Table 1. *Characteristics of included studies (k = 29).*

Study	Study N baseline	CT %	Country	Design	Diagnosis	Conditions	PSY	PHA	Control	Treatment length	CT measure	Depression measure	Risk of bias‡
Ammerman, 2016	92	80.43%	USA	RCT	MDD	PSY vs control	CBT	N/A	CAU	15 weeks	CTQ-SF	BDI-II	-
Brakemeier, 2015	70	78.57%	Germany	Open trial	CD, TRD	PSY	CBASP	N/A	N/A	12 weeks	CTQ-SF	HDRS-24	-
Bruijniks, 2020	200	54.50%	The Netherlands	RCT	MDD or PDD	PSY vs PSY	CBT, IPT	N/A	N/A	20 weeks	CTQ-SF	BDI-II	+
Chakrabarty, 2020	183	50.82%	Canada	Open trial	MDD	PHA	N/A	SSRI[a]	N/A	8 weeks	CECA	MADRS	-
Chin Fatt, 2020	278	72.30%	USA	RCT	MDD	PHA vs control	N/A	SSRI[a]	Pill PLA	8 weeks	CTQ-SF	HDRS-17	+
Day, 2015	922	51.52%	USA, The Netherlands, Australia, New Zealand, South Africa	RCT	MDD (single-episode or recurrent)	PHA vs PHA vs PHA	N/A	SSRI[a], SNRI[b]	N/A	8 weeks	ELSQ	HDRS-17	-
Douglas, 2012	56	67.86%	New Zealand	Open trial	MDD	PHA	N/A	SSRI[a] or SNRI[b]	N/A	6 weeks	CTQ-SF	MADRS	-
Dunlop, 2017	342	57.60%	USA	RCT	MDD	PSY vs PHA vs PHA	CBT	SSRI[a], SNRI[b]	N/A	12 weeks	CTQ-SF	HDRS-17	+
Dunlop, 2012	78	67.95%	USA	RCT	MDD	PSY vs PHA	CBT	SSRI[a]	N/A	12 weeks	CTQ-SF	HDRS-17	-
Friedman, 2012	665	49.77%	USA	RCT	Recurrent or CD	PHA vs PHA vs PHA	N/A	SSRI[a]+pill PLA, SSRI[a]+NDRI[c], SNRI[b]+TeCA[d]	N/A	12 weeks	Own questionnaire	IDS-C	-
Guhn, 2021	58	84.48%	Germany	Open trial	PDD	PSY	CBASP	N/A	N/A	12 weeks	CTQ-SF	HDRS-24	-
Heinonen, 2018	151	84.77%	Finland	RCT	MDD	PSY vs PSY vs PSY	Short-term DYN, SFT, long-term DYN	N/A	N/A	28-144 weeks	CFAQ	HDRS-17	--
Jobst, 2018	16	75.00%	Germany	Open trial	CD	PSY	CBASP	N/A	N/A	10 weeks	CTQ-SF	HDRS-24	-
Klein, 2009	671	74.22%	USA	Open trial	CD	PHA	N/A	SSRI[a], SNRI[b], NDRI[c], TeCA[d]	N/A	12 weeks	MOPS, CTQ-SF	HDRS-24	--
Kopf-Beck, 2020	213	58.22%	Germany	RCT	MDD	PSY vs PSY vs control	Schema therapy, CBT	N/A	PSY PLA	7 weeks	CTQ-SF	MADRS	+
Lever-van Milligen, 2019	41	58.54%	The Netherlands	Open trial	MDD	PHA	N/A	SSRI[a]	N/A	16 weeks	CTQ-SF	IDS-SR	-
Lu, 2018	76	63.16%	China	Open trial	MDD	PHA	N/A	SSRI[a]	N/A	24 weeks	CTQ-SF	HDRS-24	--
Nakagawa, 2017	80	6.25%	Japan	RCT	TRD	PSY vs control	CBT	N/A	CAU	16 weeks	Own interview question	HDRS-17	+
Okada, 2014	50	78.00%	Japan	Open trial	MDD	PHA	N/A	SSRI[a], SNRI[b], or both	N/A	6 weeks	ETISR-SF	HDRS-21	--
Ostacoli, 2018	48	91.67%	Italy, Spain	RCT	CD, double depression, or recurrent MDD	PSY vs PSY	CBT, EMDR	N/A	N/A	15 weeks	TAQ	BDI-II	-
Rief, 2018	168	71.43%	Germany	RCT	Chronic or episodic MDD	PSY vs PSY vs PSY vs control	CBASP, CBT-E, CBT-M	N/A	WLC	16 weeks	CTQ-SF	BDI-II	+

Schramm, 2017	254	74.02%	Germany	RCT	CD, double depression, or recurrent MDD	PSY vs control	CBASP	N/A	PSY PLA	20 weeks	CTQ-SF	HDRS-24	--
Schramm, 2011	29	68.97%	Germany	RCT	CD, double depression, or recurrent MDD	PSY vs PSY	CBASP, IPT	N/A	N/A	16 weeks	CTQ-SF	HDRS-24	-
Schramm, 2015	58	72.41%	Germany	RCT	Recurrent or CD	PSY vs PHA	CBASP	SSRI[a]	N/A	8 weeks	CTQ-SF	MADRS	-
Toth, 2013	128	76.56%	USA	RCT	MDD	PSY vs control	IPT	N/A	CAU	14 weeks	CTQ-SF	BDI-II	--
Van Bronswijk, 2021	151	44.37%	The Netherlands	RCT	MDD	PSY vs PSY	CT vs IPT	N/A	N/A	30 weeks	Own questionnaire	BDI-II	+
Wiersma, 2014	139	66.19%	The Netherlands	RCT	CD, double depression, or recurrent MDD	PSY vs control	CBASP	N/A	CAU	16 weeks	CTI	IDS-SR	+
Zisook, 2016	1520	65.53%	USA	RCT	Elevated symptoms	PHA vs PHA vs PHA	N/A	NDRI[c], SSRI[a] or SNRI[b] + NDRI, SSRI[a] or SNRI[b] + APZ[f]	N/A	12 weeks	ACE	QIDS-C	-
Zobel, 2011	93	51.61%	Germany	RCT	MDD	COMB vs PHA	IPT	SSRI[a], TCA[e]	N/A	5 weeks	CTQ-SF	HDRS-17	-
Total	6830	62.49%											

Note. ‡ Risk of bias: + means low risk, - means some concerns or moderate risk, -- means high, serious, or critical risk.
ACE, Adverse Childhood Experiences Survey; BDI-II, Beck Depression Inventory 2nd edition; CT, childhood trauma; COMB, combination of PSY and PHA; CD, chronic depression; CTQ-SF, Childhood Trauma Questionnaire - Short Form; CECA, Childhood Experiences of Care and Abuse interview; CTI, Childhood Trauma Interview; CFAQ, Childhood Family Atmosphere Questionnaire; CBT, Cognitive Behavioral Therapy; CBT-E, Cognitive Behavioral Therapy with physical exercise focus; CBT-M, Cognitive Behavioral Therapy with mindfulness exercises; CT, Cognitive Therapy; CBASP, Cognitive Behavioral Analysis System of Psychotherapy; CAU, care-as-usual; DYN, Psychodynamic Psychotherapy; ELSQ, Early Life Stress Questionnaire; EMDR, Eye Movement Desensitization Reprocessing; ETISR-SF, Early Trauma Inventory Self Report - Short Form; HDRS, Hamilton Depression Rating Scale; IPT, Interpersonal Psychotherapy; IDS-SR, Inventory of Depressive Symptomatology-Self Report; IDS-C, Inventory of Depressive Symptomatology-Clinician Rated; MOPS, Measure of Parental Style; MDD, major depressive disorder; MADRS, Montgomery–Åsberg Depression Rating Scale; N/A, not applicable; NDRI, norepinephrine–dopamine reuptake inhibitor; PSY, psychotherapy; PHA, pharmacotherapy; PDD, persistent depressive disorder; PSY PLA, psychotherapy placebo (supportive psychotherapy); Pill PLA, pill placebo; QIDS-C, Quick Inventory of Depressive Symptomatology-Clinician Rated; RCT, randomized clinical trial; SSRI, selective serotonin reuptake inhibitor; SNRI, serotonin–norepinephrine reuptake inhibitor; SFT, Solution-focused Therapy; TRD, treatment-resistant depression; TAQ, Trauma Antecedent Questionnaire; TeCA, tetracyclic antidepressant; TCA, tricyclic antidepressant; WLC, waitlist.
[a] Escitalopram, sertraline, or paroxetine
[b] Venlafaxine or duloxetine
[c] Bupropion
[d] Mirtazapine
[e] Amitriptyline
[f] Aripiprazole

Table 2. Results of random-effects meta-analyses.

	Random Effects Meta-Analyses								
	$k_{studies}$	k_{comp}	$n_{participants}$	n_{groups}	*g (95% CI)*	*PI*[a]	I^2 *(95% CI)*	*Egger*[b]	*Adj g*[c]
Depression Severity									
Baseline comparison				*CT/NoCT*					
CT vs No CT	29	56	6805	4244/2561	**0.202 (0.145-0.258)**	-0.130-0.530	0.0% (0.0-31.4)	0.144	**0.235**
Treatment effect				*base/post*					
CT (within-group)	29	49	3892	3892/3441	**1.272 (1.062-1.482)**	-0.150-2.694	**88.6% (85.8-90.9)**	0.489	**1.343**
No CT (within-group)	29	48	2382	2382/2050	**1.400 (1.114-1.685)**	-0.053-3.325	**86.5% (83.0-89.3)**	**0.037**	**1.394**
				CT/NoCT					
CT vs No CT (between-group)	29	48	6250	3868/2382	0.016 (-0.094-0.125)	-0.627-0.659	**44.3% (21.5-60.4)**	0.134	0.070
Treatment vs control				*T/C*					
CT (between-group)	8	11	902	526/376	**0.605 (0.294-0.916)**	-0.306-1.516	**58.0% (17.9-78.5)**	0.093	**0.456**
No CT (between-group)	8	11	450	271/179	0.178 (-0.195-0.552)	-0.832-1.189	**67.5% (38.8-82.7)**	0.050	0.026
Dropout (for any reason)		k_{comp}	$n_{participants}$	*CTdrop/NoCTdrop*	*RR (95% CI)*	*PI*[a]	I^2 *(95% CI)*	*Egger*[b]	*Adj RR*[c]
CT vs No CT (between-group)	17	29	3501	442/322	1.063 (0.945-1.195)	0.649-1.741	0.0% (0.0-41.3)	0.051	1.108

Note: boldface indicates significance at $p < .05$. Comp, comparisons; base, baseline; post, post-treatment; T, treatment; C, control; drop, dropout

[a] Prediction interval; [b] Significance of Egger's test for publication bias; [c] Effect after trim & fill procedure (outliers removed if significant heterogeneity is observed).

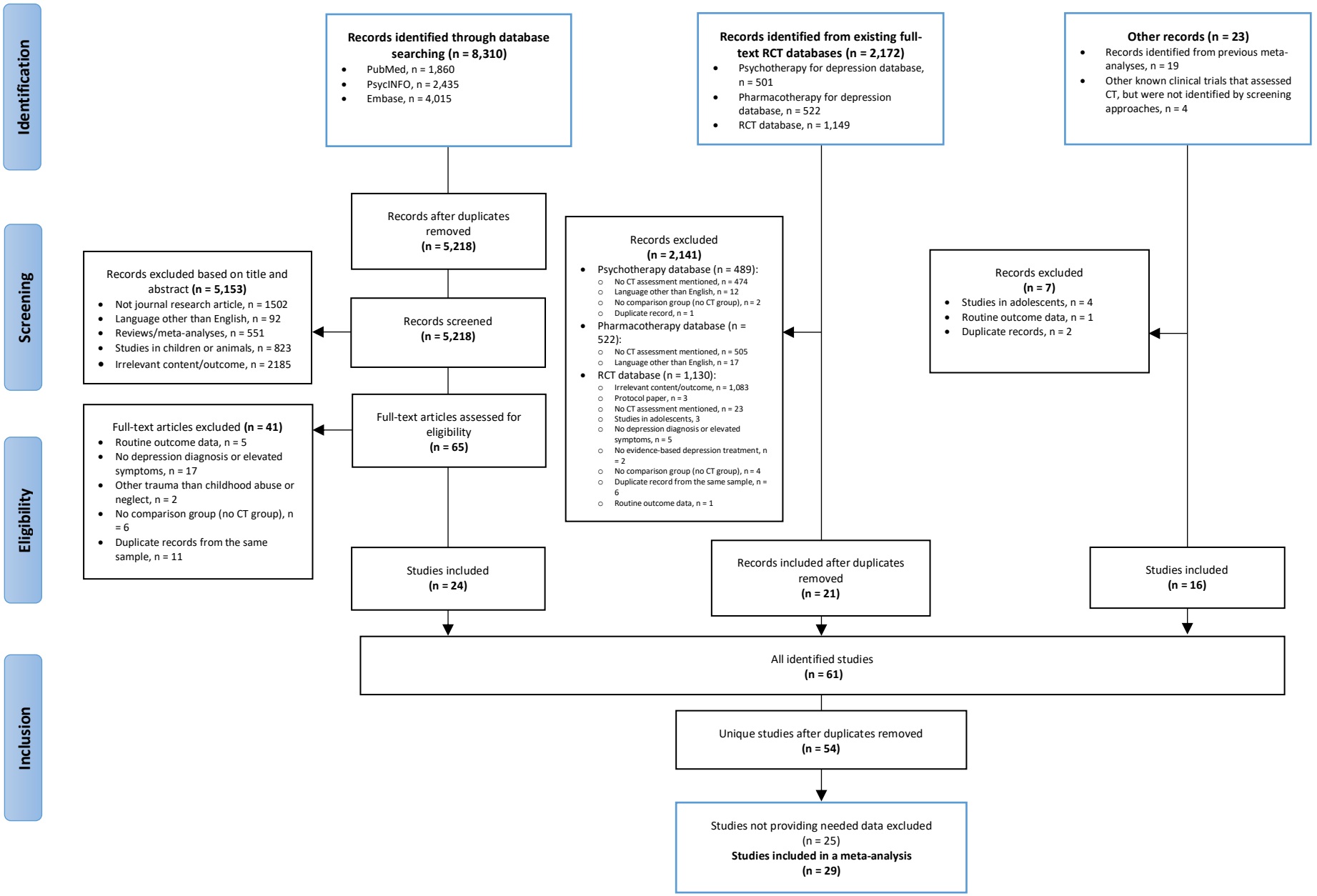
Identification
Screening
Eligibility
Inclusion
Records identified through database searching (n = 8,310)
PubMed, n = 1,860
PsycINFO, n = 2,435
Embase, n = 4,015
Records identified from existing full-text RCT databases (n = 2,172)
Psychotherapy for depression database, n = 501
Pharmacotherapy for depression database, n = 522
RCT database, n = 1,149
Other records (n = 23)
Records identified from previous meta-analyses, n = 19
Other known clinical trials that assessed CT, but were not identified by screening approaches, n = 4
Records after duplicates removed (n = 5,218)
Records excluded (n = 2,141)
Psychotherapy database (n = 489):
No CT assessment mentioned, n = 474
Language other than English, n = 12
No comparison group (no CT group), n = 2
Duplicate record, n = 1
Pharmacotherapy database (n = 522):
No CT assessment mentioned, n = 505
Language other than English, n = 17
RCT database (n = 1,130):
Irrelevant content/outcome, n = 1,083
Protocol paper, n = 3
No CT assessment mentioned, n = 23
Studies in adolescents, 3
No depression diagnosis or elevated symptoms, n = 5
No evidence-based depression treatment, n = 2
No comparison group (no CT group), n = 4
Duplicate record from the same sample, n = 6
Routine outcome data, n = 1
Records excluded based on title and abstract (n = 5,153)
Not journal research article, n = 1502
Language other than English, n = 92
Reviews/meta-analyses, n = 551
Studies in children or animals, n = 823
Irrelevant content/outcome, n = 2185
Records screened (n = 5,218)
Records excluded (n = 7)
Studies in adolescents, n = 4
Routine outcome data, n = 1
Duplicate records, n = 2
Full-text articles excluded (n = 41)
Routine outcome data, n = 5
No depression diagnosis or elevated symptoms, n = 17
Other trauma than childhood abuse or neglect, n = 2
No comparison group (no CT group), n = 6
Duplicate records from the same sample, n = 11
Full-text articles assessed for eligibility (n = 65)
Studies included (n = 24)
Records included after duplicates removed (n = 21)
Studies included (n = 16)
All identified studies (n = 61)
Unique studies after duplicates removed (n = 54)
Studies not providing needed data excluded (n = 25)
Studies included in a meta-analysis (n = 29)

Figure 1. Flowchart of study selection procedure.
RCT - randomized clinical trial

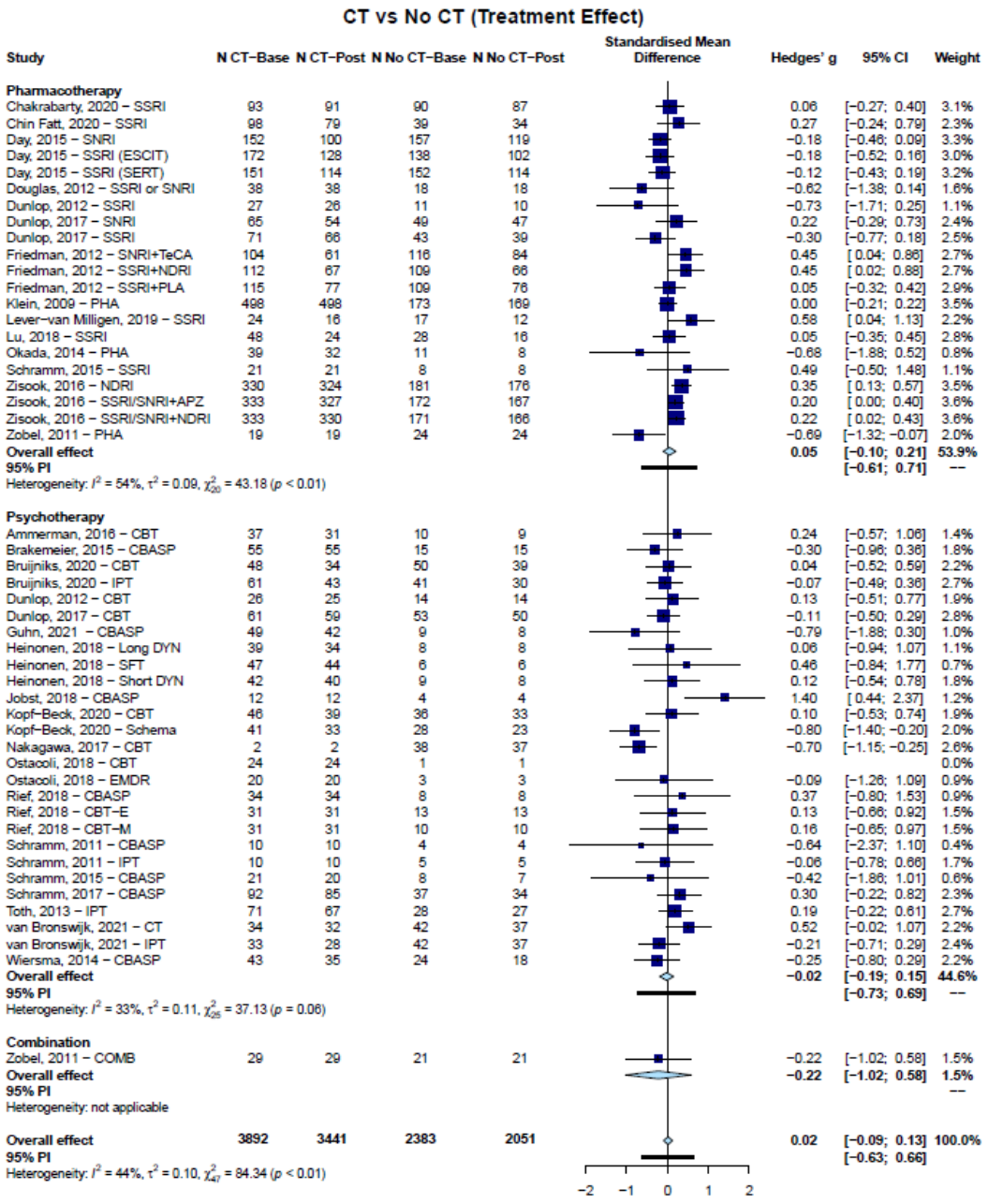

Figure 2. Forest plot of the difference in treatment effect from baseline to post-treatment between individuals with and without CT.

Note. Base, baseline; CT, childhood trauma; post, post-treatment.

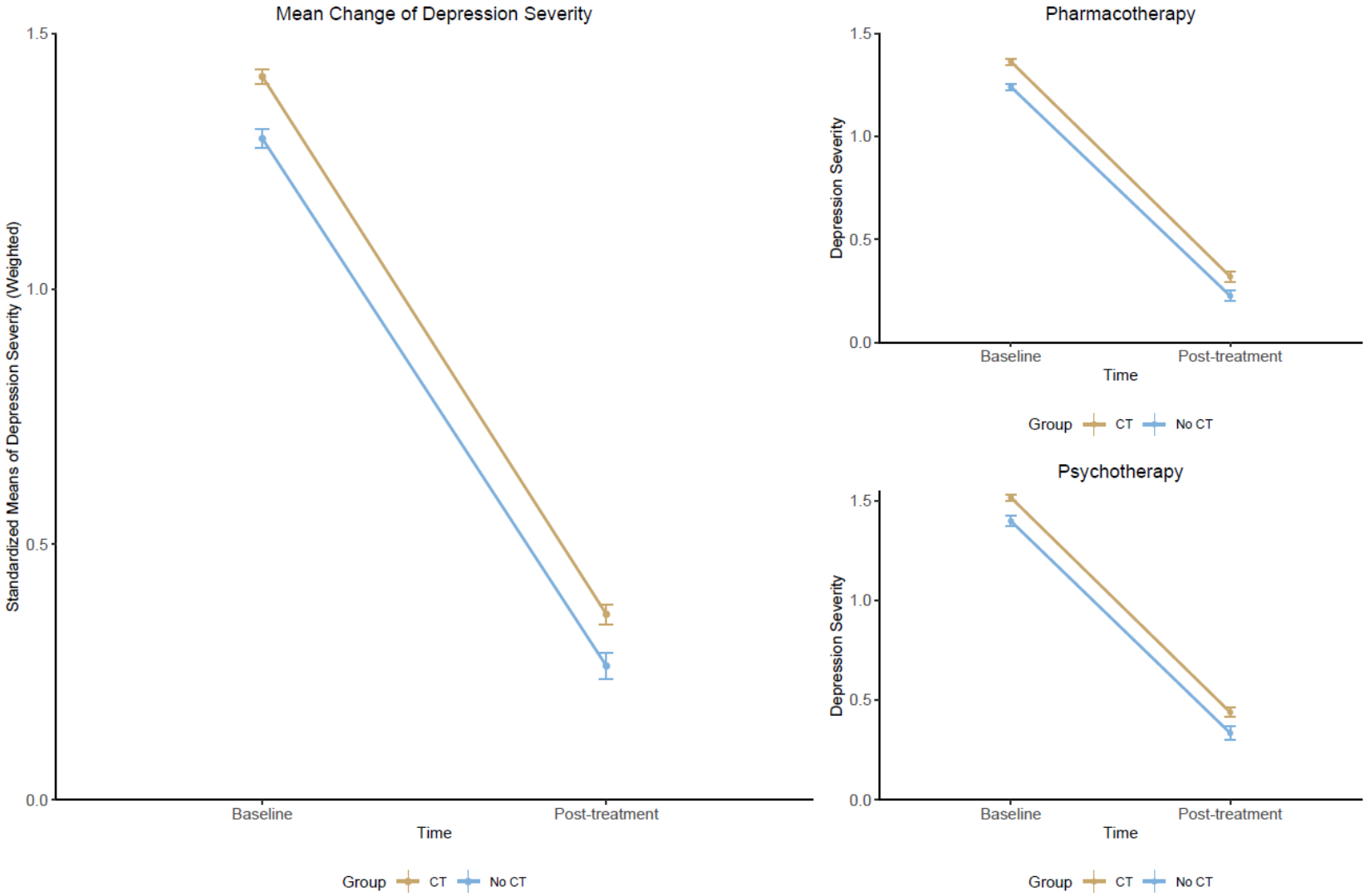

Figure 3. Observed standardized (weighted) means of depression severity at baseline and post-treatment for individuals with and without CT.
Note. Means were based on 48 arms for overall treatment effect, 21 arms for pharmacotherapy effect, and 26 arms for psychotherapy effect.