NREPP SAMHSA's National Registry of Evidence-based Programs and Practices

Cognitive Behavioral Therapy For Depression and Anxiety Disorders

Review 10

Mitte, K. (2005). Meta-analysis of cognitive-behavioral treatments for generalized anxiety disorder: A comparison with pharmacotherapy. *Psychological Bulletin, 131(5),* 785–795. PubMed abstract available at http://www.ncbi.nlm.nih.gov/pubmed/16187860.

Objectives	Compare the effectiveness of cognitive behavioral therapy (CBT) and pharmacotherapy for the treatment of generalized anxiety disorder (GAD) using meta-analytic techniques.
Studies Included	Sixty-five U.S. and international studies from 1980 to 2002
Participants in the Studies	Adults diagnosed with GAD
Settings	Anxiety and depression symptoms, quality of life
Outcomes	Settings were not reported for the studies.
Limitations of the Studies	Only a few studies used appropriate instruments to assess quality of life; effect sizes may overestimate the real effect because intent-to-treat models were often not used; CBT was compared mostly to benzodiazepines rather than newer classes of medications; different assessment scales for anxiety were used, and the scales may have different sensitivity levels; the majority of drug trials used the Hamilton Anxiety Scale, while most CBT studies used measures of cognition and worry, so the effect sizes compared may have been based on different concepts; two thirds of the drug studies included did not state whether the diagnosis was made by structured interview; methodological design quality varied across included studies.

Results

CBT is a highly effective treatment of GAD, evidencing medium to large effect sizes in comparison to both wait-list control and common-factors control (i.e., psychological therapy using factors common to all therapies or pill placebo) on anxiety symptoms, depression symptoms, and quality of life. Conclusions about comparisons between CBT and pharmacotherapy varied according to the meta-analytic methods used. Specifically, in studies that only compared CBT to pharmacotherapy, there were no differences in effectiveness. However, in studies that compared the results of CBT versus placebo and pharmacotherapy versus placebo, pharmacotherapy was found to be more effective than CBT on anxiety and depression. Attrition rates were lower for CBT, suggesting it was better tolerated than pharmacotherapy. Overall, the results indicate CBT is a highly effective treatment of GAD, reducing not only the main symptoms of anxiety but also the associated depressive symptoms, subsequently improving quality of life.