

Journal Watch – Depression – February 2018

Article:

Pilot randomized controlled trial of focused narrative intervention for moderate to severe depression in palliative care patients: DISCERN trial

Lloyd-Williams M, Shiels C, Ellis J, Abba K, Gaynor E, Wilson K and Dowrick C.

Palliative Medicine. 2018; 32(1) 206-215. doi:10.1177/0269216317711322

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Review:

Strengths: Important topic, randomisation for trial arm assignment. Use of validated tools (PHQ-9, PROM, ?ESAS). Trained researchers conducted semi-structured interviews. Had plans for patients endorsing distressing symptoms. Random interviews were monitored by PI for fidelity.

Weaknesses: Unblinded trial arm assignment; did not elaborate on “trained researchers” who conducted the interviews (i.e., how many, or what their training was). The authors also did not elaborate on the content of the interviewee responses; the control groups and intervention groups were significantly different at the outset in PHQ-9 scores. One would also question if the addition of an item “will to live” alters the validation of the ESAS-r tool. It was also not clear (and there was limited discussion in the article) if the statistical difference detected by the study would be clinically significant. Did not comment in detail on the pharmacological interventions, or the other hospice day program interventions. Other than the PROM, no comment (qualitatively) on patient experience of intervention

Relevance to Palliative care: Depression is a common symptom with patients, and having an intervention that is not too burdensome is beneficial; additional information on patient perspective of this intervention would be valuable.