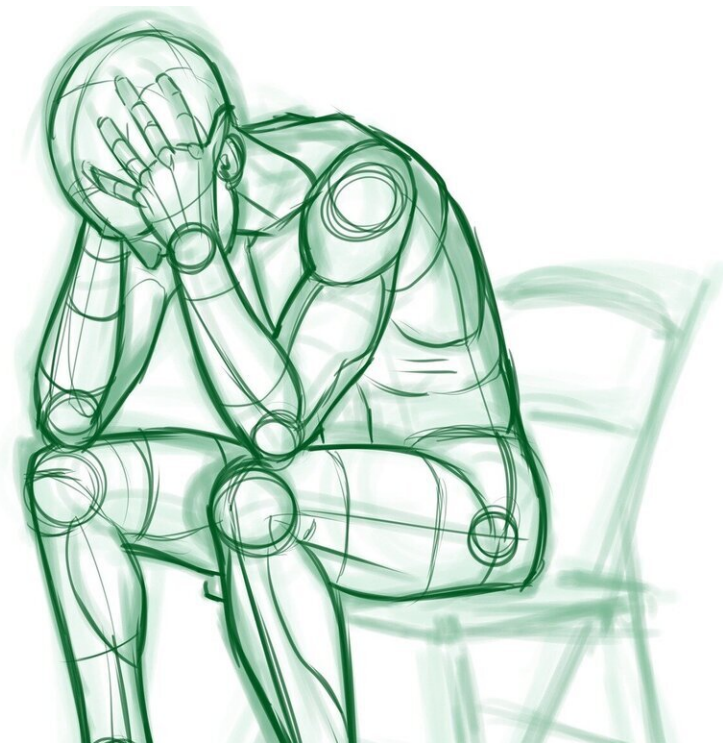


# Talk therapy may alleviate depression and improve quality of life for people with dementia

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Feelings of anxiety and depression are common in people living with dementia and mild cognitive impairment, but the best way to treat these symptoms is currently unknown, as medicines often used to treat these

symptoms may not be effective for people with dementia and may cause side effects.

The findings of the new and updated Cochrane Review paper are important because it is the first review showing that psychological interventions (talking therapies) are effective and worthwhile in the context of ineffective drugs for depression in dementia. The review also shows they may provide additional benefit in terms of improving patient quality of life and everyday function.

The researchers are calling for clinical guidelines for dementia to be revised to recommend psychological therapies and specifically Cognitive Behavioral Therapy (CBT).

Lead author Dr. Vasiliki Orgeta (Associate Professor at UCL Psychiatry) said: "We currently have no standard treatments for depression for people with dementia, as antidepressants do not work for them. Yet, despite the lack of supporting evidence, they are still prescribed for many people living with dementia, which is an important problem given that more and more evidence is accumulating suggesting that not only they do not improve symptoms, but they may increase risk of mortality."

"Previous evidence into the clinical effectiveness of psychological treatments has been limited. Reporting on the most up to date evidence, we found that these treatments, and specifically those focusing around supporting people with dementia to use strategies to reduce distress and improve well-being, are effective in reducing symptoms of depression."

People with dementia are twice as likely as other people their age to be diagnosed with a [major depressive disorder](#). Studies have estimated that 16% of people with dementia experience depression, but this may be as high as 40%, so there is a great need for effective treatments. Depression

and anxiety can also increase the severity of the neurological impairment itself, thus reducing independence and increasing the risk of entering long-term care.

Dr. Orgeta added: "Our findings break the stigma that psychological treatments are not worthwhile for people living with [cognitive impairment](#) and dementia, and show that we need to invest in more research in this area and work towards increasing access to psychological services for people with dementia across the globe. We want people who experience cognitive impairment and dementia to have the same access to mental health treatments as everyone else."

The paper, published by the Cochrane Library as part of their database of systematic reviews, incorporated evidence from 29 trials of psychological treatments for people with dementia or [mild cognitive impairment](#), including close to 2,600 study participants in total.

The [psychological interventions](#) varied somewhat, including CBT and supportive and counseling interventions, but were generally aimed at supporting well-being, reducing distress, and improving coping.

The review shows that psychological treatments for people with dementia may improve not only depressive symptoms but several other outcomes, such as quality of life and the ability to carry out everyday activities. Although more research is needed, the study found that these treatments may also improve depression remission. The authors say the potential of improving many outcomes with one psychological intervention may be highly cost-effective and could be key to improving quality of life and well-being for people with dementia.

The authors judged the evidence to be of moderate quality overall; this means it is of high enough quality to warrant clinical recommendations to support the use of [psychological therapies](#). They say that larger studies

are needed, as they may be able to identify a more substantial effect.

Co-author Dr. Phuong Leung (UCL Psychiatry) said: "There is now good enough quality evidence to support the use of psychological treatments for people with dementia, rather than prescribing medications, and without the risk of drug side effects. What we need now is more clinicians opting for talk therapies for their patients and commitment to funding further high-quality research in this area."

Dr. Orgeta added: "Pharmacological treatments in dementia have been prioritized in trials for many years, as a result they benefit from more investment, so it will be important to invest more in studying psychological treatments. There is a need for novel treatments, specifically developed alongside people with [dementia](#), their families, and those contributing to their care."

The review was conducted by researchers from UCL, University of Nottingham, Universidad de Jaén, and Salford Royal NHS Foundation Trust, and was supported by the National Institute for Health Research.

**More information:** Vasiliki Orgeta et al, Psychological treatments for depression and anxiety in dementia and mild cognitive impairment, *Cochrane Database of Systematic Reviews* (2014). [DOI: 10.1002/14651858.CD009125.pub2](#)

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