TITLE: Sensory Rooms for Patients in Long-Term Care: Clinical and Cost-Effectiveness and Guidelines

DATE: 25 November 2016

RESEARCH QUESTIONS

1. What is the clinical effectiveness of sensory rooms for patients in long-term care?
2. What is the cost-effectiveness of sensory rooms for patients in long-term care?
3. What are the evidence-based guidelines regarding the use of sensory rooms for patients with dementia in long-term care?

KEY FINDINGS

Two systematic reviews, four randomized controlled trials, eight non-randomized studies, and one evidence-based guideline were identified regarding sensory rooms for patients in long-term care.

METHODS

A limited literature search was conducted on key resources including Ovid Medline, PubMed, The Cochrane Library, University of York Centre for Reviews and Dissemination (CRD) databases, ECRI Institute (Health Devices Gold), Canadian and major international health technology agencies, as well as a focused Internet search. No filters were applied to limit retrieval by publication type. Where possible, retrieval was limited to the human population. The search was also limited to English language documents published between January 1, 2006 and October 31, 2016. Internet links were provided, where available.

SELECTION CRITERIA

One reviewer screened citations and selected studies based on the inclusion criteria presented in Table 1.

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Table 1: Selection Criteria

<table>
<thead>
<tr>
<th>Population</th>
<th>Adult patients living in long-term care facilities (sub-group of interest: patients with dementia)</th>
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<tbody>
<tr>
<td>Intervention</td>
<td>Sensory rooms or multi-sensory environments (e.g., Snoezelen Rooms)</td>
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<tr>
<td>Comparator</td>
<td>Usual care</td>
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<tr>
<td>Outcomes</td>
<td>Q1: Clinical effectiveness (e.g., Improved sensory modulation and integration; emotional regulation);</td>
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<td></td>
<td>Q2: Cost-effectiveness;</td>
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<td>Q3: Guidelines</td>
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<tr>
<td>Study Designs</td>
<td>Health technology assessments, systematic reviews, meta-analyses, randomized controlled trials,</td>
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<tr>
<td></td>
<td>non-randomized studies, economic evaluations, evidence-based guidelines</td>
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</table>

RESULTS

Rapid Response reports are organized so that the higher quality evidence is presented first. Therefore, health technology assessment reports, systematic reviews, and meta-analyses are presented first. These are followed by randomized controlled trials, non-randomized studies, economic evaluations, and evidence-based guidelines.

Two systematic reviews, four randomized controlled trials, eight non-randomized studies, and one evidence-based guideline were identified regarding sensory rooms for patients in long-term care. No relevant health technology assessments or economic evaluations were identified.

Additional references of potential interest are provided in the appendix.

Health Technology Assessments
No literature identified.

Systematic Reviews and Meta-analyses


Randomized Controlled Trials


Non-Randomized Studies


Economic Evaluations
No literature identified.

Guidelines and Recommendations

See: 1.7.1.2, page 30;
1.8.1.3, page 36

PREPARED BY:
Canadian Agency for Drugs and Technologies in Health
Tel: 1-866-898-8439
www.cadth.ca
APPENDIX – FURTHER INFORMATION:

Systematic Reviews – Long-Term Care Not Specified


Randomized Controlled Trials – Long-Term Care Not Specified


Review Articles


Additional References
