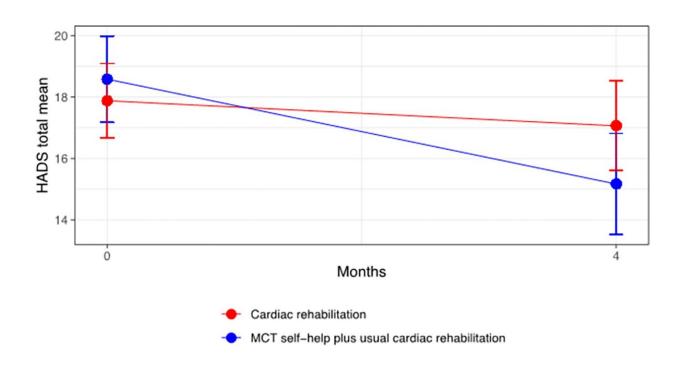


New home-based self-help psychological therapy can reduce anxiety and depression in people with heart disease

February 6 2023, by Kathryn Mills-Webb



Mean HADS total scores and 95% confidence intervals for each trial arm at each assessment point, for complete cases only. HADS, Hospital Anxiety and Depression Scale. Credit: *PLOS Medicine* (2023). DOI: 10.1371/journal.pmed.1004161

A study led by Greater Manchester Mental Health NHS Foundation Trust (GMMH) and the University of Manchester (UoM) has found that



a psychological therapy called metacognitive therapy (MCT) can reduce symptoms of depression, anxiety and post- traumatic stress in heart disease patients when delivered in a self-help format.

People with <u>heart disease</u>, or who have had a serious heart problem, such as heart attack or <u>open-heart surgery</u>, often experience stress and anxiety due to their medical condition. Many of these patients are referred into a cardiac rehabilitation (CR) program, either at a clinic or remotely from their home, to support their recovery. Currently, psychological support and specific mental health treatment offered as part of these programs varies by site and is limited. Yet, treating anxiety and depression is crucial as research shows that this type of distress reduces quality of life, and increases the risk of further heart problems and even death.

The findings from the MCT-PATHWAY study, published in *PLOS Medicine*, build on previous research which found that group-based MCT was effective in reducing symptoms of anxiety and depression in cardiac patients. This study shows that MCT can be delivered both in a group-based and home-based treatment, widening patient choice for mental health support in cardiac rehabilitation services.

In this study, 118 cardiac patients were randomly allocated to receive Home-MCT plus standard cardiac rehabilitation treatment, while 122 patients were allocated to standard CR. Patients receiving Home-MCT were provided with a self-help manual that they worked through at their own pace. The manual included modules on developing techniques to reduce worry and rumination (dwelling on the past), and new ways to react to negative or distressing thoughts. In addition to the manual, patients receiving Home-MCT also received support phone calls from trained staff to provide opportunities for reflection and to consolidate learning.

Patients in the trial who received home-based MCT experienced



significant reductions in symptoms of anxiety, depression and post-traumatic stress, compared to those receiving standard CR only. The results indicate that Metacognitive Therapy can be effective when delivered both by a therapist in a group setting (as shown in previous research), and when accessed remotely from home. This flexibility in how MCT can be delivered will enable healthcare providers to offer patients greater choice in how they access psychological components of CR programs.

Harriet Dawson was 22 years old when she had <u>open heart surgery</u> following the discovery of a hole in her heart. She then took part in the MCT-PATHWAY study. She commented, "It was very self-guided. You had check-in calls every couple of weeks and I liked that.... I preferred that it was home-based because I didn't have to compare and contrast my answer. A lot of it was about managing your stress, managing your worry, and how much of it us under your control.

"There weren't many resources out there for me, for someone at the younger end of the spectrum and female. My heart event is a life milestone for me now, but home-based metacognitive therapy has allowed me to take control of it and has allowed me to reflect on it properly."

Joanne Varker, <u>cardiac rehabilitation</u> specialist nurse at Royal Bolton Hospital, one of the NHS sites involved in the study, commented, "Being involved in the Pathway Study was of great benefit to many of our patients. We had never had the option of offering a home-based therapy that could greatly aid our patients' understanding of the psychological issues caused by their <u>heart attack</u> and help their overall recovery. As a team we enjoyed taking part and being able to offer this, and saw many positive outcomes from our patients."

Professor Adrian Wells, PATHWAY chief investigator, said, "It's not



surprising that people living with or recovering from serious heart problems experience symptoms of anxiety, depression and trauma. They are often recovering from potentially life-limiting conditions and uncertainty which understandably causes distress.

"What's important is that we recognize this and provide patients with effective, evidence-based treatment options. The results of our trial have shown that home-based MCT can help <u>cardiac patients</u> discover new and more helpful ways to process their distressing thoughts, whether they are undergoing treatment at home or at a clinic."

More information: Adrian Wells et al, Metacognitive therapy homebased self-help for anxiety and depression in cardiovascular disease patients in the UK: A single-blind randomised controlled trial, *PLOS Medicine* (2023). DOI: 10.1371/journal.pmed.1004161

Provided by University of Manchester

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