

Breakthrough rapid phobia treatment for children helps to reduce impact on NHS and improve quality of life

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A new rapid phobia treatment for children and young people could help to reduce the impact on NHS and improve quality of life, a new study

has found.

Research led by the Universities of Sheffield and York and the Leeds & York Partnership NHS Trust, compared one session treatment (OST) and [cognitive behavior therapy](#) (CBT) to help children and [young people](#) overcome specific phobia.

Results from the national trial found OST was a better way of treating specific phobias as it had similar clinical effectiveness but can be delivered at significantly lower cost than CBT, which can be a lengthy and resource intensive treatment.

CBT often takes place over a number of weeks and months and can be burdensome on families leading to high drop-out rates.

Professor Cindy Cooper, from the University of Sheffield's School of Health and Related Research, said: "Whilst CBT is recommended for phobias, it has limitations.

"We discovered that OST is as effective as CBT and is based on the same principles, but is delivered in fewer sessions meaning it is more convenient for patients and may save the NHS money."

A specific phobia is an intense, enduring fear of a situation or object associated with anxiety symptoms, distress, and avoidance. It is associated with distress and interference with day-to-day activities, poorer [quality of life](#), academic difficulties, and predict future [mental health](#) problems, including long-term phobias and anxiety.

Professor Lina Gega, Professor of Mental Health at the University of York, said: "CBT is the commonly used therapeutic approach to treat specific phobias in children and teenagers and has a robust evidence base demonstrating efficacy; however, access to CBT is limited and multi-

session CBT is lengthy and costly.

"It is also burdensome for families, having to schedule and attend weekly sessions over several months, which may be one reason for the relatively high drop-out rate seen in [mental health services](#).

"These barriers to the provision of, and access to, multi-session CBT suggest that we need "leaner", cost-effective treatments that retain the clinical benefits of CBT, while cutting down delivery time and costs, thereby improving access to therapy."

Professor Gega added: "Future work will focus on developing pathways to impact so that OST can be delivered at scale within services to improve the lives and care of [children](#) and young people with severe and debilitating phobias."

The Alleviating Specific Phobias Experienced by Children Trial (ASPECT) ran for six-months in 26 child and adolescent mental health services (CAMHS) sites involving three voluntary agency services, and one university-based Children and Young People (CYP) well-being service. A total of 268 CYP aged between 7 and 16 years took part. Findings showed that OST is non-inferior to CBT and that it decreased mean service use costs and maintained similar mean Quality Adjusted Life Years compared to CBT.

Sarah Parkinson, Research Assistant on ASPECT Study and part of the Child Oriented Mental Health Innovative Collaborative (COMIC), said: "At COMIC our work is centered around progressing practice surrounding child and young person mental health. We are so excited with the findings from the ASPECT trial and the impact it may have on young people experiencing specific [phobia](#). We are currently working with the University of York and Sheffield Clinical Trials Research Unit to ensure that wider NHS trusts are aware of this promising treatment."

More information: Barry Wright et al, One session treatment (OST) is equivalent to multi-session cognitive behavioral therapy (CBT) in children with specific phobias (ASPECT): results from a national non-inferiority randomized controlled trial, *Journal of Child Psychology and Psychiatry* (2022). [DOI: 10.1111/jcpp.13665](https://doi.org/10.1111/jcpp.13665)

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