Randomised trial of fluoxetine and cognitivebehavioural therapy (CBT) versus fluoxetine alone in adolescents with persistent major depression (MD).

Submission date	Recruitment status No longer recruiting	Prospectively registered		
25/04/2003		☐ Protocol		
Registration date 25/04/2003	Overall study status Completed	Statistical analysis plan		
		[X] Results		
Last Edited 01/07/2013	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

Prof Ian Goodyer

Contact details

Department of Child and Adolescent Psychiatry University of Cambridge Douglas House 18b Trumpington Road Cambridge United Kingdom CB2 2AH +44 (0)122 333 6098/99 ig104@cam.ac.uk

Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers HTA 97/29/01

Study information

Scientific Title

Study objectives

The main objective is to test the principal hypothesis that the additional costs of Cognitive Behavioural Therapy (CBT) will be offset by improvements in patient outcomes and quality of life, and/or savings in the use of other health services, compared with fluoxetine alone. Other objectives are to determine whether the treatments differ (a) at follow-up, (b) in respect of other outcomes such as comorbid mental health problems and child/parent satisfaction, (c) within subgroups defined by severity.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Study design

Randomised controlled trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

Health condition(s) or problem(s) studied

Mental and behavioural disorders: Depression, anxiety, neuroses

Interventions

Please note that, as of 17 January 2008, the end date of this trial was updated from 31 October 2003 to 31 May 2005.

Interventions:

Because 1/4 cases of early onset depression remit rapidly, all cases will complete a brief initial

educational/supportive intervention, and only those who still have major depression (MD) after 2 weeks will be randomised to CBT and fluoxetine or fluoxetine (stratified by severity). The design and execution of the trial, including telephone randomisation, will be supervised by the Health Care Trials Unit in Manchester (MCR) and the results will be reported in line with the CONSORT guidance.

Intervention Type

Drug

Phase

Not Specified

Drug/device/biological/vaccine name(s)

Fluoxetine

Primary outcome measure

Cost and outcome measurement: Costs of the treatments to NHS and non-NHS services will be assessed with measures developed collaboratively by the Department of Health Economics in York and by Harrington's team in MCR in two clinical trials, one of which involved adolescents who had deliberately poisoned themselves (of whom >60% had MD). Clinical effectiveness and consumer views will be assessed using a range of standardised measures at 6 weeks, at 12 weeks, and at 6 months follow-up. The primary outcome will be a clinical measure of global functioning, the Health of the Nation Outcome Scale for Children and Adolescents (HoNOSCA).

Secondary outcome measures

Other measures will include remission from depression, comorbid problems and adverse effects. Vigorous efforts will be made to ensure that outcomes are assessed without knowledge of treatment group.

Overall study start date

01/09/2000

Completion date

31/05/2005

Eligibility

Key inclusion criteria

Adolescents aged 11 through 17 years with mental disorders

Participant type(s)

Patient

Age group

Child

Lower age limit

11 Years

Upper age limit

Sex

Both

Target number of participants

200

Key exclusion criteria

Not provided at time of registration

Date of first enrolment

01/09/2000

Date of final enrolment

31/05/2005

Locations

Countries of recruitment

England

United Kingdom

Study participating centre Department of Child and Adolescent Psychiatry

Cambridge United Kingdom CB2 2AH

Sponsor information

Organisation

Department of Health (UK)

Sponsor details

Quarry House Quarry Hill Leeds United Kingdom LS2 7UE +44 (0)1132 545 843 Sheila.Greener@doh.gsi.gov.uk

Sponsor type

Government

Website

http://www.dh.gov.uk/en/index.htm

ROR

https://ror.org/03sbpja79

Funder(s)

Funder type

Government

Funder Name

NIHR Health Technology Assessment Programme - HTA (UK)

Results and Publications

Publication and dissemination plan

Not provided at time of registration

Intention to publish date

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	21/07/2007		Yes	No
Results article	results	29/01/2008		Yes	No
Results article	results	01/05/2008		Yes	No
Results article	results	01/01/2013		Yes	No