Mentalization-Based Treatment versus Specialist Treatment as Usual for Borderline Personality

Disorder: Economic Evaluation alongside a Randomized Controlled Trial with 36 Months Follow-Up

SUPPLEMENTARY MATERIAL

Data completeness

The average proportion of available data in the used variables before imputation was 0.86; this average proportion was not significantly different in the MBT-DH than in the S-TAU condition (0.88 vs 0.83, t(81.4)=1.77, p=0.08). Table S1 presents the average proportion of available data over all variables used in the analyses for each time point, separately for MBT-DH and S-TAU. With regards to intervention adherence, MBT-DH was associated with higher treatment adherence rates in BPD patients compared to S-TAU, reflected in significantly higher early drop-out rates in S-TAU (34%) versus MBT-DH (9%) (Laurenssen et al. 2018).
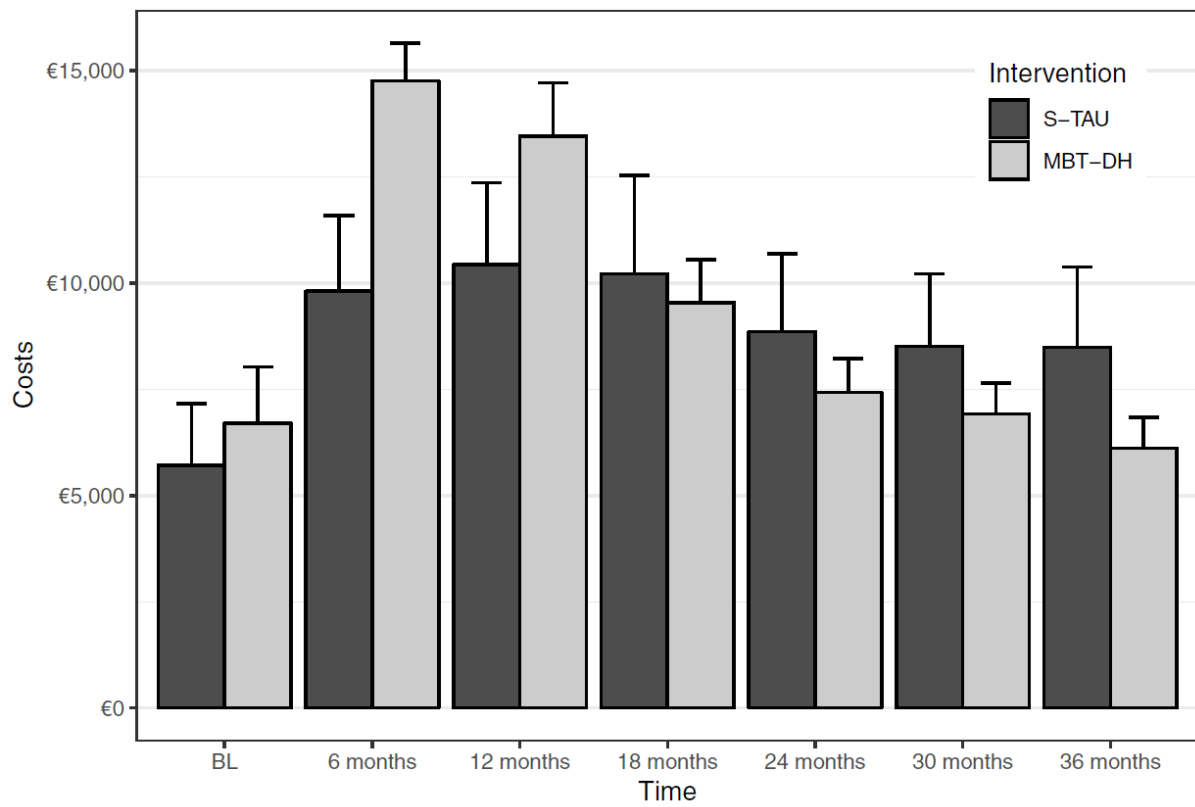
Table S1. Data completeness rate over time in MBT-DH and S-TAU

Time (months)	MBT-DH	S-TAU
Baseline	0.96	0.93
6	0.90	0.86
12	0.89	0.81
18	0.87	0.79
24	0.85	0.81
30	0.82	0.79
36	0.87	0.84
Average	*0.88*	*0.83*

Societal costs of MBT-DH and S-TAU over time

From Figure S1, it can be observed that the societal costs of MBT-DH and S-TAU follow a dissimilar pattern over the 36 month follow-up period. MBT-DH societal costs peak during the first year, when the focal MBT-DH treatment phase is most intensive, and level off during follow-up. The costs associated with S-TAU show less variation over time, based on visual inspection of the data.

Figure S1. Total societal costs from baseline to 36 months

Note. BL = Baseline; MBT-DH = Day Hospital Mentalization-Based Treatment; S-TAU =

Specialist Treatment As Usual.