



### Oral Presentation

## Internet and Smartphone Based Treatments Including a New PTSD-Study

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### Abstract

Our research group has - during the past 15 years - developed and tested internet interventions for more than 20 separate conditions totaling in close to 50 published randomized controlled trials. The studies cover a wide range of diagnoses including depression, social anxiety, panic disorder, generalized anxiety disorder, and pathological gambling. The treatments have mostly been based on cognitive behavior therapy. However, acceptance and commitment therapy, interpersonal psychotherapy and motivational interviewing have also been tested. In addition to the more traditional online therapies psychodynamic internet-based psychotherapy has also been evaluated. In general the effect sizes are large when active treatment is compared to a control group. In fact, in our recent systematic review and meta-analysis that has been accepted for publication, Internet-delivered cognitive behavior therapy was directly compared against face-to-face CBT within the same trial. The results showed a pooled effect size at post-treatment across of Hedges  $g = -0.01$  (95% CI,  $-0.13$  to  $0.12$ ), indicating that Internet-delivered cognitive behavior therapy and face-to-face treatment produce equivalent overall effects. In addition to giving an overview of internet-based treatments a new randomized controlled trial will be presented. The aim of this trial was to investigate the effects of guided internet-based cognitive behavior therapy (ICBT) for posttraumatic stress disorder (PTSD). Sixty-two participants with chronic PTSD, as assessed by the Clinician-administered PTSD Scale, were recruited via nationwide advertising and randomized to either treatment ( $n = 31$ ) or delayed treatment attention control ( $n = 31$ ). The ICBT treatment consisted of 8 weekly text-based modules containing psychoeducation, breathing retraining, imaginal and in vivo exposure, cognitive restructuring, and relapse prevention. Therapist support and feedback on homework assignment were given weekly via an online contact handling system. Assessments were made at baseline, post-treatment, and at 1-year follow-up. Main outcome measures were the Impact of Events Scale-Revised (IES-R) and the Posttraumatic Stress Diagnostic Scale (PDS). Results showed significant reductions of PTSD symptoms (between group effect on the IES-R Cohen's  $d = 1.25$ , and  $d = 1.24$  for the PDS) compared to the control group. There were also effects on depression symptoms, anxiety symptoms, and quality of life. The results at one-year follow-up showed that treatment gains were maintained. In sum, these results suggest that ICBT with therapist support can reduce PTSD symptoms significantly.

**Keywords:** Internet, PTSD, Smartphone, Psychotherapy, Psychoeducation, Cognition.

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