

# Cognitive Self-therapy (CST) for patients with chronic-recurrent depression or anxiety.

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Does Cognitive Self-therapy (CST) in outpatient mental health care has any superiority as to cost-effectiveness and outcome compared to treatment as usual?

<b>Ethische beoordeling</b>	Positief advies
<b>Status</b>	Werving gestopt
<b>Type aandoening</b>	-
<b>Onderzoekstype</b>	Interventie onderzoek

## Samenvatting

### ID

NL-OMON27615

### Bron

Nationaal Trial Register

### Verkorte titel

CST

### Aandoening

Depression and (generalised) anxiety disorders.

### Ondersteuning

**Primaire sponsor:** University Medical Center Groningen.

**Overige ondersteuning:** ZonMw, UMCG.

### Onderzoeksproduct en/of interventie

### Uitkomstmaten

#### Primaire uitkomstmaten

Symptoms of anxiety and depression (SCL-90; BDI; ZBV).

# Toelichting onderzoek

## Achtergrond van het onderzoek

Both treatment conditions showed significant improvements on symptom measures but did not differ between each other as to the main outcome SCL-90. CST patients improved more in some aspects of life satisfaction (e.g., feelings of safety, finance, recreation, transport; WHO-QoL, environmental sub-scale), and in social functioning in relationships with parents and siblings.

They also had significantly fewer contacts with other therapists (non-psychiatrists) than TAU patients. None of the patients committed suicide.

No variables were predictive for a good outcome.

CST patients appeared to rely more on their own experiences while TAU relied more on the judgement of other people.

The higher initial costs for the CST condition were compensated by considerably lower costs during follow-up.

## Doel van het onderzoek

Does Cognitive Self-therapy (CST) in outpatient mental health care has any superiority as to cost-effectiveness and outcome compared to treatment as usual?

## Onderzoeksopzet

N/A

## Onderzoeksproduct en/of interventie

Treatment as usual (TAU) versus CST which is a structured method that seeks to restructure cognitive schemata by focusing on problems in social functioning and relationships and consists of a Preparatory Phase, 2) an Orientation Course of three weekly morning-meetings to practice with peers; a Basic Course of 5 weekly, day-long sessions in which patients learn to manage self-therapy sessions with peers.

Those who perform these sessions adequately are certified to participate in weekly meetings, now led by peers in accordance with the manual, as taught during the BC.

The patients' role in the treatment gradually evolves into that of "paraprofessionals," such that finally they conduct Self-Therapy sessions in reciprocal relationships with peers.

## Contactpersonen

## **Publiek**

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## **Wetenschappelijk**

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## **Deelname eisen**

### **Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)**

1. DSM IV diagnosis of chronic and/or recurrent depression, dysthemic disorder or (generalised) anxiety disorder;
2. Duration of symptoms more than 2 years;
3. 18-65 years.

### **Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)**

1. Suicidal behaviour;
2. Psychosis;
3. Substance dependency;
4. IQ < 85;

5. Lack of insight in personal vulnerability in social contacts or relationship.

## Onderzoeksopzet

### Opzet

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

### Deelname

Nederland	
Status:	Werving gestopt
(Verwachte) startdatum:	01-03-2000
Aantal proefpersonen:	151
Type:	Werkelijke startdatum

## Ethische beoordeling

Positief advies	
Datum:	12-09-2005
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	NL337
NTR-old	NTR375
Ander register	: OG 00-028
ISRCTN	ISRCTN61381864

## Resultaten

### Samenvatting resultaten

1. den Boer, P. C. A. M., Mersch, P. P. A., and Wiersma, D. (2004) Cognitieve zelftherapie. Verslag van een pilot-studie naar een alternatieve behandeling voor psychiatrische patiënten. Maandblad Geestelijke volksgezondheid, 59, 325-338.<br><br><br>
2. den Boer, P. C. A. M., Wiersma, D., and van den Bosch, R. (2004b) Why is self-help neglected in the treatment of emotional disorders? A meta-analysis. Psychological medicine, 34, 959-972.<br><br><br>
3. Boer PCAM den, Bosch RJ van den, Vaarwerk I ten, Stant AD, Wiersma D. Cognitive Self-Therapy in chronic and remittent emotional disorders is effective and reduces therapist contact: a multi-center randomized controlled trial. Brit J Psychiatry in press.