

The effectiveness of bibliotherapy in alleviating tinnitus-related distress

John M. Malouff*, William Noble, Nicola S. Schutte, Navjot Bhullar

University of New England, Australia

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Abstract

Objective: The present study examined the efficacy of bibliotherapy in assisting individuals experiencing distress related to tinnitus. **Methods:** One hundred sixty-two tinnitus sufferers from Australia participated in a study designed to examine the effectiveness of a cognitive–behaviorally based self-help book in reducing distress. To maximize the ecological validity of the findings, we excluded no individuals interested in treatment for tinnitus-related distress. **Results:** The experimental condition lost 35% of participants at postassessment, compared to 10% in the control group. In an analysis of participants who completed postintervention assessment, those assigned to the intervention condition, who received a tinnitus self-help book, showed significantly less tinnitus-related distress and general distress 2 months later compared to those assigned to the waiting list control condition. The intervention group's reduction in tinnitus-related

distress and general distress from preintervention to postintervention 2 months later was significant, and these participants maintained a significant reduction in distress on follow-up 4 months after they received the tinnitus self-help book. A long-term follow-up of all participants, who at that time had received the book at least a year previously, showed a significant reduction in tinnitus distress. Although these group differences and pre–post changes were significant, effect sizes were small. Intention-to-treat analyses showed no significant effect for between-groups analyses, but did show a significant effect for the 1-year follow-up pre–post analysis. **Conclusion:** Information on the effectiveness of using a self-help book, without therapist assistance, in alleviating distress is important, as bibliotherapy can provide inexpensive treatment that is not bound by time or place.

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Keywords: Bibliotherapy; Cognitive–behavioral therapy; Distress; Self-help; Tinnitus

Introduction

Tinnitus involves the perception of a persistent sound, in the absence of an acoustic source, that is often described as ringing, buzzing, whistling, or chirping. Approximately 14% of the adult population experiences tinnitus symptoms persistently [1], and 20% of those with such symptoms experience substantial distress because of their tinnitus [2]. Recent reviews of approaches to treatment for tinnitus indicate that no effective pharmacological treatment is available [3,4], nor is there yet an accessible physical treatment [5].

Cognitive–behavioral therapy (CBT) delivered by therapists tends to be effective in alleviating distress associated

with tinnitus [6,7]. A Cochrane review [8] indicated that this procedure used in tinnitus treatment can have a beneficial effect on quality of life compared to a waiting list control (SMD=0.7; 95% confidence interval=0.33–1.08). However, the review found no significant effect on subjective tinnitus loudness or depression. The Cochrane review found that cognitive–behavioral interventions in relation to tinnitus commonly use several of the following techniques: provision of information about tinnitus and its causes, changing overly negative appraisals of the tinnitus condition, building better control of attentional processes, management of sleep, and positive imagery and relaxation training [6,7]. One limitation of CBT as it has been used to help tinnitus sufferers is that it involves seeing a mental health professional, which may be associated with significant expense, delay, travel, and feared embarrassment. One possible way around these problems involves providing the treatment via a self-help book.

* Corresponding author. Psychology, University of New England, Armidale NSW 2351, Australia.

E-mail address: jmalouff@une.edu.au (J.M. Malouff).

The bibliotherapy approach

Self-help books exist for a wide variety of psychological problems. Studies of their value indicate that they can help individuals make substantial improvements [9,10], on average about as much as psychotherapy [11–14]. Meta-analyses of the efficacy of bibliotherapy have shown treatment effect sizes (Cohen's *d*) of .56 for bibliotherapy across a range of psychological problems [13]. Studies of Internet-administered treatment showed similar effect sizes, although these were slightly lower than the effect sizes for bibliotherapy [15].

The finding that bibliotherapy can be effective in alleviating distress may reflect the fact that theoretically grounded psychological treatments tend to have positive effects. Meta-analytic reviews have shown that therapist-delivered psychotherapies with a sound theoretical basis are substantially more effective than waiting list or placebo control conditions in the treatment of mental disorders [16]. Self-help books, including tinnitus self-help books, based on a theoretically sound basis may have treatment effects roughly equal to the effects of other types of psychological treatment.

The finding that bibliotherapeutic approaches can have a positive effect on depression [15,17] has special implications for tinnitus-related distress. A number of studies have found an association between tinnitus-related distress and depression, and improvements in tinnitus-related disability and depressive symptoms covary [7]. Tyler et al. [18] have suggested that tinnitus distress and depression may have a common cause.

There are a number of tinnitus self-help books [19–22], and these offer information and strategies to help people with tinnitus better deal with the condition. As cognitive-behavioral techniques for tinnitus-related distress have been found effective when delivered by therapists, a self-help book based on such techniques would seem to hold promise.

One published study [23] has examined the effectiveness of a bibliotherapeutic approach, in combination with support by a therapist, in reducing tinnitus-related distress. Kaldo et al. [23] conducted an intervention in which they provided Swedish participants with a cognitive-behaviorally based tinnitus self-help guide prepared for the study, together with telephone calls by therapists with clinical psychology training. During the calls, which occurred weekly over a 6-week period, therapists evaluated treatment progress and provided advice to participants on how to progress. Participants in the intervention condition showed significant reductions in tinnitus-related distress, depression, and anxiety from pretest to posttest compared to participants in the waiting list control condition. Participants who were initially in the control condition were later provided with the self-help guide and less intensive contact with a therapist; under this condition, the therapists had only one telephone session with the participants and, in this

session, therapists and participants created treatment plans and goals. Participants in this less intensive therapy contact condition also showed significant reductions in tinnitus-related distress and psychological distress, although not quite as much reduction in tinnitus distress and anxiety as those who had the more intensive therapist contact. The study did not examine the effect of using a self-help book with no additional support, as an individual acquiring a tinnitus self-help guide from a bookstore or library might do. The purpose of the present study was to evaluate the effect of using a self-help book without therapist assistance to treat individuals who seek help for tinnitus-related distress. In order to maximize the ecological validity of the study, we used no exclusionary criteria.

Kaldo-Sandstrom et al. [24] examined the effects of an Internet- and email-focused CBT on tinnitus-related psychological symptoms and found improvement from preintervention to postintervention in a group of individuals selected to have serious tinnitus and no psychiatric or social problems that might interfere with Internet treatment. Kaldo et al. [25] studied a CBT intervention delivered as an Internet-focused treatment for tinnitus-related distress and found that this treatment was as effective as group in-person treatment.

Method

Participants

Participants were recruited from throughout Australia through postings on tinnitus support Web pages, announcements at in-person tinnitus support groups, postings in audiology practices, and media releases. Of the 219 individuals who initially indicated interest in participating, 162 completed a mail-in questionnaire that assessed the variables of interest. We used no exclusionary criteria. All of these individuals had some symptoms of tinnitus, as assessed by items on the Tinnitus Severity Scale [27]. We did not collect data on other types of hearing problems, specific medical conditions, or other demographic characteristics of the sample. Sixty-nine percent of the participants reported constantly hearing tinnitus noise, with another 27% reporting the noise as being usually present. Seventy-three percent of participants reported that tinnitus noise interfered with their detection of sounds, and 72% reported that tinnitus noise interfered with their understanding of speech.

Design and procedure

The study consisted of a randomized controlled trial with premeasures, postmeasures, and follow-up measures. Individuals with tinnitus who volunteered to participate in the project were sent premeasures assessing tinnitus severity, tinnitus-related distress, general distress, and several other measures that are not the focus of this report. Participants who sent back completed questionnaires were matched on

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