# Cognitive control training for depression

Submission date 11/09/2019	<b>Recruitment status</b> No longer recruiting	<ul><li>Prospectively registered</li></ul>
		☐ Protocol
Registration date 24/09/2019	Overall study status Completed	Statistical analysis plan
		☐ Results
<b>Last Edited</b> 11/10/2019	Condition category  Mental and Behavioural Disorders	Individual participant data
		[ ] Record updated in last year

## Plain English summary of protocol

Background and study aims

Depression is a mental health condition where a person feels constantly very sad and low in mood for two weeks or more. It affects people in different ways. Sufferers can feel hopeless, anxious and lose interest in doing things they used to enjoy. It can also lead to problems with sleeping, feeling constantly tired, a loss of appetite and a low sex drive. In the most extreme cases, it can result in a person harming themselves or attempting to take their own life (suicide). The study aims to compare two treatment methods for depression, cognitive control training and behavioural activation

Who can participate?

Patients aged 18 – 50 with major depressive disorder

What does the study involve?

Participants are randomly allocated into Cognitive Control Training (CCT) or the active control group (Behavioral Activation). They are assessed with questionnaires a before and after the 18-session intervention (twice weekly).

What are the possible benefits and risks of participating?

Possible benefits of participating in this study include improvement in their condition and relief from symptoms. Improvement in cognitive and mood symptoms is likely. The intervention will target mood regulation and long-term sustainable strategies to deal with depression. The study doctor/researcher will be monitoring participants' condition more closely than usual. The findings of this study will be helpful in developing new strategies for patients with depression. There are no costs to participants and they will not be paid for their participation. The tests, examination and treatment will be free of cost. There are no risks involved in the treatment, but since the treatment requires participants to not change the dose of medication a month before and 3 months after the intervention there could be worsening of symptoms, in such a case they will be independently assessed by a psychiatrist and will be removed from the study.

Where is the study run from?

- 1. NIMHANS OPD
- 2. NIMHANS Centre for Well Being (NCWB)

When is the study starting and how long is it expected to run for? October 2017 to October 2019

Who is funding the study? National Institute of Mental Health and Neuroscience (India)

Who is the main contact? Meenakshi Banerjee meenakshi.banerjee@gmail.com

## Contact information

## Type(s)

**Public** 

#### Contact name

Ms Meenakshi Banerjee

#### **ORCID ID**

https://orcid.org/0000-0001-9883-9004

#### Contact details

225 Cauvery Hostel
NIMHANS
Hosur Road
Bangalore
India
560029
+91 (0)8197292827
meenakshi.banerjee@gmail.com

## Additional identifiers

#### Clinical Trials Information System (CTIS)

Nil known

## ClinicalTrials.gov (NCT)

Nil known

#### Protocol serial number

Nil known

## Study information

#### Scientific Title

Cognitive control training for depression: a randomised controlled trial

#### **Acronym**

CCT-D

#### **Study objectives**

Hypothesis 1: There will be no difference in measures of depression, anxiety, emotion regulation, metacognition, neuro-cognitions and quality of life, before and after cognitive control training

Hypothesis 2: There will be no difference in measures of depression, anxiety, emotion regulation, metacognition, neuro-cognitions and quality of life, between patients who recieve cognitive control training and behavioural activation

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Approved 18/07/2016, NIMHANS (Human) Ethics Committee (National Institute for Mental Health and Neuroscience (NIMHANS), Hosur Road, Hombegowda Nagar, Bangalore, India; +91 (0) 8026995000; ms@nimhans.ac.in), ref: NIMH/DO/ETHICS SUB-COMMITTEE29thMEETING/2016

### Study design

Randomised controlled trial with single-blind pre-post and follow up design

#### Primary study design

Interventional

### Study type(s)

Treatment

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

Major depressive disorder

#### Interventions

Allocation to groups was done with a computer-generated random number table.

#### Arm 1 (Intervention) Cognitive Control Training:

18 sessions (twp per week) training executive control processes - working memory, response inhibition and mental flexibility keeping an affective framework to suit patients with depression and decrease rumination and improve metacognition.

#### Arm 2 (Control) Behavioural Activation:

18 sessions (two per week) behaviour activation adapted from Jacobson (2001) and suggestions by Veale et al (2007).

Post-intervention CGI (Clinical Global Index) was done by an expert blind rater.

### Intervention Type

Behavioural

#### Primary outcome(s)

Depression measured using Beck's Depression Inventory (BDI) at baseline and 9 weeks

#### Key secondary outcome(s))

- 1. Illness severity measured using the Clinical Global Index (CGI) at baseline and 9 weeks
- 2. Neuro-cognitive measures at baseline and 9 weeks:

- 2.1. Spatial Span
- 2.2. Digit Span (WMS III)

#### Completion date

15/10/2019

## **Eligibility**

#### Key inclusion criteria

- 1. Major Depressive Disorder (as primary diagnosis)
- 2. Score of 17 or above on Beck's Depression Inventory (BDI)
- 3. Age range of 18-50 years
- 4. Comprehension of written and spoken English/Hindi
- 5. Right handedness
- 6. Normal or corrected vision or hearing
- 7. Stable on medication dosage for one month

#### Participant type(s)

Patient

### Healthy volunteers allowed

No

#### Age group

Adult

#### Lower age limit

18 years

#### Upper age limit

50 years

#### Sex

ΔII

#### Total final enrolment

60

#### Key exclusion criteria

- 1. History suggestive of neurological, neurosurgical conditions and /or history of head injury And /or mental retardation on clinical assessment
- 2. Diagnosis of schizophrenia, Bipolar Affective Disorder, Severe Depression with psychotic symptoms, Delusional disorder, current psychoactive substance abuse and/or dependence (except nicotine)
- 3. Any structured psychological intervention in the past 6 months
- 4. Any neurocognitive intervention and/or neuropsychological assessments
- 5. Have received ECT (in last 6 months)

#### Date of first enrolment

01/10/2017

#### Date of final enrolment

10/09/2019

## Locations

#### Countries of recruitment

United Kingdom

India

#### Study participating centre

National Institute of Mental Health and Neuroscience (NIMHANS)

Hosur Road Hombegowda Nagar Bangalore Karnataka India 560029

## Study participating centre

National Institute of Mental Health and Neurosciences Centre for Well-Being

9th Main Road Stage, BTM Layout 1 Bengaluru Karnataka United Kingdom 560076

## Sponsor information

## Organisation

National Institute for Mental Health and Neuroscience (NIMHANS)

#### ROR

https://ror.org/0405n5e57

## Funder(s)

## Funder type

Government

#### **Funder Name**

National Institute of Mental Health and Neuroscience

## **Results and Publications**

## Individual participant data (IPD) sharing plan

The datasets generated and/or analysed during the current study during this study will be included in the subsequent results publication.

## IPD sharing plan summary

Other

## **Study outputs**

Output type Details Date created Date added Peer reviewed? Patient-facing?

Participant information sheet Participant information sheet 11/11/2025 11/11/2025 No Yes