

Problem Solving Treatment (PST) Project.

No registrations found.

Ethical review	Positive opinion
Status	Recruitment stopped
Health condition type	-
Study type	Interventional

Summary

ID

NL-OMON20998

Source

NTR

Brief title

PST

Intervention

Outcome measures

Primary outcome

Reduction of symptoms, measured using the Hospital Anxiety and Depression Scale (HADS) to monitor symptom levels of anxiety and depression.

Secondary outcome

1. Social problem-solving skills, measured using a questionnaire designed by D’Zurilla;
2. Psychological and physical well-being using Short Form-36;
3. Social support, using the Social Support Inventory;
4. Coping-styles by the VOMS (Vragenlijst over Omgaan met Situaties) is the Dutch adaption of the ways of coping questionnaire (WAYS) which is based on the transactional coping theory of Lazarus and Folkman;
5. Rumination: Actual scientific reports suggest rumination as a significant, and probable

prognostic, factor for depression. The rumination scale (RRS);

6. Problem evaluation;

7. Health care utilization. We used the Trimbos/iMTA questionnaire for Costs associated with Psychiatric Illness (Tic-P) to measure the amount health care patients consume and to register sick days from work (Hakkaart-Van Roijen, 2002 128 /id). Furthermore, the EQ-5D was used.

Study description

Background summary

N/A

Study objective

There is a need for assistance by primary care mental health workers in general practice in the Netherlands. General Practitioners (GPs) experience an overload of frequent attenders suffering from (co-morbid) psychological problems. For most GPs these problems are complicated to recognize and to refer. PST is a brief and practical skill-building psychological treatment. The treatment has a strict protocol and is based on the principles of cognitive behavioral therapy. PST delivered by nurses seems to be an effective treatment for patients with psychological problems in primary care. This treatment increases the patients skill of structured problem solving and gives back a sense of control. However, research outcomes differ and no systematic review is available. This protocol describes a randomized clinical trial on the effectiveness of PST delivered by nurses for patients in general practice.

Study design

N/A

Intervention

PST versus care as usual.

Contacts

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Eligibility criteria

Inclusion criteria

Patients of 18 years and older, who present psychological problems and are frequent attenders of general practice are recruited by the research-assistant.

Exclusion criteria

1. Patients who are treated in last year in the GGz, for example with cognitive behaviour therapy;
2. Patients who suffer from a serious medical sickness, psychotic impairment, primarily organic-mental impairment or serious individuality problems;
3. Patients who are multiple visitors of the general practitioner because of chronic or hypochondria;
4. Patients who are indicated for anxiolytic or antidepressant, or patients who used these drugs less than 12 weeks, or those without constant treatment dose in the following 10 weeks;
5. Patients with serious addiction problems;
6. Patients who are suicidal;
7. Patients who are not able to fill in the questionnaire (GHQ);
8. Patients with insufficient knowledge of the Dutch language.

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Open (masking not used)
Control:	Active

Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	01-11-2002
Enrollment:	160
Type:	Actual

Ethics review

Positive opinion	
Date:	13-07-2005
Application type:	First submission

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register

NTR-new

NTR-old

Other

ISRCTN

ID

NL551

NTR607

: 42.00.0001

ISRCTN51021015

Study results

Summary results

N/A