

Oral presentation

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## Joint crisis plans for people with psychosis: economic evaluation of a randomized controlled trial

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from WPA Thematic Conference. Coercive Treatment in Psychiatry: A Comprehensive Review  
Dresden, Germany. 6–8 June 2007

Published: 19 December 2007

BMC Psychiatry 2007, 7(Suppl 1):S129 doi:10.1186/1471-244X-7-S1-S129

This abstract is available from: <http://www.biomedcentral.com/1471-244X/7/S1/S129>

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### Background

To investigate cost-effectiveness of joint crisis plans, a form of advance agreement for people with severe mental illness [1,2].

### Methods

Design: Single blind randomized controlled trial, with randomisation of individuals to Joint Crisis Plan or a standardized service information control. Setting: Eight community mental health teams in southern England. Participants: 160 people with a diagnosis of psychotic illness or non-psychotic bipolar disorder, with a hospital admission within the previous two years. Intervention: The Joint Crisis Plan was formulated by the patient, care co-ordinator, psychiatrist, and project worker, containing contact information, details of illnesses, treatments, relapse indicators, and advance statements of preferences for care for future relapses. Main outcome measures: Admission to hospital, and service use over 15 months.

### Results

Joint Crisis Plan use was associated with relatively lower service use and costs on average than the control group, but differences were not statistically significant. Total costs during follow-up were £7,264 for each Joint Crisis Plan participant and £8,359 for the control group (mean difference £1095; 95% confidence interval – £2,814 to £5,004). Cost-effectiveness acceptability curves, used to explore uncertainty in estimates of costs and effects, sug-

gest there is a greater than 78% probability that Joint Crisis Plans are more cost-effective than the standardized service information in reducing the proportion of patients admitted to hospital.

### Conclusion

Joint Crisis Plans produced a non-significant decrease in admissions and total costs. Whilst acknowledging the wide confidence intervals for the cost estimates, exploration of the associated uncertainty suggests there is a relatively high probability of Joint Crisis Plans being more cost-effective than standardized service information for people with psychotic disorders.

### References

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