

Interactions of Aggression, Mentalizing, Metacognition and Empathy in a forensic population of persons with a psychotic disorder

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This study compares persons with a psychotic disorder currently in treatment at a forensic clinic (F-P), with patients with a psychotic disorder currently not in treatment at a forensic clinic (P) and with healthy controls (HC). Confounders such as...

Ethische beoordeling	Niet van toepassing
Status	Werving nog niet gestart
Type aandoening	-
Onderzoekstype	Observationeel onderzoek, zonder invasieve metingen

Samenvatting

ID

NL-OMON21769

Bron

NTR

Verkorte titel

I-AM-ME

Aandoening

Metacognition, Psychosis, Violence, Schizophrenia, Forensics, Empathy, Theory of Mind

Ondersteuning

Primaire sponsor: Rijksuniversiteit Groningen, GGZ Drenthe

Overige ondersteuning: GGZ Drenthe

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Metacognition

Toelichting onderzoek

Achtergrond van het onderzoek

Primary Objective:

This study seeks to examine the differences between healthy controls, patients with a psychotic disorder that have never been in care at a forensic clinic, and patients with a psychotic disorder in care at a forensic clinic on several measures of metacognition. The primary objective is to identify risk factors amongst these variables.

Secondary:

Secondary objective is to use network analysis to determine whether metacognitive deficits and aggressive behaviour 'clusters' in the manner which Bo et al. (2012) propose.

Doel van het onderzoek

This study compares persons with a psychotic disorder currently in treatment at a forensic clinic (F-P), with patients with a psychotic disorder currently not in treatment at a forensic clinic (P) and with healthy controls (HC). Confounders such as current mood state, threat/control-override(TCO), temperament and character, trauma and the existence of a diagnosis of psychopathy will be statistically controlled for.

The study will test four hypotheses:

- 1) (F-P) show a pattern of more affective metacognitive impairments than (HC) and (P). Cognitively oriented aspects of metacognition are expected to be equally impaired in (P) and (F-P) (Abu-Akel & Abushua'leh, 2004; Bogaerts, Polak, Spreen, & Zwets, 2012).
- 2) We expect that in (F-P) deficits in metacognitive "mastery" as measured by the MAS-A are more severe than those found in (P), and correlate significantly with assessments of risk for future violence (Brüne, Schaub, Juckel, & Langdon, 2011; Lysaker, Erickson, Buck, et al., 2011; Lysaker, Erickson, Ringer, et al., 2011).
- 3) We expect that in F-P metacognitive deficits in understanding others and empathy, are

significantly correlated with “Clinical” items of the HKT-30 regarding Empathy, Hostility and Social and Relational skills.

4) Persons with aggression where the primary explanation is positive psychotic will score elevated on measures of Threat/Control-override (TCO). This group will be more prone to impulsive violence as measured by the IPAS, while those with personality-related difficulties (psychopathic traits) will show a tendency toward premeditated violence as measured by the IPAS (Nederlof et al., 2011a; Nederlof, Muris, & Hovens, 2011b).

Based on hypotheses 1 – 4 we expect to be able to gain further insight into the manner in which various elements of metacognition interact with one another and characteristics of violence, using network analysis (Borsboom & Cramer, 2013; Cramer, Waldorp, van der Maas, & Borsboom, 2010)

Onderzoeksopzet

T1: Single measure.

Onderzoeksproduct en/of interventie

None

Contactpersonen

Publiek

Klinische Psychologie GGZ Drenthe / Rijksuniversiteit Groningen
Steven de Jong
Groningen
The Netherlands

Wetenschappelijk

Klinische Psychologie GGZ Drenthe / Rijksuniversiteit Groningen
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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

- Primary diagnosis of schizophrenia or schizoaffective disorder (DSM-IV-TR)
- Age >18
- Ability to give informed consent
- Currently in care at a forensic clinic
- No change in medication in the past 30 days

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

- Co-morbid neurological disorder
- Inability to read / write
- IQ below 70

Onderzoeksopzet

Opzet

Type:	Observationeel onderzoek, zonder invasieve metingen
Onderzoeksmodel:	Parallel
Toewijzing:	Niet-gerandomiseerd
Blinding:	Open / niet geblindeerd
Controle:	N.v.t. / onbekend

Deelname

Nederland	
Status:	Werving nog niet gestart
(Verwachte) startdatum:	01-06-2014
Aantal proefpersonen:	60

Type:

Verwachte startdatum

Ethische beoordeling

Niet van toepassing

Soort:

Niet van toepassing

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	NL4362
NTR-old	NTR4502
Ander register	: -

Resultaten