

Studien
zur Wirksamkeit
Humanistischer Psychotherapie
(weitere Studien / Nachtrag II
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Inhalt

1. Tabellarische Übersicht.....	2
2. Abstracts und weitere bibliografische Informationen.....	
Quellenangaben.....	4

1. Tabellarische Übersicht

Autor und Jahr	Teilnehmer/innen der Untersuchung	Anwendungsbereich	Behandlungsarme	Ergebnisse	Nr.
Angus et al. 2015		multiple		Übersicht über die letzten 25 Jahre Forschung zur Humanistischen Psychotherapie	275
Horn et al. 2014 (CT) Horn et al. 2015 (Cost-Effectiveness Studie)	A) = 76 B) = 688	Persönlichkeitsstörungen	A) inpatient psychotherapy based on transactional analysis (STIP-TA) B) other psychotherapies (OP)	CT: The primary outcome measure was general psychiatric symptomatology; secondary outcomes were psychosocial functioning and quality of life. In 67 pairs of patients, both STIP-TA and OP showed large symptomatic and functional improvements. However, STIP-TA patients showed more symptomatic improvement at all time points compared to OP patients. At 36 months, 68% of STIP-TA patients were symptomatically recovered compared to 48% of OP patients. STIP-TA outperformed OP in terms of improvements in general psychiatric symptomatology and quality of life. Superiority of STIP-TA was most pronounced at 12-month follow-up, but remained intact over the course of the 3-year follow-up. Cost-Effectiveness: Mean three year costs were €59,834 for STIP-TA and €69,337 for OP, a difference of €-9,503 (95% CI -32,561 to 15,726). Costs per quality adjusted life years (QALYs) were 2.29 for STIP-TA and 2.05 for OP, a difference of .24 (95% CI .05 to .44). The STIP-TA intervention was dominant, thus less costly and more effective than OP. Sensitivity analyses displayed similar results.	276/ 277
Kreuzer et al. 2012	36	Tinnitus	A) Mindfulness and body-psychotherapy based group treatment of chronic tinnitus B) Waitlist	ANOVA testing for the primary outcome showed a significant interaction effect time by group ($F = 7.4$; $df = 1,33$; $p = 0.010$). Post hoc t-tests indicated an amelioration of TQ scores from baseline to week 9 in both groups (intervention group: $t = 6.2$; $df = 17$; $p < 0.001$; control group: $t = 2.5$; $df = 16$; $p = 0.023$), but the intervention group improved more than the control group. Groups differed at week 7 and 9, but not at week 24 as far as the TQ score was concerned.	278
Shashi et al. 1999	10	Emotionale Störungen des Kindesalters	A) Non-directive play therapy + family counseling B) Family counseling	The results reveal statistically significant reduction of symptoms between pre- and post-therapy assessments in the study group but not in the control group	279
Szigethy et al. 2014	178	Psychische Störungen bei körperlichen Beschwerden	A) Cognitive behavioral Therapy (CBT) B) supportive nondirective therapy (SNDT)	A total of 178 participants (82%) completed the 3-month intervention. Both psychotherapies resulted in significant reductions in total Children's Depression Rating Scale Revised score (37.3% for CBT and 31.9% for SNDT), but the difference between the 2 treatments was not significant ($p = .16$). There were large pre-post effect sizes for each treatment ($d = 1.31$ for CBT and $d = 1.30$ for SNDT). More than 65% of youth had a complete remission of depression at 3 months, with no difference between CBT and SNDT (67.8% and 63.2%, respectively). Compared to SNDT, CBT was associated with a greater reduction in IBD activity ($p = .04$) but no greater improvement on the Clinical Global Assessment Scale ($p = .06$) and health-related quality of life (IMPACT-III scale) ($p = .07$).	280

Washington et al. 2001	55	Abhängigkeit/Missbrauch	A) cognitive therapy (24) B) experiential therapy (17) C) control group (14)	This experimental study examined effectiveness of two group therapy models on chemically dependent women's perceptions of self-efficacy and personal control. Participants were randomly assigned to two therapeutic approaches (experiential or cognitive) or the control group. Experimental and control groups were pre- and posttested on self-efficacy and personal control. Significant differences were found for social self-efficacy, with the cognitive and experiential groups having higher scores than the control group. Changes from pre- to posttest in social self-efficacy were greatest for the cognitive group. This study indicated that additional brief therapeutic interventions beyond those generally offered in drug rehabilitation programs are modestly useful.	281
Schottelkorb et al. 2012	31	Posttraumatische Belastungsstörung	A) child-centered play therapy (CCPT) B) trauma-focused cognitive-behavioral therapy (TF-CBT)	Results indicated that both CCPT and TF-CBT were effective in reducing trauma symptoms according to child and parent report. Findings support the use of CCPT in treating traumatized refugee children	282
Herbert et al. 2009	73	Angststörungen	A) Group CBT B) Individual CBT C) Supportive Psychotherapy	All three treatments were associated with significant reductions in symptoms and functional impairment, and in improved social skills. No differences between treatments emerged on measures of symptoms.	283
Röhrich et al. 2013	31	Depressionen	A) Body psychotherapy (BPT) B) Waitlist control group	Thirty-one patients were included and twenty-one received the intervention. At the end of treatment patients in the immediate BPT group had significantly lower depressive symptom scores than the waiting group (mean difference 8.7, 95% confidence interval 1.0–16.7). Secondary outcomes did not show statistically significant differences. When the scores of the waiting group before and after BPT (as offered after the waiting period) were also considered in the analysis, the differences with the initial waiting group remained significant.	284
Böhm, 2015	95	Störungen des Sozialverhaltens	A) Gestalttherapie B) Systemische Familientherapie	Beide Therapieverfahren führten gleichermaßen zu signifikanten Effekten.	285

Quellenangaben

- Angus, L., Watson, J. C., Elliott, R., Schneider, K., & Timulak, L. (2015). Humanistic psychotherapy research 1990–2015: From methodological innovation to evidence-supported treatment outcomes and beyond. *Psychotherapy Research, 25*(3), 330–347. <http://doi.org/10.1080/10503307.2014.989290>
- Böhm, A. (2015). *Zur Wirksamkeit von Gestalttherapie mit Kindern und Jugendlichen*. Sigmund Freud Privatuniversität Wien.
- Eva Szigethy, S. I. B. (2014). Randomized Efficacy Trial of Two Psychotherapies for Depression in Youth With Inflammatory Bowel Disease. *Journal of the American Academy of Child and Adolescent Psychiatry, 53*(7), 726–35. <http://doi.org/10.1016/j.jaac.2014.04.014>
- Herbert, J. D., Gaudiano, B. A., Rheingold, A. A., Moitra, E., Myers, V. H., Dalrymple, K. L., & Brandsma, L. L. (2009). Cognitive behavior therapy for generalized social anxiety disorder in adolescents: a randomized controlled trial. *Journal of Anxiety Disorders, 23*(2), 167–177. <http://doi.org/10.1016/j.janxdis.2008.06.004>
- Horn, E. K., Verheul, R., Thunnissen, M., Delimon, J., Goorden, M., Hakkaart-van Roijen, L., ... Busschbach, J. J. V. (2015). Cost-Effectiveness of Short-Term Inpatient Psychotherapy Based on Transactional Analysis in Patients With Personality Disorder. *Journal of Personality Disorders, 1–19*. http://doi.org/10.1521/pedi_2015_29_210
- Horn, E. K., Verheul, R., Thunnissen, M., Delimon, J., Soons, M., Meerman, A. M. M. A., ... Busschbach, J. J. V. (2014). Effectiveness of Short-Term Inpatient Psychotherapy Based on Transactional Analysis With Patients With Personality Disorders: A Matched Control Study Using Propensity Score. *Journal of Personality Disorders, 1–21*. http://doi.org/10.1521/pedi_2014_28_166
- Kreuzer, P. M., Goetz, M., Holl, M., Schecklmann, M., Landgrebe, M., Staudinger, S., & Langguth, B. (2012). Mindfulness-and body-psychotherapy-based group treatment of chronic tinnitus: a randomized controlled pilot study. *BMC Complementary and Alternative Medicine, 12*(1), 235. <http://doi.org/10.1186/1472-6882-12-235>
- Röhrich, F., Papadopoulos, N., & Priebe, S. (2013). An exploratory randomized controlled trial of body psychotherapy for patients with chronic depression. *Journal of Affective Disorders, 151*(1), 85–91. <http://doi.org/10.1016/j.jad.2013.05.056>
- Schottelkorb, A. A., Dumas, D. M., & Garcia, R. (2012). Treatment for childhood refugee trauma: A randomized, controlled trial. *International Journal of Play Therapy, 21*(2), 57–73. <http://doi.org/10.1037/a0027430>
- Shashi, K., Kapur, M., & K, D. (1999). Evaluation of play therapy in emotionally disturbed children. *NIMHANS Journal, 17*(2), 99–111.
- Washington, O. G. (2001). Using brief therapeutic interventions to create change in self-efficacy and personal control of chemically dependent women. *Archives of Psychiatric Nursing, 15*(1), 32–40. <http://doi.org/10.1053/apnu.2001.20579>