Key questions defining research program:

- Identifying and then testing the effectiveness of novel interventions to improve behavioral health that can be delivered at scale with an emphasis on treatment of mood and anxiety d/o.
- Does effective treatment of depression improve cardiovascular health
- What is the impact of depression and anxiety d/o on health
- Utilizing electronic medical record systems to provide care and recruit trial patients

Key words describing research program:
- Behavioral health
- Cardiovascular disease
- Primary care
- Online treatments
- Pragmatic trials conducted in non-psychiatric settings

Titles for shovel-ready research projects:

- Long-term vital status on study cohorts described below
- Impact of mood and/or anxiety and its treatment on health care utilization, quality of life, sleep, etc.
- Predictors of recovery from depression and/or anxiety (spontaneous or active)
- Moderators of impact of mood and anxiety disorders on clinical outcomes (moderators include sociodemographic characteristics, co-morbid medical conditions, social support, pain, ejection fraction, handgrip strength, physical activity, etc.).

Data sources for shovel-ready research projects:

- **Hopeful Heart Trial** presently testing the impact of a “blended” collaborative care model for treating both depression and systolic heart failure vs. heart failure alone (to date, N>550 enrolled)
- **Bypassing the Blues Trial** that examined the impact of collaborative care for treating depression following CABG surgery (N=453 enrolled 2004-2007; www.bypassingtheblues.pitt.edu)
- **Online Treatment for Mood and Anxiety Disorders** tested the impact of a computerized cognitive behavioral therapy program and an Internet support group in primary care (N=704 enrolled 2012-2014)
- **Developing a Collaborative Care Strategy for Depression and Comorbid Congestive Heart Failure** cohort study (N=471 enrolled 2007-2009)
- **Reduce Limitations from Anxiety (RELAX) Trial** of telephone-delivered collaborative care for treating generalized anxiety and panic disorder in primary care (N=329; enrolled 2005-2007)