

Appendix 3. List of excluded studies and reasons for exclusion

References excluded from title and/or abstract
Intervention not pharmacological treatment: 2 <ol style="list-style-type: none">1. Cheema N, Frangou S, McCrone P. Cost-effectiveness of ethyl-eicosapentaenoic acid in the treatment of bipolar disorder. <i>Therapeutic Advances in Psychopharmacology</i> 2013; 3:73-81.2. Meuldijk D, Carlier IV, van Vliet IM, van den Akker-Marle ME, Zitman FG. A randomized controlled trial of the efficacy and cost-effectiveness of a brief intensified cognitive behavioral therapy and/or pharmacotherapy for mood and anxiety disorders: design and methods. <i>Contemporary Clinical Trials</i> 2012; 33(5):983-992.
No specific treatment: 3 <ol style="list-style-type: none">1. Andrews G, Issakidis C, Sanderson K, Corry J, Lapsley H. Utilising survey data to inform public policy: comparison of the cost-effectiveness of treatment of ten mental disorders. <i>British Journal of Psychiatry</i> 2004; 184:526-533.2. Hong J, Reed C, Novick D, Haro JM, Windmeijer F, Knapp M. The cost of relapse for patients with a manic/mixed episode of bipolar disorder in the EMBLEM study. <i>PharmacoEconomics</i> 2010; 28(7):555-566.3. Jiang Y, Ni W. Estimating the impact of adherence to and persistence with atypical antipsychotic therapy on health care costs and risk of hospitalization. <i>Pharmacotherapy</i> 2015; 35(9):813-822.
No economic evaluation: 2 <ol style="list-style-type: none">1. Steffens DC, Krishnan KR.. Decision model for the acute treatment of mania. <i>Depression & Anxiety</i> 1996; 4(6):289-293.2. Sachs GS. Decision tree for the treatment of bipolar disorder. <i>Journal of Clinical Psychiatry</i> 2003; 64(SUPPL. 8):35-40.
Cost analyses (no clinical outcomes): 26 <ol style="list-style-type: none">1 Qiu Y, Christensen DB, Fu AZ, Liu GG. Cost analysis in a Medicaid program for patients with bipolar disorder who initiated atypical antipsychotic monotherapy. <i>Current Medical Research & Opinion</i> 2009; 25(2):351-361.2 Qiu Y, Fu AZ, Liu GG, Christensen DB. Healthcare costs of atypical antipsychotic use for patients with bipolar disorder in a Medicaid programme. <i>Applied Health Economics & Health Policy</i> 2010; 8(3):167-177.3 Brasfield KH. Pilot study of divalproex sodium versus valproic acid: Drug acquisition costs versus all related costs. <i>Current Therapeutic Research - Clinical and Experimental</i> 1999; 60(3):138-144.4 Conney J, Kaston B. Pharmacoeconomic and health outcome comparison of lithium and divalproex in a VA geriatric nursing home population: Influence of drug-related morbidity on total cost of treatment. <i>American Journal of Managed Care</i> 1999; 5(2):197-204.5 Pelletier E, Hassan M, Alemayehu B, Smith D, Kim J. Bipolar disorder healthcare costs for quetiapine extended-release versus aripiprazole. <i>American Journal of Pharmacy Benefits</i> 2013; 5(3).6 Shaya FT, Wang J, Matthew C, Lee S, Levine A, Varghese R. Clinical and economic evaluation of olanzapine-fluoxetine HCl combination in the treatment of bipolar depression: A managed care approach. <i>Journal of Medical Economics</i> 2007; 10(1):67-77.7 Knoth RL, Chen K, Tafesse E. Datapoints: Costs associated with the treatment of patients with bipolar disorder in a managed care organization. <i>Psychiatric Services</i> 2004; 55(12):1353.8 Zhu B, Kulkarni P, Stensland MD, Ascher-Svanum H. Medication patterns and costs associated with olanzapine and other atypical antipsychotics in the treatment of bipolar disorder. <i>Current Medical Research & Opinion</i> 2007; 23(11):2805-2814.

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Efficacy not considered as an outcome: 2

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