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TABLE 2 Characteristics of RCTs of Depression Treatment in Children and Adolescents (KQ4)

Reference	Intervention	Age Range, y	No. of Patients Randomly Assigned	Length of Intervention, wk	Response Criteria	Response Rate		Risk	USPSTF
						Treatment Group	Control Group	Difference, % (95% CI) or <i>P</i>	Quality ^a
SSRIs									
Emslie et al ^{53,54} (2002)	IG: fluoxetine; CG: placebo	8–17	219	8	30% decrease in CDRS-R	71/109 (65%)	54/101 (54%)	12 (-2 to 25)	Fair
TADS ^{55–58} (2004)	IG1: fluoxetine; CG: placebo	12–17	221	12	CGI-I 2	66/109 (61%)	39/112 (35%)	26 (13 to 39)	Good
Keller et al ⁵⁹ (2001)	IG: paroxetine; CG: placebo	12–18	180 ^b	8	HAM-D ≤8 or ≥50% reduction from baseline	60/90 (67%)	48/87 (55%)	12 (-3 to 26)	Good
Berard et al ⁶⁰ (2006)	IG: paroxetine; CG: placebo	13–18	286	12	50% decrease in MADRS	107/177 (61%)	53/91 (58%)	2 (-10 to 15)	Good
Emslie et al ⁶¹ (2006)	IG: paroxetine; CG: placebo	7–17	206	8	CGI-I 2	49/101 (49%)	46/100 (46%)	3 (-11 to 16)	Good
Wagner et al ^{62,63} (2003) ^c	IG: sertraline; CG: placebo	6–17	376	10	40% decrease in adjusted CDRS-R	127/185 (69%)	105/179 (59%)		Good
Wagner et al ⁶⁴ (2004)	IG: citalopram; CG: placebo	7–17	178	8	CDRS-R score 28	32/89 (36%)	20/85 (24%)	12 (–1 to 26)	Fair
Wagner et al ⁶⁵ (2006)	IG: escitalopram; CG: placebo	6–17	268	8	CGI-I 2	81/129 (63%)	69/132 (52%)	11 (-1 to 22)	Good
Psychotherapy I	nterventions								
Clarke ⁶⁶ (1999)	IG1: group CBT; IG2: group CBT + parent; CG: waitlist	14–18	123	8	No longer meeting DSM- III-R criteria for 2 wk based on LIFE clinical interview	IG1: 24/37 (64.9%); IG2: 22/32 (68.8%)	13/27 (48.1%)	<.05 (IG1 and IG2 combined vs CG)	Good
Kahn and Kehle ⁶⁷ (1990)	IG1: group CBT; IG2: group relaxation; IG3: individual self- modeling; CG: waitlist	10–14	68	6–8	Moved from dysfunctional to functional BID score	IG1: 13/17 (76%); IG2: 11/17 (65%); IG3: 10/17 (59%)	3/17 (18%)	NR	Fair
Lewinsohn ⁶⁸ (1990)	IG1: group CBT; IG2: group CBT + parent; CG: waitlist	14–18	69	7	No longer meeting DSM- III-R criteria based on K- SADS-E	IG1: 42.9%; IG2: 47.6%	5.30%	<.01 (IG1 and IG2 combined vs CG)	Fair
Stark et al ⁶⁹	IG1: group self-	9–12	29	5	CDI < 13	IG1: 7/9 (78%);	1/9 (11%)	NR	Fair

(1987)	control; IG2: group behavioral problem solving; CG: waitlist					IG2: 6/10 (60%)			
Rosello ⁷⁰ (1999)	IG1: individual IPT; IG2: individual CBT; CG: waitlist	13–17	71	12	CDI 17	IG1: 82%; IG2: 59%	NR	NR	Fair
Mufson ⁷¹ (1999)	IG1: individual IPT-A; CG: clinical monitoring	12–18	48	12	HRSD < 6 CGI-S	75%; 20/21 (95.5%)	46%; 7/11 (61.5%)	.04; <.001	Fair
Mufson et al ⁷² (2004)	IG1: individual IPT-A; CG: treatment as usual	12–18	64	16	HAMD 6	17/34 (50%)	10/29 (34%)	NR	Good
Diamond et al ⁷³ (2002)	IG1: attachment-based family therapy; CG: waitlist	13–17	32	12	No longer meeting criteria for MDD on K- SADS-P	13/16 (81%)	7/15 (47%)	0.04	Good
Ackerson ⁷⁴ (1998)	IG1: cognitive bibliotherapy; CG: waitlist	14–18	30	4	NR	NR	NR	NA	Fair
TADS ^{55–58} (2004)	IG2: individual CBT; CG: placebo + clinical monitoring	12–17	223	12	CGI improvement score of 1 or 2	43.2% (95% CI: 34–52)	34.8% (95% CI: 26–44)	0.2	Good
Psychotherapy a	and SSRI								
TADS ^{55–58} (2004)	IG3: individual CBT + fluoxetine; CG: placebo + clinical monitoring	12–17	209	12	CGI improvement score of 1 or 2	71% (95% CI: 62–80)	34.8% (95% CI: 26–44)		Good

IG indicates intervention group; CG, control group; CGI-I, Clinical Global Impression-Improvement Scale; CDRS-R, Children's Depression Rating Scale-Revised; HAM-D, Hamilton Rating Scale for Depression; MADRS, Montgomery-Asberg Depression Rating Scale; DSM-III-R, *Diagnostic and Statistical Manual of Mental Disorders, Third Edition, Revised*; LIFE, Longitudinal Interval Followup Evaluation; BID, Bellevue Index of Depression; K-SADS-E, Kiddie-Schedule for Affective Disorders and Schizophrenia-Epidemiological edition; HRSD, Hamilton Rating Scale for Depression; CGI-S, Clinical Global Impression-Severity of Illness; NR, not reported; K-SADS-P, Kiddie-Schedule for Affective Disorders and Schizophrenia-Present Version.

^a USPSTF quality criteria are described in Appendix 4.

^b An additional 95 patients were randomly assigned to imipramine treatment.

^c Two separate RCTs were pooled by study authors and reported in 1 publication.