



Problems for Psychotherapy Systems in Japan: A Mean to Improve Daily Clinical Examination

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In mild to moderate Major Depressive Disorder (MDD) patients, efficacy of psychotherapy is equal to that of pharmacotherapy. However, pharmacotherapy is more popular than psychotherapy for patients with MDD in Japan. One of the reasons is the increasing number of MDD patients. Ordinary Japanese psychiatrists should examine over 50 outpatients every day. Thus, they cannot spare time at least 15 minutes for a new patient. Actually, it is difficult to perform standardized Cognitive Behavioral Therapy (CBT), interpersonal psychotherapy, and psychodynamic psychotherapy in daily clinical work within Japanese insurance system. Furthermore, costs of psychotherapy were very low compared with other countries. Sophisticated supervising systems are not established is another problematic issue. Recently, Shimodera et al. [1] reported that psychoeducation is effective in the relapse of MDD and seems to be more cost-effective without psychoeducation. Furukawa et al. [2] insisted that remote CBT, including telephoned CBT (tCBT) might be one of useful psychotherapy for people in the work place who present with sub-threshold depression. Psychotherapy using devices such as computer and smart phone combined with pharmacotherapy might be useful to increase the efficacy of outcome of the treatment for MDD. Robust verification should be done to the speculation.

References

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