TITLE: The Screening, Brief Intervention, Referral to Treatment (SBIRT) Model for Relapse Prevention and Relapse of Addictive Behaviours: Clinical Effectiveness and Guidelines

DATE: 16 December 2015

RESEARCH QUESTIONS

1. What is the clinical effectiveness of the Screening, Brief Intervention, Referral to Treatment (SBIRT) model for relapse and relapse prevention of addictive behaviours?

2. What are the evidence-based guidelines regarding the use of the Screening, Brief Intervention, Referral to Treatment (SBIRT) model for relapse and relapse prevention of addictive behaviours?

3. What are the evidence-based guidelines regarding optimal treatment for relapse prevention of addictive behaviours?

KEY FINDINGS

No relevant literature was identified regarding Screening, Brief Intervention, Referral to Treatment (SBIRT) model for relapse prevention and relapse of addictive behaviours.

METHODS

A limited literature search was conducted on key resources including PubMed, The Cochrane Library, University of York Centre for Reviews and Dissemination (CRD) databases, ECRI, Canadian and major international health technology agencies, as well as a focused Internet search. Filters were applied to limit the retrieval to health technology assessments, systematic reviews, and meta-analyses, randomized controlled trials, non-randomized studies, and guidelines. For Question #3, the filters were limited to health technology assessments, systematic reviews, meta-analyses and guidelines. Where possible, retrieval was limited to the human population. The search was also limited to English language documents published between January 1, 2010 and December 3, 2015. Internet links were provided, where available.
SELECTION CRITERIA

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

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<th>Table 1: Selection Criteria</th>
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<td><strong>Population</strong></td>
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| **Intervention** | Q1 and Q2 - Screening, Brief Intervention, Referral to Treatment (SBIRT) model for ensuring entrance into treatment  
Q3 - Any evidence based treatment for relapse and relapse prevention of addictive behaviours |
| **Comparator** | Any comparator or no comparator |
| **Outcomes** | Q1 - Evidence that SBIRT can be used for relapse or relapse prevention  
Q2 - Guidelines for the use of SBIRT in patients with addictive behaviour relapses or who are concerned they will be relapsing  
Q3 - Guidelines regarding the optimal evidence based treatment or use of evidence based treatments for patients with addictive behaviour relapses or who are concerned that they will be relapsing? |
| **Study Designs** | Health technology assessments, systematic reviews, meta-analyses, 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, systematic reviews, and meta-analyses are presented first. These are followed by randomized controlled trials, non-randomized studies, and evidence-based guidelines.

No relevant health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, non-randomized studies, or evidence-based guidelines were identified regarding screening, brief intervention, referral to treatment (SBIRT) model for relapse prevention and relapse of addictive behaviours.

References of potential interest are provided in the appendix.

OVERALL SUMMARY OF FINDINGS

No relevant literature was found regarding Screening, Brief intervention, Referral to Treatment (SBIRT) model for relapse prevention and relapse of addictive behaviours; 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.

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APPENDIX – FURTHER INFORMATION:

Additional References

