Autobiographical memory in refugees with PTSD: a multiple baseline study on the effects of the Memory Specificity Training (MEST) and a sleep protocol (SLEE-P) as a preparation for Narrative Exposure Therapy (NET)

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Ethical review	Approved WMO
Status	Recruiting
Health condition type	Anxiety disorders and symptoms
Study type	Interventional

Summary

ID

NL-OMON53953

Source
ToetsingOnline

Brief title
Overgeneral memory and sleep problems in refugees with PTSD

Condition

- Anxiety disorders and symptoms

Synonym
anxiety, PTSD

Research involving

Human

Sponsors and support

Primary sponsor: Stichting Centrum 45 (Oegstgeest)
Source(s) of monetary or material Support: Subsidie vanuit Stichting Wetenschapsbevordering Klinisch psycholoog en Klinisch neuropsycholoog (WKK)

Intervention

Keyword: autobiographical memory, PTSD, refugees, sleep

Outcome measures

Primary outcome

Primary outcome measures are autobiographical memory specificity, sleep quality, and posttraumatic stress symptoms as measures by the weekly measurements.

Secondary outcome

Secondary outcome measures are weekly measures of sleep quality, nightmares and dreams, memory problems, autobiographical memory specificity, and the interview about sleep and memory problems.

Study description

Background summary

The effectiveness of Narrative Exposure Therapy (NET) in treating posttraumatic stress disorder (PTSD) in refugees may be limited by a reduced ability to recall specific episodic details from autobiographical memory. Sleep disruption has been associated with reduced specificity of autobiographical recollections and when targeted may accelerate recovery from PTSD. It is hypothesized that receiving the Memory Specificity Training (MEST) or a cognitive behavioural sleep training (SLEE-P) as preparatory interventions may alleviate PTSD and anxiety symptoms and improve autobiographical memory specificity (in the context of MEST) or sleep quality (in the context of SLEE-P). In addition, following the MEST or SLEE-P is expected to potentially contribute to the

treatment effectiveness of subsequent NET.

Study objective

The primary objectives of the current study are 1) to investigate the effect of the MEST and SLEE-P on targeting overgeneral autobiographical memory, sleep disturbance, and posttraumatic stress symptoms in refugees with PTSD, and 2) to explore whether these effects may contribute to treatment outcomes of subsequent NET.
The secondary objectives are 1) to describe changes in autobiographical memory specificity, sleep quality, and PTSD symptoms over the course of treatment, 2) to describe changes in dream character and posttraumatic nightmares during the course of treatment, and 3) to qualitatively describe autobiographical memory, sleep quality, and (posttraumatic) dream characters in refugees with PTSD.

Study design

The current study is a multiple baseline study with double randomization to a) baseline period (3, 4 or 5 weeks) and b) one of three conditions (MEST + NET; SLEE-P + NET; waiting list + NET). Participants will complete the Autobiographical Memory Test (AMT), the Pittsburgh Sleep Quality Index (PSQI) including its addendum for PTSD, and the PTSD checklist for DSM-5 (PCL-5) at baseline, pre-MEST/SLEE-P, post-MEST/SLEE-P (pre-NET for the waiting list group) and post-NET. Weekly measures of PTSD symptoms, sleep quality, posttraumatic nightmares and dreams, autobiographical memory specificity and memory problems will be administered during the baseline, treatment, and follow-up phases. The baseline measurement additionally consists of a checklist about traumatic experiences (LEC-5) and an interview on memory and sleep.

Intervention

Participants in the MEST condition will receive six one-hour therapist-guided MEST sessions that focus on practicing retrieving specific autobiographical memories as a response to cue words. Participants in the SLEE-P condition will receive six one-hour therapist-guided training sessions that focus on psychoeducation about sleep (problems), challenging distorted sleep-related cognitions, and relaxation exercises. Participants in the waiting list control condition will not receive an intervention before NET.

Study burden and risks

The burden on the participants consists of the additional measurements that have been added for research purposes. Some measurements are part of regular care. For participants in the study, questionnaires that are administered as part of the Routine Outcome Monitoring (ROM) in regular care will be minimized to limit the number of measurements. The measurements that are added in the

context of the study are comparable in terms of burden to the measurements as part of regular trauma care.
Participants within the MEST and SLEE-P group receive a preparatory intervention (MEST or SLEE-P) consisting of 6 weekly individual sessions of 1 hour. These interventions are preparatory and non-intensive in nature and are expected to have positive effects on PTSD and related complaints.
For all participants, regular care (trauma therapy) will not change as a result of participation in this study.
There are no additional risks associated with participation in this study beyond the risks associated with regular trauma care for which participants are already registered.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age
Adults (18-64 years)

Inclusion criteria

The main inclusion criteria are: a) 18 years or older, b) having a refugee background, c) meeting DSM-5 diagnostic criteria for PTSD as established by a psychiatrist or clinical psychologist at intake, d) currently on the waiting list for Narrative Exposure Therapy (NET) in the outpatient clinic of ARQ Centrum*45, and e) willingness to participate in the research (being able to understand/willing to sign informed consent).

Exclusion criteria

Main exclusion criteria include: a) IQ estimated below 80, b) acute crisis (acute suicidality, acute severe psychosis), c) persistent substance dependence, d) change of sleep medication in the month prior to the start of the study, and e) having previously received the MEST or a cognitive behavioral sleep intervention.

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Open (masking not used)

Primary purpose: Diagnostic

Recruitment

NL

Recruitment status:	Recruiting
Start date (anticipated):	20-09-2023
Enrollment:	27
Type:	Actual

Ethics review

Approved WMO Date:	09-03-2023
Application type:	First submission
Review commission:	METC NedMec

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	NL82876.041.22