Interpersonal therapy - new studies in the guideline update

### Comparisons Included in this Clinical Question

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<th>Comparison</th>
<th>Study 1</th>
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<tr>
<td>IPT vs CBT vs Clinical management</td>
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<tr>
<td>IPT vs TAU</td>
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### Characteristics of Included Studies

#### BLOM2007

- **Participants**
  - n=193
  - Age: Mean 40
  - Sex: 69 males, 124 females
  - Diagnosis: 100% Major depression by DSM-IV
  - Exclusions: <18 years old; HAMD score <14; substance misuse; serious medical condition; organic psychiatric disorder; severe suicidality; history of psychotic disorder or schizophrenia; bipolar disorder; current use of psychotropic medication; ongoing psychotherapy
  - Baseline: HRSD: NEF 20.5 (4.8); NEF/IPT 21.9 (4.3); IPT/PLA 21.4 (5.3); IPT 21.6 (4.1)
  - MADRS: NEF 28.3 (6.7); NEF/IPT 31.0 (5.5); IPT/PLA 29.8 (6.3); IPT 29.5 (5.3)

- **Interventions**
  - Group 1 N=49
    - Nefazodone - Started at 100mg/d and gradually increased to minimum of 400mg/d or maximum of 600mg/d
    - Interpersonal psychotherapy - 12 sessions
  - Group 2 N=47
    - Interpersonal psychotherapy - 12 sessions
    - Placebo
  - Group 3 N=50
    - Interpersonal psychotherapy - 12 sessions
  - Group 4 N=47
    - Nefazodone - Started at 100mg/d and gradually increased to minimum of 400mg/d or maximum of 600mg/d

- **Notes**
  - RANDOMISATION: no details
  - Setting: Community mental health clinics and outpatients; Netherlands
  - Duration (days): Mean 98
  - Blindness: Blinded assessments

#### LUTY2007

- **Participants**
  - n=177
  - Age: Mean 35
  - Sex: 49 males, 128 females
  - Diagnosis: 100% Major depression by DSM-IV SCID
  - 22% Alcohol dependence by DSM-IV
  - 15% Cannabis dependence by DSM-IV
  - 16% Panic disorder by DSM-IV
  - 24% Social phobia by DSM-IV
  - 45% Any Personality Disorder by SCID-PQ
  - 11% Paranoid Personality Disorder by SCID-PQ
  - 27% Avoidant personality disorder by SCID-PQ
  - 11% Borderline Personality Disorder by SCID-PQ
  - 13% Obsessive Personality disorder by SCID-PQ
  - Exclusions: <18 years old, no DSM-IV primary diagnosis of major depression. Medication free for less than 2 weeks,

- **Interventions**
  - Group 1 N=91
    - Interpersonal psychotherapy - Participant booked to see therapist on an approximately weekly basis, for 50 minute sessions for up to 16 weeks. The minimum number of sessions allowed to satisfy the research criteria was 8 and the maximum 19.
  - Group 2 N=86
    - CBT - Same schedule and time allotment as within the IPT intervention.

- **Notes**
  - Setting: recruited participants from outpatient clinics, GPs, self-referrals and psychiatric emergency services.
  - Followup: Not reported
  - Duration (days): Mean 96 Range 56-112
  - Blindness: Single blind
  - Type of Analysis: ITT (with LOCF)
  - Info on Screening Process: n=282 screened, n=105 excluded as did not meet the inclusion criteria (n=46), missed interview (n=13), preferred their antidepressant treatment (n=11) or not interested in therapy used in study (n=35)
### MARSHALL2008

**Study Type:** RCT  
**Type of Analysis:** completers  
**Blindness:** No mention  
**Duration (days):** Mean 112  
**Followup:** no follow-up.  
**Setting:** participants recruited through advertisements  
**Notes:** Randomisation: no details.  

**Info on Screening Process:** n=863 were prescreened via telephone. From this, n=292 were invited for an in-depth interview, resulting in n=159 meeting inclusion criteria and were randomised; N=127 began treatment, and n=25 didn't supply full data for analysis.

- **Notes:** Randomisation: stratified for age, gender, unipolar vs bipolar II disorder, comorbidity on axis I, duration of index episode and number of episodes.

- **Exclusions:** No DSM-IV diagnosis of major depression, <18 years old, concurrent diagnosis of bipolar I disorder, history of mania, schizophrenia, major physical illness that could interfere with treatment or assessment, current alcohol/drug dependence of moderate or greater severity, severe antisocial personality disorder or if participant had failed to respond to one of the two interventions within the last year.  

- **Notes:** Severe depression also measured and defined as >29 on MADRS.  

<table>
<thead>
<tr>
<th>Baseline: MADRS</th>
<th>HRSD</th>
<th>BDI-II</th>
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<tbody>
<tr>
<td>IPT</td>
<td>23.3 (6.5)</td>
<td>16.0 (4.7)</td>
</tr>
<tr>
<td>CBT</td>
<td>24.4 (6.2)</td>
<td>16.7 (4.6)</td>
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</table>

**Data Used**  
**HRSD**  
**Data Not Used**  
Self-Criticism assessment - Not relevant  
Depressive Experiences Questionnaire (DEQ) - Not relevant  

**Notes:** Assessments made at baseline and at 16 weeks (endpoint).

**Group 1 N=37**  
CBT - 16 sessions given weekly (although number of sessions varied based on participant's level of symptomatology).

**Group 2 N=35**  
Interpersonal psychotherapy - 16 sessions given weekly (although number of sessions varied based on participant's level of symptomatology).

**Group 3 N=30**  
Pharmacotherapy + Clinical Management - Prescribed an antidepressant selected at treating psychiatrist's discretion.

**Supported by an operating grant from the Ontario Mental Health Foundation (OMHF).**

### SCHRAMM2007

**Study Type:** RCT  
**Type of Analysis:** ITT "all who received allocated intervention"  
**Blindness:** Single blind  
**Duration (days):** Mean 35  
**Followup:** 1 year  
**Setting:** Participants referred to the department for acute psychiatric hospitalisation.  
**Notes:** Randomisation: stratified for age, gender, unipolar vs bipolar II disorder, comorbidity on axis I, duration of index episode and number of episodes.

**Info on Screening Process:** n=300 prescreened. n=147 screened for eligibility, n=17 excluded as they didn't meet the inclusion criteria or they refused to participate. N=130 randomised, n=6 not analysed.

- **Notes:** Randomisation: stratified for age, gender, unipolar vs bipolar II disorder, comorbidity on axis I, duration of index episode and number of episodes.

- **Exclusions:** No DSM-IV diagnosis of major depression, <18 years old, concurrent diagnosis of bipolar I disorder, primary substance misuse/dependency, other primary axis I disorders, mental disorder because of organic factors, and borderline or antisocial personality disorder, psychotic symptoms, severe cognitive impairment, contraindications to the study medication and being actively suicidal.

- **Notes:** Additional score of >15 on the Ham-D-17 required for study entry.  

<table>
<thead>
<tr>
<th>Baseline: HRSD</th>
<th>CBT = 17.78 (3.58), IPT = 18.57 (4.06), Pharm = 18.53 (3.58)</th>
</tr>
</thead>
</table>

**Data Used**  
**HRSD**  
**Data Not Used**  
Social Adjustment Scale - Not relevant  

**Notes:** Scores taken at baseline, week 5 (endpoint), 3 months and 12 months.  
Response= reduction in symptom severity of 50% or higher on HAM-D.  
Remission= score of <8 on HAM-D  
Relapse= score >14 on HAM-D, with psychiatric status rating of >4 for 2 weeks.

**Group 1 N=63**  
IPT + Pharmacotherapy. Mean dose 90.2mg/day - Participants received a psychoeducational, supportive and empathic intervention of 20 - 25 minutes, 3 times a week. First-line pharmacotherapy was sertraline, followed by amitriptyline.

**Group 2 N=61**  
Clinical Management + Pharmacotherapy. Mean dose 90.2mg/day - Participants received a psychoeducational, supportive and empathic intervention of 20 - 25 minutes, 3 times a week. First-line pharmacotherapy was sertraline, followed by amitriptyline.

**Supported by grants from the German Research Society, Bonn, Germany.**

### SWARTZ2008

- **Sex:** 32 males 70 females  
  **Age:** Mean 41  
  **Diagnosis:**  
  100% Major depression by DSM-IV SCID  
  6% Dysthymia by DSM-IV SCID  
  13% Anxiety disorder by DSM-IV SCID

- **Notes:** Additional: A score of 10 or more on the HRSD was required for study entry.

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<th>Baseline: MADRS</th>
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<tr>
<td>IPT</td>
<td>24.4 (6.5)</td>
<td>16.7 (4.6)</td>
</tr>
<tr>
<td>CBT</td>
<td>25.1 (5.1)</td>
<td>21.9 (4.1)</td>
</tr>
</tbody>
</table>

**Data Used**  
**HRSD**  
**Data Not Used**  
Self-Criticism assessment - Not relevant  
Depressive Experiences Questionnaire (DEQ) - Not relevant  

**Notes:** Assessments made at baseline and at 16 weeks (endpoint).  

**Group 1 N=37**  
CBT - 16 sessions given weekly (although number of sessions varied based on participant's level of symptomatology).

**Group 2 N=35**  
Interpersonal psychotherapy - 16 sessions given weekly (although number of sessions varied based on participant's level of symptomatology).

**Group 3 N=30**  
Pharmacotherapy + Clinical Management - Prescribed an antidepressant selected at treating psychiatrist's discretion.

**Supported by an operating grant from the Ontario Mental Health Foundation (OMHF).**
Study Type: RCT
Type of Analysis: ITT - ‘individuals entering treatment.’
Blinding: Single blind
Duration (days): Followup: 9 months

Notes: Randomisation: no details of procedure.
Info on Screening Process: n=72 screened, n=65 randomly assigned. Final screening after randomisation removed n=9, and n=9 dropped out leaving n=47 entering interventions.

Characteristics of Excluded Studies

<table>
<thead>
<tr>
<th>Reference ID</th>
<th>Reason for Exclusion</th>
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<tbody>
<tr>
<td>BODENMANN2008</td>
<td>In couples therapy review</td>
</tr>
<tr>
<td>BOLTON2003</td>
<td>Control intervention not clear. Non-depressed population have an unclear diagnosis.</td>
</tr>
<tr>
<td>FRANK2007</td>
<td>Data not extractable</td>
</tr>
<tr>
<td>MCBRIDE2006</td>
<td>No extractable data</td>
</tr>
<tr>
<td>VAN SCHAIAK2007</td>
<td>Data not extractable</td>
</tr>
</tbody>
</table>

References of Included Studies

BLOM2007 (Published Data Only)

LUTY2007 (Published Data Only)

MARSHALL2008 (Published Data Only)

SCHRAMM2007 (Published Data Only)

Supported by grants from National Institute of Mental Health.
SWARTZ2008 (Published Data Only)

References of Excluded Studies

BODENMANN2008 (Published Data Only)

BOLTON2003 (Published Data Only)

FRANK2007 (Published Data Only)

MCBRIDE2006

VAN SCHAIK2007

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