

## Cognitive remediation is ineffective in treating obsessive-compulsive disorder and anorexia nervosa

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Guideline-recommended therapies are moderately successful in the treatment of obsessive-compulsive disorder (OCD) and anorexia nervosa



(AN), leaving room for improvement. Cognitive inflexibility, a common trait in both disorders, is likely to prevent patients from engaging in treatment and from fully benefiting from existing therapies. Cognitive remediation therapy is a practical augmentation intervention aimed at ameliorating this impairing cognitive style prior to disorder-specific therapy. Cognitive remediation therapy uses cognitive exercises to moderate people's adaptive thought processes about their daily routines and to promote a more flexible behavioral repertoire (by expediting a shift from habitual to more goal-directed behaviors) and a more global rather than a detail-focused style of processing information. The goal of the study was to compare the effectiveness of cognitive remediation therapy and a control treatment not aimed at enhancing flexibility, named specialized attention therapy, as add-ons to treatment as usual (TAU).

In a randomized controlled multicenter clinical trial, 71 <u>adult patients</u> with OCD and 61 with AN were randomized to ten twice-weekly sessions with either cognitive remediation therapy or specialized attention therapy, followed by TAU. Patients were evaluated at baseline, post-intervention, and after six and 12 months. Results showed that at the group level, both interventions were effective, with analyses revealing large effect sizes for both treatment combinations. Across study groups, cognitive remediation therapy+TAU was not superior to control treatment (SAT)+TAU in reducing OCD and AN symptoms. Contrary to expectations, specialized attention therapy+TAU may have been more effective than cognitive remediation therapy+TAU in patients being treated for OCD.

Cognitive remediation therapy did not enhance the effect of TAU for OCD and AN more than specialized attention therapy. Unexpectedly, specialized attention therapy, the control condition, may have had an augmentation effect on TAU in OCD patients. Although this latter finding may have been due to chance, the effect of specialized attention



therapy delivered as a pretreatment add-on intervention for adults with OCD and AN merits future efforts at replication.

**More information:** Boris van Passel et al. Cognitive Remediation Therapy Does Not Enhance Treatment Effect in Obsessive-Compulsive Disorder and Anorexia Nervosa: A Randomized Controlled Trial, *Psychotherapy and Psychosomatics* (2020). DOI: 10.1159/000505733

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