GGZ Interventie Ter Preventie van Suïcidaal Gedrag (GRIP)

Een onderzoek om zelfmoord te voorkomen

No registrations found.

Ethical review	Positive opinion
Status	Recruiting
Health condition type	-
Study type	Interventional

Summary

ID

NL-OMON25696

Source
Nationaal Trial Register

Brief title
GRIP

Health condition

Suicide prevention
Cognitive behavioral therapy
Specialized mental health care

Sponsors and support

Primary sponsor: GGZ inGeest Specialized Mental Health Care, Department of Research and Innovation, Oldenaller 1, 1081 HJ, Amsterdam
Source(s) of monetary or material Support: not applicable

Intervention

Outcome measures

Primary outcome

The primary outcome measure is defined as the reduction of suicide ideation and suicidal behavior in terms of severity and intensity as measured by the Columbia-Suicide Severity Rating Scale (C-SSRS). Assessments of severity and intensity of suicidal ideation and behavior will be made at baseline, after 6 and 12 weeks after baseline, and 9 months after the baseline.

Secondary outcome

To refine the grid of suicidal ideation and behavior, several other explicit and implicit measures of suicidal behavior will be used as secondary study parameters (e.g. Beck's Scale for Suicide Ideation and the Suicide-Related Coping Skills). Furthermore, levels of depression and anxiety will respectively be mapped, as well as quality of life, and severity of the mental illness of the patient.

Lastly to enhance our understanding of the underlying factors that bring about suicidal behavior, three theories of how suicidal behavior might arise will be investigated by the use of questionnaires:

- The Interpersonal Theory of Suicide will be investigated using the Interpersonal Needs Questionnaire (INQ) and the Acquired Capability for Suicide Scale - Fearlessness About Death (ACSS-FAD)

- Suicidal Crisis Syndrome will be investigated using the Suicide Crisis Inventory (SCI)

- An amplified sense of self-agency nurtures a positive attributional style to self and self-control, which may buffer against effects of hopelessness. This possible underlying mechanism will be investigated using the Pearlin Mastery Scale (PMS)

Furthermore, psychometric properties of the Dutch translations of the INQ, ACSS-FAD, and SCI will be assessed.

Study description

Background summary

According to the World Health Organization (WHO), suicide is the 15th most frequent cause of death in the world and is responsible for approximately 800,000 deaths per year (WHO, 2014). It is of importance to further develop and implement interventions that focus on

decreasing the number of deaths due to suicide. Improving mental health treatment and its availability for suicidal patients may be considered to be an important target when it comes to reducing the number of suicides, since studies indicate that 90-95% of the people that commit suicide were dealing with a mental health disorder (Cavanagh et al., 2003; Nock et al., 2008). Research has shown that cognitive behavioral therapy focused on suicide prevention (CT-sp) is capable of reducing suicidality in various populations (Meerwijk et al., 2016; Mewton, 2016l; Tarrier et al., 2008). The study 'GGZ inteRvention In Prevention of suicidal behavior' (GRIP) will investigate whether CT-SP is also effective for suicidal patients (ideators as well as attempters) within the Dutch outpatient mental health care via a randomized controlled trial.

Study objective

Cognitive therapy for suicide prevention (CT-SP) in combination with treatment as usual (TAU) is more effective in reducing the severity and intensity of suicide ideation and suicidal behavior than only receiving treatment as usual.

Study design

There are 4 measurement moments: T0 (baseline), T1 (6 weeks after baseline), T2 (12 weeks after baseline), and T3 (9 months after baseline).

Intervention

12 sessions of CT-SP delivered face-to-face by a trained psychologist.

Contacts

Public
GGZinGeest Specialized Mental Health care, Department of Research and Innovation
J. (Jasper) Wiebenga
Oldenaller 1

Amsterdam 1081 HJ
The Netherlands
020 788 4634
Scientific
GGZinGeest Specialized Mental Health care, Department of Research and Innovation
J. (Jasper) Wiebenga
Oldenaller 1

Amsterdam 1081 HJ
The Netherlands
020 788 4634

Eligibility criteria

Inclusion criteria

- Age 18 and above
- Patient newly referred to or in care in a participating sGGZ mental health care center
- Patient scores 2 or higher on the severity subscale of the C-SSRS in the past month
- Patient additionally scores 3 or higher on at least one of the first three items of the intensity subscale of the C-SSRS in the past month and/or made a suicide attempt in his/her lifetime as rated by the suicidal behavior subscale of the C-SSRS.
- Speaking the Dutch language
- Patient is inclined to participate in a randomization process
- Patient is inclined to give written informed consent

Exclusion criteria

- Active (manic-)psychotic episode or cognitive impairment due to chronic (psychotic) disorganization, dementia, or mental retardation
- Insufficient mastery of the Dutch language
- Has previously had cognitive behavioral therapy for suicide prevention

Study design

Design

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

Recruitment

NL

Recruitment status:	Recruiting
Start date (anticipated):	24-05-2019
Enrollment:	176

Type: Anticipated

IPD sharing statement

Plan to share IPD: Undecided

Ethics review

Positive opinion
Date: 30-03-2018

Application type: First submission

Study registrations

Followed up by the following (possibly more current) registration

ID: 48958
Bron: ToetsingOnline
Titel:

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

No registrations found.

In other registers

Register	ID
NTR-new	NL6927
NTR-old	NTR7123
CCMO	NL65579.029.18
OMON	NL-OMON48958

Study results