

## Cognitive herapy over the phone as effective as face-to-face, new study finds

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A new study reveals that cognitive therapy over the phone is just as effective as meeting face-to-face. The research was published today, 28 September, in the journal *PLoS ONE*.

Researchers at the University of Cambridge together with the National Institute for Health Research Collaboration for Leadership in Applied Health Research & Care (NIHR CLAHRC) and NHS Midlands & East also found that providing talking therapy over the phone increases access to psychological therapies for people with common mental disorders and potentially saves the NHS money.

For the study, data from 39,000 patients in seven established Improving Access to Psychological Therapies (IAPT) services (an initiative which aims to expand the availability of psychological therapies) in the East of England were used to compare Cognitive Behavioural Therapy (CBT) delivered face-to-face versus over the phone. For all but an infrequent, identifiable clinical group with more severe illness, therapy over the phone was as effective as face to face, and the cost per session was 36.2% lower.

Patients may be unable to access health services due to transport problems, work commitments and physical disability, among many reasons. So increasing availability of talking therapies over the phone will make <u>mental health</u> services more accessible to patients.

On the back of the study results, NHS Midlands & East has instigated a



regional training programme to standardise service delivery and ensure therapists are competent at phone contacts. The training programme has recently been extended into a partnership with a third party organisation.

Professor Peter Jones, Principal Investigator of the study from the University of Cambridge, said: "Providing therapy over the phone will not only help individuals gain much-needed access to mental health treatment, it will provide a more cost effective way of providing these services at a time when everyone is concerned about cutting costs."

Mental health illnesses affect one in four adults in Britain every year. Additionally, the NHS spends more on mental health than it does on cancer, heart disease, stroke and asthma put together (a total of £9.95 billion in 2010-2011), with general practitioners spending more than a third of their time on mental health issues.

## **About IAPT:**

The IAPT programme arose from a national desire to improve access to talking therapies for common mental health problems. It targets mild to moderate depression and anxiety which are the commonest mental health problems seen in general practice, causing an enormous health burden at the population level. People with common mental health problems have been subject to a long and uncertain wait for treatment via the NHS and so the introduction of IAPT services takes a significant step towards widening access to mental health services.

Professor Jones added: "The beauty of the IAPT programme is that it places the patient at the centre of their care and enables research to be used as a tool to support this."

In the IAPT programme, patients complete a number of disorderspecific questionnaires at every contact with the therapist, which provide



accurate information that is used to their individual treatment and a platform of routine outcomes data to inform service improvements.

Throughout the implementation of IAPT in this region, the CLAHRC (a collaboration between the University of Cambridge and the Cambridgeshire and Peterborough NHS Foundation Trust) and NHS Midlands & East have worked in close partnership to ensure the programme meets local population need and improves patient care by effectively translating research into practice. Monthly meetings between researchers, commissioners, managers and clinicians meant that all relevant groups were involved in defining the research questions and interpreting the data, enabling them to share best practice and "pull through" the findings into service provision. Moreover, the work of the CLAHRC has shown the power of sharing routine health data by enabling the outcome data to be looked at in a meaningful way to provide feedback to local services on how they can see patients more effectively and achieve better value for money.

**More information:** The paper 'Comparative Effectiveness of Cognitive Therapies Delivered Face-To-Face or Over the Telephone: An Observational Study Using Propensity Methods' is scheduled for publication by *PLoS ONE* on 28 September 2012.

## Provided by University of Cambridge

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