

Who are the people waiting to have talking therapies?

Improving Access to Psychological Therapies (IAPT) is a national programme across the England offering access to psychological therapies for people with depression and anxiety. These include cognitive behavioural therapy and other “talking therapies”. A way to monitor and improve services like this is to collect information about the people who use them and understand whether their treatment is successful or not and what impacts this. This is the main aim of the "Predicting outcome following psychological therapy in IAPT (PROMPT)" project.

Between February 2014 and February 2015, 150 patients waiting to start treatment within an IAPT service in urban London were recruited in to the project. Participants answered questionnaires to provide information on a variety of clinical, psychological and social variables and they also completed an interview to help understand and diagnose their main symptoms and problems. The project is still ongoing, but our recent report published in the journal BMC Psychiatry describes in detail the profile of the people who were recruited in the first year of the project. What we found is that the characteristics of people using the IAPT service were generally very complicated. Most people initially come to the service for depression and/or anxiety, but in many cases they also have other complex psychiatric illnesses, such as personality disorder or bipolar disorder. In fact our diagnostic interviews revealed that 14% of our sample met criteria for two different psychiatric conditions and the majority (58 %) of patients had three or more different diagnoses. We also found that around two thirds of the patients reported experiencing at least one traumatic event in their childhood, such as abuse or parental neglect.

These findings could have significant implications for the people using these services, in terms of the therapy they receive, and whether their treatment is successful. IAPT services were originally targeted for individuals with mild to moderate depression and anxiety, and so this high level of complexity may have consequences for the provision of treatment and its outcomes. It's likely that many people presenting to IAPT services may have needs over and above those met by the relatively brief interventions that IAPT services are currently expected and are equipped to provide.

Our ongoing work with the PROMPT project aims to identify characteristics which could predict whether or not treatment is likely to be successful for people seen within an IAPT service. Hopefully, this will help future clinical decision making to be based on the needs of the individual. Furthermore, identifying why some people don't improve following therapy delivered by IAPT services could be used to develop new types of treatment.

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Publication

[Clinical characteristics of patients assessed within an Improving Access to Psychological Therapies \(IAPT\) service: results from a naturalistic cohort study \(Predicting Outcome Following Psychological Therapy; PROMPT\).](#)

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