Letter

Guilherme Nobre Nogueira ^{1,} *	Insights and Reflections on Cognitive Behavioural and Dialectical Behavioural Therapies for Adolescent Self-Harm and Suicidal Behavior
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Dear Editor,

I am writing to express my sincere appreciation for the recently published article titled "An Umbrella Review of Cognitive Behavioural and Dialectical Behavioural Therapies to Treat Self-Harm and Suicidal Behaviour in Adolescents", authored by Carla Torralba-Suarez and Antonio Olry-de-Labry-Lima [1]. This comprehensive review represents a significant contribution to the understanding of the efficacy of psychological interventions in addressing the concerning rise of self-harm and suicidal behavior among adolescents. In light of the increasing prevalence of these issues, this article is both timely and crucial.

The review offers an in-depth analysis of nine systematic reviews evaluating the impact of Cognitive Behavioural Therapy (CBT) and Dialectical Behavioural Therapy (DBT) on reducing self-harm and suicidal ideation in adolescents. The findings highlight the effectiveness of CBT, particularly when combined with fluoxetine, in reducing suicide-related events. Moreover, DBT demonstrates potential in reducing both self-harm and suicidal ideation, critical outcomes in this vulnerable demographic [2].

One of the key strengths of this review lies in its inclusion of high-quality studies that offer a nuanced understanding of how these therapeutic approaches can be effectively implemented in clinical practice. The authors' rigorous methodology, including the use of the AMSTAR-2 tool and consensus-driven processes, strengthens the reliability of the conclusions drawn.

Additionally, I fully endorse the authors' position that offering psychological interventions to young individuals

with mental health concerns is not only reasonable but also an ethical imperative that must be upheld in clinical settings.

While the review presents valuable insights, several limitations merit further discussion. The most prominent challenge is the heterogeneity observed across the included studies. This variability, likely stemming from differences in study design, interventions, and outcome measures, limits the generalizability of the findings. For example, the specific components of CBT and DBT that contribute most significantly to their efficacy remain unclear due to the diverse therapeutic modalities examined in the included reviews.

Furthermore, the review's reliance on existing systematic reviews distances the conclusions from primary data, potentially obscuring important nuances. The variability in how self-harm and suicidal behavior were assessed, often through unvalidated instruments or clinical interviews, complicates the interpretation of results. This challenge is further compounded by the lack of sufficient studies focusing on underrepresented populations, such as male and gender-diverse adolescents, thus limiting the broader applicability of the findings across various demographic groups.

A notable gap in the literature is the absence of studies directly comparing the effectiveness of group versus individual therapy formats, as well as a lack of head-to-head comparisons between CBT and DBT. This limitation hinders the ability to draw definitive conclusions regarding which therapeutic approach may be most beneficial for adolescents at risk of self-harm or suicidal behavior. Without such comparative studies, clinicians may struggle to make informed decisions about the most appropriate treatment modalities for their patients [3].

The umbrella review also identified a range of studies reporting differing outcomes for the same interventions, complicating the synthesis of evidence. These inconsistencies make it difficult to establish clear guidelines or recom-

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mendations for practice, as the effectiveness of interventions may not be universally applicable to all adolescent populations.

Finally, while the authors appropriately call for further research, the review does not sufficiently address the practical challenges of implementing CBT and DBT in real-world settings, particularly in resource-constrained environments, such as in Brazil. Future studies should prioritize identifying the most cost-effective and scalable components of these therapies to ensure wider accessibility and impact.

In conclusion, the review by Carla Torralba-Suarez and Antonio Olry-de-Labry-Lima [1] represents a pivotal advancement in understanding the role of CBT and DBT in addressing adolescent self-harm and suicidal behavior. However, addressing the limitations identified through future research will be critical in translating these findings into practical, evidence-based interventions that can be widely implemented in clinical practice.

Thank you for the opportunity to engage with such an important and timely contribution to the field.

Availability of Data and Materials

Not applicable.

Author Contributions

GNN designed the research study and contributed to drafting or making significant editorial revisions to the manuscript. The author read and approved the final manuscript, participated sufficiently in the work, and agreed to be accountable for all aspects of the study.

Ethics Approval and Consent to Participate

Not applicable.

Acknowledgment

Not applicable.

Funding

This research received no external funding.

Conflict of Interest

The author declares no conflict of interest.

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