

Internet-based relapse prevention programs questionable for depression

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The long-term outcome of a randomized controlled trial on depression treated with psychotherapy via internet is presented in the current issue of *Psychotherapy and Psychosomatics*. As major depressive disorder (MDD) is highly recurrent, international practice guidelines recommend maintenance antidepressant medication and/or psychological treatment after acute MDD to prevent relapse/recurrence. Since resources in clinical practice are scarce, internet-based relapse prevention programs might be a promising alternative. Indeed, small to moderate effects of internet-based interventions were found without therapist support and higher effects with therapist support.

This study examined whether adding mobile cognitive therapy to [treatment](#) as usual was clinically superior to treatment as usual alone over 24 months in remitted recurrently depressed individuals. Results showed that there were no significant effects on outcomes over 24 months, which indicates that M-CT has no long-term protective effect. This finding is in line with a recent meta-analysis demonstrating that guided and unguided internet-based treatments were effective in the short term but not beyond 6 months posttreatment.

The authors concluded that future studies should examine the long-term effectiveness of internet-based interventions and the optimal dosage of therapist support.

More information: Nicola S. Klein et al. No Sustainable Effects of an Internet-Based Relapse Prevention Program over 24 Months in

Recurrent Depression: Primary Outcomes of a Randomized Controlled Trial, *Psychotherapy and Psychosomatics* (2018). [DOI: 10.1159/000485039](https://doi.org/10.1159/000485039)

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