Clinical effectiveness of interventions for treatment-resistant anxiety in older people: a systematic review

Samantha Barton,¹* Charlotta Karner,¹ Fatima Salih,¹ David S Baldwin² and Steven J Edwards¹

¹BMJ Technology Assessment Group, London, UK
²Faculty of Medicine, University of Southampton, Southampton, UK

*Corresponding author

Declared competing interests of authors: David Baldwin has received honoraria for educational presentations from H. Lundbeck A/S; has acted as a paid consultant to Eli Lilly, GlaxoSmithKline, Grunenthal, H. Lundbeck A/S, Pfizer, Pierre Fabre and Servier; currently holds research grants (on behalf of his employer) from H. Lundbeck A/S and Pfizer; and has accepted paid speaking engagements in industry-supported satellite symposia or other meetings hosted by Eli Lilly, GlaxoSmithKline, Lundbeck, Pfizer, Pierre Fabre and Servier.

Published August 2014
DOI: 10.3310/hta18500

Plain English summary

Interventions for treatment-resistant anxiety
Health Technology Assessment 2014; Vol. 18: No. 50
DOI: 10.3310/hta18500

NIHR Journals Library www.journalslibrary.nihr.ac.uk
Plain English summary

Anxiety and related disorders include generalised anxiety disorder, obsessive–compulsive disorder, panic disorder, post-traumatic stress disorder and phobic disorders (an intense fear of an object or situation). These disorders share psychological and physical symptoms of anxiety, but each disorder has its own set of characteristic symptoms. Most people with an anxiety disorder are diagnosed by the age of 40 years, but a few people will develop an anxiety disorder at older age (after the age of 65 years). Anxiety disorders can be difficult to recognise in older people, as there is the perception that older people are generally more worried than younger adults. In addition, older people are often reluctant to acknowledge that they are experiencing a mental health problem. It is estimated that the number of older people with an anxiety disorder is between 3 and 14 out of every 100 older people.

Treatments for anxiety include psychological therapies, pharmacological treatments and complementary therapies. Choosing a treatment for an older person with anxiety can be complicated. Older people typically have several medical conditions that need treatment and, because of the number of medications they are potentially taking, are at an increased risk of having side effects to potential treatments for anxiety. Some people will continue to feel anxious after initial treatment, which is known as treatment-resistant anxiety. In younger people, adding a second psychotropic drug to a first drug has been found to lower anxiety in some disorders. However, it is not known whether this treatment strategy is effective in older people.

At this time, there is little research on treatment-resistant anxiety in older people, and there is no resource that summarises the evidence for how effective the various therapies available are at treating treatment-resistant anxiety disorders in older people or how they compare against each other. This systematic review aimed to assess how well the treatments for treatment-resistant anxiety work in older people and how they compare with each other in improving the symptoms of anxiety. Other goals were to assess the adverse effects associated with the various treatments and to identify gaps in the evidence available. The project team searched the literature for evidence around the effectiveness of treatments and any side effects associated with them. No study assessing treatments for treatment-resistant anxiety in older adults was identified, underscoring the lack of research in this clinical area.
Criteria for inclusion in the Health Technology Assessment journal

Reports are published in Health Technology Assessment (HTA) if (1) they have resulted from work for the HTA programme, and (2) they are of a sufficiently high scientific quality as assessed by the reviewers and editors.

Reviews in Health Technology Assessment are termed ‘systematic’ when the account of the search appraisal and synthesis methods (to minimise biases and random errors) would, in theory, permit the replication of the review by others.

HTA programme

The HTA programme, part of the National Institute for Health Research (NIHR), was set up in 1993. It produces high-quality research information on the effectiveness, costs and broader impact of health technologies for those who use, manage and provide care in the NHS. ‘Health technologies’ are broadly defined as all interventions used to promote health, prevent and treat disease, and improve rehabilitation and long-term care.

The journal is indexed in NHS Evidence via its abstracts included in MEDLINE and its Technology Assessment Reports inform National Institute for Health and Care Excellence (NICE) guidance. HTA research is also an important source of evidence for National Screening Committee (NSC) policy decisions.

For more information about the HTA programme please visit the website: www.hta.ac.uk/

This report

The research reported in this issue of the journal was funded by the HTA programme as project number 13/39/01. The contractual start date was in September 2013. The draft report began editorial review in January 2014 and was accepted for publication in April 2014. The authors have been wholly responsible for all data collection, analysis and interpretation, and for writing up their work. The HTA editors and publisher have tried to ensure the accuracy of the authors’ report and would like to thank the reviewers for their constructive comments on the draft document. However, they do not accept liability for damages or losses arising from material published in this report.

This report presents independent research funded by the National Institute for Health Research (NIHR). The views and opinions expressed by authors in this publication are those of the authors and do not necessarily reflect those of the NHS, the NIHR, NETSCC, the HTA programme or the Department of Health. If there are verbatim quotations included in this publication the views and opinions expressed by the interviewees are those of the interviewees and do not necessarily reflect those of the authors, those of the NHS, the NIHR, NETSCC, the HTA programme or the Department of Health.

© Queen’s Printer and Controller of HMSO 2014. This work was produced by Barton et al. under the terms of a commissioning contract issued by the Secretary of State for Health. This issue may be freely reproduced for the purposes of private research and study and extracts (or indeed, the full report) may be included in professional journals provided that suitable acknowledgement is made and the reproduction is not associated with any form of advertising. Applications for commercial reproduction should be addressed to: NIHR Journals Library, National Institute for Health Research, Evaluation, Trials and Studies Coordinating Centre, Alpha House, University of Southampton Science Park, Southampton SO16 7NS, UK.

Published by the NIHR Journals Library (www.journalslibrary.nihr.ac.uk), produced by Prepress Projects Ltd, Perth, Scotland (www.prepress-projects.co.uk).
Editor-in-Chief of Health Technology Assessment and NIHR Journals Library

Professor Tom Walley  Director, NIHR Evaluation, Trials and Studies and Director of the HTA Programme, UK

NIHR Journals Library Editors

Professor Ken Stein  Chair of HTA Editorial Board and Professor of Public Health, University of Exeter Medical School, UK

Professor Andree Le May  Chair of NIHR Journals Library Editorial Group (EME, HS&DR, PGfAR, PHR journals)

Dr Martin Ashton-Key  Consultant in Public Health Medicine/Consultant Advisor, NETSCC, UK

Professor Matthias Beck  Chair in Public Sector Management and Subject Leader (Management Group), Queen’s University Management School, Queen’s University Belfast, UK

Professor Aileen Clarke  Professor of Public Health and Health Services Research, Warwick Medical School, University of Warwick, UK

Dr Tessa Crilly  Director, Crystal Blue Consulting Ltd, UK

Dr Peter Davidson  Director of NETSCC, HTA, UK

Ms Tara Lamont  Scientific Advisor, NETSCC, UK

Professor Elaine McColl  Director, Newcastle Clinical Trials Unit, Institute of Health and Society, Newcastle University, UK

Professor William McGuire  Professor of Child Health, Hull York Medical School, University of York, UK

Professor Geoffrey Meads  Professor of Health Sciences Research, Faculty of Education, University of Winchester, UK

Professor Jane Norman  Professor of Maternal and Fetal Health, University of Edinburgh, UK

Professor John Powell  Consultant Clinical Adviser, National Institute for Health and Care Excellence (NICE), UK

Professor James Raftery  Professor of Health Technology Assessment, Wessex Institute, Faculty of Medicine, University of Southampton, UK

Dr Rob Riemsma  Reviews Manager, Kleijnen Systematic Reviews Ltd, UK

Professor Helen Roberts  Professor of Child Health Research, University College London, UK

Professor Helen Snooks  Professor of Health Services Research, Institute of Life Science, College of Medicine, Swansea University, UK

Please visit the website for a list of members of the NIHR Journals Library Board: www.journalslibrary.nihr.ac.uk/about/editors

Editorial contact: nihredit@southampton.ac.uk