



## How effective are sensory modulation groups in improving self-management of mood disorders in community adult mental health settings?

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<b>Relevant Allied Health Discipline</b>	Occupational Therapy
<b>Sources searched</b>	PubMed, Medline, PsycINFO and Health Collection were used to complete searches on the 8 September 2020.
<b>Quality appraisal of the body of Evidence</b>	<b>Strength of Evidence</b> The strength of the evidence was quite poor as it consisted of 4 level IV studies, 2 qualitative studies and 1 Level II study.
	<b>Quality of Evidence</b> Most of the studies did not appear to place a large priority on blinding the participants or properly accounting for possible confounders.
	<b>Statistical significance</b> 4 of the 5 studies indicated statistically significant data within a confidence interval of at least 95%, with the other 2 studies having a positive result in the mean self-reported scores.
	<b>External Validity/Applicability</b> The studies focused on patients in acute mental health units or psychiatric/mental health inpatient units.
<b>Summary of Evidence findings</b>	The results show that sensory modulation has a positive effect on mental health patients and could be a successful intervention and treatment with further research and evidence. The evidence addressed sensory modulation and mental health disorders, however failed to explore sensory modulation as an intervention specifically for mood disorders within community and group settings.
<b>Conclusions</b>	Sensory modulation requires further quality evidence in order to measure and generalise its accuracy and efficiency and understanding the long-term impacts as an intervention for mental health disorders.
<b>Implications for clinical practice</b>	Sensory modulation appears to be an intervention that could be implemented into acute mental health settings and psychiatric/mental health inpatient units.

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2. Andersen, C., Kolmos, A., Andersen, K., Sippel, V. & Stenager, E. (2017). Applying sensory modulation to mental health inpatient care to reduce seclusion and restraint: a case control study, *Nordic Journal of Psychiatry*, 71(7), 525-28.
3. Barbic, S.P., Chan, N., Rangi, A., Bradley, J., Pattison, R., Brockmeyer, K., Leznoff, S., Smolski, Y., Toor, G., Bray, B., Leon, A., Jenkins, M. & Mathias, S. (2019). Health provider and service-user experiences of sensory modulation rooms in an acute inpatient psychiatry setting, *PLOS One*, 14(11), 1-15.
4. Chalmers, A., Harrison, S., Mollison, K., Molloy, N. & Gray, K. (2012). Establishing sensory-based approaches in mental health inpatient care: A multidisciplinary approach, *Australasian Psychiatry*, 20(1), 35-39.
5. Gardner, J. (2016). sensory modulation treatment on a psychiatric inpatient unit: Results of a pilot program, *Journal of Psychosocial Nursing & Mental Health Services*, 54, 44-51.
6. Hedlund Lindberg, M., Samuelsson, M., Perseus, K.I. & Bjorkdahl, A. (2019). The experiences of patients in using sensory rooms in psychiatric inpatient care, *International Journal of Mental Health Nursing*, 28, 930-939.
7. Lloyd, C., King, R. & Machingura, T. (2014). An investigation into the effectiveness of sensory modulation in reducing seclusion within an acute mental health unit, *Advances in Mental Health*, 12(2), 93-100.

This evidence summary has been prepared by undergraduate students as part of the HLTH 3057 Advanced Evidence Based Practice course. Due to limitations of assignment requirements reviews are limited to a maximum of 8 evidence sources. Conclusions and implications for clinical practice reported are provisional based on the evidence identified in this review and should be contextualized to local practice, clinical expertise and patient values. For further information on the review process please contact [steve.milanese@unisa.edu.au](mailto:steve.milanese@unisa.edu.au)