

G.10.1.2 Antidepressants for other non-cognitive symptoms

SSRIs vs placebo

Number of RCTs	Risk of bias	Inconsistency	Indirectness	Imprecision	Sample size	Effect size (95% CI)	Quality
Cohen-Mansfield Agitation Inventory – lower scores favour SSRIs							
3 (Seitz systematic review, Porsteinsson 2014)	Serious ¹	Serious ²	Not serious	Not serious	419	MD -1.27 (-2.50, -0.03)	Low
NPI – lower scores favour SSRIs							
2 (Finkel 2004, Porsteinsson 2014)	Serious ¹	Serious ²	Not serious	Serious ³	409	MD -1.99 (-9.66, 5.68)	Very low
BEHAVE-AD – lower scores favour SSRIs							

Number of RCTs	Risk of bias	Inconsistency	Indirectness	Imprecision	Sample size	Effect size (95% CI)	Quality
1 (Finkel 2004)	Serious ¹	N/A	Not serious	Serious ³	240	MD -0.70 (-1.95, 0.55)	Low
Neurobehavioral Rating Scale – lower scores favour SSRIs							
2 (Pollock 2002, Porsteinsson 2014)	Serious ¹	Serious ²	Not serious	Serious ³	219	MD -2.82 (-8.76, 3.13)	Very low
Withdrawal due to adverse events – lower scores favour SSRIs							
4 (Seitz systematic review)	Serious ¹	Not serious	Not serious	Very serious ⁴	399	RR 1.15 (0.67, 1.99)	Very low
<ol style="list-style-type: none"> 1. Lack of information on allocation concealment and blinding. 2. i^2 value > 40%. 3. Non-significant result. 4. 95% CI crosses two lines of a defined MID interval 							

SSRIs vs atypical antipsychotics

Number of RCTs	Risk of bias	Inconsistency	Indirectness	Imprecision	Sample size	Effect size (95% CI)	Quality
Neurobehavioral Rating Scale – lower scores favour SSRIs							
1 (Pollock 2007)	Not serious	N/A	Not serious	Serious ¹	103	MD -0.53 (-2.37, 1.31)	Moderate
Neurobehavioral Rating Scale (psychosis subscale) – lower scores favour SSRIs							
1 (Pollock 2007)	Not serious	N/A	Not serious	Serious ¹	103	MD 0.26 (-1.51, 2.03)	Moderate
Withdrawal due to adverse events – lower scores favour SSRIs							
1 (Pollock 2007)	Not serious	N/A	Not serious	Very serious ²	103	RR 0.42 (0.14, 1.28)	Low
<ol style="list-style-type: none"> 1. Non-significant result. 2. 95% CI crosses two lines of a defined MID interval 							

SSRIs vs typical antipsychotics

Number of RCTs	Risk of bias	Inconsistency	Indirectness	Imprecision	Sample size	Effect size (95% CI)	Quality
Cohen-Mansfield Agitation Inventory – lower scores favour SSRIs							
2 (Seitz systematic review)	Serious ¹	Not serious	Not serious	Serious ²	33	MD 4.66 (-3.58, 12.90)	Low

Number of RCTs	Risk of bias	Inconsistency	Indirectness	Imprecision	Sample size	Effect size (95% CI)	Quality
Neurobehavioral Rating Scale – lower scores favour SSRIs							
1 (Pollock 2002)	Serious ¹	N/A	Not serious	Serious ²	64	MD -2.80 (-10.34, 4.74)	Low
Withdrawal due to adverse events – lower scores favour SSRIs							
1 (Auchus 1997)	Serious ¹	N/A	Not serious	Very serious ³	10	RR 0.20 (0.01, 3.35)	Very low
<ol style="list-style-type: none"> Lack of information on allocation concealment and blinding. Non-significant result. 95% CI crosses two lines of a defined MID interval 							

Trazodone vs placebo

Number of RCTs	Risk of bias	Inconsistency	Indirectness	Imprecision	Sample size	Effect size (95% CI)	Quality
Cohen-Mansfield Agitation Inventory – lower scores favour trazodone							
1 (Teri 2000)	Serious ¹	N/A	Not serious	Serious ²	73	MD 5.18 (-2.86, 13.22)	Low
<ol style="list-style-type: none"> Lack of information on allocation concealment and blinding. Non-significant result. 							

Trazodone vs typical antipsychotics

Number of RCTs	Risk of bias	Inconsistency	Indirectness	Imprecision	Sample size	Effect size (95% CI)	Quality
Cohen-Mansfield Agitation Inventory – lower scores favour trazodone							
2 (Seitz systematic review)	Serious ¹	Not serious	Not serious	Serious ²	99	MD 3.28 (-3.28, 9.85)	Low
<ol style="list-style-type: none"> Lack of information on allocation concealment and blinding. Non-significant result. 							