

# CONTACT-GAD

## TR-GAD

Generalised anxiety disorder (GAD) is the most common anxiety disorder in older people, with an estimated prevalence of up to 11%. It is characterised by:

- Excessive anxiety and worry
- Experienced as being difficult to control, on most days for at least six months.
- It may persist for decades and is associated with a range of negative outcomes, including poor health-related quality of life, increased disability, healthcare use and functional limitations.

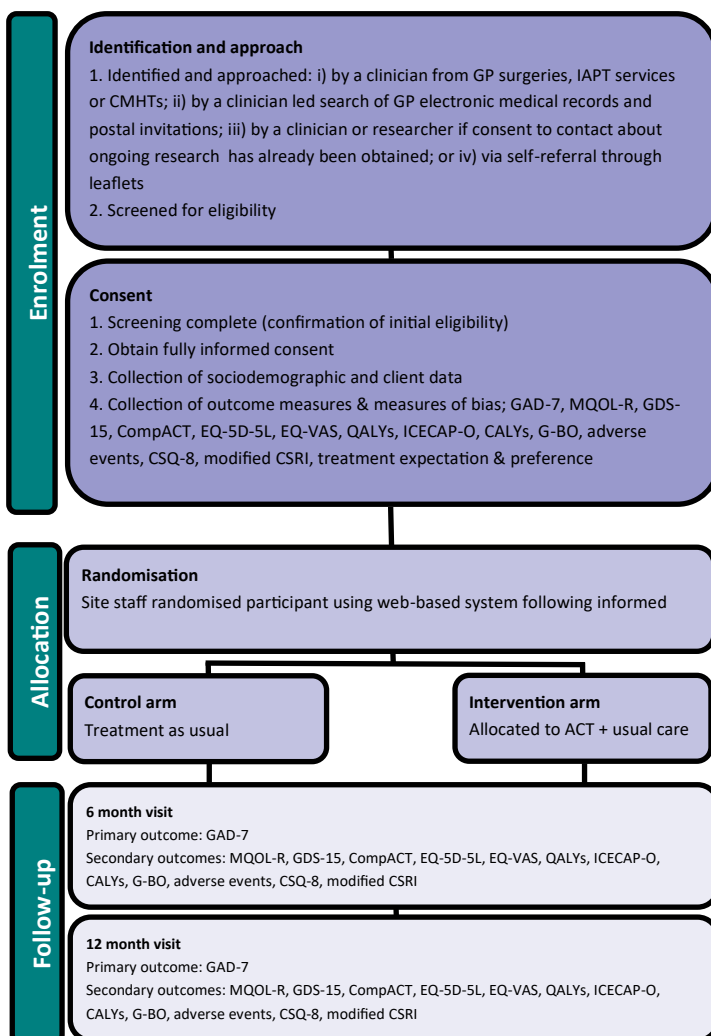
National Institute for Health and Clinical Excellence (NICE) guidelines recommend a stepped care approach to the management of GAD in the UK. Unfortunately, there is a lack of evidence to guide the management of TR-GAD in older people in the NHS. Consequently, developing treatment strategies that are acceptable and clinically effective for older people with TR-GAD is a public and mental health priority, particularly as the population ages.

## ACT

ACT is an acceptance-based behaviour therapy, that is an alternative to first-line psychotherapies such as conventional CBT or applied relaxation and is not part of the current care pathway in the UK for older people with TR-GAD. ACT is focused on increasing personally meaningful behaviour in the presence of distress and symptoms. It uses acceptance, mindfulness and motivational techniques to reduce unhelpful attempts to control negative thoughts, emotions and bodily sensations and increase engagement in life-enriching activities.

ACT has an established evidence base in a range of mental and physical health conditions relevant to older people with TR-GAD, including anxiety, depression, chronic pain, substance use and transdiagnostic groups. ACT may be particularly suited to older people with TR-GAD for several reasons. Evidence suggests that control-orientated strategies are detrimental to older people's well-being, and those who adapt to changed circumstances rather than strive to control changes are more successful in meeting age-related challenges.

Figure 1. Timeline for older people with TR-GAD in the RCT



## Aims

Primary aims are to determine the clinical and cost effectiveness of tailored ACT plus usual care in comparison to usual care alone for reducing anxiety in older people with TR-GAD.

## Method

CONTACT-GAD is an international, multicentre, single-blind, parallel, 2-arm RCT of tailored ACT plus usual care vs. usual care alone with a 9-month internal pilot phase in months 10-18. Participants are recruited from sites in the UK and Australia. All study procedures are designed so that they can be completed in person or remotely (via video call, phone, online or post), training can be completed via video call, and intervention delivery can be completed in person or via video call (depending on participant preferences and therapist availability) so that the trial can continue in the event of future COVID-19 pandemic waves and restrictions. Participants will be recruited from primary care, secondary care and via self-referral from community settings in UK and Australia. Figure 1 provides timeline for CONTACT-GAD participants.

## Results

The trial is currently still ongoing, so there are no results yet.

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