Think different: effectiveness of an online training for children with obsessive-compulsive disorder

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

Samenvatting

ID

NL-OMON22480

Bron
NTR

Verkorte titel
N/A

Aandoening

Pediatric obsessive-compulsive disorder, OCD

Ondersteuning

Primaire sponsor: AMC (Academic Medical Center)
Overige ondersteuning: Fonds NutsOhra
AMC

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

OCD severity, measured with the Children Yale–Brown Obsessive Compulsive Scale (CY-BOCS; Scahill et al., 1997)

Toelichting onderzoek

Achtergrond van het onderzoek

The aim of the present study is to improve treatment for children with OCD by adding an online Cognitive Bias Modification–Interpretation (CBM-I) training to cognitive behavioural therapy (CBT). The CBM-I training is offered as the first step in treatment, followed by CBT. CBM-I is compared with a waitlist condition also followed by CBT. Advantages of CBM-I compared with existing interventions are: the CBM-I training is relatively short (4 weeks), it can start during a natural waitlist that usually exists (before a therapist is available), CBM-I is motivating for the patient, can be completed at home, is cheap and easy to implement.
The first research question is: Does CBM-I result in a decrease of obsessive-compulsive complaints compared to the waitlist condition? The second research question is: Is there a favourable effect of the CBM-I training (compared to the waitlist condition) on subsequent CBT?
If CBM-I leads to a significant improvement in OCD severity and/or if CBM positively affects the effect of CBT, than adding a pre-treatment CBM-I training to CBT may result in more effective treatment for children with OCD, an early start of treatment (no/shorter waitlist period), and a reduction of the costs of treatment.

Doel van het onderzoek

The aim of the present study is to improve treatment for children with OCD by adding an online Cognitive Bias Modification-Interpretation (CBM-I) training as a pre-treatment to cognitive behavioural therapy (CBT). CBM-I is compared with a waitlist condition also followed by CBT.
The first hypothesis is that CBM-I results in a decrease of obsessive-compulsive complaints compared to the waitlist condition.
The second hypothesis is that CBM-I has a favourable effect (compared to the waitlist condition) on subsequent CBT.

Onderzoeksopzet

Assessment T0: pre-CBM / pre-waitlist (week 0)
- OCD severity (CY-BOCS)
- Interpretation bias (OBQ-CV; recognition task)
- Comorbidity (CBCL, YSR, CDI)
- General functioning (CGAS)

Assessment T1: post-CBM / post-waitlist & start CBT (week 4)

- OCD severity (CY-BOCS)

- Interpretation bias (OBQ-CV; recognition task)

- OCD severity (CY-BOCS)

- Interpretation bias (OBQ-CV; recognition task)

- Comorbidity (CBCL, YSR, CDI)

- General functioning (CGAS)

Assessment T2: CBT, 4th session (week 8)
- OCD severity (CY-BOCS)

Assessment T3: CBT, 8th session (week 12)
- OCD severity (CY-BOCS)

Assessment T4: CBT, 12th session (week 16)
- OCD severity (CY-BOCS)

Assessment T5: post-CBT, 16th session (week 20)
- OCD severity (CY-BOCS)
- Comorbidity (CBCL, YSR, CDI)
- General functioning (CGAS)

Onderzoeksproduct en/of interventie

A Cognitive Bias Modification – Interpretation (CBM-I) training (12 sessions in 4 weeks) is compared with a waitlist control condition (4 weeks without treatment). The CBM-I procedure (Mathews & Mackintosh, 2000) is adapted for children with OCD.
After the CBM-I training / waitlist period, all participants receive cognitive behavioural treatment (16 weekly sessions, protocol ‘Bedwing je dwang’/‘Control your OCD’, De Haan & Wolters, 2009).

Contactpersonen

Publiek

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

- Age: 8-18 jaar

- Primary diagnosis: obsessive-compulsive disorder

- CY-BOCS score >=16

- IQ >=80

- medication (SSRI): stable

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

- Recent state-of-the-art cognitive behavioral therapy for OCS (within 3 months)

- Psychosis

- Drugs- or alcohol abuse

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd
Blindering:	Open / niet geblindeerd
Controle:	N.v.t. / onbekend

Deelname

Nederland

Status:	Werving gestopt
(Verwachte) startdatum:	16-10-2013
Aantal proefpersonen:	75
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:	22-11-2013
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	NL4073
NTR-old	NTR4275
Ander register	Fonds NutsOhra: 1204-035 : METC: NL44055.018.13
ISRCTN	ISRCTN wordt niet meer aangevraagd.

Resultaten

Samenvatting resultaten
N/A