

Many NHS patients experience relapse of depression and anxiety problems after discharge from mental

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Credit: University of Sheffield

A new study reveals approximately 53 per cent of NHS patients had a clinically significant deterioration of depression and anxiety symptoms within a year after completing brief psychological treatments.

A total of 439 patients, who were considered to have recovered from their symptoms after the most widely available therapy on the NHS, took part in the study. Over half of these were found to have suffered a [relapse](#) event, with up to 79 per cent of events occurring within the first six months after [treatment](#).

The study, published by leading scientific journal Behaviour Research and Therapy, was conducted by a team of NHS clinicians and scientists from the Universities of Sheffield, York, Huddersfield and Trier.

According to a report in February 2016 from the independent Mental Health Taskforce to the NHS, poor [mental health](#) carries an economic and social cost of £105 billion a year in England. In total, £9.2 billion is spent every year by the NHS on mental [health](#) support and services.

Depression and anxiety are highly common and often disabling [mental health problems](#), experienced by one in six adults in the United Kingdom.

Available treatments in the NHS include medication and psychological therapy. The most widely available form of psychological care for these conditions is known as Low intensity Cognitive Behavioural Therapy (LiCBT), which is a brief and simplified adaptation of a treatment called Cognitive Behavioural Therapy (CBT).

LiCBT involves weekly contact with a mental health professional who guides patients on how to look after their mental health and typically lasts under two months. LiCBT has been found to lead to short-term improvement of depression and anxiety in previous studies, although there is as still limited evidence about its long-term effectiveness after treatment.

Participants in the study were in contact with researchers on a monthly basis for 12 months after treatment to monitor their wellbeing and to quantify the percentage of cases that relapsed. Patients with residual depression symptoms at the end of treatment were twice as likely to relapse.

Dr Jaime Delgadillo, from the University of Sheffield, said: "These

findings underline the importance of monitoring patients' wellbeing for at least six months after treatment and offering adequate support to ensure they stay well. We argue that relapse prevention is a crucial but often neglected aspect of psychological care in the NHS.

"Incomplete or insufficient treatment also costs the NHS, as patients who relapse often need further care or support."

Dr Shehzad Ali, from the University of York, added: "Our study highlights that, under the current system, some patients are being discharged too soon. As a result, [patients](#) who have low levels of depression at the time of discharge are more likely to relapse within a few months."

More information: Shehzad Ali et al. How durable is the effect of low intensity CBT for depression and anxiety? Remission and relapse in a longitudinal cohort study, *Behaviour Research and Therapy* (2017). [DOI: 10.1016/j.brat.2017.04.006](https://doi.org/10.1016/j.brat.2017.04.006)

Provided by University of Sheffield

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