

Primary care consultation liaison effective for mental disorders

Compared to standard care and collaborative care, how effective is consultation liaison in primary care for people with mental disorders?
Consultation liaison improved mental health for up to three months, and satisfaction and adherence for up to 12 months in people with mental disorders, particularly those who were depressed. Primary care providers were also more likely to provide adequate treatment and prescribe pharmacological therapy for up to 12 months. There was also some evidence that consultation liaison might not be as effective as collaborative care in terms of mental disorder symptoms, disability, general health status, and provision of treatment.
The quality of these findings was low for all outcomes apart from consumer adherence which was of moderate quality. No conclusions could be made regarding the use of consultation liaison with people who have other mental disorders, such as schizophrenia or bipolar disorder. There was also no data which could inform practice with specific groups of people, such as children and adolescents, and the elderly.
Despite the prevalence and negative impacts of mental disorders, many people are not diagnosed or do not receive adequate treatment. Consultation liaison is a model of mental health care where the primary care provider maintains the central role in the delivery of mental health care, with a mental health specialist providing consultative support. Consultation liaison has the potential to enhance the delivery of mental health care in the primary care setting and to improve outcomes for people with a mental disorder.
Gillies D et al. Consultation liaison in primary care for people with mental disorders. Cochrane Reviews, 2015, Issue 9. Art. No.: CD007193.DOI: 10.1002/14651858. CD007193.pub2. This review contains 12 studies involving 2,605 consumer participants and over 905 primary care practitioners.

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