**Appendix Table E-5. Data abstraction of randomized controlled trials of cognitive adaptation training\***

| **Author, Year** | **Interventions (n)**  **Duration** | **Population characteristics** | **Results** | **Quality Rating** |
| --- | --- | --- | --- | --- |
| Velligan 2008a and Velligan 2009 | CAT (n=40)  Usual care (n=40)  Duration of intervention and followup: 24 months | CAT vs. usual care:  Mean age 41 vs. 40 years  50% vs. 51% female  Race/ethnicity -  42% vs. 36% Hispanic  47% vs. 36% white  Mean SOFAS 44.1 vs. 45.6 | Function, based on SOFAS score, improved more with CAT vs. usual care (effect size 1.10) | Fair |
| Velligan 2008b | CAT (n=73)  Usual care (n=32)  Duration of intervention: 9 months  Duration of longest followup: 15 months | CAT vs. usual care:  Mean age 38 vs. 39 years  45% vs. 38% female  Race/ethnicity –  34% vs. 28% Hispanic  34% vs. 45% white  Mean SOFAS 45.8 vs. 45.6 | For function, based on SOFAS score, there was nonsignificant trend favoring CAT over usual care (p<0.07).  Significantly fewer patients in the CAT groups relapsed compared with usual care. | Fair |
| Velligan 2015b | CAT (n=68)  Usual care (n=37)  Duration of intervention: 9 months  Duration of longest followup: 15 months | CAT vs. usual care:  Mean age 41 vs. 40 year  46% vs. 46% female  Race/ethnicity –  40% Hispanic  31% white  25% Black  Mean MCAS score 3.7 vs. 3.8 | Function, based on MCAS score, improved more in CAT vs. non-CAT groups (effect size 0.4). | Fair |

**Please see Appendix B. Included Studies for full study references**

CAT=cognitive adaption training, MCAS= Multnomah Community Ability Scale, SOFAS=Social and Occupational Assessment Scale

\*Overall evidence for this intervention was insufficient