

New guidelines on catatonia aim to create a step-change in management

April 10 2023



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For the first time, the British Association for Psychopharmacology (BAP) has produced a guideline on catatonia. Catatonia is a severe psychiatric disorder that has been associated with a wide range of medical complications. Yet recognition and management remain poor.

Twenty-two experts from across three continents examined the latest research on this important condition and have developed a series of recommendations ranging from diagnosis and investigation to treatment. According to lead author Dr. Jonathan Rogers of University College



London, the guidelines "aim to create a step-change in the management of a neglected condition."

The guidelines were developed by researchers in the U.K., U.S., Canada, India and Germany. They are published in the *Journal of Psychopharmacology*.

Unlike many psychiatric conditions, treatment of catatonia can have surprisingly fast results, sometimes within minutes. The main group of medications recommended for catatonia are benzodiazepines, which are cheap and widely available but can have a dramatic effect, with 66%–100% being effectively treated in a number of studies. Electroconvulsive therapy (ECT), in which an electrically induced seizure is produced under general anesthetic, is also highly effective.

The guidelines are among the most comprehensive ever published on catatonia, referencing more than 500 research articles in the literature. There is attention to particular groups who may have special requirements, such as children, <u>older adults</u>, women in pregnancy or the postnatal period and those with <u>autism spectrum disorder</u>.

As well as emphasizing the importance of using tried and tested treatments for catatonia, the guidelines also draw on the latest evidence linking catatonia to neurological problems, such as epilepsy and autoimmune encephalitis. There are recommendations on the use of brain scans, brain wave tests and tests for autoantibodies in certain cases.

However, the researchers note that the evidence behind many of their recommendations is largely based on small studies rather than proper clinical trials. According to Dr. Rogers, "It's really unfortunate that there is so little high-quality research on one of the most severe conditions in all of psychiatry."



The <u>guidelines</u> aim to improve practice in the U.K. and abroad, while catalyzing further research into even more effective treatments.

More information: Evidence-based consensus guidelines for the management of catatonia: Recommendations from the British Association for Psychopharmacology, *Journal of Psychopharmacology* (2023). DOI: 10.1177/02698811231158232

Provided by SAGE Publications

Citation: New guidelines on catatonia aim to create a step-change in management (2023, April 10) retrieved 4 May 2024 from https://medicalxpress.com/news/2023-04-guidelines-catatonia-aim-step-change.html

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