

# Interventions assessed in trials on mental health services for serious mental illness were heterogeneous and this prevented a simplified classification

## The Problem

There is a wide range of heterogeneous interventions encompassing Mental Health Services and the lack of consensus in their definitions and classifications. This may pose challenges when synthesizing the available trials in systematic reviews for their dissemination.

We aimed to produce a map of the available randomized evidence (RCTs) for mental health services interventions for serious mental illness and to identify areas where data synthesis may be beneficial.

## Methods

1. This mapping study was carried out in accordance with the methodology of the Global Evidence Mapping Initiative
2. The Cochrane Schizophrenia Specialized Register was searched in February 2010.
3. We extracted the study data characteristics and the main PICO (population, intervention, comparison, outcome) question for each trial.
4. The PICO questions were mapped into the current classification system (European Service Mapping Schedule, ESMS) and adapted when necessary.

## Key Results

- 239 studies were included in the map (see **Figure 1**)
- Most of the trials were conducted in North America, Europe, China and Australia. There is a lack of RCTs in lower-middle income countries (see **Figure 2**)
- 93.70% of the studies had a parallel design followed by the cluster design (5%)
- The studies included a participants with heterogeneous characteristics (e.g. age and diagnosis)
- Most interventions were classified by modified ESMS (see **Table 1 and 2**) in more than one category

Figure 1. Study flow diagram

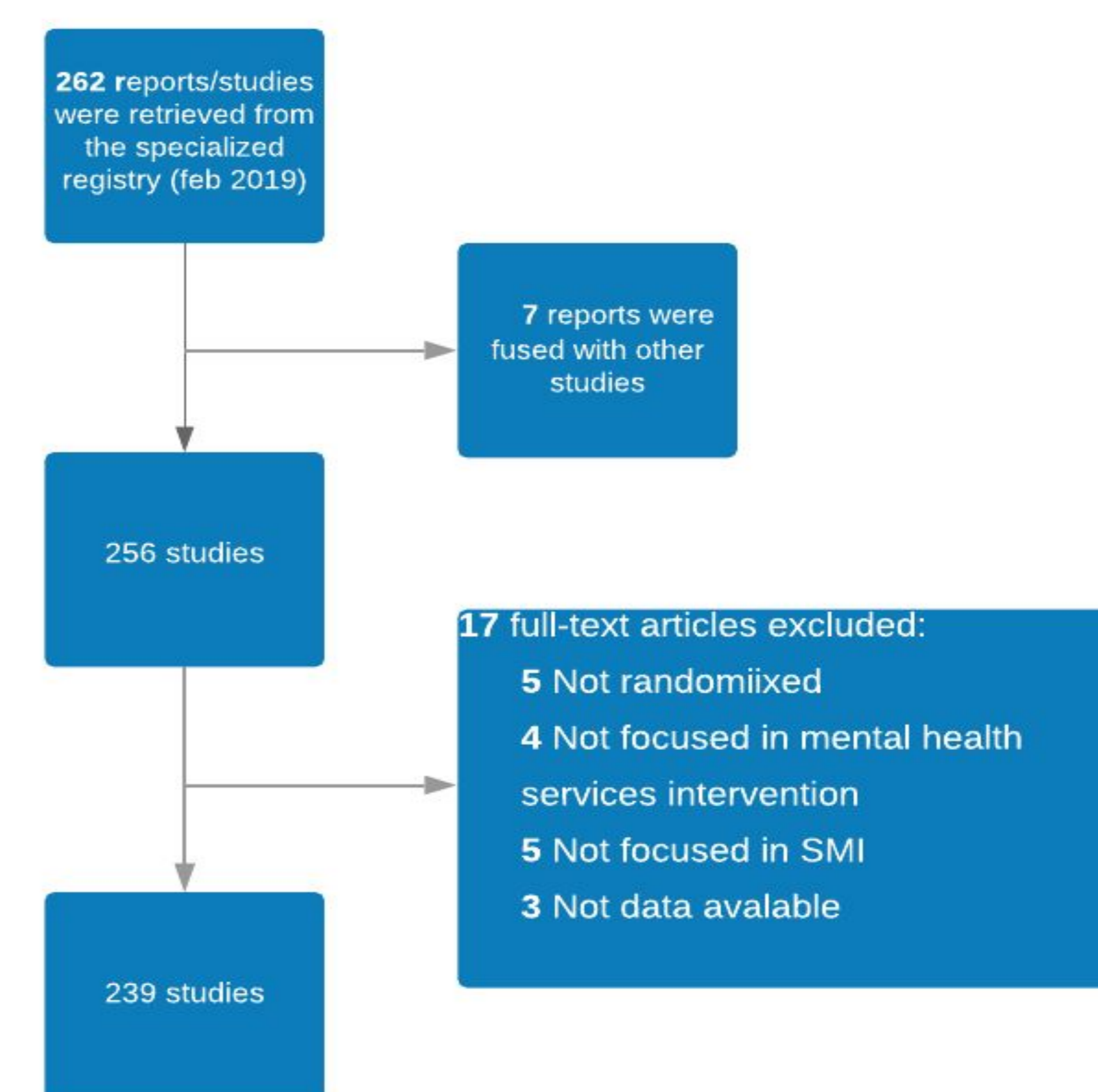


Table 1. Characteristics of RCTs

Sample size (median and IQ range)	132 (92 to 331)
Special population (e.g. military, only women, adolescents)	11/239 (4.6%)
Also included participants with non-severe mental illness (e.g. homeless, families, etc.)	48 /239 (20%)
Setting	22/139 inpatient/outpatient 27/139 inpatient 190/139 outpatient
Provider	83/139 nursing staff Others: miscellaneous (mental health team, psychiatrist, etc.)

Figure 2: Country studies

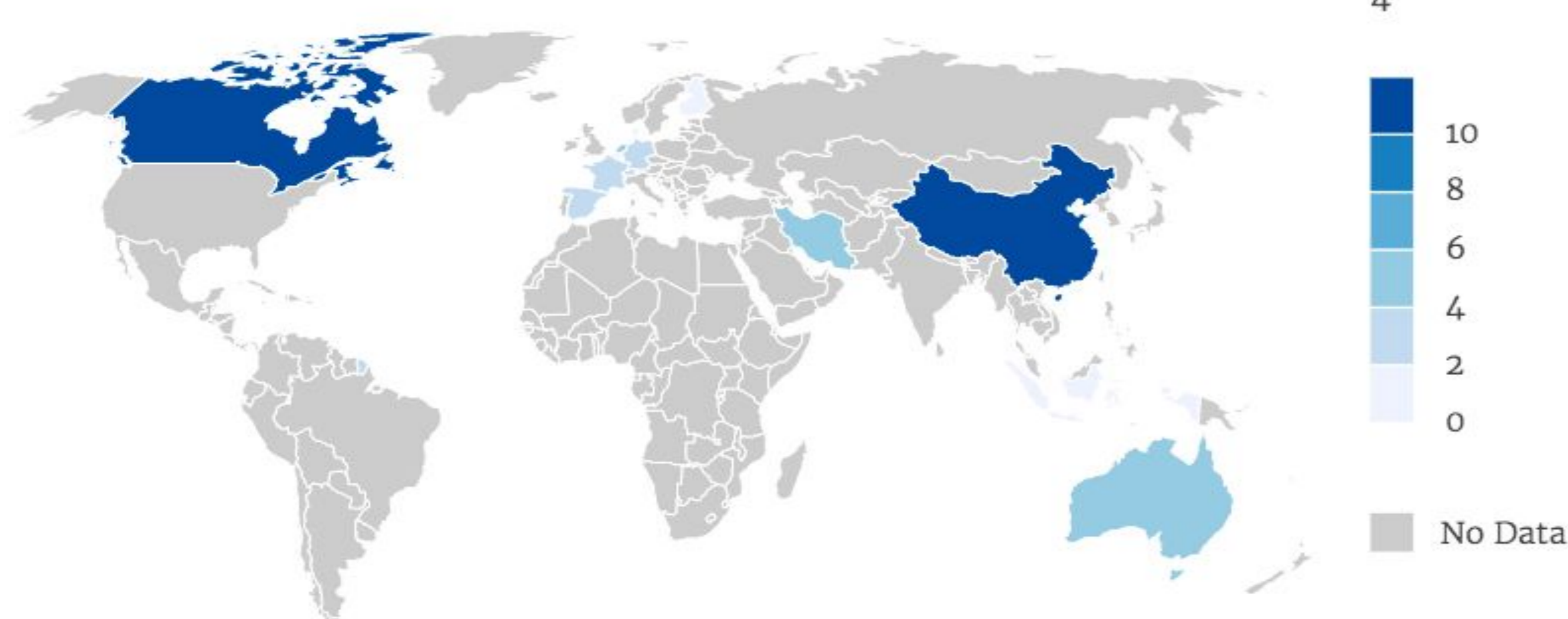


Table 2. Classification according to the ESMS

Number of trials per classification (%)	Ambulatory assistance	98 (41)
	Information/valoration	71 (17)
	eHealth	51 (21)
	Residencial services	46 (19)
	Day Services/Outpatient Care	43 (17)
	Accessibility to Care	35 (14)
	Housing	24 (10)
	Discharge service	16 (6)
	Self-Help and Voluntary Help	8 (3)
Number of classifications per trial (%)	1 classification	112 (46.9)
	2 classifications	81 (33.9)
	3 classifications	26 (10.9)
	4 or more classifications	20 (8.37)

## Mental health services for serious mental illness: a map of randomized controlled trials



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