Psychotherapy may help multiple sclerosis patients

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A study published in the current issue of Psychotherapy and Psychosomatics indicates that psychotherapy may improve psychological distress and help coping with multiple sclerosis. Psychosocial interventions are often used as an adjunct to the medical management of multiple sclerosis (MS). However, the efficacy of such approaches for a range of psychosocial indications remains unclear. The goal of this meta-analytic study was to determine the efficacy of psychosocial therapies for people with MS.

Six electronic databases (Medline, Embase, PsycINFO, Cochrane Central Register of Controlled Trials, CINAHL, and Clinicaltrials.gov) were searched for randomized controlled trials reporting the effect of psychological interventions for depressive symptoms, anxiety, pain, fatigue, or health-related quality of life (HRQoL) in individuals with MS until April 21, 2016. The search yielded 356 articles with 13 included studies (n = 1,617). Overall, benefits of psychological interventions were found for depressive symptoms (Cohen's d = 0.281), anxiety (d = 0.285), fatigue (d = 0.228), and mental (d = 0.398) and total health-related quality of life (d = 0.444), but not physical health-related quality of life. There were insufficient studies to meta-analyze posttreatment outcomes for pain. Interventions were more effective for health-related quality of life for patients with relapsing-remitting MS and when treatment doses were larger. Cognitive behavioral therapy (CBT) was not efficacious for individuals with MS when considered alone.

These findings support the use of psychosocial interventions across a
range of outcomes for people with MS with small, yet consistent, effect sizes. There was some indication that CBT was less effective than other interventions. However, this may be due to smaller treatment doses in CBT studies.


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