


Internet-Delivered Cognitive Behavioral Therapy for Major Depression and Anxiety Disorders

Elham Hoseini^{1*} , Forouzan Zare¹ 

Received: 30 December 2019 Accepted: 11 February 2020
Published 2020 Volume 1, Issue 2,

 **How to Cite:** Hoseini E, Zare F. Internet-Delivered Cognitive Behavioral Therapy for Major Depression and Anxiety Disorders. *Critical Comments in Biomedicine*. 2020; 1(2): e10021.

✉ **Elham Hoseini**
hoseini20007@yahoo.com

¹ Department of Health Technology Assessment, School of Public Health, Shahid Sadoughi University of Medical Sciences, Yazd, Iran

Dear Editor,

Advanced depression is characterized by a depressed mood and reduced interest and enjoyment in most activities. Anxiety disorders are also characterized by feelings of distress and fear that can impair one's daily functioning [1].

Depression is highly prevalent and has adverse consequences for individuals in the personal, social and economic dimensions in short and long term [1]. Statistics show a prevalence of 9.4% for anxiety disorders in a primary care sample of preschool children, which is highly persistent among these youths over a 12-month period [1].

Cognitive-behavioral therapy (CBT) is essentially an evidence-based psychotherapy used to treat depression and anxiety disorders in individuals [2].

Studies have shown that CBT has been very effective in treating anxiety disorders among young people [3, 4]. However, only a few of them treat mental health professionals with the above mentioned disorders [5-7]. Young people generally adopt technology more readily and use devices such as

computers, cell phones, and tablets. According to the estimates by a research institute, 95% of youth use the internet, 93% have a home computer, and 78% use cell phones [8]. It is desirable for young people to use CBT technology to reduce costs and time to contact a therapist [9].

This treatment was first introduced as part of routine care in the mid-1990s and then evaluated and used by the general public [10]. Thereafter, the number of controlled trials in the treatment of patients with psychological problems presented by the internet grew much faster than usual. Most studies on internet-based therapies provide another form of cognitive-behavioral therapy (CBT) refers to what is called Internet-based CBT (ICBT) [11].

Internet-based CBT was created with the aim of increasing access to specialized therapies and has since proven to be effective and affordable for a range of disorders [12]. Although the ICBT has been studied for nearly 20 years, [13] extensive research on this technology-based mental health intervention has expanded over the past few years [14, 15]. One of the advantages of ICBT compared with conventional psychological treatments is the shorter time. In adults, ICBT requires approximately 85% less time per week than the traditional treatment [16].

ICBT is a very useful solution for improving economic and mental health efficiency worldwide. However, this integration of CBT with information technology has not yet reached its true position. ICBT intervention can be effectively implemented



internationally without geographical constraints. In doing so, the researchers hope to determine the feasibility and ethical aspects of this new treatment [17].

Studies show that compared to waiting lists, ICBT is effective and may lead to an improvement in symptoms of mild to moderate depression and social phobia [2]. However, the effectiveness of ICBT compared to individual or group CBT is still uncertain. The use of ICBT is economically advantageous. Most patients with mild to moderate depression or anxiety disorders felt that despite some limitations, ICBT provided patients with more time, speed, and location of treatment. It also improves access for people who cannot afford other treatments because of the cost, time or nature of their health [2].

This is an Open Access article distributed in accordance with the terms of the Creative Commons Attribution (CC BY 4.0) license, which permits others to distribute, remix, adapt and build upon this work for commercial use.

Acknowledgments

The author would like to thank Dr Ali Asghar Ebrahimi for his assistance.

Authors' contributions

All authors contributed to this project and article equally. All authors read and approved the final version of the manuscript.

Funding source

None

Conflict of Interest

The author does not have any conflict of interest.

References

[1] Donovan CL, March S. **Online CBT for preschool anxiety disorders: a randomised control trial.** *Behaviour research and therapy.* 2014;58:24-3510.1016/j.brat.2014.05.001.

[2] Health Quality Ontario. **Internet-delivered cognitive behavioural therapy for major depression and anxiety disorders: a health technology assessment.** *Ontario health technology assessment series.* 2019; 19:1

[3] Cartwright-Hatton S, Roberts C, Chitsabesan P, Fothergill C, Harrington R. **Systematic review of the efficacy of cognitive behaviour therapies for childhood and adolescent anxiety disorders.** *British journal of clinical psychology.* 2004;43:421-3610.1348/0144665042388928.

[4] Ollendick TH, King NJ. **Empirically supported treatments for children with phobic and anxiety disorders: Current status.** *Journal of Clinical Child Psychology.* 1998; 27:156- 6710. 1207/s15374424jccp2702_3.

[5] Chavira DA, Stein MB, Bailey K, Stein MT. **Child anxiety in primary care: Prevalent but untreated.** *Depression and anxiety.* 2004;20: 155-6410.1002/da.20039.

[6] Essau CA, Conradt J, Petermann F. **Frequency and comorbidity of social phobia and social fears in adolescents.** *Behaviour research and therapy.* 1999;37:831-4310.1016/S0005-7967 (98) 00179-X.

[7] Merikangas KR, He J-P, Brody D, Fisher PW, Bourdon K, Koretz DS. **Prevalence and treatment of mental disorders among US children in the 2001–2004 NHANES.** *Pediatrics.* 2010;125:75-8110.1542/peds.2008-2598.

[8] Berry RR, Lai B. **The emerging role of technology in cognitive-behavioral therapy for anxious youth: A review.** *Journal of rational-emotive & cognitive-behavior therapy.* 2014;32: 57- 6610.1007/s10942-014-0184-5.

[9] Newman MG, Kenardy J, Herman S, Taylor CB. **Comparison of palmtop-computer-assisted brief cognitive-behavioral treatment to cognitive-behavioral treatment for panic disorder.** *Journal of consulting and clinical psychology.* 1997;65:17810. 1037/ 0022-006X.65. 1. 178.

[10] Ruwaard J, Lange A, Schrieken B, Emmelkamp PM. **Efficacy and effectiveness of online cognitive behavioral treatment: a decade of interapy research.** 2011 10.1371/journal.pone. 0040089.

[11] Lindefors N, Andersson G. **Guided internet-based treatments in psychiatry:** *Springer;* 2016 10. 1007/978-3-319-06083-5.

[12] Andersson G, Cuijpers P, Carlbring P, Riper H, Hedman E. **Guided Internet-based vs. face-to-face cognitive behavior therapy for psychiatric and somatic disorders: a systematic review and meta-analysis.** *World Psychiatry.* 2014;13:288-9510.1002/wps.20151.

[13] Andersson G. **Using the Internet to provide cognitive behaviour therapy.** *Behaviour research and therapy.* 2009;47:175-8010. 1016/ j.brat. 2009.01. 010.

[14] Thase ME, Wright JH, Eells TD, Barrett MS, Wisniewski SR, Balasubramani G, et al. **Improving the efficiency of psychotherapy for depression: computer-assisted versus standard CBT.** *American Journal of*

Psychiatry. 2018; 175:242-5010.1176/
appi.ajp.2017.17010089.

[15] Anguera JA, Jordan JT, Castaneda D, Gazzaley A, Areán PA. **Conducting a fully mobile and randomised clinical trial for depression: access, engagement and expense.** *BMJ innovations.* 2016;2:14-2110.1136/bmjinnov-2015-000098.

[16] Vigerland S, Lenhard F, Bonnert M, Lalouni M, Hedman E, Ahlen J, et al. **Internet-delivered cognitive**

behavior therapy for children and adolescents: a systematic review and meta-analysis. *Clinical Psychology Review.* 2016;50:1-1010.1016/j.cpr.2016.09.005.

[17] Gentile AJ, La Lima C, Flygare O, Enander J, Wilhelm S, Mataix-Cols D, et al. **Internet-based, therapist-guided, cognitive-behavioural therapy for body dysmorphic disorder with global eligibility for inclusion: an uncontrolled pilot study.** *BMJ open.* 2019;9:e02469310. 1136/bmjopen-2018-024693.