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.

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Other condition
Study type	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