

Research underway to find tools for caregivers of trauma survivors for anxiety, stress

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An early intervention developed for caregivers of patients with serious illnesses or injuries will be tested by researchers at The University of Texas Health Science Center at Houston (UTHealth).

"In the case of serious injury, chronic illness, or diagnoses that impact patients' abilities to live and function independently, a loved one often takes on the significant role of providing assistance and support to the patient," said Deborah Little, Ph.D., principal investigator and professor in the Louis A. Faillace, MD, Department of Psychiatry and Behavioral Sciences at McGovern Medical School at UTHealth. "These caregivers deserve our admiration and we cannot forget that providing care to loved ones over the course of months to years can have a profound and significant impact on the health and wellbeing of the [caregiver](#)."

Currently, more than 45 million Americans serve in an informal caregiving role and receive little to no support, Little said, adding that more than 50% of persons serving as a caregiver receive diagnoses of depression, [anxiety disorders](#), and/or develop problems with substance use.

"These unpaid, informal and generous caregivers need support," Little said. "When they do not get sufficient support, not only does their health decline, but so does their ability to provide high quality support for their loved one."

Little and her team will recruit 300 participants from people with are potential caregivers to patients admitted to the surgical intensive care unit (SICU) at Memorial Hermann—Texas Medical Center. They will test whether an [early intervention](#) that begins before the patient is even discharged can reduce caregiver burden in both the long and short term.

The trial will break participants into three groups, with the [control group](#) receiving traditional support in the form of ICU counseling groups and access to community support resources.

The second group will receive one-on-one problem-solving therapy, during which the caregivers identify what they are struggling with and work through how they could modify or change their thoughts, feelings, and behaviors.

The third groups will receive a diary that has prompts based on problem-solving therapy designed to identify the stressors and lead them through developing solutions to combat those stressors.

"The diary will have simple, open-ended prompts for the person to respond to such as, 'How do you feel today?' and 'What were you thinking during those feelings and did you do anything to combat those feelings?'" said Little, director of research of the Trauma and Resilience Center at McGovern Medical School.

At the end of a 30-day period with once-a-week check-ins, the participants will be screened to see if there is a reduction in their levels of depression and anxiety.

"Our goal is to provide different interventions that can be used to help these individuals when they might be coping with feelings of depression or anxiety and to provide tools so that they do not become overwhelmed," Little said.

If the clinical trial is successful, Little believe the tools can be adapted to other patient/caregiver populations, not just trauma survivors.

"These populations have very similar demographics to those who suffer from post-[traumatic stress disorder](#) and their caregivers, especially when it comes to depression and anxiety," Little said. "If we can determine that a tool helps these individuals cope with their feelings in a long-lasting way, we can adapt it to help those other populations as well."

The primary objective of the research is to determine if this approach can help [family members](#) and caregivers of service members who have been critically injured in combat.

"There are places in this country where mental health expertise is not readily available, so having a tool like this diary could help a lot of people who wouldn't have access to help otherwise," she said.

This study is funded by the U.S. Department of Defense and is being carried out in conjunction with Baylor University and Methodist Hospital Houston.

Provided by University of Texas Health Science Center at Houston

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