QUESTION: Does improving stress management skills enhance outcomes for people with schizophrenia?

Design
Randomised trial. Assessors were blind to treatment allocation.

Setting
One treatment centre in Canada; timeframe not specified.

Participants
Participants were 121 people aged between 17 and 50 years with a DSM III-R diagnosis of schizophrenia. Mean age 34 years; 33% women; mean length of illness 9 years. People were excluded if they were hospitalised or had medication increases in the past 3 months due to exacerbation of acute symptoms.

Intervention
Participants received either 1) a 12-week group stress management programme with individual follow up sessions, or 2) social activities. The stress management programme focused on muscular relaxation for reducing the physiological manifestations of stress, increasing physical stamina and improving cognitive and behavioural skills. Follow up occurred over 1 year.

Main outcome measures
Symptoms were assessed using SAPS and SANS. The Life Skills Profile was used to assess functioning. Subjective stress was assessed using the Perceived Stress Scale. Information was collected about hospitalisations for psychiatric treatment during follow up.

Main results
There were no differences between groups in symptom levels, perceived stress or life skills immediately following the intervention or at 1-year follow up. Those in the stress management programme did not reduce medication increases in the past 3 months due to exacerbation of acute symptoms.

Conclusions
This stress management programme did not reduce schizophrenia symptom levels or perceived stress, but was associated with fewer hospital admissions. The authors hypothesise that stress management training may provide people with schizophrenia with coping skills that reduce the likelihood of acute exacerbation of symptoms requiring hospitalisation.
Stress management programme may reduce hospital admissions among people with schizophrenia

Evid Based Mental Health 2003 6: 52
doi: 10.1136/ebmh.6.2.52

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