# Economic evaluation of an integrated individual and family therapy model for self-harming adolescents

Submission date	<b>Recruitment status</b> No longer recruiting	<ul><li>Prospectively registered</li></ul>		
08/07/2020		☐ Protocol		
<b>Registration date</b> 09/09/2020	Overall study status Completed	<ul><li>Statistical analysis plan</li></ul>		
		[X] Results		
<b>Last Edited</b> 27/10/2022	Condition category  Mental and Behavioural Disorders	[] Individual participant data		

#### Plain English summary of protocol

Background and study aims

Self-harming behaviors in adolescents cause great suffering and can lead to considerable costs to the healthcare system. The aim of the study is to investigate the cost of an integrated individual and family therapy (Intensive Contextual Treatment: ICT) and to compare the adolescent's healthcare consumption 1 year before and 1 year after treatment.

#### Who can participate?

Adolescents (aged 13-19) with repetitive self-harm behavior within the past 3 months and their families

#### What does the study involve?

ICT is an intensive, short term (3-6 months) treatment. It is an outreach treatment conducted in the families residences and by two therapists. The frequency of the intervention is 2-3 meetings per week, the duration of the intervention is on average 4.5 months. The follow-up is 6 and 12 months after the intervention for the outcome measures, and healthcare consumption data is collected 1 year before, during and 1 year after treatment.

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

Participation in this follow-up study requires nothing more than written consent. Compilation of data is at a group level and therefore no individuals can be identified. Regarding benefits, the results of the present study can inform decision-makers in prioritizing. In times when resources in healthcare are scarce in relation to needs, it is important to be able to document healthcare utilization.

Where is the study run from? Uppsala academic hospital (Sweden)

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

Who is funding the study?
Uppsala academic hospital (Sweden)

Who is the main contact? Moa Bråthén Wijana moa.brathen.wiijana@ki.se

#### Contact information

#### Type(s)

Scientific

#### Contact name

Mrs Moa Bråthén Wijana

#### **ORCID ID**

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#### Contact details

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### Additional identifiers

#### EudraCT/CTIS number

Nil known

**IRAS** number

#### ClinicalTrials.gov number

Nil known

#### Secondary identifying numbers

Dnr: 2018/1902-32

## Study information

#### Scientific Title

Impact of an integrated individual and family therapy model for self-harming adolescents on overall healthcare consumption. A pilot study of a Swedish sample

#### Acronym

ICT - healthcare consumption

#### **Study objectives**

The primary hypothesis is that the patients would reduce their need for specialized healthcare consumption when comparing a 1-year period before and an equal period after treatment. The secondary hypothesis was that there would be a relationship between treatment effects and the changes in healthcare consumption.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Approved 03/10/2018, Regional Ethical Review Board in Stockholm (Regionala etikprövingsnämnden, Karolinska Institutet, Tomtebodavägen 18 A, 171 65 Solna, Sweden; +46 (0)852480000; no email provided), ref: Dnr: 2011/1593-31/5, Dnr: 2018/1902-32

#### Study design

Interventional study, within-group design with repeated measures

#### Primary study design

Interventional

#### Secondary study design

Non randomised study

#### Study setting(s)

Hospital

#### Study type(s)

Treatment

#### Participant information sheet

Not available in web format, please use contact details to request a participant information sheet

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

Self-harm and suicidal behaviors in adolescents

#### **Interventions**

ICT (integrated individual and family therapy model for self-harming adolescents) is an intensive, short term (3-6 months) treatment. It includes components from dialectical behavior therapy and functional family therapy. It is an outreach treatment conducted in the families residences and by two therapists. ICT has a contextual focus and close collaboration with schools is desirable. The frequency of the intervention is 2-3 meetings per week, the duration of the intervention is on average 4.5 months. The follow-up is 6 and 12 months post-intervention for the outcome measures, and for healthcare consumption, data is collected retrospectively 1 year before, during and 1 year after treatment.

#### Intervention Type

Behavioural

#### Primary outcome measure

1. Self-harm measured using self-assessment Deliberate Self-Harm Inventory (DSHI-9r) at preand post-treatment and 6 and 12 months follow-up

2. Healthcare consumption measured using medical records 1 year before, during and 1 year after treatment

#### Secondary outcome measures

General mental health symptoms measured using youth self-report (YSR) at pre- and post-treatment and 6 and 12 months follow-up

#### Overall study start date

01/10/2017

#### Completion date

25/11/2019

# Eligibility

#### Key inclusion criteria

- 1. Aged 13-19
- 2. Repetitive self-harm behavior within the past 3 months, defined as both deliberate self-poisoning and self-injury, or suicidal thoughts, threats or plans
- 3. Live together with at least one primary caregiver

#### Participant type(s)

**Patient** 

#### Age group

Child

#### Lower age limit

13 Years

#### Upper age limit

19 Years

#### Sex

Both

#### Target number of participants

50

#### Total final enrolment

25

#### Key exclusion criteria

- 1. Reported psychiatric disorder (e.g., schizophrenia) requiring intensive in-patient stabilization (as assessed at baseline with a semi-structured diagnostic interview)
- 2. Insufficient comprehension of Swedish language
- 3. Severe substance abuse
- 4. Developmental disabilities

#### Date of first enrolment

# Date of final enrolment 25/11/2019

#### Locations

#### Countries of recruitment

Sweden

Study participating centre
IKB-teamet, BUP, akademiska sjukhuset
Dag Hammarskjöldsväg 13
Uppsala
Sweden
75237

# Sponsor information

#### Organisation

Karolinska Institute

#### Sponsor details

K8 Klinisk neurovetenskap Nobelsväg 7 Stockholm Sweden 17177 +46 (0)706112920 moa.brathen.wiijana@ki.se

#### Sponsor type

University/education

#### Website

http://ki.se/en/startpage

#### **ROR**

https://ror.org/056d84691

# Funder(s)

#### Funder type

#### Charity

#### **Funder Name**

Stiftelsen Sven Jerrings Fond

#### Alternative Name(s)

Jerringfonden

#### **Funding Body Type**

Private sector organisation

#### **Funding Body Subtype**

Trusts, charities, foundations (both public and private)

#### Location

Sweden

#### **Results and Publications**

#### Publication and dissemination plan

The manuscript is ready to be submitted at the time of registration.

#### Intention to publish date

01/08/2020

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

The datasets generated during and/or analysed during the current study are/will be available upon request from Moa Bråthén Wijana (moa.brathen.wiijana@ki.se). The data is raw data and scale scores in SPSS files or Excel files. There is no time limit for data access and it is available from now on. Data is primarily available for persons who may be involved in a review of the manuscript. The data files are all anonymized so there should be no problems with confidentiality. The consent from participants applies to analyzes at group level, i.e. descriptive statistics and group comparisons.

#### IPD sharing plan summary

Available on request

#### **Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article		26/07/2021	27/10/2022	Yes	No