

# Mild depression in primary care: do antidepressants add any effect to usual consultations?

|                          |                                  |  |
|--------------------------|----------------------------------|--|
| <b>Submission date</b>   | <b>Recruitment status</b>        | <input type="checkbox"/> Prospectively registered    |
| 20/12/2005               | No longer recruiting             | <input type="checkbox"/> Protocol                    |
| <b>Registration date</b> | <b>Overall study status</b>      | <input type="checkbox"/> Statistical analysis plan   |
| 20/12/2005               | Completed                        | <input checked="" type="checkbox"/> Results          |
| <b>Last Edited</b>       | <b>Condition category</b>        | <input type="checkbox"/> Individual participant data |
| 06/07/2009               | Mental and Behavioural Disorders |  |

## Plain English summary of protocol

Not provided at time of registration

## Contact information

### Type(s)

Scientific

### Contact name

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### Contact details

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## Additional identifiers

### Protocol serial number

NTR178; OOG00-020

## Study information

### Scientific Title

**Acronym**

HOMiD

**Study objectives**

Antidepressant medication does not add any effect to usual consultations by general practitioners in patients with minor and mild-major depression

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

Received from local medical ethics committee

**Study design**

Multicentre, randomised, active controlled, parallel group trial

**Primary study design**

Interventional

**Study type(s)**

Treatment

**Health condition(s) or problem(s) studied**

Depression

**Interventions**

Patients were randomly assigned to four sessions of counselling during 3 months with (n=85) or without paroxetine (n=96). Both treatments were carried out by the patients own GP.

**Intervention Type**

Drug

**Phase**

Not Specified

**Drug/device/biological/vaccine name(s)**

paroxetine

**Primary outcome(s)**

1. Severity of Depressive by MADRS (Montgomery Åsberg Depression Rating Scale)
2. Remission of depression by MADRS score<10

**Key secondary outcome(s)**

1. Quality of Life (Short Form 36)
2. Subjective depression (Beck Depression Inventory)
3. Client Satisfaction Questionnaire
4. Direct and indirect costs

**Completion date**

01/05/2005

# Eligibility

## Key inclusion criteria

1. Aged 18 years or over
2. Having 3-6 out of 9 depressive symptoms for at least 2 weeks for most days of the week, including at least one of the core symptoms sadness or loss of pleasure. Impairment by depressive symptoms in social, occupational or other important areas of functioning (minor depression=3-4 symptoms, mild-major depression=5-6 symptoms)

## Participant type(s)

Patient

## Healthy volunteers allowed

No

## Age group

Adult

## Lower age limit

18 years

## Sex

All

## Key exclusion criteria

1. Current intake of antidepressants or receiving psychological therapy
2. Psychotic features
3. Alcohol or drug addiction
4. Loss of a loved one or significant other in the past six months
5. Pregnancy or breastfeeding
6. Inability to complete questionnaires because of language difficulties, illiteracy or cognitive decline
7. Not having a telephone

## Date of first enrolment

01/01/2002

## Date of final enrolment

01/05/2005

# Locations

## Countries of recruitment

Netherlands

## Study participating centre

VU University Medical Centre,  
Amsterdam

Netherlands  
1081 BT

## Sponsor information

**Organisation**  
EMGO Institute (Netherlands)

**ROR**  
<https://ror.org/0258apj61>

## Funder(s)

**Funder type**  
Government

**Funder Name**  
The Health Care Insurance Board (CVZ) (Netherlands)

## Results and Publications

### Individual participant data (IPD) sharing plan

**IPD sharing plan summary**  
Not provided at time of registration

### Study outputs

| Output type                     | Details | Date created | Date added | Peer reviewed? | Patient-facing? |
|---------------------------------|---------|--------------|------------|----------------|-----------------|
| <a href="#">Results article</a> | results | 07/12/2007   |            | Yes            | No              |