

Literary Prescriptions: Applying Bibliotherapy in a Psychotherapeutic Context

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ABSTRACT

Bibliotherapy, a relatively underutilized lifestyle intervention in psychotherapy, is a unique **cost-effective** avenue of treatment that **empowers patients** by integrating therapeutic reading into their treatment plan. This approach strategically uses empirically-validated **cognitive-behavioral and self-help literature** to facilitate the application of therapeutic topics outside of psychotherapy sessions. Bibliotherapy's **range of administration** styles highlights its potential as an adjunct to medication or psychotherapy in a comprehensive treatment plan. Most meta-analyses conducted so far regarding bibliotherapy in a clinical setting consist of studies that use **minimal patient interaction via short phone calls or emails**. Despite this, meta-analyses show **medium to large effect sizes that are comparable to traditional psychotherapy modalities** for common disorders, most notably depression.



WHY BOTHER?

- Between 1998 and 2007, the number of individuals treated solely with psychotropic medication increased \checkmark from 44% to 57%. In contrast, during the same period, **the use of psychotherapy alone as a treatment decreased \downarrow from 15.9% to 10.5%**. (1)
- There is a **shortage of psychiatric care** in the United States, as a recent sampling found that only 18.5% of psychiatrists were taking new patients with a median wait time of 67 days. (2)
- Most studied forms of bibliotherapy involve a personal meeting at the beginning and subsequent **weekly telephone calls for 5 to 15 minutes** in which the psychotherapist gives support. (3)
- Among different protocols, psychotherapist time is weakly positively correlated with outcome measures. (4)



CASE VIGNETTE

Mr. Z, a 68-year-old male, reported a metaphorical loss of color and joy in his life during his initial psychiatric evaluation. Physical limitations, loss of friends, and reduced social interactions plague Mr. Z along with sleep disturbances, fatigue, reduced appetite, and feelings of guilt for missing social obligations.

P: One healthy lifestyle intervention that I believe could be very beneficial for you would be bibliotherapy, which involves therapeutic reading. Do you have any preferences among the treatment options that I have offered to you?

Mr. Z: Hmm, I like the idea of therapy and reading, since I enjoy the newspaper so much already.

P: Great! We can set you up for weekly psychotherapy and weave in talking about a book. So, during the next week, I would like you to do some brief research on a book about depression that you would like to read. I promise, most books on the topic are not actually depressing despite the subject matter! One really good book is "Feeling Great" by David Burns that has helped others a great deal, if you need a starting place.

PRACTICE POINTS

- Bibliotherapy \Rightarrow "interaction between the reader and certain literature which is useful in aiding personal adjustment." (5)
- Traditional psychotherapy for depression has an **effect size of $d = 0.75$** . (6)
- Meta-analyses of bibliotherapy for depression found **effect sizes of $d = 0.77, 0.84, 0.82$** . (7-9)
- Self-help bibliotherapy was **not statistically different** than traditional therapy for depression. (10)
- Bibliotherapy helps **alcohol addiction** ($d = 0.65$) (11) and **sexual dysfunction** ($d = 0.68$) (12), but less for **Panic Disorder** (13).
- Traditional psychothx may initially outperform bibliothx in treating depression, but **bibliothx subjects continued improving** leading to no outcome differences at 3 mos. (14)
- A trial found a **46% cost reduction** for treating self-harming depression compared to normal treatment. (15)
- Effects seem to last to at least 3 yrs. (16)

KEY TAKEAWAYS

- Commonly researched books include **Feeling Great** by Burns, **Control Your Depression** by Lewinson, and **Man's Search for Meaning** by Frankl. (17)
- Letting patients take the primary role in selecting readings promotes autonomy and buy-in.
- Book clubs or book discussions in group psychotherapy could be a great way to obtain healthy socialization.
- Retention is relatively high (84%) (17) and patients read ~83% of assigned text. (18)
- Tailoring reading level is important** b/c 15% of those in the U.S. have low English literacy. (19)
- Audiobooks**, akin to rhythmic music, may make exercise feel easier and more enjoyable, potentially **extending exercise duration** which itself helps ($g = 0.43-0.50$) with depression. (20-21)
- A "shock of recognition" may occur by linking reading to life experiences. (22)

Two weeks later, Mr. Z relates how his wife was hospitalized for a heart attack.

Psychiatrist: Anything from your reading that applies to what happened this week?

Mr. Z: I suppose I was initially catastrophizing she would die, but I tried to change my distortion, which I remembered would help change my feelings and help me handle the situation.

