

Digital CBT Engagement Predicts Reductions in Anxiety and Depression

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Disclosure

The authors are employees and equity holders of NeuroFlow, Inc., a behavioral healthcare technology company that sponsored the research being presented here.

BACKGROUND

Anxiety and depression are public health crises



1 in 3 affected¹

comorbid with a range of
medical and BH issues²

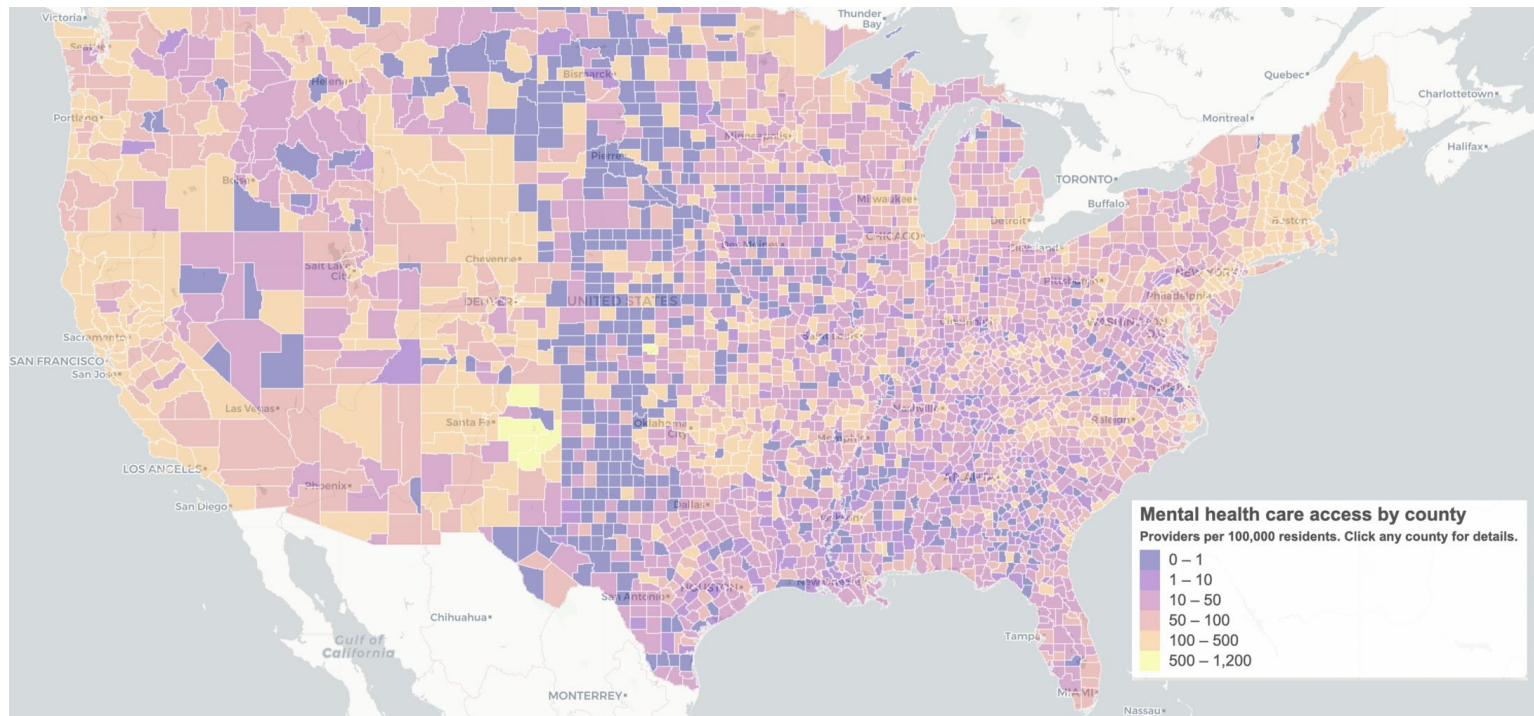


multibillion-dollar burdens
on U.S. health economy³

1. Vos et al., 2017. *Global Burden of Disease Study*; 2. ter Meulen et al., 2021. *Depression and Anxiety Disorders in Concert*;
3. Beddington, 2008. *The Mental Wealth of Nations*.

BACKGROUND

Despite this, mental health resources are scarce in the U.S.



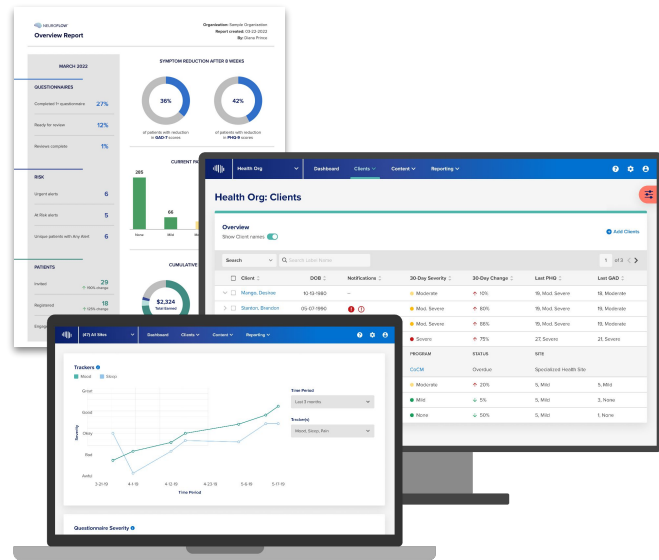
Livingston & Green, 2022: *America's Mental Health Care Deserts: Where is it Hard to Access Care?* ABC News [CMMS data]

IT SEEMS THAT TECHNOLOGY CAN IMPROVE THIS SITUATION...

Digital BH platforms allow location-agnostic dCBT deployment



tailored dCBT content &
remote measurement



data-rich provider features
enabling individualized care

...BUT TO BE SURE, WE NEED MORE RESEARCH!

We studied links between dCBT engagement & patient outcomes



Pre-study assessment	Cohort assignment	dCBT program	Evaluation period	Outcome measures
GAD-7	Anxiety: 142	<i>FearFighter</i>	180 days	1. Pre-post score changes 2. Completion percentages 3. Changes relative to severity
PHQ-9	Depression: 104	<i>MoodCalmer</i>		

FINDINGS

A snapshot of our three biggest takeaways

both cohorts significantly
improved pre/post
(p 's < .001, $d = 0.46, 0.45$)



completion% significantly
predicted improved outcomes
in the anxiety cohort
($t = 3.59, p < .001$)

in the anxiety cohort,
starting severity predicted
large improvements
($F = 9.88, p < .001$)



Available with open access in the coming weeks

Holley & Brooks et al., (2024) [in press]. Digital CBT interventions predict robust improvements in anxious and depressive symptomatology: A retrospective database study. *Innovations in Digital Health, Diagnostics, and Biomarkers*.

DETAILED FINDINGS

Symptom severity in both groups significantly improved

Cohort	Assessment	Pre	Post	Stats
Anxiety	GAD-7	12.15	9.98	$t = 4.65$, Cohen's $d = 0.46$, $p < .001$
Depression	PHQ-9	10.5	8.74	$t = 5.22$, Cohen's $d = 0.45$, $p < .001$

The most engaged patients saw the greatest benefits

Cohort	Completion	N	Pre	Post	Between-groups comparison
Anxiety	$\geq 75\%$		12.15	9.98	$t = 4.65$, Cohen's $d = 0.46$, $p < .001$
	$< 75\%$				
Depression	$\geq 75\%$		10.5	8.74	
	$< 75\%$				

RESERVE SLIDES