EMDR and exhibitionism: a randomized controlled trial on reducing deviant sexual arousal

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A) To test if the EMDR addiction protocol by Hornsveld and Markus (2014), as an intervention, will lead to a reduction of deviant sexual arousal in exhibitionists, within four sessionsB) To test if the treatment effect is stableC) To test if the...

Ethical review	Approved WMO
Status	Recruiting
Health condition type	Sexual dysfunctions, disturbances and gender identity disorders
Study type	Interventional

Summary

ID

NL-OMON55525

Source
ToetsingOnline

Brief title
EMDR and exhibitionism

Condition

- Sexual dysfunctions, disturbances and gender identity disorders

Synonym
Flashing, Indecent exposure

Research involving
Human

Sponsors and support

Primary sponsor: De Forensische Zorgspecialisten (DFZ)
Source(s) of monetary or material Support: De Forensische Zorgspecialisten

Intervention

Keyword: Deviant arousal, EMDR, Exhibitionism, Sex offender

Outcome measures

Primary outcome

The primary study parameter is the physiological arousal which will be measured by the E4 wristband from Empatica. This is an instrument that, while worn on the wrist, records body temperature, continuous heart rate and skin conductance. Measurements will be carried out before the first treatment session, after the last treatment session and after a follow-up period of eight weeks. During the measurement, participants listen to an audio recording of an individualized script that is based on their most exciting memory of exposing their genitals. The various physiological data will be combined to one overall measure for physiological arousal.

The healty controle group will be measured only once. This measurement will the same as the measurement carried out before the first treatment from the experimental group.

Secondary outcome

In cooperation with police and judicial authorities, after a follow-up period of one and five years, it will be attempted to query information about new police contacts for all participants in the patient population. This concerns new arrest with regard to sexually offensive behaviour and in particular indecent exposure.

For participants in the pilot study, no judicial information will be requested.

Study description

Background summary

Within the forensic mental health services exists a demand for the development of focused interventions and/or guidelines for the treatment of specific criminogenic factors. For sex offenders, deviant sexual arousal is such a criminogenic factor. This study will examine whether the intervention Eye Movement Desensitization and Reprocessing (EMDR) is effective in reducing deviant sexual arousal in men who expose their genitals. The hypothesis is that EMDR treatment of exhibitionists, according to the addiction protocol by Hornsveld and Markus (2014), within four sessions, will lead to a significant decrease of physiological arousal, activated by a deviant sexual script. It is expected that this will reduce the risk of recidivism.
Looking at the first analysis from the current research it seems that the healty controle persons who tested the procedure and the equipment, react with higher arousal patterns than the exhibitionists that took part in the research. To make more evidence-based statements a healthy controle group is needed.

Study objective

A) To test if the EMDR addiction protocol by Hornsveld and Markus (2014), as an intervention, will lead to a reduction of deviant sexual arousal in exhibitionists, within four sessions
B) To test if the treatment effect is stable
C) To test if the treatment effect decreases the recidivism risk
D) To test if the measured physiological arousal of the research group will be lower than those of a matched healthy controle group

Based on these objectives, the following hypotheses are formulated:
1) It is expected that EMDR treatment of exhibitionists, according to the addiction protocol by Hornsveld and Markus (2014), will lead to a decrease of physiological arousal, activated by a deviant sexual script, within four sessions.
2) It is expected that this decrease of physiological arousal will be larger in comparison with a control group, which receives four individual sessions of cognitive behavioural therapy, targeting deviant sexual arousal.
3) It is expected that the differences between the two groups will persist at a follow-up measurement eight weeks later.
4) In the long run (1-5 years), it is expected that the group of exhibitionists who were treated with EMDR, will have encountered less police contacts due to indecent exposure, than the control group.
5) It is expected that exibitionists show less general arousal in their reactions to their exhibitionistic fantasies than the men from the healthy

controle group.

Study design

It concerns a randomized controlled trial (RCT). Clients will be approached for participation after the intake procedure. After informed consent, they will be allocated at random to the experimental or the control condition. The experimental condition consists of four EMDR sessions targeting the attraction and deviant sexual arousal that accompanies the exposure of genitals. The control condition consists of four cognitive behavioural therapy sessions targeting the impulse-control regarding deviant sexual arousal and the urge for indecent exposure. Both treatment conditions include a fifth concluding session. For the pilot study participants will be approached who are already in treatment in our institution for a longer period. The fifth, concluding session will be combined with the final measurement session.
The healthy control group will be recruited through the website 'proefbunny'. Researchers will also hand out flyers at some large events. If candidates show interest, they will receive participant information. After informed consent, they will take part in one measurement session.

Intervention

One group receives four EMDR sessions. Another group receives four sessions of cognitive behavioural therapy. Both treatments are specifically directed towards the deviant sexual arousal. Both treatment conditions include a fifth concluding session.
For the pilot study, all participants will receive the EMDR treatment. The fifth, concluding session, will be combined with the last measurement session.

Study burden and risks

There are no safety risks associated with the treatments. Both the EMDR treatment and the cognitive behavioural therapy, can elicit feelings of shame through directly handling private and sensitive topics (sexual arousal). Clinical practice has shown that such feelings are well tolerated and can also be beneficial in the processing of the problems. Further, it is possible that participants will need a moment to accustom to wearing the special watch for the measurement of arousal.
The burden implies four treatment sessions of one hour, a concluding session of 45 minutes, and four sessions of 45 minutes for conducting the measurements. For the pilot study, the concluding session will be combined with the last measurement session. Also, there will be no follow-up measurement. The burden for participants in the pilot study will therefore be two sessions of 45 minutes less. The burden for the healty controls is one session of 45 minutes. Participants are at any time free to prematurely end their participation,

without this having any negative consequences for the rest of their treatment.

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

- Age between18 and 70 years
- Male gender
- Participants are able to acknowledge that there has been a (partly) positive experience while exposing

Exclusion criteria

- Presence of a severe psychiatric mental state like a psychotic disorder, depressive disorder, bipolar disorder or organic mental disorder
- Insufficient Dutch language skills
- Age under 18 or above 70 years

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Open (masking not used)
Control:	Active
Primary purpose:	Treatment

Recruitment

NL

Recruitment status:	Recruiting
Start date (anticipated):	10-08-2015
Enrollment:	99
Type:	Actual

Ethics review

Approved WMO Date:	16-07-2015
Application type:	First submission
Review commission:	METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)
Approved WMO Date:	24-11-2016
Application type:	Amendment
Review commission:	METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)

Approved WMO Date:	25-02-2021
Application type:	Amendment
Review commission:	METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)

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	NL52658.078.15