Abstract
Recent research from a number of clinical trials has shown that Transdiagnostic Cognitive-Behavioral Therapy is efficacious, having shown comparable effects on primary anxiety disorder diagnoses as traditional diagnosis-specific CBT, and highly economical for treatment providers. However, a majority of anxiety disorder patients present with two or more “comorbid” diagnoses at once. Given that Transdiagnostic CBT focuses on the patient’s entire anxiety presentation, as opposed to just one primary diagnosis, several psychological scientists have suggested that Transdiagnostic CBT may be more efficient than traditional CBT in treating comorbid presentations (those with more than one anxiety disorder or depressive diagnosis). The current presentation will present data from a number of studies testing this hypothesis. An initial pilot study (Study 1) evaluated the effect of Transdiagnostic CBT on comorbid diagnoses of depression, suggesting that patients who present with both anxiety and depression show substantial improvements on both diagnoses. Study 2 compared the effect of Transdiagnostic CBT on treating comorbid diagnoses of anxiety (two or more anxiety disorders simultaneously), finding that Transdiagnostic CBT had greater effects on comorbid anxiety than did diagnosis-specific CBT. Finally, data from a large ongoing study (Study 3) examining the impact of Transdiagnostic CBT on comorbid anxiety-depression will be presented. Future directions for the treatment of complex comorbid anxiety and anxiety-depression patients will be discussed.

Keywords: Cognition, Behavioral Therapy, Depression, Anxiety Disorders.

*Corresponding Author: Peter Joseph Norton

Email: pjnorton@central.uh.edu