

CAHE JC Critically Appraised Article Summary

Journal Club Details

Date of submission	May 2009
Journal Club location	Southern Therapy Service
JC Facilitator	Greta French-Kennedy
JC Discipline/s	Multi-disciplinary

Clinical Scenario

Is group exercise effective in reducing symptoms of depression or anxiety among older clients?

Review Question/PICO/PACO

- P** Elderly people
- I** Group exercise program
- C** No exercise
- O** reduction of symptoms (depression or anxiety)

Article/Paper

Mather AS, et al. Effects of exercise on depressive symptoms in older adults with poorly responsive depressive disorder. *British Journal of Psychiatry* 2002; 180: 411-415.

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Article Methodology:	Randomised controlled trial
Returned JC on:	19 May 2009
By CAHE staff member:	Lucylynn Lizarondo

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Ques No.	Yes	Can't Tell	No	Comments
1	✓			The study asked a clearly focused question. <i>Participants:</i> Clients 53 years and older with a diagnosis of affective disorder based on ICD-10; receiving anti-depressant therapy for at last 6 weeks without evidence of sustained response <i>Intervention:</i> Weight-bearing exercise (endurance, strengthening, stretching) performed with music and lasted for 45 minutes; control group received 30-40 min health education talks twice weekly <i>Outcomes:</i> <ul style="list-style-type: none"> A. Hamilton Rating Scale for Depression – primary outcome measure B. Geriatric Depression Scale C. Clinical Global Impression D. Patient Global Impression
2	✓			The study was a randomised controlled trial, which was an appropriate approach for examining effectiveness of an intervention. Is it worth continuing? YES
3		✓		Participants were randomly allocated into exercise and control group by a computer-generated random number table. The groups were well-matched at baseline (demographics and baseline depression scores), except for a higher proportion of females in the exercise group. It is not clear whether gender has significant association with a client's response to treatment.
4	✓			The assessments were made by psychiatrists who were blind to treatment allocation. It would be difficult to "blind" patients in this situation as they are the ones receiving the treatment. This could have introduced bias, which would have been an issue if all the outcome measures were self-reported. In this study, the primary outcome measure (Hamilton Rating Scale) was not a self-report measure, which therefore limits the likelihood of having biased results.
5	✓			There were no drop-outs in the study, which means that all patients were included in the analysis of data.
6	✓			Outcomes were measured and collected in the same way and in the same time period for all patients in both groups.
7	✓			Power calculation was carried out so that the sample size used in the study can be considered adequate.

Ques No.	Yes	Can't Tell	No	Comments
8				Results were presented using odds ratio and confidence intervals. <i>Bottom line result:</i> There is no significant difference in the response of the exercise and control group. However, a higher proportion of the exercise group experienced reduction of symptoms compared to the control group.
9				Based on the results, as shown in the confidence intervals, no one intervention can be favoured over the other.
10				The most important patient outcomes were considered. The clients included in the trial seemed similar to the characteristics of clients in the local setting, which could mean that the results of this trial can be applied. However, the extent to which the results may be applied is still a decision that is best made by the local practitioner. There were no adverse events associated with either intervention.

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