

SUPPLEMENTARY ONLINE CONTENT

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Supplemental References

This supplementary material has been provided by the authors to give readers additional information about their work.

Supplemental Box 1. ICD-9-CM diagnostic and procedure codes

Alcohol Withdrawal Syndrome:

- Diagnostic Codes: 291.0, 291.3, 291.5, 291.8, 291.81
- Procedure Codes: 94.62, 94.63, 94.68, 94.69

Alcohol Use Disorder:

- Diagnostic Codes: 303.x and 305.0x

Intubation

- Procedure Codes: 31.1, 96.04, 96.05, 96.70, 96.71, 96.72

Supplemental Box 2. Calculation of mg-diazepam-equivalents from other benzodiazepines

10 mg of diazepam =

- 1 mg of lorazepam
- 25 mg of chlordiazepoxide
- 2 mg of midazolam
- 20 mg of oxazepam
- 20 mg of temazepam
- 0.5 mg of clonazepam
- 1 mg of alprazolam
- 15 mg of clorazepate

Supplemental Table 1. Non-benzodiazepine medications for alcohol withdrawal syndrome (AWS)

Medication	Mechanism
Baclofen ^{1–3}	GABA _B agonist
Carbamazepine ^{4–10}	Stabilizes neuronal membranes by inhibiting voltage-sensitive sodium channels and/or calcium channels
Clonidine ^{10–13}	α ₂ agonist
Dexmedetomidine ^{14–22}	Selective α ₂ agonist
Ethanol ^{23–25}	GABA _A agonist, NMDA antagonist
Gabapentin ^{26–30}	Stabilizes neuronal membranes by inhibiting voltage-gated calcium channels; structurally related to GABA but does not appear to bind receptor
Ketamine ^{31–33}	NMDA antagonist
Oxcarbazepine ³⁴	Stabilizes neuronal membranes by inhibiting voltage-sensitive sodium channels and/or calcium channels
Phenobarbital ^{26,35–39}	GABA _A agonist, NMDA antagonist
Pregabalin ⁴⁰	Stabilizes neuronal membranes by inhibiting voltage-gated calcium channels
Propofol ^{14,17,41–43}	GABA _A agonist, NMDA antagonist
Valproic acid ^{8,44–49}	Stabilizes neuronal membranes by inhibiting voltage-gated sodium channels; binding to presynaptic GABA _B receptors may increase release of GABA; increases GABA synthesis by activating glutamic acid decarboxylase

Legend: GABA = γ-aminobutyric acid; NMDA = N-methyl-D-aspartate

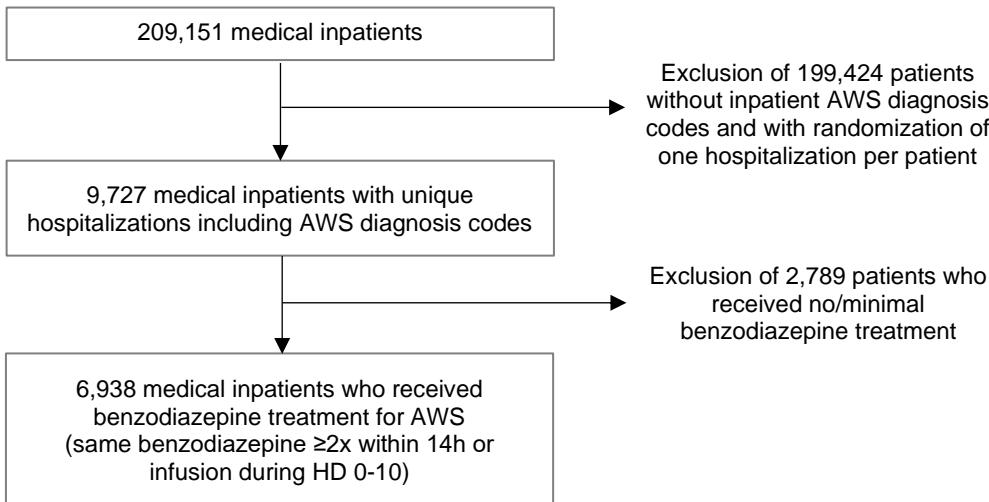
Supplemental Table 2. Comorbid Inpatient Diagnosis Categories, Labels, and ICD-9-CM Codes

Diagnosis Category	Diagnosis Label	ICD-9-CM Code
Mental health disorder	Schizophrenic disorders	295.x
	Episodic mood disorders (bipolar disorders, depressive disorders)	296.x, 311
	Delusional disorders	297.x
	Other nonorganic psychoses	298.x
	Anxiety, dissociative and somatoform disorders	300.x
	Personality disorders	301.x
	Eating disorders	307.x
	Acute reaction to stress	308.x
	Adjustment reaction (including PTSD)	309.x
	Other psychosocial circumstances (suicidal ideation and homicidal ideation)	V62.x
Nutrition, electrolyte, or acid-base disorder	Suicide	E950.x – E958.x
	Other disorders of pancreatic internal secretion	251.x
	Kwashiorkor	260.x
	Nutritional marasmus	261.x
	Other severe protein-calorie malnutrition	262.x
	Other and unspecified protein-calorie malnutrition	263.x
	Vitamin A deficiency	264.x
	Thiamine and niacin deficiency states	265.x
	Deficiency of b-complex components	266.x
	Ascorbic acid deficiency	267.x
	Vitamin D deficiency	268.x
	Other nutritional deficiencies	269.x
	Disorders of mineral metabolism	275.x
	Disorders of fluid electrolyte and acid-base balance	276.x
	Iron deficiency anemias	280.x
	Other deficiency anemias	281.x
GI tract disorder	Cholera	1.x
	Salmonella gastroenteritis	3
	Shigellosis	4.x
	Amebiasis (apart from causing liver injury, pneumonia, skin lesions)	6, 6.1, 6.2
	Other protozoal intestinal diseases	7.x
	Intestinal infections due to other organisms	8.x
	III-defined intestinal infections	9.x
	Tuberculosis of intestines peritoneum and mesenteric glands	14.x
	Tuberculosis of esophagus	17.8x
	Gastrointestinal anthrax	22.2
	Diphtheritic peritonitis	32.83
	Abdominal actinomycotic infections	39.2
	Toxin-producing bacterial infections	41.41, 41.42, 41.43, 41.49, 41.86
	Epidemic vomiting syndrome	78.82
	Syphilitic peritonitis	95.2
	Gonococcal peritonitis	98.86
	Chlamydia of peritoneum	98.86
	Candidasis of the esophagus	112.84
	Candidasis of the intestine	112.85
	Other cestode infections	123, 123.4
	Ancylostomiasis and necatoriasis	126.x
	Esophageal varices (bleeding, without bleeding, etc)	456.x
	Diseases of esophagus	530.x
	Gastric ulcers	531.x
	Duodenal ulcers	532.x
	Peptic ulcer site unspecified	533.x
	Gastrojejunal ulcer	534.x
	Gastritis and duodenitis	535.x
	Disorders of function of stomach	536.x
	Other disorders of stomach and duodenum	537.x
	Complications of bariatric procedures	539.01, 539.09, 539.81, 539.89
	Appendicitis	540, 540.1, 540.9, 541, 542, 543, 543.9
	Regional enteritis	555.x
	Ulcerative enterocolitis	556.x
	Vascular insufficiency of intestine	557.x

	Other and unspecified noninfectious gastroenteritis and colitis	558.1, 558.2, 558.3, 558.41, 558.42, 558.9
	Intestinal obstruction without mention of hernia	560.x
	Diverticula of intestine	562.x
	Functional digestive disorders not elsewhere classified	564.x
	Anal fissure and fistula	565.x
	Abscess of anal and rectal regions	566.x
	Peritonitis and retroperitoneal infections	567.x
	Other disorders of peritoneum	568.x
	Other disorders of intestine	569.x
	Gastrointestinal hemorrhage	578.x
	Intestinal malabsorption (apart from pancreatic steatorrhea)	579.x
	Other congenital anomalies of upper alimentary tract	750.x
	Other congenital anomalies of digestive system (apart from pancreaticobiliary and liver)	751.x
	Diarrhea	787.81
	Digestive system complication	997.4, 997.49
Liver injury	Amebic liver abscess	6.3
	Viral hepatitis	70.x
	Mumps hepatitis	72.71
	Secondary syphilitic hepatitis	91.62
	Syphilis of liver	95.3
	Echinococcus granulosus infection of the liver	122, 122.5, 122.8
	Hepatitis due to toxoplasmosis	130.5
	Acute and subacute necrosis of liver	570
	Chronic liver disease and cirrhosis	571.x
	Liver abscess and sequelae of chronic liver disease	572.x
	Other disorders of liver	573.x
	Congenital cystic disease of liver	751.62
	Salmonella arthritis	3.23
	Salmonella osteomyelitis	3.24
	Amebic skin ulceration	6.6
	Tuberculosis of bones and joints	15.x
Musculoskeletal or soft tissue disorder	Tuberculosis of skin and subcutaneous tissues	17.0x
	Cutaneous anthrax	22
	Cutaneous diphtheria	32.85
	Erysipelas	35
	Cutaneous actinomycotic infections	39
	Gangrene	40, 785.4
	Tropical pyomyositis	40.81
	Arthritis due to rubella	
	Leishmaniasis	85.x
	Syphilis of bone, muscle, synovium, tendon, or bursa	95.5, 95.6, 95.7
	Gonococcal arthritis, synovitis, tenosynovitis, bursitis, spondylitis, or other gonococcal infection of joint	98.5, 98.51, 98.52, 98.53, 98.59
	Dermatophytosis	110.x, 111.x
	Lipoma of skin or subcutaneous tissue	214, 214.1, 214.9
	Other benign neoplasm of connective or soft tissue	215.x
	Varicose veins of lower extremities	454.x
	Inguinal hernia	550.x
	Other hernias and complications of hernias	551.x, 552.x, 553.x
	Psoas muscle abscess and other retroperitoneal abscesses and infections	567.31, 567.38, 567.39
	Carbuncle or furuncle	680.x
	Cellulitis or abscess of soft tissue or skeletal sites	681.x, 682.x,
	Pilonidal cyst with or without abscess	685.x
	Pyoderma and other infections of skin and soft tissue	686.x
	Chronic ulcers of skin	707.x
	Arthropathy associated with infections	711.x
	Crystal arthropathies	712.x
	Rheumatoid arthritis and other inflammatory polyarthropathies	714.x
	Osteoarthritis and allied disorders	715.x
	Allergic and climacteric arthritis	716.2x, 716.3x
	Transient arthropathy	716.4x
	Other arthritis	716.5x, 716.6x
	Other arthropathy	716.8x, 716.9x

	Other joint derangement (e.g., effusions, hemarthrosis, stiffness)	717.x, 718.x, 719.x
	Ankylosing spondylitis, other inflammatory spondylopathies, and spondylosis (aside from traumatic)	720.x, 721.x
	Intervertebral disc disorders, disorders of the cervical region, and unspecified disorders of the back	722.x, 723.x, 724.x
	Polymyalgia rheumatica	725
	Peripheral enthesopathies and allied syndromes	726.x
	Other disorders of synovium tendon and bursa	727.x
	Other disorders of musculoskeletal tissues	728.x, 729.x, 737.x, 738.x, 782.2, 782.3
	Osteomyelitis	730.x
	Osteopathies and osteochondropathies	731.x, 732.x, 733.x
	Limb deformities and dysfunction	734.x, 735.x, 736.x, V49.x
	Complications peculiar to orthopedic procedures	996.4x, 996.77, 996.78, 996.79 996.9x, 997.6x
	Wound issues related to procedures	998.32, 998.81, 998.83
COPD	Chronic bronchitis	490.x, 491.x
	Emphysema	492, 492.8
	Chronic airway obstruction	496
Other substance use condition	Drug-induced mental disorders	292, 292.11, 292.12, 292.2 292.21, 292.8x, 292.9
	Drug dependence (opioid use disorders, sedative use disorders, cannabis use disorders, amphetamine use disorders, cocaine, hallucinogen, and other substance use disorders)	304.x
	Nondependent abuse of drugs (examples as above)	305.x
	Poisoning by analgesics, psychotropics, stimulants	965, 965.01, 965.02, 965.09, 969.6, 970.81, 970.89, 989.89 989.9, E850.0, E850.1, E854.1
Cardiac dysrhythmia		426.x, 427.x, 785, 785.1
Kidney injury	Syphilis of kidney	95.4
	Acute and chronic glomerulonephritis	580.x, 582.x
	Nephrotic syndrome	581.x
	Other nephritis or nephropathy	583.x
	Acute kidney failure	584.5, 584.6, 584.7, 584.8, 584.9
	Chronic kidney disease	403, 403.01, 403.1, 403.11, 403.9, 403.91, 404, 404.02, 404.1, 404.9, 405.01, 405.11, 405.91, 585.x
	Disorders resulting from impaired renal function	588.x
	Infections of kidney	590.x
	Hydronephrosis	591
	Other disorders of kidney and ureter	593.1, 593.71, 593.72, 593.73, 593.81, 593.89, 593.9
	Congenital anomalies of urinary system	753.x
	Dialysis	V45.1, V45.11, V45.12, V56.0, V56.1, V56.2, V56.31, V56.32, V56.8
Diabetes mellitus		249.x, 250.x, 357.2, 362.01, 362.02, 362.03, 362.04, 362.05, 362.06, 362.07
Trauma	Traumatic spondylopathy	721.7
	Pain due to trauma	338.11, 339.2, 339.21
	Trauma to specific body parts, including burns	388.11, 716.1x, 721.7, 800.x – 854.x, 860.x – 887.x, 890.x – 897.x, 900.x – 904.x, 910.x – 959.x
	Complications of trauma	518.5, 525.11
	Trauma from accidents, collisions, fights, other mechanisms	E800.x – E807.x, E810.x – E829.x, E831.x, E833.x – E838.x, E840.x – E849.x, E870.x, E880.x – E888.x, E890.x – E900.x, E902.x – E904.x, E906.x – E909.x, E914.x – E925.x, E960.x, E961.x, E963.x, E965.x, E966.x, E968.x, E970.x, E973.x – E976.x, E983.x, E985.x – E988.x, E990.x – E996.x, E998.x
Seizure		345.x, 780.3, 780.31, 780.32, 780.33, 780.39
Pancreaticobiliary disease	Mumps pancreatitis	72.3
	Cholelithiasis	574.x

	Other disorders of gallbladder or biliary tract	575.x, 576.x, 997.41
	Disease of pancreas	577, 577.1, 577.2, 577.8, 577.9
	Pancreatic steatorrhea	579.4
	Congenital anomaly of gallbladder, biliary system, or pancreas	751.6, 751.61, 751.62, 751.69
	Biliary atresia, congenital	751.61
Pneumonia	Infectious pneumonia	3.22, 6.4, 10.x, 11.x, 21.2, 22.1, 31.x, 39.1, 52.1, 55.1, 73, 95.1, 114, 114.4, 114.5, 114.9, 115.05, 115.15, 115.95, 130.4, 480 – 480.3, 480.8, 480.9, 481 – 482.32, 482.39, 482.4 – 482.42, 482.49 482.8 – 482.84, 482.89, 482.9 483, 483.1, 483.8, 484.1, 484.3, 484.5, 484.6, 484.7, 484.8, 485, 486, 487, 488.01, 488.11, 488.81, 510, 513, 997.31, 997.32,
	Non-infectious pneumonia	495.x, 500, 502 – 506, 516.3, 516.32, 516.33, 516.35 – 516.37, 516.5, 516.8, 516.9, 517.1, 518.3, 714.81
Sepsis/Shock		3.1, 22.3, 38.x, 40.82, 458.2, 458.21, 458.29, 458.8, 458.9, 785.5, 785.51, 785.52, 785.59, 995.x, 998
Congestive heart failure		398.91, 402.01, 402.11, 402.91, 404.01, 404.03, 404.11, 404.13, 404.91, 404.93, 428.x, 429.83,
Malignancy		140.x – 165.x, 170.x – 176.x, 179, 180.x – 209.x, 233.x, 234, 234.8, 234.9, 238.6
Cerebrovascular disease	Vascular dementias	290.4, 290.41, 290.42, 290.43
	Retinal vascular occlusion	363.3x
	Subarachnoid hemorrhage	430
	Intracerebral hemorrhage	431
	Occlusion or stenosis of precerebral and cerebral arteries	432.x, 433.x, 434.x
	Transient cerebral ischemia	435.x
Myocardial infarction	Other cerebrovascular disease	436, 437.x, 438.x,
		410.x, 412



Supplemental Figure 1. Patient sample

Legend: AWS = alcohol withdrawal syndrome

Supplemental Table 3. Medications for alcohol withdrawal syndrome (AWS) received by medical inpatients in the Veterans Health Administration during 2013

Medications	n = 6,938
	no. (%)
Short-acting Benzodiazepines	
Lorazepam	5518 (79.5)
Midazolam	323 (4.7)
Oxazepam	237 (3.4)
Temazepam	159 (2.3)
Alprazolam	77 (1.1)
Clorazepate	49 (0.7)
Long-acting Benzodiazepines	
Chlordiazepoxide	2490 (35.9)
Diazepam	1003 (14.5)
Clonazepam	140 (2.0)
Non-benzodiazepine AWS medications	
Gabapentin	1149 (16.6)
Clonidine	686 (9.9)
Propofol	207 (3.0)
Valproic acid/Divalproex/Valproate	206 (3.0)
Dexmedetomidine	169 (2.4)
Baclofen	127 (1.8)
Carbamazepine	100 (1.4)
Phenobarbital	44 (0.6)
Pregabalin	32 (0.5)
Oxcarbazepine	4 (0.1)
Ethanol	0 (0.0)
Ketamine	0 (0.0)
Antipsychotics ^a	
Haloperidol	759 (10.9)
Quetiapine	564 (8.1)
Risperidone	232 (3.3)
Olanzapine	167 (2.4)
Chlorpromazine	28 (0.4)

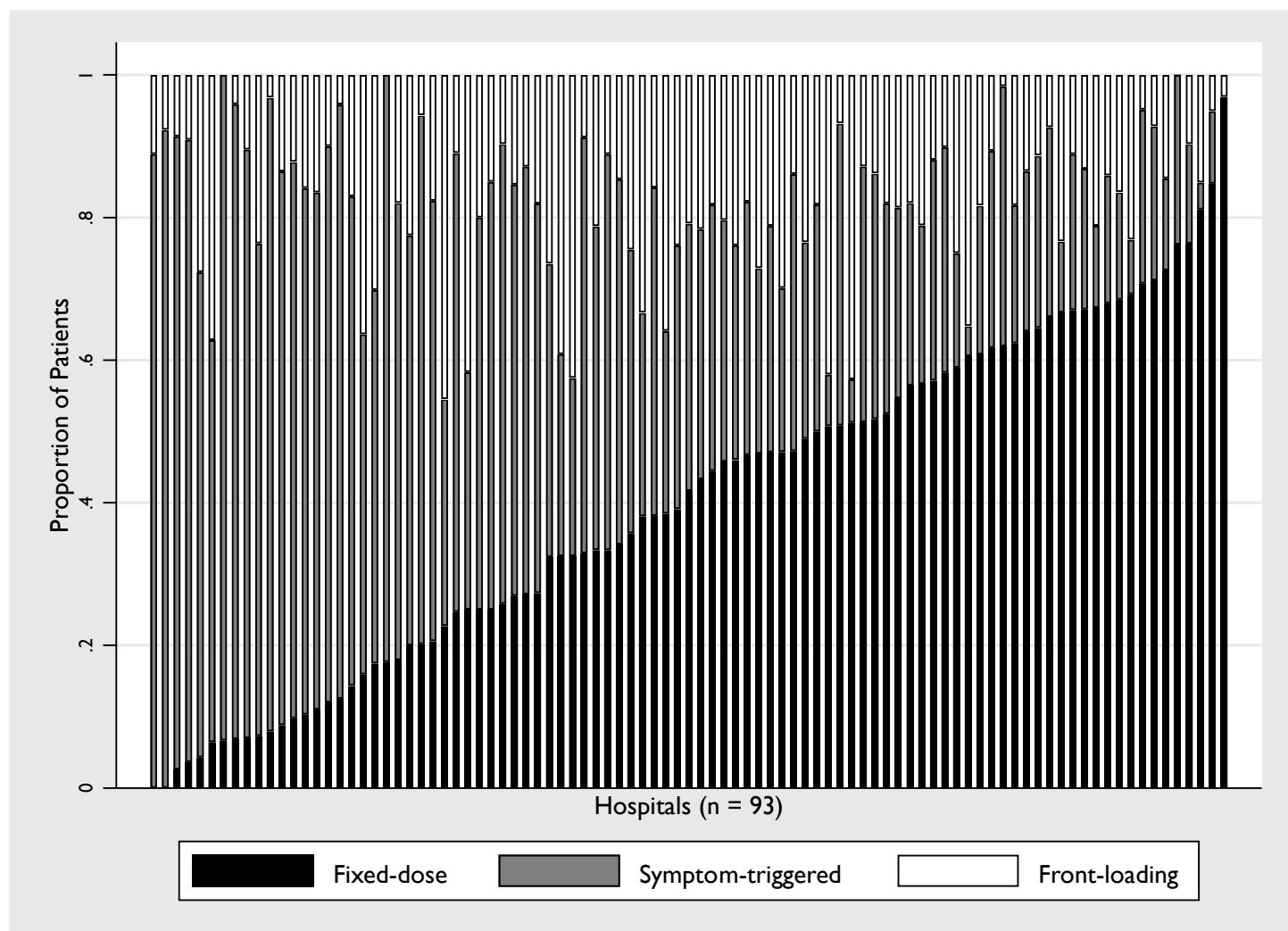
Legend: Treatments above are not mutually exclusive

^aCommon antipsychotic agents were included as possible adjuvant therapies, although antipsychotics are not considered primary treatment for AWS⁵⁰

Supplemental Table 4. Medications and benzodiazepine dosing strategies received by medical inpatients with alcohol withdrawal syndrome (AWS) in the Veterans Health Administration during 2013

	Fixed-dose	Symptom-triggered	Front-loading	p-value			
	n = 2,829	n = 2,909	n = 1,200				
	no.	(%)	no.	(%)	no.	(%)	
Received Short-acting Benzodiazepine	2,086	(73.7)	2,597	(89.3)	1,109	(92.4)	<0.001
Received Long-acting Benzodiazepine	1,654	(58.5)	1,140	(39.2)	688	(57.3)	<0.001
Received Non-Benzodiazepine AWS Medication	789	(27.9)	1,018	(35.0)	423	(35.3)	<0.001
Received Antipsychotic Medication	518	(18.3)	662	(22.8)	331	(27.6)	<0.001

Legend: chi-squared tests were used to assess differences across groups



Supplemental Figure 2. Proportion of medical inpatients receiving each benzodiazepine dosing strategy by hospital in the Veterans Health Administration during 2013

Supplemental Table 5. Adjusted associations between patient characteristics, hospital prescribing pattern, and benzodiazepine dosing strategy for alcohol withdrawal syndrome (AWS) among medical inpatients in the Veterans Health Administration during 2013, with hospital site as a random effect

	Fixed-dose Therapy				Symptom-triggered Therapy				Front-loading Therapy			
	OR	(95% CI)	Pred %	(95% CI)	OR	(95% CI)	Pred %	(95% CI)	OR	(95% CI)	Pred %	(95% CI)
<40 yo	ref.		36.5	(31.5-41.5)	ref.		44.4	(39.6-49.2)	ref.		17.5	(13.8-21.1)
40-49 yo	1.0	(0.8-1.4)	37.3	(33.2-41.3)	0.9	(0.7-1.2)	42.3	(38.6-46.0)	1.1	(0.8- 1.5)	19.0	(16.3-21.6)
50-59 yo	1.2	(0.9-1.5)	39.0	(35.6-42.4)	0.8	(0.6-1.0)	40.5	(37.6-43.4)	1.1	(0.9- 1.5)	19.2	(17.4-21.0)
60-69 yo	1.3	(1.0-1.6)	40.5	(37.1-44.0)	0.9	(0.7-1.2)	42.8	(39.8-45.7)	0.9	(0.6- 1.2)	15.5	(13.9-17.1)
70+ yo	1.7**	(1.2-2.4)	46.2	(41.0-51.4)	0.9	(0.6-1.2)	41.9	(37.2-46.7)	0.6**	(0.4- 0.8)	10.9	(8.0-13.7)
Male	1.1	(0.8-1.5)	39.7	(36.5-42.8)	0.9	(0.6-1.2)	41.8	(39.2-44.4)	1.1	(0.7- 1.6)	17.1	(15.9-18.3)
White	ref.		38.6	(35.4-41.8)	ref.		42.6	(39.9-45.3)	ref.		17.4	(16.1-18.8)
Black	1.4**	(1.2-1.6)	44.6	(40.6-48.7)	0.8*	(0.7-1.0)	39.2	(35.6-42.7)	0.8*	(0.7- 1.0)	15.1	(12.9-17.2)
Hispanic/Latinx	0.7	(0.5-1.0)	33.3	(27.4-39.1)	1.1	(0.8-1.5)	45.0	(39.0-51.0)	1.2	(0.9- 1.6)	19.5	(15.1-24.0)
Other Race	1.3	(0.9-1.8)	42.9	(35.8-50.0)	0.7*	(0.5-0.9)	35.2	(28.9-41.5)	1.1	(0.8- 1.7)	19.4	(13.9-24.9)
Unknown Race	1.1	(0.8-1.6)	41.0	(34.6-47.3)	1.0	(0.8-1.4)	43.3	(37.4-49.3)	0.8	(0.6- 1.2)	14.7	(10.4-19.0)
Single	0.9	(0.8-1.1)	39.4	(36.3-42.6)	1.1	(1.0-1.3)	42.3	(39.6-44.9)	0.9	(0.8- 1.1)	16.9	(15.7-18.2)
Homeless	1.1	(1.0-1.2)	40.7	(37.1-44.3)	1.0	(0.9-1.1)	41.5	(38.4-44.6)	0.9	(0.8- 1.1)	16.3	(14.5-18.1)
Prior year AUD	1.2*	(1.0-1.5)	40.1	(37.0-43.3)	1.0	(0.8-1.2)	41.8	(39.2-44.5)	0.8*	(0.6- 1.0)	16.7	(15.4-17.9)
Prior year AWS	0.9*	(0.8-1.0)	38.3	(35.0-41.6)	1.0	(0.9-1.1)	41.8	(39.0-44.6)	1.3**	(1.1- 1.5)	18.6	(17.0-20.2)
Mental health disorders	0.9	(0.8-1.0)	38.8	(35.5-42.1)	1.2*	(1.0-1.3)	43.2	(40.3-46.0)	1.0	(0.8- 1.1)	16.8	(15.3-18.3)
Nutrition, electrolyte, or acid-base DO	1.0	(0.9-1.2)	39.9	(36.5-43.2)	0.9	(0.8-1.1)	41.4	(38.5-44.2)	1.0	(0.9- 1.2)	17.4	(15.8-18.9)
GI tract DO	1.0	(0.9-1.2)	40.2	(36.7-43.7)	1.0	(0.9-1.1)	41.5	(38.6-44.5)	1.0	(0.9- 1.1)	16.9	(15.2-18.6)
Liver injury	1.0	(0.9-1.1)	39.8	(36.3-43.3)	1.0	(0.9-1.1)	41.6	(38.6-44.7)	1.0	(0.9- 1.2)	17.3	(15.6-19.1)
Musculoskeletal or soft tissue DO	1.0	(0.9-1.1)	39.3	(35.7-42.8)	1.1	(1.0-1.2)	43.1	(40.0-46.2)	0.9	(0.8- 1.0)	16.1	(14.3-17.9)
COPD	1.1	(1.0-1.3)	41.0	(37.2-44.7)	0.9	(0.8-1.1)	41.1	(37.8-44.4)	0.9	(0.8- 1.1)	16.1	(14.1-18.2)
Other substance use condition	0.9	(0.8-1.1)	38.7	(34.9-42.5)	1.1	(0.9-1.3)	43.4	(39.9-46.8)	1.0	(0.8- 1.1)	16.7	(14.5-18.9)
Cardiac dysrhythmia	0.9	(0.8-1.1)	38.6	(34.7-42.5)	1.0	(0.9-1.2)	42.1	(38.6-45.7)	1.1	(0.9- 1.3)	18.0	(15.6-20.4)
Kidney injury	0.8**	(0.6-0.9)	35.3	(31.3-39.3)	1.1	(0.9-1.3)	43.5	(39.7-47.4)	1.3**	(1.1- 1.6)	20.2	(17.4-23.0)
Diabetes mellitus	1.1	(0.9-1.3)	40.6	(36.5-44.8)	1.0	(0.8-1.2)	41.5	(37.7-45.2)	0.9	(0.8- 1.1)	16.3	(13.7-18.9)
Trauma	0.9	(0.7-1.1)	37.5	(33.3-41.8)	1.0	(0.9-1.2)	42.6	(38.6-46.6)	1.1	(0.9- 1.4)	18.5	(15.6-21.4)
Seizure	1.1	(0.9-1.4)	41.7	(37.2-46.1)	0.7**	(0.6-0.8)	35.9	(32.0-39.9)	1.3**	(1.1- 1.7)	20.8	(17.8-23.9)
Pancreaticobiliary disease	0.8*	(0.6-0.9)	35.6	(31.3-40.0)	1.2	(1.0-1.4)	44.8	(40.7-49.0)	1.1	(0.9- 1.4)	18.4	(15.4-21.3)
Pneumonia	0.8*	(0.6-1.0)	35.1	(30.3-39.8)	0.9	(0.8-1.2)	41.0	(36.3-45.6)	1.5**	(1.2- 2.0)	22.8	(18.9-26.7)
Sepsis/Shock	0.8	(0.6-1.0)	35.8	(30.8-40.9)	1.0	(0.8-1.3)	42.3	(37.4-47.2)	1.2	(0.9- 1.6)	19.5	(15.8-23.1)
Congestive heart failure	0.8	(0.6-1.1)	36.2	(30.8-41.6)	1.2	(0.9-1.6)	45.6	(40.1-51.0)	1.1	(0.8- 1.4)	17.8	(13.6-21.9)
Malignancy	1.3	(0.9-1.7)	43.8	(37.5-50.1)	1.0	(0.7-1.4)	41.9	(35.8-48.1)	0.6*	(0.4- 1.0)	11.9	(7.8-16.0)
Cerebrovascular disease	1.0	(0.7-1.4)	39.7	(33.0-46.3)	1.0	(0.7-1.4)	41.3	(34.7-47.9)	1.0	(0.7- 1.6)	17.7	(12.4-23.0)
Myocardial infarction	0.7	(0.5-1.1)	34.3	(26.8-41.7)	0.8	(0.5-1.2)	38.4	(30.9-46.0)	1.7*	(1.1- 2.5)	24.6	(17.8-31.4)
Not top-tercile hospital for prescribing dosing strategy of interest	ref.		26.7	(23.0-30.4)	ref.		27.1	(23.9-30.3)	ref.		12.3	(11.1-13.6)
Top-tercile hospital for prescribing dosing strategy of interest	6.5**	(4.5-9.3)	65.0	(59.2-70.9)	8.3**	(6.1-11.3)	72.0	(67.4-76.7)	3.0**	(2.5- 3.6)	28.8	(25.9-31.6)

Legend: OR = Odds Ratio, CI = Confidence Interval, DO = Disorder, GI = Gastrointestinal, COPD = Chronic obstructive pulmonary disease, ** = p<0.01, * = p<0.05

Hospital intraclass correlation coefficient for fixed-dose therapy = 0.16 (95% CI 0.11-0.21), symptom-triggered therapy = 0.11 (95% CI 0.07-0.15), front-loading therapy = 0.02 (95% CI 0.01-0.05)

Supplemental Table 6. Associations between benzodiazepine dosing strategy for alcohol withdrawal syndrome (AWS) and cumulative benzodiazepine exposure, intensive care, and intubation, unadjusted and adjusted for patient characteristics in the Veterans Health Administration in 2013

	Cumulative Benzodiazepine ^a (mixed-effects linear regression)		ICU Care (mixed-effects logistic regression)		Intubation (mixed-effects logistic regression)			
	Unadj. coef.	(95% CI)	Adj. coef.	(95% CI)	Unadj. OR	(95% CI)	Adj. OR	(95% CI)
Fixed-dose	ref.		ref.		ref.		ref.	
Symptom-triggered	30.5** (13.5-47.5)		26.4** (9.4-43.4)		1.7** (1.5-2.0)		1.6** (1.2-2.2)	
Front-loading	175.9** (155.3-196.4)		168.8** (148.2-189.4)		3.0** (2.6-3.6)		5.6** (4.2-7.4)	
Age			-1.3** (-2.1- -0.6)		1.0 (1.0-1.0)		1.0 (1.0-1.0)	
Male			9.7 (-32.0-51.4)		0.9 (0.6-1.4)		1.4 (0.5-3.7)	
White			ref.		ref.		ref.	
Black			-34.3** (-54.6- -13.9)		1.1 (0.9-1.3)		0.7 (0.5-1.1)	
Hispanic/Latinx			-10.6 (-48.5-27.2)		0.9 (0.6-1.3)		1.0 (0.6-1.9)	
Other Race			-17.4 (-60.2-25.5)		1.0 (0.7-1.5)		0.7 (0.3-1.6)	
Unknown Race			10.6 (-28.5-49.7)		1.2 (0.9-1.8)		1.4 (0.8-2.5)	
Single			6.2 (-11.4-23.7)		1.0 (0.8-1.2)		0.9 (0.6-1.1)	
Homeless			8.5 (-7.5-24.5)		0.7** (0.6-0.9)		0.8 (0.6-1.1)	
Mental health disorders			3.6 (-11.5-18.6)		0.6** (0.6-0.8)		0.5** (0.4-0.7)	
Nutrition, electrolyte, or acid-base disorder			22.1** (7.3-36.9)		1.4** (1.2-1.6)		1.7** (1.3-2.3)	
GI tract disorder			5.9 (-9.0-20.9)		1.4** (1.2-1.6)		1.4** (1.1-1.8)	
Liver injury			6.6 (-8.8-22.0)		1.0 (0.9-1.1)		1.2 (0.9-1.6)	
Musculoskeletal or soft tissue disorder			6.6 (-9.1-22.2)		1.0 (0.9-1.2)		0.8 (0.6-1.1)	
COPD			1.6 (-16.4-19.5)		1.1 (0.9-1.3)		1.1 (0.8-1.5)	
Other substance use condition			20.2* (1.5-38.8)		1.0 (0.9-1.2)		1.0 (0.6-1.4)	
Cardiac dysrhythmia			39.7** (19.9-59.5)		2.2** (1.8-2.6)		2.0** (1.5-2.6)	
Kidney injury			27.4* (5.2-49.6)		2.2** (1.8-2.6)		2.6** (2.0-3.4)	
Diabetes mellitus			-9.2 (-30.6-12.1)		1.3** (1.1-1.6)		0.9 (0.6-1.3)	
Trauma			6.2 (-16.6-29.1)		1.6** (1.3-1.9)		1.7** (1.2-2.5)	
Seizure			6.0 (-17.8-29.8)		1.9** (1.6-2.4)		1.4 (0.9-2.1)	
Pancreaticobiliary disease			19.1 (-5.3-43.5)		1.2 (1.0-1.5)		1.0 (0.7-1.5)	
Pneumonia			32.1* (3.1-61.1)		3.4** (2.6-4.3)		6.7** (5.0-9.0)	
Sepsis/Shock			-19.8 (-50.1-10.5)		4.5** (3.5-5.8)		4.7** (3.5-6.4)	
Congestive heart failure			-1.7 (-35.5-32.1)		1.4* (1.1-1.9)		1.6* (1.1-2.5)	
Malignancy			-4.7 (-43.7-34.3)		1.3 (0.9-1.8)		1.3 (0.8-2.3)	
Cerebrovascular disease			-8.4 (-51.1-34.3)		1.5* (1.0-2.2)		1.6 (0.9-2.7)	
Myocardial infarction			28.2 (-21.4-77.7)		3.4** (2.2-5.3)		3.8** (2.2 6.4)	
Cumulative BZD ^a (for AWS Severity)			- -		1.0** (1.0-1.0)		1.0** (1.0-1.0)	

Legend: ICU = intensive care unit, GI = Gastrointestinal, COPD = Chronic obstructive pulmonary disease, ^a mg-diazepam-equivalents, ** p<0.01, * p<0.05

SUPPLEMENTAL REFERENCES

1. Addolorato G, Leggio L, Abenavoli L, Agabio R, Caputo F, Capristo E, Colombo G, Gessa GL, Gasbarrini G. Baclofen in the Treatment of Alcohol Withdrawal Syndrome: A Comparative Study vs Diazepam. *Am J Medicine*. 2006;119(3):276.e13-276.e18.
2. Lyon JE, Khan RA, Gessert CE, Larson PM, Renier CM. Treating alcohol withdrawal with oral baclofen: A randomized, double-blind, placebo-controlled trial. *J Hosp Med*. 2011;6(8):469-474.
3. Gulati P, Chavan BS, Sidana A. Comparative efficacy of baclofen and lorazepam in the treatment of alcohol withdrawal syndrome. *Indian J Psychiatr*. 2019;61(1):60-64.
4. Ritola E, Malinen L. A double-blind comparison of carbamazepine and clomethiazole in the treatment of alcohol withdrawal syndrome. *Acta Psychiatr Scand*. 1981;64(3):254-259.
5. Agricola R, Mazzarino M, Urani R, Gallo V, Grossi E. Treatment of Acute Alcohol Withdrawal Syndrome with Carbamazepine: A Double-Blind Comparison with Tiapride. *J Int Med Res*. 1982;10(3):160-165.
6. Flygenring J, Hansen J, Holst B, Petersen E, Sørensen A. Treatment of alcohol withdrawal symptoms in hospitalized patients. *Acta Psychiatr Scand*. 1984;69(5):398-408.
7. Malcolm R, Ballenger JC, Sturgis ET, Anton R. Double-blind controlled trial comparing carbamazepine to oxazepam treatment of alcohol withdrawal. *Am J Psychiatr*. 1989;146(5):617-621.
8. Hillbom M, Tokola R, Kuusela V, Kärkkäinen P, Källi-Lemma L, Pilke A, Kaste M. Prevention of alcohol withdrawal seizures with carbamazepine and valproic acid. *Alcohol*. 1989;6(3):223-226.
9. Malcolm R, Myrick H, Roberts J, Wang W, Anton RF, Ballenger JC. The Effects of Carbamazepine and Lorazepam on Single versus Multiple Previous Alcohol Withdrawals in an Outpatient Randomized Trial. *J Gen Intern Med*. 2002;17(5):349-355.
10. Eyer F, Schreckenberg M, Hecht D, Adorjan K, Schuster T, Felgenhauer N, Pfab R, Strubel T, Zilker T. Carbamazepine and Valproate as Adjuncts in the Treatment of Alcohol Withdrawal Syndrome: A Retrospective Cohort Study. *Alcohol Alcohol*. 2011;46(2):177-184.
11. Baumgartner GR. Clonidine Versus Chlordiazepoxide in Acute Alcohol Withdrawal: A Preliminary Report. *Southern Med J*. 1988;81(1):56-60.
12. Baumgartner GR, Rowen RC. Transdermal Clonidine Versus Chlordiazepoxide in Alcohol Withdrawal: A Randomized, Controlled Clinical Trial. *Southern Med J*. 1991;84(3):312-322.
13. Spies CD, Otter HE, Hüské B, Sinha P, Neumann T, Rettig J, Lenzenhuber E, Kox WJ, Sellers EM. Alcohol withdrawal severity is decreased by symptom-orientated adjusted bolus therapy in the ICU. *Intens Care Med*. 2003;29(12):2230-2238.
14. Luttko KA, Stanley KS, Yount NL, Gerkin RD. Retrospective Review of Critically Ill Patients Experiencing Alcohol Withdrawal: Dexmedetomidine Versus Propofol and/or Lorazepam Continuous Infusions. *Hosp Pharm*. 2015;50(3):208-213.
15. Bielka K, Kuchyn I, Glumcher F. Addition of dexmedetomidine to benzodiazepines for patients with alcohol withdrawal syndrome in the intensive care unit: a randomized controlled study. *Ann Intensive Care*. 2015;5(1):33.
16. Crispo AL, Daley MJ, Pepin JL, Harford PH, Brown CVR. Comparison of clinical outcomes in nonintubated patients with severe alcohol withdrawal syndrome treated with continuous-infusion sedatives: dexmedetomidine versus benzodiazepines. *Pharmacotherapy*. 2014;34(9):910-917.
17. Lizotte RJ, Kappes JA, Bartel BJ, Hayes KM, Lesselyoung VL. Evaluating the effects of dexmedetomidine compared to propofol as adjunctive therapy in patients with alcohol withdrawal. *Clin Pharmacol Adv Appl*. 2014;6:171-177.

18. Mueller SW, Preslaski CR, Kiser TH, Fish DN, Lavelle JC, Malkoski SP, MacLaren R. A Randomized, Double-Blind, Placebo-Controlled Dose Range Study of Dexmedetomidine as Adjunctive Therapy for Alcohol Withdrawal*. *Crit Care Med.* 2014;42(5):1131-1139.
19. Rayner SG, Weinert CR, Peng H, Jepsen S, Broccard AF, Institution S. Dexmedetomidine as adjunct treatment for severe alcohol withdrawal in the ICU. *Ann Intensive Care.* 2012;2(1):12.
20. Tolonen J, Rossinen J, Alho H, Harjola V-P. Dexmedetomidine in addition to benzodiazepine-based sedation in patients with alcohol withdrawal delirium. *Eur J Emerg Med.* 2013;20(6):425-427.
21. VanderWeide LA, Foster CJ, MacLaren R, Kiser TH, Fish DN, Mueller SW. Evaluation of Early Dexmedetomidine Addition to the Standard of Care for Severe Alcohol Withdrawal in the ICU. *J Intensive Care Med.* 2014;31(3):198-204.
22. Frazee EN, Personett HA, Leung JG, Nelson S, Dierkhising RA, Bauer PR. Influence of dexmedetomidine therapy on the management of severe alcohol withdrawal syndrome in critically ill patients. *J Crit Care.* 2013;29(2):298-302.
23. Weinberg JA, Magnotti LJ, Fischer PE, Edwards NM, Schroepel T, Fabian TC, Croce MA. Comparison of Intravenous Ethanol Versus Diazepam for Alcohol Withdrawal Prophylaxis in the Trauma ICU: Results of a Randomized Trial. *J Trauma Inj Infect Critical Care.* 2008;64(1):99-104.
24. Fullwood JE, Mostaghimi Z, Granger CB, Washam JB, Bride W, Zhao Y, Granger BB. Alcohol Withdrawal Prevention: A Randomized Evaluation of Lorazepam and Ethanol—A Pilot Study. *Am J Crit Care.* 2013;22(5):398-406.
25. Gipson G, Tran K, Hoang C, Treggiari M. Comparison of enteral ethanol and benzodiazepines for alcohol withdrawal in neurocritical care patients. *J Clin Neurosci.* 2016;31:88-91.
26. Mariani JJ, Rosenthal RN, Tross S, Singh P, Anand OP. A Randomized, Open-Label, Controlled Trial of Gabapentin and Phenobarbital in the Treatment of Alcohol Withdrawal. *Am J Addict.* 2006;15(1):76-84.
27. Levine AR, Carrasquillo L, Mueller J, Nounou MI, Naut ER, Ibrahim D. High-Dose Gabapentin for the Treatment of Severe Alcohol Withdrawal Syndrome: A Retrospective Cohort Analysis. *Pharmacotherapy.* 2019;39(9):881-888.
28. Leung JG, Rakocevic DB, Allen ND, et al. Use of a Gabapentin Protocol for the Management of Alcohol Withdrawal: A Preliminary Experience Expanding From the Consultation-Liaison Psychiatry Service. *Psychosomatics.* 2018;59(5):496-505.
29. Andaluz A, DeMoss D, Claassen C, Blair S, Hsu J, Bakre S, Khan M, Atem F, Rush AJ. Fixed-dose gabapentin augmentation in the treatment of alcohol withdrawal syndrome: a retrospective, open-label study. *Am J Drug Alcohol Abus.* 2019;46(1):1-9.
30. Nichols TA, Robert S, Taber DJ, Cluver J. Alcohol withdrawal-related outcomes associated with gabapentin use in an inpatient psychiatric facility. *Ment Health Clin.* 2019;9(1):1-5.
31. Wong A, Benedict NJ, Armahizer MJ, Kane-Gill SL. Evaluation of adjunctive ketamine to benzodiazepines for management of alcohol withdrawal syndrome. *Ann Pharmacother.* 2014;49(1):14-19.
32. Pizon AF, Lynch MJ, Benedict NJ, Yanta JH, Frisch A, Menke NB, Swartzentruber GS, King AM, Abesamis MG, Kane-Gill SL. Adjunct Ketamine Use in the Management of Severe Ethanol Withdrawal. *Crit Care Med.* 2018;46(8):e768-e771.
33. Shah P, McDowell M, Ebisu R, Hanif T, Toerne T. Adjunctive Use of Ketamine for Benzodiazepine-Resistant Severe Alcohol Withdrawal: a Retrospective Evaluation. *J Medical Toxicol.* 2018;14(3):229-236.
34. Croissant B, Loeber S, Diehl A, Nakovics H, Wagner F, Kiefer F, Mann K. Oxcarbazepine in Combination with Tiaprid in Inpatient Alcohol-withdrawal – a RCT. *Pharmacopsychiatry.* 2009;42(05):175-181.
35. Gold JA, Rimal B, Nolan A, Nelson LS. A strategy of escalating doses of benzodiazepines and phenobarbital administration reduces the need for mechanical ventilation in delirium tremens. *Crit Care Med.* 2007;35(3):724-730.

36. Tidwell WP, Thomas TL, Pouliot JD, Canonico AE, Webber AJ. Treatment of Alcohol Withdrawal Syndrome: Phenobarbital vs CIWA-Ar Protocol. *Am J Crit Care*. 2018;27(6):454-460.
37. Hendey GW, Dery RA, Barnes RL, Snowden B, Mentler P. A prospective, randomized, trial of phenobarbital versus benzodiazepines for acute alcohol withdrawal. *Am J Emerg Medicine*. 2011;29(4):382-385.
38. Rosenson J, Clements C, Simon B, Vieaux J, Graffman S, Vahidnia F, Cisse B, Lam J, Alter H. Phenobarbital for acute alcohol withdrawal: a prospective randomized double-blind placebo-controlled study. *J Emerg Medicine*. 2013;44(3):592-598.
39. Nisavic M, Nejad SH, Isenberg BM, Bajwa EK, Currier P, Wallace PM, Velmahos G, Wilens T. Use of Phenobarbital in Alcohol Withdrawal Management – A Retrospective Comparison Study of Phenobarbital and Benzodiazepines for Acute Alcohol Withdrawal Management in General Medical Patients. *Psychosomatics*. 2019;60(5):458-467.
40. Förg A, Hein J, Volkmar K, Winter M, Richter C, Heinz A, Müller CA. Efficacy and Safety of Pregabalin in the Treatment of Alcohol Withdrawal Syndrome: A Randomized Placebo-Controlled Trial. *Alcohol Alcohol*. 2012;47(2):149-155.
41. Wong A, Benedict NJ, Lohr BR, Pizon AF, Kane-Gill SL. Management of benzodiazepine-resistant alcohol withdrawal across a healthcare system: Benzodiazepine dose-escalation with or without propofol. *Drug Alcohol Depend*. 2015;154:296-299.
42. Lorentzen K, Lauritsen AØ, Bendtsen AO. Use of propofol infusion in alcohol withdrawal-induced refractory delirium tremens. *Dan Med J*. 2014;61(5):A4807.
43. Sohraby R, Attridge RL, Hughes DW. Use of Propofol-Containing Versus Benzodiazepine Regimens for Alcohol Withdrawal Requiring Mechanical Ventilation. *Ann Pharmacother*. 2014;48(4):456-461.
44. Lambie DG, Johnson RH, Vijayasanen ME, Whiteside EA. Sodium Valproate in the Treatment of the Alcohol Withdrawal Syndrome. *Australian New Zealand J Psychiatry*. 1980;14(3):213-215.
45. Rosenthal RN, Perkel C, Singh P, Anand O, Miner CR. A Pilot Open Randomized Trial of Valproate and Phenobarbital in the Treatment of Acute Alcohol Withdrawal. *Am J Addict*. 1998;7(3):189-197.
46. Myrick H, Brady KT, Malcolm R. Divalproex in the Treatment of Alcohol Withdrawal. *Am J Drug Alcohol Abus*. 2000;26(1):155-160.
47. Reoux JP, Saxon AJ, Malte CA, Baer JS, Sloan KL. Divalproex sodium in alcohol withdrawal: a randomized double-blind placebo-controlled clinical trial. *Alcohol Clin Exp Res*. 2001;25(9):1324-1329.
48. Eyer F, Schuster T, Felgenhauer N, Pfab R, Strubel T, Saugel B, Zilker T. Risk Assessment of Moderate to Severe Alcohol Withdrawal - Predictors for Seizures and Delirium Tremens in the Course of Withdrawal. *Alcohol Alcohol*. 2011;46(4):427-433.
49. Maldonado JR. Novel Algorithms for the Prophylaxis and Management of Alcohol Withdrawal Syndromes-Beyond Benzodiazepines. *Crit Care Clin*. 2017;33(3):559-599.
50. Wong J, Saver B, Scanlan JM, Gianutsos LP, Bhakta Y, Walsh J, Plawman A, Sapienza D, Rudolf V. The ASAM Clinical Practice Guideline on Alcohol Withdrawal Management. *J Addict Med*. 2020;14(3S Suppl 1):1-72.