

# Improved access to psychotherapy reduces impact of anxiety and depression

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The innovative treatment model, Improving Access to Psychological Therapies (IAPT), and its Norwegian adaptation, Prompt Mental Health Care (PMHC), have been evaluated by cohort studies only. Albeit yielding promising results, the extent to which these are attributable to the treatment thus remains unsettled.

This study investigated the effectiveness of the PMHC treatment compared to treatment as usual (TAU) at 6-month follow-up. A [randomized controlled trial](#) with parallel assignment was performed in two PMHC sites (Sandnes and Kristiansand) and enrolled clients between November 9, 2015 and August 31, 2017. Participants were 681 adults (aged ≥18 years) considered for admission to PMHC due to anxiety and/or mild to moderate depression. The main outcomes were recovery rates and changes in symptoms of depression (PHQ-9) and anxiety (GAD-7) between baseline and follow-up. Primary outcome data were available for 73/67% in PMHC/TAU.

Results showed a reliable recovery rate of 58.5%

observed in the PMHC group and of 31.9% in the TAU group, equaling a between-group effect size of 0.61 (95% CI 0.37 to 0.85, p

The PMHC treatment demonstrated to be substantially more effective than TAU in alleviating the burden of anxiety and depression. This adaptation of IAPT is considered a viable supplement to existing [health services](#) to increase access to [effective treatment](#) for adults who suffer from anxiety and mild to moderate depression. A potential effect on work participation needs further examination.

**More information:** Marit Knapstad et al. Effectiveness of Prompt Mental Health Care, the Norwegian Version of Improving Access to Psychological Therapies: A Randomized Controlled Trial, *Psychotherapy and Psychosomatics* (2019). [DOI: 10.1159/000504453](https://doi.org/10.1159/000504453)

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