Gedragsmatige activering bij ouderen met een depressie: een alternatieve effectieve behandeling?

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Behavioural Activation is effective in reducing acute major and minor depression in elderly.

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

Samenvatting

ID

NL-OMON29645

Bron
NTR

Aandoening

depression in elderly
depressie bij ouderen

Ondersteuning

Primaire sponsor: Riagg Maastricht in collaboration with Maastricht University, University of Amsterdam & VU University Amsterdam
Overige ondersteuning: Riagg Maastricht

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

The primary outcome measure will be the change in depression severity between respectively the intervention and exploration phase versus the baseline condition (Î” treatment effect). For the purpose of this study, we have chosen the GDS-15 as primary

outcome measure, because Longwell and Truax (2005) warn for weekly administration of the BDI-II leading to decreasing scores merely as a result of the short re-administration period.

Toelichting onderzoek

Achtergrond van het onderzoek

Rationale: Behavioural activation (BA) has known a revival after the Jacobson study (1996). It showed that BA was equally effective as Cognitive Therapy (CT) to alleviate depression. Dimidjian (2006) replicated the findings in an RCT. A meta-analysis by Cuijpers et al. (2007) pointed in the same direction. In the elderly, psychotherapy research receives, relatively speaking, less attention, and there is also a lack of studies into psychological treatment of depression. In our experience, cognitive techniques are often not suitable for elderly patients with depression. Therefore, we wish to study the applicability of BA in elderly.
Objective: To evaluate the effectiveness of BA in reducing acute major and minor depression in elderly.
Study design: The present study will use a multiple baseline case series design. By applying multiple baseline periods over patients and comparing baseline, exploration and treatment phase a patient serves as its own control subject.
Study population: Elderly patients (60-99 yrs) with a primary diagnosis of acute major or minor depression referred to secondary mental health care (RIAGG Maastricht Elderly Care).
Intervention: BA belongs to the third-generation behavioural treatments. Based on individual case conceptualisation and functional analysis of withdrawal behaviour and ruminative thinking, an activation plan is made and implemented to activate the patient and increase reward. If indicated, skill training is offered to increase reward levels.
Primary outcome measure: GDS-15.
Secondary outcome measures: BDI-II, HRSD, BADS, post-treatment absence of major/minor depression, EuroQol, happiness question.
Ethical considerations: As BA is a component of Cognitive Behavioural Therapy (CBT), an evidence-based therapy for both adults and elderly, no adverse events are expected. If suicidal behaviour is encountered, appropriate measures will be taken.

Doel van het onderzoek

Behavioural Activation is effective in reducing acute major and minor depression in elderly.

Onderzoeksopzet

Weekly assessments by mail or internet
Primary outcome: GDS-15.

Face-to-face assessments at t-1 (start baseline phase, duration 6-10 weeks due to

randomised variation in waiting list), t0 (start exploration phase, duration 5 weeks), t1 (start intervention phase, duration 12 weeks), t2 (mid-treatment), t3 (end-treatment) and t4 (3 months FU)
Secondary outcomes: BDI-II, BADS, HRSD, happiness, EuroQol

Pre- and post-treatment assessment
SCID-I
Checklist DSM-5 criteria major and minor depression
Patient acceptability of intervention and attrition
Medication use
Demographic variables at pre-treatment

Onderzoeksproduct en/of interventie

Behavioural activation belongs to the third-generation behavioural treatments (Dimidjian & Davis 2009), and focuses at activating the patient to increase reward and at conceptualising ruminative thinking in its context and consequences. It is developed by Lewinsohn in the seventies, and showed a revival in the past 20 years when research trials and meta-analyses demonstrated its effectiveness as a stand-alone treatment method (Cuijpers et al. 2007, Dimidjian et al. 2006, Cuijpers et al. 2006). However, less evidence exists for the use of BA in elderly. We will use the book by Martell et al. (2010) as guideline in composing the BA treatment protocol for elderly, taking into account possible age-related sensory and memory problems.

Contactpersonen

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Inclusion criteria are 1) primary diagnosis of acute (i.e. started at least 12 months prior to referral) major and minor depression as assessed with the SCID-I; 2) a recurrent depressive episode is allowed; 3) a cut off score of 5/6 on the GDS-15 at screening (12); 4) age range 60-99; 5) can understand and speak the Dutch language; 6) willingness to participate in the study (signed informed consent).

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

Exclusion criteria are 1) psychotic features, psychotic disorder or bipolar disorder; 2) IQ<80 (clinical impression); 3) acute suicide risk; 4) substance dependence; 5) start of new medication within 3 months before start of the study (medication used for longer periods can be continued; stopping medication during the study is allowed); 6) medical condition that causes depression directly or through medication intake; 7) unstable medical condition; 8) MMSE score <20.

Onderzoeksopzet

Opzet

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

Deelname

Nederland Status:	Werving nog niet gestart
(Verwachte) startdatum:	01-06-2014
Aantal proefpersonen:	20

Type:	Verwachte startdatum

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	NL4454
NTR-old	NTR4577
Ander register	Riagg Maastricht financiert studie : ECP (ethical committee psychology)-133 4-10-2013

Resultaten