

# Cognitive behavioural therapy (CBT) for dysphonia: a trial platform

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| <b>Submission date</b><br>19/05/2010   | <b>Recruitment status</b><br>No longer recruiting | <input type="checkbox"/> Prospectively registered<br><input type="checkbox"/> Protocol            |
| <b>Registration date</b><br>19/05/2010 | <b>Overall study status</b><br>Completed          | <input type="checkbox"/> Statistical analysis plan<br><input checked="" type="checkbox"/> Results |
| <b>Last Edited</b><br>12/02/2018       | <b>Condition category</b><br>Ear, Nose and Throat | <input type="checkbox"/> Individual participant data  |

**Plain English summary of protocol**  
Not provided at time of registration

## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

**EudraCT/CTIS number**

**IRAS number**

**ClinicalTrials.gov number**

**Secondary identifying numbers**  
4588; G0501875

# Study information

## Scientific Title

Training a speech and language therapist in cognitive behavioural therapy to treat functional dysphonia: a randomised controlled trial

## Acronym

CBT for dysphonia

## Study objectives

The principle purpose of this trial is to see if giving a speech and language therapist a brief training in cognitive behavioural therapy (CBT), and then having that therapist deliver CBT "enhanced" voice therapy, can improve the quality of life of people suffering from medically unexplained hoarseness and voice loss. This voice problem, known as "functional dysphonia", is associated with increased anxiety and depression, and with poor general health. Voice therapy alone improves voice, but seems to have no impact on this associated distress. Our hypothesis therefore is that the addition of CBT skills to conventional voice therapy will improve anxiety and depression in this patient group more than voice therapy alone.

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

Newcastle and North Tyneside REC, 27/07/2007, ref: 07/H0906/118

## Study design

Single-centre randomised interventional treatment trial

## Primary study design

Interventional

## Secondary study design

Randomised controlled trial

## Study setting(s)

Hospital

## Study type(s)

Treatment

## Participant information sheet

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

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

Topic: Ear; Subtopic: Ear (all Subtopics); Disease: Ear, nose & throat

## Interventions

Voice Therapy:

This "treatment as usual" will aim to be as close to standard voice therapy practice as possible.

Patients will be offered 6 - 8 sessions, weekly to fortnightly, of approximately one hour's voice therapy. This represents an average length of a voice therapy course in the UK. The content will typically have the following elements:

1. Voice care and education on use
2. Elimination of voice misuse and abuse
3. Breath control, breathing and speaking coordination

#### **Voice Therapy plus CBT:**

The approximate number and timing of sessions will be the same as in the voice therapy alone arm. The treatment will be couched within an overarching CBT framework, the key component of this being that an explanatory model of the patient's condition will be collaboratively established, and the key factors maintaining both vocal problems and distress will be identified. This model will then be used to structure the treatment.

Length of treatment will be six to eight sessions, fortnightly and patients will be followed up to six months post-discharge from treatment.

#### **Intervention Type**

Other

#### **Phase**

Not Applicable

#### **Primary outcome measure**

Psychological distress, measured using the Hospital Anxiety and Depression Scale (HADS). Outcomes will be taken at baseline, discharge and six months post-discharge

#### **Secondary outcome measures**

1. Psychological distress, measured using the General Health Questionnaire
2. The Chalder Fatigue Scale
3. The Work and Social Adjustment Scale
4. Voice, measured using the Voice Performance Questionnaire (VPQ)

Outcomes will be taken at baseline, discharge and six months post-discharge.

#### **Overall study start date**

29/10/2007

#### **Completion date**

30/09/2009

## **Eligibility**

#### **Key inclusion criteria**

1. Patients of either sex who are over 16 years
2. Diagnosed by an expert speech and language therapist as having functional dysphonia
3. Clinical assessment involving larygoscope to exclude other causes

#### **Participant type(s)**

Patient

**Age group**

Adult

**Sex**

Both

**Target number of participants**

Planned sample size: 62

**Key exclusion criteria**

1. Previous experience of cognitive behavioural therapy (CBT) for voice problem
2. Acute or ongoing serious medical illness
3. Suffer from a severe mental health problem (for example major depression, psychotic illnesses, or alcohol dependence)
4. Learning disability
5. Vocal condition that does not merit a full course of treatment
6. Score of less than 1 on a standardised measure of voice quality (the Grade, Roughness, Breathiness, Aesthenia, Strain [GRBAS] Scale)
7. Do not speak English

**Date of first enrolment**

29/10/2007

**Date of final enrolment**

30/09/2009

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

England

United Kingdom

**Study participating centre**

**Institute of Health and Society**

Newcastle Upon Tyne

United Kingdom

NE2 4AA

**Sponsor information****Organisation**

Newcastle upon Tyne Hospitals NHS Trust (UK)

**Sponsor details**

Queen Victoria Road  
Newcastle Upon Tyne  
England  
United Kingdom  
NE1 4LP

**Sponsor type**

Hospital/treatment centre

**Website**

<http://www.newcastle-hospitals.org.uk/>

**ROR**

<https://ror.org/05p40t847>

## **Funder(s)**

**Funder type**

Research council

**Funder Name**

Medical Research Council (MRC) (UK) (ref: G0501875)

**Alternative Name(s)**

Medical Research Council (United Kingdom), UK Medical Research Council, MRC

**Funding Body Type**

Government organisation

**Funding Body Subtype**

National government

**Location**

United Kingdom

## **Results and Publications**

**Publication and dissemination plan**

Not provided at time of registration

**Intention to publish date****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 | 01/12/2018   |            | Yes            | No              |