

Effects and mechanisms of psychotherapy in the treatment of attention deficit hyperactivity disorder in adults: the first randomised multicentre study

Submission date	Recruitment status	<input type="checkbox"/> Prospectively registered
19/10/2006	No longer recruiting	<input checked="" type="checkbox"/> Protocol
Registration date	Overall study status	<input type="checkbox"/> Statistical analysis plan
30/04/2007	Completed	<input checked="" type="checkbox"/> Results
Last Edited	Condition category	<input type="checkbox"/> Individual participant data
23/11/2023	Mental and Behavioural Disorders	

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

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Contact details

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Additional identifiers

Clinical Trials Information System (CTIS)

2006-000222-31

Protocol serial number

Code: 070170

Study information

Scientific Title

Effects and mechanisms of psychotherapy in the treatment of attention deficit hyperactivity disorder in adults: the first randomised multicentre study

Study objectives

1. A disorder specific psychotherapy is more effective in reducing symptoms of adult Attention Deficit Hyperactivity Disorder (ADHD) than a control condition in terms of clinical management
2. The combination of a disorder specific psychotherapy and medication is superior to medication or psychotherapy alone

Ethics approval required

Old ethics approval format

Ethics approval(s)

Ethik-Kommission der Albert-Ludwigs-Universität Freiburg, 19/10/2006, ref: 217/06

Study design

Controlled randomised multicentre trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Attention Deficit Hyperactivity Disorder (ADHD)

Interventions

Experimental intervention:

1. Psychotherapy following a weekly structured group-program for 12 weeks (according to Hesslinger et. al.) and placebo and after that monthly group sessions and placebo
2. Psychotherapy (see point one) and medication (methylphenidate, according to the German guidelines for adult ADHD)

Control intervention:

3. Medication alone with clinical management weekly for the first 12 weeks and monthly thereafter
4. Placebo alone with clinical management weekly for the first 12 weeks and monthly thereafter

Intervention Type

Drug

Phase

Not Applicable

Drug/device/biological/vaccine name(s)

Methylphenidate

Primary outcome(s)

Conners Adult ADHD Rating Scale (CAARS-O, blind-observer rated).

Key secondary outcome(s)

1. Conners Adult ADHD Rating Scale (CAARS-S, patient rated)
2. Symptoms CheckList (SCL-90-R)
3. Depression
4. Clinical Global Impression (CGI)
5. Quality of Life

Completion date

31/10/2011

Eligibility

Key inclusion criteria

ADHD according to the Diagnostic and Statistical Manual of Mental Disorders - fourth edition (DSM-IV) criteria

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Sex

All

Total final enrolment

433

Key exclusion criteria

1. Mental handicap
2. Schizophrenia
3. Bipolar disorder
4. Suicidal behaviour
5. Substance abuse/dependence within six months prior to screening
6. Neurological diseases
7. Seizures

Date of first enrolment

01/11/2006

Date of final enrolment

31/10/2011

Locations

Countries of recruitment

Germany

Study participating centre

Hauptstrasse 5

Freiburg

Germany

D-79104

Sponsor information

Organisation

University of Freiburg Medical School (Germany)

ROR

<https://ror.org/0245cg223>

Funder(s)

Funder type

Government

Funder Name

Bundesministerium für Bildung und Forschung

Alternative Name(s)

Federal Ministry of Research, Technology and Space, Bundesministerium für Bildung und Forschung, Federal Ministry of Education and Research, BMBF

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

Germany

Results and Publications

Individual participant data (IPD) sharing plan

Not provided at time of registration

IPD sharing plan summary

Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<u>Results article</u>	results	01/12/2015		Yes	No
<u>Results article</u>	results	03/05/2019	04/09/2019	Yes	No
<u>Results article</u>	results	01/07/2019	04/09/2019	Yes	No
<u>Results article</u>		01/04/2022	03/05/2022	Yes	No
<u>Results article</u>		18/11/2023	23/11/2023	Yes	No
<u>Protocol article</u>	protocol	01/12/2010		Yes	No
<u>Other publications</u>	enrollment and characteristics of the study sample	01/03/2014		Yes	No
<u>Participant information sheet</u>	Participant information sheet	11/11/2025	11/11/2025	No	Yes