# An Evaluation of the Acceptability and Efficacy of Remote Treatments for Obsessive-Compulsive Disorder

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#### **ABSTRACT**

Obsessive-compulsive disorder (OCD) is a common, chronic, and disabling anxiety disorder. Although effective psychological treatments exist they are not widely available, and most people seeking treatment for OCD do not receive an evidence-based intervention. The remote delivery of psychological treatments represents one strategy with considerable potential for improving access to treatments for people with OCD, particularly for those who are geographically isolated. However, only a small number of studies have investigated the acceptability and efficacy of remote treatments for people with OCD. The aims of this thesis were to contribute to the literature on remote treatment of OCD by exploring the following questions: 1) Are remote treatments acceptable to people with OCD (Study I)? 2) Is internet-administered cognitive and behavioural treatment (iCBT) for OCD efficacious (Study II)? 3) Is iCBT as effective as bibliotherapy-administered cognitive and behavioural treatment (Study III)? 4) How much therapist time is required in remote treatments to obtain positive outcomes (Study III)? 5) Do demographic and clinical characteristics predict outcome of remote treatment (Study IV)?

The results of Study I, an online survey of people with elevated symptoms of OCD, indicated that internet-administered treatment was acceptable and that people seeking online treatment were not significantly different from those seeking face-to-face treatment or from those with OCD in a national epidemiological survey. The results of Study II, a pilot study exploring the efficacy of iCBT for OCD using an open-trial design, indicated iCBT was efficacious, with large effect sizes observed from pre-treatment to post-treatment, which were maintained at follow-up. The results of Study III, a three-parallel group randomised controlled trial comparing iCBT vs. bibliotherapy vs. waitlist control, indicated both iCBT and bibliotherapy

were superior to waitlist, with no significant differences between treatment groups, although small sample size limits the generalisability of these results. Study III also revealed that large effect sizes can be obtained in iCBT treatment when contact is limited to once a week, although greater effects were found from more frequent contact. Study IV, which involved an analysis of the data from Study II and III failed to identify any reliable predictors of treatment outcome.

In summary, these studies indicate that remote treatment of OCD, delivered as either iCBT or bibliotherapy, is both efficacious and acceptable to people with OCD. Replication and extension of these findings by other research teams is required. The results of the studies in this thesis provide further evidence to indicate that remote treatments have considerable potential in improving access to acceptable, evidence-based interventions for individuals with OCD.

**Statement of Candidate** 

I certify that the work in this thesis entitled 'An Evaluation of the Acceptability and

Efficacy of Remote Treatments for Obsessive-Compulsive Disorder' has not previously

been submitted for a degree nor has it been submitted as part of requirements for a degree to

any other university or institution other than Macquarie University.

I also certify that the thesis is an original piece of research and it has been written by me. Any

help and assistance that I have received in my research work and the preparation of the thesis

itself have been appropriately acknowledged.

In addition, I certify that all information sources and literature used are indicated in the thesis.

The research presented in this thesis was approved by the University of New South Wales

Ethics Review Committee (Study I, Approval Number: 2010-7-17, Date: 13th May, 2010;

Study II, Approval Number: 10153, Date: 1st June, 2010) and Macquarie University Ethics

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Bethany M. Wootton (42535727)

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- X. Wootton, B.M., Titov, N. & Dear, B.F. (In Preparation). A preliminary investigation of predictors of outcome and dropout in remote treatment for obsessive-compulsive disorder.

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#### LIST OF ABBREVIATIONS

ANOVA Analysis of variance

ANZCTR Australian and New Zealand Clinical Trials Register

BOCF Baseline observation carried forward

CA Completer analysis

CbT Cognitive and behavioural treatments for OCD which emphasise cognitive

techniques

cBT Cognitive and behavioural treatments for OCD which emphasise behavioural

techniques

CBT Cognitive and behavioural treatments for OCD which emphasise both cognitive and

behavioural techniques

CCBT Computerised cognitive behaviour therapy

CIDI Computerised Composite International Diagnostic Interview

CMI Clomipramine

DBS Deep brain stimulation

DIRT Danger ideation reduction therapy
DOCS Dimensional obsessive compulsive scale

DSM Diagnostic and statistical manual ERP Exposure and response prevention fMRI Functional magnetic resonance imaging

GAD Generalised anxiety disorder

GAD-7 Generalised Anxiety Disorder 7-Item Scale
iCBT Internet-administered cognitive behaviour therapy
iPT Internet-administered psychological treatment

ITT Intention to treat K10 Kessler 10 Item Scale

LOCF Last observation carried forward MDD Major depressive disorder

MINI MINI international neuropsychiatric interview NSMHWB National Survey of Mental Health and Wellbeing

OBQ Obsessive Beliefs Questionnaire

OCCWG Obsessive Compulsive Cognitions Working Group

OCD Obsessive-compulsive disorder

OCI-R Obsessive Compulsive Inventory – Revised

PANDAS Paediatric Autoimmune Neuropsychiatric Disorders Associated With Streptococcal

Infections

PD Panic disorder

PHQ-9 Patient Health Questionnaire 9-Item Scale

PET Positron emission tomography PTSD Post-traumatic stress disorder RCT Randomised controlled trial

SCID Structured Clinical Interview for DSM

SD Standard deviation SDS Sheehan Disability Scale

SP Social phobia

SPECT Single positron emission computer tomography

SPSS Statistical package for social sciences

SRI Serotonin reuptake inhibitor

SSRI Selective serotonin reuptake inhibitor

WHODAS-II World Health Organisation Disability Assessment Schedule – Second Edition

YBOCS Yale Brown Obsessive Compulsive Scale

YBOCS-SR Yale Brown Obsessive Compulsive Scale (Self-Report version)

