

Data supplement

Table DS1 Characteristics of the studies included in this meta-analysis

Study	Sample	Method	Measures	Intervention	Outcome data time points
Burgener <i>et al</i> ³³	<i>n</i> = 43 (a) Confirmed diagnosis of dementia (b) CDR <2.0 <i>Baseline anxiety and depression</i> Not reported	RCT <i>Control group</i> Attention-control educational programme	<i>Patient outcomes</i> (a) Depression GDS (b) Cognition MMSE	<i>Type</i> Multimodal CBT including Tai Chi, CBT and support group <i>Duration</i> 20 weeks (note that intervention lasted 40 weeks) <i>Intensity/frequency</i> Tai Chi – 3 times a week (60 minutes) CBT – twice a week (90 minutes) Support group – twice a week (90 minutes, alternating with CBT)	Outcome data included in the review 20 weeks
Burns <i>et al</i> ³⁴	<i>n</i> = 40 <i>Inclusion criteria</i> (a) Diagnosis of Alzheimer's disease-NCDS-ADRD criteria (b) CDR of 1 (c) MMSE \geq 15 (d) Living in own home with caregiver (e) Ability to communicate <i>Baseline anxiety and depression</i> Baseline CSDD, mean (s.d.) intervention group: 5.9 (2.6) Control group: 5.1 (2.8)	RCT <i>Control group</i> Standard treatment in Alzheimer's disease (general advice on diagnosis and treatment of dementia, with out-patient review)	<i>Patient outcomes</i> (a) Depression CSDD (b) Function BADLS (c) Cognition MMSE	<i>Type</i> Psychodynamic interpersonal therapy based on interpersonal theory <i>Duration</i> 6 weeks <i>Intensity/frequency</i> Once a week (50 minutes – of which 10 minutes were spent with caregiver)	Outcome data included in the review 6 weeks
Spector <i>et al</i> ³⁵	<i>n</i> = 50 <i>Inclusion criteria</i> (a) Diagnosis of DSM-IV criteria for mild to moderate dementia (b) CDR of 0.5, 1 or 2 (c) Clinical anxiety (\geq 11 on RAID) (d) Living in the community (e) Ability to communicate <i>Baseline anxiety and depression</i> Baseline CSDD Overall, mean (s.d.) 15.9 (6.2) Baseline RAID Overall, mean (s.d.) 19.7 (6.0)	RCT <i>Control group</i> Standard treatment (medication or no treatment)	<i>Patient outcomes</i> (a) Depression CSDD (b) Anxiety RAID (c) Quality of life QOL-AD (d) Neuropsychiatric symptoms NPI (e) Cognition MMSE <i>Carer outcomes</i> Depression HADS	<i>Type</i> CBT targeting anxiety <i>Duration</i> 15 weeks <i>Intensity/frequency</i> 10 sessions (60 minutes) and telephone contact	Outcome data included in the review 15 weeks

(continued)

Table D51 Characteristics of the studies included in this meta-analysis (continued)

Study	Sample	Method	Measures	Intervention	Outcome data time points
Stanley <i>et al</i> ³⁶	<p><i>n</i> = 32</p> <p><i>Inclusion criteria</i></p> <p>(a) Diagnosis of dementia</p> <p>(b) AN NPI-A ≥ 4</p> <p>(c) CDR score of 0.5–2.0</p> <p><i>Baseline anxiety and depression</i></p> <p>Baseline NPI-A, total mean (s.d.)</p> <p>Intervention group: 4.8 (4.16)</p> <p>Control group: 4.6 (3.11)</p> <p>Baseline RAID, mean (s.d.)</p> <p>Intervention group: 13.9 (6.90)</p> <p>Control group: 16.2 (8.24)</p> <p>Baseline GAI, mean (s.d.)</p> <p>Intervention group: 5.0 (5.07)</p> <p>Control group: 6.7 (6.10)</p> <p>Baseline GDS, mean (s.d.)</p> <p>Intervention group: 9.4 (7.19)</p> <p>Control group: 10.7 (6.46)</p>	<p>RCT</p> <p><i>Control group</i></p> <p>Receives diagnostic feedback</p>	<p><i>Patient outcomes</i></p> <p>(a) Depression</p> <p>GDS</p> <p>(b) Anxiety</p> <p>RAID</p> <p>NPI-A</p> <p>GAI</p> <p>(c) Quality of life</p> <p>QOL-AD</p> <p><i>Caregiver outcomes</i></p> <p>(a) Depression</p> <p>PHQ-9</p>	<p><i>Type</i></p> <p>CBT targeting anxiety</p> <p><i>Duration</i></p> <p>6 months</p> <p><i>Intensity/frequency</i></p> <p>12 weekly sessions (30–60 minutes) for 3 months, and 8 telephone appointments for months 3–6</p>	<p>Outcome data included in the review</p> <p>6 months</p>
Tappen & Williams ³⁷	<p><i>n</i> = 32</p> <p><i>Inclusion criteria</i></p> <p>(a) Diagnosis of probable Alzheimer's disease, NINCDS-ADRDA criteria</p> <p>(b) MMSE ≤ 25</p> <p>(c) Ability to communicate</p> <p><i>Baseline anxiety and depression</i></p> <p>Baseline MADRS, mean (s.d.)</p> <p>Intervention group: 19.60 (8.81)</p> <p>Control group: 15.14 (9.55)</p>	<p>RCT</p> <p><i>Control group</i></p> <p>Usual care (not an attention-control group)</p>	<p><i>Patient outcomes</i></p> <p>(a) Depression</p> <p>MADRS</p>	<p><i>Type</i></p> <p>Individual modified counselling consisting of therapeutic conversation</p> <p><i>Duration</i></p> <p>16 weeks</p> <p><i>Intensity/frequency</i></p> <p>3 times a week (30 minutes)</p>	<p>Outcome data included in the review</p> <p>16 weeks</p>
Waldorff <i>et al</i> ³⁸	<p><i>n</i> = 330</p> <p><i>Inclusion criteria</i></p> <p>(a) Diagnosis of probable Alzheimer's disease, or mixed Alzheimer's disease or DLB, meeting DSM-IV, or NINCDS-ADRDA criteria⁴⁴</p> <p>(b) Community dwelling, age ≥ 50 years</p> <p>(c) MMSE ≥ 20</p> <p><i>Baseline anxiety and depression</i></p> <p>Baseline CSDD, mean (s.d.)</p> <p>Intervention group: 5.17 (4.8)</p> <p>Control group: 4.41 (4.0)</p>	<p>RCT</p> <p><i>Control group</i></p> <p>Provided with overall information and guidance, directed towards local support programmes (provided to both control and treatment group)</p>	<p><i>Patient Outcomes</i></p> <p>(a) Depression</p> <p>CSDD</p> <p>(b) Quality of life</p> <p>QOL-AD</p> <p>(c) Function</p> <p>ADSC-ADL</p> <p>(d) Neuropsychiatric symptoms</p> <p>NPI</p> <p>(e) Cognition</p> <p>MMSE</p> <p><i>Caregiver outcomes</i></p> <p>(a) Depression</p> <p>GDS</p>	<p><i>Type</i></p> <p>Multifaceted, semi-tailored intervention consisting of counselling sessions, teaching, education and outreach telephone support</p> <p><i>Duration</i></p> <p>8–12 months</p> <p><i>Intensity/frequency</i></p> <p>6 counselling sessions (plus one optional)</p> <p>5 educational courses (2 hours)</p> <p>5–8 telephone support calls within 3–4 week intervals</p>	<p>Outcome data included in the review</p> <p>12 months</p>

CDR, Clinical Dementia Rating; RCT, randomised controlled trial; GDS, Geriatric Depression Scale; MMSE, Mini Mental State Examination; CBT, cognitive-behavioural therapy; NINCDS, National Institute of Neurological and Communicative Disorders and Stroke; ADRDA, Alzheimer's Disease and Related Disorders Association; CSDD, Cornell Scale for Depression in Dementia; BADLS, Bristol Activities of Daily Living Scale; QOL-AD, Quality of Life in Alzheimer's Disease; NPI, Neuropsychiatric inventory; NPI-A, Neuropsychiatric inventory-Anxiety; HADS, Hospital Anxiety and Depression Scale; GAI, Geriatric Anxiety Inventory; PHQ-9, Patient Health Questionnaire-9; MADRS, Montgomery-Åsberg Depression Rating Scale; DLB, dementia with Lewy bodies; ADSC-ADL, Alzheimer's Disease Cooperative Study – Activities of Daily Living inventory.

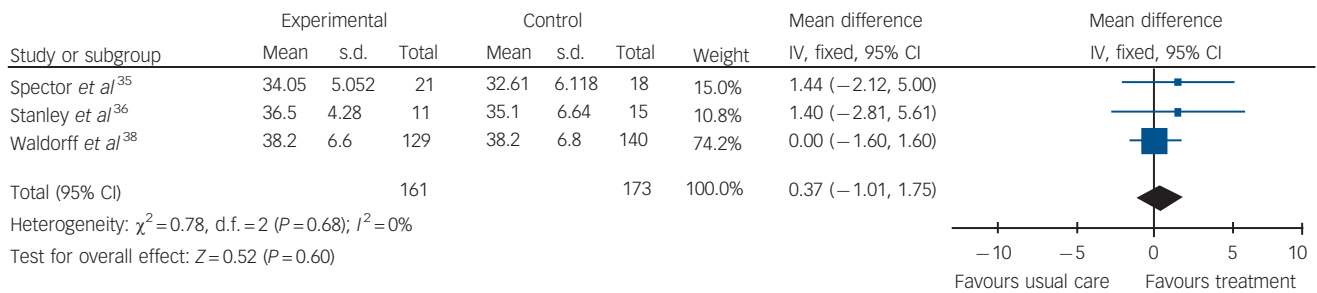


Fig. DS1 Forest plot of psychological treatment versus treatment as usual. Outcome: 2.1 Quality of life (self-ratings).

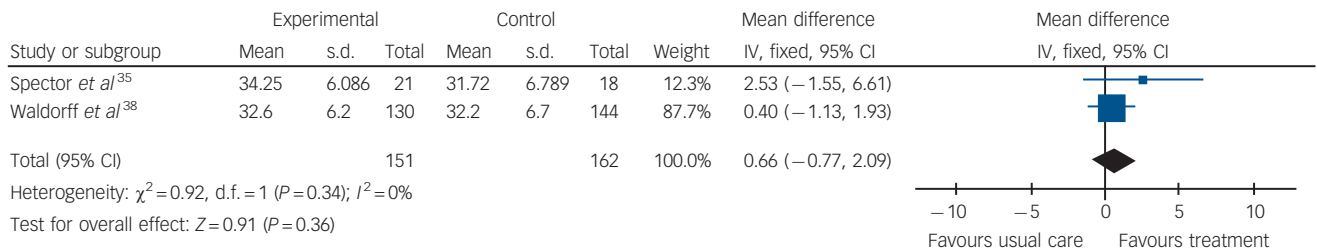


Fig. DS2 Forest plot of psychological treatment versus treatment as usual. Outcome: 2.2 Quality of life (proxy ratings).

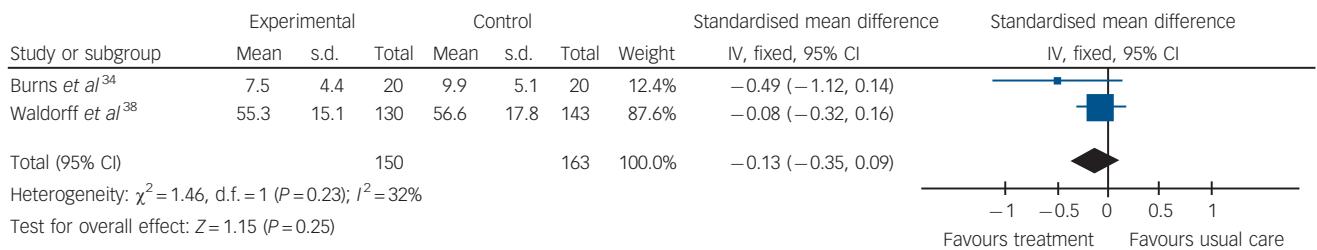


Fig. DS3 Forest plot of psychological treatment versus treatment as usual. Outcome: 2.3 Activities of daily living.

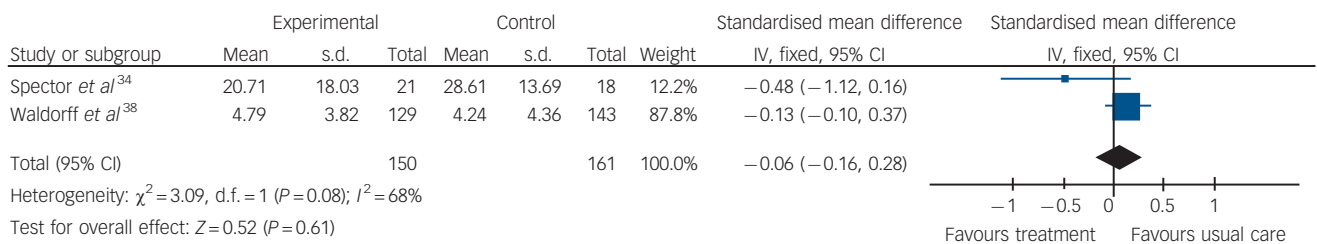


Fig. DS4 Forest plot of psychological treatment versus treatment as usual. Outcome: 2.4 Neuropsychiatric symptoms.

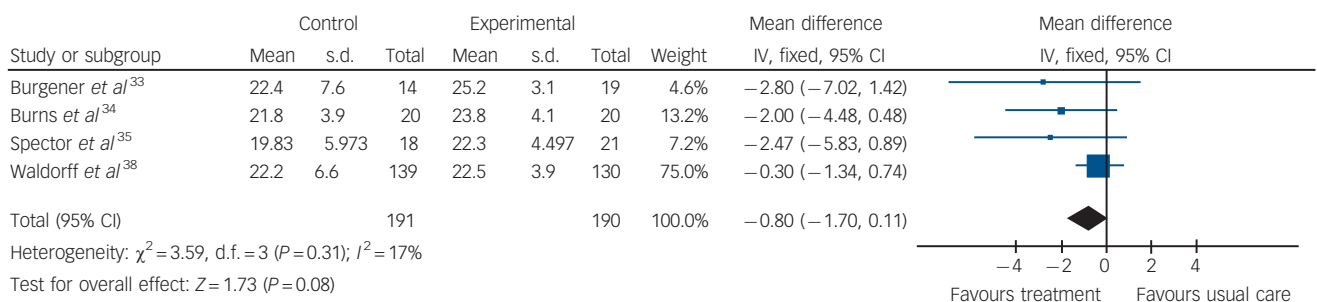


Fig. DS5 Forest plot of psychological treatment versus treatment as usual. Outcome: 2.5 Cognition (Mini Mental State Examination).

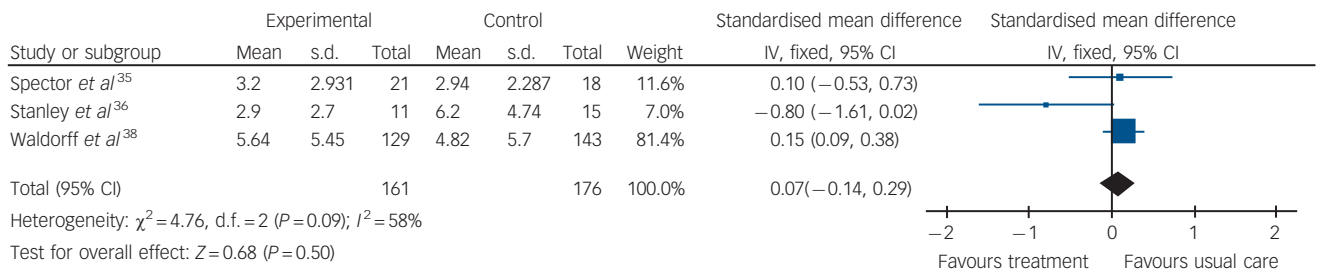


Fig. DS6 Forest plot of psychological treatment versus treatment as usual. Outcome: 3.1 Caregiver depression.

Additional reference

44 McKeith IG, Galasko D, Kosaka K, Perry EK, Dickson DW, Hansen LA, et al. Consensus guidelines for the clinical and pathologic diagnosis of dementia with Lewy bodies (DLB): report of the Consortium on DLB International Workshop. *Neurology* 1996; **47**: 113–24.