GGZ Interventie Ter Preventie van Suïcidaal Gedrag (GRIP)

Een onderzoek om zelfmoord te voorkomen

Gepubliceerd: 30-03-2018 Laatst bijgewerkt: 19-03-2025

Cognitive therapy for suicide prevention (CT-SP) in combination with treatment as usual (TAU) is more effective in reducing the severity and intensity of suicide ideation and suicidal behavior than only receiving treatment as usual.

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

Samenvatting

ID

NL-OMON25696

Bron
Nationaal Trial Register

Verkorte titel
GRIP

Aandoening

Suicide prevention
Cognitive behavioral therapy
Specialized mental health care

Ondersteuning

Primaire sponsor: GGZ inGeest Specialized Mental Health Care, Department of Research and Innovation, Oldenaller 1, 1081 HJ, Amsterdam

Overige ondersteuning: not applicable

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

The primary outcome measure is defined as the reduction of suicide ideation and suicidal behavior in terms of severity and intensity as measured by the Columbia-Suicide Severity Rating Scale (C-SSRS). Assessments of severity and intensity of suicidal ideation and behavior will be made at baseline, after 6 and 12 weeks after baseline, and 9 months after the baseline.

Toelichting onderzoek

Achtergrond van het onderzoek

According to the World Health Organization (WHO), suicide is the 15th most frequent cause of death in the world and is responsible for approximately 800,000 deaths per year (WHO, 2014). It is of importance to further develop and implement interventions that focus on decreasing the number of deaths due to suicide. Improving mental health treatment and its availability for suicidal patients may be considered to be an important target when it comes to reducing the number of suicides, since studies indicate that 90-95% of the people that commit suicide were dealing with a mental health disorder (Cavanagh et al., 2003; Nock et al., 2008). Research has shown that cognitive behavioral therapy focused on suicide prevention (CT-sp) is capable of reducing suicidality in various populations (Meerwijk et al., 2016; Mewton, 2016l; Tarrier et al., 2008). The study ‘GGZ inteRvention In Prevention of suicidal behavior’ (GRIP) will investigate whether CT-SP is also effective for suicidal patients (ideators as well as attempters) within the Dutch outpatient mental health care via a randomized controlled trial.

Doel van het onderzoek

Cognitive therapy for suicide prevention (CT-SP) in combination with treatment as usual (TAU) is more effective in reducing the severity and intensity of suicide ideation and suicidal behavior than only receiving treatment as usual.

Onderzoeksopzet

There are 4 measurement moments: T0 (baseline), T1 (6 weeks after baseline), T2 (12 weeks after baseline), and T3 (9 months after baseline).

Onderzoeksproduct en/of interventie

12 sessions of CT-SP delivered face-to-face by a trained psychologist.

Contactpersonen

Publiek

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

- Age 18 and above
- Patient newly referred to or in care in a participating sGGZ mental health care center
- Patient scores 2 or higher on the severity subscale of the C-SSRS in the past month
- Patient additionally scores 3 or higher on at least one of the first three items of the intensity subscale of the C-SSRS in the past month and/or made a suicide attempt in his/her lifetime as rated by the suicidal behavior subscale of the C-SSRS.
- Speaking the Dutch language
- Patient is inclined to participate in a randomization process

- Patient is inclined to give written informed consent

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

- Active (manic-)psychotic episode or cognitive impairment due to chronic (psychotic) disorganization, dementia, or mental retardation
- Insufficient mastery of the Dutch language
- Has previously had cognitive behavioral therapy for suicide prevention

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd
Blindering:	Open / niet geblindeerd
Controle:	Geneesmiddel

Deelname

Nederland

Status:	Werving gestart
(Verwachte) startdatum:	24-05-2019
Aantal proefpersonen:	176
Type:	Verwachte startdatum

Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)

Wordt de data na het onderzoek gedeeld: Nog niet bepaald

Ethische beoordeling

Positief advies

Datum:	30-03-2018
Soort:	Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

ID: 48958
Bron: ToetsingOnline
Titel:

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL6927
NTR-old	NTR7123
CCMO	NL65579.029.18
OMON	NL-OMON48958

Resultaten