

The Effectiveness of Acupuncture in the Management of Psychosis – An Evaluation

Helen Rogers

Edited and abridged by Dominic Harbinson

Introduction

This article is an edited and abridged version of a report evaluating the effectiveness of acupuncture for people with psychosis. The report, by Dr Helen Rogers, was based on research conducted in 2008-2009 into the acupuncture service delivered at the Broadway North Resource Centre in Walsall.

The report was commissioned by Walsall Service Users Empowerment and is grounded in the perspectives of services users and, where appropriate, their carers, spouses or partners. Service users and carers contributed to the project's methodology and implementation, being involved in the drafting of some of the project's research tools as well as in the collection and collation of the data.

The study is a timely piece of work since the Department of Health is actively seeking to promote the engagement and involvement of patients, service users and members of the public in all aspects of health and social care provision. The final report is available in electronic format on email request to enquiries@walsall.org.uk

Study Participants

All participants had a diagnosis of either schizophrenia or bipolar illness in their varying forms. All had experienced, or were still experiencing, some degree of psychosis. Some participants had also been diagnosed with a personality disorder. High levels of anxiety and/or depression and chronic sleep difficulties were also common.

Participants were referred to the Broadway North service by their social workers, CPNs (Community Psychiatric Nurses), occupational therapists, clinical psychologists, and psychiatrists working within Community Mental Health Trusts, as well as Early Intervention, Assertive Outreach, and Community Rehabilitation teams.

All but one of the participants were unemployed and there was considerable variation in the type and size of support networks to which they had access. Most relied heavily on family members, spouses/partners or long-standing friendships. With the exception of staff from Broadway North or the individual's mental health care coordinator (CPN or social worker) there was little evidence to suggest the presence of wider social networks.

The age and gender of the participants are summarised in the table below.

Table 1: Age and Gender of Participants

	Cohort 1	Cohort 2
Sex		
Male	5	7
Female	3	6
Total	8	13
Age		
18-35	3	3
36-50	2	9
51-65	3	1
Total	8	13

For the purposes of the research study, participants were divided into two cohorts, the first cohort consisting of 8 people, the second 13. Participants received acupuncture at the Broadway North Resource Centre twice a week for a period of 12 weeks.

Methodology

Both quantitative and qualitative methodological approaches were adopted in the research design, as shown in the table below. Quantitative data were gathered by means of four standardised and validated tools – the Hospital Anxiety and Depression (HAD) Scale, the Early Signs Scale (ESS), the Belief in Voices Questionnaire and the Pittsburgh Sleep Quality Index (PSQI).

Table 2: Research Tools

	Cohort 1 (N=8)	Cohort 2 (N=13)
Quantitative Data		
Hospital Anxiety and Depression (HAD) Scale	Yes	Yes
Belief in Voices Questionnaire	Yes	–
Pittsburgh Sleep Quality Index (PSQI)	–	Yes
Early Signs Scale (ESS)	Yes	Yes
Qualitative Data		
Semi-structured interviews	Yes	Yes

Service users in the first cohort were asked to complete the self-reporting quantitative questionnaires over three time periods (before, during and after treatment). For the second cohort, a simpler two-point timescale (before and after treatment) was adopted, and the Belief in Voices Questionnaire was replaced by the Pittsburgh Sleep Quality Index (PSQI) which assesses sleep quality before and after an intervention (in this case acupuncture). The rationale for this was founded on the belief that a person’s ability to rest and have undisturbed sleep is a key determinant for

their general mental and physical well being which may, or may not, have improved as a result of acupuncture.

For qualitative data collection, participants and, where appropriate, their carers, relatives or partners, were asked to take part in a semi-structured interview. The interviews were held four to six weeks after completing the course of acupuncture and enabled the collection of much richer, contextual data relating to individual experiences.

Qualitative Findings

The Importance of Community Based Services

The semi-structured interviews provided overwhelming evidence that, for both service users and their carers, community based services in a non-stigmatising environment such as Broadway North were preferable to services offered in a hospital setting. There was a sense that while inpatient facilities offered a degree of safety, particularly after an overdose or other self-harming behaviour, the length of stay was often unnecessarily long.

Individuals from both cohorts and their carers were very appreciative of the opportunities offered by Broadway North to understand mental health problems and to develop strategies to minimise the impact of symptoms. It was also apparent that individuals who had support networks outside mental health services tended to see their mental health problem as more of a hindrance than a disability.



Figure 1: A service user’s representation of the effect acupuncture has in driving back the feelings of mental illness

The Benefits of Acupuncture

Strong and recurrent themes emerging from the semi-structured interviews focus on the inter-related benefits of:

- significantly improved sleep patterns
- reduced anxiety and stress levels
- better physical health
- better eating habits
- increased self confidence, self esteem and self worth

Looking at some of these aspects in detail, the ability to sleep well appeared to be a significant determinant of how participants felt about themselves. There was overwhelming evidence to suggest significant improvements in both the quality and quantity of sleep.

“Before acupuncture, I couldn’t sleep. I had to try to get by on two hours a night. I was so tense. Now, I have about eight hours. Even sleeping pills didn’t do that for me.”

“I’m sleeping from 10.30 to 7.30 but before I was going to bed at 4 or 5 in the morning and then getting up an hour later. I couldn’t function.”

A relatively good night’s sleep enables individuals to feel more refreshed, less anxious and better equipped to face the following day. It became clear from the interviews that improvements in sleep have had a positive knock-on effect on how participants feel during the day and, perhaps more significantly, how they can deal with day-to-day problems and issues which previously provoked considerable anxiety and stress.

“It has helped a bit with my mental health. I don’t think the TV is talking to me as much – I haven’t been wound up. I feel that I sleep a lot better and I have a better mood.”

“I found the first few weeks had no benefit at all and then it started to work. It’s helped me in terms of it’s calmed me down. I’m a lot more relaxed and laid back. Problems don’t seem to be as big.”

“It’s great. I’m sleeping better all through the night, much better than before. There doesn’t seem to be any change in levels of anxiety but I’m not so depressed – I’m much happier now and I think that’s because of the acupuncture. I feel much better in myself, better because I’m more active and not drifting off to sleep. It’s helping with my voices, they’re better than they were.”

“I think acupuncture is reinforcing the resilience to be able to deal with pressures and stresses. It gives me a greater strength and seeks to reinforce the feelings of being well... I think that acupuncture has certainly helped me to deal with the anxiety. It hasn’t made me a less anxious person but it has made me better equipped to deal with it. I’m convinced because I can’t think of anything else which would have helped as I have changed nothing else.”

Similar effects were also noted by the carers of service users:

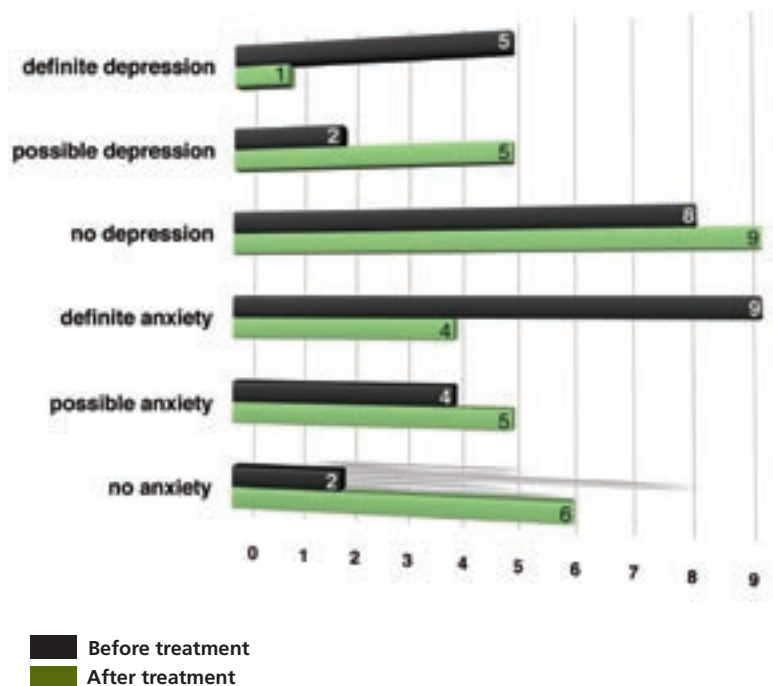
“I think he’s definitely improved, in particular his sleep patterns. It also seems to have raised his spirits. I’ve noticed when he’s had a session, he seems very enthusiastic and very relaxed and definitely I think the longer the duration and the more regular the sessions, the better he is. I’ve noticed that if he misses a session or a couple over a couple of weeks, his sleep pattern becomes what I think is abnormal.”

Some participants also reported that physical health problems such as menstrual difficulties or digestive upsets were alleviated by the acupuncture. There was also evidence in a small handful of cases that a more relaxed and calmer state of mind had also led to improved self-esteem and self-confidence. Individuals reported being able to do things they had not felt able to do for some time, whether this involved going into shops, attending football matches or coping better with crowds.

“When I first started having acupuncture, I couldn’t talk to anybody and I couldn’t make eye contact and I was just totally withdrawn. But the acupuncture after a while kept me on an even keel and reduced my stress. I’ve not been so up and down.”

“I feel healthier and not as anxious. I’ve even been down Walsall - before I couldn’t face the crowds. I’m not saying that it’s a walk in the park but it’s certainly better.”

Figure 2: Hospital Anxiety & Depression Scale Results (n=15)



Quantitative Data

Turning to the quantitative aspects of the study, the aggregated results of the Hospital Anxiety & Depression Scale for both cohorts (shown in the figure below) support the positive findings of the interviews. The data, recorded before and after treatment, suggest that, generally speaking, participants experienced a distinct progression away from depression and anxiety.

The Belief in Voices questionnaire was only applied to the first cohort. It has not been subject to analysis here because only two people completed it, with one of these responses being ‘spoilt’.

For the second cohort, it was replaced by the Pittsburgh Sleep Quality Index (PSQI). A total of nine participants were assessed in this way and all but two of them reported significant positive changes in their sleep patterns, with one reporting no change and the other a deterioration.

Similar positive results were recorded from the Early Signs Scale questionnaire. The results for all but one of the participants – in terms of the scores recorded after the course of treatment compared to those recorded before treatment began – indicate an overall improvement in their mental health.

Conclusion

There is strong evidence from both the validated quantitative research tools and the semi-structured interviews that the individuals concerned, and their carers, perceive there to be significant improvements in service users’ mental health and general well-being following a course of acupuncture.

These improvements are summarised in the figure below.

Figure 3: The Benefits of Acupuncture

