

Cognitive Therapy for Depression

Are your thoughts dragging you down?

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Almost everyone has dark thoughts when his or her mood is bad. With depression, though, the thoughts can be extremely negative. They can also take over and distort your view of reality.

Cognitive therapy can be an effective way to defuse those thoughts. When used for depression, cognitive therapy provides a mental tool kit that can be used to challenge negative thoughts. Over the long term, cognitive therapy for depression can change the way a depressed person sees the world.

Studies have shown that cognitive therapy works at least as well as antidepressants in helping people with mild to moderate depression. Treatment with medication and/or psychotherapy can shorten depression's course and can help reduce symptoms such as fatigue and poor self-esteem that accompany depression. Read on to see how cognitive therapy or talk therapy might help you start thinking and feeling better if you are depressed.

Cognitive Therapy for Depression: A Thinking Problem

Cognitive therapy was developed in the 1960s as an alternative way to treat depression, says Judith S. Beck, PhD. Beck is director of the Beck Institute for Cognitive Therapy and Research located just outside Philadelphia. She tells WebMD that the principle underlying cognitive therapy is "*thoughts influence moods.*"

According to cognitive therapists, depression is maintained by constant negative thoughts. These thoughts are known as automatic thoughts. That means they occur without a conscious effort. For example, a depressed person might have automatic thoughts like these:

- "I always fail at everything."
- "I'm the world's worst mother."
- "I am doomed to be unhappy."

Beck says automatic thoughts "may have a grain of truth. But," she adds, "the depressed person distorts or exaggerates the reality of the situation." This negative distortion helps fuel the depression.

With cognitive therapy, a person learns to recognize and correct negative automatic thoughts. Over time, the depressed person will be able to discover and correct deeply held but false beliefs that contribute to the depression.

"It's not the power of positive thinking," Beck says. "It's the power of realistic thinking. People find that when they think more realistically, they usually feel better."

Cognitive Therapy for Depression: How It Works

Cognitive therapy posits that most problems have several parts. Those parts include:

- the problem as the person sees it
- the person's thoughts about the problem
- the person's emotions surrounding the problem
- the person's physical feelings at the time
- the person's actions before, during, and after the problem occurs

The way cognitive therapy works is a patient learns to "disassemble" problems into these various parts. Once a person does that, problems that seemed overwhelming become manageable.

During regular cognitive therapy sessions, a trained therapist teaches the tools of cognitive therapy. Then between sessions, the patient often does homework. That homework helps the person learn how to apply the tools to solve specific life problems.

"They make small changes in their thinking and behavior every day," Beck says. "Then over time, these small changes lead to lasting improvement in mood and outlook."

Cognitive Therapy for Depression: Evidence It's Effective

How well does cognitive therapy for depression work? And how well does it stack up when compared to other treatments for depression?

Robert DeRubeis, PhD, is professor of psychology and associate dean for the social sciences at the University of Pennsylvania. He tells WebMD, "The evidence is consistent and convincing that cognitive therapy is an effective treatment for depression. And," he adds, "[that means] not just the milder forms of depression."

Large, well-designed studies that include hundreds of subjects have shown the following:

1. *Cognitive therapy works as well as antidepressant medicines alone to improve mild to moderate depression.*

"When conducted well, cognitive therapy works as quickly and as thoroughly as antidepressant medications," says DeRubeis, who has led several large studies of cognitive therapy for depression. "Used consistently, cognitive therapy may work better than antidepressants in the long run," he adds.

2. Cognitive therapy works as well as antidepressant medicines at preventing depression relapses.

DeRubeis tells WebMD that when a person continues using the skills he learned with cognitive therapy, those skills help prevent relapses, a common problem with depression. "Cognitive therapy appears to prevent the return of symptoms as well as taking medication," he says. "And it does it without medication."

3. Cognitive therapy reduces residual symptoms of depression.

After a "successful" treatment for depression, many people continue to have mild depressive symptoms. Adding cognitive therapy to the treatment plan helps reduce these residual symptoms.

Cognitive Therapy for Depression: With or Without Antidepressants?

Cognitive therapy has become the standard "talk therapy" used to treat depression. In addition to its high rate of success, it is also cost-effective. The benefits from cognitive therapy often come in weeks rather than months or years, as may be the case with other treatments.

But can cognitive therapy replace antidepressant medications? For some people, says DeRubeis, the answer is yes.

But it doesn't have to be an "either-or" decision. In some studies, cognitive therapy for depression worked even better when combined with antidepressants.

Because everyone's situation is unique, the decision about how to use cognitive therapy should always be made by the patient and the mental health provider together.

Cognitive Therapy for Depression: Think Well, Feel Better

Depression demonstrates how closely linked the mind and body are. People who are depressed, frequently feel bad physically, not just sad or "down." Besides helping to improve a person's mood, cognitive therapy can also improve the physical symptoms of depression. It does this by:

- improving a person's overall energy level
- increasing the quality and duration of sleep
- improving appetite and restoring the pleasure of eating
- heightening a person's sex drive

Cognitive therapy can also relieve chronic pain. Many people with chronic pain also have depression. According to Beverly E. Thorn, PhD, cognitive therapy treats both at once." Thorn is professor of psychology at the University of Alabama and author of *Cognitive Therapy for Chronic Pain*. She says that after a course of cognitive therapy for chronic pain, "patients' symptoms related to depression are reduced as well."

The effects of cognitive therapy are often longer lasting than pain medicines. "Pain medications have all kinds of side effects and can actually add to depression," Thorn says. With cognitive therapy, patients learn coping skills and how to apply them. When they do, there is less need for pain medications.

Cognitive Therapy for Depression: How to Start

If you feel you might be depressed, the first thing to do is call your primary care physician. He or she can probably refer you to a professional therapist or psychiatrist who is knowledgeable about cognitive therapy.

If not, you can find a cognitive therapist in your area by contacting one of the following professional organizations:

Academy of Cognitive Therapy

- <http://www.academyofct.org>
- Association for Behavioral and Cognitive Therapies
- <http://www.abct.org/>
- The Beck Institute for Cognitive Therapy and Research
- <http://www.beckinstitute.org/>

Cognitive Therapy for Depression: 5 Questions to Ask Your Provider

Here are questions to ask your provider if you are considering cognitive therapy for depression:

1. Should I take antidepressants if I'm trying cognitive therapy?
2. How do I find a therapist who practices cognitive therapy?
3. Will my health insurance cover cognitive therapy?
4. When can I expect to start feeling better?
5. How will I know cognitive therapy is working for me?

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