EFFECTIVENESS OF A 10-WEEK GROUP PROGRAM BASED ON DBT SKILLS AMONG PATIENTS WITH PERSONALITY & MOOD DISORDERS: FINDINGS FROM A PILOT STUDY

Community mental health services are often required to manage people experiencing repeated crises. Personality disorders are not uncommon, accounting for up to one-third of such presentations. These patients are often difficult to treat, leading to a revolving-door phenomenon. This study evaluated the effectiveness of a pilot intervention in reducing psychological symptoms and distress, and examined the impact of the intervention on mental health service utilization.

A pre-versus post-treatment evaluation was conducted of the effectiveness of a 10-week group psychological intervention based on Dialectical Behaviour Therapy (DBT) skills, conducted in a regional Australian community mental health service with patients diagnosed with either Cluster B personality disorder or a mood disorder.

Of those who completed the program (N = 38 patients), 84% were female, with an average age of 35.13 years. Participants were active clients of the service for an average of 58.3 weeks prior to the program. They demonstrated significant improvements in quality of life and self-control, and a reduction in hopelessness, cognitive instability and dependence on mental health services.

Limiting the Dialectical Behaviour Therapy program to a short-term skills-based group component was successful with the targeted patient group; however, more research is required to establish the generalizability of these results.


DEVELOPING IMPLEMENTATION SCIENCE TO IMPROVE THE TRANSLATION OF RESEARCH TO ADDRESS LOW BACK PAIN: A CRITICAL REVIEW

The evidence base regarding treatment for back pain does not align with clinical practice. Currently there is relatively little evidence to guide health decision-makers on how to improve the use, uptake or adoption of evidence-based recommended practice for low back pain. This paper, from local authors, describes implementation science models and approaches; outlines important features of implementation research; critically appraises the quality and findings of implementation trials in the low back pain field and provides recommendations for the design and conduct of future implementation studies in the field.


How do I find the evidence? Find your librarian—STAT!

Whether a clinical nurse is creating a practice guideline or providing bedside care, information is needed to make evidence-based practice decisions, educate patients, and maintain or increase clinical competency. There are hundreds of electronic or web-based resources - knowing where to start to find that information, and discerning which search terms will retrieve the best results, can be arduous.

As expert searchers, medical librarians have the skills and knowledge to make significant contributions to the clinical team, helping nurses navigate information resources and research from start to finish. Librarians’ roles are dynamic; their daily tools to obtain information are embedded in the most up-to-date technology, allowing for innovation in the services they provide. And with mobile access to information, instruction can be anywhere there is a computer and Internet access.


“Clinical nursing is time & task intensive. Researching & reviewing information takes a backseat to direct patient care.”
Prevent child abuse and neglect before it and strategies that can be put in place to prevent of child abuse and neglect. It presents findings from recent Australian and Torres Strait Islander families with multiple and complex needs.

The Longitudinal Study of Australian Children (LSAC) annual statistical report 2016 – published by the Australian Institute of Family Studies – found that rates of self-harm and suicidal behaviour are high among Australian teenagers. Among 14-15 year olds, one in ten reported that they had self-harmed in the previous 12 months, and 2% reported that they had attempted suicide. Girls appeared to be at greater risk than boys of both self-harm and suicidal behaviour.

Prevention of Child Abuse & Neglect

Produced in partnership with the National Association for the Prevention of Child Abuse and Neglect (NAPCAN), this resource provides an overview of prevention of child abuse and neglect. It presents findings from recent Australian and international research to identify activities and strategies that can be put in place to prevent child abuse and neglect before it happens.

Guide: Stronger, Safer, Together

This resource from the Secretariat of National Aboriginal and Torres Strait Islander Child Care, is designed to support good practice learning and reflection for workers providing intensive or targeted family support services to Aboriginal and Torres Strait Islander families with multiple and complex needs.

Recent Articles

NB. Articles in dark blue bold text have Australian content

Articles listed in the newsletter aren’t necessarily available FREE. We’re just letting you know what’s available!

If you’ve searched eJournals and eBooks on the HNE Health Libraries’ website and can’t find the article, contact your local HNE Health Library for further assistance. (Contact details are on page 4.)

HNE Health Libraries will be able to supply most articles—but there may be charges.

Motov, S. et al. (2017) Comparison of intravenous ketorolac at three single-dose regimens for treating acute pain in the ED: a randomized controlled trial. Annals of emergency medicine, 70(2), 177-184


Reeves, S. et al. (2017) Interprofessional collaboration to improve professional practice and healthcare outcomes. Cochrane database of systematic reviews, Issue 6


Mitchell, R. et al. (2017) The survival and characteristics of older people with & without dementia who are hospitalised following intentional self-harm. International journal of geriatric psychiatry, 32(8), 892-900

Young, L. et al. (2017) Glucose self-monitoring in non-insulin-treated patients with type 2 diabetes in primary care settings: a randomized trial. JAAMA internal medicine, 177(7), 920-929


Murphy, V. et al. (2017) Influence of maternal body mass index and macrophage activation on asthma exacerbations in pregnancy. The journal of allergy and clinical immunology: in practice, 5(4), 981-987.e1

Aujla, R. & Esler, C. (2017) Total knee arthroplasty for osteoarthritis in patients <55 years of age: a systematic review. The journal of arthroplasty, 32(8), 2598-2603.e1


Leykin, Y. et al. (2017) The effect of depression on the decision to join a clinical trial. Journal of consulting and clinical psychology, 85(7), 751-756


Peterson, C. et al. (2017) Suicidality, self-harm, and body dissatisfaction in transgender adolescents and emerging adults with gender dysphoria. Suicide and life-threatening behavior, 47(4), 475-482
TREATING FEVER DOES NOT IMPROVE SURVIVAL IN SEPSIS

Early treatment of sepsis is important, but this review found that specifically treating fever in adults with sepsis did not reduce the number of people dying within 28 days. It also had no effect on the frequency of hospital-acquired infections, reversing septic shock, lowering heart rate or improving breathing. It is not known if people with higher temperatures might benefit from treatment of fever. The randomised trials used a cut-off of between 38.0°C to 38.4°C while the observational studies ranged between 37.3°C to 39.5°C.


MEASURING GLUTAMATE LEVELS IN THE BRAINS OF FIBROMYALGIA PATIENTS

This local study reviewed the literature concerning proton magnetic resonance spectroscopy (H-MRS) measured glutamate levels in specific brain regions of fibromyalgia (FM) patients and found converging data in favour of a dysregulation of pain processing in the central nervous system of FM patients, particularly associated with an increase in cerebroglutamate levels. While the cause of FM remains inconclusive, there is evidence to support an association between increased glutamate levels and an increase in FM symptoms.


COELIAC DISEASE: REVIEW OF DIAGNOSIS & MANAGEMENT

Coeliac disease is an immune-mediated systemic disease triggered by exposure to gluten, and manifested by small intestinal enteropathy and gastrointestinal and extra-intestinal symptoms. Recent guidelines recommend a concerted use of clear definitions of the disease.

In Australia, the most recent estimated prevalence is 1.2% in adult men and 1.9% in adult women. Diagnosis of coeliac disease is important to prevent nutritional deficiency and long term risk of gastrointestinal malignancy. Adhering to a gluten free diet allows duodenal mucosal healing and alleviates symptoms. Patients should be followed up with a yearly review of dietary adherence and a health check.


EFFICACY OF DBCT FOR HIGH FEAR OF RECURRENCE IN BREAST, PROSTATE, & COLORECTAL CANCER SURVIVORS

Fear of cancer recurrence (FCR) is a common problem experienced by cancer survivors. This study aimed to evaluate whether blended cognitive behavior therapy (bCBT) can reduce the severity of FCR in cancer survivors curatively treated for breast, prostate, or colorectal cancer. Participants who received bCBT reported significantly less FCR than those who received care as usual (CAU), with a moderate-to-large effect size. Clinically significant improvement in FCR was significantly higher in the bCBT group than in the CAU group.


WENDAN DECCTION FOR SCHIZOPHRENIA

Wendan decoction (WDD) is one of the classic Chinese herb formulas used for psychotic symptoms. Limited evidence suggests that WDD may have some positive short-term antipsychotic global effects compared to placebo or no treatment. However when WDD was compared with other antipsychotics there was no effect on global or mental state, but WDD was associated with fewer adverse effects.


TIMELY USE OF PROBIOTICS IN HOSPITALISED ADULTS PREVENTS CDI

This systematic review (n=6261 subjects) found evidence that administration of probiotics closer to the first dose of antibiotic reduces the risk of clostridium difficile infection (CDI) by ≥50% in hospitalised adults. There was a decrement in efficacy for every day of delay in starting probiotics. Probiotics given within 2 days of antibiotic initiation produced a greater reduction of risk for CDI than later administration. There was no increased risk for adverse events among patients given probiotics. The overall quality of the evidence was high.


VITAMIN D SUPPLEMENTATION MAY PREVENT ACUTE RESPIRATORY TRACT INFECTIONS

A meta-analysis of data from 10,933 participants (aged 0-95 years) in 25 randomised controlled trials showed an overall protective effect of vitamin D supplementation against acute respiratory tract infection (NNT=33). Benefit was greater in those receiving daily or weekly vitamin D without additional bolus doses (NNT=20), and the protective effects against acute respiratory tract infection in this group were strongest in those with profound vitamin D deficiency at baseline (NNT=4). The body of evidence contributing to these analyses was assessed as being of high quality.


SEE ALSO – NIHR SIGNAL: Vitamin D supplements may reduce the chance of developing a chest infection

A PRACTICAL OVERVIEW OF HOW TO CONDUCT A SYSTEMATIC REVIEW

With an increasing focus on evidence-based practice in health care, it is important that nurses understand the principles underlying systematic reviews. Systematic reviews are used in healthcare to present a comprehensive, policy-neutral, transparent and reproducible synthesis of evidence. This article provides a practical overview of the process of undertaking systematic reviews, explaining the rationale for each stage. It provides guidance on the standard methods applicable to every systematic review: writing and registering a protocol; planning a review; searching and selecting studies; data collection; assessing the risk of bias; and interpreting results.

SOURCE: Davis, D. (2016) A practical overview of how to conduct a systematic review. Nursing standard, 30(22), 60-71

REASSURANCE FOR WOMEN ATTEMPTING ASSISTED REPRODUCTIVE TECHNOLOGY

Most women starting treatment with assisted reproductive technology (ART) will eventually take home a baby, according to research published in the MJA. The study estimated the rate of live births across a full course of treatment and including both fresh and frozen embryo transfers. The prospective follow-up of more than 56,652 women commencing ART in Australia and New Zealand between 2009 and 2012, found an overall cumulative live birth rate (CLBR) of 32.9% in the first cycle, increasing to between 54.3% and 72.2% by the eighth cycle. While the cycle-specific rate declined in line with age and the number of complete cycles, the CLBR increased with each consecutive cycle.


SYSTEMATIC REVIEWS ARE USED IN HEALTH CARE TO PRESENT A COMPREHENSIVE, POLICY-NEUTRAL, TRANSPARENT AND REPRODUCIBLE SYNTHESIS OF EVIDENCE.
ClinicalKey is an advanced search engine that combines textbooks, journals and guidelines with the latest clinical data and procedural videos. It also features an intuitive search across a range of media that will give you clear, relevant answers when you need them most.

Search for clinical answers anytime, anywhere with the ClinicalKey and ClinicalKey for Nursing mobile apps available for both Apple® and Android™ devices.

Use your registered username and password to log in once you have downloaded the app.

Any questions, contact your local HNE Health Library.

PAEDIATRIC PALLIATIVE CARE & INTELLECTUAL DISABILITY

As few articles concerning children with intellectual disability and palliative care needs were identified by formal systematic review, an expert consensus group has drawn from the paediatric palliative, oncology and adult intellectual disability literature to develop a “best-practice” guide, highlighting common clinical challenges encountered in the day-to-day care of children with intellectual disability and life-limiting conditions.


THE CHANGING FACE OF CLINICAL TRIALS

In this discussion piece recently published in the NEJM, the author describes the use of RCTs and alternative data sources from the vantage point of public health, illustrates key limitations of RCTs, and suggests ways to improve the use of multiple data sources for health decision making.


A CAUTIONARY NOTE TO AUTHORS ON THE SELECTION & USE OF KEYWORDS

In a recent systematic review, the barriers to adopting telemedicine were identified from literature published between 2011—2016. Kruse et al. (2016) sourced 30 eligible articles reporting 33 barriers occurring 110 times. The frequency of these barriers were presented separately by country and by relevance to key stakeholders: organisations, patients and staff programmers. The authors encouraged policymakers to develop public policies to address these barriers to support the practice of telemedicine.

Although the barriers were diverse, suggesting a comprehensive result, we noticed a gap in the identified papers. By providing one of our papers as an example, we seek to illustrate the important role of selecting and combining keywords when searching for empirical papers to consider for systematic reviews. It is also important for authors to include the right breadth of keywords.


NEW AUDIO DIGEST PSYCHIATRY CDs

- Update on geriatric psychiatry 46(14) 2017
- Diagnosing and managing psychosis in elderly patients with dementia: Presentation of psychosis in older patients / risk factors / common comorbidities / indications for antipsychotic medications / special considerations
- Advocating for patients with dementia and caregivers: Scope of the problem / saving the safety net / challenges for advocates

HNE HEALTH LIBRARIES CAN ASSIST YOU IN YOUR RESEARCH & PRACTICE

For those undertaking an innovation scholarship project, developing a guideline, undertaking a systematic review or meta-analysis, or for higher degree students, Librarians can support you or your team in the following ways:

- Develop and refine review topics
- Identify existing systematic reviews on a topic
- Recommend appropriate databases
- Review existing search strategies
- Develop search strategies for each database
- Execute searches across multiple databases
- Document search strategies
- De-duplicate and provide citations in Endnote
- Assist with locating full-text articles
- Provide a narrative of the search methodology
- Update searches as required

Feel free to visit a HNE Health Library to discuss your projects and learn more about the ways in which we can assist you in your research and practice.

Or take a look at this quick overview...

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E-mail: HNELHD-Libraries@hnehealth.nsw.gov.au

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