

Telephone-based collaborative care program eases anxiety

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A telephone-delivered collaborative care program for treating panic and generalized anxiety disorders in primary care is significantly more effective than doctors' usual care at improving health-related quality of life, anxiety and mood symptoms, according to a new study led by researchers at the University of Pittsburgh School of Medicine. These findings from the National Institutes of Health-funded Reduce Limitations from Anxiety (RELAX) trial were published in the March issue of the *Journal of General Internal Medicine*.

Researchers enrolled 329 patients 18 to 64 years old who were referred by their [primary care](#) physicians from six UPMC-affiliated practice locations. Approximately 250 patients were rated "highly anxious" and randomized to either the telephone-delivered intervention or to their [primary care physician](#)'s usual care. The 79 other patients with "moderate" levels of [anxiety symptoms](#) were assigned to a "watchful waiting" group and later randomized if their anxiety symptoms worsened.

A study care manager regularly called patients in the intervention group to provide basic psycho-education; encourage healthy habits (sleep, exercise, avoid excess alcohol); assess treatment preferences for anti-anxiety medications; monitor response to treatment; and inform their primary care physicians of their care preference and progress.

At 12-months follow-up, anxiety symptoms remitted in 53 percent of intervention patients versus only 32 percent in patients who continued to

receive their primary care physicians' usual care, and the intervention also produced similar significant improvements in health-related quality of life, panic and [mood symptoms](#). These benefits persisted for another year after the intervention ended. African-Americans and men reported the greatest levels of improvement, and the 79 patients who reported moderate levels of anxiety at baseline generally did well over the course of follow-up, whether they were later randomized to the study intervention or not.

"While dozens of clinical trials have demonstrated the effectiveness of collaborative care for treating depression in primary care, comparatively few have addressed anxiety, despite their similar prevalence and adverse impact on health-related quality of life and excess utilization of health services," said Bruce L. Rollman, M.D., M.P.H., professor of medicine and director of Pitt's Center for Behavioral Health and Smart Technology. "Effective [collaborative care](#) for [anxiety](#) can be provided via telephone by college-educated, non-mental health care managers who follow an evidence-based treatment algorithm and work under the direction of a primary care physician."

More information: [10.1007/s11606-016-3873-1](https://doi.org/10.1007/s11606-016-3873-1) Bruce L. Rollman et al. Telephone-Delivered Stepped Collaborative Care for Treating Anxiety in Primary Care: A Randomized Controlled Trial, *Journal of General Internal Medicine* (2016). DOI: [10.1007/s11606-016-3873-1](https://doi.org/10.1007/s11606-016-3873-1)

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