Interpersonal Psychotherapy (IPT) and Cognitive Behavioral Therapy (CBT) are both evidence-based treatments for Major Depressive Disorder (MDD). Several head-to-head comparisons between these methods have been made, most of them in the US. There is a need for more trials in different treatment settings. This thesis is based on a randomized controlled trial of CBT and IPT for MDD in a community-based psychiatric outpatient clinic. In the trial, treatment outcome and mentalization change was compared between the methods. In addition, the significance of pre-treatment mentalization for subsequent alliance and outcome was analyzed.

Ninety-six patients, about half of them with personality disorders, were randomized to 14 sessions of CBT or IPT. The results showed that IPT was not inferior to CBT. CBT had a significantly higher drop-out rate. Initial capacity for mentalization predicted alliance and outcome in both IPT and CBT. The level of mentalization was changed in IPT but not in CBT.
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