Effective Treatment for Youth Anxiety Disorders has Lasting Benefit

Reports new study in Journal of the American Academy of Child and Adolescent Psychiatry

Washington D.C., February 26, 2013 – A study published in the March 2014 issue of the Journal of the American Academy of Child and Adolescent Psychiatry found that the majority of youth with moderate to severe anxiety disorders responded well to acute treatment with cognitive behavioral therapy (CBT), medication (sertraline), or a combination of both. They maintained positive treatment response over a 6 month follow-up period with the help of monthly booster sessions.

As part of the NIMH Child/Adolescent Anxiety Multimodal Study (CAMS), a group of researchers led by Dr. John Piacentini of the UCLA Semel Institute for Neuroscience and Human Behavior, followed 412 children and adolescents ages 7-17 after they completed 12 weeks of acute treatment. Treatment responders were offered 6 additional monthly booster sessions, with those initially on medication continuing this treatment, and all youth, regardless of status at week 12, were re-evaluated 3 and 6 months later by trained clinicians. Twenty-seven percent of study participants also reported receiving outside (e.g., nonstudy) psychotherapy and/or medication for mental health symptoms over the 6 month follow-up period.

The study found that over 80% of youth rated as positive responders to one of the three CAMS treatments at Week 12 were also rated as responders at both the 3 and 6 month follow-up evaluations. Conversely, only 5% of youth who received combined CBT plus sertraline, and 15-16% of youth receiving either CBT-only or sertraline-only, failed to achieve responder status at any time during the study. Youth in the combined CBT+sertraline group showed greater treatment benefits on some but not all outcome measures and used less nonstudy treatments than those in the CBT-only and sertraline-only groups.

Collectively, anxiety disorders are the most common mental disorders in children and adolescents. Often overlooked, severe anxiety can significantly impair children’s school, social, and family functioning, and if untreated, can increase the risk of depression, alcohol and substance abuse, and occupational difficulties in adulthood.

CAMS is the largest randomized controlled comparative treatment trial for child/adolescent anxiety disorders ever conducted. Participants were recruited at six regionally dispersed sites throughout the United States (UCLA, Duke University, Columbia University/New York University, Johns Hopkins University, Temple University, and the Western Psychiatric Institute and Clinics/University of Pittsburgh) and randomly assigned to 12 weeks of treatment with cognitive behavioral therapy (Coping cat), the selective serotonin reuptake-inhibiting [SSRI] medication sertraline, cognitive behavioral therapy combined with sertraline, or pill placebo. All participants had moderate to severe separation anxiety disorder, generalized anxiety disorder or social phobia, with most having multiple anxiety or other mental health disorders.

“The results of this study provide further evidence of the benefits of cognitive behavioral therapy and SSRI medication, alone or in combination, for treating clinically significant anxiety in children and adolescents,” said Dr. Piacentini. “A separate project by the CAMS researchers is now gathering information on how study participants are doing up to 10 years after study participation.”

The article “24- and 36-Week Outcomes for the Child/Adolescent Anxiety Multimodal Study (CAMS)” by John Piacentini, Ph.D., Shannon Bennett, Ph.D., Scott Compton, Ph.D., Philip C. Kendall, Ph.D., Boris Birmaher, M.D., Anne Marie Albano, Ph.D., John March, M.D., M.P.H., Joel Sherrill, Ph.D., Dara Sakolsky, M.D., Golda Ginsburg, Ph.D., Moira Rynn, M.D., R. Lindsey Bergman, Ph.D., Elizabeth Gosch, Ph.D., Bruce Waslick, M.D., Satish Iyengar, Ph.D., James McCracken, M.D., and John Walkup, M.D. (http://dx.doi.org/10.1016/j.jaac.2013.11.010) appears in the Journal of the American

A related editorial, “Treating Anxiety in Youth: Does Maintenance Treatment Maintain?” by Dr. Neal D. Ryan, (http://dx.doi.org/10.1016/j.jaac.2013.11.008) is published in the same issue.

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Notes for editors
Full text of the article is available to credentialed journalists upon request; contact Mary Billingsley at +1 202 966 7300 x105 or mbillingsley@jaacap.org. Journalists wishing to interview the authors may contact John Piacentini at jpiacentini@mednet.ucla.edu.

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The journal’s purpose is to advance research, clinical practice, and theory in child and adolescent psychiatry. It is interested in manuscripts from diverse viewpoints, including genetic, epidemiological, neurobiological, cognitive, behavioral, psychodynamic, social, cultural, and economic. Studies of diagnostic reliability and validity, psychotherapeutic and psychopharmacological treatment efficacy, and mental health services effectiveness are encouraged. The journal also seeks to promote the well-being of children and families by publishing scholarly papers on such subjects as health policy, legislation, advocacy, culture and society, and service provision as they pertain to the mental health of children and families.

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