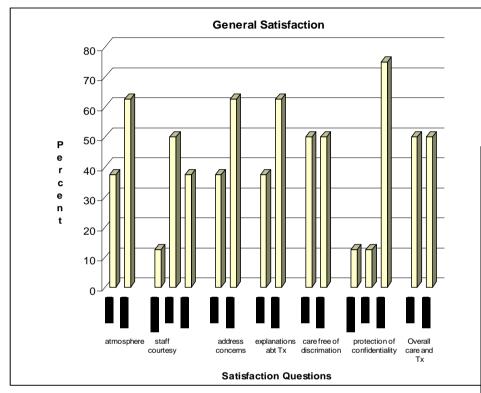
### ONLINE APPENDIX 1: Early Outcomes – Patient Satisfaction Survey (n=8)

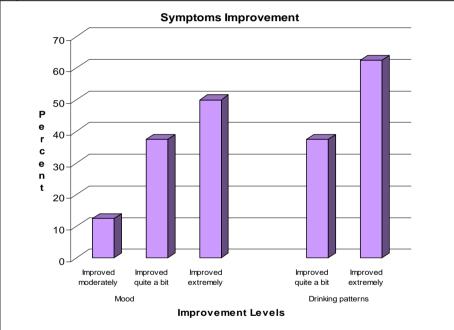


QIDS scores of 15.1 versus 9.3, p<.03

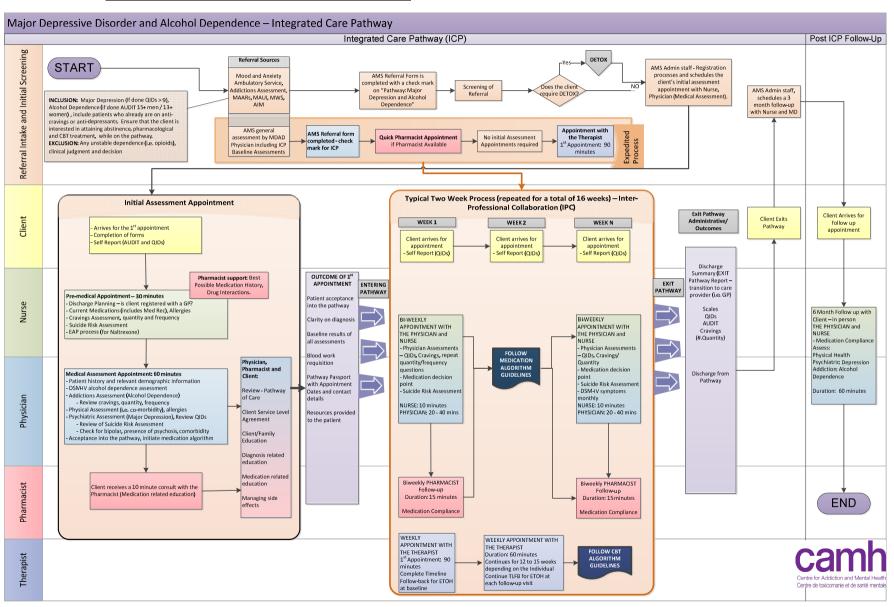
BDI scores of 28.3 versus 16.7, p<.003

Reduction in the % of heavy drinking days from 42% to 23%, p<.04

#### **Preliminary results: Reduction in symptoms**



#### **ONLINE APPENDIX 2: High Level Process Map**



#### **ONLINE APPENDIX 3: Visual of Medication Algorithm**

# Pharmacotherapy for Major Depression and Alcohol Dependence

\*Antidepressants algorithm is adapted from the Texas Medication Algorithm

#### Antidepressant Trials:

Trial A - Sertraline (Fluoxetine, Venlafaxine XR, Mirtazapine -if Sertraline previously tried and failed)

Trial B - Untried drug from Trial A Group

Trial C - Untried drug from Trials A and B Groups

Туре	Medication	Dose	Week I							Week 2						Week 3						Week 4	Week 5	Week 6	Week 7	Week 8 →			
F			Day	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22-28	29-35	36-42	43-49	50 →	Max Dose
	Sertraline	mg AM	25	25	25	25	25	25	25	50	50	50	50	50	50	50	50	50	50	50	50	50	50	neero depending on colerability and				200 mg/day	
Antidepressants	Fluoxetine	mg AM	10	10	10	10	10	10	10	20	20	20	20	20	20	20	20	20	20	20	20	20	20	weeks depending on colerability and				80 mg/day	
Antidep	Venlafaxine XR	mg AM	37.5	37.5	37.5	37.5	37.5	37.5	37.5	75	75	75	75	75	75	75	75	75	75	75	75	75	75	Increase dose by 75 mg every 2-4 weeks depending on tolerability and response 375 mg/day					
	Mirtazapine	mg QHS	15	15	15	15	15	15	15	30	30	30	30	30	30	30	30	30	30	30	30	30	30	Increase dose by 15 mg every 2-4 weeks depending on tolerability an 30 response				60 mg/day	
Anti-craving	Trial I: Naltrexone	mg/day	25	25	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50 mg/day
	Trial 2: Acamprosate	mg TID	333 mg TID	333 mg TID	666 mg TID	666 mg TID	666 mg TID	666 mg TID	666 mg TID	666 mg Til																			
	Trial 3: Topiramate	mg AM															25	25	25	25	25	25	25	50	50	100	100	150	300 mg/day
		mg PM	25	25	25	25	25	25	25	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	100	100	150	150	
		Criteria	for A	nti-C	raving	g Med	dicatio	on Tr	eatm	ent l	Non-	Respo	onde	rs								Crit	eria	for An	ti-Cra	ving M	ledicat	ion Swi	tch
₹	nent non-Responder w			,		1	•	,					•	eriod	of 2	week:	s.				₩.							3 consec	utive visits t level.

## Pharmacotherapy Decision Point Guideline: Adapted from the Texas Medication Algorithm

Tactics and Critical Decision Point and Critical Status Plan for the Treatment of Major Depressive Disorder  STARTING POINT → Week 0 (CDP#1) QIDs ≥ 9 Symptomatic PLAN → Initiate antidepressant medication; adjust dose to lower end of therapeutic dose range or serum level.										
QIDS-C16SCORE	Week 2	AN → Initiate antidepressant med  Week 4	Week 6	Week 9	range or serum level.  Week 12					
QIDS ≤5 (Remission)		Go to follow-up phase.								
QIDS = 6-8 (Partial Response)	Gradually increase dose as tolerated.	Continue current dose.     Consider increasing dose.	Increase/maximize dose.	Increase dose.     Switch to another antidepressant.	Switch to another antidepressant.     Increase dose and reevaluate in 2 weeks.					
QIDS = 6-8 (SEs intolerable)	Continue current dose and address Side Effects (SEs).      Decrease dose and continue for 2 additional weeks.      Switch to another antidepressant	Continue current dose and address SEs. Switch to another antidepressant.	Continue current dose and address SEs.     Switch to another antidepressant.							
QIDS ≥ 9 (Non-response)	Gradually increase dose as tolerated.	Increase dose.     Switch to another antidepressant.	Switch to another	Switch to another	Switch to another					
QIDS ≥ 9 (SEs intolerable)	Decrease dose and continue for 2 additional weeks.     Switch to another antidepressant.	Switch to another antidepressant.	antidepressant.	antidepressant.	antidepressant.					