EFFECT OF COGNITIVE BEHAVIOURAL THERAPY IN MULTIPLE SCLEROSIS FATIGUE: A SYSTEMATIC REVIEW OF RANDOMISED CONTROLLED TRIALS

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Background and objective
- Fatigue in multiple sclerosis (MS) is the most frequently described indication that is associated with considerable impact on the quality of life of an individual besides having a high prevalence.
- Fatigue in MS may be due to various factors such as social, behavioral, or other co-existing conditions.
- Results of recent studies revealed the usefulness of cognitive behavioral therapy (CBT) in the treatment of MS fatigue.
- CBT acts by influencing individual's social and behavioral cognitions along with other health psychological factors such as self-efficacy.
- The objective of this review was to confirm and assess the clinical effectiveness of CBT in patients with MS fatigue.

Methods
- Embase and Cochrane databases were searched up to 25 June 2012 to identify randomised controlled trials published in English, evaluating the effect of CBT (disseminated by any mode) in patients with MS fatigue.
- Eligibility of trials was assessed by two reviewers with any discrepancy reconciled by a third, independent reviewer.
- To compare CBT with other therapies, random-effect meta-analysis was conducted using Statsa® (v11.1) on change from baseline to endpoint in the fatigue score.

Results
- Four studies of the total 107 retrieved citations met the pre-defined inclusion criteria.
- Two studies compared CBT to no therapy and one study each compared CBT to relaxation therapy (RT) and supportive-expressive group therapy (SEGP).

Discussion
This research has highlighted the effectiveness of CBT in addition to the already existing pharmacological therapies for relieving symptoms of fatigue associated with MS. In addition, the evidence available has indicated that a dearth of data exists in this field of research and future research in form of large RCTs with long follow-up periods are warranted to better understand the role of CBT in improving fatigue in individuals with MS. It would be worthwhile to understand the appropriate time and the most effective modes of delivery of CBT in patients. It would also be of some benefit to explore whether targeting depression or any other co-existing condition also brings out an improvement in MS fatigue. This will aid in developing an understanding of the major contributing factors leading to the development of fatigue in patients with MS as well as the possible pathways to achieve appropriate benefit treatments.

Conclusions
Overall, results demonstrated that CBT was significantly superior in alleviating fatigue compared to no therapy, RT, and SEGP. CBT appears to be a promising, acceptable and clinically beneficial approach that could potentially benefit patients with MS fatigue in future. Thus, further research is warranted to determine which aspects of CBT are most effective and the optimal delivery of CBT for MS fatigue.

References

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