Table 2. Previous psychological research combining Internet and face-to-face (f2f) psychotherapy.

Country Case study Case s	Study (year),	Condition	Design	Study conditions	N	Classification	Aim of
Anderson et al (2016), Sweden [43] Braamse et al (2016, 2016), Netherlands [54,74] Brakemeier et al (2013), Germany [58] Brakemeier et al (2013), Germany [58] Callan et al (2013), Germany [58] Callan et al (2009), Tallated States Callan et al (2009), Tallated States Cantolide trial (RCT) Control group (IG): waiting list Intervention group (IG): gweeks Internet-based cognitive behavioral therapy (IGBT) with email support +2 face-to-face (I21) 3-hour group exposure sessions CG: Gord group (CG): waiting list CG: Gord group (CG): waiting list Intervention group (IG): gweeks Internet-based cognitive behavioral therapy (IGBT) with email support +2 face-to-face (I21) 3-hour group (IGG): waiting list CG: Gord group (CG): waiting list Intervention group (IG): gweeks Internet-based cognitive behavioral therapy (IGBT) with email support +2 face-to-face (I21) 3-hour group (IGG): waiting list Intervention group (IGB: gweeks Internet-based cognitive behavioral therapy (IGBT) with focus CG: Gord group exposure sessions Intervention group (IGB): gweeks Internet-based group intervention group (IGB): gweeks Internet intervention group group intervention group group intervention group	country					of blended	blended
al (2016), Sweden [43] Bramse et al [2010, 2016), Netherlands [54,74] Brakemeler et al (2013), Germany Germany Germany Germany Callan et al (2009), Listed Sizese Controlled trial (RCT) Controlled trial (RCT) Swedes Intermet-based cognitive behavioral therapy (ICBT) with email support +2 face-tio-face ((22) 3-hour group exposure sessions CG: N=32 Control group (CG): weiting list CG: N=32 CG: N=32 CG: N=32 Sequential blended intervention with Internet focus CG: N=32 CG: N=49 CG: 3. 12f psychotherapy CG: 3. 22f psychotherapy N=49 CG: N=50 Internet—42f Aabelended intervention (I2f—Internet bearded intervention title and beneated intervention title and be						concept	therapy
al (2016), Sweden [43] Bramse et al [2010, 2016), Netherlands [54,74] Brakemeler et al (2013), Germany Germany Germany Germany Callan et al (2009), Listed Sizese Controlled trial (RCT) Controlled trial (RCT) Swedes Intermet-based cognitive behavioral therapy (ICBT) with email support +2 face-tio-face ((22) 3-hour group exposure sessions CG: N=32 Control group (CG): weiting list CG: N=32 CG: N=32 CG: N=32 Sequential blended intervention with Internet focus CG: N=32 CG: N=49 CG: 3. 12f psychotherapy CG: 3. 22f psychotherapy N=49 CG: N=50 Internet—42f Aabelended intervention (I2f—Internet bearded intervention title and beneated intervention title and be	Anderson et	Anxiety	2-arm randomized	Intervention group (IG):	IG:	Integrated	2d
Sweden [43] Control group (CBT) with email support ± 2 face-to-face (127) 3-hour group exposure sessions Control group (CG): waiting list Care:		Timiety			10.		24
therapy (iCBT) with email support + 2 face-tro-face (i2ft) 3-hour group exposure sessions Control group (CG): waiting list					N=32		
Examse et al	Sweden		(KC1)				
Braamse et al (2010, 2016), Netherlands Case study	[43]						
Braamse et al (2010, 2016), Netherlands [54,74] Brakemeier et al (2013), Germany [58] Care al (2013), Germany [58] Callan et al (2009), Italian and prove medication and therapy [58] Control group (CG): waiting list IG: 30 weeks stepped care: N=50 1G: N=50				1	CC.	iocus	
Braamse et al (2010, 2016). Netherlands [54,74] Brakemeier et al (2013), Germany [58] Brakemeier et al (2013), Germany [58] Case study					CG.		
Braamse et al (2010, 2016), Netherlands [54,74] Brakemeier et al (2013), Germany [58] Brakemeier et al (2013), Germany [58] Callan et al (2009), Luited States Lating States Lati				group exposure sessions	N=32		
Braamse et al (2010, 2016), Netherlands [54,74] Brakemeier et al (2013), Germany [58] Callan et al (2009), Lustof States Transdiagnostic 2-arm RCT IG: 30 weeks stepped care: 1. watchful waiting, 2. iCBT self-help CG: 3. f2f psychotherapy CG: 30 weeks treatment-as-usual (TAU) Thermet intervention (CBASP@home): 9 times Internet-based situational analysis after inpatient treatment with feedback from inpatient therapist Callan et al (2009), Listed States Transdiagnostic 2-arm RCT IG: Sequential blended intervention Internet—f2f Sequential blended intervention (CB- N=49 Sequential blended intervention f2f—Internet Internet intervention f2f—Internet Sequential blended intervention f2f—Internet							
Care: N=50 blended intervention Internet—f2f				waiting list			
Netherlands 1. watchful waiting, N=50 intervention Internet—f2f	Braamse et al	Transdiagnostic	2-arm RCT	IG: 30 weeks stepped	IG:	Sequential	3b
Sequential Seq	(2010, 2016),			care:		blended	
CG: 30 weeks treatment-as-usual (TAU) Table Tabl	Netherlands				N=50	intervention	
2. iCBT self-help CG: 3. f2f psychotherapy CG: N=49 Callan et al (2013), Case study Case study Case study CBASP@home); 9 times Internet-based situational analysis after inpatient treatment with feedback from inpatient therapist Callan et al (2009), Case study C				1. watchful waiting,		Internet—f2f	
Brakemeier et al (2013), Germany Case study Sequential blended intervention (CBASP@home); 9 times Internet-based situational analysis after inpatient treatment with feedback from inpatient therapist	[54,74]			2 iCBT colf-holp			
CG: 30 weeks treatment-as-usual (TAU) Brakemeier et al (2013), Germany [58] Case study Case study 3-month step-down Internet intervention (CBASP@home); 9 times Internet-based situational analysis after inpatient treatment with feedback from inpatient therapist Callan et al (2009), Use of Internet sites and emails to improve medication and therapy N=2 Sequential blended intervention f2f—Internet				2. ICD1 Self-Help	CG:		
Brakemeier et Depression Case study 3-month step-down Internet intervention (CBASP@home); 9 times Internet-based situational analysis after inpatient treatment with feedback from inpatient therapist Callan et al (2009), Case study Use of Internet sites and (2009), Use of Inter				3. f2f psychotherapy	N=49		
Brakemeier et Depression Case study 3-month step-down Internet intervention (CBASP@home); 9 times Internet-based situational analysis after inpatient treatment with feedback from inpatient therapist Callan et al (2009), Case study Use of Internet sites and (2009), Use of Inter							
Brakemeier et Depression Case study 3-month step-down Intervention (CBASP@home); 9 intervention (CBASP@home); 9 intervention f2f—Internet inpatient treatment with feedback from inpatient therapist Callan et al (2009), Case study Use of Internet sites and (2009), Use of Internet sites and (2009), End of the prove medication and therapy intervention intervention (TAU)				CG: 30 weeks			
Brakemeier et al (2013), Germany [58] Case study (CBASP@home); 9 times Internet-based situational analysis after inpatient treatment with feedback from inpatient therapist Callan et al (2009), Use of Internet sites and emails to improve medication and therapy Livited States				treatment-as-usual			
al (2013), Germany [58] Callan et al (2009), Case study Case study Linited States Internet intervention (CBASP@home); 9 intervention f2f—Internet sites and emails to improve medication and therapy Internet intervention (CBASP@home); 9 intervention f2f—Internet sites and emails to improve intervention intervention blended intervention				(TAU)			
al (2013), Germany [58] Callan et al (2009), Case study Case study Linited States Internet intervention (CBASP@home); 9 intervention f2f—Internet sites and emails to improve medication and therapy Internet intervention (CBASP@home); 9 intervention f2f—Internet sites and emails to improve intervention intervention blended intervention	Dul	December	Const. 1	2	N. O	Companiel	4-
Germany [58] (CBASP@home); 9 times Internet-based situational analysis after inpatient treatment with feedback from inpatient therapist Callan et al Depression Case study Use of Internet sites and emails to improve medication and therapy Lipited States		Depression	Case study	1	N=2	_	4a
times Internet-based situational analysis after inpatient treatment with feedback from inpatient therapist Callan et al Depression Case study Use of Internet sites and (2009), Use of Internet sites and emails to improve medication and therapy intervention							
situational analysis after inpatient treatment with feedback from inpatient therapist Callan et al Depression Case study Use of Internet sites and (2009), emails to improve medication and therapy intervention	Germany			1			
Callan et al Depression Case study Use of Internet sites and N=1 Integrated 1b (2009), emails to improve medication and therapy intervention	[58]					121—Internet	
Callan et al Depression Case study Use of Internet sites and N=1 Integrated 1b (2009), emails to improve blended intervention	[20]						
Callan et al Depression Case study Use of Internet sites and N=1 Integrated 1b (2009), emails to improve blended medication and therapy intervention							
Callan et al Depression Case study Use of Internet sites and N=1 Integrated 1b (2009), emails to improve blended intervention							
(2009), emails to improve blended intervention				therapist			
medication and therapy intervention	Callan et al	Depression	Case study	Use of Internet sites and	N=1	Integrated	1b
United States	(2009),			emails to improve		blended	
United States homework adherence,				medication and therapy		intervention	
	United States			homework adherence,			

[19] time management, with f2f focus	
journaling, and nutrition	
monitoring	
Campbell et Substance 2-arm RCT IG: 12 weeks outpatient IG: Integrated 1b	
al (2012, abuse TAU + iCBT blended	
2014, 2015), (Therapeutic education N=255 intervention	
Cochran et al system [TES], 62 with f2f focus	
(2015), interactive	
Cunningham CG:	
et al (2015), multimedia modules),	
Murphy et al iCBT substituting for N=252	
(2016), about 2 hours of	
Tofighi et al standard care per week	
(2016),	
United States	
CG: 12 weeks TAU: at	
[29,31,56,69, least two f2f therapeutic	
75-77] group or	
individual sessions per	
week, lasting at least 2	
hours	
Campbell et Substance Mixed-method 8 weeks outpatient TAU N=40 Integrated 2a	
al (2015), abuse acceptability study + iCBT using on-site blended	
United States computers (TES, 32 intervention	
interactive multimedia with Internet	
[41] modules), four modules focus	
per week at two	
different visits during	
the week, visits usually	
linked to patients'	
attendance at TAU	
Carroll et al Substance 2-arm RCT IG: 8 weeks TAU + IG: Integrated 1b	
(2008, 2009, abuse biweekly iCBT N=39	
2011), (computer-based intervention	
Sugarman et training for cognitive with f2f focus	
al (2010), behavioral therapy,	
Olmstead et CBT4CBT, 6 modules) CG:	
al (2010), N=38	
United States 14–36	
CG: 8 weeks TAU	
[63,65,78- 80] (weekly individual and	
1 001	
group sessions of	

			counseling)			
Carroll et all (2014, 2015), Morie et al (2015), United States	Substance abuse	2-arm RCT	IG: 8 weeks TAU + biweekly iCBT (CBT4CBT, 7 modules)	IG: N=47	Integrated blended intervention with f2f focus	1b
[34,81,82]			CG: 8 weeks TAU (weekly individual and group sessions of general drug counseling)	CG: N=54		
Christensen et al (2014), United States [32]	Substance abuse	2-arm RCT	IG: 12 weeks TAU + iCBT, 3 times per week, approximately 30 min per visit, 69 modules presented on clinic computers	IG: N=92 CG: N=78	Integrated blended intervention with f2f focus	1b
			CG: 12 weeks TAU (contingency management + biweekly 30 min f2f + buprenorphine dosing)			
Ebert et al (2013), Germany [59,83,84]	Transdiagnostic	2-arm RCT	IG: 12 weeks access to TAU + iCBT (Transdiagnostic Internet-based maintenance treatment, with self-management module, asynchronous patient-coach communication, Internet patient support group) after inpatient treatment	IG: N=200 CG: N=200	Sequential blended interventions f2f—Internet	4a
Golkaramnay et al (2007), Germany	Transdiagnostic	Pre-post + control	CG: Access to TAU IG: 12-15 weeks Internet group chat with a therapist for 90 min in open groups of 8-10	IG: N=114	Sequential blended interventions f2f—Internet	4a

[20]	1		participants after		T	
[20]			discharge of inpatient			
				CG:		
			treatment + access to			
			TAU	N=114		
			CG: Access to TAU			
Hantsoo et al	Depression	Case study	Eight therapy sessions	N=1	Integrated	2c
(2014),			over 6 weeks with a		blended	
			clinical psychologist		intervention	
United States			(3.75 hours f2f),		with Internet	
[48]			between-session		focus	
[10]			Internet-based modules			
			("Good Days Ahead")			
Härter et al	Depression	2-arm RCT	IG: Stepped care:	IG:	Sequential	3b
(2015), Germany		(study protocol)	1. watchful waiting	N=660	blended interventions	
[[7]			2. bibliotherapy or iCBT		Internet—f2f	
[57]			self-help or telephone-			
			based psychotherapy	CG:		
			3. psychotherapy or	N=200		
			pharmacotherapy			
			pharmacouncrapy			
			4. psycho- and			
			pharmacotherapy			
			combined (inpatient or			
			outpatient setting)			
			CG: TAU			
Haug et al	Anxiety	2-arm RCT	IG: Stepped care:	IG:	Sequential	3b
(2015),					blended	
Norway			1. psychoeducation	N=85	interventions	
[55]			2. iCBT		Internet—f2f	
			3. f2f-CBT	CG:		
				N=88		
			CG: Immediate f2f-CBT			
TT 10 1		D. T. T.		10		
Høifødt et al	Depression	2-arm RCT	IG: 7 weeks iCBT with	IG:	Integrated	2a
(2013, 2015),			15-30 min f2f support	N=52	blended	
Norway			after each module	1	intervention	

[38,85]					with Internet	
			CG: Access to TAU	CG:	focus	
Jacmon et al (2019) Australia [4]	Depression	Pre-post	4-6 weeks Internet course on CBT skills with weekly email support, arrangement of individual f2f sessions as needed; average 3.7 f2f sessions	N=9	Integrated blended intervention with Internet focus	2b
Kay-Lambkin et al (2011), Australia [39]	Comorbid depression + substance abuse	3-arm RCT	IG: Blended: 1 initial f2f session + 9 sessions iCBT with therapist support	IG: N=32 CG1:	Integrated blended intervention with Internet focus	2a
			CG1: f2f: 10 sessions f2f CBT	N=35		
			CG 2: Brief intervention (BI), one individual f2f session	CG 2:_ N=30		
Kemmeren et al (2016), Netherlands [25,64]	Depression	2-arm RCT (study protocol)	IG: 19-20 weeks weekly alternating 45 min f2f sessions and iCBT sessions	IG: N=78	Integrated blended intervention with f2f focus	1a
			CG: TAU_	CG: N=78		
Kenter, Warmerdam et al (2013), Netherlands	Transdiagnostic	Pre-post + control	IG: 5 weeks Internet problem-solving treatment with email feedback; subsequently f2f psychotherapy	IG: N=55	Sequential blended interventions Internet—f2f	3a
			CG: 5 weeks waiting list, then f2f psychotherapy	CG: N=49		

Kenter et al (2013, 2016), Kolovos et al (2016) Netherlands	Depression	2-arm RCT	IG: 5 weeks Internet problem-solving treatment with email feedback; subsequently f2f psychotherapy	IG: N=136 CG:	Sequential blended interventions Internet—f2f	3a
[49,64,68)			CG: 5 weeks waiting list + self-help problem- solving booklet, then subsequently f2f psychotherapy	N=133		
Kenwright et al (2001), United Kingdom	Anxiety	Pre-post + control	IG: 4 sessions of 40 min iCBT (FearFighter) with 20 min f2f support	IG: N=54	Integrated blended intervention with f2f focus	1a
[21]			CG: 8 sessions f2f CBT	CG N=31		
Kiluk et al (2016), United States [35]	Substance abuse	3-arm RCT	IG: 8 weeks TAU + biweekly iCBT (computer-based training for cognitive behavioral therapy, CBT4CBT, 7 modules of 45 min)	IG: N=22 CG1: N=22	Integrated blended intervention with f2f focus	1b
			CG1: 8 weeks TAU (weekly individual or group psychotherapy sessions)	CG2: N=24		
			CG2: 8 weeks on-site iCBT with brief weekly f2f monitoring			

Klein et al	Substance	Empirical	Internet-based disease	N=1124	Sequential	4a
(2012),	abuse	correlational study	management program		blended	
United States			18 months following		interventions	
			discharge from		f2f—Internet	
[60]			treatment, including 7			
			modules iCBT,			
			opportunities for			
			fellowship with other			
			recovering individuals,			
			therapist support over			
			email and telephone			
Kok et al	Anxiety	2-arm RCT	IG: 5 weeks iCBT	IG:	Sequential	3a
(2014),			exposure therapy with		blended	
Netherlands			weekly student support;	N=105	interventions	
			subsequently f2f		Internet—f2f	
[53]			psychotherapy			
				CG:		
				N=107		
			CG: 5 weeks waiting list			
			+ self-help exposure			
			book, subsequently f2f			
			psychotherapy			
Kooistra et al	Depression	2-arm RCT	IG: blended CBT (10	IG:	Integrated	1a
(2014),			weeks), ten 45-min f2f	N=75	blended	
Netherlands			sessions and nine		intervention	
[15]			Internet sessions		with f2f focus	
[13]				CG:		
				N=75		
			CG: CBT f2f (20			
			weeks), twenty 45-min			
			sessions of f2f CBT			
Kooistra et al	Depression	Preliminary	10 weeks 10 sessions	N=9	Integrated	1a
(2016),		evaluation study	f2f (45 min) + 10		blended	
Netherlands			sessions iCBT		intervention	
[26]					with f2f focus	
[26]						
Kordy et al	Depression	3-arm RCT	IG1: 12-month TAU +	IG1:	Integrated	1c
(2016),			iCBT (SUMMIT,	N=77	blended	
Germany			supportive monitoring	11 //	intervention	
[37]			and depression		with f2f focus	
[0/]			management over the			
			Internet)	IG2:		

	I		IG2: 12-month TAU +		1	
			iCBT (SUMMIT-	CG:		
			PERSON: SUMMIT +			
			clinician-guided	N=80		
			individual + group			
			chats)			
			CG: TAU including			
			maintenance			
			antidepressant			
			medication and clinical			
			management +			
			individual crisis			
			management plan			
			(CMP) + project			
			website_			
Krieger et al	Depression	2-arm RCT	IG: 12 weeks regular	IG:	Integrated	1b
(2014),	Depression	2 um regi	psychotherapy (weekly	10.	blended	10
				N= 400		
Germany			hourly sessions) + iCBT		intervention	
[28]					with f2f focus	
			CG: 12 weeks regular	CG:		
			psychotherapy (weekly	N=400		
			hourly sessions)	11 400		
Månsson et al	Depression and	Pre-post	Blended f2f and iCBT,	N=15	Integrated	1b
(2013),	anxiety	The post	8-9 weeks	11 15	blended	10
	difficty		0-3 weeks			
Sweden					intervention	
[27]					with f2f focus	
Marks et al	Anxiety	3-arm RCT	IG: Blended: 6-hour-	IG:	Integrated	1a
(2014),			long iCBT sessions over		blended	
United			10 weeks, f2f support:	N=37	intervention	
Kingdom			up to 5 min at		with f2f focus	
Kinguoiii			beginning, up to 15 min		w101 121 10CUS	
[22]				CG1:		
			at the end	CG1:		
				N=39		
			CG1: f2f: 6-hour-long			
			individual treatment			
			sessions over 10 weeks	CG2:		
			f2f CBT	N=17		
				11-1/		
-		•			•	-

	I		T	ī		
			CG 2:_blended attention control: 6-hour-long sessions over 10 weeks guidance in self-relaxation techniques by a computer, f2f support: up to 5 min at beginning, up to 15 min at the end			
Marsch et al (2016), Kim et al (2016), United States [86]	Substance abuse	2-arm RCT	IG: 52 weeks outpatient TAU + iCBT (TES, 62 interactive multimedia modules), iCBT substituting for about 30 min of standard care per week, 2 modules of about 15 min per session	IG: N=80 CG: N=80	Integrated blended intervention with f2f focus	1b
			CG: 52 weeks TAU: daily methadone maintenance doses, weekly or biweekly individual counseling sessions of up to 60 min			
Nordmo et al (2015), Norway [44]	Anxiety	2-arm RCT	IG: 90 min session f2f + nine iCBT modules, weekly 10-min therapist support by phone	IG: N=17 CG:	Integrated blended intervention with Internet focus	2d
Diag et al	Anvioto	Dro post section	CG: nine iCBT modules, weekly 10- min therapist support by phone, no f2f	N=20	Integrated	
Pier et al (2008), Shandley et al (2008), Australia	Anxiety	Pre-post + control	IG:12 weeks iCBT (Panic online, PO) with f2f support by a general practitioner (GP) every 1-2 weeks	IG: N=53	Integrated blended intervention with Internet focus	2a

[40,87]				CG:		
			CG: 12 weeks iCBT only (email support every 1-2 weeks)	N=43		
Reins et al (2013), Germany	Depression	2-arm RCT (study protocol)	IG: About 3 weeks access to TAU + six iCBT modules, then inpatient treatment	N=200	Sequential blended interventions Internet—f2f	3a
Polostonia	Description	Proved	CG: Access to TAU, then inpatient treatment	N. 144		
Robertson et al (2006), Australia [36]	Depression	Pre-post	12 iCBT sessions (RecoveryRoad) with Internet progress monitoring over approximately 12 months as adjunct to usual treatment, clinicians had Internet access to patients' progress monitoring outcomes	N=144	Integrated blended intervention with f2f focus	1c
Romijn et al (2015), Netherlands [23]	Anxiety	2-arm RCT	IG: 15 CBT sessions, with weekly alternating 45-min f2f sessions and Internet sessions CG: 15 weekly 45-min f2f CBT sessions	IG: N=78 CG: N=78	Integrated blended intervention with f2f focus	1a
Sethi et al (2010), Australia [45]	Depression, anxiety	4-arm RCT	IG: Blended: five CBT sessions over 3 weeks, first half f2f CBT, second half iCBT (MoodGYM) CG1: f2f: five CBT sessions over 3 weeks	IG: N=9 CG1: N=10	Integrated blended intervention with internet focus	2d

	I			NI_10	<u> </u>	
				N=10		
			CG2: iCBT: five			
			MoodGYM sessions			
			over 3 weeks	CG3:		
				N O		
				N=9		
			CC2 N. I.			
			CG3: No intervention			
				N. 4	01	0
Tannenbaum	Depression	Case study	Continuous care	N=1	Sequential	4b
and			provided over more than		blended	
Spiranovic			5 years by Dr		interventions	
(2010),			Tannenbusch: first f2f		f2f—Internet	
Australia			CBT + medication,			
[62]			partly inpatient, later			
[02]			remote treatment:			
			medication prescribed			
			by GP, monitored by Dr			
			Tannenbusch + iCBT			
			(health steps program)			
Van Straren	Depression and	2-arm RCT	IG: Stepped care:	IG:	Sequential	3b
et al (2010),	anxiety			N=100	blended	
Netherlands		(study protocol)	1. watchful waiting		interventions	
			2. iCBT or CBT book		Internet—f2f	
[56]			self-help	CG:		
			эсп-пстр	N=100		
			3. brief f2f (5-7 sessions	11-100		
			of 30-45 min each)			
			4. longer f2f and/or			
			medication			
			CG: TAU			
Van Voorhees	Depression	Preliminary	iCBT (11 modules) + 2	N=14	Integrated	2a
et al (2007),		evaluation study	f2f sessions in primary		blended	
United States			care (one initial primary		intervention	
			care motivational		with Internet	
[42]			interview, one follow-up		focus	
			motivational interview)			
Whitfield et	Depression	Pre-post	Six hourly sessions	N=78	Sequential	3a
al (2006),			iCBT, some f2f support		blended	
(=000),	!	!	1 1 22 1, some 121 support	· · · · · · · · · · · · · · · · · · ·		

United			from a self-help support		interventions	
Kingdom			nurse, one session per		Internet—f2f	
			week			
[52]						
Wilhelmsen	Depression	Qualitative study	Five iCBT modules, f2f	N=15	Integrated	2c
et al (2013),			support sessions of 20-		blended	
Norway			30 min between		intervention	
[47]			modules		with Internet	
[[47]					focus	
Wright et al	Depression	3-arm RCT	IG: 8 weeks of iCBT	IG:	Integrated	1a
(2005),	Depression	o um rior	with f2f support; 9	10.	blended	
United States			sessions with 25-min f2f	N=15	intervention	
			566516115 WIGH 25 111111 1 2 1		with f2f focus	
[24]					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
				CG1:		
			CG1: 8 weeks f2f CBT,			
			9 sessions of 50 min	N=15		
			CG2: waiting list	CG2:		
				N=15		
Zwerenz et al	Depression	2-arm RCT	IG: Inpatient	IG:	Sequential	4a
(2015),			psychotherapy + 12-		blended	
Germany		(study protocol)	week Internet-based	N=120	interventions	
			self-help treatment		f2f—Internet	
[61]			(deprexis), 12 modules,			
			beginning during	CG:		
			inpatient treatment			
			_	N=120		
			CG: Inpatient			
			psychotherapy + 12			
			weeks access to an			
			Internet platform with			
			weekly updated			
			information on			
			depression			
			dehression			

Code Scheme

- 1. Integrated blended interventions with f2f focus
 - a. Delegating of some elements of f2f therapy to Internet-based cognitive behavioral therapy (iCBT) and thereby save clinician time and reduce overall cost
 - b. Supporting f2f therapy by delivering additional Internet elements and thereby increase effectiveness of f2f psychotherapy
 - c. Providing long-term support for patients with chronic mental diseases
- 2. Integrated blended interventions with Internet focus
 - a. Facilitate delivery of evidence-based mental health treatments within primary care (eg, assist general practitioners (GPs) to provide evidence-based mental health care)
 - b. Flexibility to react on individual needs concerning f2f support
 - c. Motivate participants to persist with iCBT through f2f support
 - d. Integrate f2f exercises to maximize effectiveness of iCBT
- 3. Sequential blended interventions Internet—f2f
 - a. Bridging waiting time with iCBT until f2f therapy starts
 - b. Stepped care approach: deliver low-threshold iCBT as an early step, thereby reducing costs for subsequent f2f psychotherapy
- 4. Sequential blended interventions f2f—Internet
 - a. Aftercare: maintain therapeutic benefits of f2f psychotherapy through subsequent iCBT
 - b. Monitoring of patient progress beyond the acute phase of f2f treatment