# Effectiveness of counselling, cognitive behavioural therapy and GP care for depression in general practice

Submission date	<b>Recruitment status</b> No longer recruiting	<ul><li>Prospectively registered</li></ul>		
25/04/2003		☐ Protocol		
Registration date 25/04/2003	Overall study status Completed	Statistical analysis plan		
		[X] Results		
<b>Last Edited</b> 27/08/2009	Condition category  Mental and Behavioural Disorders	Individual participant data		

# Plain English summary of protocol

Not provided at time of registration

# Contact information

# Type(s)

Scientific

#### Contact name

Prof Michael King

#### Contact details

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# Additional identifiers

**EudraCT/CTIS** number

**IRAS** number

ClinicalTrials.gov number

# Secondary identifying numbers

HTA 93/07/66

# Study information

#### Scientific Title

#### **Study objectives**

The aim of this study was to determine both the clinical and cost-effectiveness of usual general practitioner (GP) care compared with two types of brief psychological therapy (non-directive counselling and cognitive; behaviour therapy) in the management of depression as well as mixed anxiety and depression in the primary care setting.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Not provided at time of registration

#### Study design

Randomised controlled trial

#### Primary study design

Interventional

#### Secondary study design

Randomised controlled trial

#### Study setting(s)

Not specified

#### Study type(s)

**Not Specified** 

#### Participant information sheet

#### Health condition(s) or problem(s) studied

Mental and behavioural disorders: Depression, anxiety, neuroses

#### **Interventions**

The design was principally a pragmatic randomised controlled trial, but was accompanied by two additional allocation methods allowing patient preference: the option of a specific choice of treatment (preference allocation) and the option to be randomised between the psychological therapies only. Of the 464 patients allocated to the three treatments, 197 were randomised between the three treatments, 137 chose a specific treatment, and 130 were randomised between the psychological therapies only. The patients underwent follow-up assessments at 4 and 12 months.

The interventions consisted of brief psychological therapy (12 sessions maximum) or usual GP care.

- i. Non-directive counselling was provided by counsellors who were qualified for accreditation by the British Association for Counselling.
- ii. Cognitive behaviour therapy was provided by clinical psychologists who were qualified for accreditation by the British Association for Behavioural and Cognitive Psychotherapies.
- iii. Usual GP care included discussions with patients and the prescription of medication, but GPs were asked to refrain from referring patients for psychological intervention for at least 4 months.

Most therapy sessions took place on a weekly basis in the general practices. By the 12-month follow-up, GP care in some cases did include referral to mental healthcare specialists.

#### Intervention Type

Other

#### Phase

Not Specified

#### Primary outcome measure

The clinical outcomes included depressive symptoms, general psychiatric symptoms, social function and patient satisfaction. The economic outcomes included direct and indirect costs and quality of life. Assessments were carried out at baseline during face-to-face interviews as well as at 4 and 12 months in person or by post.

#### Secondary outcome measures

Not provided at time of registration.

#### Overall study start date

01/10/1995

#### Completion date

31/01/1999

# **Eligibility**

## Key inclusion criteria

- 1. GP diagnosis of depression / mixed depression and anxiety
- 2. 18+ years of age
- 3. 14+ on Beck Depression Inventory (BDI)

#### Participant type(s)

**Patient** 

#### Age group

Adult

#### Lower age limit

18 Years

#### Sex

Both

# Target number of participants

197

## Key exclusion criteria

- 1. Serious suicidal intent
- 2. Treated with medication or psychological therapy in past 6 months
- 3. Unable to complete questionnaires due to language difficulties, illiteracy or learning difficulty.

#### Date of first enrolment

01/10/1995

#### Date of final enrolment

31/01/1999

# Locations

#### Countries of recruitment

England

**United Kingdom** 

# Study participating centre

Department of Psychiatry and Behavioural Sciences

London United Kingdom NW3 2PF

# Sponsor information

#### Organisation

Department of Health (UK)

#### Sponsor details

Quarry House Quarry Hill Leeds United Kingdom LS2 7UE +44 (0)1132 545 843 Sheila.Greener@doh.gsi.gov.uk

#### Sponsor type

Government

#### Website

http://www.dh.gov.uk/en/index.htm

#### **ROR**

https://ror.org/03sbpja79

# Funder(s)

# Funder type

Government

#### Funder Name

NIHR Health Technology Assessment Programme - HTA (UK)

# **Results and Publications**

### Publication and dissemination plan

Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

# IPD sharing plan summary

Not provided at time of registration

# **Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	02/12/2000		Yes	No