# The efficacy of the Inference Based Approach, a new cognitive therapy for patients with the Obsessive Compulsive Disorder with poor insight.

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The objective of this study is to improve the prognosis of patients with the Obsessive Compulsive Disorder (OCD), with poor insight. A psychological treatment, the Inference Based Approach (IBA), which is developed and has been proven effective in...

Ethical review Approved WMO

**Status** Pending

**Health condition type** Anxiety disorders and symptoms

Study type Interventional

## **Summary**

#### ID

NL-OMON31984

#### **Source**

ToetsingOnline

#### **Brief title**

The efficacy of the Inference Based Approach.

## **Condition**

Anxiety disorders and symptoms

#### Synonym

obsessive neurosis, OCD

#### Research involving

Human

## **Sponsors and support**

**Primary sponsor:** Meerkanten GGZ (Ermelo)

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**Source(s) of monetary or material Support:** ZONMW praktijkzorgproject 100000 euro,mogelijke bijdrage van het Fonds psychische gezondheid

## Intervention

**Keyword:** Inference Based Approach, Obsessive-compulsive disorder, Poor Insight, Treatment

#### **Outcome measures**

## **Primary outcome**

The primary study outcome is the level of OCD complaints, measured with the Y-BOCS.

## **Secondary outcome**

The secondary outcomes of the study are amongst more general psychopathology,

the level of insight and the proportion drop outs.

## **Study description**

## **Background summary**

Obsessive-Compulsive Disorder (OCD) is a severe, often chronic disorder which is diagnosed when either obsessions or compulsions are present and when these symptoms cause marked distress and interfere with work or social functioning. OCD is a severe chronic psychiatric disorder, which affects 1-3% of the adult population and belongs to the 10 most invalidating medical conditions in the industrialized world (Bebbington 1998, Eisen et al. 2006, Karno et al. 1988, Kessler et al. 2005).

Evidence-based treatments for OCD consist of cognitive-behavioral therapy and antidepressants. Of patients with OCD who start with these treatments and are able to complete them, only 25-50% reaches complete recovery of the disorder (Fischer and Wells 2005; van Oppen et al, 2005). Another major clinical problem is that about 40% of the patients prematurely drop out from treatment or refuse treatment beforehand (Stetekee, 1993). One of the clinical most important predictors of poor outcome is the subgroup of patients with OCD with 'poor insight' (Himle et al, 2006, Tolin et al 2004, 2001, Kishore et al, 2003, Tot et al 2003, Erzegovesi et al 2001).

## Study objective

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The objective of this study is to improve the prognosis of patients with the Obsessive Compulsive Disorder (OCD), with poor insight. A psychological treatment, the Inference Based Approach (IBA), which is developed and has been proven effective in Canada, will be introduced and evaluated in the Netherlands. In this project IBA will be implemented at the outpatient treatment centres of the Marina de Wolf institute of Meerkanten GGZ and of the stichting Buitenamstel de Geestgronden.

The main question to be answered is: do patients with OCD with poor insight improve more from IBA than from cognitive behavioral therapy?

## Study design

The study design is a randomized controlled effectiveness study (RCT) of 20 weeks with patients with OCD with poor insight. In this study the effectiveness of IBA will be compared with a control condition in which patients will be treated with cognitive behavioral therapy.

#### Intervention

After screening the participants will be randomly allocated to a treatment with IBA or the control condition which contains of cognitive behavioral therapy. IBA differs from the standard treatment because within this model specific attention is given to the credibility of the obsession and not only to the appraisal of it. The central idea of this new treatment form is that OCD patients with poor insight perform poor on reality testing (when they are obsessing) and that they treat imagined dangers as real instead of imagined dangers. The treatment teaches the patients to differentiate that imagination always precedes their compulsions. The learn how to distinguish imagination and reality better.

The control treatment consists of cognitive behavioral therapy. The therapists are trained in a 5-day workshop by the team of O'Connor, the founder of IBA, and will be supervised by them. The IBA-protocol (O'Connor, Aardema & Pelissier, 2005) will be translated for this study. The therapists did participate in a pilot study and will be supervised weekly.

## Study burden and risks

There is no risk associated with participating in the study, except time investment. This is, including measurement at follow up 4 hours per patient.

## **Contacts**

#### **Public**

Meerkanten GGZ (Ermelo)

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Postbus 1000 3850 BA Ermelo NL **Scientific** 

Meerkanten GGZ (Ermelo)

Postbus 1000 3850 BA Ermelo NL

## **Trial sites**

## **Listed location countries**

Netherlands

# **Eligibility criteria**

## Age

Adults (18-64 years) Elderly (65 years and older)

## Inclusion criteria

Adult patients (18 and older) with Obsessive Compulsive Disorder (DSM-IV criteria, assessed on basis of the SCID) with poor insight (assessed on basis of the OVIS, OVIS score is at least 5), OCS is the main diagnosis.

## **Exclusion criteria**

Psychotic Disorder, drugs and or alcohol dependency or abuse

# Study design

## **Design**

Study phase:

3

Study type: Interventional

Intervention model: Parallel

Allocation: Randomized controlled trial

Masking: Single blinded (masking used)

Control: Active

Primary purpose: Treatment

## Recruitment

NL

Recruitment status: Pending

Start date (anticipated): 01-09-2008

Enrollment: 40

Type: Anticipated

## Medical products/devices used

Registration: No

## **Ethics review**

Approved WMO

Application type: First submission

Review commission: METIGG: Medisch Ethische Toetsingscommissie Instellingen

Geestelijke Gezondheidszorg (Utrecht)

# **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

CCMO NL23521.097.08