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Family Intervention for Caregivers of People with Recent-onset Psychosis: A Systematic Review and Meta-analysis

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Introduction

Despite knowing that caregivers of people with recent-onset psychosis experience high levels of distress and that a reduction in high expressed emotion (HEE) of caregivers would foster patients' recovery, only a handful of researchers had investigated the effects of family interventions for recent-onset psychosis on caregivers' outcomes. Worse still, no sole systematic review or meta-analysis has ever concluded or examined its effectiveness.

Objectives

(1) To systematically review the evidence of the effectiveness of family interventions for caregivers of people with recent-onset psychosi compared with usual psychiatric care; (2) to directly compare the effects of different types of family interventions.

Methodology

MEDLINE, EMBASE, PsycINFO, Cochrane Central Register of Controlled Trials (CENTRAL), CINAHL Complete and EBSCOhost were searched to identify relevant randomized controlled trials. Trial data were extracted following the procedures described in the Cochrane Handbook of systematic reviews. Random-effects models were used to pool the intervention effects.

Result

Twelve studies including 1644 participants were included in this review. With the exception of a high risk of performance bias inherent to the nature of the psychosocial interventions, the studies had an overall low or unclear risk of bias, suggesting that sources of bias are unlikely to lower confidence in the estimate of intervention effects. Meta-analyses were conducted for 4 different participant outcomes reported in 9 studies. Compared with usual psychiatric care, family intervention was more effective in reducing care burden over all followup periods. Family intervention was also superior to usual care with regards to caregiving experience in the short term and improved utilization of formal support and family functioning over longer-term follow up. Mutual support is more effective than psychoeducation in improving family

functioning when measured 1 to 2 years after the intervention but had equivalent effects on utilization of formal support services. Conclusions: This review provides evidence that family intervention is effective for caregivers of recent-onset psychosis, especially for care burden where the positive effects are enhanced over time.