

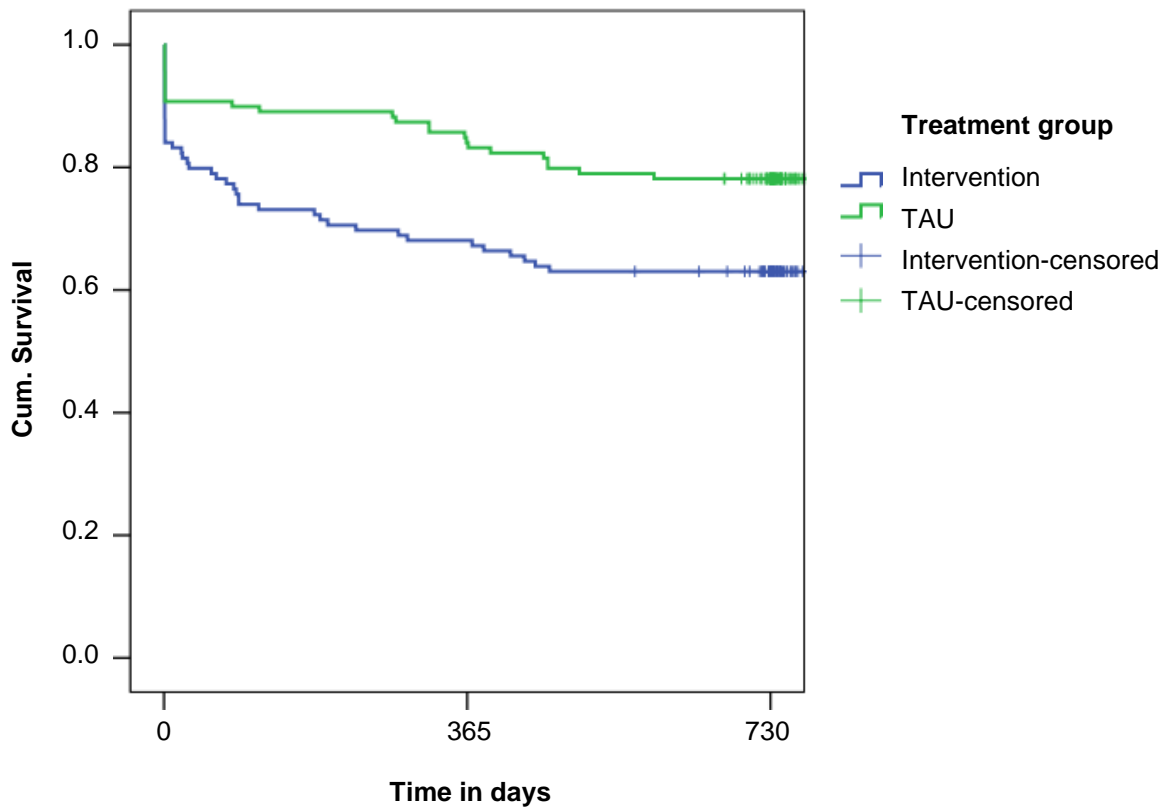
Supplementary material

Outcomes of a psycho-education and monitoring programme to prevent compulsory admission to psychiatric inpatient care: a randomised controlled trial

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Comparison of patients who completed the programme to those who dropped out

During the 24-month programme we lost more patients in the intervention group (44; 37.0%) than in the TAU group (26; 21.8% of the baseline sample). Premature termination of participation happened particularly at the very beginning of the study: e.g., 21 patients assigned to the intervention group already dropped out during baseline assessment, before the intervention started. The majority of patients who did not remain in the study up to t2, dropped out already during the first three months (Figure S1).



Supplementary Figure S1. *Survival functions for treatment groups*

To further analyse the potential bias due to dropout, we compared baseline characteristics of participants who completed the programme to those of dropouts. Results suggest that, at the bivariate level, risk of dropout is associated with treatment group, socio-demographic factors (age, nationality, living situation, occupational status) and length of illness, whereas other variables of the psychiatric patient's history and type of disorder were not found to be significantly associated with dropout risk (Table S1).

Using these baseline variables simultaneously in a model, the Cox regression identified four significant predictors. According to this regression model, the risk to leave the study prematurely was significantly increased in patients participating in the intervention group, and higher in patients at a younger age, of foreign nationality and with a high number of compulsory psychiatric admission in the past.

Supplementary Table S1. *Predictors of dropout during 24 months of preventive monitoring (Cox regression analyses)*

Predictor variable (baseline data)	Single covariates			Model Forward selected covariates		
	HR	95% CI	P value	HR	95% CI	P value
Intervention (vs. TAU)	1.90	(1.17 – 3.08)	.010	2.16	(1.31 – 3.56)	.003
Age ^a	0.63	(0.51 – 0.77)	<.001	0.64	(0.52 – 0.79)	<.001
Foreign national (vs. Swiss)	1.91	(1.14 – 3.20)	.015	2.12	(1.23 – 3.67)	.007
Compulsory psychiatric admissions prior to intervention ^b	1.56	(1.06 – 2.28)	.022	1.65	(1.13 – 2.41)	.009
Length of illness ^a	0.75	(0.61 – 0.93)	.010			
Living situation: Alone vs.			.017			
With child(ren)	1.17	(0.45 – 3.02)	.753			
With partner	0.69	(0.33 – 1.46)	.331			
With others / unknown	1.96	(1.16 – 3.30)	.012			
Occupation: Unemployed / homemaker vs.			.039			
Sheltered employment	0.26	(0.06 – 1.07)	.062			
Regular labor market	0.54	(0.28 – 1.03)	.061			
Sex: male (vs. female)	1.17	(0.73 – 1.87)	.510			
Compulsory admission: danger to others (vs. to self)	1.01	(0.60 – 1.70)	.965			
ICD-10 Diagnosis: Other diagnoses vs.			.292			
Psychotic disorders (F2; F30-31)	0.81	(0.48 – 1.38)	.440			
Personality disorders (F6)	1.38	(0.74 – 2.58)	.313			

Note. HR = hazard rate; CI = confidence interval

TAU = Treatment as usual

^a Age, length of illness in units of 10 years

^b N of compulsory admissions log-transformed

Final model statistics: Global $\chi^2 = 39.95$; $df = 4$; $P < 0.001$