Today

- Thesis research
  - Background
  - Aims
  - Intervention
  - Key results
  - Implications and discussion

Questions and contact details

Chronic Fatigue Syndrome
- Medically unexplained fatigue of over six months duration, alongside a number of other symptoms
- Chronic and disabling
- NICE (2007) suggests a population epidemiology of 0.2-0.4%

Psychology?
- Psychosocial factors contributing to maintenance
- Holistic view of well-being – living with chronic illness
- PACE trial – CBT and GET as recommended interventions

Acceptance
- Definition: willingness to live with illness without reactance, disapproval or attempts to reduce or avoid it
- Positive outcomes in other chronic health conditions – quality of life, symptom reduction

Acceptance and Commitment Therapy
- Developed by Stephen Hayes and colleagues
- Contextual Behavioural Science
- 6 core processes: mindfulness and acceptance based processes in conjunction with behavioural change

PSYCHOLOGICAL FLEXIBILITY
This study…

Aims

• To examine the effects of an ACT self-help intervention on self-report and behavioural measures of change in people with CFS, specifically in relation to core processes outlined by the model underpinning ACT.

• To explore via qualitative data whether this intervention might be feasible and acceptable for this population.

Design and participants

• Multiple single case design: six participants, six weeks

• Comprehensive, repeated mixed measures

• Visual analysis, reliable and clinically significant change, self-reported change

Measures

• Psychological Flexibility

• ACT Process measures

• CFS measures

• Behavioural – Fitbit

• Implicit – IRAP

Key results (1)

• Overall, psychological flexibility appears to have increased upon introduction of the intervention and been maintained at follow up, beyond what might have been expected from baseline trends, in three out of six participants (P2,4,6).

P2
Key results (2)
- Engaged living scale: significant change in 5/6 participants post intervention, maintained at follow up in 4/6

Key results (3)
- Increased activity in all participants at post-intervention, maintained at follow up in three

Key results (4)
- Acceptance subscale of PHLMS: low initial scores improving significantly in 4/6 participants - not maintained

Summary
- Acceptable? – no adverse effects were noted, qualitative indications in support of the intervention.
- An improvement in psychological flexibility 3/6
- The values component indicated improvements for four participants that were also maintained at follow up and supported by qualitative data - this is furthermore a distinct addition to current therapeutic components.
- Acceptance scores were initially low, in line with previous literature; although this improved for four participants, it was not maintained.
- All participants wearing the Fitbit monitor evinced increased activity.
Limitations and further considerations

• Largely exploratory
• Satisfied replicability criteria but differential responding:
  - Design limitations
  - Individual factors

Scope for further research and implementation

Any questions?

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Thank you!