

Randomised comparison of bifrontal and unilateral ultrabrief pulse electroconvulsive therapy in major depression

Submission date

11/04/2008

Recruitment status

No longer recruiting

☐ Prospectively registered

☐ Protocol

Registration date

09/05/2008

Overall study status

Completed

☐ Statistical analysis plan

☒ Results

Last Edited

30/06/2009

Condition category

Mental and Behavioural Disorders

☐ Individual participant data

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s)

Scientific

Contact name

Dr Pascal Sienaert

Contact details

Leuvensesteenweg 517

Kortenberg

Belgium

3070

pascal.sienaert@uc-kortenberg.be

Additional identifiers

Protocol serial number

3M050570

Study information

Scientific Title**Acronym**

BFRUL

Study objectives

1. Ultrabrief bifrontal electroconvulsive therapy (ECT) is as effective as ultrabrief unilateral ECT
2. Ultrabrief bifrontal ECT produces less cognitive side-effects than ultrabrief unilateral ECT

Ethics approval required

Old ethics approval format

Ethics approval(s)

Ethics Committee of the Catholic University of Leuven. Date of approval: 11/09/2003 (ref: ML2393)

Study design

Randomised controlled trial.

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Depressive disorder/ bipolar disorder

Interventions

Ultrabrief bifrontal ECT vs ultrabrief unilateral ECT. Patients were treated twice weekly until remission and had a mean number of treatment sessions of 11.

Ultrabrief pulse ECT = pulse width of 0.3 msec.

Intervention Type

Other

Phase

Not Specified

Primary outcome(s)

The following were performed at baseline and once every week until response/remission, and 1 and 6 weeks after finishing the course, by a blinded rater:

1. Hamilton Depression Rating Scale (HDRS)
2. Beck Depression Inventory (BDI)
3. Clinical Global Impression (CGI)
4. Patient Global Impression (PGI)

Key secondary outcome(s))

The following were assessed at baseline and 1 and 6 weeks after finishing the course:

1. Mini Mental State Examination (MMSE)
2. Trail Making Test A&B
3. Continuous Performance Task (CPT)
4. Wisconsin Card Sorting Test (WCST)

5. Rey's Auditory Verbal Learning Test (RAVLT)
6. Letter Number Sequencing (WAIS)
7. Autobiographical Memory Test (AMT)
8. Autobiographical Memory Interview (AMI)
9. Squire Subjective Memory Questionnaire (SSMQ)

Completion date

01/10/2007

Eligibility

Key inclusion criteria

1. Aged 18 years or older
2. Patients with Diagnostic and Statistical Manual of mental disorders fourth edition (DSM-IV)-defined major depressive disorder, either bipolar or unipolar, with or without psychotic symptoms
3. Those who were referred for ECT
4. Those who had a minimum baseline score of 18 on the 17-item Hamilton Rating Scale for Depression (HRSD)
5. Written informed consent

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Key exclusion criteria

1. Schizophrenia
2. Neurological illness
3. Cognitive disorder
4. Substance abuse or dependence within the previous year
5. ECT within the past 6 months

Date of first enrolment

01/10/2003

Date of final enrolment

01/10/2007

Locations

Countries of recruitment

Belgium

Study participating centre

Leuvensesteenweg 517

Kortenberg

Belgium

3070

Sponsor information

Organisation

Catholic University Leuven (Belgium)

ROR

<https://ror.org/05f950310>

Funder(s)

Funder type

University/education

Funder Name

Catholic University Leuven, University Psychiatric Centre (Belgium)

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	01/07/2009		Yes	No
Results article	patient satisfaction results	01/03/2010		Yes	No
Study website	Study website	11/11/2025	11/11/2025	No	Yes

