Additional File 5. Utility weights used

Reference	Details	Source/Notes
Barnett (2001) [1]	Utility adjustments made for asymptomatic HIV, AIDs, maintenance treatment and quality of life of IDU.	Utility for HIV and AIDs sourced from published literature. No utilities available for substance disorders so these values are assumed. The authors justify these utility adjustments by comparing to other conditions which limit activities.
Masson (2004) [2]	Assumption of 0.02 utility decrement each day per month of heroin use	Assumption tested in sensitivity analyses only
Negrin (2006) [3]	NR	Nottingham Health Profile as reported in a multicentre study comparing three MMT programmes in five drug treatment centres in Barcelona
Schackman	Utility adjustment applied to all health	Based on utility weights from a societal perspective study

(2012) [4]	states in the model for in treatment, off drugs; in treatment, on drugs, out of treatment, off drugs and out of treatment, on drugs	which used a panel of UK general population members to make valuations on given health states using standard gamble method
Stephen (2012) [5]	Utility adjustments used for 'Untreated or relapse, reduced use of heroin, and heroin-free states	Based on utility weights from a societal perspective study which used a panel of UK general population members to make valuations on given health states using standard gamble method
Tran (2012) [6]	Utility adjustment applied for health states: ART and on MMT ongoing drug abuse; ART and on MMT ongoing drug abstinence	Based on mapping of World Health Organisation Quality of life-Brief version (WHOQOL-BREF) to QALYs
Zaric (2000)	Utility based on infection status and IDU in MMT, IDU not in MMT and non	Assumptions based on literature on quality of life impacts in

[7]	IDU	non-AIDS HIV and AIDS
Zaric (2000) [8]	Utility based on infection status and IDU in MMT, IDU not in MMT and non IDU	Assumptions based on literature on quality of life impacts in non-AIDS HIV and AIDS
Adi (2007) [9]	Mean utilities on NAL, placebo and not on treatment	Bespoke utility study based on utility weights from a societal perspective study which used a panel of UK general population members to make valuations on given health states using standard gamble method
Connock (2007) [10]	Mean utilities on MMT and BMT for first 2 weeks then week 3-52	Based on utility weights from a societal perspective study which used a panel of UK general population members to make valuations on given health states using standard gamble methods study
Schering-	NR	Full details not available, but based on published literature.

Plough (2007) [11]		

AIDS, acquired immunodeficiency syndrome; ART, ; BMT, buprenorphine maintenance treatment; HIV, human immunodeficiency virus; IDU, injecting drug user; MMT, methadone maintenance treatment; NAL, naltrexone; NR, not reported; QALY, quality-adjusted life-year; UK, United Kingdom.

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