TITLE: Telehealth Services for the Treatment of Psychiatric Conditions: Clinical Effectiveness, Safety, and Guidelines

DATE: 21 December 2015

RESEARCH QUESTIONS

1. What is the clinical effectiveness and safety of using telehealth services in both emergency and non-emergency psychiatric situations?

2. What are the evidence-based guidelines associated with the use of telehealth services in both emergency and non-emergency psychiatric situations?

KEY FINDINGS

Two systematic reviews, four randomized controlled trials, and one non-randomized study were identified regarding the use of telehealth services in both emergency and non-emergency psychiatric situations.

METHODS

A limited literature search was conducted on key resources including PubMed, PsycINFO via OVID, The Cochrane Library, University of York Centre for Reviews and Dissemination (CRD) databases, Canadian and major international health technology agencies, as well as a focused Internet search. No filters were applied to limit the retrieval by study type. The search was limited to English language documents published between Dec 1, 2014 and Dec 14, 2015. 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

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<tr>
<td><strong>Population</strong></td>
<td>Adults and youth with acute or chronic mental health distress or illness</td>
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<td><strong>Intervention</strong></td>
<td>Videoconference Telehealth or videoconference telemedicine (in both emergency situations and in non-emergency situations) for assessment and/or consultation</td>
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<td><strong>Comparator</strong></td>
<td>Patients seen in hospital; No comparator</td>
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<td><strong>Outcomes</strong></td>
<td>Clinical effectiveness (patient benefits and harms); Guidelines</td>
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<tr>
<td><strong>Study Designs</strong></td>
<td>Health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, non-randomized studies, evidence-based guidelines</td>
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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, and evidence-based guidelines.

Two systematic reviews, four randomized controlled trials, and one non-randomized study were identified regarding the use of telehealth services in both emergency and non-emergency psychiatric situations. No relevant health technology assessments or evidence-based guidelines 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


Guidelines and Recommendations
No literature identified.

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

Previous CADTH Reports


Non-Randomized Studies

Alternate Outcomes, Uncertain Patient Outcomes


Clinical Practice Guidelines and Recommendations – Uncertain Methodology


Review Articles


**Additional References – Working Paper with Recommendations**