EMDR versus Cognitive Behavioral Writing Therapy (CBWT): A RCT.

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Treatment of posttraumatic symptoms with EMDR as well as with CBWT will lead to symptom reduction in the short and long term. We hypothesize that EMDR will lead to faster improvements in PTSD symptoms and that the effects in the end will be equal.

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

Samenvatting

ID

NL-OMON21131

Bron
NTR

Verkorte titel
EMDR versus CBWT

Aandoening

Posttraumatic stress disorder (PTSD), post traumatic stress symptoms

Ondersteuning

Primaire sponsor: Psychotrauma Centre for Children and Youth, MHI Rivierduinen
Sandifortdreef 19
2301 CE Leiden
Tel: 071-8908400
Fax: 071-8908401
Overige ondersteuning: MHI Rivierduinen

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Self-reported and parent-reported PTSD symptoms (SVLK and the ADIS/C).

Toelichting onderzoek

Achtergrond van het onderzoek

The main objectives of the present study are: assessing the efficacy and efficiency of EMDR and TBWT in children aged 8-18 years with posttraumatic stress reactions following single-incident trauma.

Doel van het onderzoek

Treatment of posttraumatic symptoms with EMDR as well as with CBWT will lead to symptom reduction in the short and long term. We hypothesize that EMDR will lead to faster improvements in PTSD symptoms and that the effects in the end will be equal.

Onderzoeksopzet

Assessment take place at four time points:

1. Pretreatment;

2. Post treatment;

3. Follow-up three months after treatment;

4. Follow-up 12 months after treatment.

Onderzoeksproduct en/of interventie

Eye Movement Desensitisation and Reprocessing (EMDR) and Cognitive Behavioral Writing Therapy (CBWT). A Waiting List Group is included.

EMDR is a treatment for traumatic memories and their sequelae requiring the client to attend a distracting (or “dual attention”) stimulus typically the therapist’s fingers moving back and forth in front of client’s face while concentrating on the trauma memory (Shapiro, 2001). Briefly, EMDR treatment consists of (1) Taking history and planning treatment. (2)

Explanation of and preparation for EMDR. (3) Preparation of the target memory. (4) Desensitization of the memory. (5) Guiding the client to embrace a relevant positive belief regarding the event. (6) Identification and processing of any residual disturbing body sensations. (7) Closure of the session. (8) Re-evaluation.

For this study, a maximum number of six session is permitted.

CBWT is a trauma treatment (Van der Oord et al., 2009) where the child writes a report of the traumatic event(s) on the computer in the therapy room. The therapist helps the child with writing down a detailed account of the child's thoughts, feelings and behaviours during the traumatic event. The most important elements of CBWT are psycho-education, exposure, cognitive restructuring, promoting adequate coping and social sharing.

For this study, a maximum number of six sessions is permitted.

Contactpersonen

Publiek

Department of Child and Adolescent Psychiatry, Amsterdam University Medical Centre, location AMC. Meibergdreef 5, 1105 AZ Amsterdam
Carlijn Roos, de
Leiden 2301 CE
The Netherlands
+31 (0)20-8901000

Wetenschappelijk

Department of Child and Adolescent Psychiatry, Amsterdam University Medical Centre, location AMC. Meibergdreef 5, 1105 AZ Amsterdam
Carlijn Roos, de
Leiden 2301 CE
The Netherlands
+31 (0)20-8901000

Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

1. Age between 8 and 18 years;

2. Having experienced a single traumatic event;

3. Presence of 5 posttraumatic stress symptoms after 1 month;

4. Sufficient knowledge of the Dutch language.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

1. Acute psychiatric problems (suicidality, psychosis);

2. IQ lower than 80.

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd
Blindering:	Enkelblind
Controle:	Geneesmiddel

Deelname

Nederland

Status:	Werving gestopt
(Verwachte) startdatum:	01-10-2010
Aantal proefpersonen:	110
Type:	Werkelijke startdatum

Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)

Wordt de data na het onderzoek gedeeld: Nog niet bepaald

Ethische beoordeling

Positief advies

Datum:	22-02-2013
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	NL3699
NTR-old	NTR3870
Ander register	Commissie Ethiek, Afdeling Psychologie, UvA : 2009-KP-734
ISRCTN	ISRCTN wordt niet meer aangevraagd.

Resultaten

Samenvatting resultaten
De Roos, C., van der Oord, S., Zijlstra, B. Lucassen, S., Perrin, S. Emmelkamp, P. de Jongh, A. (2017).Comparison of eye movement desensitization and reprocessing therapy, cognitive behavioral writing therapy, and waitlist in pediatric posttraumatic stress disorder following single-incident trauma: a multicenter randomized clinical trial. Journal of Child Psychology and Psychiatry58:11 (2017), pp 1219-1228.