

Schema Therapy for Dissociative Identity Disorder

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A manualized adapted schema therapy approach is effective in treating Dissociative Identity Disorder

Ethische beoordeling	Niet van toepassing
Status	Werving gestart
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON25486

Bron

NTR

Verkorte titel

N/A

Aandoening

Dissociative Identity Disorder

Ondersteuning

Primaire sponsor: University of Groningen

Overige ondersteuning: Stichting tot Steun VCVGZ, RINO Zuid, and the participating institutions.

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Dissociative symptoms (DSS), Post Traumatic Stress Disorder symptoms (PCL-5), Symptoms clusters of Dissociative Identity Disorder: depersonalisation, derealisation, identity confusion

and amnesia (SCID-D-R), therapy dropout percentage.

Toelichting onderzoek

Achtergrond van het onderzoek

One category of disorders frequently associated with a history of trauma are the dissociative disorders, of which Dissociative Identity Disorder (DID) is the most severe and chronic form. Patients suffering from DID show high levels of impairment, high treatment utilization, and high treatment costs. The aim of this study is to improve treatment for patients with Dissociative Identity Disorder, by applying an adapted form of schema therapy, a treatment which is highly effective in related disorders.

A multicentre, non-concurrent multiple baseline design will be used and 32 outpatients will be included from three mental health institutions in the Netherlands. Patients are randomly assigned to a baseline length (i.e., 13 weeks, 14 weeks, etc. up to 20 weeks). After a short education phase of 8 weeks (added for research purposes), the intervention phase will start. Patients receive 3 years of schema therapy (two years twice a week and one year once a week). Finally, six monthly booster sessions will follow.

The current study builds on a previous pilot study that provided a first test of the efficacy of a manualized adapted schema therapy approach for Dissociative Identity Disorder. Some adjustments have been made to the pilot study-protocol for the present study. These adjustments concern: a) the addition of monthly 45-minute sessions with a social psychiatric nurse to solve practical problems; b) replacement of several assessment instruments by measurements that are theoretically more attuned to the treatment goals of schema therapy for dissociative identity disorder, and updated instruments adapted to DSM-5 criteria.

Doel van het onderzoek

A manualized adapted schema therapy approach is effective in treating Dissociative Identity Disorder

Onderzoeksopzet

Measurements will take place at baseline, after the education phase of 8 weeks (i.e., added for research purposes), every 6 months during treatment, post-treatment (which takes 3 years), after booster sessions (6 monthly sessions) and 6 months after the booster sessions as follow-up. Process measures will be taken weekly during the baseline and education phase, and every other week biweekly during the treatment phase.

Onderzoeksproduct en/of interventie

A form of schema therapy, adapted to the needs of the patients with Dissociative Identity Disorder

Contactpersonen

Publiek

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

- Main diagnosis of Dissociative Identity Disorder, diagnosed with the SCID-D-R
- The initial Dissociative Identity Disorder diagnosis was classified max 3 years ago
- Participant has not received schema therapy before
- Participant has not completed successful trauma treatment
- Participant is motivated to undertake trauma treatment and to actively participate in achieving the treatment goals (reading literature at home, doing home assignments etc.) and to practice behavioral change
- Participant agrees to be recorded; in diagnostic interviews on video and treatment sessions on audio
- Age ≥ 18 and < 60
- Participant is able to understand, read, write, and speak Dutch

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

- DSM-5 substance dependence, as measured with the MINI-plus, that requires detox
- Florid psychotic episodes, as determined with the MINI-plus
- Acute suicide risk, as measured with several questions on suicidal behavior, which are administered as part of the intake.

- IQ < 80. IQ testing is requested by default by the intaker when education level is lower than intermediate vocational education. In that case, the screener for intelligence and mild intellectual disability (SCIL) is administered, with further IQ tests (WAIS) if indicated
- Other comorbid Axis I and Axis II disorders are allowed. They will be classified with the MINI-plus and the SCID-5-PD

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Anders
Toewijzing:	N.v.t. / één studie arm
Blinding:	Open / niet geblindeerd
Controle:	N.v.t. / onbekend

Deelname

Nederland	
Status:	Werving gestart
(Verwachte) startdatum:	01-06-2021
Aantal proefpersonen:	32
Type:	Verwachte startdatum

Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)

Wordt de data na het onderzoek gedeeld: Nee

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	NL9607
Ander register	Ethische toetsingscommissie RUG PSY-1920-S-0506 : METC Exemption UMCG Groningen METc 2020/206

Resultaten