



ELSEVIER

Revista de Psiquiatría y Salud Mental

www.elsevier.es/saludmental



ORIGINAL ARTICLE

Clinical usefulness and economic implications of continuation/maintenance electroconvulsive therapy in a Spanish National Health System public hospital: A case series[☆]

Roberto Rodriguez-Jimenez^{a,b,*}, Alexandra Bagney^{a,b}, Iosune Torio^a,
Montserrat Caballero^a, Pedro Ruiz^c, Francisco de Paula Jose Rivas^d,
Miguel Angel Jimenez-Arriero^{a,b}

^a Servicio de Psiquiatría, Instituto de Investigación Hospital 12 de Octubre (i+12), Madrid, Spain

^b Centro de Investigación Biomédica en Red de Salud Mental (CIBERSAM), Instituto de Salud Carlos III, Madrid, Spain

^c Unidad de Calidad, Hospital Universitario 12 de Octubre, Madrid, Spain

^d Subdirección Médica, Hospital Universitario 12 de Octubre, Madrid, Spain

Received 6 February 2014; accepted 2 October 2014

Available online 14 May 2015

KEYWORDS

Electroconvulsive therapy;
Continuation;
Maintenance;
Cost-effectiveness;
Quality

Abstract

Introduction: Continuation/maintenance electroconvulsive therapy has been shown to be effective for prevention of relapse in affective and psychotic disorders. However, there are a limited number of studies that investigate clinical management, associated costs, and perceived quality variables.

Material and methods: A series of 8 cases included during the first 18 months of the continuation/maintenance electroconvulsive therapy programme of the Psychiatry Department at 12 de Octubre University Hospital is presented. Clinical variables (clinical global impression-improvement scale, length of hospitalisation, number of emergency department visits, number of urgent admissions) before and after inclusion in the continuation/maintenance electroconvulsive therapy programme were compared for each patient, as well as associated costs and perceived quality.

Results: After inclusion in the programme, 50.0% of the patients reported feeling “much better” and 37.5% “moderately better” in the clinical global impression-improvement scale. In addition, after inclusion in the continuation/maintenance electroconvulsive therapy programme, patients were hospitalized for a total of 349 days, visited the Emergency Department on 3 occasions, and had 2 urgent admissions, compared to 690 days of hospitalisation ($p=0.012$),

[☆] Please cite this article as: Rodriguez-Jimenez R, Bagney A, Torio I, Caballero M, Ruiz P, Jose Rivas FP, et al. Utilidad clínica e implicaciones económicas de la terapia electroconvulsiva de continuación/mantenimiento en un hospital público del Sistema Nacional de Salud español: serie de casos. Rev Psiquiatr Salud Mental (Barc.). 2015;8:75–82.

* Corresponding author.

E-mail address: roberto.rodriguez.jimenez@gmail.com (R. Rodriguez-Jimenez).



CrossMark

26 Emergency Department visits ($p=0.011$) and 22 urgent admissions ($p=0.010$) during the same period before inclusion in the programme. Associated direct costs per day of admission were reduced to 50.6% of the previous costs, and costs associated with emergency department visits were reduced to 11.5% of the previous costs. As regards perceived quality, 87.5% of the patients assessed the care and treatment received as being "very satisfactory", and 12.5% as "satisfactory".

Conclusions: This continuation/maintenance electroconvulsive therapy programme has shown to be clinically useful and to have a favourable economic impact, as well as high perceived quality.

© 2014 SEP y SEPB. Published by Elsevier España, S.L.U. All rights reserved.

PALABRAS CLAVE

Terapia
electroconvulsiva;
Continuación;
Mantenimiento;
Coste-efectividad;
Calidad

Utilidad clínica e implicaciones económicas de la terapia electroconvulsiva de continuación/mantenimiento en un hospital público del Sistema Nacional de Salud español: serie de casos

Resumen

Introducción: La terapia electroconvulsiva de continuación/mantenimiento ha demostrado su eficacia en la prevención de recaídas tanto en cuadros afectivos como psicóticos. Sin embargo, existen pocos estudios sobre variables de gestión clínica, costes asociados y calidad percibida.

Material y métodos: Se presenta una serie de 8 casos incluidos en el Programa de terapia electroconvulsiva de Continuación/Mantenimiento del Servicio de Psiquiatría del Hospital Universitario 12 de Octubre durante los primeros 18 meses de su funcionamiento. Para cada paciente se compararon variables clínicas (Escala de Impresión Clínica Global-Mejoría Global, días de ingreso, visitas a Urgencias, ingresos urgentes) antes y después de su inclusión en el programa, así como costes asociados y calidad percibida.

Resultados: Tras su inclusión en el programa, el 50,0% de los pacientes refirió encontrarse «mucho mejor», y el 37,5% «moderadamente mejor» en la Escala de Impresión Clínica Global-Mejoría Global. Además, una vez incluidos en el programa de terapia electroconvulsiva de continuación/mantenimiento, los pacientes tuvieron un total de 349 días de ingreso, 3 visitas a Urgencias y 2 ingresos urgentes, frente a los 690 días de ingreso ($p=0,012$), 26 visitas a Urgencias ($p=0,011$) y 22 ingresos urgentes ($p=0,010$) en el mismo periodo, antes de su inclusión en el programa. Los costes directos asociados por estancia/día tras su inclusión en el programa se redujeron al 50,6% del coste previo, y los costes asociados a visitas a Urgencias disminuyeron al 11,5% del coste previo. Respecto a la calidad percibida, un 87,5% de los pacientes evaluaron la atención y tratamiento recibido como «muy satisfactorio», y un 12,5% como «satisfactorio».

Conclusiones: El programa de terapia electroconvulsiva de continuación/mantenimiento estudiado ha demostrado utilidad clínica, repercusión económica favorable, así como una elevada calidad percibida.

© 2014 SEP y SEPB. Publicado por Elsevier España, S.L.U. Todos los derechos reservados.

Introduction

Electroconvulsive therapy (ECT) was used for the first time by Cerletti and Bini in Italy in the year 1938 to treat a psychotic patient. Since then, it has been used in a varied and sometimes controversial way. Nowadays, ECT has become established as an effective technique for the treatment of acute affective and psychotic disorders.^{1,2}

Once remission of the acute stage is obtained through ECT, most of the patients are directed to undergo pharmacological treatment. In spite of this, during the first months after finalising ECT, many patients experience a relapse. For these patients who respond well to ECT but experience affective or psychotic relapses in spite of taking the

right medication, we propose the use of said technique in the medium to long term as a treatment to prevent the aforementioned relapses/recurrences.

The American Psychiatric Association defines "continuation" ECT as the use of ECT during the 6 months after concluding the acute treatment to prevent relapses after the index episode. "Maintenance" ECT is defined as the use of ECT after those 6 months to avoid recurrences.³ However, this distinction is rarely made in practice, and literature often refers to it as "continuation/maintenance ECT" (ECT-c/m).

Even though some clinical guidelines are conservative when suggesting said therapy,⁴ there are several studies which indicate that ECT-c/m is an effective and safe

Download English Version:

<https://daneshyari.com/en/article/4191421>

Download Persian Version:

<https://daneshyari.com/article/4191421>

[Daneshyari.com](https://daneshyari.com)