Family therapy should be considered for patients with schizophrenia

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THE PROBLEM: Schizophrenia affects around 1% of the population worldwide. The most common form of treatment is currently antipsychotic medication, either alone or in combination with psychodynamic counselling and other pharmacotherapy. However, antipsychotics provide limited effectiveness in terms of negative symptoms and often result in severe side effects, which in turn impact on compliance. Furthermore, approximately one-third of patients do not respond to antipsychotic therapy.

CLINICAL BOTTOM LINE: Supportive family environments have been shown to be beneficial for individuals with schizophrenia. This review found some promising results from family therapy, but there is a need for more studies to comprehensively determine the magnitude of effectiveness with this therapeutic approach. Nevertheless, due to the limited treatment options for patients with schizophrenia and the lack of harms associated with this treatment, family therapy should be considered as an addition to antipsychotic medication.

## String of PEARLS

### Practical Evidence About Real Life Situations about diabetes

PEARLS are succinct summaries of Cochrane Systematic Reviews for primary care practitioners—developed by Prof. Brian McAvoy for the Cochrane Primary Care Field (www.cochraneprimarycare.org), New Zealand Branch of the Australasian Cochrane Centre at the Department of General Practice and Primary Health Care, University of Auckland (www.auckland.ac.nz/ua), funded by the Ministry of Health (www.health.govt.nz), and published in NZ Doctor (www.nzdoctor.co.nz).

- Low glycaemic index and low glycaemic load diets effective for diabetes mellitus
- Insufficient evidence for patient education in preventing diabetic foot ulceration
- Some evidence of improvement in glycaemic control with treatment of periodontal disease in people with diabetes mellitus
- Limited evidence for targeting intensive glycaemic control in Type 2 diabetes
- Culturally appropriate health education for Type 2 diabetes is effective in the short term
- Computer-based self-management interventions effective in diabetes
- ACE inhibitors prevent diabetic kidney disease

### DISCUSSION

**Hospital admission**
- At 12 months, fewer admissions in family therapy group, but this difference was non-significant.

**Global state improvement**
- At 12 months, greater improvement in family therapy group, but this difference was non-significant.

**Antipsychotic medication increase**
- At 3 months, a slight increase in medication in the standard care group, but the difference between groups was non-significant.

**References**