

Online tool to get RID of depression

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An online self-help programme for adults experiencing emotional distress is being tested by researchers at Otago University.

The web-based trial, Recovery via the Internet from Depression (RID), is investigating whether online information or therapy improves health outcomes for people not getting treatment for their distress.

Lead researcher Shyamala Nada-Raja from the Injury Prevention Research Unit at Dunedin School of Medicine hopes the tools provided will help GPs improve the emotional wellbeing of people in their communities.

Dr Nada-Raja hopes participation in the trial will encourage people to seek professional

help if they need it or that GPs will encourage patients to enrol in the trial if they believe a self-help programme might be an appropriate first step for a patient to take.

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People aged 18 or more are accepted into the trial if online screening indicates they are distressed enough to benefit from some intervention but are not currently receiving formal treatment (medication or counselling).

From there, participants are randomised by the programme software into one of three

specific groups:

- a control group (the "health coach" group), in which people are asked about a series of lifestyle factors that influence their mental health, such as

nutrition, physical activity, relationships, work and finances, and then encouraged to reflect on those factors

- the "depression literacy" group, in which people are provided with evidence-based information about depression, including credible treatment options and links to support services

- the "CBT" group, in which people are guided through online cognitive behavioural therapy.

Participants in all groups are encouraged to seek professional help. The interventions are adapted from tools developed by researchers at Australian National University.

The Australian experience found CBT and information about depression were similarly effective in the short to medium term (at five weeks and six months' follow-up) but that CBT was more effective after 12 months.

The New Zealand trial is being funded by the Health Research Council, ACC and the Ministry of Health.

Dr Nada-Raja hopes to have preliminary results from late next year but information on the longer term impact of the interventions will not be available until 2010.

More than 200 patients have enrolled in the trial so far but the researchers need at least 500 more. Patients can enrol in the trial until the end of this year at www.otago.ac.nz/rid acameron@nzdoctor.co.nz **D**