ABSTRACT
154 drug-free patients with major depressive disorder were randomly assigned to treatment with standard CBT or computer-assisted CBT (CCBT). Treatment lasted 16 weeks. The total amount of clinician time was reduced in CCBT to about 1/3 of the time in standard CBT. No differences in mean post-treatment symptoms were observed, and completion rates were the same for both treatments. These results indicate that CCBT can provide an effective treatment while substantially reducing the amount of clinician time and effort required to deliver evidence-based therapy for depression.

BACKGROUND
- Computer-assisted CBT has been shown to be an effective treatment for depression.
- CBT could reduce cost and expand access to psychotherapy.
- However, many RCTs have been flawed. Common problems have included research diagnosis, lack of control of other treatments, and omission of a comparator therapy.

METHODS
Two NNDC Depression Sites: University of Louisville, University of Pennsylvania

Patients
- 154 adult outpatients with MDD diagnosis
- 17-item HRSD ≥14
- Not on antidepressants or other psychotropic medications
- Randomized to standard CBT or CCBT with Good Days Ahead computer program.

COMPUTER-ASSISTED CBT
Good Days Ahead (www.empower-interactive.com)
- Content authored by Jesse H. Wright, MD, PhD, Andrew S. Wright, MD, and Aaron T. Beck, MD
- 9 modules cover the basic principles and skills of CBT for depression
- Multimedia format with extensive use of video and audio
- Written at 9th reading grade level.
- Analyzes data from program and provides feedback to patients and clinicians.

Procedures
- Diagnostic evaluation with SCID
- Blind Assessments: pre-treatment, weeks 4, 8, & 16

Therapists
- Certified by the Academy of Cognitive Therapy
- Provided both CBT and CCBT
- Therapist adherence and skill monitored.

RESULTS

Patient Characteristics
There were no significant differences in baseline patient characteristics in the two treatment groups.

Completion Rates
Treatment completion rates were identical for CBT (84%) and CCBT (84%).

Acute Treatment Phase Outcome: Depression Measures
There were no significant differences between CBT and CCBT on any of the three measures of depression at the end of 16 weeks of treatment.

Acute Treatment Phase Outcome: Other Measures
No significant differences were found between CBT and CCBT.

DISCUSSION
This study on drug-free patients with MDD compared CBT to CCBT. There have been previous investigations of computer-assisted therapy for depression, but no previous investigation has compared CBT to CCBT in a full 16-week session course of standard CBT. The findings of this investigation suggest that CCBT provides an effective treatment for depression, but more research is necessary to confirm these findings.

REFERENCES

CONCLUSION
No significant differences in treatment outcome were found between computer-assisted CBT and a full course of standard CBT. We conclude that CCBT offers a method that improves the efficiency of treatment and has large potential for reducing costs and enhancing access to effective therapy for depression.

Acute Treatment Phase Outcome: Other Measures
No significant differences were found between CBT and CCBT.