

# IAPT: Improving mental health while costing nothing

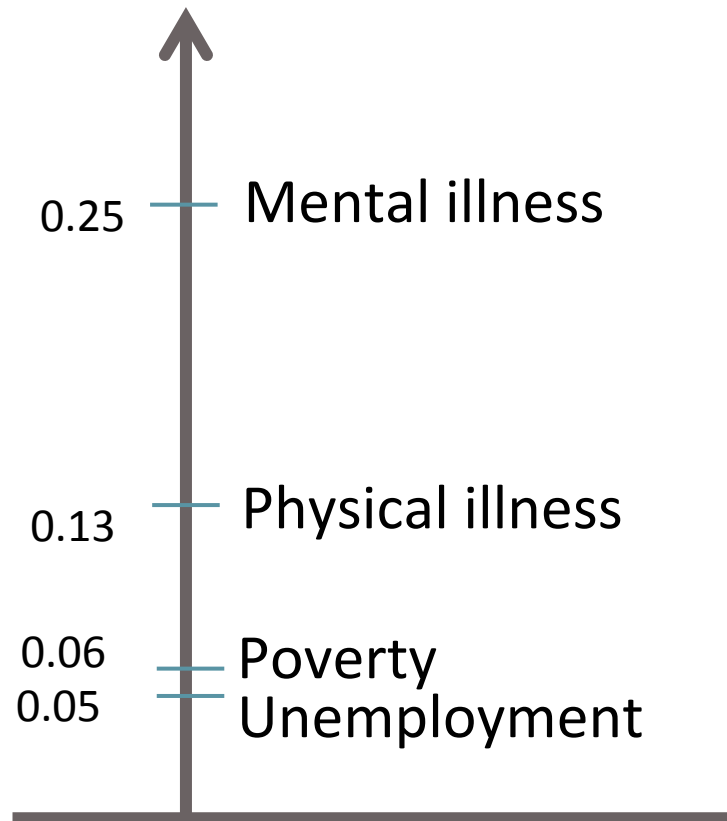
*Anxiety and Depression Network Launch*

Oxford, 17 December 2014

**Richard Layard**

# MENTAL HEALTH AND MISERY

Misery associated with



# MENTAL ILLNESS AND PHYSICAL ILLNESS

## Mental illness accounts for

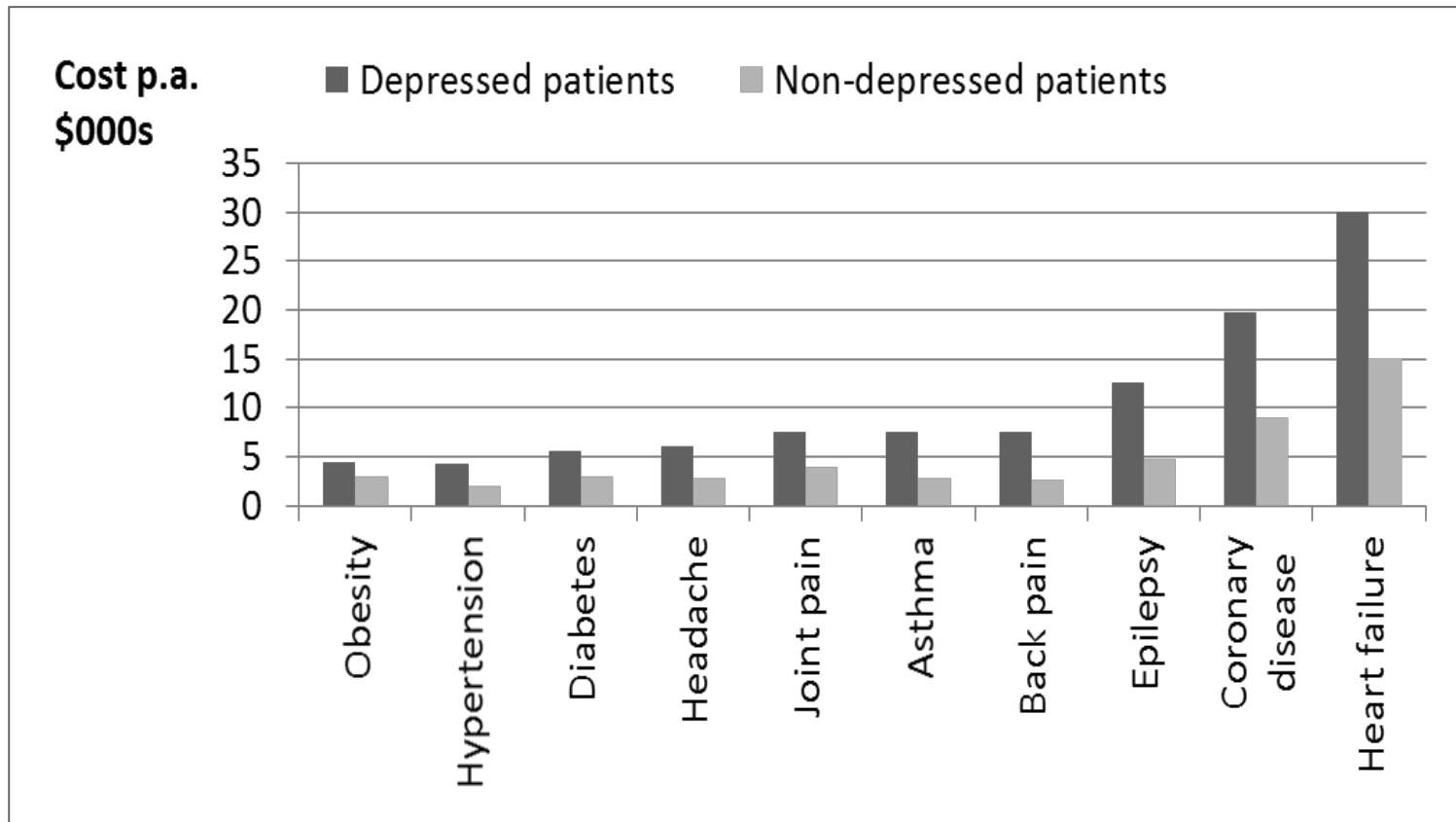
**Nearly ½ of all disability.\***

**Nearly ½ of all absenteeism.\*\***

## Mental illness can worsen physical illness

- **Depression raises mortality as much as smoking does (50%).\*\*\***
- **Mental illness increases cost of physical healthcare (for a given condition) by 50%.\*\*\*\***

## Depression increases the cost of physical healthcare (Colorado Access Insurance)



## Cost of physical healthcare, when a person is physically ill

**With co-morbid mental illness**      **£6,000 pa**

**Without mental illness**      **£4,000 pa**

**Difference**      **£2,000 pa**

**(Total extra cost is about £10 billion, plus  
£3 billion for MUS)**

# PREVALENCE AND TREATMENT RATES

## Depression and anxiety:

6 million adults (over 10 times SMI)

Of them 25% in treatment in 2007.

Almost none offered NICE-recommended psychological therapy.

**IAPT for adults.**      Sees 15% a year.  
Needs to be 25% by 2020  
(especially comorbid LTCs)

**CAMHS/IAPT.**      Need to see 33% by 2020.

# CAN WE AFFORD MORE IAPT?

## Latest actual data (2011/12)

Actual cost	<b>£213m</b>
Numbers treated	<b>330k (2 or more sessions)</b>
→ Cost per person	<b>£650</b>

Since then, notional expenditure is up, to £306m in 2013/14 and 2014/15, but patients numbers rising rapidly

# Savings from expanded IAPT

## US meta analysis of 91 trials\*

Therapy reduced annual healthcare costs by 20% (in UK £1,200).

In 26/28 studies therapy cost less than the savings generated.

## UK analysis by Dr Hassy

IAPT saved £1,050 in physical healthcare per patient.

\* Chiles et al. (1999).

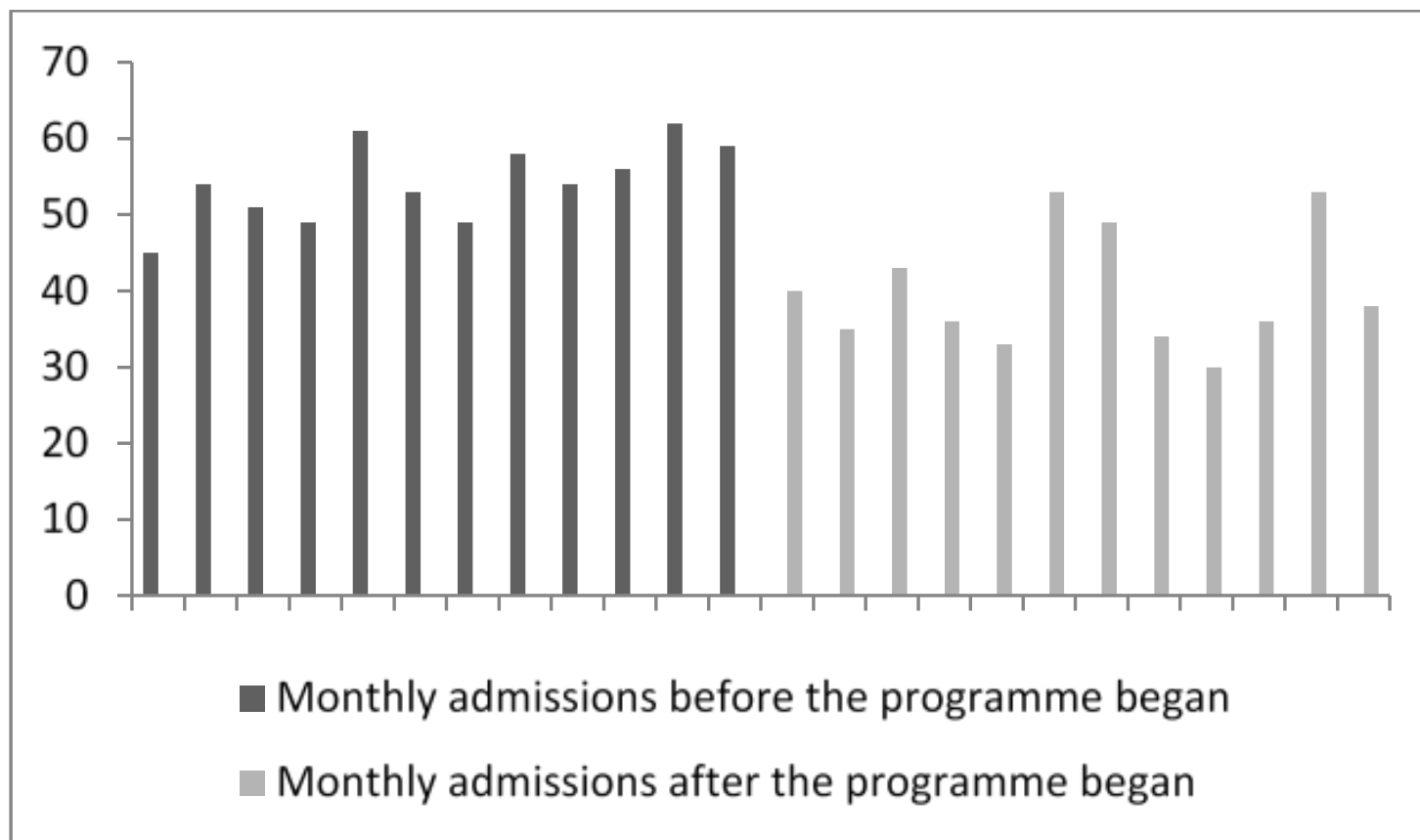


**Savings even larger when therapy is related to the physical condition (e.g. breathlessness, diabetes, angina).**

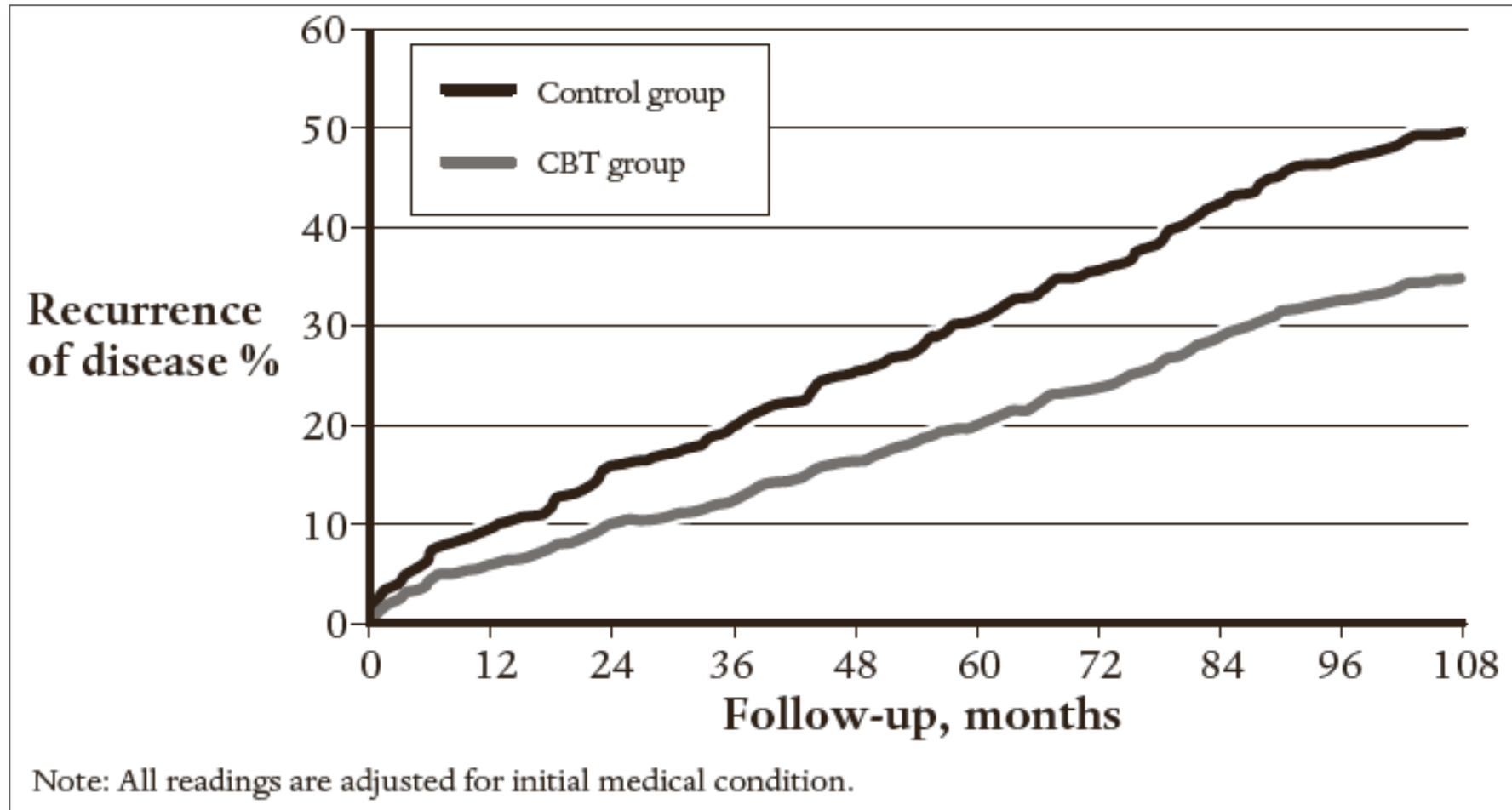
**Hillingdon Breathlessness Clinic cost £300 per patient and saved £1,300.\***

\* Layard and Clark (2014), p.184.

## A CBT programme reduced hospital admissions for refractory angina



# CBT reduces the recurrence of cardiovascular disease



## Sources of savings

Mainly directs costs of

A&E

outpatient referrals + tests

hospital admissions

They are direct savings to commissioners

# SAVINGS ON BENEFITS AND LOST TAXES

**Person on ESA costs £650 per month.**

**Cost of treatment is £650 one-off.**

**→ Cost is covered if 4% spend 25 months less on ESA**

**US trials show figures much larger than 4%.**

**So cost is covered twice over, but this is not why we do it.**

# A NO-BRAINER

**A great humanitarian project which costs nothing.**

## **Ammunition for clinicians and commissioners**

Pulls together scientific & economic arguments for IAPT & argues for evidence-based psychological therapy for ALL mental health problems.

*“Extremely easy and pleasurable to read. The most comprehensive, humane and generous study of mental health I have seen”. Melvyn Bragg*



# Thrive

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THE POWER OF EVIDENCE-BASED  
PSYCHOLOGICAL THERAPIES

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RICHARD LAYARD · DAVID M. CLARK



**ACTION FOR HAPPINESS**

[www.actionforhappiness.org](http://www.actionforhappiness.org)



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