

## Cognitive Behavioral Therapy For Depression and Anxiety Disorders

### Review 13

Rodrigues, H., Figueira, I., Goncalves, R., Mendlowicz, M., Macedo, T., & Ventura, P. (2011). CBT for pharmacotherapy non-remitters: A systematic review of a next-step strategy. *Journal of Affective Disorders*, 129, 219–228. PubMed abstract available at <http://www.ncbi.nlm.nih.gov/pubmed/20863573>.

<b>Objectives</b>	Assess the efficacy of cognitive behavioral therapy (CBT) as a next-step strategy in the treatment of patients who fail to improve significantly despite drug therapy.
<b>Studies Included</b>	Seventeen U.S. and international studies from 1994 to 2009
<b>Participants in the Studies</b>	Anxiety disorder patients whose symptoms did not remit following pharmacological treatment, including Cambodian or Vietnamese refugees
<b>Settings</b>	Settings were not reported for all the studies.
<b>Outcomes</b>	Changes in diagnostic symptoms and/or remission of diagnosis; quality of life; general functioning; changes in physiologic measures (e.g., blood pressure, heart rate); changes in mental health measures
<b>Limitations of the Studies</b>	Only 8 of the 17 studies were randomized controlled trials, and those included had small sample sizes; there was lack of standardization in treatment protocols, terminology, and definitions used in reviewed studies; length of treatment, CBT techniques, and treatment format (individual or group) differed; terminology and definitions for describing nonremission or resistance to pharmacotherapy varied widely; a small number of studies used follow-up evaluation data, and those that did had varied but brief durations; participants in the studies had multiple comorbidities, which may hinder response to CBT intervention and made the analysis of the results and the comparisons across groups more complex; outcome measures varied across studies; there was a lack of blind assessment of outcomes.

### Results

The authors' search for studies of CBT as a next-step strategy after failed pharmacotherapy only yielded studies for the treatment of obsessive compulsive disorder, panic disorder, and posttraumatic stress disorder, suggesting there is a lack of studies on other anxiety disorders, such as social anxiety disorder or generalized anxiety disorder. Although further clinical trials with strong methodological designs are needed to definitely establish efficacy, the results revealed CBT is as effective as a next-step strategy for treating patients with anxiety symptoms that do not remit solely with pharmacotherapy.