

Depression & Anxiety Programme for Chronic Pain

This programme from SilverCloud[®] by Amwell[®] is designed for individuals living with chronic pain (CP) who are experiencing comorbid symptoms of depression and anxiety. The programme aims to relieve these symptoms by:

- Focusing on developing more flexible ways of thinking
- Increasing awareness and understanding of emotions
- Increasing activity and motivation in daily life, while considering the limitations to capacity that can occur when living with chronic pain (CP)

This programme aligns with NICE guidelines NG193.¹

Therapeutic concepts

Thought, Feelings and Behaviour (TFB) cycle

The programme provides interactive education on the principles of Cognitive Behavioural Therapy (CBT). Users increase self-awareness by monitoring the interaction between their emotions, thoughts, behaviour and physical symptoms.²

Behavioural activation

Behavioural Activation has been shown to be an effective treatment for depression.³ Users are guided to use activity scheduling to make small, sustainable changes to their behaviour.

Cognitive restructuring

In cognitive restructuring users are guided to notice their thoughts and challenge any distorted or negative thinking styles that are impacting their mood, physical symptoms and behaviour. It has been shown to be effective in a variety of mental health disorders.⁴

Relaxation & mindfulness

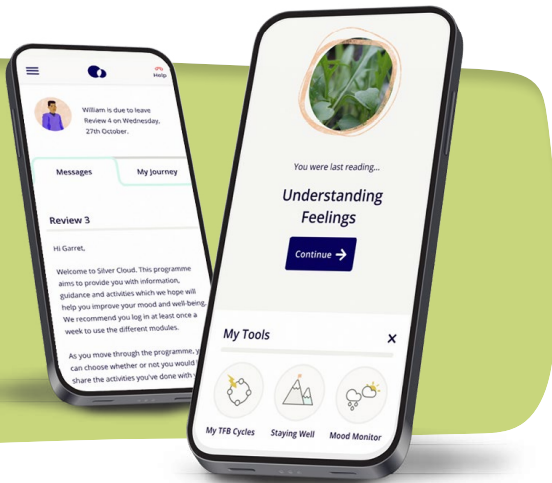
Relaxation and mindfulness exercises are simple and effective tools for alleviating tension and anxiety.⁵ With regular practise, rapid relaxation can be achieved more easily in provoking situations.⁶ Mindfulness predicts increased self-regulated behaviour and a positive emotional state.⁷



How it works

The structure and content of the *Depression & Anxiety Programme for CP* follows the evidence-based principles of CBT, guiding users to reframe thinking patterns and build coping skills.⁸

In keeping with the principles of CBT, which endorse a structured outline and a goal-oriented focus, each module contains chronic pain-specific information, interactive activities, homework suggestions and personal stories.⁹



The programme is available 24/7, allowing users to access the content at a time and place that suits them. It can be accessed using a phone, tablet or computer and can be tailored to suit the needs of the individual.

Summary of programme modules:

- **Getting Started** The user is introduced to CBT and how the Thoughts, Feelings, Behaviour (TFB) cycle can help them understand depression and anxiety in chronic pain.
- **Understanding Feelings** Focusing on the feelings component of the TFB cycle, the user can begin to build their own TFB cycles and track the impact of their lifestyle choices on their mood.
- **Boosting Behaviour** Introduces the cycle of inactivity and its role in maintaining depression and anxiety. Helps the user find motivation to engage in activities that provide a sense of achievement.
- **Spotting Thoughts** The user is introduced to thinking traps and is encouraged to examine the outcomes of TFB cycles.
- **Challenging Thoughts** Helps the user to learn techniques to tackle thinking traps and identify alternative ways of thinking.
- **Managing Worry** Differentiating between hypothetical and practical worry, the user learns new ways to understand and manage their worries.
- **Anxiety & Your Health** Introduces health anxiety and supports the user to recognise and manage unhelpful behaviours.
- **Bringing It All Together** Prepares the user for coming to the end of the programme and focuses on helping them stay well in the future.

Additional module:

- **Core Beliefs** Targets deeply held core beliefs that underpin unhelpful thoughts and can keep the cycle of depression and anxiety going.

References:

1. National Institute for Health and Care Excellence. (2021). Evidence review for psychological therapy for chronic primary pain. NICE.
2. Ellis, A. (1995). Changing rational-emotive therapy (RET) to rational emotive behavior therapy (REBT). *Journal of Rational-Emotive & Cognitive-Behavior Therapy*.
3. Cuijpers, P., Van Straten, A., & Warmerdam, L. (2007). Behavioral activation treatments of depression: A meta-analysis. *Clinical psychology review*, 27(3), 318-326.
4. Alleva, J. M., Sheeran, P., Webb, T. L., Martijn, C., & Miles, E. (2015). A meta-analytic review of stand-alone interventions to improve body image. *PLoS One*, 10(9), e0139177.
5. Moorey, S., & Greer, S. (2011). *Oxford guide to CBT for people with cancer*. OUP Oxford.
6. Padesky, C. A. (2020). *The Clinician's Guide to CBT Using Mind Over Mood*. Guilford Publications.
7. Brown, K. W., & Ryan, R. M. (2003). The benefits of being present: mindfulness and its role in psychological well-being. *Journal of personality and social psychology*, 84(4), 822.
8. Beck, J. S. (2011). *Cognitive behavior therapy*. New York: Basics and beyond. Guilford Publication.
9. Maerov, P. J. (2006). Demystifying CBT: Effective, easy-to-use treatment for depression and anxiety. *Current Psychiatry*, 5(8), 26.

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