The clinical effectiveness of cognitive behavior therapy and an alternative medicine approach in reducing symptoms of depression in adolescents.

Reference

Purpose of Study
To investigate the effectiveness of cognitive behavioral therapy (CBT) and Reiki in reducing depression scores among adolescents in Tehran, Iran.

Objective/goals/hypotheses
The goal was to focus on the patients’ experience of the disease rather than on changes in specific, preselected endpoints. The To investigate the effectiveness of CBT versus Reiki on different sub scales of depression among Iranian adolescents. Data are lacking for this adolescent population and depressive disorders in adolescents are known to have a high prevalence and recurrence.

Methods
Adolescents (188) with depression, not already undergoing any psychiatric or psychological treatments, were treated for 12 weeks with CBT (90 minutes, twice weekly), or Reiki (20 minutes, once weekly) or were waitlisted. Data for each group were collected before and after 12 weeks of treatment using the Children's Depression Inventory (CDI) measure.

Results
Reductions on the CDI depression scale were significant for the CBT group compared to the waitlist (p<.001), whereas depression reduction was less significant for Reiki (p=.031) compared to the waitlist. There was not such a strong effect for Reiki on males. When the subscales of the CDI were evaluated, there were less significant differences between the Reiki and wait list group (Cohen’s d calculations indicated a medium treatment effect for 4/5 subscales (only anhedonia was significant, p=0.006), nor were there differences in gender for the Reiki group on such subscales.

Strengths
This study is the first of its size to examine Reiki as a treatment protocol for depression among adolescents and offers productive findings for Reiki on adolescent, depressed, and Iranian populations as well as its comparison to CBT. It recommends larger studies and comments on the potential of Reiki to “enhance treatment outcomes.”

Weaknesses
The paper could have been more specific about its Reiki treatment methodology and it was not designed to rule out placebo effect. Additionally, it included only 20 minutes of Reiki once weekly compared to 90 minutes CBT twice weekly. No rationale for selecting 20 minutes or frequency was given.

Additional comments
It is interesting to note that Reiki treatment was found statistically significant in reducing symptoms of depression over the 12-week treatment period even though the Reiki group received only 4 hours of treatment compared to 36 hours of treatment for the CBT group.