Treatment of anxiety disorders in children with Autism Spectrum Disorders (ASD).

Gepubliceerd: 25-05-2011 Laatst bijgewerkt: 18-08-2022

The aims of the study are: 1. To compare the effectiveness of Cognitive Behavioral Therapy (CBT) for anxiety disorders between children with ASD and children without ASD; 2. To compare the (cost-) effectiveness of CBT to Treatment As Usual (TAU)...

Ethische beoordeling Positief advies **Status** Werving gestopt

Type aandoening -

Onderzoekstype Interventie onderzoek

Samenvatting

ID

NL-OMON22241

Bron

NTR

Aandoening

ASD refers to conditions that share a core triad of impairments consisting of qualitative impairments in social interaction, verbal and non-verbal communication, and repetitive and stereotyped patterns of interest and behavior (APA, 2001). ASD is estimated to occur in 0.6% of the population (Fombonne, 2005), however, there is considerable heterogeneity of symptom presentation. Furthermore, psychiatric comorbidity is very common among children with ASD (e.g. De Bruin et al., 2007). Of interest to the present study are comorbid anxiety disorders, which are estimated to occur in nearly 40% of the children with ASD (van Steensel, Bögels, & Perrin, 2011). In addition, anxiety disorders are among the most common in typically developing children, with prevalence rates up to 27% (Costello, Egger & Angold, 2005). DSM-IV distinguishes the following anxiety disorders: separation anxiety disorder (SAD), social anxiety disorder, specific phobia, agoraphobia, panic disorder, generalized anxiety disorder (GAD), and post-traumatic stress disorder (PTSD). Treating anxiety disorders with Cognitive Behavioral Therapy (CBT) is highly effective (e.g. Bodden et al., 2008), however, its effectiveness for children with ASD is not yet established.

Ondersteuning

Primaire sponsor: University of Amsterdam

Participants are recruited by several mental health centers across the Netherlands

Overige ondersteuning: ZonMW

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

- 1. Diagnostic status: whether the child still meets criteria for its (primary) anxiety disorder (ADIS);

- 2. Anxiety symptomatology (SCARED);

- 3. Quality of Life (QoL; EQ-5D);

- 4. Costs (measured by a retrospective costs-questionnaire).

Toelichting onderzoek

Achtergrond van het onderzoek

N/A

Doel van het onderzoek

The aims of the study are:

- 1. To compare the effectiveness of Cognitive Behavioral Therapy (CBT) for anxiety disorders between children with ASD and children without ASD;
- 2. To compare the (cost-) effectiveness of CBT to Treatment As Usual (TAU) for anxiety disorders in children with ASD.

No hypotheses are prepared (hypotheses are exploratory).

Onderzoeksopzet

For all participants at least three assessments are conducted: At pre- and post treatment, and three months after treatment (follow up 1). For the participants in the CBT-condition, a

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follow up one year after treatment (follow up 2) and a follow up two years after treatment (follow up 3) are conducted.

Onderzoeksproduct en/of interventie

The study has two arms. The first arm of the study consists of a comparison between children with anxiety disorders, with and without ASD. These children receive the same intervention (CBT). The second arm of the study consists of a comparison between CBT and Treatment As Usual (TAU) for anxiety disorders in children with ASD. For an outline of the interventions, see below.

Cognitive Behavioral Therapy (CBT):

The individual, standardized CBT (Denken + Doen = Durven; Bögels, 2008) consists of 15 sessions within approximately 3 months. There are 12 child sessions and three parent sessions. Its main ingredients are: psycho-education about anxiety, challenging anxious thoughts, exposure with a reward system, behavior experiments, and prevention of relapse. The intervention is delivered by trained therapists, who receive within- and across center training.

Treatment as Usual (TAU):

Interventions that fall under the umbrella of TAU are: psycho-education, parent guidance, school guidance, social skills training, group trainings, family counseling, behavior therapy, individual therapy (not being CBT), and medication.

Contactpersonen

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

- 1. Children, aged 7-18, must have at least one anxiety disorder (all anxiety disorder are included), according to parent and/or child report;
- 2. At least one parent is willing to participate in treatment and research.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

- 1. Acute suicidal behavior;
- 2. Untreated psychotic disorder;
- 3. IQ below 70;
- 4. DSM-IV V-code of current sexual or physical abuse;
- 5. Having had CBT for anxiety disorders in the past year.

Onderzoeksopzet

Opzet

Type: Interventie onderzoek

Onderzoeksmodel: Parallel

Toewijzing: Niet-gerandomiseerd

Blindering: Open / niet geblindeerd

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Controle: Geneesmiddel

Deelname

Nederland

Status: Werving gestopt

(Verwachte) startdatum: 03-02-2006

Aantal proefpersonen: 200

Type: Werkelijke startdatum

Ethische beoordeling

Positief advies

Datum: 25-05-2011

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 NL2776 NTR-old NTR2916

Ander register AZM / ZonMW : P05.1639L/MEC 05-147 / 170881006;

ISRCTN wordt niet meer aangevraagd.

Resultaten

Samenvatting resultaten

N/A