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LETTER TO THE EDITOR

## Counseling versus dignity therapy: Comments on previously published research

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(RECEIVED January 16, 2016; ACCEPTED March 18, 2016)

Dear Editor,

*Palliative & Supportive Care* recently published a study by Rudilla and colleagues (2015) designed to examine the efficacy of dignity therapy (DT) as compared to counseling with respect to several psychosocial variables. Although I would like to commend the authors for their research, which broadens our understanding of interventions designed to ameliorate end-of-life psychological suffering, this study raises several questions worthy of comment.

Although the authors state that they followed the psychotherapeutic protocol proposed by the original DT and counseling authors, there is a lack of information on both interventions and the standardized processes followed within their randomized controlled trial.

It appears that counseling and DT were done by the same psychologist, which could introduce an important intervention bias. As such, readers cannot be sure if the therapist was more inclined or invested in one intervention or the other, based on his or her academic and clinical backgrounds.

Readers are not told if the counseling and DT sessions were monitored by an external third party acquainted with the two different interventions. This would be critical to ensuring protocol fidelity and adherence. There is also no mention of the training or experience that the therapist had in either of these

interventions. One cannot rule out that the results are a reflection of the skill set and experience with which the intervention was applied.

In the Discussion section, the authors state that “Julião et al. (2014) found evidence of a positive effect of DT on depression over the short term but not by the end of the intervention (day 30).” This statement is not accurate. Our research group found that, compared with the standard palliative care group, those receiving DT demonstrated significantly less depression at all assessment timepoints.

Finally, the authors say little about the study limitations. Reflecting on these limitations would help readers better appreciate how to interpret the authors’ work, and guide other researchers in preparing their own studies addressing these complex psychosocial issues within the context of palliative care.

### REFERENCES

- Julião, M., Oliveira, F., Nunes, B., et al. (2014). Efficacy of dignity therapy on depression and anxiety in Portuguese terminally ill patients: A phase II randomized controlled trial. *Journal of Palliative Medicine*, 17(6), 688–695.
- Rudilla, D., Galiana, L., Oliver, A., et al. (2015). Comparing counseling and dignity therapies in home care patients: A pilot study. *Palliative & Supportive Care*, 14, 1–9.

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