

## Abstract

With the emergence of the Covid-19 pandemic, mental health problems, namely, depression and insomnia have been on a surge. With a shortage of mental health practitioners, the “Transdiagnostic approach” introduces a potential low-cost treatment such as the TranS-C. A randomised controlled trial was conducted to examine the efficacy of TranS-C in reducing depressive symptoms in Major Depressive Disorder and insomnia comorbid patients. Twenty-one subjects (Mean age: 17.1; Male to Female: 8 to 13) were recruited for the study. Participants were randomised into either the TranS-C or control group. The intervention group (n= 10) received 6 therapy sessions in total on modules including: Sleep and Circadian Education, Sleep Hygiene, Stimulus Control, Correct Unhelpful Sleep and Emotion-related Beliefs, and Maintenance of Behaviour Change. While the control group (n=11) received no interventions. The Hospital Anxiety and Depression Scale (HADS-D) was employed for our primary outcome measure. Secondary outcomes were assessed by a 7-day standardised sleep diary, Insomnia Severity Index (ISI) and Sheehan Disability Scale (SDS). The results showed a significant reduction in depressive and insomnia symptoms of the TranS-C group in comparison to the control. As for the sleep diary, all four parameters (Total sleep time, Sleep efficiency, Sleep onset latency, Wake after sleep onset) showed significant improvement immediately post-treatment in comparison to the baseline assessment. Following up after 3-months, the improvements seen on the Sleep onset latency and Wake after sleep onset measures narrowed, while Total sleep time and Sleep efficiency were maintained. No significant differences were found in the sleep diary. Overall, TranS-C may be an effective transdiagnostic treatment for depression and insomnia comorbid patients, but future investigations are required to substantiate the findings.