Spotlight on CBT: A summary reading in question and answer format

Part One. Cognitive Behavioural Therapy: Questions and Answers

What is Cognitive Behavioural Therapy (CBT) for depression?
CBT is a psychological therapy which has been shown to be an effective first-line treatment for depression. It refers to a group of interventions targeting maladaptive thinking (eg, self-criticism, hopelessness) and behavioural patterns (eg, inactivity, social withdrawal, avoidance).

What is the theoretical basis for CBT?
It is derived from the cognitive model of depression initially developed by the psychiatrist A.T. Beck in the 1960s. Beck’s clinical research did not support the psychoanalytic model of depression as ‘anger turned inward’. Instead, he noted that depressed individuals appeared to hold negative mental representations of themselves, their world and their future. He considered that these views were activated by negative life events, leading to negatively-biased information processing.

How does CBT differ from other psychological therapies?
It is a highly-structured, short-term, problem-focused therapy that involves teaching patients a variety of cognitive and behavioural skills to combat depression. It is focused on the ‘here and now’ and does not look for ‘deep-seated’ reasons to explain the depression.

How effective is CBT?
Current evidence indicates CBT is comparable to treatment with antidepressants but may provide more longer-term benefits. Specifically, evidence to date suggests CBT may be better than medication at preventing relapse. CBT is also a more tolerable form of treatment in terms of side effects.

What is ‘homework’ in the context of CBT?
A key feature of CBT is the assignment of homework in which the patient practices the skills learned in a session. The aim is to modify behaviours and cognitions in daily life and to promote generalisation of skills learned. Patients with depression who complete such homework have been shown to derive greater benefit from CBT.

How closely are symptoms monitored during CBT therapy?
Typically, a key component of CBT is frequent monitoring of symptom severity using psychometrically sound (reliable and valid) tools. An example of this is the use of the PHQ-9 in the Beating the Blues® online CBT programme.

How available is CBT?
The shortage of CBT therapists internationally has led to the development of other delivery methods. Computer-delivered CBT has been shown to be an effective alternative to face-to-face therapy.


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Part Two. Computerised (online) CBT

What is computerised (online) CBT?
Computerised CBT is a structured CBT programme delivered by computer (by CD or online). Programmes are interactive, with the computer making responses based on the input from the patient. Programmes have been developed for use in varied settings (eg, internet, library, GP practice or mental health setting). Some programmes are designed to require minimal clinical input other than a brief introduction and monitoring, while others are designed as an adjunct to treatment. Typically, specific programmes have been developed for specific patient groups such as, for the treatment of people with depression and/or those with anxiety disorders.

What are key requirements for computerised CBT?
Fundamental requirements for any computer-based treatment programme used in the health system is that it is easy to use, has demonstrated effectiveness, and protects the confidentiality of patient data.

What are the advantages of computerised CBT?
Computerised CBT can deliver standardised but personalised treatment. Improvement in access to CBT is a major advantage, and individual treatment sessions can be available 24-hours/day 7 days per week. Ease of data collection, including use of built-in outcome measures is a key advantage for clinicians.

What evidence is there for the use of computerised CBT for depression?
The National Institute of Clinical Excellence (NICE) 2006 systematic review concluded:

• There is some evidence that computerised CBT is as effective as CBT delivered by a trained therapist for the treatment of depression/anxiety and phobia/panic
• There is some evidence that computerised CBT is more effective than treatment as usual in the treatment of depression/anxiety
• There is evidence to support the effectiveness of Beating the Blues® as a treatment for depression.
• There is limited evidence of poorer quality that Cope and Overcoming Depression are effective as treatment.

Note that there are other online programmes for patients with depression which vary in what they offer the patient and the clinician eg, the Journal www.depression.org.nz, CRUfAD clinics www.crufad.com (formerly ClimateGP) and MoodGYM moodgym.anu.edu.au. MoodGYM is an internet-based CBT programme which was developed by the Centre for Mental Health Research at the Australian National University. These programmes have not been included in this NICE technology assessment.

This NICE review was updated for the NICE 2009 Depression guideline. The evidence supporting computerised CBT was interpreted as a ‘class effect’. Computerised CBT was recommended as a treatment option for people with persistent subthreshold depression symptoms or mild-to-moderate depression, taking into account an individual’s preferences. A similar recommendation was made for people with chronic physical health problems and...
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subthreshold depression symptoms or mild-to-moderate depression in a companion guideline (NICE Clinical Guideline 91).

The NICE Depression guideline states that computerised CBT for depression should:

- Be provided via a stand-alone or web-based programme
- Include an explanation of the CBT model, encourage tasks between sessions, and use thought-challenging and active monitoring of behaviour, thought patterns and outcomes
- Be supported by a trained practitioner, who typically provides limited facilitation of the programme and reviews progress and outcome
- Typically take place over 9 to 12 weeks, including follow-up.

What is Beating the Blues®?

Beating the Blues® is a computerised (online) CBT programme for the treatment of depression and/or anxiety. The programme uses interactive multimedia techniques and comprises a 15 minute introductory video followed by eight approximately 1-hour therapy sessions integrating both cognitive and behavioural techniques, which are designed to promote more helpful thinking styles and behaviour.

*Beating the Blues® has been used widely in the National Health Service (UK) following the findings of the NICE Technology Assessment. It has recently been made available in New Zealand through funding by the Ministry of Health. Beating the Blues® will be available to adults living in New Zealand through GP ‘prescription’ to facilitate appropriate patient monitoring.*

*For further information go to: [www.beatingtheblues.co.nz](http://www.beatingtheblues.co.nz) or contact: [mailto:btb.support@managemyhealth.co.nz](mailto:btb.support@managemyhealth.co.nz)*

**Source:** NICE Technology Assessment Report. 2006. Computerised cognitive behaviour therapy for depression and anxiety update: a systematic review and economic evaluation. Volume 10, No. 33. [www.hta.ac.uk/1405](http://www.hta.ac.uk/1405)


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