

Internet-Delivered Cognitive Behavioral Therapy for Posttraumatic Stress Disorder in International Humanitarian Aid Workers: Study Protocol

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1) The intervention (TELLUS) is credible to international humanitarian aid workers, 2) the intervention significantly reduces symptoms of PTSD from pre- to post-test, and 3) the intervention significantly reduces symptoms of comorbid depression,...

Ethische beoordeling	Positief advies
Status	Werving nog niet gestart
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON20069

Bron

Nationaal Trial Register

Aandoening

Post-traumatic stress disorder, PTSD, Cognitive Behavioral Therapy, CBT, Internet-delivered, iCBT, humanitarian aid workers, Cognitieve gedragstherapie, CGT, Posttraumatische-stressstoornis, PTSS, Hulpverleners.

Ondersteuning

Primaire sponsor: Department of Clinical Psychology, VU University Amsterdam

Overige ondersteuning: This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

1) Credibility/ expectancy, 2) Significant reductions in symptoms of PTSD from pre- to post-test.

Toelichting onderzoek

Achtergrond van het onderzoek

Introduction: Humanitarian aid workers are likely to be exposed or witness complex emergencies. Posttraumatic stress disorder (PTSD) is one of the most widespread and most commonly studied mental health problems after exposure to adversities and trauma. However, face-to-face treatment has limited utilization in the resource-constrained settings where humanitarian aid workers often operate. Internet-delivered cognitive behavioral therapy (iCBT) is a treatment option with the potential to improve the access to evidence-based care for humanitarian aid workers. Until now, only a few studies have evaluated iCBT in the treatment of PTSD. No studies have yet explored the feasibility of iCBT for humanitarian aid workers with PTSD. The aim of this study is to determine completion rates, self-reported treatment credibility/expectancy, and decrease in symptoms (PTSD, anxiety, depression, and functional disability) of the TELLUS program in humanitarian aid workers with PTSD.

Methods: A pilot feasibility study will be conducted with 20 humanitarian aid workers with a full or subclinical PTSD diagnosis according to DSM-IV criteria. The intervention used is TELLUS, which is a therapist-assisted Internet-delivered treatment program based on trauma-focused CBT components for individuals with PTSD. It contains eight text-based modules, where each module is expected to be completed within one week.

Discussion: This study may set the ground for a large-scale randomized control trial that would test the effectiveness and cost-effectiveness of the program. The study may contribute to the better understanding of PTSD treatment and increase the availability of evidence-based treatments in resource-constrained settings.

Doel van het onderzoek

1) The intervention (TELLUS) is credible to international humanitarian aid workers, 2) the intervention significantly reduces symptoms of PTSD from pre- to post-test, and 3) the intervention significantly reduces symptoms of comorbid depression, anxiety, suicidality, and functional disability from pre- to post-test.

Onderzoeksopzet

The treatment is expected to last eight weeks and assessments are done: 1) before beginning of treatment (pre-treatment), 2) after four modules of the treatment (mid-treatment), 3) after completion of all eight modules of the treatment (post-treatment).

Onderzoeksproduct en/of interventie

TELLUS is an Internet-delivered program based on trauma-focused CBT components for PTSD (Ivarsson et al., 2014). The treatment program contains eight text-based modules, where each module is expected to be completed within one week. The modules have homework assignments related to their content, which are communicated online with a supervised psychologist on a weekly basis.

Contactpersonen

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen

(Inclusiecriteria)

1) currently a staff member of an international humanitarian organization, 2) a full diagnosis of PTSD according to DSM-IV (APA, 1994), or subclinical PTSD with one intrusion, one avoidance and one hyperarousal symptom according to DSM-IV (APA, 1994), as established with the Mini International Neuropsychiatric Interview (MINI; Sheehan et al., 1998), 3) fluency in the English language, 4) access to the Internet and telephone/ Skype, 5) being on a current stable dose of psychiatric medication or medication-free.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

1) organic or psychotic disorders, substance dependence or imminent suicide risk as established with the MINI, 2) a diagnosis of PTSD as a result of childhood trauma, 3) receiving psychological treatment at the time of inclusion, 4) being under severe current threat.

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	N.v.t. / één studie arm
Blinding:	Open / niet geblindeerd
Controle:	N.v.t. / onbekend

Deelname

Nederland	
Status:	Werving nog niet gestart
(Verwachte) startdatum:	01-01-2014
Aantal proefpersonen:	20
Type:	Verwachte startdatum

Ethische beoordeling

Positief advies

Datum: 10-04-2017
Soort: Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

ID: 44333
Bron: ToetsingOnline
Titel:

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL6333
NTR-old	NTR6525
CCMO	NL49966.029.14
OMON	NL-OMON44333

Resultaten