

The effectiveness of internetbased therapy on female sexual dysfunctioning.

Gepubliceerd: 30-06-2009 Laatste bijgewerkt: 13-12-2022

1. The effect of cognitive behavioral therapy in internettherapy and face-to-face therapy is larger than without therapy on women with a sexual dysfunction; 2. The impact of Internet therapy is just as large as the impact of treatment-as-usual (...)

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

Samenvatting

ID

NL-OMON21632

Bron

NTR

Verkorte titel

The effectiveness of internetbased therapy on female sexual dysfunctioning

Aanpak

effect
internetbased
sex
therapy

effect
internettherapie
seks
vrouwen

Ondersteuning

Primaire sponsor: www.annazorg.nl

Overige ondersteuning: www.annazorg.nl

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Female sexual functioning (FSFI) and sexually related personal distress (FSDS) in women. Is there a better sexual function and less distress after treatment of the female subjects?

Toelichting onderzoek

Achtergrond van het onderzoek

After two year practicing internet-based, sexual, cognitive behavioral therapy it is time to lay the theoretical foundations for an effective internettherapy. There are good results of internetbased therapy, but there is no research done on internettherapy for sexual dysfunctioning.

When we put internet sextherapy into practice we see a demand for working at problems via internet. The question is: "Do the effects of treatment last after a follow-up period of six months?"

The advances of internettherapy is that the client chooses their own safe environment and moments of doing exercises and reports. They have more control over their own process in this way in comparison with a regular face-to-face therapy.

Second is that in internettherapy the main means of communication is writing instead of talking.

The main question of this study is:

Is there a difference in effectiveness between internettherapy, regular face-to-face treatment and a control-/waiting listgroup without treatment.

Doel van het onderzoek

1. The effect of cognitive behavioral therapy in internettherapy and face-to-face therapy is larger than without therapy on women with a sexual dysfunction;
2. The impact of Internet therapy is just as large as the impact of treatment-as-usual (face-to-face Cognitive Behavioral Therapy).

Onderzoeksopzet

1. Baseline (0 weeks);
2. Process (10 weeks);
3. End (20 weeks);
4. Follow-up (40 weeks).

Onderzoeksproduct en/of interventie

The test persons become random ate assigned to several groups. The therapy lasts maximum 20 weeks. During the internet- and the face-to-face-treatment, the test person gets a personal coach and de oppurtunity to talk to this intaker or personal coach by telephone. There exists the possibility extra of calling in aid of a doctor/seksuoloog and fysiotherapist, during the treatment.

Internet therapy (GROUP 1):

The ppn. to get a cognitive behaviour therapy for sexual problems in the form of onlinetreatment with personal accompaniment.

The instructions and exercises are structured in a protocol. The personal speculator or coach (psychologist/seksuoloog) becomes supervised and has a weekly intervision. A psychiatrist, relation- and psychotherapist, doctor/seksuoloog and fysiotherapeut are involved in the treatment if necessary. The coach give feedback on the exercises and accompany the pp. by means of internet one time in a week and monthly a telephone evaluation. On average the pp has two exercises in a week and one report of approximately a half hour.

The coach and the pp. to remain involved motivation mails. Both get reported, if the treatment passes through not well. At insufficiently pass through the pp become approached telephonically.

The Internet therapy offers the ppn. their own Internet portal, My Anna, in which they have a library with information on sexuality, sexual problems and relation. They receive housework tasks, which are part of behaviour therapy, for example the cognitive behavioral reports and sensate focus tasks. After the report of the exercise by the ppn., the coach gets the possibility of giving feedback. Feedback reads the pp. in My Anna to continue with a new exercise. The treatment has been built from modules. A module consists of three interventions and a telephone evaluation.

After three modules, respectively aimed at the conscience of the complaint, body perception and relation, the pp goes by to a more intensive form of treatment, in which the emphasis is laid on skills.

Face-to-facetherapie (GROUP 2):

The ppn. to get standard face-to-face state-of-the-art cognitive behaviour therapy (Hengeveld & Brewaey, 2002, Brewaey, 2003). The treatment exists from maximum ten conversations with the same contents, as the Internet therapy.

Waiting list (GROUP 3):

The waiting list period lasts 12 weeks. After each treatment the participants themselves choose for the Internet therapy or face-to-face-therapie.

Contactpersonen

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Heterosexual women with sexual problems, with or without partner, calling for sextherapy on the internet or with a medical referral for sextherapy. The women are at least three months complaining about the sexual dysfunction. It is possible that they already had help for sexual dysfunctioning. Subjects can use a contraceptive pill.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

Contra-indicators are primary psychiatric problems on ax 1 or 2 of the DSM-IV-RT, the cause

of the dysfunction is found in a disease, use of medication, physical defect, pregnancy or severe relationship problems (score > 30 on the relationship satisfaction scale of the MMQ).

Onderzoeksopzet

Opzet

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

Deelname

Nederland	
Status:	Werving nog niet gestart
(Verwachte) startdatum:	01-11-2009
Aantal proefpersonen:	150
Type:	Verwachte startdatum

Ethische beoordeling

Positief advies	
Datum:	30-06-2009
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	NL1779
NTR-old	NTR1889
Ander register	ABR-nummer : 24345
ISRCTN	ISRCTN wordt niet meer aangevraagd.

Resultaten

Samenvatting resultaten

N/A