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Effect of CBT and Yoga on quality of life: a RCT on patients on sick leave because of burnout

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Background: Stress related disorders, including burnout are high in prevalence worldwide, with increasing cost at all levels of the society. Evidence based treatment is not established. Cognitive behavioral therapy (CBT) is often used, but relapse is common. Burnout patients have poor health related quality of life (HRQoL), which predicts future morbidity and mortality.

Aim: To explore if HRQoL increased after a longer CBT or traditional yoga (TY) group treatment, in patients on sick leave because of burnout.

Methods: Sixty-three patients randomized to CBT and TY, participated in group treatment for 20 weeks, three hours per week, with additional homework four hours per week. Patients were aged 18–65 years and were on 50%–100% sick leave. HRQoL was measured by the SWED-QUAL questionnaire, comprising 67 items grouped into 13 subscales, each with a separate index, and scores from 0 to 100. SWED-QUAL covers aspects of physical and emotional well-being, cognitive function, sleep, general health and social and sexual functioning.

Results: Twenty-seven patients in the CBT (25 women) and 26 patients in the TY (21 women) were analyzed. Seven subscales in CBT and ten subscales in TY showed improvements, $p < 0.05$, in several of the main domains affected in burnout, e.g. emotional well-being, physical well-being, cognitive function and sleep. The median improvement ranged from 4 to 25 points in CBT and from 0 to 27 points in TY. The effect size was mainly medium or large.

Conclusions: An extended group treatment with CBT or TY had large effects on HRQoL, and particularly on main domains affected in burnout. This indicates that CBT and TY can be used at different levels in the health care system, as both treatment and prevention, to improve HRQoL in patients on sick leave because of burnout, reducing the risk of future morbidity and mortality.