# Mediators and moderators of cognitive behavioral therapy for childhood anxiety disorders: information processing, emotion regulation and stress reactivity

Submission date	Recruitment status No longer recruiting	<ul><li>Prospectively registered</li></ul>		
26/09/2006		☐ Protocol		
Registration date 26/09/2006	Overall study status Completed Condition category	Statistical analysis plan		
		[X] Results		
Last Edited		Individual participant data		
06/01/2021	Mental and Behavioural Disorders			

# Plain English summary of protocol

Not provided at time of registration

# Contact information

# Type(s)

Scientific

#### Contact name

Dr F Boer

#### Contact details

Academic Medical Center (AMC)
Department of Child and Adolescent Psychiatry/de Bascule
PO Box 12474
Amsterdam
Netherlands
1100 AL
+31 (0)20 5663383
f.boer@amc.uva.nl

# Additional identifiers

**Protocol serial number** N/A

# Study information

#### Scientific Title

Mediators and moderators of cognitive behavioral therapy for childhood anxiety disorders: information processing, emotion regulation and stress reactivity

# **Study objectives**

- 1. Changes in outcome measures of anxiety can be partly explained by changes in:
- a. self-reported thoughts
- b. selective attention and by changes in fear relevant cognitive schema's
- 2. Changes in outcome measures of anxiety can be partly explained by changes in:
- a. self-reported emotion regulation strategies
- b. processes of attention regulation and by changes in underlying schema's of 'perceived control'
- 3. Effortful control will moderate the treatment effect
- 4. Executive functions will moderate the relation between mediators and the treatment effect.

The treatment effect will be larger when executive functions are more developed

- 5. Stress-reactivity will moderate the treatment effect
- 6. Stress-reactivity is a vulnerability factor for developing an anxiety disorder and is an effect of an anxiety disorder
- 7. Part of the variance in treatment effect can be explained by family characteristics (parents psychopathology and parenting style) and characteristics of the therapist

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Ethics approval received from the local medical ethics committee

#### Study design

Randomised controlled trial

### Primary study design

Interventional

### Study type(s)

Treatment

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

Anxiety disorders

#### **Interventions**

Group one: 12 sessions of Cognitive Behavioural Therapy (CBT) according to the Coping Cat manual.

Four measure points: before therapy, after eight sessions, after therapy and after 12 week follow-up period.

Group two: Eight week Waiting List (WL) group. Children will receive the same therapy as group one after the waiting period.

Five measure points: before waiting list, before therapy, after eight sessions of therapy, after therapy and after 12 week follow-up period

#### Intervention Type

Other

#### Phase

**Not Specified** 

#### Primary outcome(s)

- 1. Effect of treatment (diagnosis of anxiety disorder and scores on anxiety questionnaires)
- 2. Mediating effect of information processing
- 3. Mediating effect of emotion regulation
- 4. Moderating effect of effortful control, executive functions and stress-reactivity

# Key secondary outcome(s))

- 1. Correlation between explicit and implicit measures
- 2. Development of implicit measures

# Completion date

01/09/2008

# Eligibility

# Key inclusion criteria

- 1. Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) anxiety disorder as primary diagnosis
- 2. Age between seven and 18 years
- 3. Intelligence Quotient (IQ) more than or equal to 80
- 4. Informed consent from parents and child

# Participant type(s)

**Patient** 

# Healthy volunteers allowed

No

# Age group

Child

# Lower age limit

7 years

# Upper age limit

18 years

#### Sex

All

#### Total final enrolment

145

### Key exclusion criteria

- 1. Psychosis
- 2. Obsessive compulsive disorder as primary disorder

- 3. Post-traumatic stress disorder as primary disorder
- 4. Acute stress disorder
- 5. Drug and/or alcohol problems
- 6. Selective mutism
- 7. Current treatment with Selective Serotonin Reuptake Inhibitor (SSRI) or treatment with SSRI within half a year before inclusion
- 8. Psychotherapeutic treatment within the last half year

### Date of first enrolment

01/09/2006

### Date of final enrolment

01/09/2008

# Locations

#### Countries of recruitment

Netherlands

# Study participating centre Academic Medical Center (AMC)

Amsterdam Netherlands 1100 AL

# Sponsor information

# Organisation

Academic Medical Center

#### **ROR**

https://ror.org/03t4gr691

# Funder(s)

#### Funder type

University/education

#### Funder Name

Universiteit van Amsterdam

#### Alternative Name(s)

#### University of Amsterdam, UvA

### Funding Body Type

Government organisation

# **Funding Body Subtype**

Universities (academic only)

#### Location

Netherlands

#### **Funder Name**

Accare (The Netherlands)

#### Alternative Name(s)

### **Funding Body Type**

Private sector organisation

# **Funding Body Subtype**

Other non-profit organizations

#### Location

Netherlands

#### **Funder Name**

Academic Medical Center (AMC) (The Netherlands)

# Alternative Name(s)

Academic Medical Center, AMC

# **Funding Body Type**

Private sector organisation

#### **Funding Body Subtype**

Universities (academic only)

### Location

Netherlands

# **Results and Publications**

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?
Results article	results	01/04/2013	06/01/2021	Yes	No