



## Topic Exploration Report

Topic explorations are designed to provide a high-level briefing on new topics submitted for consideration by Health Technology Wales. The main objectives of this report are to:

1. Determine the quantity and quality of evidence available for a technology of interest.
2. Identify any gaps in the evidence/ongoing evidence collection.
3. Inform decisions on topics that warrant fuller assessment by Health Technology Wales.

Topic:	Psychological interventions aimed at improving the mental health of carers of people with dementia
Topic exploration report number:	TER230

### Introduction and aims

Health Technology Wales researchers searched for evidence on psychological interventions aimed at improving the mental health of carers of people with dementia.

The vast majority of people with dementia are cared for at home and it is suggested that 700,000 people in the UK act as unpaid informal carers. It is estimated that up to 40% of those caring for family members with dementia have clinically significant anxiety and depression, with an even higher proportion reporting sub-clinical symptoms. Currently, there is limited support available for these people and mental health needs are often seen as an unavoidable result of the pressures of caregiving. The topic proposer highlighted the Strategies for Relatives (START) intervention, which is a therapy programme designed for use with individual family carers. Other similar interventions were also considered in the scope of this report.

### Summary of evidence

#### *Guidelines*

National Institute of Health and Care Excellence (NICE) guidance (NG97) on dementia recommends that carers of people with dementia should receive support and highlights that this group are at an increased risk of depression. The recommendations outline that support programmes should include psychoeducation and skills components that give education about dementia, training on providing care and adapting to living with a person with dementia, and advice on how to maintain a carer's own physical and mental health. The guidance further recommends that support should be tailored to individual needs and preferences, be specifically designed for those supporting people with dementia, and be at locations that are easily accessible. The NICE quality standard for dementia (QS184) incorporate these recommendations and quality statement 7 outlines the metrics by which delivery of these programmes should be measured. However, neither the guidelines nor the quality standard specify particular programmes which have been shown to be effective in providing support.

### *Secondary evidence*

Several systematic reviews that examined the effectiveness of psychological interventions of carers of people with dementia were identified.

Dickinson et al. (2016) and Kishita et al. (2018) conducted narrative reviews of evidence and both conclude that interventions can have an impact on outcomes for carers' mental health and wellbeing. Dickinson et al. (2016) also conclude that interventions may have the ability to delay institutionalisation of people with dementia although these findings are subject to higher uncertainty.

A further systematic review and meta-analysis focusing only on cognitive behavioural therapy (Hopkinson et al. 2019) found that depression (standardised mean difference -0.34; 95% CI -0.47 to -0.21;  $p < 0.001$ ) and stress (standardised mean difference = -0.36; 95% CI -0.52 to -0.20;  $p < 0.001$ ) were significantly reduced by interventions whilst anxiety was not. Their findings also suggest that group interventions with 8 or fewer sessions may be optimal for balancing effectiveness and delivery.

### *Primary studies*

The topic proposer highlighted a specific intervention that sits within the scope of the report. The Strategies for Relatives (START) programme is a manual-based coping strategy programme which is delivered by psychology graduates under supervision of qualified clinical psychologists. It provides individual-level support that is aligned with the components highlighted by NICE and can be delivered at a carers preferred location.

A randomised trial of 260 carers recruited from memory clinics in England (Livingstone et al. 2014) found that scores on the hospital anxiety and depression scale were significantly lower in the intervention group compared to the control group over an eight month period (adjusted mean difference -1.80; 95% CI -3.29 to -0.31;  $p = 0.02$ ) as were instances of case level depression (odds ratio 0.24; 95%CI 0.07 to 0.76). These improvements were found to be maintained at 6-year follow up (Livingston et al. 2019). A cost-effectiveness analysis over a time horizon of 2-years found that START was cost effective with an ICER of £8567 per quality-adjusted life year (Livingstone et al. 2014).

### *Evidence standards*

Psychological interventions can be delivered remotely using online platforms but were not considered to be covered by the remit of the [Evidence Standards Framework for Digital Health Technologies](#).

## Areas of uncertainty

Psychological interventions for carers have a wide range of characteristics and there is some heterogeneity in findings with trials of specific intervention types having a large impact on pooled estimates. It may therefore be more beneficial to focus on specific interventions that have an acceptable evidence base and may be most applicable to delivery in Wales. The START intervention may be an example of this type of intervention.

Some economic evidence highlighted by the topic proposer gives information on cost-effectiveness at 24-months post intervention. However, there doesn't appear to be evidence on cost-effectiveness over a longer term time horizon.

## Conclusions

NICE guidance recommends that clinicians should be aware that carers of people with dementia have an increased risk of depression and that interventions should be made available to provide support. The evidence reviewed here suggests that there are effective and cost-effective interventions that could be adopted. However, interventions have a wide range of characteristics and are delivered in different ways. Due to this, it is unclear which approaches may provide best value for health services. There may also be varying ways of delivering interventions within existing or novel care pathways.

## Brief literature search results

Resource	Results
HTA organisations	
<a href="#">Healthcare Improvement Scotland</a>	We did not identify any relevant guidance or advice from this source
<a href="#">Health Technology Assessment Group</a>	Health Technology Assessment Group publications were not available online at the time of the search
<a href="#">Health Information and Quality Authority</a>	We did not identify any relevant guidance or advice from this source
<a href="#">EUnetHTA</a>	We did not identify any relevant guidance or advice from this source
<a href="#">International HTA Database</a>	We did not identify any relevant guidance or advice from this source
UK guidelines and guidance	
<a href="#">SIGN</a>	We did not identify any relevant guidance or advice from this source
<a href="#">NICE</a>	<p>NICE guideline [NG97] Dementia: assessment, management and support for people living with dementia and their carers. Published date: 20 June 2018. <a href="https://www.nice.org.uk/guidance/ng97">https://www.nice.org.uk/guidance/ng97</a></p> <p>NICE Quality Standard [QS184] Dementia. Quality statement 7: Supporting carers. Published date: 28 June 2019. <a href="https://www.nice.org.uk/guidance/qs184">https://www.nice.org.uk/guidance/qs184</a></p>
Secondary literature and economic evaluations	
<a href="#">Medline</a>	<p>Dickinson C, Dow J, Gibson G, Hayes L, Robalino S, Robinson L (2016). Psychosocial intervention for carers of people with dementia: What components are most effective and when? A systematic review of systematic reviews. <i>International Psychogeriatrics</i>, 29, 31-43. <a href="https://doi.org/10.1017/S1041610216001447">https://doi.org/10.1017/S1041610216001447</a></p> <p>Hopkinson M, Reavell J, Lane D, Mallikarjun P (2019). Cognitive behavioural therapy for depression, anxiety and stress in caregivers of dementia patients: a systematic review and meta-analysis. <i>The Gerontologist</i>, 59, e343-e362. <a href="https://doi.org/10.1093/geront/gnx217">https://doi.org/10.1093/geront/gnx217</a></p> <p>Kishita, N, Hammond L, Dietrich, C, Mioshi E. (2018). Which interventions work for dementia family carers?: an updated systematic review of randomized controlled trials of carer interventions. <i>International Psychogeriatrics</i>, 30, 1679-1696. <a href="https://doi.org/10.1017/S1041610218000947">https://doi.org/10.1017/S1041610218000947</a></p>
Primary studies	
<a href="#">Medline</a>	We did not search for primary studies due to availability of secondary evidence
Ongoing primary or secondary research	
<a href="#">PROSPERO database</a>	We did not identify any ongoing secondary research from this source
<a href="#">Clinicaltrials.gov</a>	We did not search for ongoing primary studies due to availability of secondary evidence
Other	
Provided by the topic proposer	Livingston G, Barber J, Rapaport P, Knapp M, Griffin M, Romeo R, King D, Livingston D, Lewis-Holmes E, Walker Z, Mummery C, Hoe J, Cooper C (2014). START (STrategies for RelaTives) study: a pragmatic randomised controlled trial to determine the clinical effectiveness and cost-effectiveness of a manual-based coping strategy programme in promoting the mental health of carers of people with dementia. <i>Health Technology Assessment</i> , 18(16). <a href="https://doi.org/10.3310/hta18610">https://doi.org/10.3310/hta18610</a>

	Livingston G, Manela M, O'Keeffe A, Rapaport A, Cooper C, Knapp M, King D, Romeo R, Walker Z, Hoe J, Mummery C and Barber J (2019). Clinical effectiveness of the START (STrategies for RelaTives) psychological intervention for family carers and the effects on the cost of care for people with dementia: 6-year follow-up of a randomised controlled trial. <i>British Journal of Psychiatry</i> , 216, 35-42. <a href="https://doi.org/10.1192/bjp.2019.160">https://doi.org/10.1192/bjp.2019.160</a>
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Date of search:	December 2020
Concepts used:	Psychological intervention/programme; Mental Health; Depression; Anxiety; Coping; Carers; Support