Effect of mindfulness on patients with rheumatoid arthritis: A controlled effect study.

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Ethische beoordeling Positief advies **Status** Werving gestopt

Type aandoening -

Onderzoekstype Interventie onderzoek

Samenvatting

ID

NL-OMON28153

Bron

Nationaal Trial Register

Aandoening

rheumatoid arthritis, mindfulness-based stress reduction, MBSR, cognitive behavioral therapy, CBT

Ondersteuning

Primaire sponsor: Since this is a self-financed research, the primary sponsor is the faculty Medical Psychology at the Maxima Medisch Centrum (MMC) where I work as a clinical psychologist trainee. Also the regional arthritis center (RRC) plays an important part. In addition, the METC (Medical Ethical Examination Committee) of the MMC is involved in checking the progress and reporting of the research. At a higher level, Maxima Medisch Centum is the sponsor/executive.

Overige ondersteuning: Since this is a self-financed research, the fund is also the faculty Medical Psychology at the Maxima Medisch Centrum (MMC) in cooperation with the RRC, and at a higher level the MMC itself.

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

The five primary endpoints of the current study are quality of life, psychological well-being, pain acceptance, stress, and physical functioning.

functioning.

The primary outcome will be determined by letting participants fill in questionnaires at pre-determined times. In particular, on several occasions the DAS28 score will be measured in order to measure disease activity. The DAS28 is measured in any event several times per year for RA (Rheumatoid Arthritis) patients.

Toelichting onderzoek

Achtergrond van het onderzoek

This study is concerned with the effects of Mindfulness interventions for Rheumatoid arthritis (RA) patients, in comparison with Cognitive Behavioral Therapy. An important covariant variable may be the presence or absence of a type D personality in a patient.

Aspects of RA and common medical treatments are discussed, as well as a number of non-pharmacological treatments including Cognitive-behavioral Therapy (CBT) and Mindfulness-based Stress Reduction (MBSR).

The research proposal concerning Mindfulness and RA is discussed, with details regarding the design and procedure, the patients, and expected outcome.

Doel van het onderzoek

The present study will test the effect of MBSR on RA in comparison to cognitive behavioral therapy (CBT) and a no-treatment control group. It is hypothesized that Mindfulness will be at least as effective in changing quality of life, psychological and social functioning, pain intensity and pain acceptance, functional ability and disease activity and stress as CBT and more effective than no therapy (the waiting-list control condition), evaluated at post-treatment and in follow up. In addition, it is expected that on some aspects the MBSR intervention may be even more effective than CBT, specifically regarding higher pain acceptance, lower impact of pain on one's life and higher positive affect.

Onderzoeksopzet

The baseline measurement is defined by the moment of the start of the therapy or wait list. At this time, they will be asked to fill in a number of questionnaires at the hospital to assess

2 - Effect of mindfulness on patients with rheumatoid arthritis: A controlled effect ... 15-05-2025

the baseline measurements. Additional medical information will be collected in the medical file by the rheumatologist. Follow-up moments are planned, at two months after the intervention (T1), and at 6 months after the intervention (T2).

Onderzoeksproduct en/of interventie

The research is set up as a randomized controlled trial (RCT). The research period is two years, during which time patients can be admitted to the program. Both CBT (Cognitive Behavioural Therapy) and Mindfulness Based Stress Reduction (MBSR) therapies are provided for patient groups, and will comprise 8 weekly sessions. A third group, consisting of waiting list patients, will function as the control group. Patients will be blindly assigned to one of the groups.

As part of the mindfulness therapy, patients will be taught to experience events in a non-judgemental way. Patients will learn to be more aware of their emotions and to better regulate these emotions, by living in the here and now. They will be better able to effectively deal with their disease.

In the cognitive behavioural therapy, patients will be asked to be more aware of their thoughts concerning the disease and their coping with the disease. They will learn to change these thoughts so as to deal more effectively with disease-related complaints such as pain.

In the control (waiting list) group, patients will only receive the standard care.

Contactpersonen

Publiek

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Patients with RA diagnosis received at least one year ago and no more than five years ago will be included. Sufficient understanding of written and spoken Dutch is required.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

- 1. Age over 80;
- 2. Chronic severe psychiatric conditions (e.g. psychosis or a personality disorder);
- 3. Previously participated in a MBSR program.

Onderzoeksopzet

Opzet

Type: Interventie onderzoek

Onderzoeksmodel: Parallel

Toewijzing: Gerandomiseerd

Blindering: Enkelblind

Controle: Geneesmiddel

Deelname

Nederland

Status: Werving gestopt

(Verwachte) startdatum: 29-04-2010

Aantal proefpersonen: 120

Type: Werkelijke startdatum

Ethische beoordeling

Positief advies

Datum: 23-04-2012

Soort: Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

ID: 34919

Bron: ToetsingOnline

Titel:

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register ID

NTR-new NL3311 NTR-old NTR3458

CCMO NL31677.015.10

ISRCTN wordt niet meer aangevraagd.

OMON NL-OMON34919

Resultaten

Samenvatting resultaten No publications yet.		
No publications yet.		