

Treatment of childhood anxiety disorder in the context of maternal anxiety disorder: a randomised controlled trial and economic analysis

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Plain English summary

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Anxiety disorders are characterised by a level of fear and avoidance that interferes in day-to-day life. They are among the most common emotional difficulties experienced by children and present a risk for ongoing emotional difficulties in later life. A talking therapy called cognitive-behavioural therapy (CBT) is effective for the treatment of childhood anxiety disorders; however, if parents also have an anxiety disorder children often do not benefit as much as they should. We set out to establish whether or not supplementing CBT for the child (child cognitive-behavioural therapy; CCBT) with (i) CBT focused on maternal anxiety disorders, or (ii) an intervention focused on maternal parenting responses, would lead to better child treatment outcomes than CCBT alone.

A total of 211 children were randomly allocated to (i) CCBT and CBT for the maternal anxiety disorder (CCBT + maternal CBT); (ii) CCBT and an intervention focused on how the mother interacted with her child [CCBT + mother-child interaction (MCI)]; or (iii) CCBT alone.

In terms of children's anxiety disorder diagnoses, severity and symptoms, there was only limited evidence that supplementing individual CBT for children with anxiety disorders with either intervention significantly improved treatment outcomes. However, when the cost and relative benefits of treatment to the child were taken into account, the intervention focused on the MCI was good value for money compared with CCBT alone.

These findings suggest that, in the context of maternal anxiety disorders, adding treatment focused on how mothers respond to their child, but not treatment focused on maternal anxiety disorders, may be a cost-effective approach to treatment.

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