

CLAHRCBITE

Brokering innovation through evidence

Remotely Delivered CBT to Help Cope with Distress about Health



Results

Remotely delivered Cognitive Behavioural Therapy (RCBT) via telephone or online video calling markedly reduced health anxiety. The intervention yielded NHS cost savings of more than £1,000 per patient. General anxiety, depression and overall health also improved.

Who needs to know?

- GP surgeries
- Outpatient Clinics
- NHS Commissioners
- Patients
- Researchers

What did we do:

Severe health anxiety is thought to occur in about 5% of the general population. Severe health anxiety is persistent worry about health and can have a detrimental and debilitating impact. It can lead to an increased use of unscheduled/urgent care services such as Accident & Emergency departments, walk in centres, and urgent same day GP appointments with little patient benefit. Given the accessibility and cost benefits, RCBT may be a suitable treatment option. We investigated whether clinical and economic outcomes were improved by offering RCBT compared to treatment as usual (TAU) to people with severe health anxiety frequently accessing unscheduled care. Six to 12 CBT sessions were offered.

What we found and what does this mean:

524 patients were referred and assessed for trial eligibility. Of these 470 were eligible and 156 (33%) were recruited. Compared to TAU, RCBT significantly reduced health anxiety after 6 months and the improvements were maintained to 9 and 12 months. There were also significant improvements in generalised anxiety, depression and overall health after

one year. In terms of economic outcomes there was savings of £1,000 per patient (over 12 months) in terms of reduced use of NHS services.

What next:

Targeted remote delivery of CBT is a feasible, clinically effective and cost-saving method of improving self-management in repeat users of unscheduled medical care with severe health anxiety who have previously been difficult to engage in psychological treatment.

Evidence:

Richard Morriss, Shireen Patel, Sam Malins, Boliang Guo, Fred Highton, Marilyn James, Mengjun Wu, Paula Brown, Naomi Boycott, Catherine Kaylor-Hughes, Martin Morris, Emma Rowley, Jayne Simpson, David Smart, Michelle Stubley, Joe Kai, Helen Tyrer. Clinical and economic outcomes of remotely delivered cognitive behaviour therapy versus treatment as usual for repeat unscheduled care users with severe health anxiety: a multicentre randomised controlled trial. BMC Medicine 2019. <https://bmcmedicine.biomedcentral.com/articles/10.1186/s12916-019-1253-5>

What is NIHR CLAHRC EM?

NIHR Collaborations for Leadership in Applied Health Research and Care (CLAHRCs) are collaborations between the NHS, universities and local organisations. Our goals are to conduct applied health research across the East Midlands and translate our research findings into improved outcomes for the public.

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