

Cognitive Self-therapy (CST) for patients with chronic-recurrent depression or anxiety.

No registrations found.

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

Summary

ID

NL-OMON27615

Source

Nationaal Trial Register

Brief title

CST

Health condition

Depression and (generalised) anxiety disorders.

Sponsors and support

Primary sponsor: University Medical Center Groningen.

Source(s) of monetary or material Support: ZonMw, UMCG.

Intervention

Outcome measures

Primary outcome

Symptoms of anxiety and depression (SCL-90; BDI; ZBV).

Secondary outcome

1. Quality of life;
2. Social functioning;
3. WHO Qol;
4. Euroqol.

Study description

Background summary

Both treatment conditions showed significant improvements on symptom measures but did not differ between each other as to the main outcome SCL-90. CST patients improved more in some aspects of life satisfaction (e.g., feelings of safety, finance, recreation, transport; WHO-Qol, environmental sub-scale), and in social functioning in relationships with parents and siblings.

They also had significantly fewer contacts with other therapists (non-psychiatrists) than TAU patients. None of the patients committed suicide.

No variables were predictive for a good outcome.

CST patients appeared to rely more on their own experiences while TAU relied more on the judgement of other people.

The higher initial costs for the CST condition were compensated by considerably lower costs during follow-up.

Study objective

Does Cognitive Self-therapy (CST) in outpatient mental health care has any superiority as to cost-effectiveness and outcome compared to treatment as usual?

Study design

N/A

Intervention

Treatment as usual (TAU) versus CST which is a structured method that seeks to restructure cognitive schemata by focusing on problems in social functioning and relationships and consists of a Preparatory Phase, 2) an Orientation Course of three weekly morning-meetings to practice with peers; a Basic Course of 5 weekly, day-long sessions in which patients learn to manage self-therapy sessions with peers.

Those who perform these sessions adequately are certified to participate in weekly meetings, now led by peers in accordance with the manual, as taught during the BC.

The patients' role in the treatment gradually evolves into that of "paraprofessionals," such

that finally they conduct Self-Therapy sessions in reciprocal relationships with peers.

Contacts

Public

University Medical Center Groningen (UMCG), Department of Psychiatry,
P.O. Box 30001
D. Wiersma
Hanzeplein 1
Groningen 9700 RB
The Netherlands
+31 (0)50 3613839

Scientific

University Medical Center Groningen (UMCG), Department of Psychiatry,
P.O. Box 30001
D. Wiersma
Hanzeplein 1
Groningen 9700 RB
The Netherlands
+31 (0)50 3613839

Eligibility criteria

Inclusion criteria

1. DSM IV diagnosis of chronic and/or recurrent depression, dysthemic disorder or (generalised) anxiety disorder;
2. Duration of symptoms more than 2 years;
3. 18-65 years.

Exclusion criteria

1. Suicidal behaviour;
2. Psychosis;
3. Substance dependency;

4. IQ < 85;

5. Lack of insight in personal vulnerability in social contacts or relationship.

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):	01-03-2000
Enrollment:	151
Type:	Actual

Ethics review

Positive opinion	
Date:	12-09-2005
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	ID
NTR-new	NL337
NTR-old	NTR375
Other	: OG 00-028
ISRCTN	ISRCTN61381864

Study results

Summary results

1. den Boer, P. C. A. M., Mersch, P. P. A., and Wiersma, D. (2004) Cognitieve zelftherapie. Verslag van een pilot-studie naar een alternatieve behandeling voor psychiatrische patiënten. Maandblad Geestelijke volksgezondheid, 59, 325-338.

2. den Boer, P. C. A. M., Wiersma, D., and van den Bosch, R. (2004b) Why is self-help neglected in the treatment of emotional disorders? A meta-analysis. Psychological medicine, 34, 959-972.

3. Boer PCAM den, Bosch RJ van den, Vaarwerk I ten, Stant AD, Wiersma D. Cognitive Self-Therapy in chronic and remittent emotional disorders is effective and reduces therapist contact: a multi-center randomized controlled trial. Brit J Psychiatry in press.