Low intensity CBT & stepped care

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Overview

- What is it low intensity CBT?
- What is stepped care
- Do we need it?
- Does it work?
First: low intensity CBT
Low intensity CBT

- Self-help
- Guided self-help
- Internet CBT / E-health / CCBT
- Brief CBT
- CBT
Low intensity CBT

- **Self-help**: patient works through standardized evidence-based treatment (CBT) on his/her own
- **Guided self-help**: self-help + support from coach
- **Internet CBT / E-health / CCBT**: self-help through Internet
- **Brief CBT**: F2F CBT, limited number of sessions
- **CBT**: full F2F CBT
Evidence Internet-treatment (depression/anxiety)

Meta-analysis


And more
Diifferences in effect between Guided Self Help and face-to-face for depression and anxiety

(Cuijpers et al, psychol Med, 2010)
Low intensity CBT

How to offer????

- Matched care
- Stepped care
Stepped vs matched care

**Stepped**
- Patient
  - Low intensity tx i.e. Internet
    - High intensity tx

**Matched/usual**
- Patient
  - Diagnostic interview
    - Treatment A
      - Eg. F2F CBT
    - Treatment B
      - Eg. Internet CBT
Stepped care and low intensity CBT

- Treatments arranged according to intensity
- (almost) everyone starts with first – low intensity-treatment
- Those who do not benefit → step up
- Monitoring is essential!
- Self-help CBT (book/Internet) → ideal first step?!
Do we need stepped care?

Substitution of high intensity treatments for low intensity treatments

We do not know who will benefit from which

- Patient perspective
  - No appointments, no travel time, own pace, low intensity treatments as effective

- Provider perspective
  - Less costs, higher turnover, low intensity treatments as effective
Stepped care: evidence

- Guidelines recommend stepped care (eg NICE)
- Based on one study \textit{Van Straten et al, Acta Psych Scand, 2006}
- Treatment of depression and anxiety in outpatient mental health care
- 3 treatment arms \((n = 702)\)
  - Matched care: provider decides treatment
  - Stepped care: brief F2F treatment (Rijnders)
  - Stepped care: full CBT treatment
Stepped care: evidence

Psychopathology scores (SCL90)
Stepped care: evidence

• Conclusion:
• Offering brief treatment as effective as full CBT

• But: not really stepped care trial
• No full stepped care model
Stepped care: evidence

- Recent systematic literature search
- Stepped care depression
- +/- 10 RCTs on depression
  - 4 from the Netherlands, 3 from VU university
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Stepped care: evidence

- Few trials
- Very heterogeneous
  - Country, patients included, type of interventions
- Few included low intensity CBT
- Results heterogeneous
How to continue?

- Low intensity treatments
  - Are there, uptake will increase

- Stepped care
  - Intuitively good strategy
  - But effects and costs (compared to other strategies) are not clear yet
Thanks for your attention!

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