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Q: What is short-term psychodynamic psychotherapy?

A: Short-term psychodynamic psychotherapy (STPP) refers to a group of time-limited psychotherapeutic approaches that are based on principles of psychodynamic psychotherapy. STPP is focused on the patient's internal experience (i.e., beliefs, feelings, motivations) with the goal of helping the patient gain insight into the role of unconscious conflicts and motivations that may be interfering with their psychosocial functioning. Unlike traditional psychoanalytical therapies, STPP is characterized by a more active therapist, a rapid identification of underlying issues, and the setting of achievable goals within a specified time frame. Though different models of STPP exist, all approaches are rooted in psychoanalytical theory, delivered face-to-face, and time-limited (usually between 16-30 sessions) with sessions once or twice a week (Leichsenring, Rabung, & Leibing, 2004).

Q: What is the treatment model underlying STPP for MDD?

A: STPP is based on the psychoanalytical treatment model which denotes that unconscious and threatening feelings which stem from the patient's past can manifest in and hinder their current psychosocial functioning and lead to increased distress and psychological symptoms. Treatment often focuses on identifying these unconscious conflicts by exploring how they arise in the session between the patient and therapist. A primary goal of the therapy is for patients to gain increased insight into underlying conflicts and motivations that may be contributing to problems that maintain depression and interfere with interpersonal relationships (APA, 2023).

Q: Is STPP recommended as a treatment for MDD in the Military Health System (MHS)?

A: Yes. The 2022 VA/DoD Clinical Practice Guideline for the Management of Major Depressive Disorder gives a "weak for" strength of recommendation for STPP as a treatment for uncomplicated mild to moderate MDD.

The MHS relies on the VA/DoD clinical practice guidelines (CPGs) to inform best clinical practices. The CPGs are developed under the purview of clinical experts and are derived through a transparent and systematic approach that includes, but is not limited to, systematic reviews of the literature on a given topic and development of recommendations using a graded system that takes into account the overall quality of the evidence and the magnitude of the net benefit of the recommendation. Recommendations for or against a treatment may be characterized as strong or weak based on a variety of factors (e.g., confidence in the quality of the evidence, weight of treatment benefits versus risks, feasibility). The CPGs also state if there is insufficient evidence to develop a recommendation. A further description of this process and CPGs on specific topics can be found on the VA clinical practice guidelines website.

Q: Do other authoritative reviews recommend STPP as a treatment for MDD?

A: No. Other authoritative reviews have not substantiated the use of STPP for MDD.

Other recognized organizations conduct systematic reviews and evidence syntheses on psychological health topics using grading systems similar to the VA/DoD CPGs. Notable among these is Cochrane, an international network that conducts high-quality reviews of healthcare interventions.

- Cochrane: A systematic review of STPPs found that, across common mental disorders, there was a significantly greater reduction in depressive symptoms in patients treated with STPP in the short- and medium-term but not long-term (greater than six months) compared to control conditions. This review included five studies focused on depressive disorders but did not report outcomes for this subgroup. Therefore, conclusions cannot be made about the efficacy of STPP for MDD (Abbass et al., 2014).

Q: What conclusions can be drawn about the use of STPP as a treatment for MDD in the MHS?

A: The 2022 VA/DoD Clinical Practice Guideline for the Management of Major Depressive Disorder suggests offering SPTT for treatment of MDD. Selection of a treatment approach should incorporate clinical judgment and expertise, patient characteristics and treatment history, and patient preferences that might influence treatment engagement and retention. For additional guidance on selecting a treatment for MDD, please visit the PHCoE Clinician Resources section of the website and navigate to clinical support tools.

References

Abbass, A. A., Kisely, S.R., Town, J.M., Leichsenring, F., Driessen, E., De Maat, S., Gerber, A., Dekker, J., Rabung, S., Rusalovska, S., & Crowe, E. (2014). Short-term psychodynamic psychotherapies for common mental disorders. The Cochrane database of systematic reviews, (4), CD004687. <https://doi.org/10.1002/14651858.CD004687.pub3>

American Psychological Association (2023). Short-term psychodynamic psychotherapy. <https://www.apa.org/pubs/videos/4310903>

Department of Veterans Affairs/Department of Defense. (2022). VA/DoD clinical practice guideline for management of major depressive disorder. Version 4.0. Washington, DC: Department of Veterans Affairs/Department of Defense.

Driessen, E., Hegelmaier, L. M., Abbass, A. A., Barber, J. P., Dekker, J. J., Van, H. L., Jansma, E. P., & Cuijpers, P. (2015). The efficacy of short-term psychodynamic psychotherapy for depression: A meta-analysis update. *Clinical psychology review*, 42, 1–15. <https://doi.org/10.1016/j.cpr.2015.07.004>

Leichsenring, F., Rabung, S., & Leibling, E. (2004). The Efficacy of short-term psychodynamic psychotherapy in specific psychiatric disorders: A meta-analysis. *Archives of General Psychiatry*, 61(12), 1208–1216.