

Randomized trial of internet delivered CBT versus group CBT, with the inclusion of a preference arm, stepped care and assessment of sudden gains

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Background

- Major depression
- Two previous trials
- Guided internet delivered self-help via the Internet
- Comparative trial of Internet vs. Live group treatment
- Preference arm (not randomized)
- Sudden gains
- Stepped care

Design and procedure

- Media attention
- N=213 screened on the Net
- N=154 inclusion criteria
- N=133 called for interview (live or telephone) using the SCID
- N=85 included
- Diagnosis confirmed by psychiatrist

Live group,
N=32

Internet, N=33

Internet
preference,
N=16

Stepped care,
N=10 or 22%
6 said yes
Four completed

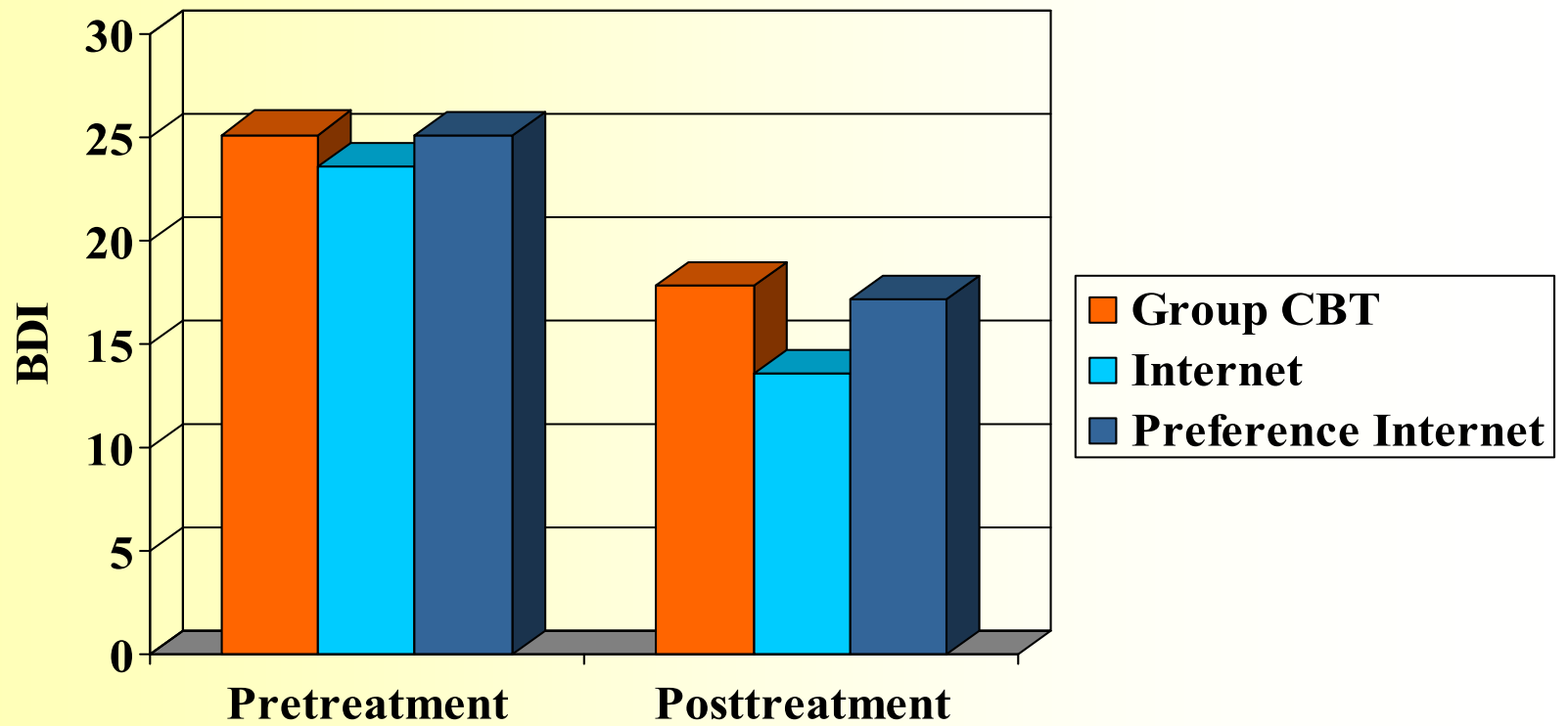
Intention to treat 7% dropout n=79

Participants

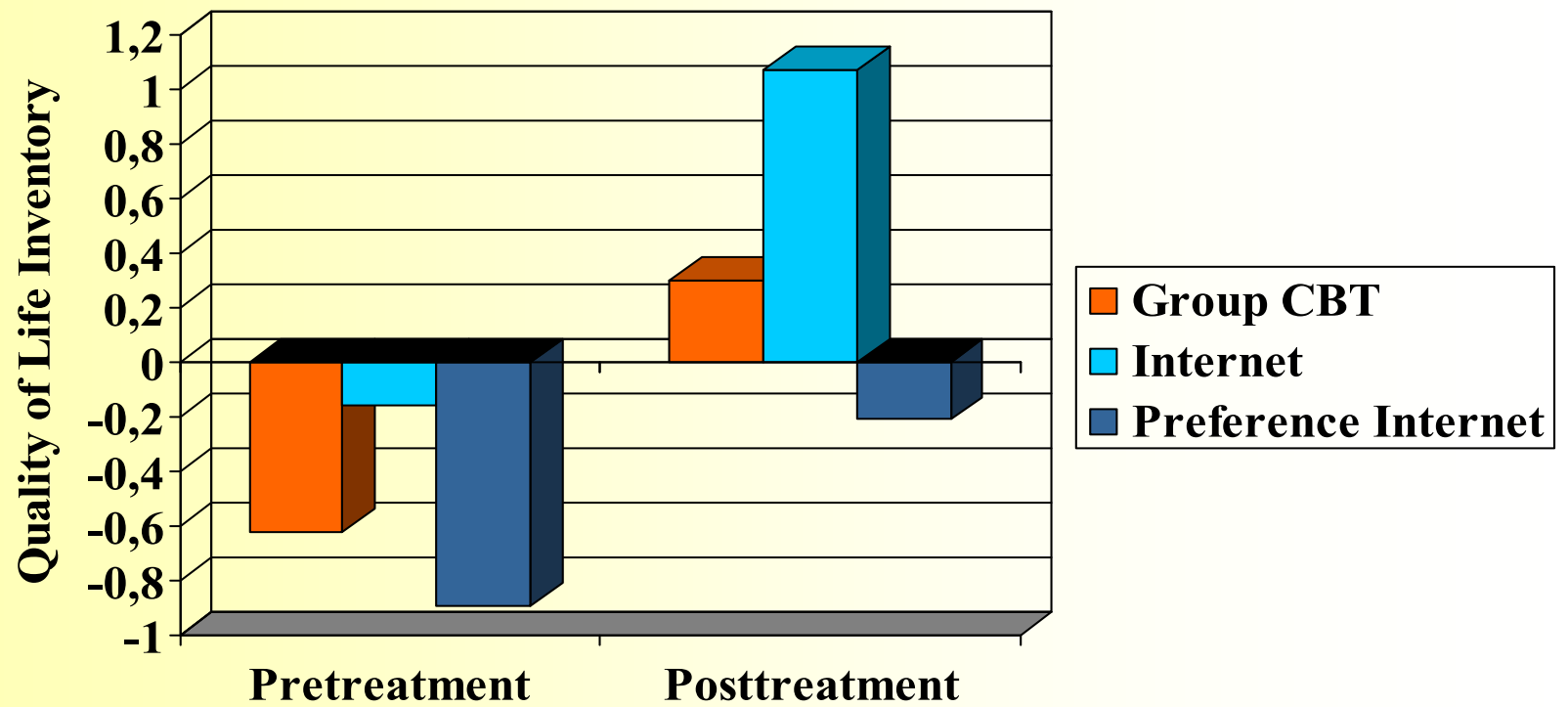
- On average female (81%), 42 years old, working (60%), not on medication (66%)
- SCID diagnosis of major depression alone (73%), dysthymia (7%) or both (20%)
- Few with avoidant personality disorder (9%)

Treatments

- Guided Internet CBT 8 weeks. On average 40 min in total per client
- Manualized group treatment with two therapists + supervision 8 2-hour sessions
- Telephone therapy in stepped care arm



Within group effect size $d=1.05$



Within group effect size $d=0.56$

More results

- On average 70% without diagnosis post-treatment
- However, lower in preference arm (36%)
- Sudden gains from weekly ratings of depression (5 MADRS points, 25% decrease, 3 weeks stability)
- 38% and no group difference

Discussion

- Why are these studies needed?
- What is the problem with stepped care?
- Guided self-help is as good as live treatment?
- Next step? Suboptimal Internet treatment as first step? Internet as second step?

