Effectiveness of a Minimal Intervention Strategy for patients with common mental disorders on sick leave: a pragmatic randomized controlled trial in General Practice.

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The objective of this study is to assess the effectiveness of the minimal intervention package (MISS) for distressed patients in general practice.

Ethische beoordeling	Positief advies
Status	Werving gestopt
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON21078

Bron
NTR

Verkorte titel
MISS

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Duration of occupational disability.

Toelichting onderzoek

Achtergrond van het onderzoek

Stress-related mental disorders with sick leave are often presented in general practice. Yet, general practitioners (GPs) experience two major problems managing these patients. First, GPs tend to overlook depressive and anxious reactions in distressed patients, which results in inadequate treatment. Second, patients with stress-related mental disorders, who are on sick leave, are at risk for long-term absence from work and ultimately loss of employment, due to their tendency to stay passive and to avoid difficulties. Dutch sickness absence statistics have shown that 1 in every 5 employees who are sick listed due to stress-related mental disorders, stay on sick leave for a whole year and apply for disability benefit or loose their jobs. GPs tend to go along with the patients' desire to be left alone, increasing - unintentionally - the risk for long-term absence from work. In order to reduce this risk, we developed a minimal intervention for stress-related mental disorders with sick leave in general practice. In the course of 3 consultations, the GP detects depressive and anxious reactions, and initiates specific treatments for these problems. Furthermore, the GP provides education and motivates the patient to actively deal with his/her difficulties. Moreover, the patient is advised to contact his/her occupational physician. Finally, the GP monitors the clinical condition in the first 4 weeks, and when there is not any improvement, the patient is referred to professional mental health care. The aim of this study is to investigate the effects of this approach in general practice. Half of the GPs received a training to deliver the minimal intervention outlined above, while the other half of the GPs deliver usual care.

Forty-six GPs participate in the study. The inclusion of 433 distressed patients on sick leave has been completed in January 2005. Between September 2003 and January 2005 a total of 22.740 patients (aged 20-60 years) who had visited the GP, have been screened for distress and sick leave. This way, 286 women and 147 men who had distress with sick leave were included. The state of affairs at October 1 2005 is as follows: A total of 299 respondents have completed the final telephone interview after 1 year follow-up. Of these patients 256 also completed the written questionnaire. We expect to end up with 320 complete telephone interviews and 280 written questionnaires in January 2006.

Doel van het onderzoek

The objective of this study is to assess the effectiveness of the minimal intervention package (MISS) for distressed patients in general practice.

Onderzoeksopzet

N/A

Onderzoeksproduct en/of interventie

This study is a pragmatic randomized controlled trial in general practice. Forty GPs will be

randomized to the intervention group or the usual care group. The GPs in the intervention group will receive training in the implementation of the MISS intervention. This intervention package has been developed to assist the GPs in dealing with distressed patients. Within the limits of three 10-minute consultations, the GP should be able to:

1. Detect significant depression and anxiety, and to deal with it specifically;

2. Educate the patient about distress and the best ways to cope with the situation;

3. Advise the patient to see an occupational physician;

4. Evaluate any progress four weeks later, and refer the patient to a psychological professional if no progress has been made.

Contactpersonen

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen

(Inclusiecriteria)

Patients (20-60 years old) who visited their GP, having distress complaints, paid work and sick leave no longer than three months.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

Severe psychiatric disorders (mania or psychosis), patients who were terminally ill or who couldn't speak Dutch properly.

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd
Blindering:	Open / niet geblindeerd
Controle:	Geneesmiddel

Deelname

Nederland

Status:	Werving gestopt
(Verwachte) startdatum:	01-09-2003
Aantal proefpersonen:	415
Type:	Werkelijke startdatum

Ethische beoordeling

Positief advies

Datum:	12-09-2005
Soort:	Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

Geen registraties gevonden.

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL290
NTR-old	NTR328
Ander register	: 4200.0003
ISRCTN	ISRCTN43779641

Resultaten

Samenvatting resultaten
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