

Chapter 3 **Alcoholics Anonymous and other 12-step programmes for alcohol dependence**¹

Review question: Are Alcoholics Anonymous or Twelve Step Facilitation programmes effective with alcohol-dependent patients compared to other psychosocial interventions?

What is known of this topic: Alcoholics Anonymous is an international organisation of recovering alcoholics that offers emotional support through self-help groups and a model of abstinence for people recovering from alcohol dependence, using a 12-step approach. Although it is the most common, Alcoholics Anonymous is not the only 12-step intervention available; there are other 12-step approaches labelled Twelve Step Facilitation.

Summary: The available experimental studies did not demonstrate the effectiveness of Alcoholics Anonymous or other 12-step approaches in reducing alcohol use and achieving abstinence compared with other treatments.

Last assessment date: 19 March 2006

Objectives: To assess the effectiveness of Alcoholics Anonymous (AA) and other Twelve Step Facilitation (TSF) programmes in reducing alcohol intake, achieving abstinence, maintaining abstinence, improving the quality of life of affected people and their families and reducing alcohol-associated accidents and health problems. *Primary outcomes:* Severity of dependence, retention, drop-out, reduction of drinking, abstinence and patients' and relatives' satisfaction.

Study population: Adults older than 18 years with alcohol dependence attending AA or other TSF programmes; studies on patients coerced to participate will be included, and results will be considered separately from those of studies with voluntary participation.

Alcohol and Drug Misuse: A Cochrane Handbook, First Edition. Iosief Abraha and Cristina Cusi.

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Search strategy: Specialized Register of Trials of the Cochrane Group on Drugs and Alcohol, the Cochrane Central Register of Controlled Trials (CENTRAL), MEDLINE, EMBASE, CINAHL (from 1982), PsycINFO (February 2005) and lists of references.

Results: Eight randomised trials with 3417 participants were included.

One small study that combined AA with other interventions concluded that AA may help patients to accept treatment and keep patients in treatment longer than alternative treatments.

Other studies reported similar retention rates regardless of treatment group.

Three studies compared AA, combined with other interventions, against other treatments and found few differences in the amount of drinks and percentage of drinking days. Severity of addiction and drinking consequence did not seem to be differentially influenced by TSF versus comparison treatment interventions.

What this review adds to the current knowledge: Overall, severity of addiction does not seem to be differentially influenced by the interventions from studies included in this review. TSF improved scores in drinking consequences in the same way as other comparison treatments, though regression to the mean cannot be discounted as a factor. There is no conclusive evidence from a number of different studies to show that AA helps patients to accept therapy and keeps patients in therapy any more or less than other interventions. Similarly, there was no evidence that other TSF interventions impacted the number remaining in treatment any more or less than relapse prevention treatment.

Main limitations: Heterogeneity across treatment, condition and outcome measure.

The future: Further large-scale studies comparing just one AA or TSF intervention with a control should be undertaken to test the efficacy of that intervention over longer follow-up periods. Further attention should be devoted to quality of life outcomes for patients and their families, as it is possible that a well-designed qualitative study could identify hypotheses for further research.

Reference

- 1 Ferri M, Amato L, Davoli M. Alcoholics Anonymous and other 12-step programmes for alcohol dependence. Cochrane Database Syst Rev. 2006;3:CD005032. Epub 2006/07/21.