Predictors of Posttraumatic Stress Disorder after rape in minors.

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

Summary

ID

NL-OMON39644

Source
ToetsingOnline

Brief title
Predictors of PTSD after rape in minors

Condition

- Anxiety disorders and symptoms

Synonym
Posttraumatic Stress Disorder, reactions on rape

Research involving
Human

Sponsors and support

Primary sponsor: Universitair Medisch Centrum Utrecht
Source(s) of monetary or material Support: Ministerie van OC&W

Intervention

Keyword: Posttraumatic Stress Disorder, PTSD, Rape, Sexual assault

Outcome measures

Primary outcome

(1) What is the prevalence of PTSD in raped adolescents after maximum of 18 months of follow-up?

Based on earlier findings in this population it is hypothesized that PTSD is a common consequence after adolescent rape, with a prevalence of 37-53%. We hypothesise that the prevalence in this study population will be lower, because of the multidisiciplinary approach in the acute phase (< 72 hours after rape) and during follow-up. The current treatment in the first month after rape consists of *watchful waiting*, implying that a healthcare professional follows the victim*s recovery process and provides advices about daily routine and seeking social support. Subsequently, if necessary, trauma-focused therapy (EMDR and/ or CBT) during follow-up.

After completing the study, we can discuss if the current approach is sufficient to diminish PTSD symptomology at follow-up, compared to the overall prevalence of PTSD in raped adolescents.

(2) What individual factors or characteristics of the adolescent patient and the rape event determine indicate whether a raped adolescent develops PTSD or not?

For this part of the study the measurements at baseline will be used (T=0, < one week after rape) and additionally measurements at follow-up.

We hypothesise that prior trauma and specific type or rape (i.e. more sexual acts during one rape) are correlated with a higher prevalence of PTSD; and that trauma focused therapy during follow-up is correlated with a lower prevalence of PTSD compared to the overall prevalence of PTSD of 37-53% in raped adolescents.

This pilot study explores characteristics of rape and victim as potential predictors to contribute in future research. This knowledge is relevant to consider direct treatment after exposure to rape and to prevent long term consequences of PTSD, based on the individual patient characteristics.
When PTSD is diagnosed during this study, patients will be offered trauma focused therapy.

Secondary outcome

N.v.t.

Study description

Background summary

Post-traumatic stress disorder (PTSD) is highly prevalent in adolescents who have experienced rape, with prevalence rates ranging from 37-53%. Subsequently, it is found that PTSD is an individual factor associated with inter alia depression, anxiety disorder and sexual revictimization, up to four times the risk of experiencing a new rape than individuals without PTSD. Studies that investigate predictors of PTSD after rape in adolescents are lacking. These predictors may help in defining who is at risk for PTSD development and, subsequently, who should be offered immediate adequate post-treatment. There is existing evidence for the effectiveness of Cognitive Behavioural Therapy (CBT) and Eye Movement Desensitisation and Reprocessing (EMDR) to treat PTSD.

Study objective

The main objective of this pilot study is twofold:
1) To investigate whether and to what extent raped adolescents experience symptoms of posttraumatic stress disorder at maximum 18 months of follow-up, measured by standardised questionnaires and semi-structured clinical interviews. This prevalence will be compared to the overall prevalence of rape-related PTSD of 37 - 53% from prior studies .
2) To explore what victim characteristics (prior trauma) and rape characteristics (multiple acts) will predict the onset of PTSD.
This knowledge is relevant to identify risk factors of PTSD in minors and thereby develop an adequate treatment directly after exposure to rape and to prevent long term consequences of PTSD. We hypothesise that prior trauma and specific type or rape (i.e. more sexual acts during one rape) are correlated to a higher prevalence of PTSD at maximum 18 months follow-up; and that the allocation of trauma-focused therapy is correlated to a lower prevalence of PTSD in raped minors .

Study design

The proposed pilot study will have a retrospective cohort design. This means that the study population was assessed at baseline (T = 0, < one week after rape) with regard to victim and rape characteristics. At time of follow-up (up to a maximum of 18 months), the subjects will be assessed cross-sectionally whether they met the PTSD diagnostic criteria. This study consists of two parts: 1) a clinical semi-structured interview, and 2) a questionnaire study.

Study burden and risks

We try to minimize the impact that the study might have on the participants, by using non-invasive terminology in the information letter and in the questionnaire, such as for instance sexual assault instead of rape. On request, the questionnaires and the semi-structured interview can be completed in the participant*s home environment; they do not have to come to the Centre. The investigator will be able to visit the patients at their homes on request. In case the questionnaire might trigger some unexpected reaction in the participant, the patient and parents are welcome to contact the Psycho trauma Centre for help and treatment will be offered.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age
Adolescents (12-15 years)
Adolescents (16-17 years)

Inclusion criteria

- patients 12 to 18 years
- History of acute rape (< 1 week)
- Rape > 3months ago
- Cognitive level: IQ > 70

Exclusion criteria

- patients < 12 years and = >18 years
- Cognitive level: IQ < 70

Study design

Design

Study type: Observational non invasive

Masking:	Open (masking not used)
Control:	Uncontrolled
Primary purpose:	Prevention

Recruitment

NL

Recruitment status:	Recruitment stopped
Start date (anticipated):	31-07-2013
Enrollment:	25
Type:	Actual

Ethics review

Approved WMO

Date:	09-07-2013
Application type:	First submission
Review commission:	METC Universitair Medisch Centrum Utrecht (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	NL42748.041.13