DEMENTIA PATIENTS AND THEIR CAREGIVERS: IS THERE A ROLE FOR COMPASSION FOCUSED THERAPY?

Cátia Martins da Silva¹, Antónia Fornelos², Sofia Gomes³

1 - Service B, Hospital de Magalhães Lemos
2 – Psychiatry Department, Centro Hospitalar de Trás-os-Montes e Alto Douro
3 – Psychogeriatric Service, Hospital de Magalhães Lemos

Background

Dementia is a progressive and incurable neurological disease with a significant impact on the 21st century society, not only for its prognosis and disability, but also for its increasing prevalence and the emotional, social and financial burden it represents for caregivers¹⁻⁴.

The majority of these patients live in the community and receive care from a family member, being estimated that 15 to 32% of their caregivers experience symptoms of depression¹. Anxiety and depression also seem to be higher in patients with dementia, specially in the early stages, when there is greater awareness of the deficits, being estimated

that 50% develop minor or major depression¹. Shame and self-criticism, may play an important role in both patients and caregivers suffering, for all the above-mentioned reasons and for the stigma around mental disorders^{1,5}.

Current treatment for dementia focus essentially on behavioral control and cognitive stimulation, with emotional issues being quite neglected^{1,5}. Compassion focused therapy (CFT) is third wave cognitive-behavioral therapy that acts on shame and self-criticism by the development of a compassionate mind^{1,5}.

Material, Methods and Aims

Search on Pubmed database with the keywords “dementia + compassion focused therapy”, “compassion + dementia + caregivers”, “dementia + self-compassion” and selection of papers by relevance to the topic, according to the titles and abstracts, resulting in a total of 5 papers.

The authors aim is to find the current knowledge on the employment of CFT in dementia patients and caregivers

Results

Craig et al. 2018: Therapeutic intervention based on CFT for patients with dementia and depression and/or anxiety⁵

- CSDD* >10 and/or RAID* ≥11

- Mild-moderate cognitive impairment (MoCA* 10 to 25; ACE-III* ≤88)
- 7 patients (6 female and 1 male)

- Ten individual one-hour sessions

- Supportive figure (caregiver) to act as “external memory” during and between sessions

* CSDD - Cornell Scale for Depression in Dementia;

RAID - Rating Anxiety in Dementia;

MoCA - Montreal Cognitive Assessment ;

ACE-III - Addenbrooke’s Cognitive Assessment III

Results⁵

Depression: 6 patients scored in the clinical range for depression at baseline, 5 had a decrease in depression scores across the intervention, with 3 moving from the clinical to the subclinical range	Anxiety : All patients scored in the clinical range for anxiety at baseline → reduction in all, none with clinical significance and only 2 moved to subclinical range
Quality of Life : No significant change	Self-Compassion: 6 patients improved, 4 with clinical significance

Collins et al. 2017: Therapeutic intervention based on CFT for patients with dementia and their spouse caregiver¹

- From mild to late stages of dementia

- Couples struggling with acceptance of the diagnosis
- 32 patients (12 female and 20 male) and their spouses (64 participants)

- Ten groups, two-hour 6 weekly group sessions

Results in Patients¹

Depression: Significant reduction of HADS[†] scores, specially in those with “borderline” or “abnormal” baseline scores

Anxiety: Overall, no significant reduction of HADS[†] scores, but 57% of those with “borderline” or “abnormal” baseline scores revealed significant improvement

Respiratory Rate[‡]: Significant reduction

Quality of Life[‡] : Significant improvement

Results in Spouses¹

Depression: Overall, no significant reduction of HADS[†] scores, but 80% of those with “borderline” or “abnormal” baseline scores revealed significant improvement

Anxiety: Overall, no significant reduction of HADS[†] scores, but 50% of those with “borderline” or “abnormal” baseline scores revealed significant improvement

† HADS – Hospital Anxiety and Depression Scale

Respiratory Rate[‡]: Significant reduction

‡ Compassion activates the soothing system and this activation is associated to a reduction in respiratory rate

Discussion

- Despite the promising results of CBT for the emotional burden of dementia, research is still quite limited, particularly on CFT^{1,5}.

- Up to the moment and as far as the authors found in their research, there are only two studies on CFT for dementia, one including caregivers. There are three more studies on compassion and some principles of CFT for dementia caregivers, but they cannot be considered a CFT intervention. However, they reinforce the value of strategies to develop compassion in this population ¹⁻⁵.

- Current studies on CFT for dementia show feasibility, positive outcomes and no adverse effects but they are scarce and have many limitations (small sample size, no control-group, no robust evidence of efficacy, small number of individuals with clinical scores of anxiety or depression, no scores of shame...) ^{1,5}.

- Further well-designed studies are needed to draw firm conclusions on the utility of CFT on dementia

Corresponding Author: catiapriscila@hmlemos.min-saude.pt

References

1 - Collins RN, Gilligan LJ, Poz R. The Evaluation of a Compassion-Focused Therapy Group for Couples Experiencing a Dementia Diagnosis. Clin Gerontol. 2018 Oct-Dec;41(5):474-486 | 2 - Schulz R, Savlab J, Czajac SJ, Monind J. The role of compassion, suffering, and intrusive thoughts in dementia caregiver depression. Aging Ment Health. 2017 Sep;21(9):997-1004 | 3 - Danușcalov MAD, Kozasa EH, Afonso RF, Galduroz JCF, Leite JR. Yoga and compassion meditation program improve quality of life and self-compassion in family caregivers of Alzheimer’s disease patients: A randomized controlled trial. Geriatr Gerontol Int. 2017 Jan;17(1):85-91 | 4 - Lloyd J, Muers J, Patterson TJ, Marczak M. Self-Compassion, Coping Strategies, and Caregiver Burden in Caregivers of People with Dementia. Clin Gerontol. 2019 Jan-Feb;42(1):47-59 | 5 - Craig C, Hiskey S, Royan L, Poz R, Spector A. Compassion focused therapy for people with dementia: A feasibility study. Int J Geriatr Psychiatry 2018 Dec;33(12):1727-1735