

Supplementary Table 2. Characteristics of literatures – randomized controlled trials of Clinical High Risk for Psychosis

| First author year | Country project name | Subject (diagnostic criteria) | Age | No. subjects | Intervention | Comparison | Length (frequency) | F/U period (years) | Outcome |
|---|------------------------|-------------------------------|-------|--------------|---|---------------------------------|---|--------------------|----------------|
| Antipsychotics | | | | | | | | | |
| McGorry 2002 | Australia PACE | UHR (CAARMS) | 14–30 | 59 | RSP+CBT+NBI | SC (NBI) | 6 m | 1 | TTP, GAF, QLS |
| McGlashan 2006 | U.S.A. PRIME | Prodromal Syndrome (SIPS) | 12–45 | 60 | OLZ | PLB | 1 y | 2 | TTP, GAF |
| CBT/CT | | | | | | | | | |
| Morrison 2004 | U.K. EDIE | UHR (CAARMS) | 16–36 | 60 | CT | Monitor | 6 m (-26) | 1 | TTP |
| Morrison 2007 | U.K. EDIE | UHR (CAARMS) | 16–36 | 60 | CT | Monitor | 6 m (-26) | 3 | TTP |
| Morrison 2012 | U.K. EDIE-2 | ARMS (CAARMS) | 14–35 | 288 | CT+AU+Monitor | TAU+Monitor | 6 m (30) | 2 | TTP, GAF |
| van der Gaag 2012 | Netherlands EDIE-NL | UHR (CAARMS) | 14–35 | 201 | CBT+SC | SC | 6 m (-26) | 1.5 | TTP, SOFAS |
| Ising 2016 | Netherlands EDIE-NL | UHR (CAARMS) | 14–35 | 196 | CBT+SC | SC | 6 m (-26) | 4 | TTP, SOFAS |
| Addington 2011 | Canada PRIME | CHR (SIPS) | 14–30 | 51 | CBT | ST | 6 m (-20) | 1.5 | TTP, GAF, SFS |
| Multi-component Early Intervention Service (EIS) | | | | | | | | | |
| Nordentoft 2006 | Denmark OPUS | Schizotypal Disorder (ICD-10) | 18–45 | 79 | EIS (ACT+SST+FI) | SC | 2 y | 2 | TTP |
| Bechdolf 2012 | Germany FETZ | EIPS (ERlaos) | NR | 128 | EIS (CBT, SST, CR, FI) | SC | 1 y (-30) | 2 | TTP |
| Wessels 2019* | Germany - | EIPS (ERlaos) | 17–35 | 111 | EIS (CBT, GST, CR, PE) | SC | 52 w (CBT 25) | 1 | GAF |
| Adjunctive Nutrient: omega-3 | | | | | | | | | |
| Amminger 2010 | Austria | UHR (Yung 1998) | 13–25 | 81 | Omega-3+NBI | PLB+NBI | 12 w (9) | 1 | TTP, GAF |
| McGorry 2017 | Muli-national NEURAPRO | UHR (CAARMS) | 13–40 | 304 | Omega-3+CMCB | PLB+CBCM | 6 m; CBCM 6–12 m | 1 | TTP*, SOFAS |
| Nelson 2018 | Muli-national NEURAPRO | UHR (CAARMS) | 13–40 | 304 | Omega-3+CMCB | PLB+CBCM | 6 m; CBCM 6–12 m | 1.5–5.7 | TTP, SOFAS |
| CBT/Pharmacotherapy/EIS (3-arm/step) | | | | | | | | | |
| McGorry 2013 | Australia PACE | UHR (CAARMS) | 14–30 | 115 | 1) CT+RSP; 2) CT+PLB | ST+PLB | 12 m | 2 | TTP*, GAF, QLS |
| McGorry 2023 | Australia PACE-STEP | UHR (CAARMS) | 12–25 | 281 | [step1] SPS [step2] CBCM [step3] CBCM+FLX | [step2] SPS [step3] CBCM+PLB | [step1] 6 w [step2] 20 w [step3] 26 w | 1 | TTP, SOFAS |
| Bechdolf 2023 | Germany PREVENT | CHR (GRFD/COGDIS/ APS/BLIP) | 18–49 | 280 | 1) CBT; 2) ARP+CM | PLB+CM | 52 w (CM -21, CBT 30) | 1 | TTP, SOFAS |

*Excluded from analysis due to high risk of bias. w, week; m, month; y, year; CBT, cognitive behavioral therapy; CT, cognitive therapy; CM, case management; FI, family intervention; CBCM, cognitive behavioral case management; SST, social skills training; SPS, support and problem solving; ACT, assertive community treatment; NBI, need-based intervention; ST, supportive therapy; SC, standard care; TAU, treatment as usual; OLZ, olanzapine; RSP, risperidone; ARP, aripiprazole; PLB, placebo; TTP, transition to psychosis; GAF, Global Assessment of Functioning; SOFAS, Social and Occupational Functioning Assessment Scale; QLS, Heinrichs-Carpenter Quality of Life Scale