

## **Psychosocial interventions in cardiovascular disease**

**Professor David Thompson**

Psychosocial issues are increasingly important for patients, families and carers in terms of health outcomes and ill-health causes, but are comparatively under-researched and poorly addressed. Psychosocial factors such as depression, anxiety, stress and social isolation increase the risk of cardiovascular events, inhibit resumption of normal activities and adherence to treatments, attenuate healthcare costs and diminish quality of life and well-being.

There is growing, though admittedly mixed, evidence from large, multicentre trials and systematic reviews and meta-analyses attesting to the effectiveness of psychosocial interventions in people with cardiovascular disease. However, in many studies to date, the interventions are often complex, poorly conceptualized and described/reported, on small samples and the delivery systems for the intervention are often limited. For example, some studies focus on one outcome and many often report only short-term effects.

In order to be more confident in the findings from psychosocial interventions, which are after all complex interventions, there needs to be more clarity about the precise nature of the intervention, including its content, mode of delivery, timing, duration and location. To enable evaluation, comparison and reproducibility of a psychosocial intervention, it is helpful to apply a taxonomy that defines the risk factor, the target of the intervention and when and where to intervene. Studies of effectiveness should be replicated and compared before interventions are integrated into routine patient management.