

Clinically Significant Effects of Group CBT on Spouse Caregivers' Mental Health & Cognitive Functioning

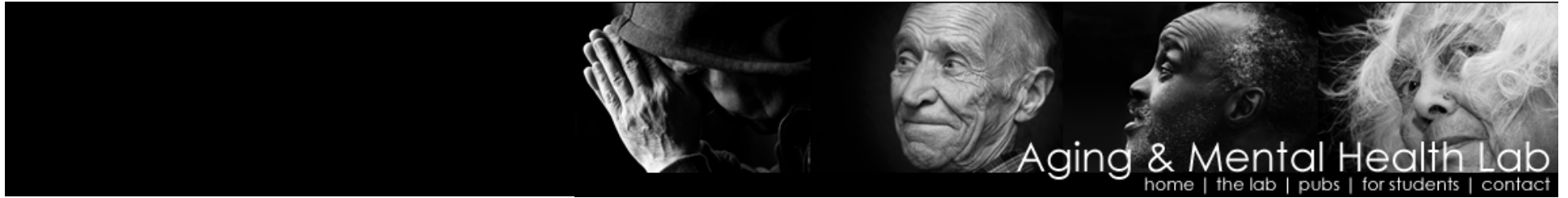
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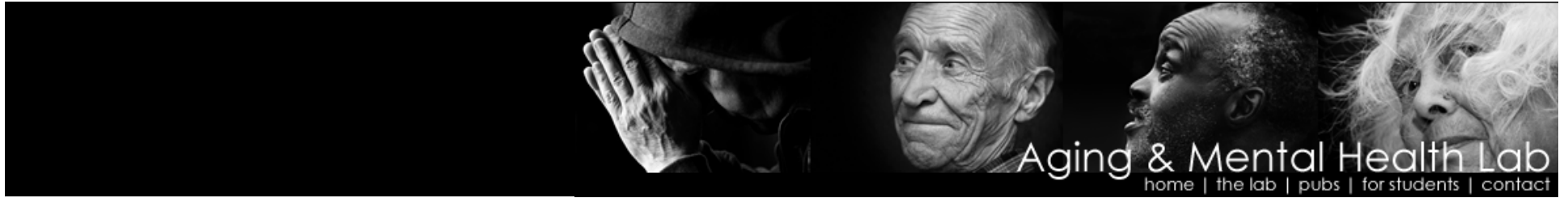


Collaborators

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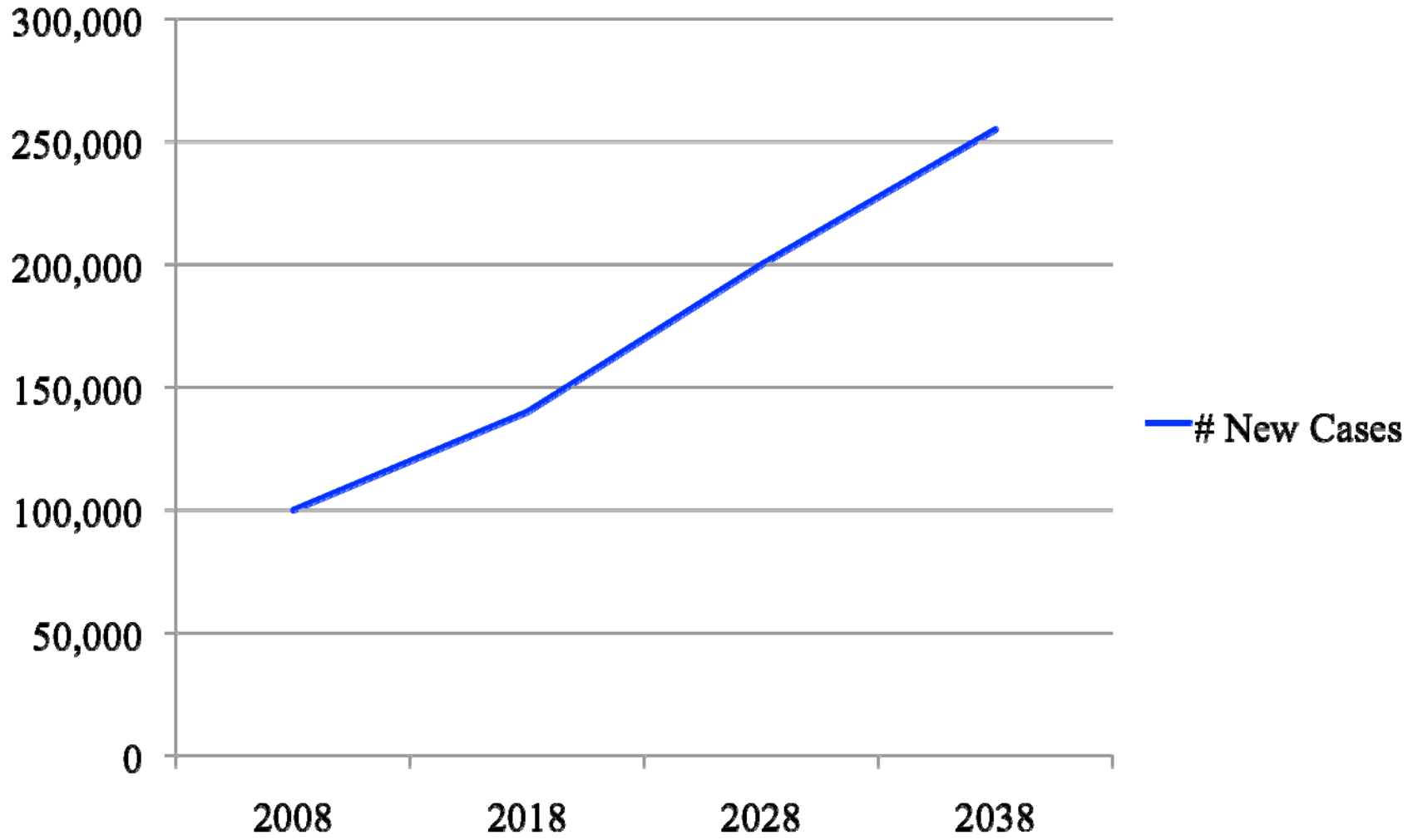


Outline

- Need for caregiver interventions
- Limitations of caregiver interventions
- Our intervention study



Incidence of Dementia in Canada





Incidence of Dementia in Canada

- 2008: 1 new dementia case every 5 minutes
- 2038: 1 new dementia case every 2 minutes



Consequences of Caregiver Stress

- Caregivers at increased risk for
 - Anxiety and depression
 - Health problems
 - Attention and memory impairments
 - Job disruptions & economic hardship
- Care recipients at increased risk for
 - Early institutionalization
 - Premature mortality

Dementia Caregiver Intervention Research: In Search of Clinical Significance

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Marcia Ory, PhD,⁴ Rachel Norris, MA,¹ Lynn M. Martire, PhD,¹
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Robert Burns, MD,⁹ Dolores Gallagher-Thompson, PhD,¹⁰ and Alan Stevens, PhD¹¹

Results: Although many studies have reported small to moderate statistically significant effects on a broad range of outcomes, only a small proportion of these studies achieved clinically meaningful outcomes.



Why?

- Types of interventions
- Need for links btw treatment & outcomes
- Types of caregivers recruited
 - Heterogeneous
 - Sub-clinical

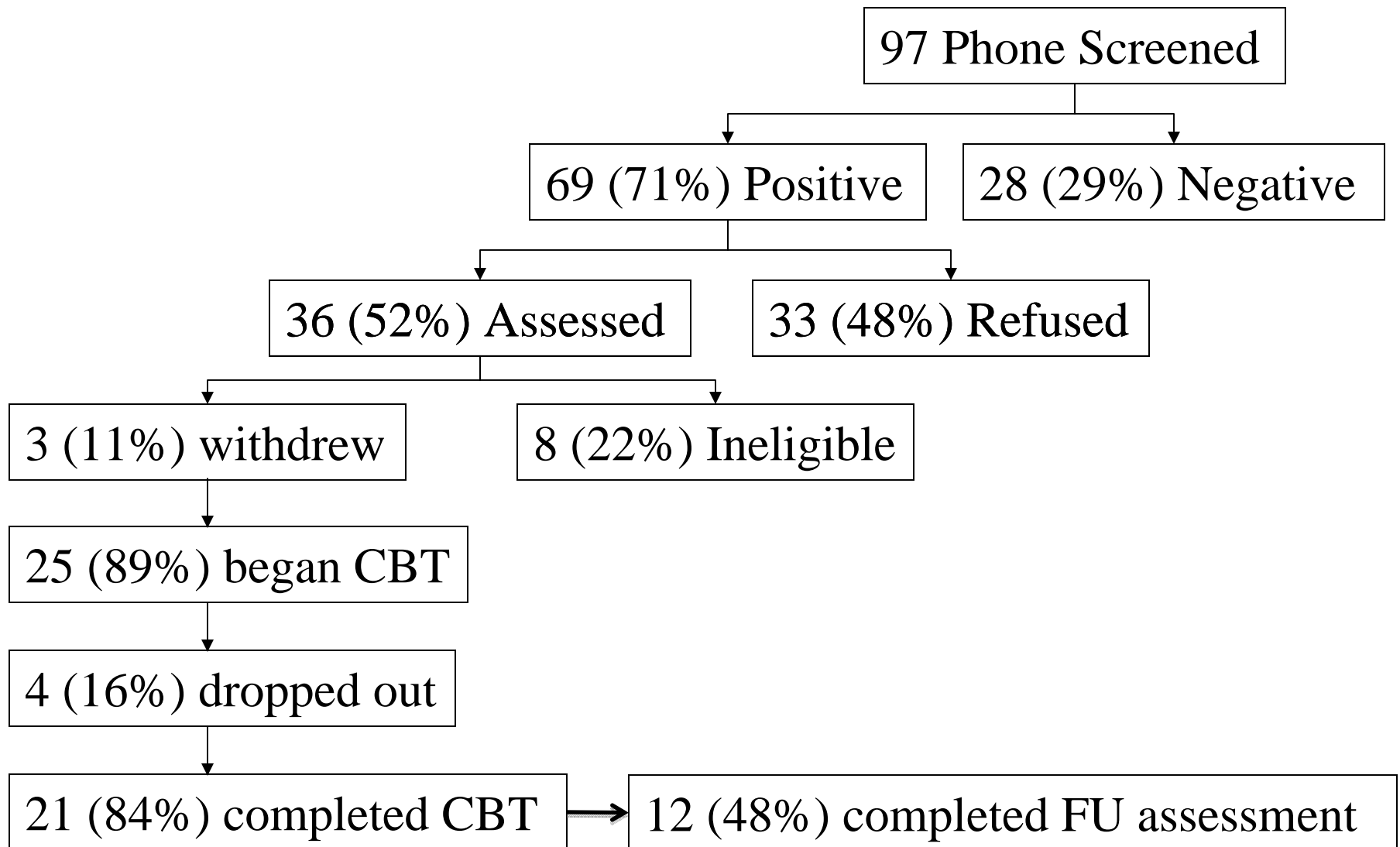


Hypothesis

- Achieve clinically significant outcomes by
 - Using a proven intervention (CBT)
 - Limiting to spouses
 - Limiting to those with DSM-IV diagnoses
 - Using a number of indicators of clinical significance
- Research question: Can we achieve clinically significant results using this approach?



Methods: Recruitment Challenges





Methods: Participants

- 70.1 years of age
- 91% female
- 15.1 years of education
- Health: 7.25/10 with average of 3 meds
- MMSE of 29.5



Methods: Intervention

- 13 weeks of protocolized group CBT
- Each session lasted 2 hours
 - S1-5: Skills re: challenging behavior
 - S6-10: Skills re: coping with stress and mood
 - S11 & 12: Planning for the future
 - S13: Review and maintenance of skills
- Sessions lead by Master's level clinical psych grad student



Methods: Measures

- Mental health
 - SCID
 - HAM-D
 - BDI
 - BAI
- Caregiver stress
 - ZBI
 - RMBPC # of symptoms / reaction to symptoms
- Cognition
 - KBNA



Results

	t (T1 vs T3)	ES (d)	CSC N (%)	RCI N (%)
SCID				
HAM-D				
BDI-II				
BAI				
ZBI				
RMBPC #				
RMBPC Rx				
KBNA				



Results

	t (T1 vs T3)	ES (d)	CSC N (%)	RCI N (%)
SCID	---			
HAM-D	3.74**			
BDI-II	3.50**			
BAI	3.67**			
ZBI	0.19			
RMBPC #	0.00			
RMBPC Rx	0.61			
KBNA	4.17**			



Results

	t (T1 vs T3)	ES (d)	CSC N (%)	RCI N (%)
SCID	---	---		
HAM-D	3.74**	0.98		
BDI-II	3.50**	1.10		
BAI	3.67**	0.99		
ZBI	0.19	0		
RMBPC #	0.00	0		
RMBPC Rx	0.61	0.20		
KBNA	4.17**	0.80		



Results

	t (T1 vs T3)	ES (d)	CSC N (%)	RCI N (%)
SCID	---	---	5 (42%)	
HAM-D	3.74**	0.98	4 (33.3%)	
BDI-II	3.50**	1.10	6 (50%)	
BAI	3.67**	0.99	3 (25%)	
ZBI	0.19	0	0 (0%)	
RMBPC #	0.00	0	1 (8.3%)	
RMBPC Rx	0.61	0.20	5 (41.7%)	
KBNA	4.17**	0.80	5 (41.7%)	



Results

	t (T1 vs T3)	ES (d)	CSC N (%)	RCI N (%)
SCID	---	---	5 (42%)	---
HAM-D	3.74**	0.98	4 (33.3%)	9 (75%)
BDI-II	3.50**	1.10	6 (50%)	7 (58.3%)
BAI	3.67**	0.99	3 (25%)	6 (50%)
ZBI	0.19	0	0 (0%)	2 (16.7%)
RMBPC #	0.00	0	1 (8.3%)	2 (16.7%)
RMBPC Rx	0.61	0.20	5 (41.7%)	2 (16.7%)
KBNA	4.17**	0.80	5 (41.7%)	3 (33.3%)



Results

- Clinically significant improvement by:
 - 11/12 participants on mental health outcomes
 - 5/12 participants on caregiver stress outcomes
 - 7/12 participants on cognitive outcomes
- Each participant showed CS improvement on at least one outcome



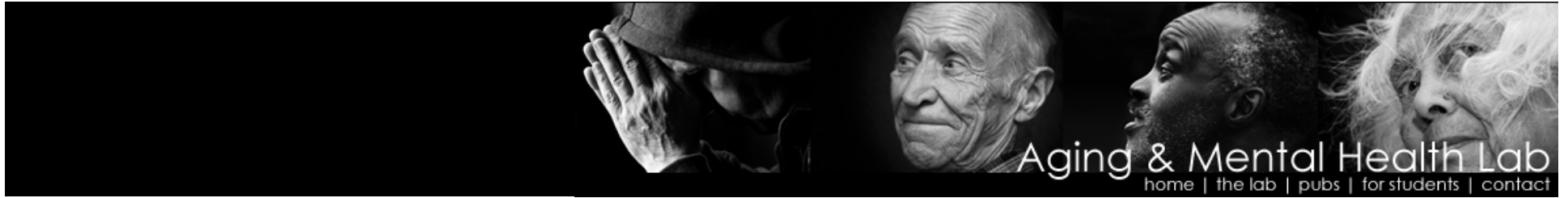
Results: Social Validity

# of Caregivers who Agreed or Strongly Agreed to Each Item	
	Total (4 or 5)
1. Ability to cope has improved	10/12
2. More knowledgeable about caregiving	10/12
3. Learned valuable caregiving strategies	12/12
4. Feel more confident	8/12
5. Have more caregiving skills	10/12
6. Program content relevant to caregiving	12/12
7. Session material was understandable	11/12
9. Program was of value to me	12/12
10. Therapy had positive impact on spouse	7/12
11. Would recommend group to others	12/12



Our Study: Discussion

- Targeting CBT to disordered spouse caregivers
 - Effective
 - Difficult to do
- Strongest effects on social validity & MH
 - Weakest on caregiver stress
- First concrete evidence that cognition can be improved via intervention
- Importance of treatment matching



Questions?

