# SUPPLEMENTS

*Revised Statistics – MANOVA*

Using a multivariate analysis of variance (MANOVA) as statistical approach interactions between the groups of treatment (CLO–group/ DIA–group) and the days of medication respectively the mean AESB scores (on days 1, 2, 3) were examined. Using Pillai’s trace, there was a significant effect of the type of medication on both the duration of medication and the mean AESB scores on day 1 (V = 0.07, F(2.15) = 5.38, p < 0.01) as well as on the duration of medication and the AESB scores on day 2 (V = 0.07, F(2.13) = 3.01, p < 0.01). The effect on the days of medication and the AESB scores on day 3 did just not reach statistical significance (V = 0.06, F(2.9) = 3.01, p = 0.054).

This result supports our primary findings concerning the significant difference in the duration of medication. Moreover, it is especially interesting as the absolute difference in the mean AESB scores on day 1 and 2 between both groups (see Figure 1) was so far not reflected significantly in the statistical analysis. Hence, it may highlight our hypothesis, that with a greater sample size, the absolute symptom level might be significantly reflected also in the previously used statistical methods.

*AESB (Alkoholentzugssymptom–Bogen/Alcohol Withdrawal Symptom Score)*

**Time intervals**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Day 0 – 3** | **Day 4** | **Day 5** | **Day 6** | **Day 7** | **Day 8** |
|  | every |  |  |  |  |
| 2 hrs | 3 hrs | 4 hrs | 6 hrs | 8 a.m., 4 p.m, 10 p.m. | 8 a.m., 10 p.m. |

**Blood pressure in mmHg** (after 1 minute in lying position)

|  |  |  |  |
| --- | --- | --- | --- |
|  | *< 31 years* | *31–50 years* | *> 50 years* |
| 0 | ≤ 120/80 | ≤ 130/85 | ≤ 140/90 |
| 1 | ≤ 135/90 | ≤ 145/95 | ≤ 155/100 |
| 2 | ≤ 150/95 | ≤ 160/100 | ≤ 170/105 |
| 3 | ≤ 160/100 | ≤ 170/105 | ≤ 180/110 |
| 4 | > 160/100 | > 170/105 | > 180/110 |

**Resting heart rate** (after 1 minute in lying position)

|  |  |
| --- | --- |
| 0 | < 92/min. |
| 1 | 92 – 103/min. |
| 2 | 104 – 115/min. |
| 3 | 116 – 127/min. |
| 4 | ≥ 128/min. |

**Tremor**

|  |  |
| --- | --- |
| 0 | no tremor |
| 1 | finger tremor (fingers extended) |
| 2 | hand tremor (arms extended) |
| 3 | resting tremor of fingers and hands |
| 4 | severe resting tremor of arms, legs and body |

**Sweating**

|  |  |
| --- | --- |
| 0 | no sweating |
| 1 | warm, clammy skin |
| 2 | isolated beads of sweat (face, body) |
| 3 | clammy body and/or visible sweating in large parts of the body |
| 4 | massive sweating (soaked clothes or bed linen) |

**Nausea/ Vomiting**

|  |  |
| --- | --- |
| 0 | no nausea |
| 1 | mild to moderate nausea |
| 2 | severe nausea, retching, vomiting |

**Anxiety/ Nervousness** (stated by the patient)

|  |  |
| --- | --- |
| 0 | no anxiety/ nervousness |
| 1 | mild anxiety/ nervousness or patient complaints only on inquiry |
| 2 | moderate anxiety/ nervousness or patient complaints spontaneously |
| 3 | severe anxiety/ nervousness |
| 4 | massive anxiety state with panic |

**Akathisia** (visible and observable by the examiner)

|  |  |
| --- | --- |
| 0 | calm, normal movement |
| 1 | fidgety movement, mild restlessness or jumpiness |
| 2 | moderate, isolated restlessness (e.g. nervous hand movements) |
| 3 | permanent general restlessness (e.g. permanent turning in bed, running around) |
| 4 | massive restlessness, endangerment of patient or others, need for immobilization |

**Orientation**

|  |  |
| --- | --- |
| 0 | orientated to time, place, person |
| 1 | orientated to place and person, not completely oriented to time (disorientation to maximum two calendar or week days) |
| 2 | orientated to place and person, not orientated to time |
| 3 | orientated to person, not completely orientated to place or situation (to current city or residence), not orientated to time |
| 4 | orientated to person, not orientated to place and time |
| 5 | not orientated to time, place, person; no reasonable contact possible |

**Perception disorder/ hallucination**

(visual hallucinations e.g. perception of not existing objects, persons or animals like bugs or white mice; feeling of “being in a movie”; scene–like episodes; auditory hallucinations e.g. affronting voices; tactile hallucinations)

|  |  |
| --- | --- |
| 0 | no perception disorders/ hallucinations |
| 1 | intensified perception (intrusive sensory perception e.g. light is brighter, sounds are louder) |
| 2 | temporary misperception (e.g. shadows, shapes), patient is corrigible and realizes his misapprehension |
| 3 | temporary explicit hallucinations and misperception of persons |
| 4 | long–lasting explicit hallucinations and misperception of persons, no realization of misapprehension, patient is not corrigible |
| 5 | permanent explicit hallucinations with strong emotional affection and commanding character |

**Seizure/ Electroencephalogram (EEG)–results**

\* These reasons may require a reduction of points respectively a downgrading according to the patients current clinical situation in the course of withdrawal.

|  |  |
| --- | --- |
| 0 | no seizures in history/ normal EEG |
| 1 | EEG–abnormalities, no suspicion of increased cerebral excitability (e.g. asymmetry, slow basic rhythm) |
| 2 | EEG–abnormalities, suspicion of increased cerebral excitability (e.g. focal arrhythmia) |
| 3 | seizure or seizure–like episode in history (without association to alcohol withdrawal), pathologic EEG with isolated epileptogenic alterations (e.g. spikes, sharp waves) |
| 4 | One withdrawal seizure in history\*; pathologic EEG with frequent epileptogenic alterations (e.g. spikes, sharp waves) |
| 5 | Two withdrawal seizures in history or seizure within the last 8 days\* |