

Identifying Moderators and Predictors of Treatment Outcome in Caregivers. Results from the GET UP PIANO Pragmatic Cluster Randomized Controlled Trial

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Background: Over the last decade, family interventions (FI) and cognitive behavioural therapy (CBT) have featured in psychosis treatment guidelines in different countries and alongside case management, form part of optimal packages of care in first episode psychosis (FEP) services. Robust evidence in support of their efficacy and acceptability to clinical groups is well established. However, data remains scarce and our understanding limited, on moderators of treatment outcome for carers in FEP services. This study investigated what carer and patient demographics and clinical profiles were associated with gains from psychosocial treatment interventions within FEP services.

Methods: Data was collected as part of the GET UP (Genetics, Endophenotypes, Treatment: Understanding early Psychosis) PIANO (Psychosis: early intervention and Assessment of Needs and Outcome) pragmatic cluster RCT that compared additional psychosocial intervention (CBT, FI case management) with treatment as usual for FEP cases in 126 mental health centres in Italy. Patients were assessed with a range of clinical assessments before treatment initiation and 9 month follow up.

Results: Significant interactions were identified between psychosocial interventions, patient and carer factors and carer outcomes. The results suggested that psychosocial interventions, when compared to routine care alone, delivered greater reductions in carer distress particularly in patients reporting higher levels of carer EE and more negative accounts of early caregiving experiences and carers reporting greater caregiving hours. Further analyses are in progress.

Conclusions: Current findings are encouraging and offer indications for future investigations. Further studies are required to replicate the findings and assess the contribution of local contexts.