1.3.44 OCD: psychologically (CBT/IPT)-informed psychoeducation versus TAU or enhanced TAU

	Quality assessment						No of patients		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	OCD: psychologically (CBT/IPT)-informed psychoeducation versus TAU/enhanced TAU	Control	Relative (95% CI)	Absolute		
OCD mean scores post-treatment – available case analysis (follow-up mean 4 weeks; measured with: Yale–Brown Obsessive Compulsive Scale (YBOCS); better indicated by lower values)												
1	randomised trials	no serious risk of bias	no serious inconsistency	no serious indirectness	very serious[1,2]	reporting bias[3]	33	25	-	SMD 0.41 lower (0.94 lower to 0.11 higher)	⊕OOO VERY LOW	
Obsessions mean scores post-treatment – available case analysis (follow-up mean 4 weeks; measured with: Yale–Brown Obsessive Compulsive Scale (YBOCS): Obsessions; better indicated by lower values)												
1	randomised trials	no serious risk of bias	no serious inconsistency	no serious indirectness	very serious[1,2]	reporting bias[3]	33	25	-	SMD 0.39 lower (0.92 lower to 0.13 higher)	⊕OOO VERY LOW	
Compulsions mean scores post-treatment – available case analysis (follow-up mean 4 weeks; measured with: Yale–Brown Obsessive Compulsive Scale (YBOCS): Compulsions; better indicated by lower values)												

1	randomised trials	no serious risk of bias	no serious inconsistency	no serious indirectness	very serious[1,2]	reporting bias[3]	33	25	-	SMD 0.31 lower (0.83 lower to 0.21 higher)	⊕OOO VERY LOW	

OCD mean scores Intermediate follow-up (17-24 weeks post-intervention) – available case analysis (follow-up mean 19 weeks; measured with: Yale–Brown Obsessive Compulsive Scale (YBOCS); better indicated by lower values)

1	randomised trials	no serious risk of bias	no serious inconsistency	no serious indirectness	very serious[1]	reporting bias[3]	31	19	-	SMD 0.71 lower (1.29 to 0.12 lower)	⊕OOO VERY LOW	

Obsessions mean scores Intermediate follow-up (17-24 weeks post-intervention) – available case analysis (follow-up mean 19 weeks; measured with: Yale–Brown Obsessive Compulsive Scale (YBOCS): Obsessions; better indicated by lower values)

1	randomised trials	no serious risk of bias	no serious inconsistency	no serious indirectness	very serious[1]	reporting bias[3]	31	19	-	SMD 0.65 lower (1.24 to 0.07 lower)	⊕OOO VERY LOW	

Compulsions mean scores Intermediate follow-up (17-24 weeks post-intervention) – available case analysis (follow-up mean 19 weeks; measured with: Yale–Brown Obsessive Compulsive Scale (YBOCS): Compulsions; better indicated by lower values)

1	randomised trials	no serious risk of bias	no serious inconsistency	no serious indirectness	very serious[1]	reporting bias[3]	31	19	-	SMD 0.7 lower (1.29 to 0.11 lower)	⊕OOO VERY LOW	

OCD mean scores long follow-up (25-103 weeks post-intervention) – available case analysis (follow-up mean 32 weeks; measured with: Yale–Brown Obsessive Compulsive Scale (YBOCS); better indicated by lower values)

1	randomised trials	no serious risk of bias	no serious inconsistency	no serious indirectness	very serious[1]	reporting bias[3]	29	20	-	SMD 0.76 lower (1.35 to 0.17 lower)	⊕OOO VERY LOW	

Obsessions mean scores long follow-up (25-103 weeks post-intervention) – available case analysis (follow-up mean 32 weeks; measured with: Yale–Brown Obsessive Compulsive Scale (YBOCS): Obsessions; better indicated by lower values)

1	randomised trials	no serious risk of bias	no serious inconsistency	no serious indirectness	very serious[1]	reporting bias[3]	29	20	-	SMD 0.73 lower (1.32 to 0.14 lower)	⊕OOO VERY LOW	

Compulsions mean scores long follow-up (25-103 weeks post-intervention) – available case analysis (follow-up mean 32 weeks; measured with: Yale–Brown Obsessive Compulsive Scale (YBOCS): Compulsions; better indicated by lower values)										
1	randomised trials	no serious risk of bias	no serious inconsistency	no serious indirectness	very serious[1]	none	29	20	-	SMD 0.72 lower (1.31 to 0.13 lower)	⊕⊕OO LOW

[1] Total population size is less than 400 (a threshold rule-of-thumb)

[2] 95% CI crosses both line of no effect and measure of appreciable benefit or harm (SMD – 0.5/0.5 or RR 0.75/1.25)

[3] Paper omits data