

# Changing catastrophic scenarios in imagery in people with severe social anxiety

<b>Submission date</b> 14/02/2020	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
<b>Registration date</b> 17/02/2020	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
<b>Last Edited</b> 16/03/2021	<b>Condition category</b> Mental and Behavioural Disorders	<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

## Plain English summary of protocol

### Background and study aims

Social anxiety disorder, also called social phobia, is a long-lasting and overwhelming fear of social situations. It's a common problem that usually starts during the teenage years. Social anxiety is more than shyness. It's an intense fear that does not go away and affects everyday activities, self-confidence, relationships and work or school life.

Patients with social anxiety disorder (SAD) do not only experience dysfunctional negative thoughts in anxiety-provoking social interactions but recent studies show that they also suffer from recurrent, intrusive, negative images. A study showed in most patients with social anxiety disorder these images were linked to past social traumatic memories. Recently a treatment technique 'imagery rescripting' is applied to update these traumatic memories. This resulted in a strong decrease in social anxiety complaints. However, rescripting of the intrusive, negative images itself, the future-oriented catastrophic scenarios or 'flashforwards' has not been studied yet. It is possible this is an even more direct way to treat anxiety in social situations.

The research question is whether imagery rescripting focused on flashforwards can reduce social anxiety symptoms in patients with social anxiety disorder.

### Who can participate?

Patients with a diagnosis of social anxiety disorder, IQ above 80, and able to read and write in Dutch or English.

### What does the study involve?

Patients with social anxiety disorder follow treatment with imagery rescripting focused on flashforwards: images of future catastrophic scenarios of social interaction. The treatment consists of two sessions of 60 minutes per week with a total of 12 sessions. At waitlist, pre-treatment, post-treatment, 1-month follow-up and 6-month follow-up patients fill out various questionnaires to assess their symptom level. Prior to each session and twice a week during waiting-list patients fill out 2 short questionnaires on social anxiety complaints and 1 that comprised idiosyncratic social situations. Sessions were audio-recorded.

### What are the possible benefits and risks of participating?

The possible benefits of participating of this study are that the treatment will reduce social

anxiety disorder complaints. There are no risks involved in participating in this study. The disadvantage of participating in this study is the time it requires to participate in the interviews and fill out the questionnaires.

Where is the study run from?

1. Virenze-Riagg Maastricht (Netherlands)
2. Vincent van Gogh Instituut (Netherlands)

When is the study starting and how long is it expected to run for?  
December 2013 to September 2018

Who is funding the study?  
Maastricht University (Netherlands)

Who is the main contact?  
Prof Marleen Rijkeboer  
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## Contact information

**Type(s)**  
Scientific

**Contact name**  
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## Additional identifiers

**Clinical Trials Information System (CTIS)**  
Nil known

**ClinicalTrials.gov (NCT)**  
Nil known

**Protocol serial number**  
ECP-134; 04\_11\_2013

## Study information

**Scientific Title**

Flashforward Rescripting in Social Anxiety Disorder

**Acronym**

FFinSAD

**Study objectives**

A treatment regimen focused on flashforward rescripting can substantially change social anxiety symptoms in patients with Social Anxiety Disorder (SAD)

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

Approved 15/09/2014, Maastricht University Ethics Committee Psychology (ECP) (Ethics Review Committee Psychology and Neuroscience (ERCPN), Maastricht University, Department of the Faculty of Psychology and Neuroscience, Postbox 616, 6200 MD Maastricht, Netherlands; +31 43 3884008; no email provided), ref: ECP-134; 04\_11\_2013

**Study design**

Interventional case series

**Primary study design**

Interventional

**Study type(s)**

Treatment

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

Social anxiety disorder

**Interventions**

This study has a case-study design, with a randomized waitlist between 2 and 7 weeks. Patients were randomised over the number of weeks of their waitlist period. The randomization list was provided by a computerized randomization program.

Patients with social anxiety disorder (n=6) followed treatment with imagery rescripting focused on flashforwards: images of future catastrophic scenarios of social interaction. The treatment consists of two sessions of 60 minutes per week with a total of 12 sessions. At waitlist, pre-treatment, post-treatment, 1-month follow-up and 6-month follow-up patients fill out various questionnaires to assess their symptom level. Prior to each session and twice a week during waiting-list patients fill out 2 short questionnaires on social anxiety complaints and 1 that comprised idiosyncratic social situations. Sessions were audio-recorded.

Flashforward Rescripting: 60 minutes sessions twice a week, with a total of 12 sessions depending on the progress of treatment. Three types of imagery exercises are provided, all focus on future catastrophic scenarios.

**Intervention Type**

Behavioural

**Primary outcome(s)**

At waitlist, pre-treatment, post-treatment, 1-month follow-up and 6-month follow-up:

1. The Social Interaction Anxiety Scale (SIAS)
2. The Social Performance Scale (SPS)
3. Situational anxiety severity and avoidance measured using the idiosyncratic rating scale

**Key secondary outcome(s)**

At waitlist, pre-treatment, post-treatment, 1-month follow-up and 6-month follow-up:

1. The shortened Social Phobia and Anxiety Inventory (SPAI-18)
2. Center for Epidemiologic Studies Depression scale (CES-D)
3. Self-focused Attention scale (SFA)
4. Social Phobic Beliefs (SPB)
5. Subtle Avoidance Frequency Examination (SAFE)
6. Remoralisation measured using the Remoralisation Questionnaire
7. Subjective Happiness Scale (SHS)
8. The avoidant personality items of the Personality Disorders Questionnaire (ADP-IV)

**Completion date**

01/09/2018

**Eligibility****Key inclusion criteria**

1. Diagnosis of Social Anxiety Disorder
2. IQ above 80
3. Able to read and write in Dutch or English

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Adult

**Sex**

All

**Total final enrolment**

6

**Key exclusion criteria**

1. Diagnosis of substance abuse disorder
2. Diagnosis of Psychotic Disorder
3. Diagnosis of Bipolar Disorder
4. Acute Suicidality

**Date of first enrolment**

16/12/2013

**Date of final enrolment**

01/09/2018

**Locations****Countries of recruitment**

Netherlands

**Study participating centre****Virenze-Riagg Maastricht**

Parallelweg 45-47

Maastricht

Netherlands

6221 BD

**Study participating centre****Vincent van Gogh Instituut**

Stationsweg 46

Venray

Netherlands

5803 AC

**Sponsor information****Organisation**

Maastricht University

**ROR**

<https://ror.org/02jz4aj89>

**Funder(s)****Funder type**

University/education

**Funder Name**

Universiteit Maastricht

**Alternative Name(s)**

Maastricht University, UM

### **Funding Body Type**

Private sector organisation

### **Funding Body Subtype**

Universities (academic only)

### **Location**

Netherlands

## **Results and Publications**

### **Individual participant data (IPD) sharing plan**

The current data sharing plans for this study are unknown and will be available at a later date.

### **IPD sharing plan summary**

Data sharing statement to be made available at a later date

### **Study outputs**

<b>Output type</b>	<b>Details</b>	<b>Date created</b>	<b>Date added</b>	<b>Peer reviewed?</b>	<b>Patient-facing?</b>
<a href="#">Participant information sheet</a>	Participant information sheet	11/11/2025	11/11/2025	No	Yes