Toxicological screening with drug of abuse and alcohol test in victims older than 16 years of sexual violence in the Center for Sexual Violence in Gelderland South and Central.

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By means of this study we want to determine how many victims of sexual violence, who seek help within 72 hours at the CSG Gelderland Zuid-Midden (CSG-GZM), have alcohol and/or drugs in their urine, voluntarily or involuntarily. To make it clear how...

Ethical review Approved WMO

Status Pending

Health condition type Other condition

Study type Observational invasive

Summary

ID

NL-OMON53318

Source

ToetsingOnline

Brief title

CSG toxicological screening

Condition

- Other condition
- Exposures, chemical injuries and poisoning

Synonym

drugging and sexual violence

Health condition

intoxicaties en seksueelgeweld

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Research involving

Human

Sponsors and support

Primary sponsor: Radboud Universitair Medisch Centrum

Source(s) of monetary or material Support: Door het labaratorium in het Radboudumc

Intervention

Keyword: Alcohol test, Centrum for sexual voilence, Drug of abuse test, Toxicological screening

Outcome measures

Primary outcome

By means of this study, we want to determine how many victims of sexual violence, who seek help from CSG Gelderland Zuid-Midden (CSG-GZM) within 72 hours, have alcohol and/or drugs in their urine.

Secondary outcome

How many victims indicate that it is a proactive rape/assault or an opportunistic rape/assault, respectively?

In the above cases, which drugs are most commonly used in proactive and opportunistic rape, respectively?

In how many of these cases does rape under the influence of alcohol occur in combination with another drug?

How many of the victims indicate that they regularly use benzodiazepines at

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Study description

Background summary

Sexual violence occurs when someone is forced to perform sexual acts and/or has experience with manual, oral, vaginal or anal sex (1). In the Netherlands, 22% of all women and 6% of all men experience sexual violence during their lives (2). At the Center for Sexual Violence Gelderland-Zuid en -Midden (CSG-GZM), 11%-24% of the victims who had sought help suspected that the rape had taken place under the influence (ref 1,2,3). Anderson et al. show in a systematic review that there is a higher risk of sexual violence if there is alcohol in combination with the intake of other drugs (4) In the Netherlands, drug testing is not standard practice during acute care in a CSG.

A distinction is made between proactive and opportunistic rape while intoxicated. A rape in which the victim used drugs/alcohol without knowledge or under duress is called a proactive rape under the influence. An opportunistic rape under the influence is spoken of if the victim has voluntarily used alcohol or drugs (3,5,6). The media mainly warns against proactive rape. It is known that under the influence of narcotics boundaries fade. The experience of aid workers shows that many victims doubt the credibility of their case if narcotics were involved. As a result, victims are more likely to remain silent, not to tell friends or family, and not to report it to the police (7). It is conceivable that this doubt only increases if there is an opportunistic rape and that the victim blames herself. Because we do not routinely test for substance use in the Netherlands when patients request help from a CSG, no exact figures are known about sexual violence in combination with the voluntary or involuntary intake of drugs. In the experience of care providers, insight into this is important for coping with the trauma. If it turns out that drug intake (voluntarily or involuntarily) occurs more often than we think, this information can also be used for prevention. Young people can be warned about the danger of excessive alcohol use, in combination with drug use, but also of covert drugging

Study objective

By means of this study we want to determine how many victims of sexual violence, who seek help within 72 hours at the CSG Gelderland Zuid-Midden (CSG-GZM), have alcohol and/or drugs in their urine, voluntarily or involuntarily. To make it clear how big the problem is. We want to use the data for prevention.

Study design

prospective cohort study

Study burden and risks

Estimated risk load: low

Patients will be given a short questionnaire, must submit urine and 1 venipuncture will be performed. It is true, however, that venipuncture is already performed as standard for most patients who present for CSG, so no additional procedure will be performed for many patients.

Contacts

Public

Radboud Universitair Medisch Centrum

Geert Grooteplein Zuid 10 Nijmegen 6525 GA NL

Scientific

Radboud Universitair Medisch Centrum

Geert Grooteplein Zuid 10 Nijmegen 6525 GA NL

Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adolescents (16-17 years) Adults (18-64 years) Elderly (65 years and older)

Inclusion criteria

All patients aged 16 and older who report to the CSG-geldZM for help from 01-02-23 to 31-01-2023 will be asked for permission to participate in the study. Given the vulnerability of this group of patients, informed consent will be obtained after proper explanation of the study.

- Patients presenting < 72 hours after the event are included

Exclusion criteria

If reported > 72 hours, screening is of no use, as most substances will then no longer be detectable

- patients under 16 years of age
- with no permission

Study design

Design

Study type: Observational invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Basic science

Recruitment

NL

Recruitment status: Pending

Start date (anticipated): 01-05-2023

Enrollment: 80

Type: Anticipated

Ethics review

Approved WMO

Date: 22-05-2023

Application type: First submission

Review commission:

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 NL83712.091.23