Religious versus conventional psychotherapy for major depression in patients with chronic medical illness: rationale, methods, and preliminary results

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Abstract

This paper (1) reviews the physical and religious barriers to CBT that disabled medically ill-depressed patients face, (2) discusses research on the relationship between religion and depression-induced physiological changes, (3) describes an ongoing randomized clinical trial of religious versus secular CBT in chronically ill patients with mild-to-moderate major depression designed to (a) overcome physical and religious barriers to CBT and (b) compare the efficacy of religious versus secular CBT in relieving depression and improving immune and endocrine functions, and (4) presents preliminary results that illustrate the technical difficulties that have been encountered in implementing this trial. CBT is being delivered remotely via instant messaging, telephone, or Skype, and Christian, Jewish, Muslim, Buddhist, and Hindu versions of religious CBT are being developed. The preliminary results described here are particular to the technologies employed in this study and are not results from the CBT clinical trial whose findings will be published in the future after the study ends and data are analyzed. The ultimate goal is to determine if a psychotherapy delivered remotely that integrates patients’ religious resources improves depression more quickly than a therapy that ignores them, and whether religious CBT is more effective than conventional CBT in reversing depression-induced physiological changes.


[Context Link]. Koenig H. G., King D., Carson V. (Eds.) For chronically ill patients with major depression, an approach to cognitive-behavioral therapy (CBT) that incorporates patients' religious beliefs is at least as effective as conventional CBT, suggests a study. The researchers evaluated a religiously integrated CBT approach “that takes into account and utilizes the religious beliefs of clients.” The study included 132 patients with major depression and chronic illness. However, the results suggest that religiously integrated CBT is effective for treatment of major depression in chronically ill patients “who are at least somewhat religious.” The study also suggests that religiously integrated CBT may be more effective for people who are highly religious.