

Hygienic-dietary treatment of Depression in Primary Care

Submission date 25/06/2012	Recruitment status No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
Registration date 18/07/2012	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 18/01/2019	Condition category Mental and Behavioural Disorders	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

Depression is a common and disabling mental disorder. The number of people with depression is increasing in the developed world, which has been linked to lifestyle. The most common treatments fail to solve all cases, and there is a significant percentage of depressed patients who respond poorly to these treatments. Hygienic and dietary measures have proven effective when used in conjunction with standard treatments. However, this combination has not yet been proven to be effective in routine clinical practice conditions. We are carrying out a study of 300 major depression patients to test the effect of antidepressants combined with structured hygienic and dietary recommendations in primary care.

Who can participate?

Adult patients who have depression, can understand spoken and written Spanish and are able to give written informed consent to take part in the study.

What does the study involve?

The patient will be assigned randomly one of two groups:

- a) hygienic-dietary recommendations
- b) unspecific hygienic-dietary recommendations (control group)

Depression, quality of life and consumption of health and social services scales will be administered.

What are the possible benefits and risks of participating?

There is no guarantee that patients participating in this study have a benefit. We hope that one of the two groups have better outcomes in terms of depressive symptoms than the other, but there are no expected side effects or safety issues.

Where is the study run from?

From three research centers of three Spanish cities:

Universitat Illes Balears in Palma de Mallorca

Grupo Aragonés de Investigación en Salud Mental in Zaragoza

Parc Sanitari Sant Joan de Deu in Barcelona

When is study starting and how long is it expected to run for?
Recruitment will begin in September 2012 and data collection is expected to end in December 2013

Who is funding the study?
Instituto de Salud Carlos III (Spanish Government)

Who is the main contact?
Professor Mauro Garcia-Toro
mauro.garcia@uib.es

Contact information

Type(s)
Scientific

Contact name
Prof Mauro Garcia-Toro

Contact details
Edificio IUNICS
C/ Ctra de Valldemossa Km 7,5
Palma de Mallorca
Spain
07122
-
mauro.garcia@uib.es

Additional identifiers

Protocol serial number
PI11/01392

Study information

Scientific Title
Hygienic-dietary treatment of Depression in Primary Care: a randomised study

Acronym
HDPC

Study objectives
Depressed patients who follow hygienic-dietary recommendations will experience an improvement in their clinical course compared with a control group

Ethics approval required
Old ethics approval format

Ethics approval(s)

Research and clinical trials ethics committee of the Balearic Islands (CEIC), December 2011, ref: 1563-11 IB-PI

Study design

Multicenter two-arm randomised study

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Major Depression

Interventions

Patients assigned to the active treatment group received an envelope containing a sheet of paper with the four hygienic-dietary recommendations under consideration.

1. Go to bed when sleepy and not before 11 pm. Use your bed and bedroom only for sleep and sex (do not read, watch TV or lie on the bed during the day). If you do not fall asleep after 15 or 20 minutes get up and start an activity until you feel sleepy enough to go back to bed. Get up early, never later than 9 a.m., no matter how well you have slept the night before. Do not lie down or take a nap during the day.
2. Walk at least 1 hour a day, at a good pace but without becoming short of breath or being unable to talk while walking. If you think you have a medical problem which makes walking difficult or uncomfortable consult your doctor. Use appropriate footwear for walking and have a shower or a bath afterwards.
3. Be exposed to environmental light at least 2 hours per day, taking precautions to avoid sunburn or sunstroke (sunscreen, hat, etc.).
4. Try to eat a healthy and balanced diet. Eat at regular hours without snacking between meals. Avoid especially sweet or sugary drinks. Eat fish at least three times per week, plus fruit, cereals, nuts and vegetables daily.

The control group received an identical envelope, but in this case with unspecified recommendations:

1. Sleep the hours that you feel your body needs.
2. Adapt the pace of daily physical activity to meet your needs best.
3. If exposed to environmental light take precautions to avoid sunburn or sunstroke (sunscreen, hat, etc.).
4. Try to eat a healthy and balanced diet.

Intervention Type

Other

Phase

Not Applicable

Primary outcome(s)

Total score on self-administered 21-items Beck Inventory Depression Scale (BDI) before and after intervention.

Key secondary outcome(s)

1. State-Trait Anxiety Inventory (STAI) Scale
2. Client Service Receipt Inventory
3. EQ-5D Scale

All outcomes were measured in the screening visit and in the 6 and 12 follow up visits

Completion date

20/12/2013

Eligibility**Key inclusion criteria**

1. Male and female patients over 18 years
2. Patients experiencing a Major Depression episode according to DSM-IV-TR diagnostic criteria and with a Beck Depression Questionnaire total score equal or over 10
3. Patient who has the ability to communicate and give informed consent in writing

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Key exclusion criteria

1. Patients suffering from another disease that affects CNS or who has suffered any serious head injury, dementia, etc
2. Other psychiatric diagnosis or severe psychiatric illness (substance dependence or abuse, schizophrenia or other psychotic disorders, eating disorders, etc.), with the exception of anxious pathology or personality disorders
3. The existence of severe, uncontrolled, medical condition, or potentially interfering with affective symptomatology
4. Presence of delusions or hallucinations at the time of the study
5. Important risk of suicide

Date of first enrolment

03/09/2012

Date of final enrolment

20/12/2013

Locations

Countries of recruitment

Spain

Study participating centre

Edificio IUNICS

Palma de Mallorca

Spain

07122

Sponsor information

Organisation

Carlos III Health Institute (Instituto de Salud Carlos III) (Spain)

ROR

<https://ror.org/00ca2c886>

Funder(s)

Funder type

Hospital/treatment centre

Funder Name

Carlos III Health Institute (Spain) ref: PI11/01392

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	01/09/2015	18/01/2019	Yes	No
Protocol article	protocol	16/11/2012		Yes	No

Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes
---	-------------------------------	------------	------------	----	-----