



Research report

Internet-based versus face-to-face cognitive-behavioral intervention for depression: A randomized controlled non-inferiority trial[☆]

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ABSTRACT

Background and aims: In the past decade, a large body of research has demonstrated that internet-based interventions can have beneficial effects on depression. However, only a few clinical trials have compared internet-based depression therapy with an equivalent face-to-face treatment. The primary aim of this study was to compare treatment outcomes of an internet-based intervention with a face-to-face intervention for depression in a randomized non-inferiority trial.

Method: A total of 62 participants suffering from depression were randomly assigned to the therapist-supported internet-based intervention group ($n=32$) and to the face-to-face intervention ($n=30$). The 8 week interventions were based on cognitive-behavioral therapy principles. Patients in both groups received the same treatment modules in the same chronological order and time-frame. Primary outcome measure was the Beck Depression Inventory-II (BDI-II); secondary outcome variables were suicidal ideation, anxiety, hopelessness and automatic thoughts.

Results: The intention-to-treat analysis yielded no significant between-group difference (online vs. face-to-face group) for any of the pre- to post-treatment measurements. At post-treatment both treatment conditions revealed significant symptom changes compared to before the intervention. Within group effect sizes for depression in the online group ($d=1.27$) and the face-to-face group ($d=1.37$) can be considered large. At 3-month follow-up, results in the online group remained stable. In contrast to this, participants in the face-to-face group showed significantly worsened depressive symptoms three months after termination of treatment ($t=-2.05$, $df=19$, $p<.05$).

Limitations: Due to the small sample size, it will be important to evaluate these outcomes in adequately-powered trials.

Conclusions: This study shows that an internet-based intervention for depression is equally beneficial to regular face-to-face therapy. However, more long term efficacy, indicated by continued symptom reduction three months after treatment, could be only be found for the online group.