A randomised controlled trial published in the current issue of *Psychotherapy and Psychosomatics* by Swiss investigators discloses a new treatment approach to hair pulling compulsion called Trichotillomania.

Trichotillomania (TTM) is characterized by recurrent hair-pulling that results in substantial hair loss. A previous pilot study demonstrated that the online self-help intervention 'decoupling' (DC) might be effective at reducing hair-pulling symptoms, with a stronger effect than progressive muscle relaxation (PMR). We aimed to extend these findings using a more robust randomized clinical trial design, including diagnostic interviews by phone, a 6-month follow-up and email support. One hundred five adults with TTM were recruited online and randomly allocated to either DC (n = 55) or PMR (n = 50).

The intervention lasted 4 weeks, with severity of TTM assessed at 3 time points (before intervention, immediately after intervention and at the 6-month follow-up) using the Massachusetts General Hospital Hair-Pulling Scale (MGH-HPS).

Both intention-to-treat and completer analyses were conducted. Intention-to-treat analysis demonstrated highly significant and comparable symptom reductions (MGH-HPS) in both the DC and PMR groups (p Completer analyses demonstrated the same pattern as the intention-to-treat analyses. The Authors concluded that despite subjective appraisals in favour of DC, symptom reduction was comparable in the two groups. While the results suggest that even short Internet-based interventions like DC and PMR potentially help individuals with TTM, a partial effect of
unspecific factors, like regression towards the mean, cannot be ruled out. Therefore, longitudinal studies with non-treated controls are warranted.


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