

Study finds cognitive behavioral therapy is cost-effective

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Cognitive behavioral therapy (or CBT) delivered in a primary care setting is a cost-effective way to treat adolescents with depression who decline or quickly stop using antidepressants, according to a Kaiser Permanente study published today in the journal *Pediatrics*.

This work builds upon previous research, also published in *Pediatrics*, showing that CBT improved time to diagnostic recovery from major depression for teenagers who received CBT in their primary care clinic. Participants who received CBT learned how to modify their behaviors, challenge their unrealistic and negative beliefs, and think more positively.

Depression is a widespread and costly health problem in the U.S., with one estimate placing the total economic burden of depression at more than \$210 billion annually. Among adolescents, the prevalence of depression is on the rise. Antidepressant medications are the usual course of treatment for adolescents diagnosed with depression, but as many as half of families with a depressed child choose not to begin antidepressant therapy. And among those who do begin treatment, nearly half do not continue, for reasons including side effects, lack of benefit and cost.

"Untreated or undertreated depression is a serious burden for many adolescents and their families, and the impact is often felt for many years after diagnosis," said John Dickerson, PhD, a health economist at the Kaiser Permanente Center for Health Research and lead author of



the new publication. "Now we have evidence that CBT is not only clinically effective, but cost-effective as well. This is good news for patients, their families and <u>health care</u> systems."

In their new analysis, the study team showed that over a two-year period, depression-related health care costs for adolescents who received CBT were about \$5,000 less on average than depressed adolescents in the control group, who received usual care without CBT.

Researchers examined depression-related costs from a societal perspective, meaning they accounted for costs experienced by patients and their families in addition to the costs borne by the health care system. In addition to the cost of delivering the CBT intervention to patients, researchers examined the cost of mental health-related inpatient hospital stays, a wide variety of medical and mental health services, and the time that parents spent taking their children to services, among other factors.

The study, which included 212 adolescents who received care in Kaiser Permanente <u>primary care</u> clinics in Oregon and Washington, showed that a CBT intervention can be brief and still deliver long-term benefits in terms of cost and clinical outcomes.

"Most other studies of CBT for depressed youths that we looked at involved a much longer treatment program than the one we tested," Dickerson explained. "We chose to test a 'lean' model with a smaller number of CBT sessions because such a model is more likely to be adopted by health care organizations. It's important for health systems and families to know that a brief CBT program is likely to improve mental health outcomes for depressed adolescents who decline antidepressants, and is also likely to be cost-effective over time."



Provided by Kaiser Permanente

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