

Evidensprofil

Arena flexibel treatment compared to ordinary inpatient/outpatient treatment for substance problems among children and adolescents

Patient or population: patients with substance problems among children and adolescents

Settings: after-care following residential treatment¹

Intervention: arena flexibel treatment²

Comparison: ordinary inpatient/outpatient treatment³

Outcomes	Illustrative comparative risks* (95% CI)		Relative effect (95% CI)	No of Participants (studies)	Quality of the evidence (GRADE)	Comments
	Assumed risk	Corresponding risk				
	Ordinary inpatient/outpatient treatment	Arena flexibel treatment				
abstinence from any use of alcohol and other drugs - 3 months (Godley 2006) Follow-up: 3 months ⁴	Study population		RR 1.34 (0.87 to 2.07) ⁵	176 (1 study)	⊕⊕⊕⊖ moderate ^{6,7}	
	282 per 1000	378 per 1000 (245 to 584)				
	Moderate					
abstinence from any use of alcohol and other drugs - 9 months (Godley 2006) Follow-up: 9 months ⁴	Study population		RR 1.49 (0.86 to 2.58) ⁵	176 (1 study)	⊕⊕⊕⊖ moderate ⁷	
	192 per 1000	287 per 1000 (165 to 496)				
	Moderate					

*The basis for the **assumed risk** (e.g. the median control group risk across studies) is provided in footnotes. The **corresponding risk** (and its 95% confidence interval) is based on the assumed risk in the comparison group and the **relative effect** of the intervention (and its 95% CI).

CI: Confidence interval; RR: Risk ratio;

GRADE Working Group grades of evidence

High quality: Further research is very unlikely to change our confidence in the estimate of effect.

Moderate quality: Further research is likely to have an important impact on our confidence in the estimate of effect and may change the estimate.

Low quality: Further research is very likely to have an important impact on our confidence in the estimate of effect and is likely to change the estimate.

Very low quality: We are very uncertain about the estimate.

¹ Studien er fra USA, deltakerne er i alderen 12-17 år.

² Ambulant tilbud som oppfølging etter døgnbehandling.

³ Ordinær poliklinisk behandling

⁴ Deltakerne ble testet 3, 6 og 9 mnd underveis i intervensjonen, dvs etter utskriving fra døgnbehandling.

⁵ Konfidensintervallet er regnet ut i grade-prosessen.

⁶ Randomiseringen er tilfredsstillende beskrevet. Lavt frafall (manglende oppfølgingsdata for 4% ved 3 mnd og 6% ved 9 mnd).

⁷ Lav statistisk styrke pga relativt lav N.