

RECOMENDACIÓN T.4

INFORME DE BÚSQUEDA Y SÍNTESIS DE EVIDENCIA DE EFECTOS DESEABLES E INDESEABLES Guía de Práctica Clínica de Depresión en Adolescente - 2018

A. PREGUNTA CLÍNICA

En personas menores de 15 años con diagnóstico de depresión ¿Se debe realizar 12 sesiones de intervención psicológica en comparación a realizar menos de 12 sesiones de intervención psicológicas?

Análisis y definición de los componentes de la pregunta en formato PICO

Población: Personas menores de 15 años con diagnóstico de depresión.

Intervención: Realizar 12 sesiones de intervención psicológica.

Comparación: Realizar menos de 12 sesiones de intervención psicológicas.

Desenlace (outcome): Efectividad.

B. BÚSQUEDA DE EVIDENCIA

Se realizó una búsqueda general de revisiones sistemáticas asociadas al tema de “Unipolar depressive disorder”. Las bases de datos utilizadas fueron: Cochrane database of systematic reviews (CDSR); Database of Abstracts of Reviews of Effectiveness (DARE); HTA Database; PubMed; LILACS; CINAHL; PsycINFO; EMBASE; EPPI-Centre Evidence Library; 3ie Systematic Reviews and Policy Briefs Campbell Library; Clinical Evidence; SUPPORT Summaries; WHO institutional Repository for information Sharing; NICE public health guidelines and systematic reviews; ACP Journal Club; Evidencias en Pediatría; y The JBI Database of Systematic Reviews and implementation Reports. No se aplicaron restricciones en base al idioma o estado de publicación. Dos revisores de manera independiente realizaron la selección de los títulos y los resúmenes, la evaluación del texto completo y la extracción de datos. Un investigador experimentado resolvió cualquier discrepancia entre los distintos revisores. En caso de considerarse necesario, se integraron estudios primarios.

Seleccionadas las revisiones sistemáticas o estudios primarios asociadas a la temática, se clasificaron en función de las potenciales preguntas a las que daban respuesta. Al momento de definir la pregunta la evidencia ya se encontraba previamente clasificada según intervenciones comparadas. Los resultados se encuentran alojados en la plataforma Living Overview of the Evidence (L·OVE), sistema que permite la actualización periódica de la evidencia.

C. SÍNTESIS DE EVIDENCIA

Resumen de la evidencia identificada

Se identificaron dos revisiones sistemáticas que incluyen 96 estudios primarios, de los cuales todos corresponden a ensayos aleatorizados. Para más detalle ver “*Matriz de evidencia*”¹, en el siguiente enlace: [Frecuencia y número de sesiones de psicoterapia](#).

Tabla 1: Resumen de la evidencia seleccionada

Revisión Sistemática	2 [1-2]
Estudios primarios	96 [2-98]

Estimador del efecto

Se realizó un análisis de la matriz de evidencia, observando que ninguna de las dos revisiones sistemáticas responde directamente la pregunta, ya que no evalúan estudios comparando la misma intervención, pero con diferente número de sesiones. Sin embargo, una revisión sistemática [1] realizó análisis por metarregresión por esta variable (número de sesiones). Por lo que se decidió reutilizar sus conclusiones para la construcción de tabla de resumen de resultados.

Metanálisis

No aplica.

¹ **Matriz de Evidencia**, tabla dinámica que grafica el conjunto de evidencia existente para una pregunta (en este caso, la pregunta del presente informe). Las filas representan las revisiones sistemáticas y las columnas los estudios primarios que estas revisiones han identificado. Los recuadros en verde corresponden a los estudios incluidos en cada revisión. La matriz se actualiza periódicamente, incorporando nuevas revisiones sistemáticas pertinentes y los respectivos estudios primarios.

Tabla de Resumen de Resultados (Summary of Findings)

MÁS DE 12 SESIONES COMPARADO CON MENOS DE 12 SESIONES PARA DEPRESIÓN EN MENORES DE 15 AÑOS.			
Pacientes	Personas menores de 15 años con diagnóstico de depresión.		
Intervención	Realizar 12 sesiones de intervención psicológica.		
Comparación	Realizar menos de 12 sesiones de intervención psicológicas.		
Desenlaces	Efecto*	Certeza de la evidencia (GRADE)	Mensajes clave en términos sencillos
Efectividad	Una revisión sistemática concluyó, mediante regresión logística, que no había aumento de la efectividad según número de sesiones. (Pendiente del efecto de 0,011 IC 95% 0 a 0,023) [1].	⊕⊕○○ ¹ Baja	Realizar 12 sesiones de intervención psicológica, comparado con menos de 12 sesiones podría tener poco o nulo impacto en la efectividad de la terapia psicológica, pero la certeza de la evidencia es baja.

GRADE: Grados de evidencia Grading of Recommendations Assessment, Development and Evaluation.

* La estimación de la pendiente del efecto (slope estimate) es una manera de estimar la probabilidad de que exista un efecto de subgrupo por medio de la técnica de regresión (o metarregresión). Una pendiente de 0% significa que no existe ninguna diferencia atribuible al subgrupo evaluado. A mayor valor, mayor probabilidad de que exista un efecto de subgrupo atribuible a la variable de interés. Si el intervalo de confianza para este valor pasa por el valor "0" significa que esta diferencia no es estadísticamente significativa.

¹ Se disminuyó la certeza de la evidencia en dos niveles, ya que proviene de una comparación indirecta mediante análisis de regresión logística, y porque no proviene de estudios en adolescentes.

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