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A Bibliotherapy Approach to Relapse Prevention in Individuals with Panic Attacks

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Abstract—The present study examined a relapse prevention (RP) program delivered via bibliotherapy in the treatment of individuals with panic attacks. Compared with a wait list control group, individuals receiving RP exhibited significant reductions on measures of frequency of panic attacks, panic cognitions, anticipatory anxiety, avoidance, and depression. In addition, individuals in the RP group were more likely to attain a “clinically significant change” in status on both panic-free status and level of avoidance more frequently than individuals in the control group. When compared with treatment effects evaluated in two prior phases of the study, the obtained results appear to be the product of a synchronous effect of bibliotherapy and minimal phone contact during the 6-month follow-up period. The results reflect the importance of brief therapist contact in increasing motivation for active participation in bibliotherapy interventions. © 2000 Elsevier Science Ltd. All rights reserved.

Keywords: Relapse prevention; Bibliotherapy; Self-help; Panic disorder; Panic attacks

The present study was conceived as the third phase of a three-phase project investigating the effectiveness of minimalist interventions in the treatment of individuals with a history of panic attacks. Phase 1 examined effectiveness of

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assessment and feedback (Roodman, Clum, Febraro, & Wright, 1995), whereas phase 2 examined the effectiveness of bibliotherapy and monitoring (Febraro, Clum, Roodman, & Wright, 1999). Phase 3—the present study—examined the effects of a relapse prevention (RP) program for individuals completing the first two phases of the study.

Relapse prevention was defined in a broad, inclusive manner to encompass all individuals who completed the bibliotherapy intervention provided in phase 2. Because participants were not required to attain a defined level of improvement before entering phase 3, RP, for the purposes of the present research, should be viewed as a form of augmenting therapy designed to improve further the adjustment of individuals seeking treatment for their panic attacks. This approach to RP is well established in the literature (Brownell, Marlatt, Licktenstein, & Wilson, 1986; Marlatt & Gordon, 1985; Stephens, Roffman, & Simpson, 1994), although other researchers have required an initial positive treatment response before entry into an RP program (Hiss, Foa, & Kozak, 1994).

The present study integrated two recent treatment trends in the anxiety disorders outcome literature: RP (Espie, 1986; Hiss, Foa, & Kozak, 1994; Ost, 1989) and the application of bibliotherapy-based interventions (Gould & Clum, 1993, 1995; Gould, Clum, & Shapiro, 1993; Lidren, Watkins, Gould, Clum, Astonio, & Tullock, 1994). Relapse prevention programs have a conceptual basis in the stage of change construct (Prochaska, Di Clemente, & Norcross, 1992), which postulates that interventions should be tailored to the stage of change. Presumably, after receiving an active treatment, individuals are in either the action or maintenance stage, depending on whether they continue to work on reducing symptomatology or whether their work is focused on maintaining their gains. Relapse prevention interventions use specific treatment strategies for maintaining and furthering gains made during the treatment phase.

Within the anxiety disorders literature, RP programs have been applied to individuals with obsessive-compulsive disorder (Espie, 1986; Hiss, Foa, & Kozak, 1994) and individuals with panic disorder and simple phobias (Ost, 1989). Although each of these studies supported efficacy of the RP approach, only the Hiss, Foa, and Kozak (1994) study used a control group. Hence, at present, the effectiveness of RP with anxiety disorders remains largely a matter for speculation.

Use of bibliotherapy approaches holds promise for the anxiety disorders in general (Gould & Clum, 1993; Marrs, 1995) and for panic disorder in particular (Gould & Clum, 1995; Gould, Clum, & Shapiro, 1993; Heckler, Losee, Fritzler, & Fink, 1996; Lidren, Watkins, Gould, Clum, Astonio, & Tullock, 1994). When shown to be effective, bibliotherapy is especially promising for individuals who are either geographically isolated or personally reluctant to access traditional therapy methods. Our use of a bibliotherapy approach to

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