Lyra

New Study Shows Telehealth Blended Care Therapy Highly Effective for Anxiety and Depression

Depression and anxiety are the two most common mental health conditions worldwide, affecting more than 50 million adults in the United States alone. These illnesses not only cause suffering and reduced quality of life, but also cost the global economy an estimated $1 trillion annually in lost productivity. In the work-place, depression and anxiety are linked to lower productivity among employees through absenteeism, presenteeism, sick leave, or disability leave. While effective treatments such as cognitive Behavioral Therapy (CBT) have become more widely used for anxiety and depression, persistent barriers—including high out-of-pocket costs, few available providers in traditional insurance networks, and stigma—keep millions of people from getting care.

Blended Care-Cognitive Behavioral Therapy for Depression and Anxiety in Real-World Settings: Pragmatic Retrospective Study, published in the Journal of Medical Internet Research (JMIR), shows that live video therapy paired with online CBT-based lessons can be highly effective in treating these conditions. Participants who received Lyra Blended-Care Cognitive Behavioral Therapy (BC-CBT) treatment saw significant decreases in depression and anxiety symptoms, and 83 percent recovered from their condition. Notably, this high recovery rate occurred after just five sessions on average—much shorter than the 12- to 16-session protocol of most CBT treatments. The meaningful and rapid progress participants made demonstrates the efficacy of a high-quality, intensive therapy experience that combines therapist-led CBT sessions via video with personalized online lessons and tools.

KEY TAKEAWAYS:

→ **83% of study participants showed reliable clinical improvement or recovered from anxiety or depression**

→ **73% of participants experienced clinical improvement, compared to 24% of participants in research on therapy outcomes under traditional health care plans**

→ **Clients who received Lyra BC-CBT improved or recovered from anxiety or depression 2-3x faster than in typical CBT treatments**

The combined strengths of clinician-led therapy and online CBT tools yields highly effective treatment

When combined, therapist-led CBT and digital CBT (which involves the online delivery of clinical CBT content) leverages the strengths of both approaches while mitigating each one's disadvantages. Clinician-led therapy addresses the low initial engagement and high dropout rates typically seen among digital CBT clients by allowing them to develop a therapeutic alliance with their provider—a factor associated with greater motivation to start and continue engaging in care.
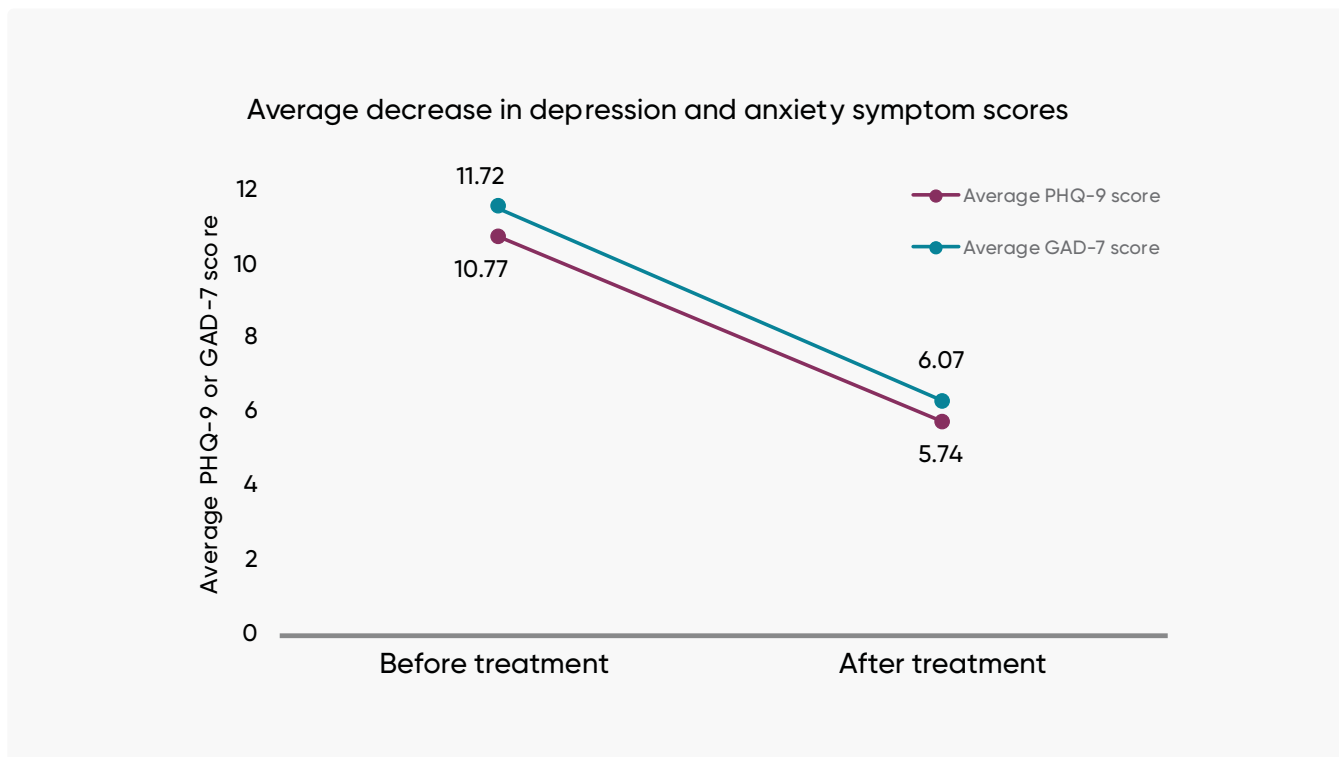
Additionally, having the therapist lead and oversee clinical assessment, treatment plans, and sessions creates a more personalized care experience than digital CBT alone. In this combined approach, the therapist chooses online exercises directly tied to the client's goals, tending to boost clients' motivation and commitment to treatment. With their therapists' support, supplemented by assigned digital lessons and exercises, clients are more likely to stay motivated to sustain positive behavioral changes and less likely to stop treatment.

Integrating teletherapy with digital lessons can make care more accessible and efficient

While BC-CBT programs can involve in-person visits with a provider, delivering care via video makes it accessible to more people who might otherwise be unable to access care—for example, because they can't travel to weekly appointments. (Importantly, teletherapy has consistently been shown to be just as effective as in-person psychotherapy.) Similarly, online CBT is accessible anytime to anyone with an internet connection. As a result, fusing the two approaches is more cost-effective and eliminates common barriers to care.

Unique care platform boosts efficiency and clinical efficacy for clients and therapists

The research shows how the Lyra Care Platform enables an efficient yet potent experience for both clients and clinicians, contributing to significant improvements in care outcomes in a relatively short time period. The platform contains a host of features that encourage and support clients throughout treatment. This includes providers' ability to screen-share with clients during sessions to preview and model digital exercises and review clients' progress over time. These practices, along with notifications encouraging

Average decrease in depression and anxiety symptom scores

Average PHQ-9 or GAD-7 score

- Average PHQ-9 score
- Average GAD-7 score

11.72

10.77

6.07

5.74

Before treatment　　　　After treatment

clients to complete lessons and exercises, may boost the likelihood that a client engages with the online CBT tools, making the treatment more effective.

The combination of therapist-led sessions and online CBT also makes for a more intensive, effective therapy experience than conventional CBT alone, which can contribute to faster symptom reduction and recovery rates. The Lyra BC-CBT platform gives BC-CBT clients 24/7 access to tools and ongoing support to help them make strides in their recovery.

For example, in between sessions, therapists can use the platform's built-in messaging capabilities to securely communicate with clients to encourage or support them in applying skills learned in sessions or lessons. Additionally, Lyra's HIPAA-secure platform allows Blended Care therapists to record sessions with clients' permission, which are then reviewed by supervising clinicians to help assure the consistent delivery of high-quality care throughout treatment.

Methodology

The research is the first known large-scale study of its kind in the U.S. to examine the effectiveness of video-based BC-CBT outside of a clinical trial setting. Conducted by Lyra Health clinicians on their Blended Care Therapy program, the study included 385 participants with clinical-range depression or anxiety at baseline. The 49 care providers who participated in the study included licensed clinical psychologists, licensed marriage and family therapists (LMFTs), licensed clinical social workers (LCSWs), and licensed professional counselors (LPCs). Each provider was rigorously vetted through extensive application reviews and interviews to verify their commitment to and proficiency in CBT. Historically, just 5 percent of therapists who apply to Lyra's therapy network have been accepted. All of the therapists also received in-person training in Lyra Blended Care Therapy.

Participants were Lyra members who began Blended Care Therapy between November 2018 and September 2019. Each participant had access to at least 12 sessions of treatment through the Lyra benefit, provided by an employer. Participants met with their therapist weekly or bi-weekly via video through the Lyra Care Platform. Sessions were followed by therapist-assigned digital lessons and exercises grounded in treatment approaches such as Unified Treatment Protocol, Acceptance Commitment Therapy (ACT), and Dialectical Behavior Therapy (DBT).

To be included in the research, participants had to score above the clinical cut-off for either depression or anxiety on one of two standardized, third-party clinical assessments: the Patient Health Questionnaire-9 (PHQ-9) for depression or the Generalized Anxiety Disorder-7 (GAD-7) for anxiety. The treatment also focused on assurance of high-quality, evidence-based care enhanced by peer supervision and consultation with other Lyra therapists.

To measure the effectiveness of the Blended Care Therapy program, the study relied on hierarchical linear modeling (HLM) to examine change over time. The researchers also conducted paired samples t-tests between baseline and last available assessment scores, and calculated Cohen's d, a conservative measure that controls for the correlation between measurements.

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