# Cost-effectiveness of a stepped-care program for depression among primary care patients with type 2 diabetes mellitus and/or coronary heart disease and subthreshold depression.

Published: 05-11-2012 Last updated: 26-04-2024

To evaluate the cost-effectiveness of a nurse-led stepped-care program for depression among primary care patients with type 2 diabetes mellitus and/or coronary heart disease and subtresshold depression in comparison with usual care.

**Ethical review** Approved WMO **Status** Recruitment stopped

Health condition type Mood disorders and disturbances NEC

Study type Interventional

# **Summary**

#### ID

NL-OMON39877

#### Source

ToetsingOnline

#### **Brief title**

Step-Dep

#### Condition

Mood disorders and disturbances NEC

#### **Synonym**

depressive complaints, subthreshold depressive disorder

## Research involving

Human

## **Sponsors and support**

**Primary sponsor:** Vrije Universiteit

Source(s) of monetary or material Support: ZonMw

## Intervention

**Keyword:** Cost- effectivenes, Depression, Primary care, Stepped-care

## **Outcome measures**

## **Primary outcome**

The cumulative incidence of depression after 12 months according to an

independent Mini International Neuropsyciatric Interview (MINI)

Severity of depression symptoms

Quality of life

## **Secondary outcome**

HbA1C

bloodpressure

LDL cholesterol

# **Study description**

## **Background summary**

Co-morbid depressive symptoms constitute a significant health problem among patients with type 2 diabetes mellitus (DM2) and/or coronary heart disease (CHD). Depressive symptoms increase the risk for major depression and are associated with poor compliance to treatment, adverse health outcomes and lower overall quality of life. Prevention of the development of major depression in high risk patients is expected to reduce the burden of depression for individuals and society.

## Study objective

To evaluate the cost-effectiveness of a nurse-led stepped-care program for

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depression among primary care patients with type 2 diabetes mellitus and/or coronary heart disease and subtresshold depression in comparison with usual care.

## Study design

Economic evaluation alongside a cluster randomnized trial.

#### Intervention

The stepped-care program with a central role for patients consists of sequentially watchful waiting, bibliotherapy, problem solving treatment (PST), medication and referral to secondary care/psychiatrist if necessary.

## Study burden and risks

Participating in this study will mean that patients have to fill in web-based questionnaires at baseline and at 3, 6, 9 and 12 months. Patients in the experimental condition will be offered a maximum of four sequential evidence based treatment steps. Patients in the control condition will be offered care as usual. No treatment will be denied to any participants nor will it be postponed. There is no additional medical risk present for any participants in this study. The experimental group will potentially have better treatment options for their depressive symptoms.

# **Contacts**

#### **Public**

Vrije Universiteit

de Boelelaan 1085 Amsterdam 1081 HV NL

#### Scientific

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## **Trial sites**

## **Listed location countries**

**Netherlands** 

# **Eligibility criteria**

## Age

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

## Inclusion criteria

- 18 years and older
- diagnosis of diabetes mellitus type 2 and/or coronary heart disease
- in primary care
- subthreshold depression (scoring 6 points or more on PHQ-9 in combination with the absence of a diagnosis on the Mini International Neuropsychiatric Interviw (MINI)

## **Exclusion criteria**

- bipolar disorder
- cognitive impairment or dementia
- psychotic illnes
- terminal illnes
- currently taking antidepressant medication
- a history of suicide attempts
- insufficient Dutch language skills
- visual impairments or illiteracy
- loss of significant other < previous six months
- pregnancy

# Study design

## **Design**

Study type: Interventional

Intervention model: Other

Allocation: Randomized controlled trial

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Masking: Open (masking not used)

Control: Active

Primary purpose: Health services research

## Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 30-07-2013

Enrollment: 236

Type: Actual

## **Ethics review**

Approved WMO

Date: 05-11-2012

Application type: First submission

Review commission: METC Amsterdam UMC

Approved WMO

Date: 18-03-2013

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 03-04-2013

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 17-05-2013

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 11-11-2013

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 01-04-2014

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 07-05-2014

Application type: Amendment

Review commission: METC Amsterdam UMC

Approved WMO

Date: 19-06-2014

Application type: Amendment

Review commission: METC Amsterdam UMC

# **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 NL39261.029.12