

## CBT, SSRIs effectively cut anxiety symptoms in childhood

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primary anxiety symptoms, remission, and response compared with wait-listing/no treatment. Primary anxiety symptoms were reduced more with CBT than fluoxetine, and remission was improved more with CBT than sertraline. Compared with either treatment alone, the combination of sertraline and CBT significantly reduced clinician-reported primary anxiety symptoms and response. Adverse events were common with medications but not CBT. Suicidality could not be assessed with SSRIs or SNRIs; a nonsignificant increase in suicidal ideation was seen with venlafaxine. There were fewer dropouts with CBT than pill placebo or medications.

"Head-to-head comparisons between various medications and comparisons with CBT represent a need for research in the field," the authors write.

One author reported receiving royalties from the sale of the mobile application: Mayo Clinic Anxiety Coach.

(HealthDay)—Cognitive behavioral therapy (CBT) and selective serotonin reuptake inhibitors (SSRIs) are effective for reducing symptoms of anxiety in childhood, according to a review published online Aug. 31 in *JAMA Pediatrics*.

Zhen Wang, Ph.D., from the Mayo Clinic Evidence-Based Practice Centre in Rochester, Minn., and colleagues examined the comparative effectiveness and <u>adverse events</u> of CBT and pharmacotherapy for childhood anxiety disorders. Data were included for 7,719 patients from 115 studies.

The researchers found that SSRIs significantly reduced primary anxiety symptoms and increased remission and response (relative risk, 2.04 and 1.96, respectively) compared with pill placebo. Clinician-reported primary anxiety symptoms were significantly reduced by serotonin-norepinephrine reuptake inhibitors (SNRIs). Neither benzodiazepines nor tricyclics significantly reduced anxiety symptoms. CBT significantly improved

More information: Abstract/Full Text Editorial

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