primary studies - published, non RCT

Feasibility and acceptability of a CF-specific cognitive-behavioral preventive intervention for adults integrated into team-based care.

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Study design (if review, criteria of inclusion for studies)

Interventional, non Randomized study

Participants

14 adults with mild depression and/or anxiety symptoms

Interventions

A cystic fibrosis (CF)-specific cognitive-behavioral therapy intervention (CF-CBT). The 8-session CF-CBT was delivered in-person and via audio telehealth.

Outcome measures

Assessment of attrition, engagement, homework completion, treatment satisfaction, and treatment fidelity informed feasibility/acceptability assessment. Mental health outcomes included depression, anxiety, quality of life (Cystic Fibrosis Questionnaire-Revised [CFQ-R), perceived stress and coping.

Main results

A total of 108 sessions were conducted; 13 adults completed the intervention; 1 discontinued early. Engagement, homework completion, and treatment acceptability were highly rated (meanâ€‰=â€‰30; SDâ€‰=â€‰2, range: 27-32 on a 32-point scale). Fidelity scores ranged from 85.7% to 93.6%. Large ES changes reflected improvements in depressive symptoms (-0.83), CFQ-R (Vitality scale: 1.11), and Relaxation Skills (0.93); moderate ES for CFQ-R Role Functioning (0.63), Awareness of Tension (0.62), Coping Confidence (0.70) and CF-specific Coping (0.55); and small ES for anxiety symptoms (-0.22), perceived stress (-0.25), Behavioral Activation (0.29), and several CFQ-R domains, including Emotional Functioning (0.29). Two CFQ-R subscales decreased (Body Image, Eating Concerns).

Authors' conclusions

Results indicated feasibility and acceptability of CF-CBT and its integration into team-based CF care with promising effectiveness, especially for depression. A multicenter randomized controlled trial of CF-CBT will further examine effectiveness of a CF-specific integrated care model.

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See also

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Keywords

Adult; Caregivers; Child; non pharmacological intervention - psyco-soc-edu-org; Psychoeducation; training; Depression; Systemic interventions; Mental Disease-Psychiatric Conditions; Behavioural interventions;