

Standardised stress management mental health training: does it have a beneficial effect?

Submission date 06/09/2010	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
Registration date 28/10/2010	Overall study status Completed	<input type="checkbox"/> Protocol
Last Edited 04/10/2017	Condition category Mental and Behavioural Disorders	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

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Additional identifiers

Protocol serial number
N/A

Study information

Scientific Title
Open randomised controlled trial examining whether a standardised stress management mental health training package is an effective tertiary stress intervention in full time military personnel

Study objectives

The aim of this project is to examine whether a standardised stress management mental health training package (delivered over a 6-hour period to a group of up to 10 participants at a time) is an effective tertiary stress intervention in full time military personnel.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Ministry of Defence Research Ethics Committee, 30/06/2010, ref: 101/Gen/09

Study design

Single-centre open randomised controlled trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Adjustment disorders, mild depression

Interventions

1. Intervention arm:

The standardised Stress Management Mental Health Training package will be delivered over a 6 hour period to up to 10 participants at a time by two Community Mental Health Nurses (CMHNs) based at the Department of Community Mental Health at RAF Brize Norton. The CMHNs will receive standardised training in presenting the Mental Health Training package from a Consultant Psychiatrist. The effectiveness of the standardised training will be verified by documented feedback about the training from the CMHN's and by validation of the standardised intervention by 3 monthly assessment of the standardised intervention by the Consultant Psychiatrist. The content of the standardised Mental Health Training package will consist of a PowerPoint presentation using a standard set of presentation slides, followed by 'break out' sessions allowing smaller group discussion of specific stress related issues. The Mental Health Training package is then concluded with brief relaxation training to help participants manage their stress related symptoms. Concordance to any intervening prescription drugs, psychotropic over the counter (OTC) and psychological treatments will be measured at each study visit by means of a clinical interview with the participant and the results recorded in the Case Report Form (CRF). Those subjects without any changes to their intervening prescriptions or receiving any alternative psychological treatments will be put into the intent-to-treat analysis.

2. Control arm:

Those that do not get the intervention will be allocated to a waiting list to be seen by the clinician who recruited the participant 6 weeks and 3 months post recruitment. No active treatment will be given to waiting list participants during the trial but will be offered after the trial period has ended (visit 5). The usual waiting time for non study patients to be seen for Standardised Stress Management Mental Health Training is currently in excess of 3 months and it is not envisaged that those participants who do participate in the study who do not get the intervention will have their treatment delayed.

Follow up will be at 6 weeks (visit 3) and 3 months (visit 4) with a further psychiatric clinical interview and further outcome measures using the GHQ-28, Beck Depression Inventory (BDI-II), Beck Anxiety Inventory (BAI) and the Clinical Global Impression (CGI). The rater of the CGI will be blinded to the other rating scores as this will be carried out prior to the participant's completion of the other rating scales. Follow up clinical interviews will record the occurrence of stressful events in the interim.

Intervention Type

Other

Phase

Not Applicable

Primary outcome(s)

General Health Questionnaire-28 score recorded as a continuous variable.

All outcomes will be assessed at the start of the trial (visit 2), 6 weeks (visit 3) and 12 weeks (visit 4).

Key secondary outcome(s)

1. Beck Depression Inventory (BDI-II),
2. Beck Anxiety Inventory (BAI)
3. Clinical Global Impression (CGI)

All outcomes will be assessed at the start of the trial (visit 2), 6 weeks (visit 3) and 12 weeks (visit 4).

Completion date

30/09/2012

Eligibility

Key inclusion criteria

1. Aged ≥ 18 years, either sex (though mainly male due to military demographics)
2. Suffering from adjustment disorder or mild depression

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Key exclusion criteria

1. Flying phobia
2. Post-traumatic stress disorder (PTSD)
3. More severe depressive disorders
4. Psychosis
5. Alcohol disorders

Date of first enrolment

01/09/2010

Date of final enrolment

30/09/2012

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

29 Chavenage Lane

Tetbury

United Kingdom

GL8 8JT

Sponsor information

Organisation

Ministry of Defence (UK)

ROR

<https://ror.org/01bvxn29>

Funder(s)

Funder type

Other

Funder Name

Investigator initiated and funded (UK)

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not provided at time of registration