

The strength of automatic associations between the self and PTSD-symptoms in trauma exposed adolescents

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To examine if trauma exposed adolescents (who are developing their identity) who met the diagnostic criteria for PTSD, compared with trauma exposed adolescents who don't met those criteria, show a stronger implicit association between the self and...

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Anxiety disorders and symptoms
Study type	Observational non invasive

Summary

ID

NL-OMON37302

Source

ToetsingOnline

Brief title

Implicit trauma identification in trauma exposed adolescents

Condition

- Anxiety disorders and symptoms

Synonym

"Posttraumatic Stress Disorder (PTSD)" and "trauma"

Research involving

Human

Sponsors and support

Primary sponsor: Radboud Universiteit Nijmegen

Source(s) of monetary or material Support: ZonMW

Intervention

Keyword: Adolescents, Identity, Posttraumatic Stress Disorder (PTSD), Single Target Implicit Association Test (STIAT)

Outcome measures

Primary outcome

Reaction Times (RTs) of the two combined blocks of the Single Target Implicit Association Test (STIAT).

Secondary outcome

The secondary study parameters (child) are:

- Explicit self-esteem measured by the Rosenberg Self-Esteem Scale (RSES)
- Implicit self-esteem measured by a computerized version of the Name-Letter Task (NLT).
- Explicit trauma identification measured by the Centrality of Event Scale (CES)
- Explicit trauma identification measured by the Inclusion of Trauma in the Self Scale (ITSS)

Study description

Background summary

Memory for trauma is central to PTSD. Research has shown that memory for emotional events are more accessible, better rehearsed, and more vivid than are memories for neutral events and those vivid memories provide our sense of identity. Previous research in adults has shown that PTSD patients reported that they experienced their traumatic experiences as a part of their current identity. At this moment, the role of this trauma identification in adolescents is understudied. Although, identity development plays a crucial part during adolescence. Despite the importance of trauma identification concerning the development and severity of PTSD symptoms, focussing on trauma identification

is not a regular part of PTSD treatments. However, it could be that identification with the traumatic experiences predicts poor treatment outcome or there could be expected that patients, who identifies themselves with the traumatic experience, will have a bigger change to relapse compared to a patients that will not identifies themselves with the traumatic experiences. Traditional methods like self-report questionnaires cannot be used to investigate the subtle identification because this identification is unconscious and patients often lack the ability to grasp or report this. Therefore, in the present study implicit, automatically associations between the self and trauma will be investigated with the use of an Implicit Association Test.

Study objective

To examine if trauma exposed adolescents (who are developing their identity) who met the diagnostic criteria for PTSD, compared with trauma exposed adolescents who don't met those criteria, show a stronger implicit association between the self and the trauma.

Study design

A baseline experiment with Group (trauma exposed and PTSD diagnoses versus trauma exposed without PTSD diagnoses) as between subject factor.

A post-treatment experiment with Treatment (ITB versus TAU) as between subject factor and Baseline STIAT score as a covariate.

Intervention

All participants execute a short experiment (Single Target Implicit Association Test, STIAT), consisting of a compatible and an incompatible block.

Study burden and risks

The burden and risks of the current study are limited. The research is relevant because there could be expected that patients who identifies themselves with the traumatic experience, will have a bigger change to relapse compared to a patients that will not identifies themselves with the traumatic experiences. This could be especially the case with adolescents (instead of adults) because a crucial part of identity formation happens in this period of life.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adolescents (12-15 years)
Adolescents (16-17 years)
Adults (18-64 years)
Elderly (65 years and older)

Inclusion criteria

(1) Experienced sexual trauma
(2) Age between 12 and 18 years
(3) Of the 128 patients, 64 have current DSM-IV diagnosis of PTSD and, 64 have no current PTSD diagnosis, both established with the PTSD section of the Kiddie-Schedule for Affective Disorders and Schizophrenia-Present and Lifetime Version (K-SADS-PL) and the UCLA PTSD Reaction Index (PTSD-RI).

Exclusion criteria

(1) Mental retardation
(2) Insufficient ability to speak and write Dutch
(3) Trauma caused by a caregiver who is part of the current primary care system

(4) Current DSM-IV diagnosis of PTSD of the caregiver

Study design

Design

Study type:	Observational non invasive
Intervention model:	Other
Allocation:	Non-randomized controlled trial
Masking:	Open (masking not used)
Control:	Active
Primary purpose:	Treatment

Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	07-03-2013
Enrollment:	128
Type:	Actual

Ethics review

Approved WMO	
Date:	16-10-2012
Application type:	First submission
Review commission:	CMO regio Arnhem-Nijmegen (Nijmegen)
Approved WMO	
Date:	12-12-2013
Application type:	Amendment
Review commission:	CMO regio Arnhem-Nijmegen (Nijmegen)

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	NL40898.091.12