

Self help books and websites can benefit severely depressed patients

February 26 2013

Patients with more severe depression show at least as good clinical benefit from 'low-intensity' interventions, such as self help books and websites, as less severely ill patients, suggests a paper published on *BMJ* website today.

Depression is a major cause of disability worldwide and effective management of this is a key challenge for health care systems. Evidence suggests 'low-intensity' interventions provide significant clinical benefit. Initial severity of depression is one of the key variables determining who gets 'low' or 'high' intensity treatment, but this is largely based on epidemiological studies and clinical experience rather than high quality evidence.

An international collaboration of researchers therefore carried out a meta-analysis of several studies involving 2470 patients with depression, all treated in a non-hospital setting. All studies were from the year 2000 or later with a sample size of more than 50 patients. All studies included adult patients with lower levels of depressive symptoms, as well as those with quite [severe depression](#).

'Low-intensity' treatment was defined as interventions designed to help patients manage depressive symptoms such as self-help books or interactive websites, often with limited guidance support from a health professional. Self-help groups were excluded.

The researchers conclude that patients with more severe depression at

baseline derive "at least as good [clinical benefit](#) from 'low-intensity' interventions as less severely ill patients". They recommend including 'low-intensity' interventions in the first step of [depression treatment](#) and encouraging the majority of patients to consider using them as the initial treatment option. They also highlight the importance of ongoing assessment of patients with depression to monitor progress.

The researchers also say that an important research question for the future is whether low-intensity treatments are cost-effective compared to longer and more expensive psychological therapies and if "initial experience with low intensity interventions could act as a barrier to further treatment".

More information: www.bmj.com/cgi/doi/10.1136/bmj.f540

Provided by British Medical Journal

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