

CBT could benefit mental health of children with long-term conditions

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The mental health of children and young people with some long term physical conditions could benefit from cognitive behavioural therapy (CBT), according to a recent study from the University of Exeter

Medical School. The systematic review used robust methods to bring together and make sense of the best science in this area.

Among a range of findings, the team identified some evidence of the benefits of CBT in inflammatory bowel disease, chronic pain and epilepsy. The research was funded by the National Institute for Health Research (NIHR) and supported by the NIHR Collaboration for Leadership in Applied Health Research and Care South West Peninsula (PenCLAHRC).

Long term conditions are common in children. In England, 23% of secondary school age pupils reported that they had a long-term medical illness or disability in a recent survey. Children and [young people](#) who have long term conditions are four times more likely to experience feelings of depression, anxiety and other [mental health issues](#) than those who are physically healthy.

Study author Dr. Liz Shaw, said: "As well as looking at whether treatments worked for these children, we also included studies that explored the experiences of people giving and receiving the treatments. These studies highlighted the benefits of building good relationships and providing treatments in what feels like a 'safe space'."

Fiona Lockhart, Co-investigator from the Biomedical Research Centre Patient & Public Involvement Group at University College London, said: "Children and young people with long-term health conditions face enormous challenges. As well as their physical illness, many of these young people suffer from [mental health problems](#) as a consequence of their condition."

The team also found some benefit from parenting programmes to reduce behavioural problems in children with acquired brain injury and/or cerebral palsy. Further studies showed that children and young people

valued treatments that considered a range of needs rather than just focussing on their mental health. The opportunity to meet and build a supportive relationship with people who are managing their long term condition was also seen to help some young people by providing them with a sense of hope for the future and learn skills to manage their physical and mental health.

Study author Dr. Michael Nunns, of the University of Exeter Medical School, said: "The mental health of children and young people is important and offering the best response is vital. When we set out to do this research we were hoping to make recommendations about what works to support children and young people with long term conditions, who are also having difficulties with their mental health. However, we were disappointed in the lack of good quality evidence available to guide treatment decisions for these children."

Throughout the study, the team worked with a group of children and young people who provided a real-world perspective on the issues they face. They were particularly disappointed in the lack of available research and urged researchers to do something about it. This sentiment was echoed by consultant paediatrician Professor Stuart Logan: "The two things that are needed alongside managing a medical condition like this are something to help the family manage and something to help with the children's emotional problems that so often go alongside these medical conditions. The exciting thing about this project is that it provides researchers with a roadmap for what to do next—we need to work sensibly with parents and children to carefully design treatments and test them in a way that helps us understand whether they actually work."

The [systematic review](#) will be published in *Health Technology Assessment*. The full title of the paper is: Interventions to improve the mental health of [children](#) and young people with long-term [physical conditions](#): linked evidence syntheses.

More information: *Health Technology Assessment*, [DOI: 10.3310/hta23220](https://doi.org/10.3310/hta23220)

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