

# Validation of the self-report version of the Auditory Vocal Hallucination Rating Scale interview, the AVHRS-Q

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To establish the validity of the self-report version of the AVHRS-I interview, the AVHRS-Q.

<b>Ethical review</b>	Approved WMO
<b>Status</b>	Recruitment stopped
<b>Health condition type</b>	Other condition
<b>Study type</b>	Observational non invasive

## Summary

### ID

NL-OMON38901

### Source

ToetsingOnline

### Brief title

Validation AVHRS-Q

### Condition

- Other condition
- Schizophrenia and other psychotic disorders

### Synonym

auditory hallucinations (voices)

### Health condition

ook andere psychische stoornissen waarbij auditieve hallucinaties voorkomen

### Research involving

Human

## Sponsors and support

**Primary sponsor:** Universitair Medisch Centrum Groningen

**Source(s) of monetary or material Support:** door het Rob Giel Onderzoekcentrum; binnen de aanstelling van de hoofdonderzoeker

## Intervention

**Keyword:** auditory hallucinations, self-report questionnaire, validation

## Outcome measures

### Primary outcome

The main study parameter will be to what extent the scores on the self-report AVHRS-Q will concur with the scores on the interview-based AVHRS.

### Secondary outcome

-

## Study description

### Background summary

Interviewing patients about their auditory hallucinations is important both for therapy and research purposes. A good instrument will provide insight into the characteristics and severity of the voices. The Auditory Vocal Hallucination Rating Scale (interview; AVHRS-I) has been developed for this purpose and has been used in various projects (Jenner et al., 2001; Bartels-Velthuis et al., 2010; 2011; 2012b). The AVHRS-I has shown to have good psychometric properties (Bartels-Velthuis et al., 2012a). An AVHRS interview may take about 20 minutes on average. However, for research purposes it may be preferable to make use of a self-report questionnaire rather than of interview-based measures. For instance, in case of TMS (transcranial magnetic stimulation) therapy, the therapist may frequently want to know whether the severity of voices has diminished. A search on self-report scales measuring the (burden of) auditory hallucinations revealed that some self-report questionnaires in this field are available (Hayward et al., 2008; Hoffmann et al., 2008; Pinto et al., 2007). However, as these questionnaires either seem to be less comprehensive (Hoffmann et al., 2008; Pinto et al., 2007), or its psychometric properties have not yet been well established (Hoffmann et al., 2008), or only assess a person's relationship with his or her predominant voice (Hayward et al., 2008), a

self-report version of the AVHRS has been developed at the University Medical Center Groningen (Van de Willige, Bartels-Velthuis, Jenner), called the AVHRS-Q(uestionnaire). A few tests with administration of the AVHRS-Q show that completion takes about 7 minutes on average. Worth mentioning is that once the AVHRS-Q was developed, the instrument has been implemented in the routine outcome monitoring procedure for the voices outpatient department, at the request of the department\*s head.

The rationale for developing the AVHRS-Q is that administering a self-report scale to patients will be more cost-effective and will also be a less burden for the patients. Therefore, a self-report scale will be applicable in population studies rather than extensive interviews. However, the AVHRS-Q needs validation before it can be administered.

### **Study objective**

To establish the validity of the self-report version of the AVHRS-I interview, the AVHRS-Q.

### **Study design**

Patients with auditory hallucinations are requested to participate in the study. After being fully informed about the purpose, a consent form is signed. During one visit, patients will complete the self-report questionnaire AVHRS-Q and will be interviewed about their auditory hallucinations with the AVHRS-I. Alternately, either the AVHRS-Q or the AVHRS-I is administered first.

### **Study burden and risks**

none.

## **Contacts**

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## Trial sites

### Listed location countries

Netherlands

## Eligibility criteria

### Age

Adults (18-64 years)

Elderly (65 years and older)

### Inclusion criteria

- written informed consent;
- auditory hallucinations in the past month;
- a good command of the Dutch language;
- an IQ \* 80.

### Exclusion criteria

- no written informed consent;
- no command of the Dutch language;
- IQ < 80;
- disorganization symptoms.

## Study design

### Design

Study type:	Observational non invasive
Intervention model:	Other
Masking:	Open (masking not used)
Control:	Uncontrolled

Primary purpose: Diagnostic

## Recruitment

NL  
Recruitment status: Recruitment stopped  
Start date (anticipated): 18-11-2013  
Enrollment: 32  
Type: Actual

## Ethics review

Approved WMO  
Date: 12-11-2013  
Application type: First submission  
Review commission: METC Universitair Medisch Centrum Groningen (Groningen)

## 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	NL45716.042.13
Other	NTR nummer nog niet bekend