



Relapse Prevention Group Outcomes & Access to Care for Organ Transplant Candidates

Antú Segal PsyD, ABPP, Elise Adkins, MS, Kara Mayer, PsyD, Kelly Bryce, PhD, Megan Ramthun, PsyD
Transplant Institute, Henry Ford Hospital, Detroit, Michigan



Background/Significance

- Candidates for liver transplant undergo psychological evaluation prior to listing; those who endorse current/remote histories of substance misuse are required to complete six sessions of relapse prevention (RP) prior to transplant listing.
- Use of Cognitive Behavioral Therapy (CBT) for RP is supported by the research (Kahn, 2016); however, data is limited regarding RP in the transplant population.
- Some may struggle to locate and engage in the appropriate treatment, which is a barrier to transplantation.
- Transplant psychology team created a six-week group intervention emphasizing RP with the goal of offering more comprehensive services to patients while converting to candidacy.
- Pilot study was completed to assess the efficacy of the intervention.

Methods

- Patients completed self-report measures including: Patient Health Questionnaire (PHQ-9), Generalized Anxiety Disorder Scale (GAD-7), and The Stages of Change Readiness and Treatment Eagerness Scale (SOCRATES) during the first and sixth session.
- A retrospective chart review was conducted to compare pre- and post- intervention scores.



Results

- A total of 12 candidates completed the group intervention.
- All were male and had at least one substance use disorder diagnosis.
- Five had a prior mental health diagnosis.
- Results indicated no significant differences in responses on the PHQ-9 ($p = .74$), GAD-7 ($p = .15$), or SOCRATES ($p = .27$) after the intervention.
- However, those with prior mental health treatment reported that they had taken steps to make a positive change in their behavior after the intervention, as measured by the SOCRATES ($p = .04$).
- Result are related to the 'Taking Steps' subscale on that SOCRATES measure.

Measures	Prior Mental Health Diagnosis	After Relapse Prevention Intervention
Patient Health Questionnaire (PHQ-9)	$p = 0.45$	$p = 0.74$
Generalized Anxiety Disorder (GAD-7)	$p = 0.86$	$p = 0.15$
Stages of Change Readiness and Treatment Eagerness Scale (SOCRATES)	$p = 0.04$	$p = 0.27$

Discussion

- The results of this pilot study indicate that candidates with prior mental health treatment endorsed significantly greater steps taken in their RP journeys than candidates without prior treatment.
- This suggests techniques may more readily adopt newly learned skills in RP.
- Although the hypotheses of this pilot study were otherwise not supported, this study provides compelling data for the efficacy of the CBT protocol for RP.
- The lack of statistical significance of the results is likely due in part to small sample size.
- It is anticipated that with a larger sample, greater significance will be found.
- Additionally, patients had the opportunity to engage in RP housed within the Transplant Institute allowing for conversion to candidacy in a controlled environment.

Conclusion/Implications

- Among the barriers for transplant listing may be the need to complete substance misuse treatment.
- The pilot program may demonstrate the benefit of an integrated RP group to help convert potential transplant candidates achieve candidacy for transplant listing.

References

Khan, A., Tansel, A., White, D. L., Kayani, W. T., Bano, S., Lindsay, J., ... & Kanwal, F. (2016). Efficacy of psychosocial interventions in inducing and maintaining alcohol abstinence in patients with chronic liver disease: A systematic review. *Clinical Gastroenterology and Hepatology*, 14, 191-202.