

Telephone-based cognitive behavioral therapy for anxiety in rural older adults

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Telephone-based cognitive behavioral therapy was better at reducing worry, generalized anxiety disorder symptoms and depressive symptoms in older adults who live in rural areas, where access to mental health treatment may be limited, according to an article published online by *JAMA Psychiatry*.

Generalized anxiety disorder (GAD) is one of the most common [anxiety disorders](#) in [older adults](#) and is associated with poor quality of life, increased health care utilization and impaired memory. Medications and psychotherapy are the primary treatments. Many older adults prefer psychotherapy to medication for the treatment of anxiety. However, older adults who live in [rural areas](#) can face a number of barriers, including living in an area where psychotherapy is not available, so alternate methods of providing treatment could increase utilization, according to the study background.

Gretchen A. Brenes, Ph.D., of the Wake Forest School of Medicine, Winston-Salem, N.C., and coauthors compared telephone-delivered [cognitive behavioral therapy](#) (CBT) with telephone-delivered nondirective supportive therapy (NST) in a randomized clinical trial of 141 adults 60 or older with generalized anxiety disorder. The participants (70 were assigned to telephone CBT and 71 to telephone NST) were followed up at two months and four months.

Telephone CBT consisted of up to 11 sessions (nine required) and focused on, among other things, anxiety symptom recognition, cognitive

restructuring, relaxation, coping statements and problem solving. Telephone NST was 10 sessions where participants discussed their feelings but no direct suggestions for coping were provided.

The clinical trial demonstrated both treatments reduced symptoms of worry, depression and GAD, but telephone CBT was superior to telephone NST and resulted in a greater reduction of symptoms.

At four month's follow-up there was greater decline in worry severity among telephone CBT participants but no significant differences in general anxiety symptoms. At four months' follow-up there also was greater decline in self-reported GAD symptoms and [depressive symptoms](#) among participants in the telephone CBT, according to the results.

"Telephone-delivered psychotherapy is one way to overcome some barriers to [mental health treatment](#) that rural older adults face," the study concludes.

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