Survivors at Risk: a Randomized Controlled Trial of primary prevention of complicated grief among first degree relatives of suicide victims.

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A brief (four sesssions) nurse-led family focused intervention, based on cognitive behavioral therapy and psycho-education, offered between 3 and 6 months following the suicide prevent depressive and complicated grief symptoms at 13 months...

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

Samenvatting

ID

NL-OMON28793

Bron
NTR

Verkorte titel
N/A

Aandoening

Suicide bereavement, complicated grief.

Ondersteuning

Overige ondersteuning: ZON-MW

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

1. Depression (CESD);
2. complicated grief (ITG);
3. TRGR2L;
4. SCAN.

Toelichting onderzoek

Achtergrond van het onderzoek

Complicated (traumatic) grief is associated with a high risk of long-term psychiatric dysfunction. Suicide survivors may consist a high-risk group for psychiatric morbidity because of their shared pre-existing vulnerability for mental illness with the deceased relative and the impact of the suicide and the following bereavement on mental and physical health. Researches to the effect of primary prevention show that people who initially suffer most do benefit most of primary preventive intervention. Suicide tends to cluster in families; a family-focused intervention possibly prevents symptoms of complicated grief in the aftermath of suicide. Objective To determine whether a brief, nurse-led and family-focused program, based on cognitive behavioural therapy and psycho-education, given three to six months following the self-inflicted death of a relative is more effective in preventing complicated grief than ‘care as usual’.

Doel van het onderzoek

A brief (four sesssions) nurse-led family focused intervention, based on cognitive behavioral therapy and psycho-education, offered between 3 and 6 months following the suicide prevent depressive and complicated grief symptoms at 13 months bereavement.

Onderzoeksopzet

N/A

Onderzoeksproduct en/of interventie

Brief, nurse-led family-focused 4 session intervention by trained psychiatric nurses, based on cognitive behavioural therapy and psycho-education vs. care as usual (controls).

Contactpersonen

Publiek

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Families (first-degree relatives, in-laws and spouses) of suicide victims recruited in the three northern provinces of the Netherlands between 1 September 1999 and 1 January 2002.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

1. Severe mental illness;

2. Imprisonment of the deceased;

3. Lack of Dutch fluency.

Onderzoeksopzet

Opzet

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

Deelname

Nederland

Status:	Werving gestopt
(Verwachte) startdatum:	01-09-1999
Aantal proefpersonen:	106
Type:	Werkelijke startdatum

Ethische beoordeling

Positief advies

Datum:	20-03-2006
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	NL578

Register	ID
NTR-old	NTR634
Ander register	: METC 2002/137
ISRCTN	ISRCTN66473618

Resultaten

Samenvatting resultaten
BMJ. 2007 May 12;334(7601):994. Epub 2007 Apr 20