

Baltieri 2008

[Empty]

Chick 2000

[Empty]

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[Empty]

Guardia 2002

[Empty]

Heinälä 2001

[Empty]

Huang 2005

[Empty]

Kiefer 2003

[Empty]

Killeen 2004

[Empty]

Kranzler 2000

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Krystal 2001

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Latt 2002

[Empty]

Lee 2001

[Empty]

Mann2013

[Empty]

Monti 2001

[Empty]

Morley 2006

[Empty]

Morris 2001

[Empty]

O'Malley 1992

[Empty]

O'Malley 2008

[Empty]

Oslin 1997

[Empty]

Oslin 2008

[Empty]

Volpicelli 1992

[Empty]

Volpicelli 1997

[Empty]

Excluded studies

Bold 2016

Bold, Krysten W.; Fucito, Lisa M.; Corbin, William R.; DeMartini, Kelly S.; Leeman, Robert F.; Kranzler, Henry R.; O'Malley, Stephanie S.. Daily relations among affect, urge, targeted naltrexone, and alcohol use in young adults.. *Experimental & Clinical Psychopharmacology* 2016;24(5):367-375. [DOI:]

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Chen J.; Obi R.; Wong S.; Flannery M.; McDonald R.; Tofighi B.; Kermack A.; Laska E.; Rotrosen J.; Gourevitch, M. N.. Extended-release naltrexone versus oral naltrexone for alcohol use disorder treatment in primary care. 2016;(Conference Proceedings). [DOI: <http://dx.doi.org/10.1111/acer.13084>]

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Harris, Alex H. S.; Bowe, Thomas; Del Re, Aaron C.; Finlay, Andrea K.; Oliva, Elizabeth; Myrick, Hugh L.; Rubinsky, Anna D.. Extended release naltrexone for alcohol use disorders: quasi-experimental effects on mortality and subsequent detoxification episodes.. *Alcoholism: Clinical & Experimental Research* 2015;39(1):79-83. [DOI:]

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O'Malley, Stephanie S.; Corbin, William R.; Leeman, Robert F.; DeMartini, Kelly S.; Fucito, Lisa M.; Ikomi, Jolomi; Romano, Denise M.; Wu, Ran; Toll, Benjamin A.; Sher, Kenneth J.; Gueorguieva, Ralitsa; Kranzler, Henry R.. Reduction of alcohol drinking in young adults by naltrexone: a double-blind, placebo-controlled, randomized clinical trial of efficacy and safety.. *Journal of Clinical Psychiatry* 2015;76(2):e207-13. [DOI:]

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Oslin, David W.; Leong, Shirley H.; Lynch, Kevin G.; Berrettini, Wade; O'Brien, Charles P.; Gordon, Adam J.; Rukstalis, Margaret. Naltrexone vs Placebo for the Treatment of Alcohol Dependence: A Randomized Clinical Trial.. *JAMA Psychiatry* 2015;72(5):430-437. [DOI:]

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Palpacuer, Clement; Duprez, Renan; Huneau, Alexandre; Locher, Clara; Boussageon, Remy; Laviolle, Bruno; Naudet, Florian. Pharmacologically controlled drinking in the treatment of alcohol dependence or alcohol use disorders: a systematic review with direct and network meta-analyses on nalmefene, naltrexone, acamprosate, baclofen and topiramate. *Addiction* 2017;(Journal Article). [DOI:]

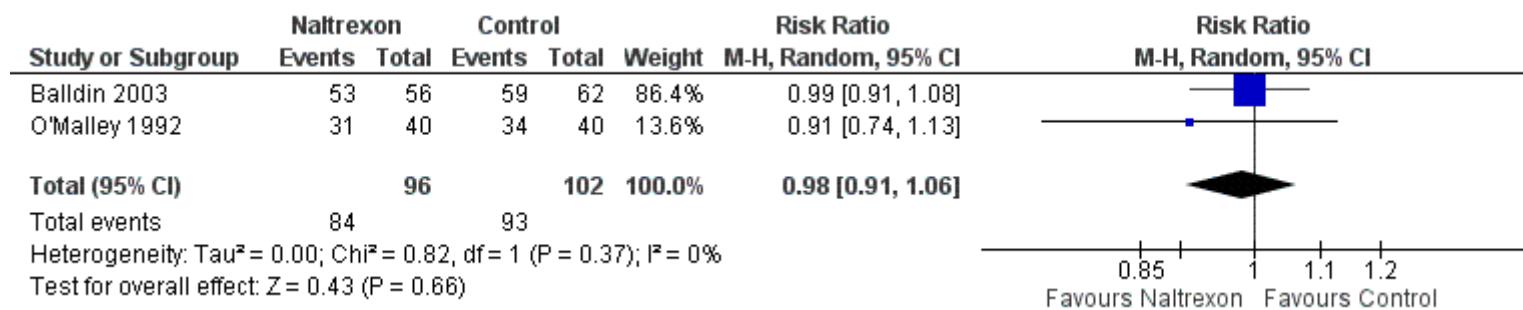
Data and analyses**1 naltrexon versus placebo for alcohol dependence**

Outcome or Subgroup	Studies	Participants	Statistical Method	Effect Estimate
1.1 Number of individuals non-abstinent (lapsed) 6-12 months after baseline	2	198	Risk Ratio (M-H, Random, 95% CI)	0.98 [0.91, 1.06]
1.2 Number individuals non-abstinent (lapsed) after 3 months treatment	16	1847	Risk Ratio (M-H, Random, 95% CI)	0.92 [0.86, 1.00]
1.3 Number of individuals non-abstinent (lapsed) 6-12 month FU	1	80	Risk Ratio (M-H, Random, 95% CI)	0.91 [0.74, 1.13]
1.4 Percentage days abstinent at 3 month after baseline	9	1607	Mean Difference (IV, Random, 95% CI)	-3.83 [-6.25, -1.40]
1.5 Percentage days abstinent at 6-12 months after baseline	2	742	Mean Difference (IV, Random, 95% CI)	-4.55 [-9.20, 0.10]
1.6 Drinks per drinking day 3 month after baseline	9	1526	Mean Difference (IV, Random, 95% CI)	-1.16 [-1.84, -0.48]
1.39 Side effect: Diarrhea	7	1366	Risk Ratio (M-H, Random, 95% CI)	0.97 [0.54, 1.75]

1.46 Side effect: Nausea	15	2729	Risk Ratio (M-H, Random, 95% CI)	1.57 [1.35, 1.82]
1.54 Side effect: Serious adverse events	4	877	Risk Ratio (M-H, Random, 95% CI)	1.23 [0.68, 2.23]
1.55 Drop-outs due to adverse events	16	2266	Risk Ratio (M-H, Random, 95% CI)	1.55 [1.01, 2.38]
1.57 Drop-outs	26	4135	Risk Ratio (M-H, Random, 95% CI)	0.91 [0.80, 1.03]

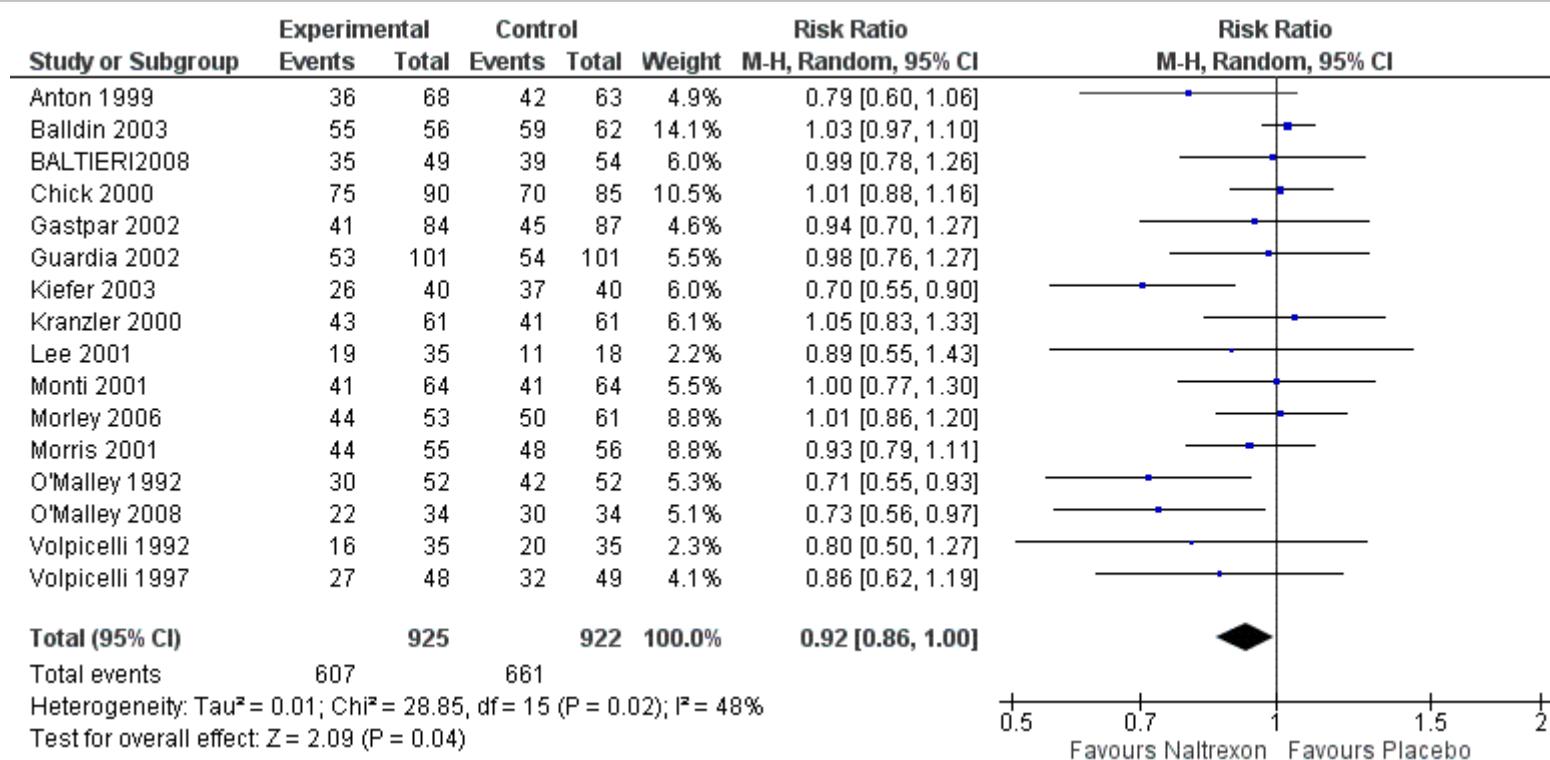
Figures

Figure 1 (Analysis 1.1)



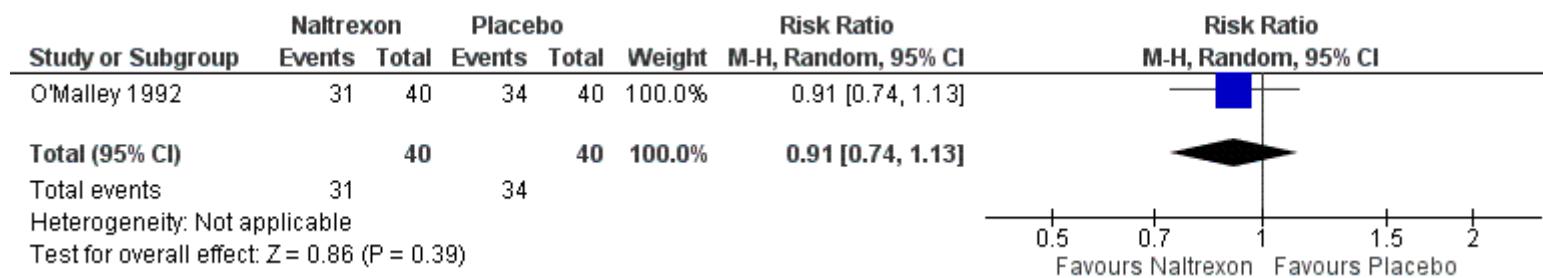
Forest plot of comparison: 1 naltrexon versus placebo for alcohol dependence, outcome: 1.1 Number of individuals non-abstinent (lapsed) 6-12 months after baseline.

Figure 2 (Analysis 1.2)



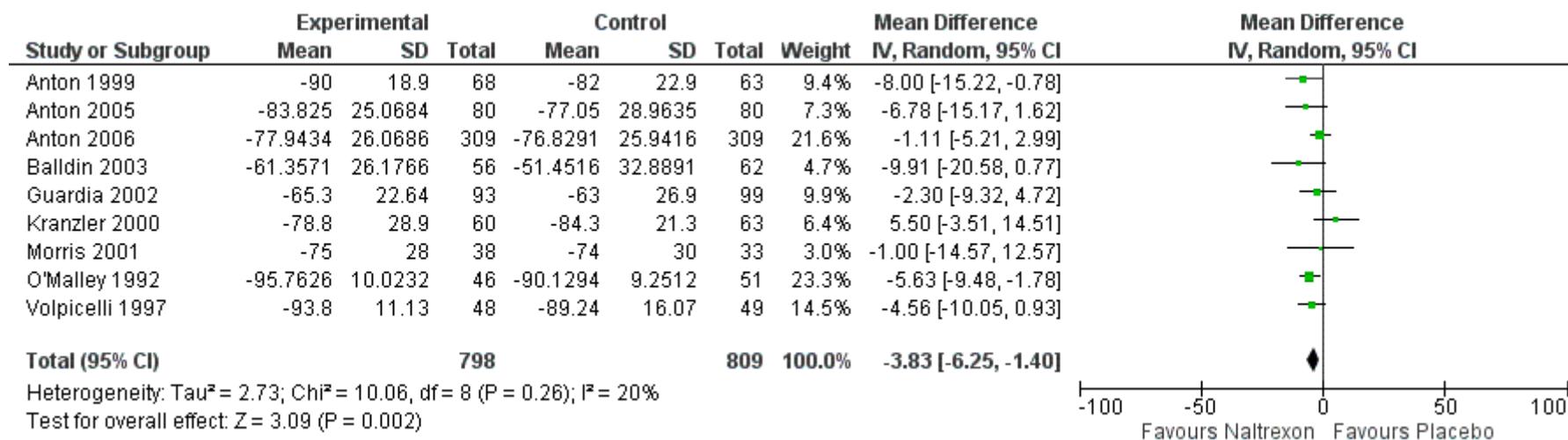
Forest plot of comparison: 1 naltrexon versus placebo for alcohol dependence, outcome: 1.2 Number individuals non-abstinent (lapsed) after 3 months treatment.

Figure 3 (Analysis 1.3)



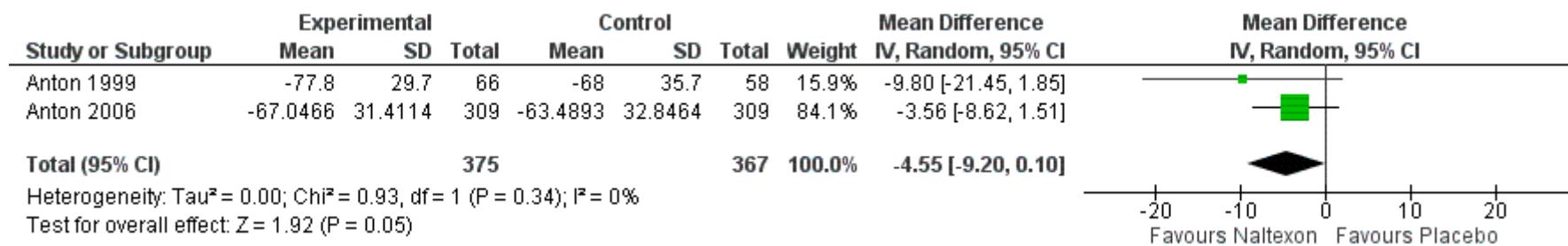
Forest plot of comparison: 1 naltrexon versus placebo for alcohol dependence, outcome: 1.3 Number of individuals non-abstinent (lapsed) 6-12 month FU.

Figure 4 (Analysis 1.4)

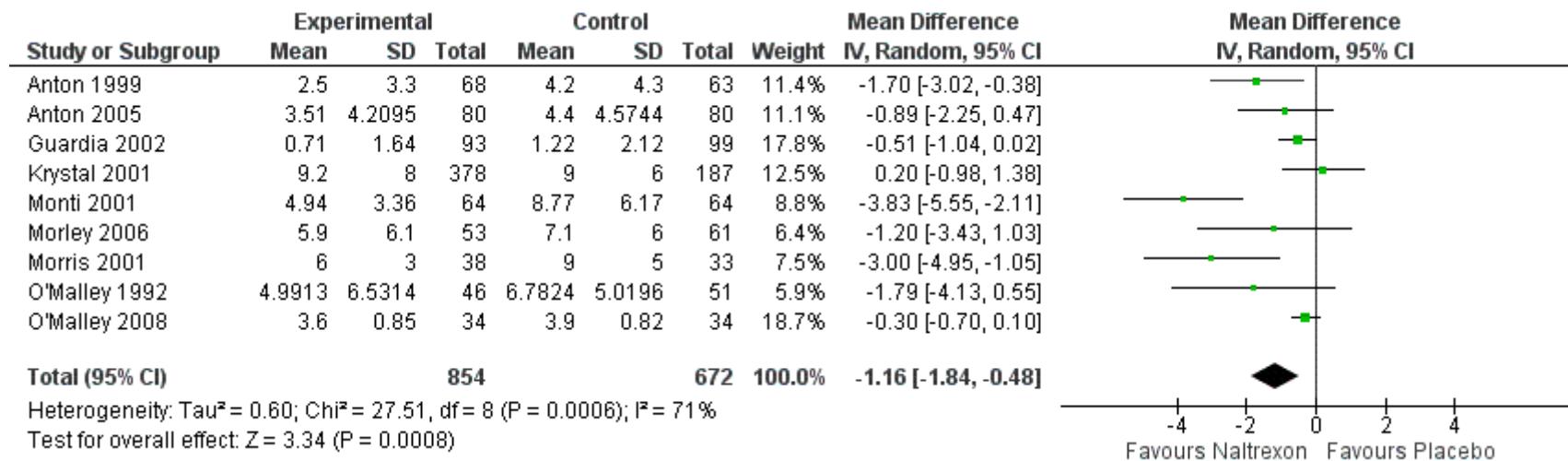


Forest plot of comparison: 1 naltrexon versus placebo for alcohol dependence, outcome: 1.4 Percentage days abstinent at 3 month after baseline.

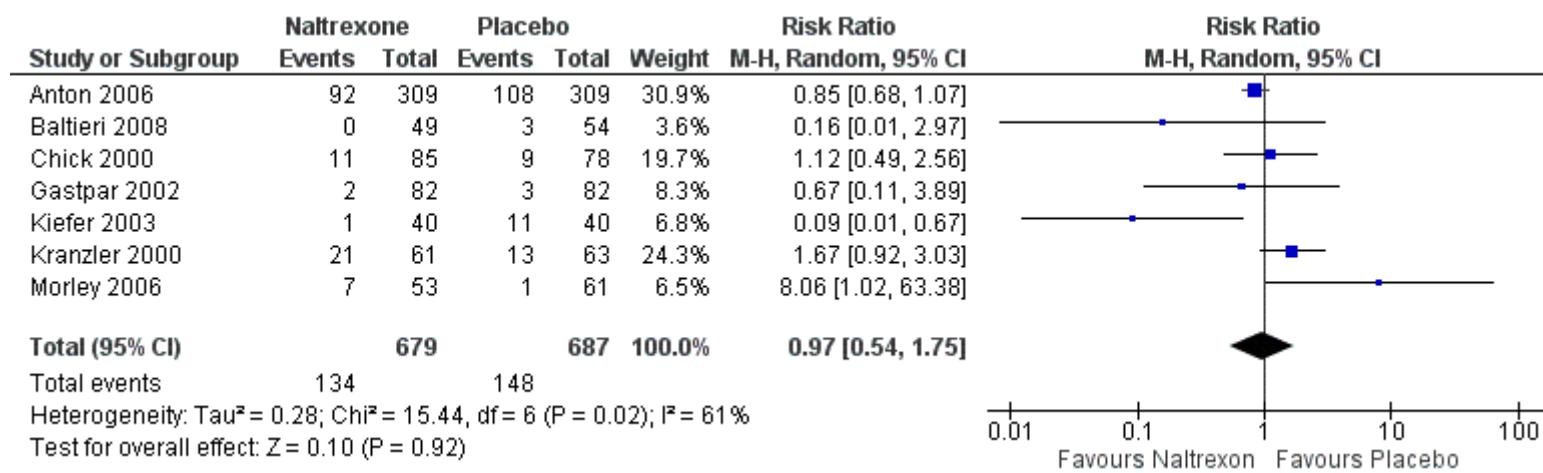
Figure 5 (Analysis 1.5)



Forest plot of comparison: 1 naltrexon versus placebo for alcohol dependence, outcome: 1.5 Percentage days abstinent at 6-12 months after baseline.

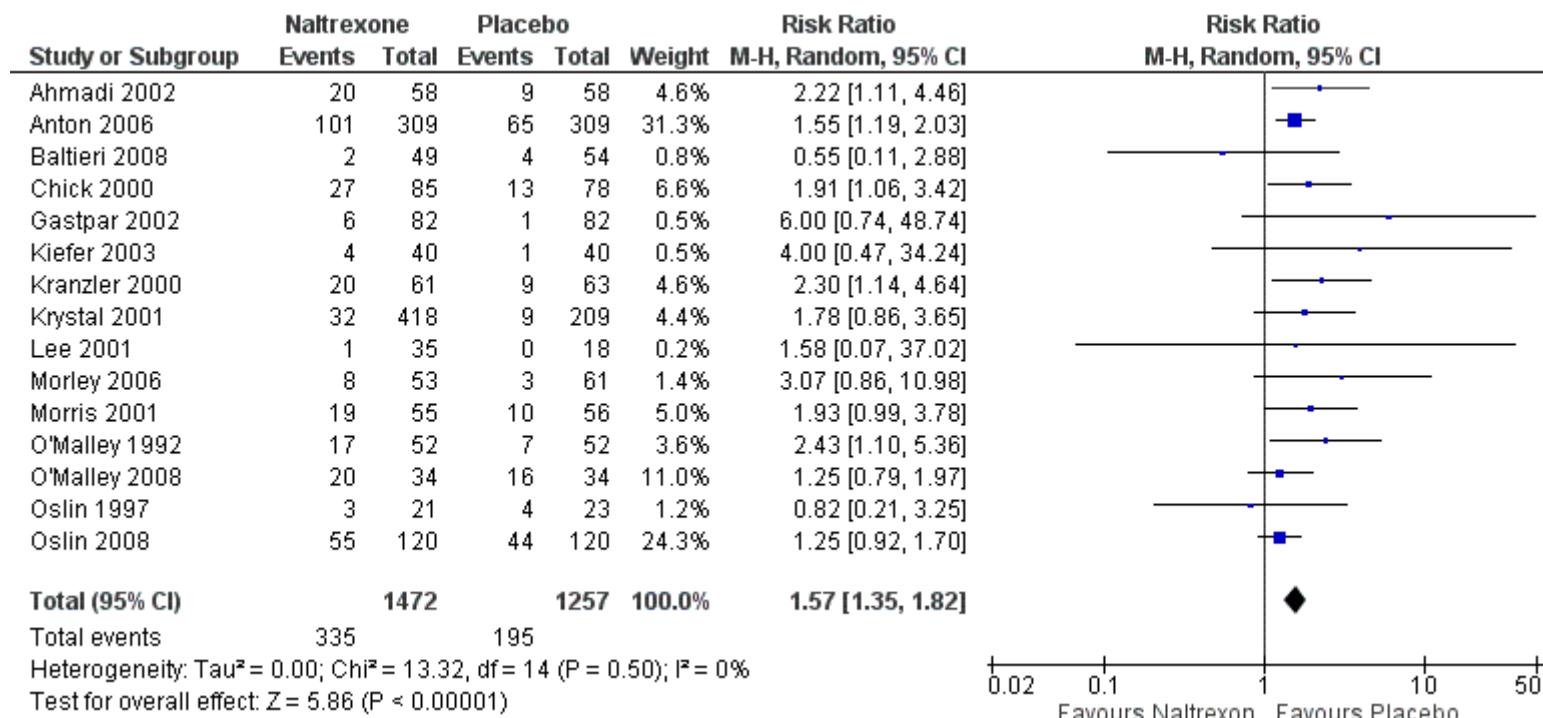
Figure 6 (Analysis 1.6)

Forest plot of comparison: 1 naltrexone versus placebo for alcohol dependence, outcome: 1.6 Drinks per drinking day 3 month after baseline.

Figure 7 (Analysis 1.39)

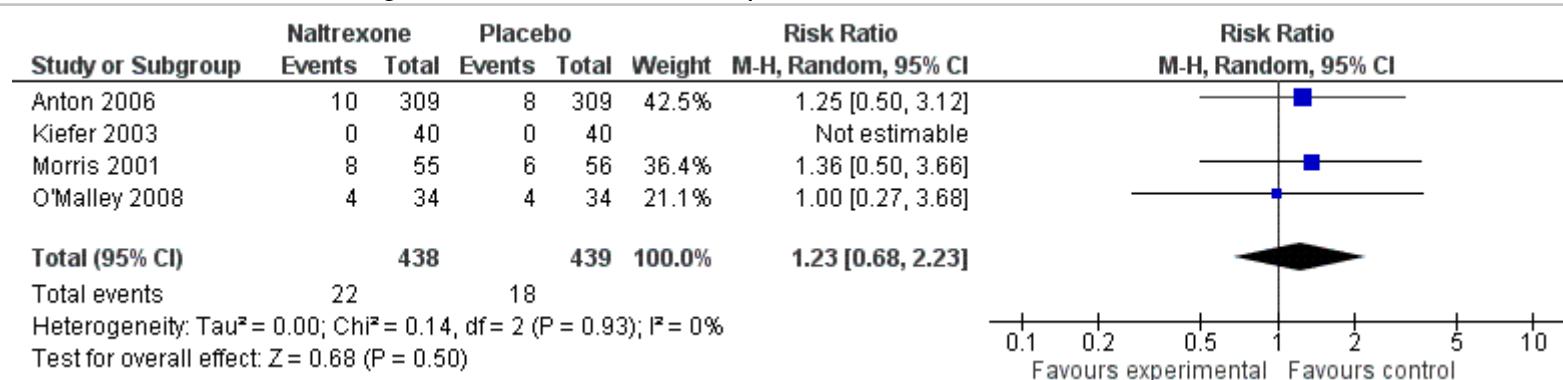
Forest plot of comparison: 1 naltrexon versus placebo for alcohol dependence, outcome: 1.39 Side effect: Diarrhea.

Figure 8 (Analysis 1.46)



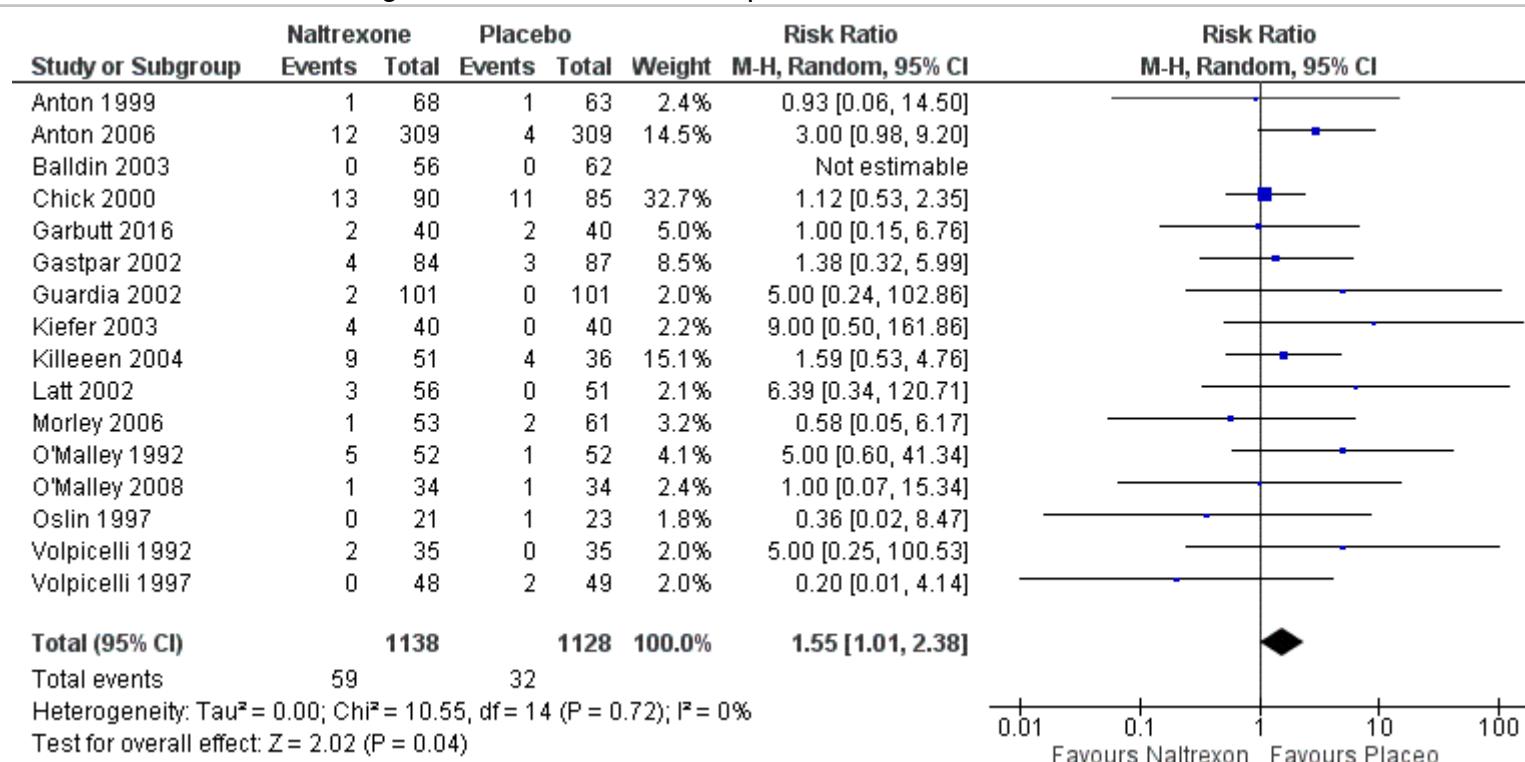
Forest plot of comparison: 1 naltrexon versus placebo for alcohol dependence, outcome: 1.46 Side effect: Nausea.

Figure 9 (Analysis 1.54)



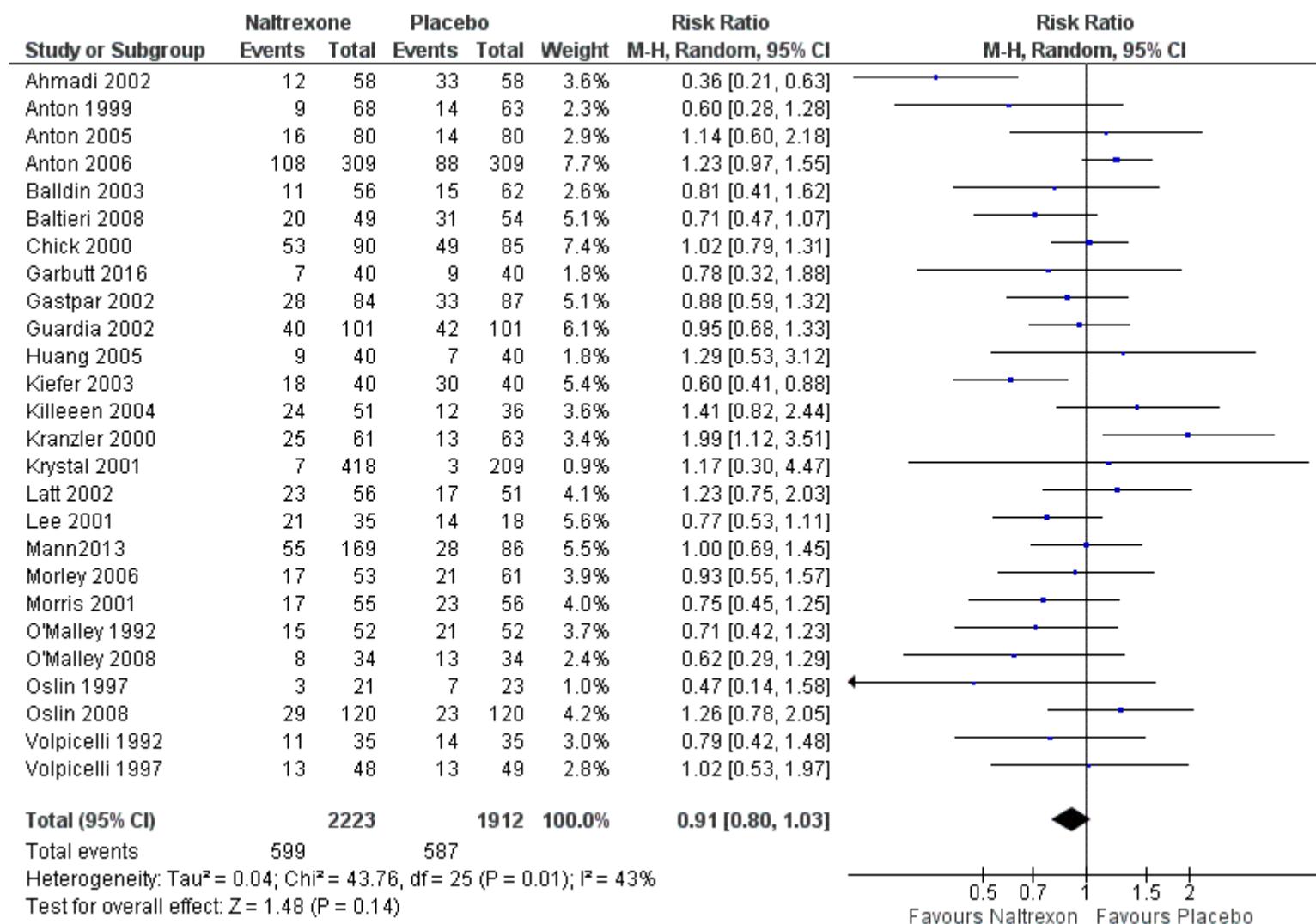
Forest plot of comparison: 1 naltrexon versus placebo for alcohol dependence, outcome: 1.54 Side effect: Serious adverse events.

Figure 10 (Analysis 1.55)

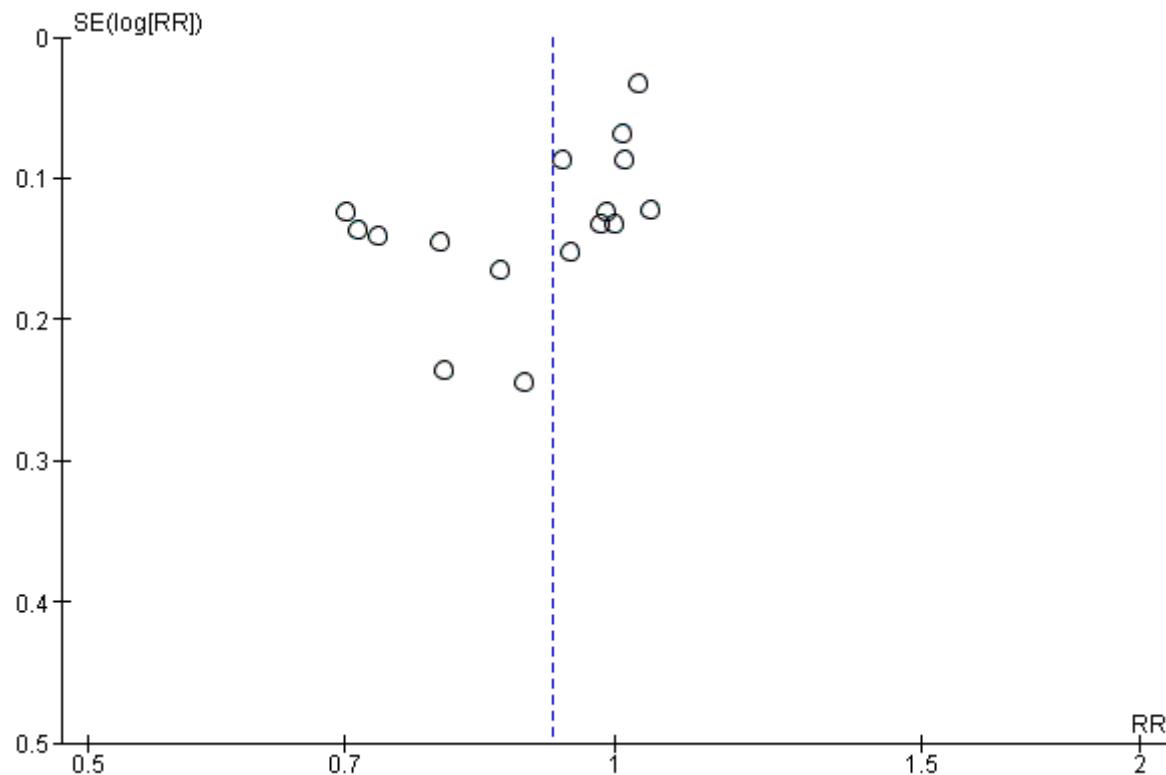


Forest plot of comparison: 1 naltrexone versus placebo for alcohol dependence, outcome: 1.55 Drop-outs due to adverse events.

Figure 11 (Analysis 1.57)

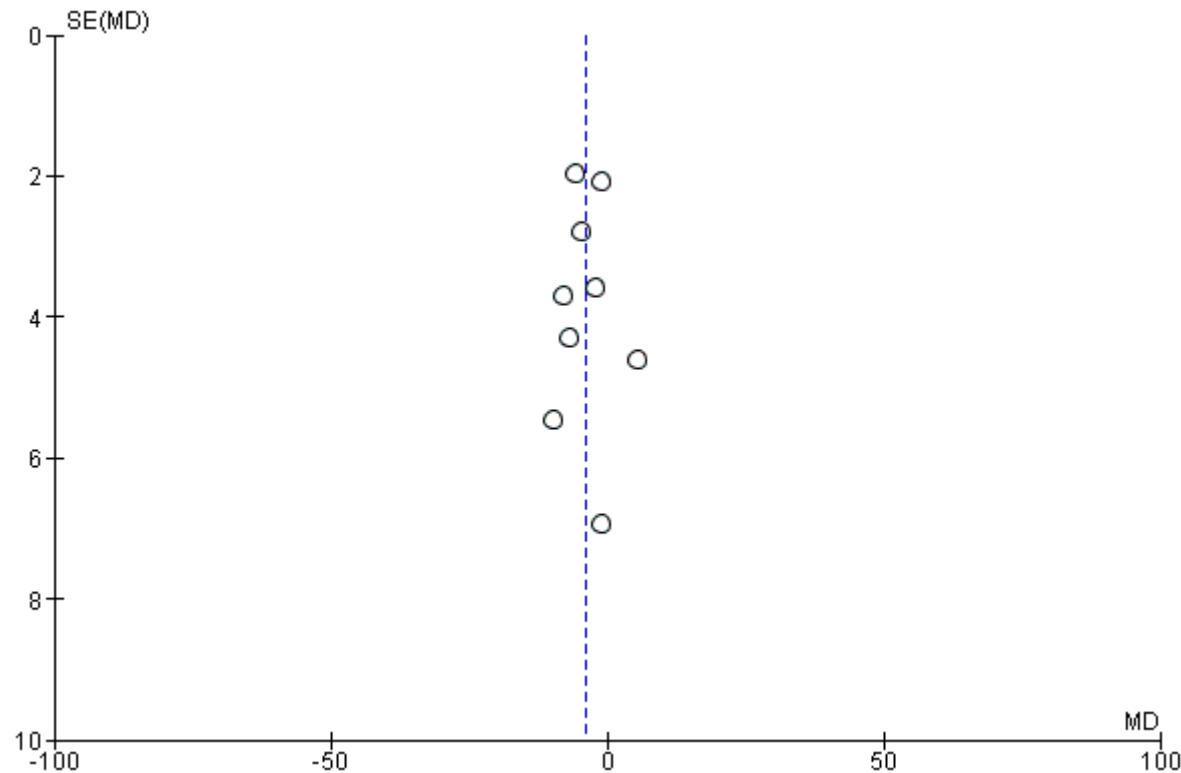


Forest plot of comparison: 1 naltrexon versus placebo for alcohol dependence, outcome: 1.57 Drop-outs.

Figure 12 (Analysis 1.2)

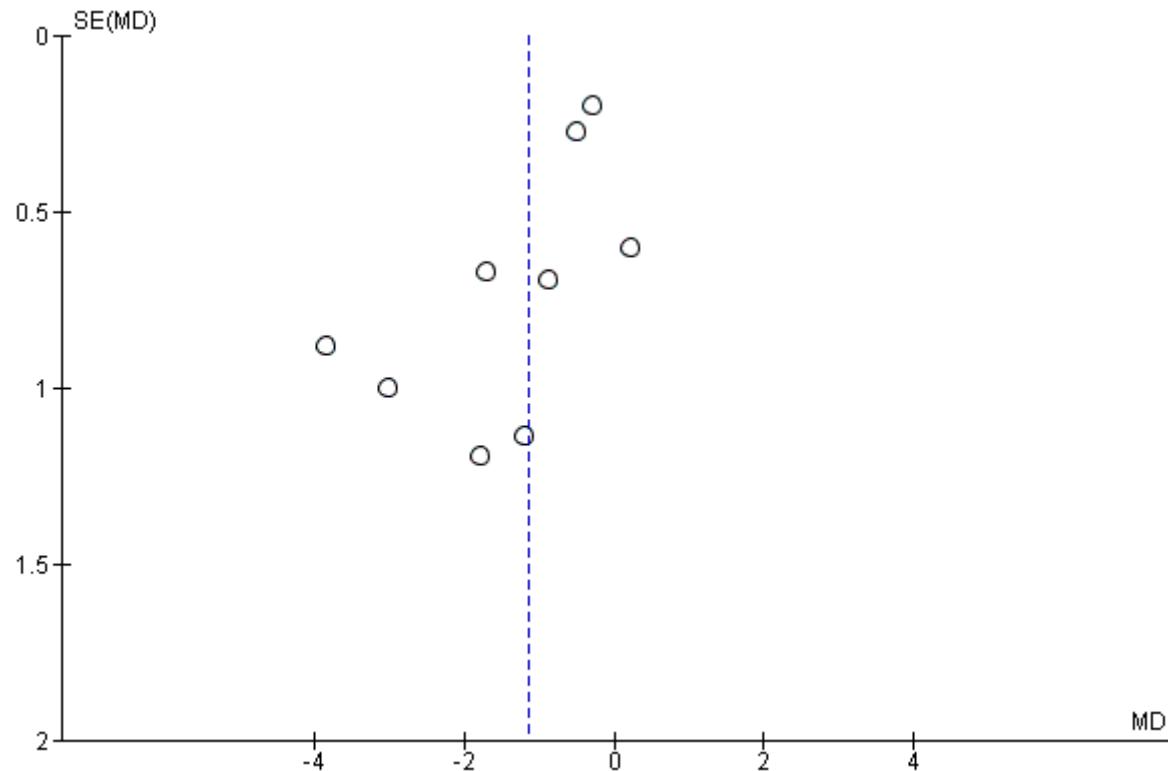
Funnel plot of comparison: 1 naltrexon versus placebo for alcohol dependence, outcome: 1.2 Number individuals non-abstinent (lapsed) after 3 months treatment.

Figure 13 (Analysis 1.4)



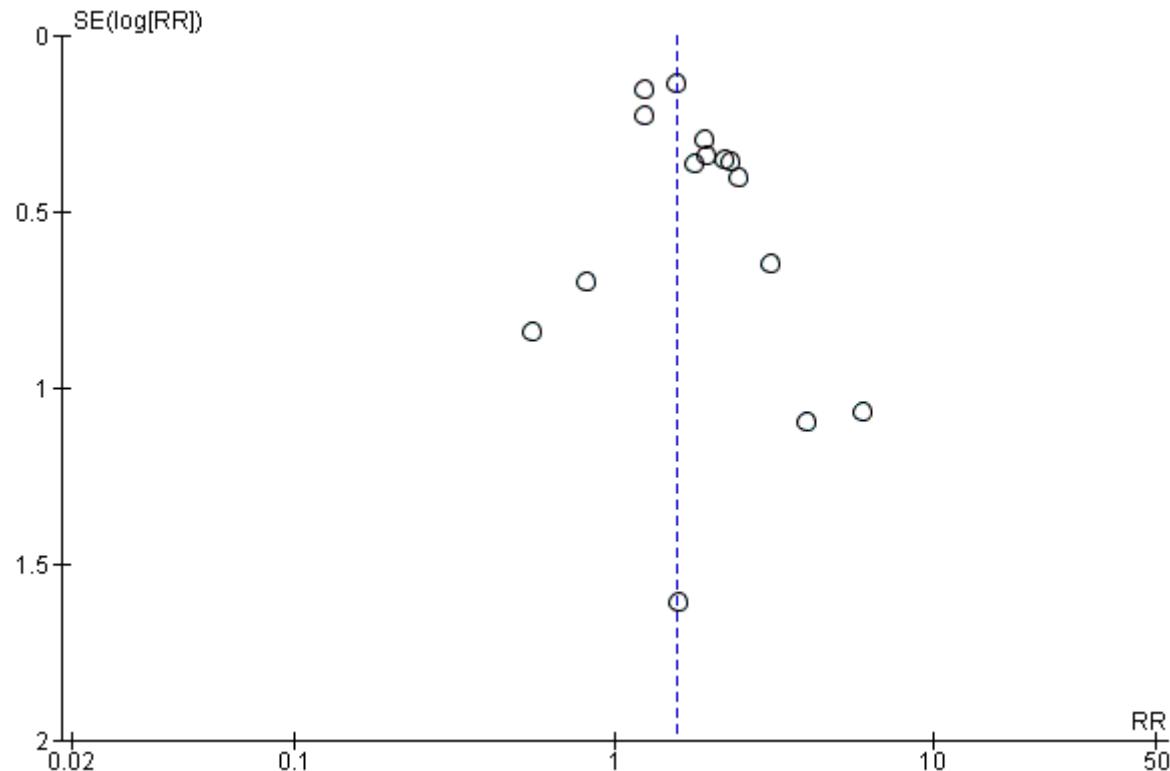
Funnel plot of comparison: 1 naltrexon versus placebo for alcohol dependence, outcome: 1.4 Percentage days abstinent at 3 month after baseline.

Figure 14 (Analysis 1.6)



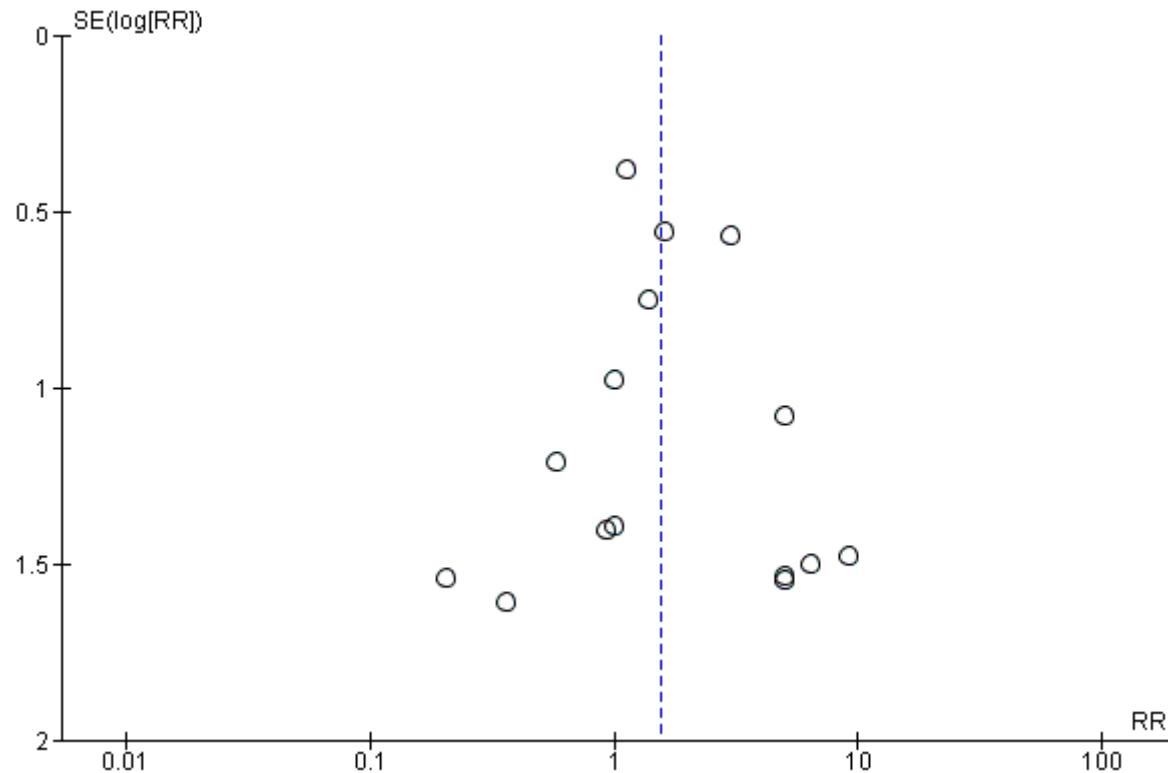
Funnel plot of comparison: 1 naltrexon versus placebo for alcohol dependence, outcome: 1.6 Drinks per drinking day 3 month after baseline.

Figure 15 (Analysis 1.46)



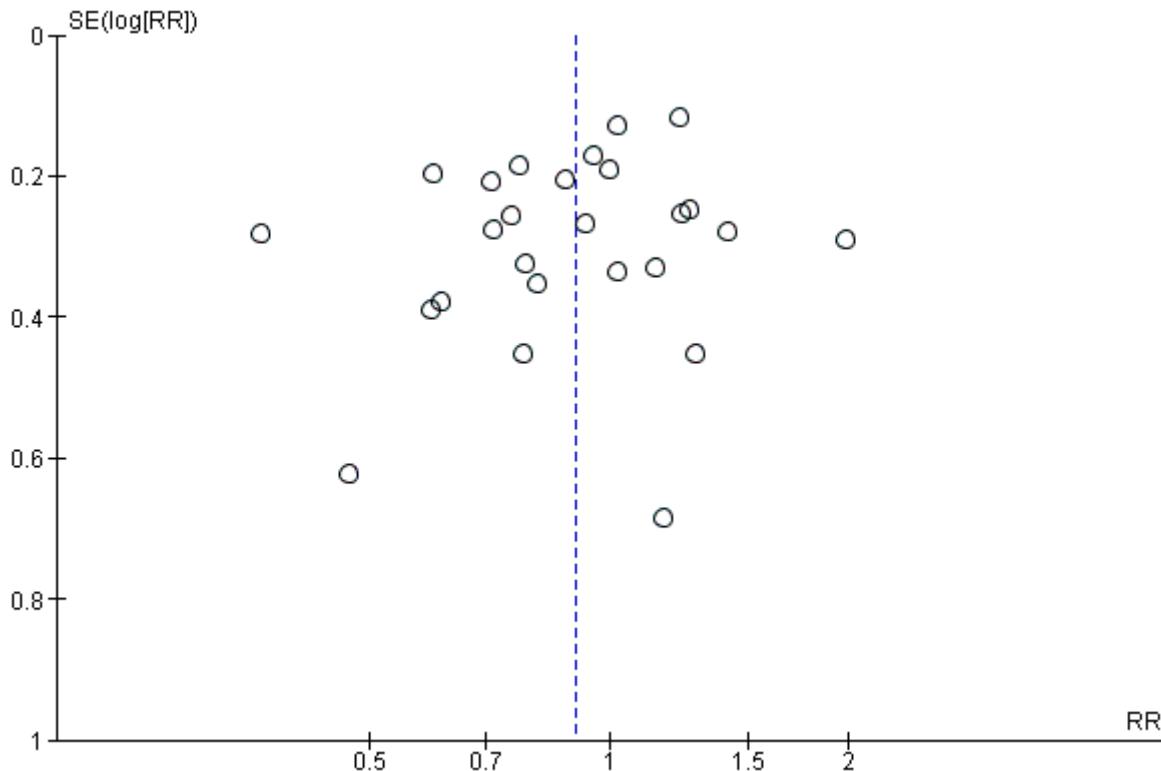
Funnel plot of comparison: 1 naltrexon versus placebo for alcohol dependence, outcome: 1.46 Side effect: Nausea.

Figure 16 (Analysis 1.55)



Funnel plot of comparison: 1 naltrexon versus placebo for alcohol dependence, outcome: 1.55 Drop-outs due to adverse events.

Figure 17 (Analysis 1.57)



Funnel plot of comparison: 1 naltrexon versus placebo for alcohol dependence, outcome: 1.57 Drop-outs.

Figure 18

on (selection bias)
action bias)
personnel (performance bias)
ment (detection bias)
trition bias)
bias)

	Random sequence generation	Allocation concealment (selection)	Blinding of participants and personnel	Blinding of outcome assessment	Incomplete outcome data (all outcomes)	Selective reporting (reporting of study outcomes)	Other bias
Ahmadi 2002							
Anton 1999							
Anton 2005							
Anton 2006							
Balldin 2003							
BALTIERI 2008							
Baltieri 2008							
Chick 2000							
Garbutt 2016	?	+	+	?	+	+	+
Gastpar 2002							
Guardia 2002							
Heinälä 2001							
Huang 2005							
Kiefer 2003							
Killeen 2004							
Kranzler 2000							

Krystal 2001						
Latt 2002						
Lee 2001						
Mann 2013	?	?	+	?	+	+
Monti 2001						
Morley 2006						
Morris 2001						
O'Malley 1992						
O'Malley 2008						
Oslin 1997						
Oslin 2008						
Volpicelli 1992						
Volpicelli 1997						

Risk of bias summary: review authors' judgements about each risk of bias item for each included study.

Sources of support

Internal sources

- No sources of support provided

External sources

- No sources of support provided