

Aggressive Impulse Management (clinical application)

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Objective: This study will investigate if AIM can be trained among people with chronic anger management processes. According to the AIM model, repeating avoidance responses to threatening stimuli may reduce aggressive impulses within this population...

Ethical review	Approved WMO
Status	Pending
Health condition type	Personality disorders and disturbances in behaviour
Study type	Interventional

Summary

ID

NL-OMON41061

Source

ToetsingOnline

Brief title

Aggressive Impulse Management (clinical application)

Condition

- Personality disorders and disturbances in behaviour

Synonym

anger and aggression management

Research involving

Human

Sponsors and support

Primary sponsor: Vrije Universiteit

Source(s) of monetary or material Support: NSF (National Science Foundation;USA)

Intervention

Keyword: anger, motivation, regulation, training

Outcome measures

Primary outcome

Main study parameters/endpoints:

The effectiveness of training-task towards threatening stimuli will be assessed by using quantitative measurement instruments (diary during and after training period, state anger and aggression measurement after each training-task session), and peer reports of participants* aggression. In addition, participants approach bias towards threatening stimuli will be assessed before and after the training-task period using an Approach Avoidance Task (AAT) and an Implicit Association Task (IAT).

Secondary outcome

not applicable

Study description

Background summary

Rationale:

Understanding the causes of human aggression is among the most urgent issues in modern behavioral science. Aggression takes a tremendous toll on society, by causing widespread agony and suffering, and through the costs of protecting, treating, and compensating victims. It is therefore vital to learn how people may withhold their aggressive impulses.

We propose the Aggressive Impulse Management (AIM) model (Koole, Veenstra, & Bushman, 2013), which suggests that reducing approach motivation may down-regulate aggressive impulses. The interventions suggested by the AIM model require little effort or cognitive skills, and thus these interventions may reduce aggression when traditional cognitive strategies for anger management are ineffective. In the current protocol we propose motivational bias

modification (MBM) training for persons with chronic anger management issues. We hypothesize that regularly repeating avoidance movements towards threatening stimuli will lower aggression among trait-angry people.

Study objective

Objective:

This study will investigate if AIM can be trained among people with chronic anger management processes. According to the AIM model, repeating avoidance responses to threatening stimuli may reduce aggressive impulses within this population.

Study design

Study design:

We will adapt a computerized training study to investigate if trait-angry individuals can gain AIM skills. The experiment will repeat daily training-task sessions over one week. Participants with anger management problems will be assigned randomly to an experimental group (training-task) or one of two control groups (control-training-task and no-training-task). During the training-task sessions, the experimental group will respond to angry faces by pushing a joystick away from themselves (avoidance), and to neutral faces by pulling a joystick towards themselves (approach). In the control-training-task group, movement and stimulus type are not linked (counterbalanced right/left movement toward angry/neutral faces). The control-no-training task group will not take part in any training-task sessions. To assess training-task effects, participants' aggression will be measured using a validated computer task after each training session. In addition, they will keep a diary of their anger and aggression during the training-task period and up to 1 week afterwards. We shall also obtain peer reports of participants' aggression (e.g., from partner or friends).

Intervention

Intervention (if applicable):

The study contains 5 daily training-task sessions over a period of one week. Aggression will be measured after each session, with a validated computer task. In addition, participants will be asked to keep a diary of their anger and aggression during this week, and up to 1 week afterwards.

Study burden and risks

Nature and extent of the burden and risks associated with participation, benefit and group relatedness:

No health risks and only minimal burdens are expected to be associated with participation. Participants could experience keeping a daily diary as a modest

burden. The training-task will only take around 15 minutes a day and the previous studies with similar tasks showed that it is generally not experienced as a burden, but rather fun to do, as it is a computerized task with a joystick. Subjects can withdraw from the study at any time for any reason if they wish to do so without any consequences.

This research is part of a larger project including 10 experiments that systematically test the Aggressive Impulse Model. This present proposed study is the first to investigate how training motivational tendencies toward threatening stimuli can lower anger and aggression in people with psychological problems related to anger regulation, i.e., high trait anger persons. The present study can have important implications for further development of instruments to reduce anger and aggression that might benefit anger management trainings.

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

Criteria for inclusion consisted of a primary diagnoses of anger management problems, which will be assessed with the Spielberger trait anger scale (1988). A cut off score of 50 will be used (on a scale from 1 <= not at all applicable to me, 100 <= extremely applicable to me). In order to be eligible to participate in this study, a subject must also be fluent in Dutch.

Exclusion criteria

No exclusion criteria will be used. As previous research has shown, many people with personality disorders suffer from anger related problems, and some authors have suggested that anger can even be seen as an independent diagnostic entity (DiGiuseppe, et al., 2011). For this reason, we will not exclude participants based on their personality disorder/DSM diagnosis. However, to control for variations in psychological and psychopathological symptoms, we will measure participants* level of depression and/or anxiety symptoms with the Inventory of Depressive Symptomatology * Self Report (IDS-SR, Rush, Giles, Schlessner, Fulton, Weissenburger, & Burns, 1986; Rush, Guillion, Basco, Jarrett, & Trivedi, 1996; Rush, Carmody, & Reimnitz, 2000), and the Beck Anxiety Inventory (BAI, Beck, Epstein, Brown, & Steer, 1988; Beck, & Steer, 1990) beforehand. In addition, we will be able to take into account participants* DSM diagnosis as they have been at the intake at NPI.

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Double blinded (masking used)
Control:	Placebo
Primary purpose:	Other

Recruitment

NL	
Recruitment status:	Pending
Start date (anticipated):	01-05-2015

Enrollment:	105
Type:	Anticipated

Ethics review

Approved WMO	
Date:	26-06-2014
Application type:	First submission
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	NL49420.029.14