

A blended transdiagnostic treatment for emotional disorders: preliminary study

Sara Fernández Buendía

Resumen

La elevada comorbilidad entre los trastornos emocionales (trastornos de ansiedad y depresión) ha llevado a plantear que estos conforman una disfunción más general caracterizada por vulnerabilidades comunes en la regulación emocional (Brown y Barlow, 2009). En esta línea, se propone que un tratamiento transdiagnóstico podría aumentar la eficiencia de las intervenciones psicológicas para trastornos específicos. El objetivo de este estudio era analizar la eficacia preliminar de un tratamiento transdiagnóstico grupal y *blended* (terapia cara a cara + online) basado en el Protocolo Unificado de Barlow sobre medidas de ansiedad, depresión, calidad de vida y afecto positivo/negativo de pacientes con trastornos emocionales (TE). Hipotetizamos que estas medidas mejorarían tras el tratamiento. La muestra estaba formada por 5 pacientes con diferentes diagnósticos de TE a los que se realizó una evaluación pre y postratamiento utilizando el BDI-II, PANAS, OASIS y QLI. La intervención consistió en un tratamiento transdiagnóstico grupal y *blended* formado por 12 módulos y con una duración de 18 semanas. Tras el tratamiento, la mayoría de los pacientes mostraron un aumento en las puntuaciones de afecto positivo y calidad de vida, así como una disminución en las de ansiedad, depresión y afecto negativo. Los resultados van en la línea de la hipótesis, indicando que este tratamiento podría ser potencialmente eficaz para mejorar la sintomatología ansiosa y depresiva, así como el afecto positivo y la calidad de vida de los pacientes. Tal y como proponen las investigaciones anteriores, este tipo de intervenciones mejoran la eficacia reduciendo los costes, por lo que podrían convertirse en una opción valiosa para ser aplicada en los centros de salud mental. No obstante, es necesaria más investigación para determinar la eficacia de este tratamiento.

Abstract

The high comorbidity among emotional disorders (anxiety disorders and depression) suggests that these constitute a more general dysfunction characterized by common vulnerabilities in emotional regulation (Brown and Barlow, 2009). In this sense, it is proposed that a transdiagnostic treatment could increase the efficiency of current psychological interventions for specific disorders. The aim of this study was to analyse the preliminary efficacy of a group and blended (face-to-face + online) transdiagnostic treatment based on Barlow's Unified Protocol on measures of anxiety, depression, quality of life and positive/negative affect of patients with emotional disorders (ED). Our hypothesis was that these measures would improve after the treatment. The sample was composed of 5 patients with different ED diagnoses. A pre and posttreatment assessment was performed using BDI-II, PANAS, OASIS and QLI. The intervention consisted of a group and blended transdiagnostic treatment including 12 treatment components and with a duration of 18 weeks. After the application of the treatment, most patients showed an increase in the scores of positive affect and quality of life, as well as a decrease in anxiety, depression and negative affect. The results confirm the hypothesis, indicating that this treatment could be potentially effective in improving anxious and depressive symptoms, as well as positive affect and the patients' quality of life. As indicated by previous research, these types of interventions improve efficiency reducing costs, so they could become a valuable option for mental health centers. However, more research is needed to determine the efficacy of this treatment.

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Sara Fernández Buendía (Tutora: Azucena García Palacios)
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INTRODUCTION

The high comorbidity among emotional disorders (40-80%) (Wittchen et al., 2011) leads Brown & Barlow (2009) to propose that these ones (depression and anxiety disorders) share a common dysfunction characterized by negative affect. In this sense, a transdiagnostic approach would involve the unified treatment of emotional disorders. Another innovation in psychological treatments related to cost-benefit issues is the use of new technologies (Andersson, Carlbring, Titov & Linderfors, 2019). The aim of this study is to analyse the preliminary efficacy of a blended group transdiagnostic treatment (online + face-to-face) based on Barlow's protocol on measures of anxiety, depression, quality of life, and positive/negative affect. The hypothesis is that these measures will improve after treatment.

METHOD

Participants

The sample was composed of 5 patients (mean age=31.20, SD=9.76).

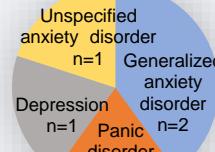


Figure 1. Patients' diagnoses.

Instruments and procedure

- The participants came voluntarily to the Psychological Assistance Service of the Universitat Jaume I. Those who met the inclusion criteria and agreed to participate were contacted to start the treatment.

- Pre and post evaluation was performed using the Beck Depression Inventory (BDI-II; Sanz, Perdigón & Vázquez, 2003), Positive Affect and Negative Affect Scale (PANAS; Díaz-García et al., 2020), Overall Anxiety Severity and Impairment Scale (OASIS; González-Robles et al., 2018) and Quality of Life Index (QLI; Mezzich et al., 2000).

- Then, a comparison of pre-post scores was carried out.

- Treatment components**
- 1) Nature of emotional disorders.
 - 2) Motivation for change.
 - 3) Understanding emotional experiences.
 - 4) Accepting emotional experiences.
 - 5) Practicing acceptance.
 - 6) Understanding the role of cognitive assessment in emotional experiences.
 - 7) Taking perspective and practicing cognitive flexibility.
 - 8) Emotional avoidance.
 - 9) Emotionally Driven Behavior.
 - 10) Accepting and coping with physical sensations.
 - 11) Coping with emotions in the situations in which they occur.
 - 12) Relapse prevention.

Intervention

It consisted of a transdiagnostic protocol in group and blended format (combining face-to-face and online) based on Barlow's Unified Protocol with some emotional regulation component of Linehan's Dialectical Behavior Therapy. The program had a duration of 18 weeks: the face-to-face part was applied during 6 group sessions every 3 weeks, and the online part took place between the face-to-face sessions.

Online transdiagnostic protocol

This treatment was adapted to a web platform and currently it is available for PC and tablet. It can be found on the multimedia web: <https://www.psicologiyatecnologia.com>.



Figure 3. Web platform of the online transdiagnostic protocol.

RESULTS

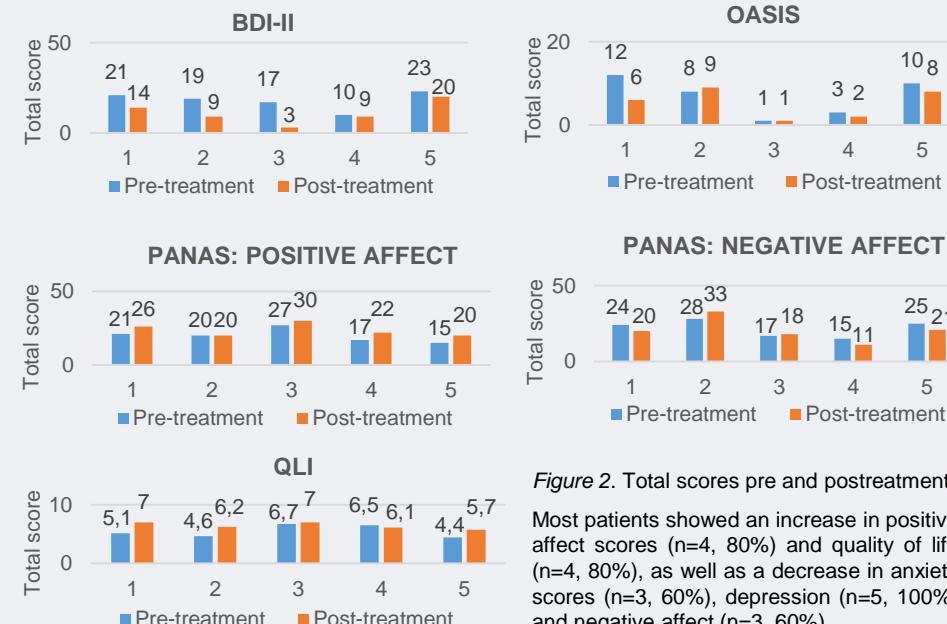
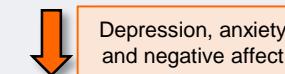


Figure 2. Total scores pre and posttreatment.

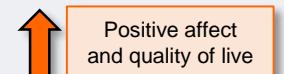
Most patients showed an increase in positive affect scores ($n=4$, 80%) and quality of life ($n=4$, 80%), as well as a decrease in anxiety scores ($n=3$, 60%), depression ($n=5$, 100%) and negative affect ($n=3$, 60%).

DISCUSSION AND CONCLUSION

Preliminary results confirm the hypotheses, indicating that a blended transdiagnostic protocol may be effective in:



Depression, anxiety and negative affect



Positive affect and quality of life

As indicated by previous research, the group application of transdiagnostic treatments, as well as the use of a blended format, increase the efficiency reducing costs (González-Robles et al., 2016), so this treatment could become a very valuable option for increasing the accessibility of psychological treatments and reducing waiting list periods in mental health centers. Nevertheless, this study has some limitations, like the small sample size and the use of a pre-post design without a comparison group.

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