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Psychosocial interventions for stroke survivors, carers and survivor-carer dyads: a systematic review and meta-analysis

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Background. Stroke can profoundly impair the psychosocial health of stroke survivors and their carers. Despite improving depression and anxiety in individuals with coronary heart disease, chronic kidney disease and diabetes, psychosocial interventions have not been comprehensively or consistently reviewed among stroke survivor, carer and survivor-carer dyad populations to-date.

Purpose. To evaluate the effectiveness of psychosocial interventions on depressive symptoms, anxiety symptoms, quality of life, self-efficacy, coping, carer strain and carer satisfaction among stroke survivors, carers and survivor-carer dyads.

Methods. A systematic review and meta-analysis of randomized controlled trials of psychosocial interventions compared to usual care for stroke survivors, carers and survivor-carer dyads, compared to usual care. Outcomes measured were: depressive symptoms, anxiety symptoms, quality of life, coping, self-efficacy, carer strain and carer satisfaction.

Results. Thirty-one randomized controlled trials (n=5715) were included in the systematic review which found improvements in depressive symptoms, anxiety symptoms, quality of life and coping, though the number of trials assessing each outcome varied. A meta-analysis (11 trials; n=1280) focusing on depressive symptoms found that in seven trials psychosocial interventions reduced depressive symptoms in stroke survivors (SMD: -0.36, 95% CI -0.73 to 0.00; p =0.05) and in six trials reduced depressive symptoms in carers (SMD: -0.20, 95% CI -.40 to 0.00; p = 0.05).

Conclusions. Psychosocial interventions reduced depressive symptoms in stroke survivors and their carers. There was limited evidence that such interventions reduced anxiety symptoms, or improved quality of life and coping for stroke survivors and carers and no evidence that they improved self-efficacy, carer strain or carer satisfaction.