

The stories we live by, a life-review method for people of 55 years and over with depressive and anxiety symptoms.

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

Samenvatting

ID

NL-OMON22643

Bron

Nationaal Trial Register

Verkorte titel

The stories we live by

Aandoening

Depression, Anxiety

Ondersteuning

Primaire sponsor: University of Twente

Overige ondersteuning: ZonMw

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Depressive symptoms, measured with the CES-D.

Toelichting onderzoek

Achtergrond van het onderzoek

A study evaluating “The stories we live by”, a preventive life-review group intervention, which was recently developed for adults of 55 years and over with depressive and anxiety symptoms. Both clinical and economic effectiveness will be evaluated in a pragmatic randomized controlled trial. The participants in the intervention condition will receive the 8-session preventive intervention. The participants in the control condition will have access to usual care.

Doel van het onderzoek

Our main hypothesis is that the life-review intervention leads to a significant reduction of depressive and anxiety symptoms, and in current major depression, and a significant improvement in quality of life and positive mental health, compared to the no-treatment control condition.

In addition, we explore if gender, age, education level, personality, past major depressive episodes, important life events and chronic diseases, in combination with the intervention, predict higher or lower effects on depressive and anxiety symptoms, quality of life and positive mental health.

Furthermore, we hypothesize that reminiscence functions, perceived control, automatic positive thoughts and meaning in life mediate the intervention’s effects on clinical endpoints.

Finally, we expect that the incremental costs per case of depression and anxiety avoided (cost-effectiveness) and per quality adjusted life year (QALY; cost-utility) are lower in the intervention condition, compared to the care-as-usual condition.

Onderzoeksopzet

Participants will be asked to complete questionnaires at baseline (t0), directly after the end of the intervention (t1), 3 months after the end of the intervention (t2), and –only in the intervention condition– 6 months after the end of the intervention (t3). The primary and secondary outcome measures will be recorded at all measurements (except for current major depressive episode), moderators only once at t0, the mediators at t0, t1 and t2 and the measures for economic evaluation only at t0 and t2.

Onderzoeksproduct en/of interventie

Intervention:

The stories we live by integrates narrative therapy and life-review. The intervention is aimed at four to six people and consists of eight similarly structured two-hour sessions. The essence of the intervention is to discover stories about one's life that help the individual to lead a contented life. The stories we live by consists of three main components. The first component is a focus on developing alternative, more positive, "thicker" life stories. Since the intervention is aimed at older adults with depressive and anxiety symptoms, we expect their stories to contain themes such as incapacity, disappointment and "being a victim". The second important component of the intervention is the systematic evaluation of one's life course, with a special focus on integrating negative life events with positive life events within participants' life stories. The intervention places the problems and conflicts that participants experience in the context of their life course, which involves making explicit links between the past and the present. During the intervention meetings, participants have to review their lives. Each intervention meeting has a different life theme, namely "our origin", "youth", "work and care", "love and conflicts", "loss and difficult periods", "metaphor", "the course of life" and "the future". Before each meeting, participants have to answer questions about different life themes. At home, they have to reflect upon these questions and write the responses down briefly. During the meetings, they have the opportunity to exchange and discuss the answers and experiences with the other participants. In the final meetings, attention is focused on the near future, to invite participants to convert their "new identity" into concrete actions. The third important component of the intervention is the attention for specific positive memories, which are special and unique for a certain period in the participant's life. Participants have to write down exactly what they remember of this situation and describe it by means of the following questions: "Where was it?", "What did the environment look like?", "Which people were there and what did everyone look like?", "What happened exactly?".

Control condition:

Participants in the control condition receive no intervention. However, they have unrestricted access to care-as-usual and may receive all health care they desire. Moreover, participants are not withheld from any treatment (e.g. they may receive psychological treatment). In the context of the economic evaluation, health care uptake will be closely monitored. After conclusion of the RCT, the participants in the control condition will be invited to take part in the intervention.

Contactpersonen

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

1. An age of 55 years or over;
2. The presence of slight to moderate depressive and anxiety symptoms. The presence of these symptoms will be measured by a score of 10 and above on the Dutch version of the Center for Epidemiological Studies Depression Scale (CES-D) and a score of 3 and above on the Dutch version of the anxiety scale of the Hospital and Anxiety Scale (HADS-A).

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

1. Diagnosed with full-blown depression or having a moderate to high suicide risk according to the Dutch version of the Mini International Neuropsychiatric Interview (MINI);

2. Scoring below the inclusion criteria of depressive and anxiety symptoms, measured by a score of 9 and below on the CES-D and a score of 2 and below on the HADS-A;
2. Started taking anti-depressant medication or benzodiazepines recently (within the previous 2 months);
3. Currently receiving any psychological treatment;
4. Other serious psychopathology; then people are referred for psychological treatment.

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd
Blinding:	Open / niet geblindeerd
Controle:	Actieve controle groep

Deelname

Nederland	
Status:	Werving gestart
(Verwachte) startdatum:	01-09-2008
Aantal proefpersonen:	200
Type:	Verwachte startdatum

Ethische beoordeling

Positief advies	
Datum:	12-06-2009
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	NL1750
NTR-old	NTR1860
Ander register	ZonMw/METIGG : 120610003/ NL22041.097.08
ISRCTN	ISRCTN wordt niet meer aangevraagd.

Resultaten

Samenvatting resultaten

N/A